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CONTRA COSTA
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COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N

CASE NUMBER: 210204 - 01

Received Date: 02/04/21 Received Time: 11:15 AM Received By: HW Lead: AA

Incident Date: 02/04/21 Incident Time: Assigned to: Assigned Date:

COMPLAINANT / REPORTING PARTY:

Name: DENNIS RP is from Facility Anonymous
 Organization: EAST BAY REGIONAL PARKS Cal OES # (if applicable)
 Primary Phone Number: 510-332-0459 Secondary Phone Number:
 Email:
 Address:
 City: State: Zip Code:

FACILITY / LOCATION OF INCIDENT:

Name: CUPA Facility I.D.:
 Phone Number:
 Address: 908 PINEHURST RD Unit:
 City: MORAGA State: CA Zip Code: 94556
 Location Description: MILE MARKER 3.8, Lower Pinehurst Trailhead

INITIAL INCIDENT DESCRIPTION:

ABANDONED: 4 FIVE GALLON CONTAINERS WITH AN UNKNOWN LIQUID AND 12 ONE GALLON CONTAINERS WITH SUSPECTED USED OIL. ALL CONTAINERS ARE CLOSED, AND NONE ARE LEAKING. RP HAS CAUTIONED OFF THE AREA.

INCIDENT TYPE / DESCRIPTION:

Community Warning System Level (Circle Highest Level): N/A 0 1 2 3

FACILITY	ISO / MCAR	TRANSPORTATION	MISCELLANEOUS
<input type="checkbox"/> Fire or Explosion	<input type="checkbox"/> Fatality (one or more)	<input type="checkbox"/> Tank Truck	<input type="checkbox"/> Storm Drain/Creek
<input type="checkbox"/> Spill or Release	<input type="checkbox"/> > 24 hrs. Hospital, 3 or more people	<input type="checkbox"/> Railroad	<input type="checkbox"/> Drug Lab
<input type="checkbox"/> Startup or Shutdown	<input type="checkbox"/> Flammable Vapor Cloud > 5,000 lbs.	<input type="checkbox"/> On Water	<input checked="" type="checkbox"/> Disposal/Abandonment
<input type="checkbox"/> Flaring		<input type="checkbox"/> Pipeline	<input type="checkbox"/> Odor Complaint
<input type="checkbox"/> Upset		<input type="checkbox"/> Fuel Tank	<input type="checkbox"/> Other:

Time Enroute to Scene: 14:45 Time Arrived On Scene: 15:20 Time Departed From Scene: 16:40

REFERRED TO OTHER AGENCY:



DTSC STATE FUNDING (if applicable): CLU/ERER Number:	STORMWATER STATUS (if applicable): <input type="checkbox"/> Actual Discharge <input checked="" type="checkbox"/> Potential Discharge
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AGENCIES ON SCENE OR NOTIFIED:

<u>Agency Type</u>	<u>Agency</u>	<u>O/N</u>	<u>Contact Person</u>	<u>Phone Number</u>	<u>Case Number</u>
Fire Department					
Law Enforcement					
Air District					
State OES					

REPORT:

2/4
 2:09 Spoke w/ Dennis regarding the location of the dumping
 On Scene:
 Abandonment has 4-5gal containers, 4-5qt containers, and 3-1 gal containers of used oil. There is 1 empty container that appears to have some used oil in it, and 4 -5qt containers of water. Oil had chlordtect run, and water was pH (ph~6), oxidizer test (negative), and had the hazmat ID run to confirm its status as water. The ahura was also attempted but suffered from high florescence.

In office 2/5:
 All used oil was bulked and remaining oily debris was drummed and labeled.

Additional Required Items: Bill of Lading, Request for Invoice, and Site Safety Plan

Report Prepared by: AA