**HAZMAT RESPONSE INCIDENT REPORT**



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| ***Use this report for all Non-Accident Releases (NAR’s) and Accident Caused Releases. Conduct a job specific safety briefing, know your protection and know your product.******Return to HazMat Manager that initiated you within 3 days.***  |  |  |
| **\*Car Number:****(ex: UTLX 1234)** |  |

\*Required

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| **EVENT INFORMATION:** |
| **Date** **Notified:** |       | **Time Notified:****(Use 24 Hr. Time)** |      |  **CT**[ ]  | **MT**[ ]  | **PT**[ ]  | **Arrival****Date:** |       | **Time of Arrival****(Use 24 Hr. Time)** |      | **CT**[ ]  | **MT**[ ]  | **PT**[ ]  |
| **Address of** **Incident:** |       | **City:** |       | **ST:** |    | **Zip:** |       |
| **County:** |       | **Train Yard/Hub****Address:** |       | **Track/****Lot No:** |       |
| **Mainline****City:** |       | **Mainline****County:** |       | **Milepost/****GPS:** |       | **Name of person First Contacted on Scene:** |       |
| **\*Latitude:****(8 digits)** |       | **\*Longitude:****(8 digits)** |       | **Hazardous Class/Division:** |  | **UN No.**  |       |
| **Proper Shipping Name****of Product:** |       |
| **GENERAL INFORMATION:** |
| **Built Date:****Month/Year** |       | **Identification Markings:****(ex: DOT111A100W1, 1M 101)** |       | **PRD Rating:** |       | **PRD****Type:** |       |
| **Last Inspection****Date:** |       | **Next Inspection****Date:** |       | **AAR Cause Code:** |       |  |
|  | **Seal Numbers:** *If more seals need to be noted, please indicate in initial findings* |
| **Transportation Phase:** | **Found Location:** | **Found Seal No.:** |  | **Replaced Location:** | **Replaced Seal No.:** |
| [ ] In Transit |  |  |  |  |  |
| [ ] Loading |  |  |  |  |  |
| [ ] Unloading |  |  |  |  |  |
| [ ] In Transit Storage |  |  |  |  |  |
| **INITIAL FINDINGS:** |
|       |
|  | **Estimated Product Lost:** |       | [ ] Gal. [ ]  Lbs. |
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| **CAR ORIENTATION:** |
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| **ROOT CAUSE/OTHER OBSERVATIONS:** |
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| **ACTIONS TAKEN** |
|       |
| **DISPOSITION OF CAR:** *(if known) (example: repaired and continuing in transit)* |
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| **COST ESTIMATE:** *(This is an estimate only)* |
| **Estimated Response Cost:** | **$**  | **Estimated Remediation Cost:** | **$**  |

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| ***Show location of Leak(s) and/or damage on diagrams below:*** |  |
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| **PHOTOS *(must be taken of the following items)*** |
| [ ] Equip. [ ]  Profile All Sides [ ] Qualification Stencil [ ]  Build Date [ ]  What is Leaking [ ]  Seals (Shipper & Replacement) [ ] Completed Repairs |
| **Equipment Profile All Sides - Required** |

Side 1 Side 2

 

Description/Notes:

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Side 3 Side 4

 

Description/Notes:

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| **QUALIFICATION STENCIL/BUILD DATE - REQUIRED** |

Qualification Stencil Build Date

 

Description/Notes:

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| **WHAT IS LEAKING – REQUIRED***(Photographs to show exactly what is leaking and where it is leaking from)* |

Photo 1 Photo 2

 

Description/Notes:

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What is leaking continued.

Photo 3 Photo 4

 

Description/Notes:

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Photo 5 Photo 6

 

Description/Notes:

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| **SEALS - REQUIRED** |

 Seal Found on Car Replacement Seal

 

Description/Notes:

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Seals continued:

Seal Found on Car Replacement Seal

 

Description/Notes:

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Seal Found on Car Replacement Seal

 

Description/Notes:

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Seal Found on Car Replacement Seal

 

Description/Notes:

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| **COMPLETED REPAIRS – REQUIRED** (*Photographs showing what was repaired, PPE in use, equipment on site, etc.)* |

Photo 1 Photo 2

 

Description/Notes:

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Completed repairs continued:

Photo 3 Photo 4

 

Description/Notes:

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Photo 5 Photo 6

 

Description/Notes:

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Photo 7 Photo 8

 

Description/Notes:

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| **ADDITIONAL PHOTOS** |

Photo 1 Photo 2

 

Description/Notes:

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| **Response****Contractor:** |       | **Name of Individual Responding:** |       |
| **Contact No:** |       | **Date Complete:** |       | **Time Complete:****(Use 24 Hr. Time)** |       | **CT**[ ]  | **MT**[ ]  | **PT**[ ]  |