

:: NATIONAL RESPONSE CENTER ::

:: CONTINUOUS RELEASE REPORT (PDF) ::

The PDF Report should not be submitted to the NRC via fax or mail. They were created for use in Training and/or Response Plans, or as a guide when contacting the NRC.

Please file reports via our toll-free number (800-424-8802) or by submitting an [ONLINE REPORT](#).

Fields displayed in **RED** are mandatory entries. Please fill out the form as completely as possible.

Is this a DRILL Report ? YES NO	E-Mail Address:
REPORTING PARTY	SUSPECTED RESPONSIBLE PARTY
Phone 1: Type:	Last Name:
Last Name:	First Name:
First Name:	Phone 1: Type:
Phone 2: Type:	Phone 2: Type:
Phone 3: Type:	Phone 3: Type:
Company:	Company:
Org Type:	Org Type:
Address:	Address:
City:	City:
State:	State:
ZIP:	ZIP:
Are you calling on behalf of responsible party:	Yes No
Are you or your company responsible for Material released:	Yes No

INCIDENT DESCRIPTION

Description of Incident:

Incident Date:

Time:

Occurred/Discovered/Planned:

Type of Incident: *CONTINUOUS RELEASE*

Incident Cause:

INCIDENT LOCATION

Location Description:

Address Location:

State:

County:

ZIP:

Nearest City:

Distance from Nearest City:

Units:

Direction:

Range:

Section:

Township:

Latitude: Degrees:

Minutes:

Seconds:

Quadrant:

Longitude: Degrees:

Minutes:

Seconds:

Quadrant:

CONTINUOUS RELEASE DETAILS

Release Type:

Initial Number:

Permit Number:

Begin Date:

End Date:

Change Date:

FIXED INCIDENT LOCATION DETAILS

Facility Name/ ID:

FIXED INCIDENT DESCRIPTION DETAILS

Fixed Object / Facility Type:

Power Generating Facility: Yes No Unknown

Compliance with NPDES Permits: Yes No Unknown

CONTINUOUS RELEASE MATERIALS

CHRIS Code: (Use UNK if not known)

CAS Number:

Name of Material:

Upper Bounds:

Upper Bounds Unit:

Upper Bounds Rate:

CHRIS Code: (Use UNK if not known)

CAS Number:

Name of Material:

Upper Bounds:

Upper Bounds Unit:

Upper Bounds Rate:

CHRIS Code: (Use UNK if not known)

CAS Number:

Name of Material:

Upper Bounds:

Upper Bounds Unit:

Upper Bounds Rate:

CHRIS Code: (Use UNK if not known)

CAS Number:

Name of Material:

Upper Bounds:

Upper Bounds Unit:

Upper Bounds Rate:

CHRIS Code: (Use UNK if not known)

CAS Number:

Name of Material:

Upper Bounds:

Upper Bounds Unit:

Upper Bounds Rate:

IMPACT INFORMATION

Medium Affected:

Detailed Medium Information:

Fire:	Yes	No	Unknown	Fire Extinguished:	Yes	No	Unknown
Injuries:	Yes	No	Unknown	Number of Injuries:			
				Number to Hospital:			
				Rail Employee Injuries:			
				Rail Passenger Injuries:			
Fatalities:	Yes	No	Unknown	Number of Fatalities:			
				Employee Fatalities:			
				Passenger Fatalities:			
				Vehicle Fatalities:			
Evacuations:	Yes	No	Unknown	Number Evacuated:			
				Radius/Area in Miles:			
				Who was Evacuated:			
Damages:	Yes	No	Unknown	Damage in Dollars:			
Road Closed:	Yes	No	Unknown	Road:			
				Major Artery:	Yes	No	
				Hours Closed:			
				Direction of Closure:			
Track Closed:	Yes	No	Unknown	Track:			
Passengers Transferred:	Yes	No	Unknown	Hours Closed:			
				Direction of Closure:			
Air Corridor Closed:	Yes	No	Unknown	Air Corridor:			
				Hours Closed:			

Waterway Closed:	Yes No Unknown	Waterway:
		Hours Closed:
Environmental Impact:	Yes No Unknown	Type of Impact:
		Media Interest:

WEATHER INFORMATION

Weather Conditions:	Air Temperature:
Wind Speed: Unit:	Wind Direction:

REMEDIAL ACTION INFORMATION

Remedial Action Taken:
Release Secured: Yes No Unknown Release Duration: Unit:
Rate of Release: Unit: Per:

ADDITIONAL AGENCY INFORMATION

Federal Agency Notified:	
State/Local Agency Notified:	
State/Local Agency On-Scene:	
State Agency's Report Number:	

ADDITIONAL INFORMATION

Additional Information: