

**:: NATIONAL RESPONSE CENTER ::**  
**:: FIXED 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.

REPORTING PARTY		SUSPECTED RESPONSIBLE PARTY	
Fields displayed in <b>RED</b> are mandatory entries. Please fill out the form as completely as possible.			
Is this a DRILL Report ?	YES NO	E-Mail Address:	
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: *FIXED*

Incident Cause:

Package: Yes No

### 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:

### FIXED INCIDENT LOCATION DETAILS

Facility Name/ ID:

### FIXED INCIDENT DESCRIPTION DETAILS

Fixed Object / Facility Type:

Compliance with NPDES Permits: Yes No Unknown

Power Generating Facility: Yes No Unknown Type of Fuel:

Generating Capacity:

## MATERIAL INVOLVED

### MATERIAL #1

**Material:** CHRIS Code: CAS Code:

**Amount Released:** **Units:** Amount in Water: Units:

### MATERIAL #2

**Material:** CHRIS Code: CAS Code:

**Amount Released:** **Units:** Amount in Water: Units:

### MATERIAL #3

**Material:** CHRIS Code: CAS Code:

**Amount Released:** **Units:** Amount in Water: Units:

### MATERIAL #4

**Material:** CHRIS Code: CAS Code:

**Amount Released:** **Units:** Amount in Water: Units:

### MATERIAL #5

**Material:** CHRIS Code: CAS Code:

**Amount Released:** **Units:** Amount in Water: Units:

## MATERIAL IN WATER INFORMATION

**Body of Water Affected:** Offshore: Yes No River Mile Marker:

**Tributary of:** Water Supply Contaminated: Yes No Unknown

**Water Temperature:** Units:

**Wave Condition:** Speed: Units: Direction:

## SHEEN INFORMATION

**Sheen Length:** Units: Sheen Width: Units:

**Color:** Direction of Movement:

**Odor Description:**

## IMPACT INFORMATION

**Medium Affected:** Detailed Medium Information:

**Fire:** Yes No Unknown **Fire Extinguished:** Yes No Unknown

<b>Injuries:</b>	Yes	No	Unknown	<b>Number of Injuries:</b> <b>Number to Hospital:</b> <b>Rail Employee Injuries:</b> <b>Rail Passenger Injuries:</b>
<b>Fatalities:</b>	Yes	No	Unknown	<b>Number of Fatalities:</b> <b>Employee Fatalities:</b> <b>Passenger Fatalities:</b> <b>Vehicle Fatalities:</b>
<b>Evacuations:</b>	Yes	No	Unknown	<b>Number Evacuated:</b> <b>Radius/Area in Miles:</b> <b>Who was Evacuated:</b>
<b>Damages:</b>	Yes	No	Unknown	<b>Damage in Dollars:</b>
<b>Road Closed:</b>	Yes	No	Unknown	<b>Road:</b> <b>Major Artery:</b> Yes No <b>Hours Closed:</b> <b>Direction of Closure:</b>
<b>Track Closed:</b>	Yes	No	Unknown	<b>Track:</b> <b>Hours Closed:</b> <b>Direction of Closure:</b>
<b>Passengers Transferred:</b>	Yes	No	Unknown	
<b>Air Corridor Closed:</b>	Yes	No	Unknown	<b>Air Corridor:</b> <b>Hours Closed:</b>
<b>Waterway Closed:</b>	Yes	No	Unknown	<b>Waterway:</b> <b>Hours Closed:</b>
<b>Environmental Impact:</b>	Yes	No	Unknown	<b>Type of Impact:</b>
				<b>Media Interest:</b>

**WEATHER INFORMATION**

<b>Weather Conditions:</b>	<b>Air Temperature:</b>
<b>Wind Speed:</b> <b>Unit:</b>	<b>Wind Direction:</b>

**REMEDIAL ACTION INFORMATION**

<b>Remedial Action Taken:</b>
<b>Release Secured:</b> Yes      No      Unknown <b>Release Duration:</b> <b>Unit:</b>

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: