

:: NATIONAL RESPONSE CENTER ::

:: MOBILE 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: MOBILE

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:

MOBILE INCIDENT DETAILS

Road Mile Marker: Air Bag Deployed: Yes No Unknown

Transit Bus Involved: Yes No Unknown Length of Service Disruption: Units:

VEHICLE #1

Vehicle Type: Identification Number:

Fuel Capacity: Hazmat Carrier: Yes No Unknown

Carrier Licensed: Yes No Unknown Non-Compliance with Hazmat Regs: Yes No Unknown

VEHICLE #2

Vehicle Type: Identification Number:

Fuel Capacity: Hazmat Carrier: Yes No Unknown

Carrier Licensed: Yes No Unknown Non-Compliance with Hazmat Regs: Yes No Unknown

TRAILER/TANKER DETAILS

TANKER #1

Identification Number: Cargo Capacity: Units:

Actual Cargo: Units:

TANKER #2

Identification Number: Cargo Capacity: Units:

Actual Cargo: Units:

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
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 Unknown	No		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: