



Spills/Illicit Discharge – Initial Contact Form

(Please print)

Date of Call _____ Time of call _____

Name of caller _____ Phone Number _____

Address of caller _____

Is anyone hurt? (describe) _____

Description of discharge (Type & amount, color, odor, solid, liquid, semisolid, liquid, floatables, noticeable conditions): _____

Location of Spill (Address, Landmarks, Closet Intersection): _____

Municipality _____ County _____

Description of discharge source (who is doing it, color of vehicle, license plate of vehicle, other descriptors): _____

Other notes: _____

What actions, if any, has the caller taken? _____

Name of Village Staff person completing this form: _____

When you have completed the call, you must make the following required notifications: You must talk to a person, NO MESSAGES ARE ALLOWED!

***** Only if there is a fire, explosion, life, health, environmental threat or a need to evacuate – call 911 and emergency management.**

Call 911***

Name of person notified _____ Date _____ Time _____

Call Emergency Management*** 920-448-4270 or 920-362-8200

Name of person notified _____ Date _____ Time _____

Call the Village Illicit Discharge Coordinator: Bob Bartelt 920.819.6720 or Geoff Farr 920.819.6720

Name of person notified _____ Date _____ Time _____

Name of Investigator _____

Result of Initial Investigation _____

Additional notifications if a spill or discharge is confirmed (within 1 day) _____

Type & amount of substance _____

Flow Volume _____

Type and amount recovered _____

Treatment & disposal _____

Responsible party _____

Cost Recovery _____

Attached additional information:

Sketch of site _____ Obtain samples _____ Photo _____

Other documentation _____

Obtain Spill/Illicit Discharge Coordinator Signature _____