

EMERGENCY OPERATIONS PLAN  
CONN DEP Report Form

CONN DEP REPORT FORM (BELOW)



STATE OF CONNECTICUT  
DEPARTMENT OF ENVIRONMENTAL PROTECTION



REPORT OF PETROLEUM OR CHEMICAL PRODUCT

**DISCHARGE, SPILLAGE, SEEPAGE, FILTRATION**

The following information is submitted concerning petroleum or chemical product discharge reported verbally to the Department of Environmental Protection / State Police at \_\_\_\_\_ on \_\_\_\_\_ at \_\_\_\_\_

by \_\_\_\_\_.

(name)

1. Time and date of discharge, spillage, etc.

\_\_\_\_\_

2. Location, to include name of town, river, highway, distance from intersection, etc., of the pollution or contamination.

\_\_\_\_\_

3. Type of oil, petroleum or chemical pollutant or contaminant.

\_\_\_\_\_

4. Quantity of discharge, spillage, seepage, filtration.

\_\_\_\_\_

◇ Cause of pollution or contamination:

- Type of vessel, containers, etc., which contained the pollutant \_\_\_\_\_ or \_\_\_\_\_ contaminant \_\_\_\_\_

- Describe in detail what actually occurred to cause discharge, spillage, \_\_\_\_\_ seepage, \_\_\_\_\_ and \_\_\_\_\_ filtration.

\_\_\_\_\_

- If pollutant or contamination was a result of discharge, spillage, seepage, filtration from a moving vessel or vehicle, give location of departure and destination.

\_\_\_\_\_

\_\_\_\_\_

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- ◇ Name and address of owner of ship, boat or other vessel, terminal, establishment, vehicle, trailer or machine causing pollution or contamination.

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7. Name and address of person making this report.

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8. Title, or relationship to owner, of person making report.

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All statements contained herein are true to the best of my knowledge.

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Signature of Person Making Report

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Attachment 1