

Manage. Enhance. Protect.

Spill Report Form

Spills of regulated of substances in the Edwards Aquifer Recharge Zone or Contributing Zone within 5 miles of the recharge zone having the potential to pollute the Aquifer and hydrologically-connected surface streams are to be reported to the Edwards Aquifer Authority within **72 hours** (EAA Rules 713.400-409).

Return completed form to the EAA Environmental Protection Team by: **email** spill_notice@edwardsaquifer.org; **drop off at** 900 East Quincy, San Antonio, TX 78215; or **fax to** (210) 222-9869.

Date:

Phone:

Time:

AM PM

Reported By

Address:

Responsible Party (if different from above)				
Name:	Representing:		F	Phone
Address:				
Site Contact Person (if different from above)				
Name:	e: Representing:			Phone:
Address:				
Details of Spill or Discharge (Please attach additional pages if needed.)				
Date:	Time: AM PN	E: AM PM Weather Conditions:		
Location (Name and/or Address):				County:
				Ferguson/Mapsco:
Type of Substance(s):				
Estimated Quantity: Duration of Incident:				
Source/Cause of Spill or Discharge:				
Area(s) immediately affected or threatened by the spill or discharge (include specific names and descriptions of geographic landmark, waterways, etc):				
Describe the extent of actual or potential water pollution or harmful effects to the environment, and identify environmentally sensitive areas or natural resources at risk:				
Describe any actions to respond, contain, or remediate the spill or discharge (include third party contractor information if applicable):				
List any known or potential health risks:				
List source(s) for potable water in the affected area/facility, and any efforts to notify water purveyors of the incident:				
If the area/facility is supplied by a water well, please list the well(s) (include well number, location and groundwater source if known).				
Any additional significant information:				
Other Officials Notified (Federal, State, Local, Third party)				
Name:	Representing:		Phone:	Date Notified:
Name:	Representing:		Phone:	Date Notified:
Name:	Representing:		Phone:	Date Notified:
				Date Notified:
Form AO MGMT-EPT 08212013				

Representing: