

**Butler County Hazardous Materials  
Facility Incident Report and Documentation Record**

**Date of Incident:**

**Time of Incident:**

**Time Incident Reported:**

**Type of Incident (facility/transportation):**

**Location of Incident:**

**Chemical Classification (HS or EHS):**

**Name of Transporter:**

**Name of Facility:**

**Address (as applicable):**

**Phone:**

**Name/Phone of Contact Person:**

**Product Release (name of chemical):**

**Quantity Released (gallons; pounds):**

**Duration of Release:**

**Wind Direction/Speed:**

**Environmental Medium (water, land, air)/area covered if land:**

**Damage to Wildlife?**

**Damage to Vegetation?**

**Impact to Health and/or Safety (anticipated acute or chronic):**

**Cause of Incident:**

**Were local authorities called?**

**What time?**

**Identify Responders:**

**Summary of actions taken by facility or transporter:**

**If facility, indicate and permits (air, water, other):**

**Reported by/Title:**

**Additional Info:**