Appendix C

CHEMICAL SPILL PLAN
EMERGENCY PROCEDURES
HAZARDOUS WASTE SPILL

**Definition:**
Any discharge of hazardous waste into the environment.

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**TECHNICIAN'S RESPONSIBILITIES**

1. Decontaminate yourself if exposed.
2. Confine and cordon off the spill.

Safety Equipment on-hand: Respirators, goggles, rubber boots, gloves, aprons, hard hats, coveralls.

Spill Control Equipment on-hand: Portable pump, backhoe, sand, shovels, sorbent booms, pads, & pillows.

3. As soon as possible notify the Administrative Office.
   
   A. Radio Cathy in office
   B. Telephone - (530) 674-5456

4. Complete district Hazardous Waste Spill Report (Form HW-1) before leaving scene.
5. Do NOT leave spill site until supervisor arrives.
7. Specialized Spill Containment or Clean-up Companies or Agencies on Call.

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**ADMINISTRATIVE OFFICE RESPONSIBILITIES**

1. Complete the Emergency Incident Questionnaire (Form EIQ).
2. As soon as possible, notify the area supervisor.
3. Immediately notify one of the following individuals:

   **Name:**
   Ron McBride
   Mike Kimball
   Scott Houser
   Steve Abshier
   Merv Hunt

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**SUPERVISOR'S RESPONSIBILITIES**

1. Document spill scene (photographs).
2. Review District Hazardous Waste Spill Report (Form HW-1).
3. As soon as possible, but no later than 24 hours after the spill, file the Hazardous Waste Spill Report (Form HW-1) and documentation with Administrative office.
1. Determine which governmental agencies should be notified.
   
   A. CHP (for spills on public roadways)
   B. Local Fire Department (for spills on public roadways)
   C. County Environmental Health
   D. Environmental Management Dept., Environmental Health Division
   E. Department of Health Services, Toxic Substances Control Program
   F. State Office of Emergency Services
   
2. Review Hazardous Waste Spill Report (Form HW-1) and documentation.
3. Investigate cause of hazardous waste spill.
SUTTER-YUBA MOSQUITO & VECTOR CONTROL DISTRICT
HAZARDOUS WASTE SPILL REPORT

Date of spill: ___/___/____
Time of spill: _________ a.m./p.m.

Spill location: ____________________
_______________________________
_______________________________
_______________________________

Material (circle material):
• used motor oil
• pesticide rinse water
• used antifreeze
• gasoline / diesel
• parts washing solution

Other : _________________________

Amount: _______gallons/pounds/ounces

Area of spill: ____________square feet

Spill substrate:
soil / roadway / water

Other: _________________________
_______________________________
_______________________________
_______________________________

FORM HW-1 4/97
EMERGENCY PROCEDURES
PESTICIDE SPILL

Definition:
Any nontarget discharge or spillage of pesticides into the environment.

TECHNICIAN'S RESPONSIBILITIES

1. Decontaminate yourself if exposed.
2. Confine and cordon off the spill.

Safety Equipment on-hand: Respirators, goggles, rubber boots, gloves, aprons, hard hats, coveralls.

Spill Control Equipment on-hand: Portable pump, backhoe, sand, shovels, sorbent booms, pads & pillows.

3. As soon as possible notify the Administrative Office.
   A. Radio Cathy in office
   B. Telephone - (530) 674-5456

4. Clean up minor spills; request assistance for major spills.
5. Complete District Pesticide Spill Report (Form PS-1) before leaving scene.
6. Do NOT leave spill site until supervisor arrives.
7. Specialized Spill Containment or Clean-up Companies or Agencies on Call.

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ADMINISTRATIVE OFFICE RESPONSIBILITIES

1. Complete the Emergency Incident Questionnaire (Form EIQ).
2. Immediately notify the area supervisor.
3. As soon as possible, notify one of the following individuals:

   Name:
   Ron McBride
   Mike Kimball
   Scott Houser
   Steve Abshier
   Merv Hunt

SUPERVISOR'S RESPONSIBILITIES

1) Document spill scene (photographs).
2) Review District Pesticide Spill Report (Form PS-1).
3) As soon as possible, but no later than 24 hours after the accident, file the District Pesticide Spill Report (Form PS-1) and documentation with office.

MANAGEMENT'S RESPONSIBILITIES
1. Determine which governmental agencies should be notified.
   
   A. CHP (for spills on public roadways)
   B. Local Fire Department (for spills on public roadways)
   C. Agricultural Commissioner
   D. Department of Health Services (Environmental Management Branch)
   E. County Environmental Health Department

2. Review Pesticide Spill Report (Form PS-1) and documentation.
3. Complete Report of Suspected Pesticide Related Episode (Form REV-1-92) and submit to California State Department of Health Services.
4. Investigate cause of pesticide spill.
SUTTER-YUBA MOSQUITO & VECTOR CONTROL DISTRICT

PESTICIDE SPILL REPORT

Date of spill: ___/___/___
Time of spill: __________ a.m./p.m.

Spill location: ____________________
_______________________________
_______________________________
_______________________________

Pesticide: (circle material):
Altosid, Bti, Pyronone Crop Spray,
Cythion, Malathion. Pyronyl,
Biomist Pyrocide, Pyrenone 25-5
Tempo Golden Bear 1111, Dragnet,
Pyrenone 6-60, Rodeo, Reward

Other: _________________________

Amount: _______ gallons/pounds/ounces

Formulation: _____________________

Area of spill: ____________ square feet

Spill substrate:
soil / roadway / water

Other: _________________________

General Area:

Site Location:

FORM PS-1 4/97