

**EMERGENCY MANAGEMENT AGENCY  
OF  
FAIRFIELD COUNTY**

**Administrative Office: 109 N. Broad St., PO Box 626, Lancaster, OH 43130-0626  
Emergency Operations Center: 342 W. Wheeling Street**

*County Commissioners*

*Allan Reid  
Lisa M. Kessler  
Judith K. Shupe*

*Fax 740/653-5690  
Emergency 740/653-5223*

*Director*

*Daniel Bolger, P.E.  
740/654-4357 (Off.)  
740/681-4357 (Res.)*

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May 26, 1998

TO: Roy Hart cc: David Landefeld  
FROM: Daniel C. Bolger, P.E.  
RE: Cost Recovery Assistance

Please initiate cost recovery action to recover \$966 for emergency response in a hazardous materials incident from 11/29/97.

The hazardous materials team was requested by the Bloom Township fire department when acid was poured onto a car inside a garage. Bill Brobst has talked with Kathy Albright and she has refused to forward the charges to her insurance company or to make any effort to reimburse the costs. The Sheriff has been involved previously with this individual regarding harassment and vandalism by a former boyfriend.

We understand that other counties are using small claims court whenever possible to speed the processing of these cost recoveries.

Please copy me with correspondence so we can keep up to date.

TO: Dan Bolger

FROM: Bill Brobst

RE: Kathy Albright (Acid Incident)

DATE: 4/25/98

Dan

A brief history. Ms Albright was told the night of the incident that we would work with her on the actual cost of the incident. I told her that a bill would be coming and she should forward it to her insurance company. If her insurance company were to have any questions they could call us at the EMA.

For several weeks after the thirty day grace period I attempted to contact her with no success.

About two weeks ago I did make contact with Ms Albright. She stated that she was afraid that her insurance company would drop her and so she still had not given the invoice to them. I restated to her that if she would just contact them and give them the bill that we could work with them and her on an appropriate cost recovery amount, but nothing could be done until we were contacted.

Thursday evening April 23rd, I contacted Ms Albright again. Her attitude was one of "I don't care" and she stated that she had not contacted her insurance agency. I ended the conversation by saying that the matter would be given over to the county prosecutor.

In my opinion if she would have only worked with us we could have dropped the charges for at least the use of the trailer making our bill substantially lower. BUT since no effort has been put forth by her the prosecutor should go full steam ahead.

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Bloom

# FAIRFIELD COUNTY SPECIAL OPERATIONS TEAM

## Tender/Timer Checklist Level "B"

Dressing Tarp	Stools	EMS gloves
1 Hr SCBAs	Duct tape	flashlights
Chemical Boots	Level "B" suits	Tyvek suits
Radios	personal effects bag	Chemical gloves

Suit and glove compatibility checked with lead tender

Medical evaluations performed

Personal effects removed and secured

tyvek suit partially donned

Level "B" suit partially donned, Chemical boots donned

EMS gloves donned

finnish donning tyvek suit

2nd pair of ems gloves donned and taped

Finish donning level "B" suit

Silver shield gloves donned and taped

Chemical gloves donned

SCBA donned without mask, cylinder valve on

Record cylinder psi and determine worktime with lead tender

Radio secured and on proper channel channel 7

Review emergency procedures, and monitoring guidelines

Review Decon procedures

Confirm that decon is set-up

Review action plan with command

Don facepiece, put hoods up, don helmet and/or ear protection if needed

Turn on air for entry team, hook up facepiece, record time, visually inspect suit and evaluate personnel

# FAIRFIELD COUNTY SPECIAL OPERATIONS TEAM

Incident Command Sheet

Incident Commander Tom Williams F.D. Bloom

INCIDENT COMMANDER	SAFETY OFFICER _____ PLANNING _____ LOGISTICS _____
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SPECIAL OPS OFFICER <u>Bill Brobst</u>
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DECON OFFICER _____	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">NAME 1 _____</td> <td style="width: 50%;">NAME 5 _____</td> </tr> <tr> <td>NAME 2 _____</td> <td>NAME 6 _____</td> </tr> <tr> <td>NAME 3 _____</td> <td>NAME 7 _____</td> </tr> <tr> <td>NAME 4 _____</td> <td>NAME 8 _____</td> </tr> </table>	NAME 1 _____	NAME 5 _____	NAME 2 _____	NAME 6 _____	NAME 3 _____	NAME 7 _____	NAME 4 _____	NAME 8 _____
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REASERCH OFFICER _____
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MEDICAL OFFICER _____
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9/8/96 ICS

3926 CHARITY DRIVE