

**EMERGENCY MANAGEMENT AGENCY  
OF  
FAIRFIELD COUNTY**

**407 E Main St., PO Box 626, Lancaster, OH 43130-0626  
Emergency Operations Center: 342 W. Wheeling Street  
(740) 654-4357 Phone (740) 652-1520 Fax**

*County Commissioners*

*Judith K. Shupe*

*Mike Kiger*

*Jon D. Myers*

*ema-lepc@co.fairfield.oh.us*

*Emergency 740/653-5223*

*Director:*

*Robert Clark, P.E.*

*740/654-4357 (Off.)*

*740/654-5663 (Res.)*

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TO: Robert Clark, Director

FROM: Scott E. Baker Hazardous Materials Coordinator

SUBJECT: Petroleum Release in Bloom Twp.

DATE: June 16, 2003

The NiFRS report from Bloom Twp. Fire has a complete narrative of all actions taken by the department as well as actions taken by EPA, EMA and law enforcement personnel.

**A** FDID \* 23105 State \* OH Incident Date \* 05 10 2003 Station 551 Incident Number \* 03-0000327 Exposure \* 000  Delete  Change  No Activity NFIRS -1 Basic

**B Location\***  Check this box to indicate that the address for this incident is provided on the Wildland Fire Module in Section B "Alternative Location Specification". Use only for Wildland fires. Census Tract     -    

Street address  Intersection  In front of  Rear of  Adjacent to  Directions

6489      STREAMS END DR       
 Number/Milepost Prefix Street or Highway Street Type Suffix

     Canal Winchester OH 43110       
 Apt./Suite/Room City State Zip Code

**C Incident Type \*** 422 Chemical spill or leak  
 Incident Type

**D Aid Given or Received\***

1  Mutual aid received  Their FDID  Their State  
 2  Automatic aid recv.  
 3  Mutual aid given  
 4  Automatic aid given  
 5  Other aid given  
 N  None  Their Incident Number

**E1 Date & Times** Midnight is 0000  
 Check boxes if dates are the same as Alarm Date. ALARM always required

Alarm \* 05 10 2003 16:17:00  
 Arrival \*  05 10 2003 16:28:00  
 Controlled  05 10 2003 17:30:00  
 Last Unit  05 10 2003 18:22:00  
 Cleared

ARRIVAL required, unless canceled or did not arrive  
 CONTROLLED Optional, Except for wildland fires  
 LAST UNIT CLEARED, required except for wildland fires

**E2 Shift & Alarms** Local Option  
1 01 550  
 Shift or Alarms District Platoon

**E3 Special Studies** Local Option  
 Special Study ID#      Special Study Value     

**F Actions Taken \***

43 Hazardous materials  
 Primary Action Taken (1)

86 Investigate  
 Additional Action Taken (2)

82 Notify other agencies.  
 Additional Action Taken (3)

**G1 Resources \***  Check this box and skip this section if an Apparatus or Personnel form is used.

Apparatus      Personnel       
 Suppression            
 EMS            
 Other 0002 0006  
 Check box if resource counts include aid received resources.

**G2 Estimated Dollar Losses & Values** LOSSES: Required for all fires if known. Optional for non fires. None

Property \$     , 000, 000   
 Contents \$     , 000, 000   
 PRE-INCIDENT VALUE: Optional  
 Property \$     , 000, 000   
 Contents \$     , 000, 000

**Completed Modules**

Fire-2  Structure-3  Civil Fire Cas.-4  Fire Serv. Cas.-5  EMS-6  HazMat-7  Wildland Fire-8  Apparatus-9  Personnel-10  Arson-11

**H1\* Casualties**  None  
 Deaths Injuries  
 Fire Service            
 Civilian          

**H2 Detector** Required for Confined Fires.  
 1  Detector alerted occupants  
 2  Detector did not alert them  
 U  Unknown

**H3 Hazardous Materials Release**

N  None  
 1  Natural Gas: slow leak, no evaluation or HazMat actions  
 2  Propane gas: <21 lb. tank (as in home BBQ grill)  
 3  Gasoline: vehicle fuel tank or portable container  
 4  Kerosene: fuel burning equipment or portable storage  
 5  Diesel fuel/fuel Oil: vehicle fuel tank or portable  
 6  Household solvents: home/office spill, cleanup only  
 7  Motor oil: from engine or portable container  
 8  Paint: from paint cans totaling < 55 gallons  
 0  Other: Special HazMat actions required or spill > 55gal., Please complete the HazMat form

**I Mixed Use Property**

NN  Not Mixed  
 10  Assembly use  
 20  Education use  
 33  Medical use  
 40  Residential use  
 51  Row of stores  
 53  Enclosed mall  
 58  Bus. & Residential  
 59  Office use  
 60  Industrial use  
 63  Military use  
 65  Farm use  
 00  Other mixed use

**J Property Use\*** Structures

131  Church, place of worship  
 161  Restaurant or cafeteria  
 162  Bar/Tavern or nightclub  
 213  Elementary school or kindergarten  
 215  High school or junior high  
 241  College, adult education  
 311  Care facility for the aged  
 331  Hospital

341  Clinic, clinic type infirmary  
 342  Doctor/dentist office  
 361  Prison or jail, not juvenile  
 419  1-or 2-family dwelling  
 429  Multi-family dwelling  
 439  Rooming/boarding house  
 449  Commercial hotel or motel  
 459  Residential, board and care  
 464  Dormitory/barracks  
 519  Food and beverage sales

539  Household goods, sales, repairs  
 579  Motor vehicle/boat sales/repair  
 571  Gas or service station  
 599  Business office  
 615  Electric generating plant  
 629  Laboratory/science lab  
 700  Manufacturing plant  
 819  Livestock/poultry storage (barn)  
 882  Non-residential parking garage  
 891  Warehouse

Outside

124  Playground or park  
 655  Crops or orchard  
 669  Forest (timberland)  
 807  Outdoor storage area  
 919  Dump or sanitary landfill  
 931  Open land or field

936  Vacant lot  
 938  Graded/care for plot of land  
 946  Lake, river, stream  
 951  Railroad right of way  
 960  Other street  
 961  Highway/divided highway  
 962  Residential street/driveway

981  Construction site  
 984  Industrial plant yard

Lookup and enter a Property Use code only if you have NOT checked a Property Use box:  
 Property Use 981  
**Construction site**  
 NFIRS-1 Revision 03/11/99

**K1 Person/Entity Involved**

Local Option

Business name (if applicable)

Area Code

Phone Number

 Check This Box if same address as incident location. Then skip the three duplicate address lines.

MR

WILLIAM

RATLIFF

Mr., Ms., Mrs. First Name

MI

Last Name

Suffix

311

PEARL

LA

Number

Prefix

Street or Highway

Street Type

Suffix

Pickerington

Post Office Box

Apt./Suite/Room

City

OH

43147

State

Zip Code

 More people involved? Check this box and attach Supplemental Forms (NFIRS-1S) as necessary
**K2 Owner**
 Same as person involved? Then check this box and skip The rest of this section.

Local Option

EARTH WORK CONSTRUCTION

614

486

9117

Business name (if Applicable)

Area Code

Phone Number

 Check this box if same address as incident location. Then skip the three duplicate address lines.

MR

BILL

RUXTON

Mr., Ms., Mrs. First Name

MI

Last Name

Suffix

1754

GUILFORD

RD

Number

Prefix

Street or Highway

Street Type

Suffix

COLUMBUS

Post Office Box

Apt./Suite/Room

City

OH

43223

State

Zip Code

**L Remarks**

Local Option

DISPATCHED TO ABOVE ADDRESS ON A REPORT THAT CONSTRUCTION VEHICLES NEXT DOOR TO THIS ADDRESS ARE LEAKING A LARGE AMOUNT OF SUBSTANCE INTO THE CALLERS YARD AND THAT IT IS NEAR A STREAM. ON OUR ARRIVAL FOUND CONSTRUCTION SITE WITH SEVERAL PIECES OF EARTH MOVING EQUIPMENT, DIESEL FUEL TANK, HYDRAULIC OIL TANK, AND MOTOR OIL TANK ON IT. INVESTIGATION OF THE SCENE NOTED OBVIOUS PETROLEUM PRODUCT OF SOME SORT ON THE GROUND. PRODUCT APPEARED TO BE COMING FROM THE FRONT OF ONE OF THE PIECES OF EQUIPMENT AND THE LARGEST AMOUNT OF PRODUCT APPEARED TO BE COMING FROM THE AREA WHERE THE TRAILER HOLDING THE THREE SEPARATE TANKS WAS LOCATED. FURTHER INVESTIGATION REVEALED LARGE AMOUNT OF RUNOFF BEHIND ABOVE ADDRESS WITH POOLING NOTED IN AREAS. SOME AREAS OF RUNOFF FROM THE PRODUCT APPEARED TO HAVE MADE IT TO THE STREAM DUE TO THE OILY FILM NOTED ON THE WATER. ATTEMPTED TO NEXTEL HAZ MAT TEAM REPS. SCOTT BAKER AND BRAD SHULL IN ORDER TO DETERMINE WHICH AGENCIES NEEDED TO BE NOTIFIED. BRAD SHULL WAS ABLE TO GET IN TOUCH WITH BILL BROBST AND HAD HIM CONTACT MYSELF VIA NEXTEL. BILL BROBST ADVISED ME TO HAVE THE FCSSO RADIO ROOM PAGE THE EMA OFFICER ON CALL AND THE OHIO EPA. WHILE WAITING FOR EMA AND EPA TO CALL BACK, WE WERE ABLE TO MAKE CONTACT WITH THE EQUIPMENT COMPANY'S OWNER. HE WAS ADVISED OF THE SITUATION AND HE SAID IT WOULD BE AT LEAST 1-1 1/2 HOURS UNTIL SOMEONE COULD BE THERE. HE CALLED BACK WITHIN 5 MINUTES AND STATED AN EQUIPMENT OPERATOR THAT RETIRED FROM HIS COMPANY LIVES IN PICKERINGTON AND WOULD BE THERE IN 20 MINUTES TO ASSIST US. RICK HOFFMAN CALLED ME BACK ON MY CELL PHONE. ADVISED HIM OF THE SITUATION. HE GAVE ME HIS HOME AND CELL NUMBER TO CALL HIM BACK IF A REPRESENTATIVE OF THE OHIO EPA WAS UNABLE TO RESPOND TO THE SCENE. HE STATED HE WOULD COME TAKE A REPORT IF EPA UNABLE TO RESPOND. FCSSO RADIO ROOM MADE CONTACT WITH THE EPA AND TRANSFERRED HIM THROUGH TO MY CELL PHONE. EPA REP. WAS ADVISED OF THE SITUATION AND HE STATED HE HAD A 30-35 MINUTE ETA. CALLED STATION 551 AND ADVISED THEM TO BRING US PIGS AND DIKING DEVICES. WHILE WAITING ON M551. E551 CREW USED SHOVELS IN AN ATTEMPT TO DAM UP AND POOL SOME OF THE PRODUCT. M551 ARRIVED ON SCENE AND ASSISTED E551 CREW WITH DAMMING UP POOLS AND PLACING

**L Authorization**

ESMI09

Officer in charge ID

SMITH, ERIC G

Signature

EMS COOR

Position or rank

Assignment

05

10

2003

Month Day Year

 Check Box if same as Officer in charge.

ESMI09

Member making report ID

SMITH, ERIC G

Signature

EMS COOR

Position or rank

Assignment

05

10

2003

Month Day Year

23105

FDID

OH

State \*

MM

DD

YYYY

5

10

2003

Incident Date \*

551

Station

03-0000327

Incident Number \*

000

Exposure \*

Complete  
Narrative**Narrative:**

DISPATCHED TO ABOVE ADDRESS ON A REPORT THAT CONSTRUCTION VEHICLES NEXT DOOR TO THIS ADDRESS ARE LEAKING A LARGE AMOUNT OF SUBSTANCE INTO THE CALLERS YARD AND THAT IT IS NEAR A STREAM. ON OUR ARRIVAL FOUND CONSTRUCTION SITE WITH SEVERAL PIECES OF EARTH MOVING EQUIPMENT, DIESEL FUEL TANK, HYDRAULIC OIL TANK, AND MOTOR OIL TANK ON IT. INVESTIGATION OF THE SCENE NOTED OBVIOUS PETROLEUM PRODUCT OF SOME SORT ON THE GROUND. PRODUCT APPEARED TO BE COMING FROM THE FRONT OF ONE OF THE PIECES OF EQUIPMENT AND THE LARGEST AMOUNT OF PRODUCT APPEARED TO BE COMING FROM THE AREA WHERE THE TRAILER HOLDING THE THREE SEPARATE TANKS WAS LOCATED. FURTHER INVESTIGATION REVEALED LARGE AMOUNT OF RUNOFF BEHIND ABOVE ADDRESS WITH POOLING NOTED IN AREAS. SOME AREAS OF RUNOFF FROM THE PRODUCT APPEARED TO HAVE MADE IT TO THE STREAM DUE TO THE OILY FILM NOTED ON THE WATER. ATTEMPTED TO NEXTEL HAZ MAT TEAM REPS. SCOTT BAKER AND BRAD SHULL IN ORDER TO DETERMINE WHICH AGENCIES NEEDED TO BE NOTIFIED. BRAD SHULL WAS ABLE TO GET IN TOUCH WITH BILL BROBST AND HAD HIM CONTACT MYSELF VIA NEXTEL. BILL BROBST ADVISED ME TO HAVE THE FCSO RADIO ROOM PAGE THE EMA OFFICER ON CALL AND THE OHIO EPA. WHILE WAITING FOR EMA AND EPA TO CALL BACK, WE WERE ABLE TO MAKE CONTACT WITH THE EQUIPMENT COMPANY'S OWNER. HE WAS ADVISED OF THE SITUATION AND HE SAID IT WOULD BE AT LEAST 1-1 1/2 HOURS UNTIL SOMEONE COULD BE THERE. HE CALLED BACK WITHIN 5 MINUTES AND STATED AN EQUIPMENT OPERATOR THAT RETIRED FROM HIS COMPANY LIVES IN PICKERINGTON AND WOULD BE THERE IN 20 MINUTES TO ASSIST US. RICK HOFFMAN CALLED ME BACK ON MY CELL PHONE. ADVISED HIM OF THE SITUATION. HE GAVE ME HIS HOME AND CELL NUMBER TO CALL HIM BACK IF A REPRESENTATIVE OF THE OHIO EPA WAS UNABLE TO RESPOND TO THE SCENE. HE STATED HE WOULD COME TAKE A REPORT IF EPA UNABLE TO RESPOND. FCSO RADIO ROOM MADE CONTACT WITH THE EPA AND TRANSFERRED HIM THROUGH TO MY CELL PHONE. EPA REP. WAS ADVISED OF THE SITUATION AND HE STATED HE HAD A 30-35 MINUTE ETA. CALLED STATION 551 AND ADVISED THEM TO BRING US PIGS AND DIKING DEVICES. WHILE WAITING ON M551. E551 CREW USED SHOVELS IN AN ATTEMPT TO DAM UP AND POOL SOME OF THE PRODUCT. M551 ARRIVED ON SCENE AND ASSISTED E551 CREW WITH DAMMING UP POOLS AND PLACING PIGS AND DIKING DEVICES TO ATTEMPT TO COLLECT PRODUCT THAT WAS RUNNING TO THE STREAM. EQUIPMENT OPERATOR ON SCENE AND SAID HE COULD USE A BULLDOZER TO DAM UP THE REMAINDER OF THE AREA THAT WAS INVOLVED IN THE SPILL. SPOKE WITH EPA REP. CHRISTOPHER BONNER ON THE PHONE AND HE STATED IT WAS FINE TO MOVE EQUIPMENT AND USE THE BULLDOZER PRIOR TO HIS ARRIVAL. EQUIPMENT OPERATOR ON SCENE INVESTIGATED SCENE PRIOR TO MOVING THE FIRST BULLDOZER. BOTH BULLDOZERS ON THE SCENE HAD BEEN VANDALIZED. THE BULLDOZER OWNED BY EARTHWORKS HAD THE GAUGES BROKEN AND SPRAY PAINTED WITH RED PAINT. THE BULLDOZER THAT WAS APPARENTLY RENTED FROM NATIONS RENT HAD THE ENTIRE DASH PULLED OUT OF IT. WHEN HE INSPECTED THE MOTOR OIL AND HYDRAULIC OIL CYLINDERS HE NOTICED THAT BOTH HAD BEEN MOVED TO THE OPEN POSITION AND BOTH 55 GALLON DRUMS WERE EMPTY. HE WAS UNSURE HOW MUCH PRODUCT WAS IN EACH DRUM. UNKNOWN AT WHAT POINT DRUMS WERE DRAINED, BUT DUE TO HEAVY RAIN OVER THE PAST COUPLE OF DAYS, IT HAD WASHED DOWN BEHIND NEIGHBORS HOUSE AND WAS POOLING AND RUNNING OFF INTO THE STREAM. DEPUTIES DIAMOND AND COOK ARRIVED ON SCENE TO TAKE REPORT. DEPUTY COOK NAMED TWO SUSPICIOUS PARTIES IMMEDIATELY. DEPUTIES WERE INTERVIEWING NEIGHBORS IN THE AREA AS TO WHETHER THEY HAD SEEN ANY KIDS OR SUSPICIOUS PERSONS AROUND THE SITE RECENTLY. ADDRESS OF BOTH SUSPICIOUS PARTIES GIVEN TO EPA REPRESENTATIVE BY DEPUTIES. SPILL CONFINED. EPA REP. HAPPY WITH CONTAINMENT EFFORTS AND FINAL CONTAINMENT. ALL UNITS IN SERVICE. COPY TO SCOTT BAKER'S MAILBOX FOR EMA FOLLOW-UP

EQUIPMENT USED OTHER THAN MAN HOURS: 100 GALLONS OF WATER, 2 - 6' PIGS, AND APPROXIMATELY 10 - 18" X 18" PADS. PIGS AND PADS WERE LEFT IN PLACE ON OUR DEPARTURE.

**B** HazMat ID \_\_\_\_\_ Chemical \* UNKNOWN  
 UN Number \_\_\_\_\_ DOT Hazard Classification \_\_\_\_\_ CAS Registration Number \_\_\_\_\_  
 Name \_\_\_\_\_

<b>C1</b> Container Type _____ Container Type  More hazardous Materials? Use additional sheets.	<b>C2</b> Estimated Container Capacity _____, _____, _____ Capacity: by volume or weight	<b>D1</b> Estimated Amount Released _____, _____, 110 Amount released: by volume or weight	<b>E1</b> Physical State When Released 1 <input type="checkbox"/> Solid 2 <input checked="" type="checkbox"/> Liquid 3 <input type="checkbox"/> Gas U <input type="checkbox"/> Undetermined
	<b>C3</b> Units: Capacity Check one box <b>VOLUME</b> 11 <input type="checkbox"/> Ounces 12 <input type="checkbox"/> Gallons 13 <input type="checkbox"/> Barrels: 42 gal. 14 <input type="checkbox"/> Liters 15 <input type="checkbox"/> Cubic feet 16 <input type="checkbox"/> Cubic meters	<b>C3</b> Units: Capacity Check one box <b>WEIGHT</b> 21 <input type="checkbox"/> Ounces 22 <input type="checkbox"/> Pounds 23 <input type="checkbox"/> Grams 24 <input type="checkbox"/> Kilograms	<b>D2</b> Units: Released Check one box <b>VOLUME</b> 11 <input type="checkbox"/> Ounces 12 <input checked="" type="checkbox"/> Gallons 13 <input type="checkbox"/> Barrels: 42 gal. 14 <input type="checkbox"/> Liters 15 <input type="checkbox"/> Cubic feet 16 <input type="checkbox"/> Cubic meters

Complete the remainder of this form only for the first hazardous material involved in this incident.	<b>F2</b> Population Density 1 <input type="checkbox"/> Urban 2 <input checked="" type="checkbox"/> Suburban 3 <input type="checkbox"/> Rural	<b>G2</b> Area Evacuated <input checked="" type="checkbox"/> None 1 <input checked="" type="checkbox"/> Square Feet _____, _____ 2 <input type="checkbox"/> Blocks 3 <input type="checkbox"/> Square miles Enter Measurement	<b>H</b> HazMat Actions Taken Enter up to three actions taken 13 Hazmat spill control Primary Action Taken (1) 34 Investigate Additional Action Taken (2) 31 Refer to proper Additional Action Taken (3)
	<b>F1</b> Released From: Check all applicable boxes <input type="checkbox"/> Below grade 1 <input type="checkbox"/> Inside/on structure _____ Story of Release 2 <input checked="" type="checkbox"/> Outside of structure	<b>G1</b> Area Affected 1 <input checked="" type="checkbox"/> Square Feet 2 <input type="checkbox"/> Blocks 3 <input type="checkbox"/> Square miles 5, _____ Enter Measurement	<b>G3</b> Estimated Number of People Evacuated _____, _____

<b>J</b> Cause Of Release * 1 <input type="checkbox"/> Intentional 2 <input type="checkbox"/> Unintentional release 3 <input type="checkbox"/> Container/containment failure 4 <input type="checkbox"/> Act of nature 5 <input checked="" type="checkbox"/> Cause under investigation U <input type="checkbox"/> Cause undetermined after investigation	<b>K</b> Factors Contributing to Release Enter up to three contributing factors UU Undetermined Factor Contributing To Release (1) _____ Factor Contributing To Release (2) _____ Factor Contributing To Release (3) _____	<b>K</b> Factors Affecting Mitigation Enter up to three factors or impediments that affected the mitigation of the incident 11 Released into water table Factor or impediment (1) 42 Storm Factor or impediment (2) _____ Factor or impediment (3) _____
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<b>M</b> Equipment Involved In Release <input type="checkbox"/> None UUU Undetermined Equipment involved in release Brand _____ Model _____ Serial Number _____ Year _____	<b>N</b> Mobile Property Involved In Release <input type="checkbox"/> None 61 Construction vehicles Mobile property type _____ Mobile property make _____ Mobile property model _____ Year _____ License Plate Number _____ State _____ DOT Number/ ICC Number _____	<b>O</b> HazMat Disposition* 1 <input type="checkbox"/> Completed by fire service only 2 <input type="checkbox"/> Completed w/ fire service present 3 <input type="checkbox"/> Released to local agency 4 <input type="checkbox"/> Released to county agency 5 <input checked="" type="checkbox"/> Released to state agency 6 <input type="checkbox"/> Released to federal agency 7 <input type="checkbox"/> Released to a private agency 8 <input type="checkbox"/> Released to property owner or manager <b>O</b> HazMat Civilian Casualties Deaths _____ Injuries _____
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B Apparatus or * Resource		Date and Times <small>Check if same as alarm date</small> Month Day Year Hour Min					Sent <input type="checkbox"/>	Number of * People	Use <small>Check ONE box for each apparatus to indicate its main use at the incident.</small>	Actions Taken
1	ID <input type="text" value="E551"/> Type <input type="text" value="11"/>	Dispatch <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="16:17"/>	<input checked="" type="checkbox"/>	<input type="text" value="4"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="16:28"/>	<input checked="" type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="18:22"/>				<input type="text"/> <input type="text"/>
2	ID <input type="text" value="M551"/> Type <input type="text" value="76"/>	Dispatch <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="17:00"/>	<input checked="" type="checkbox"/>	<input type="text" value="2"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="17:10"/>	<input checked="" type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input checked="" type="checkbox"/>	<input type="text" value="5"/>	<input type="text" value="10"/>	<input type="text" value="2003"/>	<input type="text" value="18:22"/>				<input type="text"/> <input type="text"/>
3	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
4	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
5	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
6	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
7	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
8	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>
9	ID <input type="text"/> Type <input type="text"/>	Dispatch <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input type="checkbox"/> Other	<input type="text"/> <input type="text"/>
		Arrival <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>			<input type="text"/> <input type="text"/>
		Clear <input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				<input type="text"/> <input type="text"/>

**Type of Apparatus or Resources**

- |   |   |   |
|---|---|---|
| <p><b>Ground Fire Suppression</b></p> <ul style="list-style-type: none"> <li>11 Engine</li> <li>12 Truck or aerial</li> <li>13 Quint</li> <li>14 Tanker &amp; pumper combination</li> <li>16 Brush truck</li> <li>17 ARF (Aircraft Rescue and Firefighting)</li> <li>10 Ground fire suppression, other</li> </ul> <p><b>Heavy Ground Equipment</b></p> <ul style="list-style-type: none"> <li>21 Dozer or plow</li> <li>22 Tractor</li> <li>24 Tanker or tender</li> <li>20 Heavy equipment, other</li> </ul> <p><b>Aircraft</b></p> <ul style="list-style-type: none"> <li>41 Aircraft: fixed wing tanker</li> <li>42 Helitanker</li> <li>43 Helicopter</li> <li>40 Aircraft, other</li> </ul> | <p><b>Marine Equipment</b></p> <ul style="list-style-type: none"> <li>51 Fire boat with pump</li> <li>52 Boat, no pump</li> <li>50 Marine apparatus, other</li> </ul> <p><b>Support Equipment</b></p> <ul style="list-style-type: none"> <li>61 Breathing apparatus support</li> <li>62 Light and air unit</li> <li>60 Support apparatus, other</li> </ul> <p><b>Medical &amp; Rescue</b></p> <ul style="list-style-type: none"> <li>71 Rescue unit</li> <li>72 Urban Search &amp; rescue unit</li> <li>73 High angle rescue unit</li> <li>75 BLS unit</li> <li>76 ALS unit</li> <li>70 Medical and rescue unit, other</li> </ul> | <div style="border: 1px solid black; padding: 5px; text-align: center;"> <p><b>More Apparatus?<br/>Use Additional<br/>Sheets</b></p> </div> <p><b>Other</b></p> <ul style="list-style-type: none"> <li>91 Mobile command post</li> <li>92 Chief officer car</li> <li>93 HazMat unit</li> <li>94 Type 1 hand crew</li> <li>95 Type 2 hand crew</li> <li>99 Privately owned vehicle</li> <li>00 Other apparatus/resource</li> <li>NN None</li> <li>UU Undetermined</li> </ul> |
|---|---|---|

**A** FDID 23105 \* State OH \* Incident Date 5 10 2003 Station 551 Incident Number 03-0000327 \* Exposure 000 \*  Delete  Change **NFIRS - 10 Personnel**

**B Apparatus or Resource**  **Date and Times**  **Sent** **Number of People** **Use** **Actions Taken**  
 Check if same as alarm date  
 Month Day Year Hours/mins  
 Check ONE box for each apparatus to indicate its main use at the incident.  
 List up to 4 actions for each apparatus and each personnel.

**1** ID E551 Dispatch  5 10 2003 16:17 Sent  4  Suppression  EMS  Other  
 Type 11 Arrival  5 10 2003 16:28  Clear  5 10 2003 18:22

Personnel ID	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
AFEY12	FEY, ANDY	FF/PARA	X				
CROW11	CROWDER, ANTHONY	FF	X				
ESMI09	SMITH, ERIC	EMS COOR	X				
SWE55	WEBER, SCOTT	FF/PARA	X				

**2** ID M551 Dispatch  5 10 2003 17:00 Sent  2  Suppression  EMS  Other  
 Type 76 Arrival  5 10 2003 17:10  Clear  5 10 2003 18:22

Personnel ID	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
EWIL30	WILSON, ERIC	FF/PARA	X				
RWIL37	WILLIAMS, REX	FF/PARA	X				

**3** ID      Dispatch                      Sent        Suppression  EMS  Other  
 Type      Arrival                       Clear                     

Personnel ID	Name	Rank or Grade	Attend <input checked="" type="checkbox"/>	Action Taken	Action Taken	Action Taken	Action Taken
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				
			<input type="checkbox"/>				

23105	OH	MM	DD	YYYY	551	03-0000327	000	Responding Personnel	
FDID *	State *	5	10	2003	Station	Incident Number *	Exposure *		

Staff ID\Staff Name	Unit	Activity	Position	Rank	PayScl	Hrs	HrsPd	Pts
AFEY12 FEY, ANDY P	E551 X	SERVICE SERVICE	D	FF/PAR		2.08	2.08	0.00
CROW11 CROWDER, ANTHONY	E551	SERVICE SERVICE	B	FF		2.08	2.08	0.00
ESMI09 SMITH, ERIC G	E551	SERVICE SERVICE	IC	EMS		2.08	2.08	0.00
SWE55 WEBER, SCOTT A	E551	SERVICE SERVICE	B	FF/PAR		2.08	2.08	0.00
EWIL30 WILSON, ERIC	M551 X	SERVICE SERVICE	D	FF/PAR		1.37	1.37	0.00
RWIL37 WILLIAMS, REX	M551	SERVICE SERVICE	IC	FF/PAR		1.37	1.37	0.00

Total Participants: 6

Total Personnel Hours: 11.06

An 'X' next to the unit denotes driver.



**Ohio Environmental Protection Agency**

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**DIVISION OF EMERGENCY &  
REMEDIAL RESPONSE**

Central District Office  
3232 Alum Creek Drive  
Columbus, Ohio 43207

**(614) 728-3778**

To Report Spills

**(800) 282-9378** In State

**(614) 224-0946** Out of State

**Christopher D. Bonner**

On Scene Coordinator

Pager **(614) 661-9034**

FAIRFIELD COUNTY SHERIFF  
DISPOSITION NARRATIVE

Page 2

=====  
Date: 05/10/03      Time: 16:17      Dispatcher : D36      Transaction#: 1163424  
=====

E551 CALLED IN AND ADV @ 1740 THEY NEEDED A DEP. IN REF TO C64 TO THE CONST.  
VEH. MAJOR EVENT PAGER WAS SENT 1750...EPA OFFICER OSC @1803/PER E551'S  
REQUEST, UNIT 317 AND 321 RESPONDED DUE TO C64 TO THE CONSTRUCTION VEHICLES  
E551 ADV SIG "0" @ 1822/

ATH0

NO CARRIER

FAIRFIELD COUNTY SHERIFF  
TRANSACTION REPORT

Page 1

=====  
Date: 05/10/03 Time: 16:17 Call Taker/Dispatcher: D36/D34 Number: 1163424  
Transaction#: 1163424  
=====

Type of Call: 285 SERVICE RUN  
Callers Name: TYE JAMISON/8344858  
Location : 6489 STREAMS END DR

Call Information:

CALLER ADV THERE IS SOME CONSTRUCTION VEH NEXT DOOR THAT ARE LEAKING  
A LOT OF UNKNOWN SUBSTANCES OUT INTO THIER YARD..SUB. IS NEAR A STREAM  
CONTACTED THE EMA-RICK HOFFMAN..WILL NOT BE RESPONDING/PAGED OUT  
THE EPA, WAS CONNECTED W/ COLUMBUS ANSWERING SERV AND THEY ADV THEY  
WOULD PAGE THEM OUT AND THEY WOULD GIVE US A CALL/LOGGED ALL INFO  
IN DESK LOG-EPA AND EMA/E551 ADV @ 1736 EPA ENR W/ 30 MIN ETA..ALT-P

=====  
Unit# DIS ENR OSC CLR LSC \*\*\* INS INQ COMP REPORT#  
E551 16:19 16:22 16:28 18:22 18:22 18:27  
M551 17:10 17:10 17:10 18:22 18:22 18:27  
321 17:42 17:42 17:48 03002112  
317 17:52 17:52 17:52 18:26 18:26  
=====

=====  
Postup Transaction(s):  
=====

LOCATOR INSTRUCTIONS Date: 05/10/03 Time: 16:22:26  
=====