



Canada

NT-NU SPILL REPORT

OIL, GASOLINE, CHEMICALS AND OTHER HAZARDOUS MATERIALS

NT-NU 24-HOUR SPILL REPORT LINE

TEL: (867) 920-8130

FAX: (867) 873-6924

EMAIL: spills@gov.nt.ca

REPORT LINE USE ONLY

A	REPORT DATE: MONTH – DAY – YEAR 04-10-2011		REPORT TIME 9h30		<input checked="" type="checkbox"/> ORIGINAL SPILL REPORT, OR <input type="checkbox"/> UPDATE # _____ TO THE ORIGINAL SPILL REPORT	REPORT NUMBER _____
	OCCURRENCE DATE: MONTH – DAY – YEAR 04-09-2011		OCCURRENCE TIME am			
C	LAND USE PERMIT NUMBER (IF APPLICABLE) KIOL BL-14			WATER LICENCE NUMBER (IF APPLICABLE) NWA 2AM-MEA0815		
	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM NAMED LOCATION Meadowbank Division				REGION <input type="checkbox"/> NWT <input checked="" type="checkbox"/> NUNAVUT <input type="checkbox"/> ADJACENT JURISDICTION OR OCEAN	
E	LATITUDE DEGREES 65 MINUTES 01 SECONDS 33			LONGITUDE DEGREES 96 MINUTES 04 SECONDS 01		
	RESPONSIBLE PARTY OR VESSEL NAME AEM		RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION Baker Lake; X0X 0A0			
G	ANY CONTRACTOR INVOLVED		CONTRACTOR ADDRESS OR OFFICE LOCATION			
	PRODUCT SPILLED Hydraulic oil		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES 100 Litres		U.N. NUMBER	
H	SECOND PRODUCT SPILLED (IF APPLICABLE)		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES		U.N. NUMBER	
	SPILL SOURCE 50 Tons Truck		SPILL CAUSE Hose broken		AREA OF CONTAMINATION IN SQUARE METRES 12m2	
J	FACTORS AFFECTING SPILL OR RECOVERY		DESCRIBE ANY ASSISTANCE REQUIRED		HAZARDS TO PERSONS, PROPERTY OR EQUIPMENT	
	ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS Removed the contaminated soil and brought it at the appropriate place for disposal.					
L	REPORTED TO SPILL LINE BY Sylvain Doire		POSITION Enviro Coordinator		EMPLOYER AEM	
	LOCATION CALLING FROM Meadowbank		TELEPHONE 867 793 4610			
M	ANY ALTERNATE CONTACT Stephane Robert		POSITION Env Superintendent		EMPLOYER AEM	
	ALTERNATE CONTACT Meadowbank		ALTERNATE TELEPHONE 819 763 0229			
REPORT LINE USE ONLY						
N	RECEIVED AT SPILL LINE BY		POSITION STATION OPERATOR		EMPLOYER	
	LOCATION CALLED YELLOWKNIFE, NT		REPORT LINE NUMBER (867) 920-8130			
LEAD AGENCY <input type="checkbox"/> EC <input type="checkbox"/> CCG <input type="checkbox"/> GNWT <input type="checkbox"/> GN <input type="checkbox"/> ILA <input type="checkbox"/> INAC <input type="checkbox"/> NEB <input type="checkbox"/> TC			SIGNIFICANCE <input type="checkbox"/> MINOR <input type="checkbox"/> MAJOR <input type="checkbox"/> UNKNOWN			FILE STATUS <input type="checkbox"/> OPEN <input type="checkbox"/> CLOSED
AGENCY		CONTACT NAME		CONTACT TIME		REMARKS
LEAD AGENCY						
FIRST SUPPORT AGENCY						
SECOND SUPPORT AGENCY						
THIRD SUPPORT AGENCY						