# NT-NU SPILL REPORT

OIL, GASOLINE, CHEMICALS AND OTHER HAZARDOUS MATERIALS

**Northwest Territories** · **Nunavut** · **Canada**

**REPORT LINE USE ONLY**

| | | | | |
|---|---|---|---|---|
| **A** | REPORT DATE: MONTH – DAY – YEAR | REPORT TIME | ☐ ORIGINAL SPILL REPORT, OR | **REPORT NUMBER** ____ - ____ |
| **B** | OCCURRENCE DATE: MONTH – DAY – YEAR | OCCURRENCE TIME | ☐ UPDATE # _____ TO THE ORIGINAL SPILL REPORT | |
| **C** | LAND USE PERMIT NUMBER (IF APPLICABLE) | WATER LICENCE NUMBER (IF APPLICABLE) | | |
| **D** | GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM NAMED LOCATION | REGION ☐ NWT  ☐ NUNAVUT  ☐ ADJACENT JURISDICTION OR OCEAN | | |
| **E** | LATITUDE — DEGREES / MINUTES / SECONDS | LONGITUDE — DEGREES / MINUTES / SECONDS | | |
| **F** | RESPONSIBLE PARTY OR VESSEL NAME | RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION | | |
| **G** | ANY CONTRACTOR INVOLVED | CONTRACTOR ADDRESS OR OFFICE LOCATION | | |
| **H** | PRODUCT SPILLED | QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES | U.N. NUMBER | |
| **H** | SECOND PRODUCT SPILLED (IF APPLICABLE) | QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES | U.N. NUMBER | |
| **I** | SPILL SOURCE | SPILL CAUSE | AREA OF CONTAMINATION IN SQUARE METRES | |
| **J** | FACTORS AFFECTING SPILL OR RECOVERY | DESCRIBE ANY ASSISTANCE REQUIRED | HAZARDS TO PERSONS, PROPERTY OR ENVIRONMENT | |
| **K** | ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS | | | |

| | | | | | |
|---|---|---|---|---|---|
| **L** | REPORTED TO SPILL LINE BY | POSITION | EMPLOYER | LOCATION CALLING FROM | TELEPHONE |
| **M** | ANY ALTERNATE CONTACT | POSITION | EMPLOYER | ALTERNATE CONTACT LOCATION | ALTERNATE TELEPHONE |

**REPORT LINE USE ONLY**

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|---|---|---|---|---|---|
| **N** | RECEIVED AT SPILL LINE BY | POSITION — STATION OPERATOR | EMPLOYER | LOCATION CALLED — YELLOWKNIFE, NT | REPORT LINE NUMBER — (867) 920-8130 |

LEAD AGENCY ☐ EC ☐ CCG ☐ GNWT ☐ GN ☐ ILA ☐ INAC ☐ NEB ☐ TC  SIGNIFICANCE ☐ MINOR ☐ MAJOR ☐ UNKNOWN  FILE STATUS ☐ OPEN ☐ CLOSED

| AGENCY | CONTACT NAME | CONTACT TIME | REMARKS |
|---|---|---|---|
| LEAD AGENCY | | | |
| FIRST SUPPORT AGENCY | | | |
| SECOND SUPPORT AGENCY | | | |
| THIRD SUPPORT AGENCY | | | |