



Northwest Territories Canada NT-NU SPILL REPORT

NT-NU 24-HOUR SPILL REPORT LINE

TEL: (867) 920-8130 FAX: (867) 873-6924 FMAIL · spills@gov nt ca

leli	nones runarat		OIL, GASOLINE	, CHEMICALS	S AND OTHER HA	AZARDO	US MATERIALS			EMAIL: Spills@gov.nt.ca
						1				PORT LINE USE ONLY
Α	A REPORT DATE: MONTH – DAY – YEAR April 07, 2010			REPORT TIME 08:00 A.M.		☐ ORIGINAL SPILL REPORT, OR		ORT, OR	REPORT NUMBER	
В	OCCURRENCE DATE: MONTH – DAY – YEAR March 02, 2010			OCCURRENCE TIME 08:30 A.M.		☐ UPDATE # 2010-052 TO THE ORIGINAL SPILL REPORT			2010	0-052
С	LAND USE PERMIT NUMBER (IF APPLICABLE)			WATER LICENCE NUMBER			(IF APPLICABLE)			
D	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FRO Sewage Lift Station #1 City of Iqaluit			M THE NAMED LOCATION			REGION ☐ NWT ☑ NUNAVUT ☐ ADJ			NT JURISDICTION OR
Е	LATITUDE DEGREES MINUTES SECONDS				LONGITUDE DEGREES MINUTES SECONDS					
F	RESPONSIBLE PARTY OR VESSEL NAME City of laualuit			RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION Box 460. Idaluit. NU. X0A 0H0						
G	ANY CONTRACTOR INVOLVED City of Igaluit equipment used			CONTRACTOR ADDRESS OR OFFICE LOCATION Box 460 Igaluit, NU. X0A 0H0						
Н	PRODUCT SPILLED Sewage			QUANTITY IN LITRES, KILOGRAMS OR CUBIC METR 500 liters				U.N. NUMBER		
''	SECOND PRODUCT SPILLED (IF APPLICABLE)		QUANTITY IN LITRES, KILOGRAMS OR CUBIC ME			BIC METRES	U.N. NUMBER			
	SPILL SOURCE Overflow pipe at lift station		SPILL CAUSE rags blocking pump 101			AREA OF 24 M2	REA OF CONTAMINATION IN SQUARE METRES			
٦	FACTORS AFFECTING SPILL OR RECOVERY Rough Terrain.			DESCRIBE ANY ASSISTANCE REQUIRED Loader, Backhoe, and Dumptruck				HAZARDS TO PERSONS, PROPERTY OR EQUIPMENT none		
	ADDITIONAL INFORMA	TION, COMMENTS, A	CTIONS PROPOSED	OR TAKEN TO	R TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT.					ONTAMINATED MATERIALS
Κ	the overflow pipe, snow and ice from									
L	REPORTED TO SPILL LINE BY Robert Hogan		POSITION Utilidor Foreman		EMPLOYER City of laaluit		LOCATION CALLIN	G FROM		TELEPHONE 867-222-2941
М	ANY ALTERNATE CONTACT Frank Ford		POSITION PW. Superintendent		EMPLOYER City of Igaluit		ALTERNATE CONTACT LOC		ION	ALTERNATE TELEPHONE 867-979-5653
REPOR	RT LINE USE ONLY									
N			POSITION Station operate		EMPLOYER		LOCATION CALLE Yellowknife, N	_	REPORT LINE NUMBER (867) 920-8130	
LEAD AGENCY EC CCG GNWT GN ILA INAC NE				B TC SIGNIFICANCE MINOR M			MAJOR 🗌 UNKN	JOR ☐ UNKNOWN FILE STATUS ☐ OPEN ☐ CLOSED		
AGENCY CONTACT NAME			(CONTACT TIME REMARKS						
LEAD AGENCY										
FIRST S	SUPPORT AGENCY									
SECOND SUPPORT AGENCY										
THIRD	SUPPORT AGENCY									