



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 <b>04-02-13</b>		REPORT TIME <b>4:05pm</b>	<input checked="" type="checkbox"/> ORIGINAL SPILL REPORT, OR <input type="checkbox"/> UPDATE # TO THE ORIGINAL SPILL REPORT	REPORT NUMBER  -
	OCCURRENCE DATE: MONTH – DAY – YEAR <b>03-31-13</b>		OCCURRENCE TIME <b>2:00pm</b>		
C	LAND USE PERMIT NUMBER (IF APPLICABLE)		WATER LICENCE NUMBER (IF APPLICABLE)		
D	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM THE NAMED LOCATION <b>AV301 across from Arctic College</b>			REGION <input type="checkbox"/> NWT <input checked="" type="checkbox"/> NUNAVUT <input type="checkbox"/> ADJACENT JURISDICTION OR	
E	LATITUDE DEGREES      MINUTES      SECONDS		LONGITUDE DEGREES      MINUTES      SECONDS		
F	RESPONSIBLE PARTY OR VESSEL NAME <b>City of Iqaluit</b>		RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION <b>P.O. Box 460. Iqaluit. NU. X0A0H0</b>		
G	ANY CONTRACTOR INVOLVED <b>N/A</b>		CONTRACTOR ADDRESS OR OFFICE LOCATION		
H	PRODUCT SPILLED <b>Sewage</b>		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES <b>2000 litres, approximate</b>	U.N. NUMBER	
	SECOND PRODUCT SPILLED (IF APPLICABLE)		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES	U.N. NUMBER	
I	SPILL SOURCE <b>AV301</b>		SPILL CAUSE <b>Blockage in the pipe</b>	AREA OF CONTAMINATION IN SQUARE METRES	
J	FACTORS AFFECTING SPILL OR RECOVERY		DESCRIBE ANY ASSISTANCE REQUIRED <b>Sewage trucks call for assistance</b>	HAZARDS TO PERSONS, PROPERTY OR EQUIPMENT	
K	ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS  <b>At approximately 2:00pm, 03-31-13, the utility assistant technician oncall at the time responded to the call. Soon after, he called sewage truck services department to assist in pumping out the affected av301 of blockage to eliminate any further spillage.</b>				
L	REPORTED TO SPILL LINE BY <b>Paul Keenainak</b>	POSITION <b>Foreman</b>	EMPLOYER <b>City of Iqaluit</b>	LOCATION CALLING FROM <b>1554D</b>	TELEPHONE <b>8679793206</b>
M	ANY ALTERNATE CONTACT	POSITION	EMPLOYER	ALTERNATE CONTACT LOCATION	ALTERNATE TELEPHONE
REPORT LINE USE ONLY					
N	RECEIVED AT SPILL LINE BY	POSITION <b>Station operator</b>	EMPLOYER	LOCATION CALLED <b>Yellowknife, NT</b>	REPORT LINE NUMBER <b>(867) 920-8130</b>
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					

