



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 December 19, 2007		REPORT TIME December 19, 2007		<input checked="" type="checkbox"/> ORIGINAL SPILL REPORT, OR <input type="checkbox"/> UPDATE # _____ TO THE ORIGINAL SPILL REPORT	REPORT NUMBER _____
B	OCCURRENCE DATE: MONTH - DAY - YEAR December 19, 2007		OCCURRENCE TIME 13:20 pm			
C	LAND USE PERMIT NUMBER (IF APPLICABLE)			WATER LICENCE NUMBER (IF APPLICABLE)		
D	GEOGRAPHIC PLACE NAME OR DISTANCE AND DIRECTION FROM NAMED LOCATION Gjoa Haven Airport Facility				REGION <input type="checkbox"/> NWT <input checked="" type="checkbox"/> NUNAVUT <input type="checkbox"/> ADJACENT JURISDICTION OR OCEAN	
E	LATITUDE DEGREES 68 MINUTES 37 SECONDS 96		LONGITUDE DEGREES 095 MINUTES 50 SECONDS 84			
F	RESPONSIBLE PARTY OR VESSEL NAME Qikiqtaq Coop		RESPONSIBLE PARTY ADDRESS OR OFFICE LOCATION P.O.120 Gjoa Haven, Nunavut X0B 1J0			
G	ANY CONTRACTOR INVOLVED Coop Fuel Contractor		CONTRACTOR ADDRESS OR OFFICE LOCATION P.O.120 Gjoa Haven, Nunavut X0B 1J0			
H	PRODUCT SPILLED Jet A fuel		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES 110 litres		U.N. NUMBER	
	SECOND PRODUCT SPILLED (IF APPLICABLE)		QUANTITY IN LITRES, KILOGRAMS OR CUBIC METRES		U.N. NUMBER	
I	SPILL SOURCE Jet A fuel		SPILL CAUSE overflow		AREA OF CONTAMINATION IN SQUARE METRES 3X6 metres	
J	FACTORS AFFECTING SPILL OR RECOVERY snow		DESCRIBE ANY ASSISTANCE REQUIRED none		HAZARDS TO PERSONS, PROPERTY OR EQUIPMENT people and equipments	
K	ADDITIONAL INFORMATION, COMMENTS, ACTIONS PROPOSED OR TAKEN TO CONTAIN, RECOVER OR DISPOSE OF SPILLED PRODUCT AND CONTAMINATED MATERIALS Was advised of the fuel spill at the airport facility by the airport communicator shortly after 13:00pm. Drove to site with the acting town foreman to take notes and some photos. The fuel truck operator was advise to report any fuel this was the second time he did not report the spill.					
L	REPORTED TO SPILL LINE BY Jacob Keanik	POSITION Conservation Officer II	EMPLOYER Gov't of Nunavut	LOCATION CALLING FROM Gjoa Haven, Nu	TELEPHONE (867)360-7605	
M	ANY ALTERNATE CONTACT Samuel Ullalag	POSITION Truck operator	EMPLOYER Qiqitaq Coop	ALTERNATE CONTACT LOCATION Gjoa Haven, Nu	ALTERNATE TELEPHONE (867)360-7271	
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"/> COG <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						

AIRCRAFT ACCIDENT/INCIDENT REPORT FORM

Aircraft Type DH8A	Nationality CANADIAN	Registration C-GRGO
Owner/Operator/Hire CANADIAN NORTH	Address	Phone
Pilot in Command ANNON	Address	Phone
Accident date 19 DEC 2007	Location (incl lat and long)	Time UTC 1950 local 1250
Departure point	Destination	ELT heard Yes No <input checked="" type="checkbox"/>

1. ~~_____~~

Names of passengers killed or injured:

1. ~~_____~~

3. ~~_____~~

5. ~~_____~~

2. ~~_____~~

4. ~~_____~~

6. ~~_____~~

Description of any dangerous goods aboard aircraft: None

Action taken: ADVISED Renewable officer. PASSED REPORT TO ALL STNS
FUELER cleaned up spill with ZORB PADS

Name	Address	Phone
Observer/Communicator	Site	Date
Lonn Schultz	YHK	19 DEC 2007