



U.S. Department
of Transportation
Research and
Special Programs
Administration

HAZARDOUS MATERIALS INCIDENT REPORT

PURPOSE: The major purpose of this information is to support the assessment of hazardous materials packaging standards, and operating practices in hazardous materials transportation and temporary storage.

REQUIREMENTS: The regulations requiring reporting of hazardous materials incidents are contained in the Code of Federal Regulations, Title 49 Parts 100 to 199 (governing the transport of hazardous materials by rail, air, water and highway). Failure to comply with the reporting requirements contained therein can result in a civil penalty.

INSTRUCTIONS: Submit this report in duplicate to the Director, Office of Hazardous Materials Transportation, DHM-1, Research and Special Programs Administration, Department of Transportation, Washington, D.C. 20590. If space provided for any item is inadequate, complete that item under Section VIII, "Remarks," keying to the entry number being completed. Copies of this form, in limited quantities, may be obtained from the Director, Office of Hazardous Materials Transportation. Additional copies in this prescribed format may be reproduced and used, if on the same size and kind of paper.

I. DESCRIPTION OF CARRIER, COMPANY, OR INDIVIDUAL REPORTING

- A. FULL NAME: _____ B. ADDRESS: _____
 C. LIST YOUR BMCS, MOTOR CARRIER CENSUS NUMBER, REPORTING RAILROAD, ALPHABETIC CODE, OR OTHER REPORTING CODE OR NUMBER (E.G., MERCHANT VESSEL ID#) HERE: _____

II. SHIPMENT INFORMATION (From Shipping Paper or Packaging)

- A. SHIPPER/ORIGIN: _____ B. CONSIGNEE/DESTINATION: _____
 1. Name: _____ 1. Name: _____
 2. Address: _____ 2. Address: _____
 C. SHIPPING PAPER IDENTIFICATION NO.: _____

III. HAZARDOUS MATERIAL(S) SPILLED (NOTE: REFERENCES TO SECTIONS ARE FROM 49 CFR.)

- A. PROPER SHIPPING NAME OF ITEMS (Sec. 172.101, Col 2): _____
 B. HAZARD CLASS (Sec. 172.101, Col. 3): _____
 C. IDENTIFICATION NUMBER (e.g., UN 2764, NA 2020): _____

IV. CONSEQUENCES OF SPILL:

- A. ESTIMATED QUANTITY OF HAZARDOUS MATERIAL RELEASED (Indicate unit of measurement): _____
 B. NUMBER OF FATALITIES AS A RESULT OF SPILL: _____
 C. NUMBER OF INJURIES RESULTING IN HOSPITALIZATION AS A RESULT OF SPILL: _____
 D. NUMBER OF INJURIES NOT RESULTING IN HOSPITALIZATION AS A RESULT OF SPILL: _____
 E. NUMBER OF PEOPLE EVACUATED: _____
 F. ESTIMATED AMOUNT OF LOSS OR PROPERTY DAMAGE, INCLUDING COST OF DECONTAMINATION AND CLEAN-UP: _____
 1. PRODUCT LOSS: _____ 2. CARRIER DAMAGE: _____ 3. THIRD-PARTY PROPERTY DAMAGE: _____
 \$ _____ \$ _____ \$ _____
 4. DECONTAMINATION/CLEAN-UP: _____ 5. OTHER: _____
 \$ _____ \$ _____

G. WERE ANY OF THE FOLLOWING CONSEQUENCES ASSOCIATED WITH THE SPILL?

- VAPOR (GAS) DISPERSION FIRE ENVIRONMENTAL DAMAGE EXPLOSION OTHER _____

V. DESCRIPTION OF INCIDENT

- A. TIME OF INCIDENT: Month: _____ Date: _____ Year: _____ Time: _____
 B. ESTIMATED TEMPERATURE AT TIME OF INCIDENT: _____ C. LOCATION OF INCIDENT: City: _____
 County: _____ State: _____ Route/Street: _____
 D. MODE: HIGHWAY-FOR-HIRE HIGHWAY-PRIVATE RAIL AIR WATER OTHER: _____
 E. TRANSPORTATION PHASE DURING WHICH INCIDENT OCCURRED OR WAS DISCOVERED:
 ENROUTE BETWEEN ORIGIN/DESTINATION LOADING UNLOADING
 TEMPORARY STORAGE (E.G., TRUCK TERMINAL, CONSOLIDATION TERMINAL) OTHER: _____
 F. WAS THE SPILL THE RESULT OF A VEHICLE ACCIDENT? NO (SKIP G) YES (COMPLETE G)
 G. ATTACH COPY OF ALL ADDITIONAL FEDERAL REPORTS REQUIRED TO BE FILED AS A RESULT OF THE ACCIDENT.
 H. ESTIMATED SPEED OF VEHICLE AT TIME OF INCIDENT: _____
 I. INDICATE TYPE(S) OF VEHICLE(S) INVOLVED: TANK TRUCK VAN TRUCK/TRAILER
 FLAT BED TRUCK/TRAILER RAIL TANK CAR BOX CAR BARGE OTHER MARINE VESSEL
 AIRCRAFT OTHER: _____