

**INTERNAL SMALL SPILL REPORTING FORM
(Chemical/Petroleum Products)**

Site Specific Details

- Campus _____
- Building _____
- Specific Building Location: _____
- Date: _____ Time: _____
- Responsible Department: _____
- Individual Reporting Spill: _____

Substance

- Estimated Quantity Spilled: _____
- Remediation Action Conducted: _____
- _____
- _____
- _____
- Waste Removal/Disposal: _____
- _____
- _____
- _____

NOTE: This form is to be used only for small quantity spills of five gallons or less which have not reached floor drains and/or ground water.

KEEP FORMS INTERNALLY IN A DESIGNATED FILE FOR DEP AUDITING.