MCHD 23-101

Governor's Office Emergency Services Hazardous Materials Spill Report

DATE: 10/28/2023 TIME: 1929			RECEIVED BY:		CONTROL#: Cal OES - 23-6769 NRC -		
1.a. PERSON			S:				
1. NAME:		AGENCY:	1	3. PHONE#:	4. Ext:	5. PAG	/CELL:
1 h PERSON		City of Soleda	a (If different fr	om ahove).			
1.D. 1 EKSON 1. NAME:		AGENCY:	(II different II)	3. PHONE#:	4. Ext:	5. PAG	/CELL:
2. SUBSTAN	CE TYPE:	•					
2. a. SUBSTANCE:	b.QTY:>=	=< Amount	Measure	c. TYPE:	d. OTHER:	e. PIPELINE	f. VESSEL >= 300 Tons
1. Industrial	=	1000	Gal(s)	OTHER	organic an	dNo	No
Wine Waste					or		
					inorganic		
2	_				waste.	NI	NT.
2. 2	=					No No	No No
s. g. DESCRIPT	rion.	Dor (Caller A numn	failed during the wash o	lour proces		
h. STOPPAGE/		stopj i. W. IMENT:INV	ped and has been	er flow into the city run n contained. A Contract j. WATERWAY:	or (Green lin k. DR IMPA		the clean up.
Stopped, Cont		No		************	No		
I. MARITIME VESSEL				m. KNOWN IMPA Other	CT Reason for Other: Cones posted		
3. a. INCIDE	NT LOCA						
b. CITY:			OUNTY:	d. ZIP:			
Soledad Mo		Mon	terey County	93960	MONTEREY BAY UNIFIED APCD		
4. INCIDENT	Γ DESCRI	PTION:					
			IME (Military):	c. SITE:		d. REPORTED CAUSE	
		0500		Industrial Plant		Mechanical Property of the Control o	
e. INJURIES			TALITY	g. EVACUATION		EANUP BY:	
No		No		No	Contra	ictor	
6. NOTIFICA		FORMATIO					_
			b. OTHER ON SCENE:		c. OTHE	R NOTIFIED) :
Co Health, Ot	her		Soledad Clear Department	up / Monterey Health			
d. ADMIN. A	GENCY: 1	Monterey County	/ Health	e. SEC. A	AGENCY:		
Department f. ADDITIONAL COUNTY:				g. ADMIN. AGENCY:			
h. NOTIFIC <i>i</i>	ATION LIS	ST:					
Cal GEM:			RWQCB Unit:				
Cal OFC Part				3			
Cal OES Region	i.	AA/CUPA	DTSC, RWOCB 11	S EPA, USFWS, Co/WP, Co	/Hlth. Co/E-Hl	th	
Photo Attachmen	nt:	11100111,	,,,,,				
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