



## Contractor Site Specific Spill Contingency Plan

Contractor Name

Contract Number

General Description

Location

Start Date

### Primary Person (Required)

Name/Title

Primary Phone

Secondary Phone

Address

City

State

Zip Code

### Secondary Person (Required)

Name/Title

Primary Phone

Secondary Phone

Address

City

State

Zip Code

### Primary Contractor Information (Required if subcontractor)

Name/Title

Home Phone

Work Phone

Address

City

State

Zip Code

### Hazardous Material and Quantity (If not applicable, write "N/A")

1

Substance

Quantity

Location

2

Substance

Quantity

Location

3

Substance

Quantity

Location

4

Substance

Quantity

Location

5

Substance

Quantity

Location

### Material Safety Data Sheet(s) (Required)

Material Safety Data Sheet(s) are readily available in the following locations:

Location

### Aboveground Storage Tank(s) (Required)

Will aboveground tank(s) be onsite?

☐ Yes  
☐ No

If yes, contact the following to schedule mandatory monthly compliance inspections.

Russell Godsave, SPCC/Storage Tank Program Manager  
(270) 798-9637, Russ.Godsave@us.army.mil

## Emergency Spill Equipment (Required)

**Mark all emergency spill equipment that will be stored and maintained onsite  
(\* Recommended)**

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Peat*                        | <input type="checkbox"/> Drain Blocker | <input type="checkbox"/> Containment Unit     | <input type="checkbox"/> Disposal Bags*    |
| <input type="checkbox"/> Dry Sweep                    | <input type="checkbox"/> Spill Putty   | <input type="checkbox"/> Baking Soda          | <input type="checkbox"/> Rubber Gloves*    |
| <input type="checkbox"/> Absorbent Pads*              | <input type="checkbox"/> Overpak       | <input type="checkbox"/> Broom*               | <input type="checkbox"/> Respiratory Masks |
| <input type="checkbox"/> Absorbent Socks*             | <input type="checkbox"/> Drip Pan      | <input type="checkbox"/> Dust Pan             | <input type="checkbox"/> Safety Goggles    |
| <input type="checkbox"/> Absorbent Pillow             | <input type="checkbox"/> Spill Pool    | <input type="checkbox"/> Non-Sparking Shovel* | <input type="checkbox"/> Tyvek Suit        |
| <input type="checkbox"/> Other (Please Explain) _____ |  |   |  |

## Spill Response Procedure

1. Be Prepared	2. Be Safe	3. Stop the Source	4. Protect Water
<ul style="list-style-type: none"> <li>Know response material locations</li> <li>Know response procedures</li> </ul>	<ul style="list-style-type: none"> <li>Identify spilled substance / Read MSDS</li> <li>Use personal protective equipment</li> </ul>	<ul style="list-style-type: none"> <li>Plug, roll, or right drums</li> <li>Use emergency shut-off devices</li> </ul>	<ul style="list-style-type: none"> <li>Confine spills with sandbags or booms</li> <li>Block access to stormwater grates</li> </ul>
5. Notify	6. Clean Up	7. Dispose	8. Restock
<ul style="list-style-type: none"> <li>Know response material locations</li> <li>Call Environmental Division or 911</li> </ul>	<ul style="list-style-type: none"> <li>Neutralize hazardous substances</li> <li>Pump or sweep into a safe container</li> </ul>	<ul style="list-style-type: none"> <li>Contain waste water or sweepings</li> <li>Call PPOC for proper disposal</li> </ul>	<ul style="list-style-type: none"> <li>Replace materials and equipment</li> <li>Review the incident for lessons learned</li> </ul>

## Notification Procedure

1. Who to Call	2. When to Call	3. What to Report
<ul style="list-style-type: none"> <li>Fort Campbell Emergency Dispatch 911</li> <li>Range Control (if in training area) 798.3001</li> <li>SPCC/Storage Tank Program 798.9637/9601</li> </ul>	<ul style="list-style-type: none"> <li>Greater than 10 gallons</li> <li>Three (3) square feet</li> <li>Enters any water source</li> </ul>	<ul style="list-style-type: none"> <li>Location and address of release</li> <li>Name and phone number of POC</li> <li>Date and time of release</li> <li>Type and quantity of release</li> <li>Cause and source of release</li> </ul>

## Training

**Oil Handling Personnel (OHP) training** is required regulatory training for any installation personnel including garrison activities, tenants, tenant organizations, and contracted operations that are responsible for the transfer, transport, or handling of Petroleum, Oil, and Lubricant (POL) products in bulk quantities **greater than or equal to 55 gallons**. This training can be scheduled through the SPCC/Storage Tank Program, (270) 798.9637. Records must be maintained for three years as required by regulation 40 CFR 264.16.

**Spill Awareness training** is a best management practice for any installation personnel that may or may not be responsible for the transfer, transport, or handling of POL products. This training provides awareness of the proper procedures for reporting, responding, and preventing POL discharges by becoming familiar with the Spill Prevention Response and Notification Procedure (SPRNP) sign. This training must be complete within two weeks after starting work.

## Signature (Required)

**Failure to mark all three boxes will result in form being disapproved.**

- ☐ I certify that all information provided in this document is true to the best of my knowledge.
- ☐ I have read and agree to follow the Spill Notification Procedure as described in this document.
- ☐ In the event of a discharge, I understand and agree to notify Fort Campbell Environmental Division who will report spill activities to State/Federal agencies as appropriate.

Responsible Person Signature \_\_\_\_\_ Date \_\_\_\_\_

### For Official Use Only

Initials \_\_\_\_\_

Date \_\_\_\_\_

☐ Approve

☐ Disapprove