IDDE INCOMING CALL REPORT FORM

(For Phone Operator)

Date of Illicit Discharge	Time	Duration	
Address/location of Discharge			
Name of person discharging (If applicable)			
Reported by (Phone/online/other)			
Name & phone number of person making the call	or submitting online rep	ort	
Description of Spill or Illicit Discharge			
Source of Illicit Discharge (If known)			-
Is substance hazardous? (Yes/No/Unknown)			
Estimate of Quantity Spilled? \Box 1 to 5 gallons \Box] 5 to 10 gallons □ M	ore than 10 Gallons	
Did the illicit discharge enter a waterbody? (Strear	m, Creek, Canal)		
Did the illicit discharge enter the storm drain syste	em? (Manhole or storm o	drain pipe) □Yes □No	
*See Reporting and Response Flow Chart			