

Hazardous Materials Reporting Form

INCIDENT REPOI	RT BY			
Agency:				Name:
Title:				
Phone #:				
Incident Date:			Time:	
Incident Information (Directions/address, equipment and materials used).				
POTENTIAL RES				
Organization/Con	npany Nar	me:		
Address Line 1:				
Address Line 2:				
City:			County:	
State:				
Office Phone #:				
Cell Phone #:				
Email Address:				
MATERIALS RELEASED				
Material/Chemical Name/C.A.S. No.:				
Estimated Amount Released:				
AGENCIES NOTIF	<u>IED</u>			
LEPC	DPS	ADOT	ARRA	Other

ADDITIONAL INFORMATION (Optional)

Was the National Response Center notified? (1-800-424-8802)

Yes No Unknown

Did you contact ADEQ/AZSERC? (602-771-0397)

Yes No

For <u>Chrome</u> & <u>Firefox</u>, you will need to use the "SAVE AS" button to save the completed form. Once saved to your computer, open your email, attach the PDF to a new email and send to: azserc@azdeq.gov.

To mail the form, click PRINT and mail to:

ADEQ

Attn: AZSERC-ERU

1110 West Washington Street

Phoenix, Arizona 85007