

# Uniform Hazardous Materials Reporting Form

**MAIL TO:** LSP/TESS/RTK Unit  
P. O. Box 66168  
Baton Rouge, LA 70896

Incident # \_\_\_\_\_

Parish: \_\_\_\_\_

Caller's Name: \_\_\_\_\_

Caller's Employer: \_\_\_\_\_

Caller's Phone Number: \_\_\_\_\_

Incident Location: \_\_\_\_\_

Date / Time

Notified: \_\_\_\_\_ / \_\_\_\_\_

Occurred: \_\_\_\_\_ / \_\_\_\_\_

Ended: \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

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Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Range \_\_\_\_\_ Township \_\_\_\_\_ Section \_\_\_\_\_

Company/Responsible Party: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Chemical Involved: \_\_\_\_\_ Qty: \_\_\_\_\_ RQ: \_\_\_\_\_

Hazard Class: \_\_\_\_\_ UN#: \_\_\_\_\_ EHS Solid Liquid Gas

Unusual Event Site Emergency General Emergency

Did material go offsite? Yes No Release to: Land Water Air

Any off-site protective action? Yes No Road Closure Shelter Evacuation

Wind Direction: \_\_\_\_\_ Fire: Y N

Wind Speed: \_\_\_\_\_ Explosion: Y N

Temperature: \_\_\_\_\_ Injuries: Y N # \_\_\_\_\_

Precipitation: None Rain Other : \_\_\_\_\_ Fatalities: Y N # \_\_\_\_\_

Other Agencies Notified: \_\_\_\_\_

Details:

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# UNIFORM HAZARDOUS MATERIALS REPORTING FORM

The following is a detailed explanation of the content and format of the Uniform Hazardous Materials Reporting Form.

- 1) Incident Number.....Issued by the State Police
- 2) Parish.....Parish of occurrence
- 3) Caller's Name.....Name of person making report
- 4) Caller's Phone No.....Callback number which will be answered by caller
- 5) Date & Time Notified.....Date & time of notification as recorded by State Police
- 6) Date & Time Occurred.....Date & time of occurrence as provided by the reporting facility
- 7) Date & Time Secured.....Date & time release ends or is terminated
- 8) Incident Location.....Specific location of the release- street address, latitude & longitude, or range, township & section should be provided
- 9) Company.....Facility owner/operator or transportation company responsible for the release
- 10) Company Address.....Mailing address of reporting facility or transporter
- 11) Chemical(s) Released.....Complete chemical name - no abbreviations, trade names or industry slang terminology will be accepted
- 12) Quantity Released.....Total quantity of the release is to be provided or an estimate of the amount release is to be made. Initial estimates can be revised via an update notification

- 13) RQ - Reportable Quantity.....Designated reportable quantity in Federal and State Regulations
- 14) Hazard Classification.....Designation of the chemical hazards of the material, for example the DOT or NFPA hazard classification
- 15) ID Number.....Transportation only - obtained from the DOT shipping documents
- 16) EHS - Extremely Hazardous Substance.....Designation by USEPA
- 17) Solid - Liquid - Gas.....Physical state of the chemical at the time of release
- 18) Did the material go offsite?.....Question which must be answered by the caller, whether the material escaped beyond the facility  
Gaseous and vapor releases are reportable as escaping offsite
- 19) Released to: Land - Water - Air.....Medium to which the release occurred
- 20) Any off-site protective action?.....Question which must be answered by the caller, recommendation must be provided
- 21) Road Closure - Shelter - Evacuation.....Examples of off-site protective actions
- 22) Wind Direction.....Explanation of direction “to” or “from” must be provided
- 23) Wind Speed.....Self-explanatory
- 24) Temperature.....Self-explanatory
- 25) Precipitation.....Self-explanatory
- 26) Fire - Injuries - Fatalities.....Occurred as a result of the release
- 27) Details.....Any additional information which is communicated in the notification