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ROCKLAND COUNTY DEPARTMENT HEALTH

RCHD Sp. No: 90-137
 NYSEDEC Spill No: 90-06526
 RCHD File No: 155 409

Hazardous Material Incident Report

Notification Date 9-13-90 Time 3:50 a.m. p.m.
 Spill Date 9-12-90 Time _____ a.m. p.m.
 Caller's Name DON TRACY
 Did Caller Notify NYSEDEC (800-457-7362) _____

Received By [Signature]
 ATTY FOR PROPERTY OWNER
 Callers Agency PARKER-NADURT A
 Phone Number 634-6404

Spill Location RAMAPO-HALICOPTER
SMITH RD SPRING VALLEY
 Municipality CLARKSTOWN
 Phone Number _____

Spiller Name UNKNOWN FUEL
 Mailing Address SUPPLIERS
 City/State/Zip _____
 Phone Number _____

Spill Cause

- | | |
|--------------------------|------------------|
| 1. Aban. Drum (call DEC) | 4. Tank Overfill |
| 2. Equipment Failure | 5. Tank Failure |
| 3. Housekeeping | 6. Other |

Material Spilled

- | | | |
|-------------|----------------|------------|
| 1. Gasoline | 4. Diesel | 7. PCB Oil |
| 2. #2 Fuel | 5. Waste Oil | 8. Unknown |
| 3. #4 Fuel | 6. Non PCB Oil | 9. Other |

Notes: SPILL FOUND ON ENVIRONMENTAL ASSESSMENT OF
PROPERTY.

IF EMERGENCY WARRANTED, CALL 44-CONTROL, 354-8300-Person _____ Time _____ a.m. p.m.

Resource Affected

1. Land 2. Ground Water 3. Stormdrain / Stream Name of Waterbody _____
 IF WARRANTED, CALL S.V.W.C. AT 623-1500 Person _____ Time _____ a.m. p.m.
 IF WARRANTED, CALL NYACK W.C. AT 358-0065 Person _____ Time _____ a.m. p.m.

For Tank Failure Only

Tank I.D. # _____ Size _____ Product _____ Leak Rate _____
 Test Type: 1. First System 2. Line 3. Isolate Tank 4. Second System
 Possible Reason for Failure (Notes) _____

NOTES: OWNER OF PROPERTY = PARKER-NADURT ASSOCIATES P/O
JACK PARKER CORP 118 W. 57TH ST NY, NY 10019 CONTACT
WALTER TURKEL TALKS TO B. RAMONDO - Ramapo Helicopter Mfg.

ROCKLAND COUNTY HEALTH DEPARTMENT ACTION Report FINE - TALK.

Letter: 10-10 10-10A Other None
 Inspection
 No Further Action

White Copy: RCHD File
 Yellow Copy: Field Tech, RCHD:
 Pink Copy: Don McGuire, OES