

NYSDEC SPILL REPORT FORM



DEC REGION:	3					SPILL NI	IIMRFR:	95056	13		
SPILL NAME:						_ DEC LEAD:		VPMCCABE			
CALLER NAME: CATHY LEAK CLR'S AGENCY: CITIZEN CALLER'S PHONE: (914) 473-1834						NOTIFIER'S NAME: NOTIFIER'S AGENCY: NOTIFIER'S PHONE:					
SPILL DATE: CALL RECEIV	/ED D	ATE:	08/07/ ⁻		SPILL T		10:00 am 10:10 am		DISPATCH	ER:	
PLACE: STREET:		MEMOR	RIAL NALDI BL		SPILL LOC		COUNTY: TOWN/CITY: COMMUNITY:		Dutchess Poughkeepsie (c) POUGHKEEPSIE		
CONTACT:						_	ACT PHONE:				
	ONT. FACTOR: Abandoned Dru FACILITY TYPE: Unknown			ums		_	REPORTED E	3<u>Y:</u> Citize r	1		
CALLER REI DRUMS N			N DUMP	STER BLACK	& OILY						
MATERIAL UNKNOWN PETROLEUM			CLASS Petroleum		SPILLED 0.00	0.00 REC	OVERED	RESOURC Soil,	CES AFFECTED		
			POTENTIAL DRESS *Update*** ZZ		<u>SPILLERS</u>		CONTACT				
Tank No. Tank	nk Size Material		Cause	Cause So		urce Test Meth		Leak Rate	Gross Failure		
DEC REMAR	RKS:										
<u>PIN</u> 94311			- & A /808		COST C 9094311						
CLASS: B2		CLOSE	DATE:	08/08/1995		MEETS STANDARDS: True					

Created On:

Date Printed: 3/23/2012 Last Updated: 11/09/2005