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CONTRA COSTA HEALTH SERVICES

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HEALTH SERVICES
HAZARDOUS MATERIALS PROGRAMS

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COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N CASE NUMBER: 16 - 08 - 16 - 2

Received Date: 08/16/16 Received Time: 0817 Received By: DV Lead: DV

Incident Date: 8/16/16 Incident Time: ~0715 Assigned to: --- Assigned Date: ---

COMPLAINANT / REPORTING PARTY:

Name: THE DOW CHEMICAL COMPANY RP is from Facility Anonymous

Organization: _____

Primary Phone Number: _____ Secondary Phone Number: _____

Email: _____

Address: 901 LOVERIDGE RD

City: PITTSBURG State: CA Zip Code: 94565

FACILITY / LOCATION OF INCIDENT:

Name: THE DOW CHEMICAL COMPANY CUPA Facility I.D.: 729798

Phone Number: 925-432-5020

Address: 901 LOVERIDGE RD Unit: _____

City: PITTSBURG State: CA Zip Code: 94565

Location Description: DOWOCIL Plant

INITIAL INCIDENT DESCRIPTION: RELEASE OF A CHEMICAL, DOWICIL

INCIDENT TYPE / DESCRIPTION:

Community Warning System Level (Circle Highest Level): N/A 0 1 2 3

FACILITY	ISO / MCAR	TRANSPORTATION	MISCELLANEOUS
<input type="checkbox"/> Fire or Explosion	<input type="checkbox"/> Fatality (one or more)	<input type="checkbox"/> Tank Truck	<input type="checkbox"/> Storm Drain/Creek
<input checked="" type="checkbox"/> Spill or Release	<input type="checkbox"/> > 24 hrs. Hospital, 3 or more people	<input type="checkbox"/> Railroad	<input type="checkbox"/> Drug Lab
<input type="checkbox"/> Startup or Shutdown	<input type="checkbox"/> Flammable Vapor Cloud > 5,000 lbs.	<input type="checkbox"/> On Water	<input type="checkbox"/> Disposal/Abandonment
<input type="checkbox"/> Flaring		<input type="checkbox"/> Pipeline	<input type="checkbox"/> Odor Complaint
<input type="checkbox"/> Upset		<input type="checkbox"/> Fuel Tank	<input type="checkbox"/> Other:

Time Enroute to Scene: 15 min Time Arrived On Scene: 0915 Time Departed From Scene: 1100

REFERRED TO OTHER AGENCY:

DTSC STATE FUNDING (if applicable): CLU/ERER Number: _____	STORMWATER STATUS (if applicable): <input type="checkbox"/> Actual Discharge <input type="checkbox"/> Potential Discharge
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AGENCIES ON SCENE OR NOTIFIED:

Agency Type	Agency	O/N	Contact Person	Phone Number	Case Number
Fire Department	CONFIRE	N	LAMIN GOETSCH		
Law Enforcement					
Air District					
State OES					
FIRE	CONFIRE	N	JIM HOWARD	925-383-5007	

REPORT:

8/16/16: DV and ED On scene to investigate a CSW level 1 notification.

DOW Staff on scene:

- Bill Dubensky - Production Manager
- Dale Backlund - Responsible Care Leader
- Bob Brhode - EHS Lead
- Carlos Echeverria - Responsible Care Leader
- Carlos Deloach - Spec Chemical Ops Lead

Facility states that a vessel containing product (Dowicil), released after a rupture disk burst. Dowicil is an antimicrobial. Safety Data Sheet states off-white powder, however after a visual walk through looks like black tar (See picture #1). Three DOW "people" sent to on-site medical for precautionary screening and determination was non-exposure.

Staff reports release as approx 30 feet high and 500 yards out, all on DOW property.

Cleanup contractors (Hydrochem) are on-site preparing the clean up. Storm drains have been covered.

The Dowicil production plant is currently down, and a second product vessel has been emptied. Off-site DOW staff being brought in to investigate release.

CONFIRE Dispatch reports possible related "fish" odor complaints in Oakley and Antioch at the time of the release.

NOTE: Incident #0710
level ~~0~~ 0717
level 1 0817
onsite 0915

Additional Required Items: Bill of Lading, Request for Invoice, and Site Safety Plan

Report Prepared by: DV