

**FIRST RESPONDER REPORTING FORM**  
**(Print all information)**

*Collect as much of the information on the top half of this form as possible before making initial notification.  
Complete the top and bottom of the form before turning in to Camp Ravenna.*

**Name of individual reporting spill:** \_\_\_\_\_

**When did the spill occur (Date and Time)?** \_\_\_\_\_

**Spill Location (Building or area name / number, indoors or out; if vehicle involved, type and bumper number):** \_\_\_\_\_

**What was spilled?** \_\_\_\_\_ **How much was spilled?** \_\_\_\_\_

**Rate at which material is currently spilling:** \_\_\_\_\_

**Extent of spill travel?** \_\_\_\_\_

**Did the spill reach water (ditch, creek, stream, pond, well head)?** \_\_\_\_\_

**Number of injured personnel and type injuries, if applicable:** \_\_\_\_\_

**Do you need the Fire Department to respond to protect life, property, and environment?** \_\_\_\_\_

-----

**Unit:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Report Date & Time:** \_\_\_\_\_

**On Scene Coordinator Name and Grade:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**How did the spill occur (be specific)?** \_\_\_\_\_

\_\_\_\_\_

**What remedial action was taken?** \_\_\_\_\_

\_\_\_\_\_

**Was soil and absorbent material generated?** \_\_\_\_\_ **How much?** \_\_\_\_\_

**What is the location of the soil and absorbents?** \_\_\_\_\_

**Was the Environmental Office contacted (yes or No, date and time)?** \_\_\_\_\_

**Who did you talk to in the Environmental Office?** \_\_\_\_\_

**Was the site cleared by the Env. Office (Yes or No, date and time)?** \_\_\_\_\_

**Who cleared the site (name and grade, date and time)?** \_\_\_\_\_

*Initial information is critical. Get as much information as you can, but don't hesitate to make the initial notification if a spill is moving or worsening rapidly!*

*This form must be completed for all releases and turned-in to Camp Ravenna Range Control within 24 hours.*

**FIRST RESPONDER SPILL/RELEASE RESPONSE ACTIONS**

Units or contractors performing training or other operations at Camp Ravenna shall be responsible for adhering to the provisions identified in the Camp Ravenna Integrated Contingency Plans (ICP). A copy of the ICP may be obtained from the Camp Ravenna Environmental Supervisor. Following discovery of a spill (any size), the procedures outlined below shall be executed where applicable:

1. **If necessary, initiate evacuation of the immediate area.**
2. **Notify Camp Ravenna Range Control via two-way radio or by calling (614) 336-6041, and report information contained on the “First Responder Reporting Form” if it is known or can reasonably be determined. This form has been copied on the opposite side of this page. If Range Control cannot be reached, contact a Camp Ravenna OSC (listed below).**
3. **Stop spill flow when possible without undue risk of personal injury.**
4. **If trained, contain the spill using available spill response equipment or techniques.**
5. **Make spill scene OFF LIMITS to unauthorized personnel.**
6. **Restrict all sources of ignition when flammable substances are involved.**
7. **Report to the OSC upon his/her arrival to the scene.**
8. **Turn in a completed copy of the Camp Ravenna First Responder Form to Camp Ravenna Range Control for ALL releases, even ones cleaned up by the reporter.**

-----

**TELEPHONE NUMBERS**

When Camp Ravenna Range Control is *not available*, the Camp Ravenna OSC *must be contacted* by the discoverer/first responder following a release if it is in water, at or above a reportable quantity (25 gallons or more of POL), a hazardous or extremely hazardous substance, a hazardous waste, or involves fire, explosion, or is otherwise a major incident.

NAME	JOB TITLE	OFFICE	24 HOUR
Camp Ravenna Range Control	Operations and Training	(614)336-6041	(614) 202-5783
Tim Morgan (Primary OSC)	Environmental Supervisor	(614)336-6568	(330)322-7098
Brad Kline (Alternate OSC)	Environmental Specialist	(614)336-4918	Contact Alternate
Katie Tait (Alternate OSC)	Environmental Specialist	(614)336-6136	Contact Alternate
Joint Forces Command (Alternate POC)	OHARNG Emergency Center	(888)637-9053	(888)637-9053

Off-site (from Camp Ravenna area code 614 phones)  
 Ravenna Dispatch ..... 9-1-330 296-6486

**SEE REVERSE FOR FIRST RESPONDER REPORTING FORM**