

## SPILL RECORD

Date of Spill \_\_\_\_\_ Time of Spill \_\_\_\_\_

Location of Spill \_\_\_\_\_  
(Township/Road) (Block/Stand)

Type of Spill \_\_\_\_\_

Duration of Spill \_\_\_\_\_ Quantity of Spill \_\_\_\_\_

Circumstances and Cause of the Spill

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Description of Containment and Clean-Up Efforts

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Assessment of the Success of the Containment and Clean-up Efforts

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Method Used to Dispose Of or Use the Pollutant and the Location of the Disposal Site

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Any Adverse Effects Observed as a Result of the Spill

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**SPILL RECORD**  
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Additional Notes:

<b>Authority Contacted</b>	<b>Date and Time</b>	<b>Name of Person Contacted</b>
Ministry of Environment		
Ministry of Natural Resources		
Northshore Forest Inc		
Ministry of Transportation *		
Ontario Provincial Police *		

\* if required

Name \_\_\_\_\_ Signature \_\_\_\_\_