SPILL RESPONSE PLAN
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# Record of Review

## OIL SPILL CONTINGENCY PLAN

### Review Log

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Introduction

Plan Contents

This Oil Spill Response Plan (hereafter referred to as the “Plan”) describes organizational lines of responsibility and procedures to be followed when responding to spill incidents at the bulk storage facility or within the transportation network of [INSERT COMPANY NAME].

This Plan contains comprehensive technical and procedural information necessary for effective management of any oil spill response within the geographic boundaries of the response area of the Plan as described in Scope of Plan/Geographic Areas. The plan also defines notification procedures for contacting company management and government authorities. It identifies spill response resources which can be used by [INSERT COMPANY NAME] during a response operation.

Purpose/Objectives

The purpose of this Plan is to help company personnel prepare for and respond quickly and safely to spill incidents originating at the bulk storage facility or within the transportation network. The Plan’s primary purpose is to ensure an effective, comprehensive response and prevent injury or damage to company employees, the public and the environment. The specific objectives of the Plan are to:

- Define alert and notification procedures to be followed when a spill occurs.
- Outline response procedures and techniques to be used during a spill incident.
- Provide guidelines for handling a spill response operation.
- Document resources available to assist with a spill incident.

Regulatory Compliance

This Plan, in addition to implementing company policy, satisfies existing federal/state requirements. (Note: This Plan has been prepared in accordance with Minnesota Statute 115E, also referred to as the Minnesota Spill Bill. This plan has also been prepared to meet the requirement of the U.S. Department of Transportation, Research and Special Programs Administration Interim Final Rule applicable to bulk packaging containing oil, entitled: “Oil Spill Prevention and Response Plans,” published in the February 2, 1993 Federal Register. This rule revises 49 CFR Parts 171, 172, 173, 174, and 176). A copy of the Minnesota Department of Public Safety, Division of Emergency Management “Spill Response Plan Notification Form” has been included as Figure 100-1.

Facility and Company Description
[INSERT COMPANY NAME] operates [INSERT NUMBER] diesel storage tanks and a fleets of transportation tank that are primarily involved in the transportation of petroleum based fluids including gasoline and diesel fuel. Each storage facility is capable of storing [INSERT NUMBER] gallons. Each storage facility has a secondary containment method capable of storing [INSERT NUMBER]% of the total capacity.

Numerous spill control methods are used by [INSERT COMPANY NAME] that includes a combination of work practices and physical controls. Work practices by facility personnel include careful inventory control, daily inspection, and monitoring of all loading and fueling procedures. Secondary containment dikes have been installed around loading/unloading facilities.

The largest foreseeable spill at the facilities would be a catastrophic failure of one of the storage tanks that would not be likely. More likely is a small spill involving loading/unloading causing less than a 50 gallon spill. The company is always prepared for small events with the availability of spill pads and use of containment diking.

The largest foreseeable spill in transportation petroleum products would probably be the upset of a transport tank and consequential leakage due to compromise of the containment vessel. In this event drivers are trained in initial response and notification of emergency personnel. The driver’s primary responsibility is to protect themselves, the public, and notify dispatch of the problem so our emergency procedures can be activated.

The location of each of the storage facilities is on [INSERT COMPANY NAME] property in the cities of [ENTER LOCATIONS]. Our transport tanks travel all legal highways of [INSERT STATE] and therefore an identifiable location for a possible upset of our equipment is not possible. Therefore, we depend upon our resources and contracted services.

**Transportation Network**

[INSERT COMPANY NAME] operates a fleet of [INSERT NUMBER] to [INSERT NUMBER] tractor-trailer units at various periods throughout the year. Products handled include (check all those that apply):

- [ ] Gasoline
- [ ] Diesel Fuels
- [ ] Liquid Asphalt
- [ ] Motor Oil
- [ ] Aviation Fuels
- [ ] Other Marine Pollutants
- [ ] Ethanol
Many of our units are capable of hauling up to [INSERT NUMBER] gallons of product, but loads generally range in the [INSERT NUMBER] to [INSERT NUMBER] gallon range. Transport compartment(s) vary from one hole to five holes of various sizes. All tanks conform to Department of Transportation standards and have passed all inspection standards applicable to their design.

**Company Philosophy/Policy**

[INSERT COMPANY NAME] will retain the responsibility and authority for direction of response operations for spills resulting from its vehicles or facilities. Company management will ensure that all company personnel involved in a spill response will be familiar with their assignments and responsibilities.

**Scope of Plan/Geographic Areas**

This plan includes all [INSERT COMPANY NAME] operational area within and outside of the State of [INSERT STATE].
SPILL BILL RESPONSE PLAN NOTIFICATION FORM

Minnesota Department of Public Safety
Division of Emergency Management

B-5 State Capitol
Saint Paul, MN 55155
(612) 296-2233
TDD: (612) 297-2100

Please complete this form to comply with the notification requirement of Minnesota Statute Chapter 115E, Oil & Hazardous Substance Discharge Preparedness.

*IMPORTANT* If your facility reports under SARA Title III, Section 312, please check the following box, include your ERC ID#, and certify this form. You do not need to complete the body of the form if you are currently reporting under SARA Title III.

FACILITY IDENTIFICATION

Name: ______________________________________________________  SIC Code: ___ ___ ___ ___
Street: ___________________________________________________________________________
City: __________________________________ County: ___________________ State: __________ Zip: ____________

Currently reports under SARA Title III, Section 312:         [   ] Yes        [   ] No

ERC ID#: ______ - ______ - ______ - ______ - ______

FACILITY DESCRIPTION

_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

CONTINUES ON NEXT PAGE
DESCRIPTION OF ACTIVITIES INVOLVING HAZARDOUS MATERIALS

TYPES OF MATERIALS HANDLED

Chemical Name: ___________________________  CAS Number: ___________________________

____________________________________

____________________________________

____________________________________

FACILITY CONTACT

Name: ___________________________  Name: ___________________________

Title: ___________________________  Title: ___________________________

Phone: ___________________________  Phone: ___________________________

24hr Phone: ___________________________  24hr Phone: ___________________________

CERTIFICATION

I certify that the response plan as required by the Minnesota Spill Bill is complete and available at the facility listed above. Completion of this form serves as the required notification to the Division of Emergency Management of plan completion.

Name and Title of Owner/Operator  Signature  Date
Signed or Designated Representative
Emergency Response Action Plan

Spill Detection/Notification Sequence

The following notification sequence is intended as a guide or general rule for reporting most spills. Company policy and good judgment should be used when making these notifications. The sequence may be altered depending on the severity of the spill and the threat to public health and safety.

1. **Company Notifications**

   When an oil spill is detected, the person detecting the release will immediately notify 24 hour Company Dispatch at [INSERT PHONE NUMBER] and report such to the person on duty. If the spill cannot be easily cleaned up by the person making the report, then the 24 hour Dispatch person will immediately contact [INSERT COMPANY NAME] Direct of Safety, currently, [INSERT NAME]. If the spill is small and not reportable by State guidelines, a written report will be immediately faxed to the Director of Safety’s office and at all times a copy of such will be provided to the Director of Operations for his/her information.

   On any spill, the Director of Safety has full authority to activate and implement spill response. **Whenever a question arises as to whether or not to immediately notify the Director of Safety, the notification will be made.** The person taking the initial call will use every method to contact the Director of Safety. This includes Email, cell phone, home phone, or known friends of the Director. If a positive contact cannot be made within five minutes, the person handling the initial report will contact the Director of Operations. At this time, that person is [INSERT NAME]. The same protocol will be followed to locate the second. The third person in line will be the Chief Operational Officer. If none of the above three can be located, an officer or Director can be called.

2. **Local Notifications**

   After the company has been notified of the release, the Director of Safety or his/her designee will immediately notify local fire and police and/or the highway patrol, **insurance company, contracted environment company or other**, as applicable. If the spill occurs at a remote location, it will be the driver’s responsibility to notify local authorities by dialing 911.

3. **Response Contractor Notifications**

   The Director of Safety will be responsible for notifying response contractors, if the spill is one in which cannot be cleaned up by company personnel. Response contractors are listed on page 9 **Emergency Telephone List**.

4. **Regulatory Notifications**

   The Director of Safety will be responsible for notifying or seeing that [INSERT COMPANY NAME] personnel notify all regulatory agencies of spills. All petroleum spills of **five gallons** or more,
Regardless of whether they are from a fixed facility or from a commercial motor carrier, must be reported immediately to the Minnesota Duty Office to meet the reporting requirements of Minnesota Statutes. The duty officer then notifies the appropriate state agencies (MPCA, MN/DOT, Department of Agriculture, Emergency Response Commission Sara Title III, Office of Pipeline Safety, etc.).

This group of agencies includes:

- Minnesota Duty Officer
- Minnesota Pollution Control Agency
- National Emergency Response Center
- Coast Guard
- Information Systems Manager (form 5800)

<table>
<thead>
<tr>
<th>Agency</th>
<th>Phone Number</th>
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<tr>
<td>Minnesota Duty Office</td>
<td>1-800-422-0798</td>
</tr>
<tr>
<td>National Emergency Response Center</td>
<td>1-800-424-8802</td>
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In addition to notifying the Minnesota Duty Office, if the petroleum spill is 25 gallons or greater, or if the spill could potentially reach a waterway, the National Response Center (NRC) must be notified immediately by calling: 1-800-424-8802.

See Page 9 *Emergency Telephone List* for applicable state, regional and regulatory agencies requiring notification.

**Reporting Guidelines**

When making verbal and written notifications, include the following information in the report:

A. Your name
   - Job title
   - Where you can be reached
B. Company name: [INSERT COMPANY NAME]
   - Company address: [INSERT COMPANY ADDRESS]
   - Telephone # [INSERT COMPANY TELEPHONE NUMBER(S)]
C. Identification of substance released
D. Time
   - Date
   - Location of release
E. Quantity of substance transported
   - Quantity of substance released
F. Estimated amount of material contained
G. Medium into which substance has been released
H. Weather conditions as present
I. List actions taken to contain spill to this point
J. List injuries or fatalities
K. Any precautions to be taken as a result of the release
L. Names of any agencies who have already responded
M. Other information relevant to the cause of the release or damage

Telephone notification should be made immediately after a release is discovered and it is determined the release is reportable. Written notification, if required, should be made within a week after the release is discovered. Within 30 days a 5800 report is required to be filed with Information Systems of Washington. In the event of two releases from a facility, each release more than 1000 gallons or a reportable quantity of a hazardous substance, requires a written report to be filed within 60 days to the Regional Administrator of the U.S. EPA including the following information:

- Name, Address, and Telephone Number of the Facility
- Date, Time, and Type of Incident
- Name and Quantity of Waste Material(s) Involved
- Extent of injuries, if any
- Assessment of actual/potential hazards to human health or the environment
- Written reports must be submitted to: (will vary by company location)
  
  U.S. EPA
  Region V
  230 South Dearborn Street
  Chicago, Illinois 60604

Initial Response Procedures

This plan becomes effective immediately upon notification of a spill/leak occurring at the facility or from a transport vehicle. The specific action to control, contain, and cleanup a spill will vary with the type of oil spilled, the location, and the amount. The person observing the spill should analyze the situation and exercise good judgment in formulating the best action plan for the type of spill. It is important that the person reporting makes clear distinction between their opinion and direct observation of the situation. **Useful information is items such as: length and width of the spill, depth of the fluid spill, direction of the wind, location of any water ways, location of any surface run off collections systems, location of vulnerable persons, equipment or supplies needed to contain or clean up the spill, presence or assistance.**

In general, immediately upon becoming aware of a spill, the observer (typically the transport operator or facility personnel) should follow initial response actions.
ISOLATE  Keep people away! Warn them of the danger; keep people away and upwind of the spillage. **Whoever is in charge of the spill containment or clean up has civil authority to request police to restrain or arrest person who endanger themselves or hamper the recovery efforts.**

CONTAIN  Attempt to contain the Hazardous Material but only if it can be done safely. **Sand delivered by dump trucks has proven a valuable tool in the event of quick an deficient diking.**

COMMUNICATE  Notify Authorized Individual ([INSERT NAME(S)], then local police and fire departments, and if necessary, notification of emergency response contractor will be done by Company Authorized Individual.

Be expected to provide:

- Product proper shipping name, class, and UN#
- Extent of spill
- Location
- When it happened
- Phone number where you can be reached
- Let them hang up the phone first so all question are answered
- Follow instructions, keep dispatch informed of changes

Typically, in the event of a large spill that cannot easily be handled by the spill observer, the Authorized Individual will assume control of the situation and be responsible for implementing spill containment, protection, and recovery actions.
# Emergency Telephone List

## COMPANY PERSONNEL

[INSERT IMPORTANT COMPANY PERSONNEL NAMES AND PHONE NUMBER(S)]

<table>
<thead>
<tr>
<th>Name #1</th>
<th>Business Phone Number</th>
<th>Home Phone Number</th>
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<th>Business Phone Number</th>
<th>Home Phone Number</th>
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<tr>
<th>Name #3</th>
<th>Business Phone Number</th>
<th>Home Phone Number</th>
<th>Cell Phone Number</th>
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## LOCAL

Police/Fire........................................................................................................911

## STATE

### Minnesota

Division of Emergency Management, State Duty Officer...............612-649-5451 OR 800-422-0789

### Iowa

Iowa Department of Natural Resources........................515-281-8694

### North Dakota

North Dakota State Radio ......................................................... 800-472-2121

### Wisconsin

Wisconsin DNR, Division of Emergency Government (call collect).........608-266-3232

## FEDERAL

National Response Centre ............................................................... 800-424-8802
Initial Spill Response Guidelines

Purpose

The following spill response checklist has been developed to assist the spill observer and Authorized Individuals in the event of an actual spill. Numerous spill situations were considered in preparing this checklist. In addition to using this checklist in the event of a spill, it should be used as a training tool and reviewed periodically.

This checklist is applicable to a wide variety of potential spill situations, but is by no means an attempt to address every plausible situation. An actual response must always be tailored to meet actual circumstances.

While the need to contain and clean-up the spill is important, personal and public health and safety is the single most important consideration in the event of a spill!

Also, the specific properties of the products involved must always be considered. For example, the risk of fire or explosion is typically much greater for spills of gasoline than for spills of fuel oil. Consequently, for gasoline spills, the need to eliminate all potential sources of ignition and initiate evacuation procedures may warrant a higher priority than for a spill of fuel oil, etc.
Immediate Action Checklist

Spill Observer

1. _____ Immediately discontinue all product transfer operations and warn all persons to stay clear. *Do not allow truck engines to be started under any circumstances!*

2. _____ Shut off loading pumps, determine source of leak and stop by closing valves, if it can be safely done.

3. _____ Eliminates all sources of ignition (i.e., shut down and/or do not attempt to start any engines, use only non-parking tools and equipment)

4. _____ Attend to injured personnel, ensure safety of all others.

5. _____ Verify product type(s), identify material(s), and estimate quantity spilled.

6. _____ Notify the Authorized Individuals/Alternate Authorized Individuals and assist with initial response actions as desired.

7. _____ Contain product and/or keep product away from storm water sewers by blocking or diking to prevent discharge off site, if can be done safely.

8. _____ Keep personnel/responders upwind of spill to avoid exposure to petroleum vapors.

9. _____ Keep spillage area under surveillance until danger of fire or explosion has been eliminated.

Authorized Individuals / Alternate Authorized Individuals

1. _____ Evaluate the situation and assume control.

2. _____ Notify Fire Department and Police Department as appropriate.

3. _____ Make regulatory notifications of spill and proposed actions. Document names of agencies called, persons who received calls, and the times the calls are made.

4. _____ Call out cleanup contractors if necessary. Advise them of the location of the spill, the nature of the spill and the products involved (See Figure 201-3).

5. _____ Advise neighboring property owners and operators of any threat to their property or personnel.

6. _____ Determine whether adjacent streets or roads should be blocked.

7. _____ Determine level of response needed, hazards or product(s) involved, and proper response guidelines to be followed.
8. _____ Direct containment and cleanup activities.

9. _____ Allow adequate time for dissipation of vapors before resuming operations.

*Initiating containment operations as quickly as possible can dramatically reduce the impact of most spills.

Time: ___________ Date: ___________ Personnel Reporting: ________________________________

Driver Name: ________________________________ Location: ____________________________
Immediate Action for Fire or Exposure

FIRE OR EXPLOSION

The following procedure is to be used in the event or threat of a fire or explosion:

1. _____ CALL 911
2. _____ Warn everyone at the facility and initiate evacuation procedures.
3. _____ Close valves, shut down pump, etc. (only if it can be SAFELY done!)
4. _____ Attempt to extinguish the fire using hand-held or wheeled fire extinguishers only if the fire is small and there is little risk of the fire growing out of control rapidly. Only those employees that have been trained on the use of fire extinguishers may attempt to extinguish a small fire.

Note: For a large fire, efforts should be made to keep adjacent tanks and building cooled to prevent additional fires and/or explosions.
Oil Spill Documentation Form
(for internal use)

Name: ___________________________ Telephone Number: _______________________

Release Location: ____________________________________________________________
(attach site map with leak identified)

Duration: From: ___________ am/pm To: ___________ am/pm Date: _______________

Time of discovery of release: ___________ am/pm

Material Released: __________________________ Components: _______________________

Spilled to (circle all that apply): Air Drain Pond On-site Soil Storm Water Ditch
Concrete or Asphalt Pad Other: ________________________________

Estimated Quantity: __________________________ Into Surface Water: YES NO

Prevailing weather conditions (e.g., wind speed and direction): __________________________

Description of the release (including cause):
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Corrective Actions Taken:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Could Spill Have Been Prevented? Explain:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
Has the area been completely secured:…………………………………….. Yes No Unknown

Are there any railroad or utility companies to be notified:…………………….. Yes No Unknown

Have or will any law enforcement groups be involved:……………………… Yes No Unknown

If local response agencies are involved, have they been informed of the Product’s characteristics and handling precautions:…………………………… Yes No Unknown

Were there any injuries or fatalities:………………………………………… Yes No Unknown

Is this a DOT reportable release:……………………………………………… Yes No Unknown

Agencies or individuals notified:

1. __________________________ By: __________________________ Time: _________ am/pm
2. __________________________ By: __________________________ Time: _________ am/pm
3. __________________________ By: __________________________ Time: _________ am/pm
4. __________________________ By: __________________________ Time: _________ am/pm

Signature: ________________________________ Date: _______________________

Title: ________________________________