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HEALTH SERVICES DIRECTOR
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DIRECTOR OF HAZARDOUS MATERIALS PROGRAMS



Contra Costa Hazardous Materials Programs

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ccchazmat@cchealth.org www.cchealth.org/hazmat/

COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N			CASE NUMBI	ER:	220525 — 01				
Received Date: 05/25/22	Received Time: 4:13 PM	_ Received By: HW		Lead:_T	Lead: TAJ				
Incident Date: 5/25/22					Assigned Date:				
COMPLAINANT / REPORTING	S PARTY:								
Name:			🗆 RP is fro	om Facility	□ Anonymous				
Organization: PHILLIPS 66			Cal OES # (if applicable)						
Primary Phone Number: Secondary Phone Number:									
Email:									
Address:	444-44								
City:		State:	Zip	Code:					
FACILITY / LOCATION OF INC									
Name: Phillips 66 Co Rodeo		CUPA Facility I.D.: 771636							
Phone Number:									
Address: 1380 SAN PABLO	AVE	Unit:							
city: RODEO			CA Zip (Code: 94572	2				
Location Description:									
INITIAL INCIDENT DESCRIPTION:									
RELEASE OF HYDROCARBON TO BAY									
INCIDENT TYPE / DESCRIPTION	ON:		0	0000					
Community Warning System Level (Circle Highest Level): N/A 0 1 2 3									
FACILITY	ISO / MCAR	 	PORTATION		LLANEOUS				
	Fatality (one or more) > 24 hrs. Hospital, 3 or	│ □ Tank		□ Storm Di	1 1				
□ Startup or Shutdown	more people				/Abandonment				
	Flammable Vapor Cloud	□ Pipelir		□ Odor Co					
□ Upset	> 5,000 lbs.	□ Fuel T	ank	□ Other:					
Time Enroute to Scene:	Time Arrived On Scen	Time De	Time Departed From Scene:						
REFERRED TO OTHER AGENCY:									
									
SIAC	***************************************								



[•] Contra Costa Behavioral Health Services • Contra Costa Emergency Medical Services • Contra Costa Environmental Health & Hazardous Materials Programs •

[•] Contra Costa Health, Housing & Homeless Services • Contra Costa Health Plan • Contra Costa Public Health • Contra Costa Regional Medical Center & Health Centers •

CLO/ERER Number: □ Actual Discharge □ Potential Discharge									
AGENCIES ON SCENE OR NOTIFIED:									
Agency Type	Agency	O/N	Contact Person	Phone Number	Case Number				
Fire Department									
Law Enforcement									
Air District									
State OES									
REPORT:									
a message requicced SHMP received 27 gallons of a display and a marine Terminal rate reduced by HMS Amanda A neighborhood dedevices she broader	n I received the initial neesting a callback. Assistived a callback number diesel-like product was reduced as released occurred 16:15 and stopped at 1 ackerman did some air rescribed as "tar-like." We ught with her, they may be CWS Notification Details.	stant Direct r via the preleased in red. The line 6:50. Line monitoring hile there not be co	ctor Adam Springer aging system. According to water. There we ne from which the re was clamped and in Rodeo as there a might have been s	called back Phillip ording to Phillips 6 ere no detectable elease originated cleanup underwards some odors ome minor hits or	ps 66 after 66, approximately odors at the had the flow by.				

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

Report Prepared by:

STORMWATER STATUS (if applicable):

Trisha A. Johnson 5/26/2022

Rev. August 2020

DTSC STATE FUNDING (if applicable):