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CONTRA COSTA
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CONTRA COSTA HEALTH SERVICES

TH/AS/SO/OU

COMPLAINT, INCIDENT, AND NOTIFICATION REPORT FORM

Type (Circle One): C I N

Received Date: 3/29/17 Received Time: 1945 Received By: TH Lead: TH

Incident Date: Same Incident Time: Same Assigned to: _____ Assigned Date: _____

CASE NUMBER: 170329-04

COMPLAINANT / REPORTING PARTY:

Name: Fire Marshall Marshall RP is from Facility Anonymous

Organization: CON FIRE

Primary Phone Number: (408) 390-3343 Secondary Phone Number: _____

Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

FACILITY / LOCATION OF INCIDENT:

Name: Private Residence - Deceased CUPA Facility I.D.: _____

Phone Number: _____

Address: 283 Tono Ln. Unit: _____

City: Pleasant Hill WC State: CA Zip Code: 94597

Location Description: _____

INITIAL INCIDENT DESCRIPTION:

Tampered propane Tank from
suicide / Fire

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 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: _____ Time Arrived On Scene: _____ Time Departed From Scene: _____

REFERRED TO OTHER AGENCY:

DTSC STATE FUNDING (if applicable):

CLU/ERER Number: _____

STORMWATER STATUS (if applicable):

Actual Discharge Potential Discharge



• Contra Costa Alcohol and Other Drugs Abuse Services • Contra Costa Emergency Medical Services • Contra Costa Environmental Health • Contra Costa Health Plan •
• Contra Costa Hazardous Materials Programs • Contra Costa Mental Health • Contra Costa Public Health • Contra Costa Regional Medical Center • Contra Costa Health Centers •

-OVER-

AGENCIES ON SCENE OR NOTIFIED:

Agency Type	Agency	O/N	Contact Person	Phone Number	Case Number
Fire Department	CON FIRE		F.M. Marshall		
Law Enforcement					
Air District					
State OES					

REPORT:

Resident @ senior Appt's Drilled thru a full 5 gal (BBQ size) w/ a power drill and steel bit. Drill Ignited propane causing a fire. Resident was killed in the incident. CON FIRE Requested Hazmat assistance post fire suppression in dealing w/ the 5c full propane tank. Propane Tank secured for transport on liftgate of Hazmat Box Truck. CON FIRE ENGINE behind. Transported to a safe open air location w/ gravel lot and large ponding of H₂O. Tank allowed to vent empty/safe and taken by Hazmat for disposal. Charged hose line utilized w/ (2) FF's for back up.

- call 1945
- Dispatched team 2000 AS/50 to scene TH/OU Trucks
- 2020 AS contact w/ CON FIRE.
- 2040 TH/OU on scene.
- 2100 site safety brief/transport of tank
- 2130 site safety brief / venting of tank
- 2200 Hazmat Depart scene
- 2240 Trucks returned / Incident complete.

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

Report Prepared by:

