Spill Report Form

Please submit this form to spillreports@poncatribe-ne.org within 48 hours of the spill

Date the spill was noticed:/	Time:	AM/PM
Name(s) of the reporting person(s):		
What material was spilled:		
How much was spilled (estimation if actual is not kn	nown):	
Where was it spilled (location and also what substra	ate, i.e. concrete, grass, dra	in, water, etc)
Cause and duration of the spill:		
Is the spill secured (no longer releasing into the env	ironment): Yes	No
Any injuries: Yes No	Evacuations:\	esNo
Materials used to clean the spill:		
Any supplies need		
restocked:		

Any questions or concerns please contact the Environmental Department at 402-326-3117