

8. Slick Description and Movement:			
Size: Length and width (yards or nm): Percentage of that area covered:	Odor: <ul style="list-style-type: none"> • Noxious • Undetectable • Light • Other (Specify) 	Color (oil): <ul style="list-style-type: none"> • Silver transparent • Rainbow • Dull brown • Dark Brown • Brown-orange • Gray • Blue • Black • Mousse • Other 	Slick Movement: Set (degrees true toward): Drift (knots):
10. Areas Damaged or Threatened:			
Body of water oil entered (directly or indirectly):	Area or resources threatened or affected:	Nature and extent of damage to property, wildlife, or other natural resources:	
Telephonic Report to the National Response Center: (1-800-424-8802) <i>(Navy policy requires Navy commands to report by voice to the U.S. Coast Guard National Response Center (800- 424-8802 or 202-267-2675) any discharge of oil which causes a sheen upon or discoloration beneath the surface of the navigable waters of the United States or any discharge of oil which threatens to reach the navigable waters of the U.S. See OPNAVINST 5090.1B, CH2, 10-4.2.1)</i>			
Telephonic report to NRC was made. Provide NRC Report Number:	<ul style="list-style-type: none"> • Telephonic report to NRC was <u>not</u> made. Provide reason why: <ul style="list-style-type: none"> • Spill beyond 12nm from US shores • No threat to waters of U.S. • Other (Specify): 		
12. Samples <ul style="list-style-type: none"> • Samples were not taken • Samples were taken (identify location from which taken and collecting officer's name, rank, and agency): 	13. Containment Method (Planned/Used): (Indicate equipment planned/used) <ul style="list-style-type: none"> • Boom • Camel • Absorbents • None (state reason): • Ship's hull • Water spray • Other (Specify) 		
14. Spill Removal Method: (Equipment planned/used) <ul style="list-style-type: none"> • Rapid response skimmer • Portable skimmer • Disperents • Other (Specify): • Dip 3001 skimmer • Absorbents • Trucks/pumps 	15. Volume of Product Recovered in gallons (Decanted pure product):		
16. Parties Performing Spill Removal:			
Lead organization in charge: <ul style="list-style-type: none"> • Navy • USCG • EPA 	Other parties involved: <ul style="list-style-type: none"> • Commercial firms • SUPSALV • Other supporting Navy activities: • Federal/State/local agencies:: 		
17. Federal, state, or local regulatory activity during this incident: (Provide name and agency of official attending on-scene or making telephonic inquiries. State whether officials boarded vessel and include date, time, and spaces inspected, persons interviewed, etc.)	18. Assistance required/additional comments:		

<p>19. Lessons Learned: (How could this spill have been avoided?)</p>	<p>20. Activity Contact for Additional Information: (List name, rank/rate, command, code, e-mail address, DSN and/or commercial telephone numbers)</p>
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NOTIFICATION			
1. • Emergency Response Center	POC:	Date/Time:	
2. • CDO	POC:	Date/Time:	
3. • NOSC	POC:	Date/Time:	
4. • NCIS	POC:	Date/Time:	
5. • USCG	POC:	Date/Time:	
6. • EPA/State/Local	POC:	Date/Time:	
7. • Oil Spill Message	Reporting Command:	DTG:	• Copy attached
8. • OJAG Admiralty Division (Telephone at COM (202) 685-5040 or DSN prefix 325)			
9. • Other. Specify:			

IMPACT	
1. • Air corridors closed (Specify)	2. • Roads closed (Specify)
3. • Evacuation(s) ordered/conducted	4. Number evacuated:
5. • Personal injures	6. Number of injuries:
7. • Fatalities	8. Number of fatalities:
9. • Property damage	10. Estimated amount: \$
11. • Natural resource damage ** (e.g., oiled or dead birds, fish, marine mammals, shellfish beds, plants)	12. Estimated amount: \$
13. • Other. Specify:	14. Estimated amount: \$
15. • Claim(s) likely against the United States. (If so, notify installation/vessel Staff Judge Advocate)	16. Type of claim(s) (Specify): Admiralty FICA Other:

** If natural resource damages are suspected, complete Natural Resource Damage Worksheet and attach it to this investigation.

ENCLOSURES
<ul style="list-style-type: none"> • No Enclosure(s) 1. 2. 3. 4. 5. 6. 7. 8. 9. 10.

WITNESSES (Use additional sheet if required)

<u>Name</u>	<u>Rank/rate</u>	<u>Command</u>	<u>Telephone #</u>	<u>E-mail</u>
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- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

ADDITIONAL INFORMATION (e.g., additional findings of fact, actions taken to correct/mitigate the situation, other additional relevant information)

- See Attached

INVESTIGATIVE and RESPONSE COSTS			
Title/Position: Investigator	Grade/rank:	Time spent:	Total:
Title/Position:	Grade/rank:	Time spent:	Total:
Title/Position:	Grade/rank:	Time spent:	Total:
Title/Position:	Grade/rank:	Time spent:	Total:

RECOMMENDATION(S) (Investigator/CDO)	
<ul style="list-style-type: none"> • Referral for further Investigation. • Facts do not warrant further investigation. • Incident subject to investigation by other command/agency. Specify: • Other. Specify: 	
Comments:	
Typed name of Investigator/CDO:	Rank/rate:
Signature of Investigator/CDO:	Date:

Submit completed worksheet to installation Staff Judge Advocate and file copy to the installation environmental storefront manager.

FIRST ENDORSEMENT (Staff Judge Advocate)		
<ul style="list-style-type: none"> • I concur with Investigator's recommendation(s) • I do not concur with Investigator's recommendation • Other (Specify): 	Recommendation: <ul style="list-style-type: none"> • Close Investigation • Further investigation required <ul style="list-style-type: none"> • Command Investigation • Litigation Report • Admiralty Letter Report • Other(Specify): • Refer investigation to (Specify): 	
Typed name of Staff Judge Advocate (or designee):	Grade:	Command:
Signature of Staff Judge Advocate (of designee):	Date:	• Copy to NOSC

ACTION (Installation Commander)		
<ul style="list-style-type: none"> • I concur with Investigator's recommendation(s) • I do not concur with Investigator's recommendation • Other. Specify: 	Action: <ul style="list-style-type: none"> • Investigation closed • Further investigation ordered • Command Investigation <ul style="list-style-type: none"> • Litigation Report • Admiralty Letter Report • Other(Specify): • Investigation referred to: • Other. Specify: 	
Typed name of Installation Commander (or designee):	Grade:	Command:
Signature of Installation Commander (of designee):	Date:	

COPY TO:	
Copy to:	
<ul style="list-style-type: none"> • FOSC • NOSC • Command (Specify): • OJAG Code 11 (Admiralty) Division • Other (Specify): 	<ul style="list-style-type: none"> • Staff Judge Advocate • Environmental PM • Environmental Storefront

NOSC USE ONLY		
Report #:	Date received:	

