04-05-427855 State of Wisconsin Substance Release Notification Form

24-Hour Emergency Hotline Nu	mber: 1-800-943-0003	e Release	Notification For	Form 4400-91 Rev. 11-9	
Date and Mil. Time of Incident 2.9. 99	-9-99 12:00	Date and M	Iil. Time Reported	2-9-99 machine	
Person Reporting Jule Wistz			Telephone # (Telephone # (970) 438 - 2087	
Representing Agency, Firm, or Citize					
Responsible Party for					
Responsible Party Fort James Contact Name July with			Telephone # (Telephone # (G20) 438 - 208 Z	
Address PO Box 19130			City, State, Zip Code Green Buy WI 54307		
Substance Involved Diesel Ful	Amount & Units Relea	c 20	Recovered Is the	his a 304 (11004 42 USC) spill?	
□ Solid □ Semisolid □ Liquid	□ Gas Color _		Odor	r	
Exact Location (inc. address, facility name,	mileage, bldg. #, etc.) 191 Building by	9 5 B	Coadway		
City GREEN	Gas Color Odor Building by gate #4 County Brown Lat/long				
DNR Region NER					
Cause of Incident 7 Ruck 60	ptura Sadau	CONC			
Spilled Substance Impact To: Check (✓) all that apply ☐ Air ☐ Potential ☐ Groundwater ☐ Potential ☐ Surface Water ☐ Potential ☐ Name: ☐ Storm Sewer ☐ Potential ☐ Sanitary Sewer ☐ Potential ☐ Concrete/Asphalt ☐ Potential ☐ Private Well ☐ Potential ☐ Contained/Recovered ☐ Other:	Spill Source: □ Transportation Accident, Fuel Supply Tank Spill □ Transportation Accident, Load Spill □ Industrial Facility □ Paper Mill □ Chemical Co. □ Ag Coop/Facility/Food Factory/Facility □ Gas/Service Station/Garage/Auto Dealer, Repair Shop □ Pipeline, Terminal, Tank Farm, Oil Jobber/Wholesaler □ Public Property (city, state, church, school, etc.) □ Utility Co., Power Generating/Transfer Facility □ Private Property (home/farm) □ Construction, Excavation, Wrecking, Quarry, Mine □ Airport Facility □ Railroad Facility □ Other □ Other: □ Other:				
Injuries?					
Are there any resource damages?	Yes No Potential V	Vhat kinds?			
☐ ☐ Local Law Enforcement ☐ ☐ LEPC or Local Emer. Gov. ☐	☐ Local DNR ☐ Div. Emer. Gov.	 □ □ EPA □ □ Nat'l R □ □ Chemtra 	esp. Ctr. 800-442-8 ec 800-424-9300	Incident Commander, if known: Phone:	
Prepared By:(Print) R. N. Ch	ONENT (Sign)		Date:	Rpt'd to DATCP? □Yes	
Person Notified:	Regio	on Notified:	Time:	Date:	
Invstgtd By:(Print)	(Sign)		Date:	Site Closed Yes No	
Spill Coordinator Signoff:	Date: 2-10-99	Transferred □Yes; Case	d to ERP?	NFA Letter Sent? □Yes □No Spill Packet Sent? □Yes □No	
				☐ Additional Comments on Reve	