

Spill ID Number

Y Y M M D D 0-99

Date of Incident 09/05/90	Day of Week Wed	Time of Incident 4:35	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	Reported By (Name) Stevens Point P.D.	Telephone Number (715) 346-1400
Date Reported 09/05/90	Day of Week Wed	Time Reported 4:50	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	Agency or Firm Reporting " " "	Reported thru Div. Emergen. Gov't. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Substance Involved Unleaded gasoline	Quantity 25	Units Gallons	Person or Firm Responsible Rawlin's Fuels	Contact Name Mark Matthiller	Telephone Number (715) 423-5020
Physical Characteristics				Address - Street or Route	
<input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid Color _____				911 West Grand Ave.	
<input type="checkbox"/> Semisolid <input type="checkbox"/> Gas Odor _____				City, State, Zip Code	
Cause of Incident Overflow of storage tank				Wisconsin Rapids, WI 54494	
Exact Location Description (intersection, mileage, etc.) 3449 Church St. Stevens Point				Action Taken By Spiller	
County Location Portage NE, SW, 04, T 23 N, R 08 E				<input type="checkbox"/> No Action Taken <input type="checkbox"/> No Notification <input type="checkbox"/> Investigate	
DNR Dist NCD	DNR Area WNR	Groundwaters Affected <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Potential		<input checked="" type="checkbox"/> Containment; Type absorption	
Surface Waters Affected <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Potential		Name of Surface Water N/A		<input type="checkbox"/> Cleanup; Method _____	
Date District Notified 09/05/90	Day of Week Wed	Time District Notified 4:50	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.	<input type="checkbox"/> Amount Recovered _____	
District Person Notified Barry D. Meister		Telephone Number (715) 344-2752		<input type="checkbox"/> Monitor _____	
Date Investigated 09/06/90	Day of Week Wed	Time Investigated 8:30	<input checked="" type="checkbox"/> A.M. <input type="checkbox"/> P.M.	<input type="checkbox"/> Contractor Hired; Name _____	
Person Investigating Barry D. Meister		Telephone Number (715) 344-2752		<input type="checkbox"/> Other Action _____	
Action Taken By DNR					
<input type="checkbox"/> No Action Taken <input checked="" type="checkbox"/> Investigation <input type="checkbox"/> Supervise/Conduct Cleanup					
<input type="checkbox"/> Spiller Required To Take Action; Type _____					
<input type="checkbox"/> Contractor Hired By DNR; Name _____					
<input type="checkbox"/> Amount Recovered _____					
<input type="checkbox"/> 29.29 Enforcement					
Other Agencies on Scene					
Local ST. POINT P.D. + F.D.					
State _____					
Federal _____					
Additional Comments: Recovered from pavement w/oil dry To be hauled to land fill					

Person Filing This Report (print name)

Barry D. Meister

Signature

Barry D. Meister

Date Signed

09/06/90