SPILLS

All accidents involving products collected under this program must be reported to the program office at 1-888-772-9772.

Small spills can be dealt with by depot workers using the following six steps.

1. Ensure personal safety
   Put on the protective gear provided in the spill kit.

2. Stop the flow
   Place the spilling container upright or in a position where the least amount will spill or place something under it to catch the spill.

3. Secure the area
   Restrict entry into the spill area to those controlling the spill.

4. Contain the spill
   If necessary, protect drains, then place absorbent on the spill or place barriers to keep the spill inside a small area.

5. Clean up the spill
   Collect all the spilled material with absorbent and place it in plastic bags along with any used spill control supplies, contaminated protective clothing and cleaning materials.

   Seal the bags and place them in a tote for disposal.

   Put a label on the tote to identify the contents and place the tote in the appropriate tubskid.

   Remove any clothing that may be contaminated. Wash thoroughly to remove spilled material from your hands or body. Replace any used spill control supplies.

6. Report the spill
   Report the spill to the program office at 1-888-772-9772. File an Emergency and/or Incident Report form immediately with Product Care.
**DEPARTMENT NAME:** _____________________________

**DEPARTMENT LOCATION:** _____________________________

**EMPLOYEE NAME:** _____________________________

**TELEPHONE NUMBER:** __________________________

**DATE OF INCIDENT:** ________________  **TIME OF INCIDENT:** ________________

Check one of the following emergencies and fill out the appropriate information:

**Attach a separate form if you need more space**

**SPILL?**

- [ ] Spill in parking lot
- [ ] Spill in reception area
- [ ] Spill caused chemical reaction, if so list the chemicals involved (if known)

- [ ] Customer caused the spill
- [ ] Type of surface spilled on  
  - [ ] gravel
  - [ ] asphalt
  - [ ] concrete
  - [ ] wood

- [ ] Spill in other area ________________

**FIRE?**

- [ ] Fire in parking lot
- [ ] Fire in paint aerosol tubskids
- [ ] Fire Department called
- [ ] Fire in any other location ________________

- [ ] Fire in reception area
- [ ] Fire in paint tubskids
- [ ] Fire extinguishers used (If so, the unit(s) must be serviced)

**PROPERTY DAMAGE?**

- [ ] Equipment Damaged
- [ ] Tubskid damaged
- [ ] Building Damaged
- [ ] Other property damaged

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**GO TO PAGE 2**
PRODUCT CARE STEWARDSHIP PROGRAM
EMERGENCY AND/OR INCIDENT REPORT

(Page 2 of 2)

Describe in detail the incident, or accident. This includes exposure to chemicals, smoke, chemical inhalation and bodily injuries, as well as property damage. If a spill occurred, what was spilled, and any other information that is important to this incident

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Describe your response effort (what did you do?)

____________________________________________________________________________

____________________________________________________________________________

Was staff wearing protective gear

☐ YES  ☐ NO

Was anyone hurt?

☐ YES  ☐ NO

If yes, please attach a copy of the WCB Form and Record to this report

What are your suggestions to help prevent this incident from happening in the future?

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Telephone and report the incident immediately on the emergency telephone line. Please complete the information and fax or mail (and other forms if applicable) to Product Care. The mailing address, fax, and emergency telephone number are below:

12337 82A Ave., Surrey, BC V3W 0L5  FAX: (604) 592-2982

EMERGENCY TELEPHONE (24 HOURS)  1-888-772-9772

Employee name:_______________________________  Signature____________________________

Manager name:_______________________________  Signature____________________________