



U.S. Department of Transportation
Research and Special Programs Administration

Hazardous Materials Incident Report

Form Approval OMB No. 3137-0039

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 2137-0039. The filling out of this information is mandatory and will take 96 minutes to complete.

INSTRUCTIONS

Submit this report to the Information Systems Manager, U.S. Department of Transportation, Pipeline and Hazardous Materials Safety Administration, Office of Hazardous Materials Safety, DHM-63, Washington, D.C. 20590-0001. If space provided for any item is inadequate, use a separate sheet of paper, identifying the entry number being completed. Copies of this form and instructions can be obtained from the Office of Hazardous Materials Website at <http://hazmat.dot.gov>. If you have any questions, you can contact the Hazardous Materials Information Center at 1-800-HMR-4922 (1-800-467-4922) or online at <http://hazmat.dot.gov>.

PART I - REPORT TYPE

1. Incident Id: I-2019020373
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident: 07/19/2018
4. Time of Incident (use 24-hour time): 17:00
5. Enter National Response Center Report Number (if applicable): 1218914
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
City: YUKON
County: CANADIAN
State: OK
Zip Code: (if known): 73099
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
1/4 MILE E OF BANNER ROAD
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
Name: SIMONS PETROLEUM, LLC
Street: 201 N RUPERT ST
City: FORT WORTH
State: TX
Zip Code: 76107-1460
Federal DOT Id Number: 335576
Hazmat Registration Number: 060718550318AC
11. Shipper/Officer:
Name: SIMONS PETROLEUM, INC.
Street: 621 N. MORGAN ROAD
City: OKLAHOMA CITY
State: OK
Zip Code: 73127-7158
Waybill/Shipping Paper:
Hazmat Registration Number:
12. Origin (if different from shipper address)
Street: 621 N. MORGAN ROAD
City:
State: OK
Zip Code: 73127
13. Destination:
Street:
City:
State:
Zip Code:
14. Proper Shipping Name of Hazardous Material: DIESEL FUEL
15. Technical/Trade Name: DIESEL FUEL
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) NA1993

18. Packing Group: (if applicable) III

19. Quantity Released: (Include Measurement Units) 150 Liquid - Gallon

20. Was the material shipped as a hazardous waste? False
If yes, provide the EPA Manifest Number:

21. Is this a Toxic by Inhalation (TIH) material? False
If yes, provide the Hazard Zone:

22. Was the material shipped under an Exemption, Approval, or Competent Authority Certificate? False
If yes, provide the Exemption, Approval, or CA number:

23. Was this an undeclared hazardous materials shipment? False

PART III - PACKAGING INFORMATION

24. Check Packaging Type (check only one - if more than one, list type of packaging, copy Part III, and complete for each type:
Cargo Tank Motor Vehicle (CTMV)

25. See instructions and enter the appropriate failure codes found at the end of the instructions. Be sure to enter the codes from the list that corresponds to the particular packaging type checked above. Enter the number of codes as appropriate to describe the incident.

Enter the most important failure point in line 1. If there are more than two failure points, provide in this format in part VI.

What Failed: - 137-Manway or Dome Cover; 159-Vent

How Failed: - 305-Crushed; 308-Leaked; 312-Torn Off or Damaged

Causes of Failure: - Human Error; Rollover Accident; Vehicular Crash or Accident Damage

26a. Provide the packaging identification markings, if available.

Identification Markings: NO MARKINGS PROVIDED- PLACARD-1993

(Examples: 1A1/Y1.4/150/92/USA/RB/93/RL, UN31H1/Y0493/USA/M9339/10800/1200, DOT - 105A - 100W (RAIL), DOT 406 (HIGHWAY), DOT 51, DOT 3-A)

26b. For Non-bulk, IBC, or non-specification packaging, if identification markings are incomplete or unavailable, see instructions and complete the following:

Single Package or Outer Packaging:

Single Package or Inner Packaging (if any):

Packaging Type:
Material of Construction:
Head Type (Drums only):

Packaging Type:
Material of Construction:

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:

Single Package or Inner Packaging (if any):

Package Capacity:
Amount in Package:
Number in Shipment:
Number Failed:

Package Capacity:
Amount in Package:
Number in Shipment:
Number Failed:

28. Provide packaging construction and test information, as appropriate:

Manufacturer:	POLAR	Manufacture Date:	12/02/2008
Serial Number:	1PMA244269500752	Last Test Date:	05/07/2018
Material of Construction:	ALUMINUM (if Tank Car, CTMV, Portable Tank, or Cylinder)		
Design Pressure:	3.3 PSI (if Tank Car, CTMV, Portable Tank)		
Shell Thickness:	0.176 INCH (if Tank Car, CTMV, Portable Tank)		
Head Thickness:	0.25 INCH (if Tank Car, CTMV)		
Service Pressure:	(if Cylinder)		
If valve or device failed:			
Type:			
Model:			
Manufacturer:			

29. If the packaging is for Radioactive Materials, complete the following:

Packaging Category:	
Packaging Certification:	
Certification Number:	
Nuclide(s) Present:	Transport Index:
Activity:	
Critical Safety Index:	

PART IV – CONSEQUENCES

30. Result of Incident (check all that apply):

- | | | | |
|---------------------------|-------|--|-------|
| - Spillage: | True | - Fire: | False |
| - Explosion: | False | - Material Entered Waterway/Storm Sewer: | False |
| - Vapor (Gas) Dispersion: | False | - Environmental Damage: | False |
| - No Release: | False | | |

31. Emergency Response: The following entities responded to the incident: (Check all that apply)

- Fire/EMS Report #: False
Police Report #: False
In-house cleanup: True
Other Cleanup: False

32. Damages Was the total damage cost more than \$500?

True

If yes, enter the following information: (If no, go to question 33.)

Material Loss: \$ 0.00
Carrier Damage: \$ 0.00
Property Damage: \$ 0.00
Response Cost: \$ 0.00
Remediation/Cleanup Cost: \$ 20,000.00
(See damage definitions in the instructions)

33a. Did the hazardous material cause or contribute to a human fatality?

False

If yes, enter the number of fatalities resulting from the hazardous material:

Employees:
Responders:
General Public:

33b. Were there human fatalities that did not result from the hazardous material?

False

If yes, how many?

34. Did the hazardous material cause or contribute to personal injury?

False

If yes, enter the number of injuries resulting from the hazardous material:

Hospitalized (Admitted Only):

Employees:
Responders:
General Public:

Non-Hospitalized:

(e.g.: On site first aid or Emergency Room observation and release)

Employees:
Responders:
General Public:

35. Did the hazardous material cause or contribute to an evacuation?

False

If yes, provide the following information:

Total number of general public evacuated:
Total number of employees evacuated:
Total evacuated: 0
Duration of the evacuation:

36. Was a major transportation artery or facility closed?

False

If yes, how many?

37. Was the material involved in a crash or derailment?

True

If yes, provide the following information:

Estimated speed (mph): 47
Weather conditions: CLEAR 80 DEGREEE
Vehicle overturned? True
Vehicle left roadway/track? True

PART V - AIR INCIDENT INFORMATION (please refer to S 175.31 to report a discrepancy for air shipments)

38. Was the shipment on a passenger aircraft?

If yes, was it tendered as cargo, or as passenger baggage?

39. Where did the incident occur (if unknown, check the appropriate box for the location where the incident was discovered)?

40. What phase(s) had the shipment already undergone prior to the incident? (Check all that apply)

- | | |
|--|--|
| - Shipment had not been transported | - Transported by air (first flight) |
| - Transport by air (subsequent flights) | - Initial transport by highway to cargo facility |
| - Transfer at sort center/cargo facility | |

PART VI - DESCRIPTION OF EVENTS & PACKAGE FAILURE

- Describe the sequence of events that led to the incident and the actions taken at the time it was discovered. Describe the package failure, including the size and location of holes, cracks, etc. Photographs and diagrams should be submitted if needed for clarification. Estimate the duration of the release, if possible. Describe what was done to mitigate the effects of the release. Continue on additional sheets if necessary.

Describe:

TRANSPORT DRIVER WAS TRAVELING EASTBOUND ON BRITTON RD, 1/2 MILE EAST OF BANNER ROAD BETWEEN EL RENO AND YUKON, OK. DRIVER WAS TRAVELING APPROXIMATELY 47 MPH WHEN HE TOOK HIS EYES OFF THE ROAD INTERMITTENTLY CAUSING HIM TO VEER LEFT AND THEN RIGHT OFF THE ROADWAY. ONCE THE TRANSPORT'S PASSENGER SIDE WHEELS LEFT THE ROADWAY, THE DRIVER ATTEMPTED TO BRING IT BACK ON THE ROAD, BUT THE WEIGHT OF THE LOADED TRAILER TOOK OVER AND THE TRANSPORT OVERTURNED. THE TRANSPORT CAME TO REST ON IT'S DRIVERS SIDE WITH THE TRAILER ON THE RIGHT-AWAY AND THE TRACTOR LAYING ACROSS THE EASTBOUND LANE. THE DRIVER SUSTAINED NON LIFE-THREATENING INJURIES AND WAS TRANSPORTED TO MERCY HOSPITAL VIA AMBULANCE. THE CARGO TANK DID NOT BREACH, BUT SOME FUEL WAS LOST DUE TO LEAKING MAN-WAY HATCH GASKETS. EMERGENCY SERVICES RESPONDED TO THE SCENE INCLUDING OK HIGHWAY PATROL, FIRE DEPARTMENT, AND OK DEQ. PTI DISPATCHED A RESPONSE TEAM, WRECKER SERVICE, AND HAZMAT CREW. THE FUEL WAS TRANSFERRED TO ANOTHER TRUCK AND THE WRECKER SERVICE UPRIGHT WRECKED TRANSPORT AND TOWED IT TO THE PTL'S OKC YARD. THE ROADWAY WAS REOPENED AT 21:30 PM.

THE INCIDENT RESPONSE REPORT BY CLEANUP CONTRACTOR, ENVIRONMENTAL MANAGEMENT IS ATTACHED.

PART VII - RECOMMENDATIONS/ACTIONS TAKEN TO PREVENT RECURRENCE

- Where you are able to do so, suggest or describe changes (such as additional training, use of better packaging, or improved operating procedures) to help prevent recurrence. Provide recommendations for improvement to hazardous materials transportation beyond the control of your individual company. Continue on additional sheets if necessary.

Describe:

AN INCIDENT REVIEW BOARD WAS HELD TO INVESTIGATE AND UNDERSTAND THE ROLLOVER INCIDENT. ADDITIONAL DRIVER TRAINING AND AWARENESS WERE INCREASED IN THE DISTRICT TO REDUCE RECURRENCE. OTHER ACTION ITEMS INCLUDED: REDEFINING ACTIONS FOR GETTING DRIVERS SPECIFIC DIRECTIONS TO JOB LOCATIONS, REVIEWING CELL PHONE POLICY WITH ALL DRIVERS, AND RESEARCHING/IMPLEMENTING COMMERCIAL TRUCK NAVIGATION SOFTWARE.

PART VIII – CONTACT INFORMATION

Contact's Name:	RICK CALLEY
Contact's Title:	ENVIRONMENTAL COMPLIANCE MANAGER
Business Name and Address:	PILOT THOMAS LOGISTICS LLC 201 N RUPERT ST FORT WORTH TX 76107-1460
E-mail Address:	RICK.CALLEY@PILOTTHOMAS.COM
Telephone Number:	817-877-8619
Fax Number:	
Hazmat Registration Number:	060718550318AC
Date:	01/14/2019
Preparer is:	Carrier

12/02/2008