



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: E-2026050055
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
01/30/2026
4. Time of Incident (use 24-hour time):
05:25
5. Enter National Response Center Report Number (if applicable):
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
- City: SOUTHPORT
County: BRUNSWICK
State: NC
Zip Code: (if known): 28461
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
Sunny Pt Int on NC 133
8. Mode of Transportation: Highway
9. Transportation Phase: In Transit
10. Carrier/Reporter:
- Name: QUEST TRANSPORT, LLC.
Street: 3508 FAIRFIELD RD
City: BALTIMORE
State: MD
Zip Code: 21226-1517
Federal DOT Id Number: 1425906
Hazmat Registration Number: 053023550139FH
11. Shipper/Officer:
- Name: PETROLEUM MARKETING GROUP, INC.
Street: 2900 TELESTAR CT
City: FALLS CHURCH
State: VA
Zip Code: 22042-1206
Waybill/Shipping Paper:
Hazmat Registration Number:
12. Origin (if different from shipper address)
- Street: 123 Shipyard Blvd
City: WILMINGTON
State: NC
Zip Code: 28412
13. Destination:
- Street:
City:
State:
Zip Code:
14. Proper Shipping Name of Hazardous Material: DIESEL FUEL
15. Technical/Trade Name: off road diesel fuel
16. Hazardous Class/Division: Flammable - Combustible Liquid
17. Identification Number: (E.g. UN2764, NA 2020) UN1202

18. Packing Group: (if applicable)

19. Quantity Released: (Include Measurement Units) 3400 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: -

How Failed: -

Causes of Failure: -

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

Identification Markings: 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: 5500 Liquid - Gallon

Amount in Package: 4400 Liquid - Gallon

Number in Shipment: 1

Number Failed: 1

Package Capacity:

Amount in Package:

Number in Shipment:

Number Failed:

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

Manufacturer: Oilmans

Serial Number:

Material of Construction: aluminum (if Tank Car, CTMV, Portable Tank, or Cylinder)

Design Pressure: (if Tank Car, CTMV, Portable Tank)

Shell Thickness: (if Tank Car, CTMV, Portable Tank)

Head Thickness: (if Tank Car, CTMV)

Service Pressure: (if Cylinder)

If valve or device failed:

Type:

Model:

Manufacturer:

Manufacture Date: 01/01/2017

Last Test Date: 09/15/2025

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

Packaging Category:

Packaging Certification:

Certification Number:

Nuclide(s) Present:

Activity:

Critical Safety Index:

Transport Index:

PART IV – CONSEQUENCES

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

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

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

Fire/EMS Report #: True
Police Report #: True NCSHP260130007ba
In-house cleanup:
Other Cleanup: True

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:	\$ 8,351.00
Carrier Damage:	\$ 126,550.00
Property Damage:	\$ 0.00
Response Cost:	\$ 60,000.00
Remediation/Cleanup Cost:	\$ 150,000.00

(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?

False

If yes, provide the following information:

Estimated speed (mph):
Weather conditions:
Vehicle overturned?
Vehicle left roadway/track?

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:

Tankwagon truck with a 4,400 gallon capacity rolled over and skid on the asphalt roadway. The truck remained upside down and struck the median in the roadway. The tank wagon had 5 compartments: 700/800/1000/1000/900 from cab to rear of the tank. The front compartment was breached with a hole in what should have been the top, front driver side. The bulkhead between compartment 1 and 2 as well as 2 and 3 were compromised. The volume of the 3 compartments were released into the roadway and the adjacent ditch. The fourth compartment held secure and did not release any fuel - this was verified by the Wilmington Fire Department Hazmat team drilling the compartment and us recovering the fuel contained. Compartment 5 breached when it impacted the median and came to a stop. This compartment also released into the roadway and the adjacent ditch.

Upon report to Greta Stanley, SR&R Environmental, Inc out of Wilmington, NC was dispatched contain the spill and clean up the roadway and ditch. The fuel was cleaned from the roadway and the ditches were vacuumed out and the water and fuel mixture was disposed via a manifested hazmat load. There was a drain that went from one side of the road to the other and fuel entered this drain way and the ditch on the other side of the road. The drain was jetted and vacuumed out as well as the ditch on the opposite side of the road. North Carolina Department of Environmental Quality (NCDEQ) was notified of the release and sent representatives to the site. Upon initial filing of the incident report with NCDEQ they required soil remediation which was completed by Eastern Environmental out of Rocky Mount, NC. Soil sampling has been completed and the report submitted to NCDEQ for review

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:

All drivers were informed of the rollover incident. We held safety meetings with the drivers to review safe vehicle operations focused on rollover prevention. The training was done through discussion of the incident, review of what causes rollovers as well as training video specifically designed to educate drivers on how to avoid a rollover. Rollovers are caused by inertia/centrifugal force, which is the outward force that pushed a vehicle and it's liquid load away from the center. This is a critical factor in rollover accidents because it works against the stability of the vehicle. Slosh or Liquid Surge can cause the shift in weight and move the center of gravity even further outward increasing the risk of a rollover. In this instance the driver was not operating the vehicle at a speed faster than the posted limit, speed however even at rates at a very slow speed can still lead to a rollover with other factors involved as noted above.

PART VIII – CONTACT INFORMATION

Contact's Name:	Christopher Gibson
Contact's Title:	President & CEO
Business Name and Address:	QUEST TRANSPORT, LLC. 3508 FAIRFIELD RD BALTIMORE MD 21226-1517
E-mail Address:	cgibson@questtransport.com
Telephone Number:	(814)201-2411
Fax Number:	
Hazmat Registration Number:	053023550139FH
Date:	05/05/2026
Preparer is:	Carrier

01/01/2017