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-2022090941
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
09/02/2022

4. Time of Incident (use 24-hour time):
08:30

5. Enter National Response Center Report Number (if applicable):
1346306

6. If you submitted a report to another Federal DOT agency, enter the agency and report number:

7. Location of Incident:
City: RURAL RETREAT
County: WYTHE
State: VA
Zip Code: (if known): 24368
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
I-81 MM 59.5

8. Mode of Transportation: Highway

9. Transportation Phase: In Transit

10. Carrier/Reporter:
Name: ENVIRONMENTAL OPTIONS INC
Street: 499 ENERGY BLVD
City: ROCKY MOUNT
State: VA
Zip Code: 24151
Federal DOT Id Number: 280618
Hazmat Registration Number: 051021550075DF

11. Shipper/Offeror:
Name: VIRGINIA PANEL CORPORATION
Street: 1400 NEW HOPE RD
City: WAYNESBORO
State: VA
Zip Code: 22980-2647
Waybill/Shipping Paper: 016729493FLE
Hazmat Registration Number: 092722550033EG

12. Origin (if different from shipper address)
Street: 1400 NEW HOPE RD
City: WAYNESBORO
State: VA
Zip Code: 22980-2647

13. Destination:
Street: 320 JOHNSTON RD
City: MARION
State: VA
Zip Code: 24354

14. Proper Shipping Name of Hazardous Material: CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S.

15. Technical/Trade Name: NITRIC ACID, NICKEL

16. Hazardous Class/Division: Corrosive Material

17. Identification Number: (E.g. UN2764, NA 2020) UN3264

18. Packing Group: (if applicable) II

19. Quantity Released: (Include Measurement Units) 10 Liquid - Gallon

20. Was the material shipped as a hazardous waste? True
If yes, provide the EPA Manifest Number: 016729493FLE

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:
Non-Bulk

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: - 105-Bolts or Nuts
How Failed: - 309-Punctured
Causes of Failure: -

26a. Provide the packaging identification markings, if available.
Identification Markings: 1H1/Y1.4/150/21/USA/MA1261/W/VENT 2.2 MM
(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:	Drum	Packaging Type:	
Material of Construction:	Plastic	Material of Construction:	
Head Type (Drums only):	Non - Removable		

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:		**Single Package or Inner Packaging (if any):**	
Package Capacity:	55 Liquid - Gallon	Package Capacity:	
Amount in Package:	50 Liquid - Gallon	Amount in Package:	
Number in Shipment:	1	Number in Shipment:	
Number Failed:	1	Number Failed:	

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

Manufacturer:
Serial Number:
Material of Construction: (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:
Last Test Date:

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

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

Fire/EMS Report #: True 164
Police Report #:
In-house cleanup:
Other Cleanup:

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:	$ 16,000.00
Remediation/Cleanup Cost:	$ 3,000.00

(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? True

If yes, how many? 8

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:

Environmental Options Inc (EOI) truck was en route to Environmental Enterprises Inc (EEI) in Marion VA with a load of hazardous waste. The tractor became disabled on the shoulder of I-81 at MM 59.5 EOI contacted EEI to dispatch a tractor to the site, to pull the trailer to EEI Located in Marion VA. When EEI arrived they discovered a liquid leaking out of the nose of the trailer and thought a chlorine Vapor was observed when checking the load. EEI contacted Leann Herman with EOI. Ms. Herman then contacted the state police and First Call Environmental to respond to a hazmat incident. Ms Herman then reached out to Elizabeth Lohman with the Office of Pollution Response & Emergency Preparedness with the VA DEQ. Due to the hazmat on board and response time of 3 hours for First Call, Scott Sproles the Regional Hazmat officer with VDEM was dispatched to the scene and called in Wythe County Emergency Services to help. During this time the NRC, VEOC were also notified. DEQ contacted VDOT to dispatch the Safety Patrol Operator to evaluate the need for traffic control and a lane closure was put into place. The initial incident report to the NRC indicated chlorine tabs gassing off (Incident report 1346219). Once Hazmat crew was on scene and the load was transferred to another trailer, a leaking drum of nitric acid nickel solution was discovered. The drum had a small pin hole in the bottom of the drum causing the release . The leaking drum was overpacked and spilled material was neutralized and collected in a drum for proper disposal. Ms. Herman updated the NRC incident report to to show approximately 10 gallons of nitric acid nickel solution was released (Incident report 1346275). A follow up call was made on 09/03/2022 to provide updated information of the clean up. The material on the ground was also neutralized and will be collected into a drum and taken for proper disposal Incident report 1346306.

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:

NO COMMENTS PROVIDED

PART VIII – CONTACT INFORMATION

Contact's Name:	Leann Herman
Contact's Title:	
Business Name and Address:	ENVIRONMENTAL OPTIONS INC 499 ENERGY ROCKY MOUNT VA 24151
E-mail Address:	lherman@environmentaloptions.com
Telephone Number:	(540)483-3920
Fax Number:	(540)483-3855
Hazmat Registration Number:	
Date:	09/28/2022
Preparer is:	Carrier