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-2016010045
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident:
10/23/2015

4. Time of Incident (use 24-hour time):
11:15

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: VILLAGE OF SUAMICO
County: BROWN
State: WI
Zip Code: (if known): 54313
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
US 41 NORTHBOUND & LINEVILLE R

8. Mode of Transportation: Highway

9. Transportation Phase: In Transit

10. Carrier/Reporter:
Name: GARROW OIL MARKETING
Street: 504 W EDGEWOOD DRIVE
City: APPLETON
State: WI
Zip Code: 54913
Federal DOT Id Number: 746044
Hazmat Registration Number: 050615551021X

11. Shipper/Offeror:
Name: CITGO PETROLEUM CORP
Street: 1391 BYLSBY AVE
City: GREEN BAY
State: WI
Zip Code: 54303
Waybill/Shipping Paper: 317922
Hazmat Registration Number:

12. Origin (if different from shipper address)
Street:
City:
State:
Zip Code:

13. Destination:
Street: 775 INDUSTRIAL LOOP
City: NEW LONDON
State: WI
Zip Code: 54961

14. Proper Shipping Name of Hazardous Material: DIESEL FUEL

15. Technical/Trade Name: ULTRA LOW SULFUR DIESEL

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) 705 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: - 150-Tank Shell
How Failed: - 305-Crushed; 307-Gouged or Cut; 309-Punctured
Causes of Failure: - Rollover Accident

26a. Provide the packaging identification markings, if available.
Identification Markings: NO MARKINGS GIVEN
(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:	Packaging Type:
Material of Construction:	Material of Construction:
Head Type (Drums only):	

27. Describe the package capacity and the quantity:

Single Package or Outer Packaging:		**Single Package or Inner Packaging (if any):**	
Package Capacity:	9500 Liquid - Gallon	Package Capacity:	
Amount in Package:	7500 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:	HELL TRAILERS	Manufacture Date:	01/01/2001
Serial Number:	5HTAM442X17H6578	Last Test Date:	05/19/2015
Material of Construction:	ALUMINUM (if Tank Car, CTMV, Portable Tank, or Cylinder)		
Design Pressure:	3 PSI (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:

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:	True
- 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 #:	True	none
Police Report #:	True	15 47674
In-house cleanup:	False	
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:	$ 1,097.00
Carrier Damage:	$ 69,000.00
Property Damage:	$ 0.00
Response Cost:	$ 12,311.00
Remediation/Cleanup Cost:	$ 12,311.00

(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:	0
Responders:	0
General Public:	0

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

If yes, how many? 0

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:	0
Responders:	0
General Public:	0

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

Employees:	0
Responders:	0
General Public:	0

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:	
Duration of the evacuation:	

36. Was a major transportation artery or facility closed? True

If yes, how many? 5

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

If yes, provide the following information:

Estimated speed (mph):	15
Weather conditions:	OVERCAST
Vehicle overturned?	True
Vehicle left roadway/track?	False

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:

On 10/23/15 at 11:15 AM, our driver exited US 41 Northbound at the Lineville Road exit in Suamico, WI. He entered the round-a-bout at the top of the off-ramp with excessive speed. The excessive speed caused the tractor and trailer to roll-over onto the passenger side of the vehicle. The resulting roll-over caused the rear pocket of the trailer to breach because of crushing/abrasion/puncture. This resulted in approx. 705 gallons of diesel fuel to be released slowly onto the roadway. By the time the driver safely exited the vehicle, the County Sheriff Deputy was arriving and within a couple minutes of that, the Suamico Fire Department arrived as well. The fire dept initialized the clean-up. They called a neighboring municipality (Village of Howard) and requested assistance from their street depart that was working nearby with a front end loader and trucks of sand. They were able to contain the majority of the spill on the concrete roadway with the sand and spill booms. A small quantity (less than 50 gallons) entered a storm basin next to the roadway. Within 1.5 hours, an environmental company, SECSI based in Green Bay arrived to continue with the clean-up. Employees from Garrow Oil & Klemm Tank Lines proceeded to pump off the fuel on the trailer into a 2nd tanker truck. This was completed within 3.5 hours. The truck was then rolled up-right with 2 large tow trucks. The tractor and trailer were then towed to our shop approx. 2 miles away. A second remediation company, North Shore Environmental Construction, based in Germantown, WI arrived within 4 hours to finish the clean-up process. They completed that process by 7 PM that evening. SECSI returned on 10/26/15 to inspect the site one last time and remove some absorbent socks left in the storm basin over the weekend. A SERTS (substance release notification report) was delivered to the Wisconsin DNR on 12/2/15 and the DNR accepted and closed it's SERTS on12/10/15.

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:

Even though we have indented this accident/incident to be an isolated case of errant judgment by our driver of record, nonetheless, we have been accountable to the reality that maybe a gap has opened up within our safety management program. Consequently, a meeting was held with all of our professional operators to review this accident and all the component parts and persons that went to make up this incident, along with the time-line of events leading up to it. Each operator was given an opportunity to visit out-loud about any and all concerns regarding safety at Garrow Oil, and to our surprise, all of the feed back was extremely positive. We again hammered them all on the negative ramifications that can occur when excessive speed is the order of the day. A promise was put forth to all, that prior to the end of the year, the safety department would be doing a ride along with all drivers in order to reconcile skill levels and acumen. Lastly, our operators were told that the safety department would also be doing more visual inspections in the field, with the intention of observing all operators doing everything right.

PART VIII – CONTACT INFORMATION

Contact's Name:	JIM BENO
Contact's Title:	DIRECTOR OF OPERATIONS
Business Name and Address:	UNKNOWN 504 W EDGEWOOD DRIVE APPLETON WI 54913
E-mail Address:	jim@garrowoil.com
Telephone Number:	920 733 7020
Fax Number:	920 733 8816
Hazmat Registration Number:	050615551021X
Date:	12/21/2015
Preparer is:	Carrier

01/01/2001