



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-2025040634
2. This is to report: A

PART II - GENERAL INCIDENT INFORMATION

3. Date of Incident: 04/04/2025
4. Time of Incident (use 24-hour time): 11:25
5. Enter National Response Center Report Number (if applicable): 1427736
6. If you submitted a report to another Federal DOT agency, enter the agency and report number:
7. Location of Incident:
City: LOVELAND
County: HAMILTON
State: OH
Zip Code: (if known): 45111
Street Address/Mile Marker/Yard Name/Airport/Body of Water/River Mile:
570 Loveland Madeira Rd
8. Mode of Transportation: Highway
9. Transportation Phase: Unloading
10. Carrier/Reporter:
Name: WORLD FUEL SERVICES, INC.
Street: 9800 NW 41ST ST STE 400
City: DORAL
State: FL
Zip Code: 33178-2980
Federal DOT Id Number: 2335650
Hazmat Registration Number: 050624550024GH
11. Shipper/Officer:
Name: BP PRODUCTS NORTH AMERICA INC.
Street: 930 TENNESSEE AVE
City: CINCINNATI
State: OH
Zip Code: 45229-1006
Waybill/Shipping Paper: 0141370
Hazmat Registration Number: 050624550024GH
12. Origin (if different from shipper address)
Street:
City:
State:
Zip Code:
13. Destination:
Street: Various Locations
City:
State: OH
Zip Code: 45229
14. Proper Shipping Name of Hazardous Material: DIESEL FUEL
15. Technical/Trade Name:
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) 165 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: - 159-Vent
How Failed: - 308-Leaked
Causes of Failure: - Human Error

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

Identification Markings: DOT 406

(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: 4500 Liquid - Gallon
Amount in Package: 2951 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:	Westmor IND	Manufacture Date:	04/04/2022
Serial Number:	AG22-10788	Last Test Date:	01/20/2025
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:	0.19 INCH (if Tank Car, CTMV, Portable Tank)		
Head Thickness:	0.19 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: | |
| - Explosion: | | - Material Entered Waterway/Storm Sewer: | False |
| - 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 #: ☐
Police Report #: ☐
In-house cleanup: ☐ True
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:	\$ 600.00
Carrier Damage:	\$ 0.00
Property Damage:	\$ 0.00
Response Cost:	\$ 0.00
Remediation/Cleanup Cost:	\$ 35,000.00

(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:

On 4/4/2025 at 11:15 EST, a World Fuel Services, Inc. (WFS) Cincinnati Tank Wagon driver was making a delivery to a 3,000-gallon aboveground storage tank (AST) located at Loveland Schools Bus Lot in Loveland, OH. During the delivery, the product started overfilling from the AST vent resulting in an uncontrol release of diesel fuel to the environment at 11:25 EST. The employee, after noticing the spill, ran to shut the pump off and then grabbed spill pads to mitigate the spill. The employee attempted to clean-up spill and contacted WFS Operations. WFS Operations contacted WFS HSE personnel to assist with the incident, spill clean-up, and investigation. The employee did not follow procedures and was not at the point of flow during delivery. The employee was distracted by being on their phone away from the delivery point. Truck camera footage showed two minutes, and thirty-five seconds went by until the employee noticed the release. The employee did not confirm ullage by sticking the tank. The release occurred because of human error. The weather on site that day was on and off again precipitation. This contributed to the spill discharging into the detention pond on site. The calculated release is 165 gallons of No. 2 diesel fuel based on reviewing the truck camera footage.

The spill impacted the parking lot, storm drain, and a 6,000 square foot detention basin/pond. The NRC was notified of the release on 4/4/25 at 18:00 EST. The Ohio EPA was notified of the release on 4/4/2025 at 18:15 EST. The spill was reported to Hamilton County EMA on 4/4/2025 at 18:30 EST. WFS and Ohio EPA met on-site on 4/8/2025 to determine clean-up plan for the detection pond. Ohio EPA approved WFS/HEPACO to treat the basin with in-situ bioremediation and monitoring the site by taking soil samples for VOCs readings until site is clean and no further action is required. Impacted vegetation (leaves/branches) on the ground were removed. Oil booms were placed at the storm drain's discharge point and at the outfall of the detention pond. Oil booms are being inspected after precipitation events and replaced as needed. HEPACO/WFS will continue to monitor the in-situ bioremediation and inform the Ohio EPA of its progress.

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:

World Fuel Services, Inc. (WFS) reviews and investigates all incidents to determine root cause and what corrective actions need to be implemented to prevent any recurrences. The spill occurred because of a human error and the employee did not follow WFS tank wagon delivery procedures. The WFS driver did not follow procedures by properly confirming tank ullage prior to delivery. The WFS driver did not stick the tank for a tank level reading. And the WFS employee was not at the point of flow and talking on their cellphone causing a distraction during delivery. These errors resulted in an overfill and release to the environment. WFS Operations personnel will be brief on the incident and retrained on delivery procedures.

PART VIII – CONTACT INFORMATION

Contact's Name:	Jacob Webster
Contact's Title:	HSE Manager
Business Name and Address:	WORLD FUEL SERVICES, INC. 9800 NW 41ST ST STE 400 DORAL FL 33178-2980
E-mail Address:	jwebster@wfscorp.com
Telephone Number:	513-630-4281
Fax Number:	
Hazmat Registration Number:	050624550024GH
Date:	05/02/2025
Preparer is:	Carrier

04/04/2022