

Illicit Discharge Hotline Incident Tracking Sheet

Incident ID:

Responder Information

Call taken by:

Call date:

Call time:

Precipitation (inches) in past 24-48 hrs:

Reporter Information

Incident time:

Incident date:

Caller contact information (*optional*):

Incident Location (*complete one or more below*)

Latitude and longitude:

Stream address or outfall #:

Closest street address:

Nearby landmark:

Primary Location Description

Secondary Location Description:

Stream corridor
(*In or adjacent to stream*)

Outfall

In-stream flow

Along banks

Upland area
(*Land not adjacent to stream*)

Near storm drain

Near other water source (storm water pond, wetland, etc.):

Narrative description of location:

Upland Problem Indicator Description

Dumping

Oil/solvents/chemicals

Sewage

Wash water, suds, etc.

Other: _____

Stream Corridor Problem Indicator Description

Odor

None

Sewage

Rancid/Sour

Petroleum (gas)

Sulfide (rotten eggs);
natural gas

Other: Describe in "Narrative" section

Appearance

"Normal"

Oil sheen

Cloudy

Suds

Other: Describe in "Narrative" section

Floatables

None:

Sewage (toilet paper, etc)

Algae

Dead fish

Other: Describe in "Narrative" section

Narrative description of problem indicators:

Suspected Violator (name, personal or vehicle description, license plate #, etc.):

Investigation Notes

Initial investigation date:

Investigators:

No investigation made

Reason:

Referred to different department/agency:

Department/Agency:

Investigated: No action necessary

Investigated: Requires action

Description of actions:

Hours between call and investigation:

Hours to close incident:

Date case closed:

Notes: