



Adobe Acrobat

You can fill out this form in Acrobat Reader and then print the form with the data from the Reader.

Note that you can NOT use the **Save** or **Save As** function with **Acrobat Reader**. If you want a copy for your records, please print an extra copy of the form.

To fill out a form:

- (1) Select the hand tool . 
- (2) Position the pointer inside a form field, and click. The I-beam pointer allows you to type text. The arrow pointer allows you to select a button, a check box, a radio button, or an item from a list.
- (3) After entering text or selecting an item, check box, or radio button, do one of the following:
 - Press **Tab** to go to the next form field.
 - Press **Shift+Tab** to go to the previous form field.
 - In a multi-line text form field, **Enter** or **Return** goes to the next line in the same form field. You can use **Enter** on the keypad to accept a change and deselect the current form field.
 - Press **Escape** to reject the form field change and deselect the current form field.
 - If you are in Full Screen mode, pressing **Escape** a second time causes you to exit Full Screen mode.
- (4) Once you have filled in the appropriate form fields, do the following:
 - Select the print tool  for a copy of the form for mailing or to keep for your records.

To clear a form in a browser window:

Exit the Acrobat viewer and start again.

Important: There is no undo for this action.



Discharge Report Form

PLEASE PRINT OR TYPE

DEP Form # 62-761.900(1)

Form Title Discharge Report Form

Effective Date: July 13, 1998

Instructions are on the reverse side. Please complete all **applicable** blanks

1. Facility ID Number (if registered): _____ 2. Date of form completion: _____

3. General information

Facility name or responsible party (if applicable): _____

Facility Owner or Operator, or Discharger: _____

Contact Person: _____ Telephone Number: () _____ County: _____

Facility or Discharger Mailing Address: _____

Location of Discharge (street address): _____

Latitude and Longitude of Discharge (if known) _____

4. Date of receipt of test results or discovery of confirmed discharge: _____ month/day/year

5. Estimated number of gallons discharged: _____

6. Discharge affected: Air Soil Groundwater Drinking water well(s) Shoreline Surface water (water body name) _____

7. Method of discovery (check all that apply)

- Liquid detector (automatic or manual)
- Vapor detector (automatic or manual)
- Tightness test
- Pressure test
- Statistical Inventory Reconciliation
- Internal inspection
- Inventory control
- Monitoring wells
- Automatic tank gauging
- Manual tank gauging
- Closure/Closure Assessment
- Groundwater analytical samples
- Soil analytical tests or samples
- Visual observation
- Other _____

8. Type of regulated substance discharged: (check one)

- Unknown
- Gasoline
- Hazardous substance - includes CERCLA substances from USTs above reportable quantities, pesticides, ammonia, chlorine, and derivatives (write in name or Chemical Abstract Service (CAS) number) _____
- Other _____
- Used/waste oil
- Aviation gas
- Jet fuel
- Diesel
- Heating oil
- Kerosene
- New/lube oil
- Mineral acid

9. Source of Discharge: (check all that apply)

- Dispensing system
- Tank
- Unknown
- Other _____
- Pipe
- Fitting
- Valve failure
- Barge
- Tanker ship
- Other Vessel
- Pipeline
- Railroad tankcar
- Tank truck
- Vehicle
- Airplane
- Drum

10. Cause of the discharge: (check all that apply)

- Loose connection
- Fire/explosion
- Other _____
- Puncture
- Overfill
- Spill
- Human error
- Collision
- Vehicle Accident
- Corrosion
- Installation failure

11. Actions taken in response to the discharge: _____

12. Comments: _____

13. Agencies notified (as applicable):

- State Warning Point 1-800 320-0519
- National Response Center 1-800-424-8802
- Florida Marine Patrol (800) 342-5367
- Fire Department
- DEP (district/person)
- County Tanks Program

14. To the best of my knowledge and belief, all information submitted on this form is true, accurate, and complete.

Printed Name of Owner, Operator or Authorized Representative, or Discharger

Signature of Owner, Operator or Authorized Representative, or Discharger

Oil spills to navigable waters of the United States, and releases of reportable quantities of CERCLA hazardous substances must be reported within one hour to the National Response Center or the Florida Marine Patrol. Reports to the National Response Center of oil spills to navigable waters need not be repeated to any other federal, state, or local agency. Conditions at the site that do not involve spills to navigable waters of the United States, or CERCLA hazardous substances, that pose an immediate threat to human health or the environment, must be immediately reported to the State Warning Point or the Local Fire Department. This form must be submitted for all discharges from facilities with storage tank systems, and at other sites, in accordance with Chapters 62-761 and 62-770, F.A.C. Chapter 62-761 and 62-770, F.A.C., should be consulted for specific reporting requirements.

***State Warning Point
1-800-320-0519***

***National Response Center
1-(800)-424-8802***

***Local Fire Department
(obtain local number)***

This form must be used to report any confirmed discharge, or any one of the following from a storage tank system subject to Chapter 62-761, F.A.C., unless the discharge is from a previously-known and reported discharge:

1. Results of analytical or field tests of surface water, groundwater, or soils indicating the presence of contamination by:
 - a. A hazardous substance from a UST;
 - b. A regulated substance, other than petroleum products; or
 - c. Petroleum products' chemicals of concern specified in Chapter 62-770, F.A.C.;
2. A spill or overfill event of a regulated substance to soil equal to or exceeding 25 gallons, unless the regulated substance has a more stringent reporting requirement specified in CFR Title 40, Part 302;
3. Free product or sheen of a regulated substance present in surface water, groundwater, soils, basements, sewers, and utility lines at the facility or in the surrounding area; or
4. Soils stained by regulated substances observed during a closure assessment performed in accordance with Rule 62-761.800, F.A.C.

A copy of this form must be delivered or faxed to the County within 24 hours of the discovery of a discharge, or before the close of the next business day. It is recommended that the original copy be sent in the mail. If the discharge occurs at a county-owned facility, a copy of the form must be faxed or delivered to the local FDEP District office. A discharge of petroleum or petroleum products from a source other than a regulated storage tank system must be reported within one week of discovery in accordance with Rule 62-770.250, F.A.C.

FDEP District Office Addresses:

Northwest District
160 Governmental Center
Pensacola FL. 32501-5794
Phone: 850-595-8360
FAX: 850-595-8417

Northeast District
7825 Baymeadows Way Suite B 200
Jacksonville FL. 32256-7590
Phone: 904-448-4300
FAX: 904-448-4362

Central District
3319 Maguire Blvd. Suite 232
Orlando, FL. 32803-3767
Phone: 407-894-7555
FAX: 407-897-2966

Southwest District
3804 Coconut Palm Dr.
Tampa FL. 33619-8218
Phone: 813-744-6100
FAX: 813-744-6125

South District
2295 Victoria Ave. Suite 364
Ft. Myers FL. 33901-2549
Phone: 813-332-6975
FAX: 813-332-6969

Southeast District
400 N. Congress Ave.
West Palm Beach, FL. 33416-5425
Phone: 561-681-6600
FAX: 561-681-6790

[Effective date of the rule]