PLAN FOR NOTIFICATION, CONTAINMENT AND
CLEAN-UP OF OIL SPILLS
FORM E

FULL COMPANY NAME: ___________________________________________ DATE: __________________

STREET ADDRESS: ________________________________ CITY: ______________________ ZIP CODE: _________

OIL OPERATIONS PERMIT NO. ________________________________________________________________

I. A. The following agencies will be notified by our employees IMMEDIATELY, but not later than two (2) hours
     after detection of a spill at either our facility or a remote location, or from one of our vehicles.

1. **LOCAL EMERGENCY AGENCIES** - 911

2. **MARYLAND DEPARTMENT OF THE ENVIRONMENT** - 1-866-633-4686

3. **NATIONAL RESPONSE CENTER** - 1-800-424-8802

4. **U.S. COAST GUARD** - if east of I-95 or inside either Beltway (I-695 or I-495)
   (410) 576-2693 (Baltimore Command Center)

5. **U.S. ENVIRONMENTAL PROTECTION AGENCY REGION III** - if west of I-95 or outside either
   Beltway (I-695 or I-495)
   1-800-438-2474 or (215) 814-5000

B. The following individual(s) from this company will be notified in the event of a spill:

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<tr>
<th>Name</th>
<th>Work Phone</th>
<th>Home or Cell Phone</th>
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C. Who is responsible for notifying the agencies in Section A, if a spill occurs?

1. **Business Hours:**

2. **Non-Business Hours:**

Form Number: MDE/ LMA/ PER.007
Date: October 2017
TTY Users: 800-735-2258
### II. A. The following personnel are assigned specific tasks to perform in the event of an oil spill:

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<th>NAME</th>
<th>ASSIGNED TASK</th>
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### B. The following equipment is immediately available at our facility or on our vehicles to contain and clean-up a spill:

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### C. The following procedures will be used to contain and clean-up a spill:

1. A clean-up contractor is on retainer to respond _____YES _____ NO
2. What is the estimated time for the contractor to arrive at your facility? _______(hrs.)
3. Hire a contractor immediately _____YES _____ NO
4. Name of Contractor (if known): ____________________________________________________
5. How will your facility handle a spill before a contractor arrives (outline specific procedures)?

______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
III. These additional communication resources at the facility are available to be contacted:

1. Office Telephone Number: __________________________
2. Dock Telephone Number: __________________________
3. Dispatcher Telephone Number: ______________________
4. Other Important Telephone Numbers at your facility (list):

   NAME OR GROUP           TELEPHONE NUMBER
   ___________________________________________  _______________________
   ___________________________________________  _______________________

IV. Is your facility required to prepare any of the following federal documents?

   a. Spill Prevention Control and Countermeasures Plan: _____ yes    _____ no

   b. Facility Response Plan (required for facilities with 1 million gallons of storage): _____ yes    _____ no

   If your answer is "unknown", please contact the EPA Region III SPCC/FRP Hotline at 1-800-424-9346. If your answer is yes for the FRP plan, please provide a copy with this Plan as required by Code of Maryland Regulations (COMAR) 26.10.01.22A. For over-the-water transfer operations involving oil, contact the USCG at 1-202-372-4600 for OPA 90 Response Plan requirements.

V. List of Oil Spill Contractors - A list of Oil Spill Contractors may be found at:

   http://mde.maryland.gov/programs/LAND/OilControl/Pages/factsheetspublications.aspx

VI. This "Plan for Notification, Containment and Clean-up of Oil Spills" has been completed by the undersigned and accurately reflects the procedures that the referenced company will follow in an expeditious manner in the event of an oil spill release, or discharge.

________________________________________________             ______________________________________
Print Name            Title

________________________________________________             ______________________________________
Signature             Date

Notice: Collection of Personal Records – State Government Article § 10-624
This Notice is provided pursuant to § 10-624 of the State Government Article of the Maryland Code. The personal information requested on this form is intended to be used in processing your application. Failure to provide the information requested may result in your application not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment ("The Department") is a public agency and subject to the Maryland Public Information Act. This form may be made available on the Internet via the Department’s website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State law.