

Oral Report for Polluted Discharge(s) to State Waters

Within 24 hours of becoming aware of a discharge:

- IMMEDIATELY start addressing the discharge(s).
- IMMEDIATELY CALL the DOH-CWB Enforcement Section at **808-586-4309** to report the discharge(s). If outside of office hours, call the Hawaii State Hospital Operator at **808-247-2191**

Oral Report Information:

1. Record the name of the DOH representative: _____
2. Record date and time of call: _____
3. I am (Name + Job Title + Organization), and
4. I am calling to report a discharge
for (Project Title): _____
with NPDES permit # (if applicable): _____
located at (address or general location): _____
5. The discharge is: _____
(i.e. muddy storm water, concrete, oil, porta potty fluid, etc.)
6. The discharge went to: _____
(Storm drain, ditch, stream, ocean, etc.; provide location or water body name if possible)
7. The discharge was caused by:
(Describe to DOH what you believe happened that resulted in the discharge. It's ok if you're not sure right now or if the cause changes; that can be discussed in the written report later.)
8. Steps taken to reduce, eliminate, or prevent reoccurrence of the discharge(s):
9. The discharge is: done or ongoing
If it's done, it started (date and time): _____
and ended (date and time): _____
10. Comment/Questions: _____
11. The written report must be submitted by (get from DOH): _____
(The written report is due in 5 calendar days, unless you get an extension to 14 days from DOH.)

After reporting the discharge to DOH, also report the discharge to DFM-Storm Water Quality Branch, **808-768-3245**.

Written Report for Polluted Discharge(s) to State Waters

Project Title:

NPDES Permit (if applicable):

Location (address or description):

The discharge is: done ongoing.

If done, the discharge started on (date) at (time), and was terminated on (date) at (time).

The discharge contained (check all that apply):

Stormwater containing mud/dirt

Concrete or concrete wash water

Wash water for _____

Other _____

Cause of the Discharge:

Steps taken to stop the discharge:

Steps taken or to be taken to prevent future discharges:

Other comments:

Photographs

(Include any photos that help show what happened, what the discharge was, where it went, and the corrective actions taken to address and stop it.)

Date photo was taken: _____ Photographer: _____
Description of photo: _____

Date of photo: _____ Photographer: _____
Description of photo: _____