

NAF Atsugi

Wastewater Slug Discharge Notification Form

Your Contact Information

Information Submitted On:
Date _____ Time _____

- | | |
|-----------------------|---|
| 1. Reported by (Name) | 2. Unit / Activity / Contractor Company |
| 3. Email | 4. Phone Number |

Incident Information

Incident Occurred On:
Date _____ Time _____

5. Description of Slug (chemical name, constituent, etc.)
6. Discharge Location / Entry Point into Wastewater System (building #, street name, manhole ID, etc.)
7. Hazard / Characteristics of Slug (check any that apply)
- | | |
|--|---|
| <ul style="list-style-type: none"> Fire Hazard Explosive Hazard Corrosive Fumes Biological Interference for Treatment Plant | <ul style="list-style-type: none"> Solid / Viscous Emulsifying Heat Other |
|--|---|
8. Additional Information About Slug (if known)
- | | | |
|------------|------------|-------------------|
| 8a. Volume | 8b. Weight | 8c. Concentration |
|------------|------------|-------------------|
9. Description of Response Actions Taken (if any)
10. Comments

For Public Works / Environmental Division's Use Only

Notification Form Received By	Date	Time
Email	Phone Number	