STANDARD OPERATING PROCEDURE
HILLSBOROUGH TRANSIT AUTHORITY

TRANSFER OF FLUIDS VIA FORKLIFT BETWEEN BUILDINGS

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ORIGINATED BY:  Original signature on file in MDC
                 Dale Smith
                 Manager of Facilities Maintenance

REVIEWED BY:  Original signature on file in MDC
                 Thomas Jones
                 ESMS Coordinator

APPROVED BY:  Original signature on file in MDC
                 Steven Taylor
                 Director of Maintenance

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ATTACHMENT B – FLUID TRANSPORTING CHECKLIST............................................................ 6
1.0 SCOPE
This SOP applies to all Maintenance Department employees involved in the transferring of fluids between buildings.

2.0 PURPOSE
At various points in time fluids are transferred between buildings for the purpose of restocking of bulk fluid containers/tanks. This SOP provides guidance for the safe and proper transferring of fluids between the Heavy Maintenance and Preventive Maintenance Buildings as well as emergency procedures in the event of a spill. Any deviation from this SOP is strictly prohibited. Deviation from the procedures described in this SOP can have significant negative environmental impacts and result in substantial economic loss.

3.0 ABBREVIATIONS / DEFINITIONS

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<td>Standard Operating Procedure</td>
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4.0 REFERENCES
ASOP-0008R3 Emergency Response Contingency Plan
FSOP-0003 Spill Response Safety Procedures
FWI-0005 Transfer of Fluids via Forklift between Buildings

5.0 FORMS
Attachment A
Attachment B

6.0 REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS

A. Safety Glasses
B. Nitrile Gloves
C. Attack Pac Emergency Spill Kit:
   - 15 Pads
   - 3 Socks
   - 1 Pair of Goggles
   - 1 Pair of Gloves
   - 1 Refuse Bag
   - 1 Instruction Sheet
7.0 PROCEDURE

A. Prior to moving any fluids Shop Supervisors will contact the Facilities Department and give notification of the type and quantity of fluid that is to be transported via forklift.

B. It is preferable to not transfer fluids between buildings via forklift and should be avoided if at all possible. As such, the Facilities Department will contact Inventory personnel in order to verify if bulk delivery of fluids can occur in order to satisfy the need for fluid re-stocking (rather than transportation via forklift).

C. If the forklift transfer is indeed required to satisfy fluid inventory needs the Facilities Department will notify a Facilities Technician of the fluid type and amount that needs to be transported. This information will be relayed using a work order detailing all pertinent information. All relevant documentation required to execute this activity should be attached to the work order (i.e., Fluid Transporting Checklist, Transfer of Fluids Via Forklift Between Buildings Work Instruction, etc.). For specific work instructions related to the “Transfer of Fluids Via Forklift Between Buildings” activity please reference FWI-0005 Transfer of Fluids Between Buildings

D. The Facilities Department is responsible for capturing all forms related to this activity. This includes the Fluid Transporting Checklist and in the event of a spill greater than 25 gallons the EPC Discharge Report Form.

E. If a spill occurs please reference ASOP-0008R3 Emergency Response Contingency Plan for responses to various types of emergency spills.

F. The Facilities Department must notify the Risk Department if a spill greater than 25 gallons does occur.
ATTACHMENT A – EPC DISCHARGE REPORT FORM

Discharge Reporting Form

PLEASE PRINT OR TYPE

1. Facility ID Number (if registered): __________________________

2. Date of form completion: __________________________

3. General Information

   Facility name: __________________________
   Facility Owner or Operator: __________________________
   Facility Contact Person: __________________________
   Facility mailing address: __________________________
   Location of discharge (facility street address): __________________________
   Latitude and Longitude of discharge (if known): __________________________

4. Date of receipt of test results or discovery of confirmed discharge: __________________________

5. Estimated number of gallons discharged: __________________________

6. Discharge affected: [ ] Air [ ] Soil [ ] Ground water [ ] Drinking water well(s) [ ] Storage [ ] Surface water (water body name)

7. Method of discovery (check all that apply):

   [ ] LIQUID detector (automatic or manual) [ ] Internal inspection
   [ ] VAPOR detector (automatic or manual) [ ] Evaporative loss
   [ ] TIGHTNESS test [ ] Monitoring wells
   [ ] Pressure test [ ] Automatic inventory reconciliation
   [ ] Statistical inventory reconciliation [ ] Manual tack-gauging
   [ ] Closure/Closure Analyses
   [ ] Groundwater analytical samples
   [ ] Soil analytical tests or samples
   [ ] Visual observation
   [ ] Other

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

   [ ] Gasoline [ ] Aromatics
   [ ] Jet fuel [ ] liting oil
   [ ] Diesel [ ] New/late oil
   [ ] Kerosene [ ] Mineral oil
   [ ] Other

9. Discharge originated from: (check all that apply)

   [ ] Dispensing system [ ] Pipe [ ] Burge
   [ ] Tank [ ] Tanker-trailer [ ] Railroad tanker
   [ ] Unknown [ ] Vessel; marine [ ] Tank truck
   [ ] Other [ ] Aircraft [ ] Drum

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

    [ ] Leak [ ] Puncture
    [ ] Fire/explosion [ ] Overfill
    [ ] Spill [ ] Human error
    [ ] Collision [ ] Vehicle Accident
    [ ] Corrosion [ ] Installation failure
    [ ] Other

11. Actions taken in response to the discharge:

12. Comments:

13. Agencies notified (as applicable):

   [ ] State Warning Point 1-800-537-6379
   [ ] National Response Center 1-800-424-8888
   [ ] Fire Department
   [ ] County Task Force Program
   [ ] DEP (district/office)

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

Print Name of Owner, Operator or Authorized Representative

Signature of Owner, Operator or Authorized Representative

---

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ATTACHMENT B – FLUID TRANSPORTING CHECKLIST

Fluid Transporting Checklist  Date: ____________

This checklist must be filled out every time fluids are transported between buildings.

<table>
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<tr>
<th>Checklist Item</th>
<th>Yes</th>
<th>Comments</th>
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<tr>
<td>Make sure the drum is properly marked for the fluid being transported</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Secure drum carrier to forklift and attach drum securely to drum carrier</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>Verify emergency response equipment is readily available prior to transporting fluids</td>
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<tr>
<td>Drum to be filled inside containment area to reduce possibility of spill</td>
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<td>Verify the Attack Pac clean up kit is on the forklift prior to leaving containment area</td>
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<td></td>
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<tr>
<td>Flagman must be present prior to leaving containment area</td>
<td>☐</td>
<td></td>
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<tr>
<td>Inspect drum and verify there are no leaks prior to leaving containment area</td>
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<td></td>
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<tr>
<td>If a spill occurs contact your supervisor immediately and attempt to contain spill with attack pac</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>After fluids have been transported store drum and drum carrier in its proper location for future use</td>
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# STANDARD OPERATING PROCEDURE

**HILLSBOROUGH TRANSIT AUTHORITY**

## TRANSFER OF FLUIDS VIA FORKLIFT BETWEEN BUILDINGS

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<td>3/9/2015</td>
<td>Updated approver signature field, added Re-formatted Spill Report Form. Update Section 7.0 (Approved time for transporting fluids and requirements for training on work instruction FWI-0005)</td>
<td></td>
<td>DS/TJ</td>
</tr>
</tbody>
</table>

**ORIGINATED BY:**
Dale Smith  
Manager of Facilities Maintenance  

**REVIEWED BY:**
Thomas Jones  
ESMS Coordinator  

**APPROVED BY:**
Vasti Amaro  
Director of Maintenance  

**DATE:**
3-23-15  
3-24-15  
3-24-15

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<td>7.0 PROCEDURE</td>
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ATTACHMENT B – HART SPILL REPORT FORM .......................... 8
ATTACHMENT C – HART SPILL REPORT FORM .......................... 12
1.0 SCOPE
This SOP applies to all Maintenance Department employees involved in the transferring of fluids between buildings.

2.0 PURPOSE
At various points in time fluids are transferred between buildings for the purpose of restocking of bulk fluid containers/tanks. This SOP provides guidance for the safe and proper transferring of fluids between the Heavy Maintenance and Preventive Maintenance Buildings as well as emergency procedures in the event of a spill. Any deviation from this SOP is strictly prohibited. Deviation from the procedures described in this SOP can have significant negative environmental impacts and result in substantial economic loss.

3.0 ABBREVIATIONS / DEFINITIONS

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<tr>
<td>SOP</td>
<td>Standard Operating Procedure</td>
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<tr>
<td>SPCCP</td>
<td>Spill Prevention Control and Countermeasures Plan</td>
</tr>
</tbody>
</table>

4.0 REFERENCES
ASOP-0008R3 Emergency Response Contingency Plan  
FSOP-0003 Spill Response Safety Procedures  
FWI-0004 Transfer of Fluids via Forklift between Buildings  
HART SPCCP

5.0 FORMS
Attachment A  
Attachment B  
Attachment C

6.0 REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS
A. Safety Glasses
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C. Attack Pac Emergency Spill Kit:
   - 15 Pads
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- 1 Refuse Bag
- 1 Instruction Sheet

7.0 PROCEDURE

A. Prior to moving any fluids Shop Supervisors will contact the Facilities Department and give notification of the type and quantity of fluid that is to be transported via forklift.

B. It is preferable to not transfer fluids between buildings via forklift and should be avoided if at all possible. As such, the Facilities Department will contact inventory personnel in order to verify if bulk delivery of fluids can occur in order to satisfy the need for fluid re-stocking (rather than transportation via forklift).

C. Fluids shall only be transported Monday through Friday between the hours of 7:00am to 5:00pm without the direct approval from the Manager of Facilities.

D. If the forklift transfer is indeed required to satisfy fluid inventory requirements a Facilities Manager (or designated individual) will notify a Facilities Technician of the fluid type and amount that needs to be transported. All relevant documentation required to execute this activity should be readily accessible to Facilities personnel. For specific work instructions related to the "Transfer of Fluids Via Forklift Between Buildings" activity please reference FWI-0005 Transfer of Fluids Between Buildings.

E. Any employee that engages in the transporting of fluids between buildings must be trained on the work instruction FWI-0005 prior to moving any fluids and must possess a qualifications card as proof of training.

F. The Facilities Department is responsible for capturing all forms related to this activity. This includes the Fluid Transporting Checklist (Attachment A) and in the event of a spill, the Spill Report Form & EPC Discharge Report Form.

G. If an emergency spill was to occur during fluid transport that meets one or more the following conditions;

   a. The hazards of the material are not fully known and understood by the employees,
b. The proper protective equipment is not available to the employees,
c. The spill is not of a manageable size and type,
d. Employees present at the time of incident have not been trained to deal with the spill, follow emergency response procedures as described in **ASOP-000R3 Emergency Response Contingency Plan**.

H. Otherwise, follow spill response & clean-up procedures as described in **FSOP-0003 Spill Response Safety Procedures**

I. Internal Reporting & Notification

a. The details of all spills must be documented by designated personnel **during the spill on a Spill Report Form (Attachment C)**.

b. If an event occurs that triggers the use of a **Spill Report Form**, the Risk Department must be immediately notified and a completed Spill Report Form must be submitted to Risk before the end of the shift.

J. External Reporting & Notification

a. Minor & Major Spills

i. If oil product enters any navigable waterway or tributary, the National Response Center will be immediately notified. Please reference the **HART SPCCP** for contact information.

b. Federal Notification

i. Regulations require reporting of spills, with written information to the EPA Region 4 Administrator within 60 days and the National Response Center within 7 days if:

ii. A single discharge of more than 1,000 gallons, and/or

iii. Any two discharges of more than 42 gallons in any 12 month period.
iv. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager.

c. State and Local Notification

i. To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under 62-770 and 62-761 F.A.C., a reportable quantity is defined as:

ii. If spilled on the surface of the land, any quantity of oil over 25 gallons.

iii. If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.

iv. Notification of the discovery shall also be made to EPC within 24 hours or before the close of the County's next business day.

v. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager using EPC Discharge Form (Attachment B).
# ATTACHMENT A – FLUID TRANSPORTING CHECKLIST

## Fluid Transporting Checklist

This checklist must be filled out every time fluids are transported between buildings.

<table>
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<th>ESMS Checklist</th>
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ATTACHMENT B – HART SPILL REPORT FORM

Hillsborough Area Regional Transit Authority
1201 E. 7th Avenue • Tampa, Florida 33605
(813) 223-6831 • fax (813) 223-7976 • www.goHART.org

SPILL REPORT FORM

Risk Management Department

TO BE COMPLETED BY DESIGNATED PERSONNEL DURING THE SPILL.

Federal Notification:
Regulations require reporting of spills, with written information submitted to the USEPA Region 4 Administrator within 60 days if:

- A single discharge of more than 1,000 gallons, and/or
- Any two discharges of more than 42 gallons in any 12 month period.

The address for the USEPA Region 4 Administrator is provided below:

US EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303
404-562-9000 1-800-241-1754

Note: Be prepared to provide response agencies with the information marked with an asterisk (*) on this checklist. Response agencies may also be called for assistance inside facility boundaries.

State and Local Notification:
To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under the Florida Administrative Rules Chapters 62-770 and 62-761 F.A.C., a reportable quantity (RQ) is defined as follows:

- If spilled on the surface of the land, any quantity of oil over 25 gallons.
- If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.

Notification of the discovery shall also be made to the County (Environmental Protection Commission) within 24 hours or before the close of the County’s next business day. The address for the Environmental Protection
Commission is provided below:

Environmental Protection Commission
3629 Queen Palm Drive
Tampa, Florida 33619
813-627-2600

If one or both of these criteria are met, contact the *Florida Division of Emergency Management: (850) 413-9969.*
1. Did the contaminant release enter navigable waters of the United States (Lake/ River or storm sewer or storm draintributary to the Lake/River)?

   YES (___) NO (___)

   If yes, see Notification Requirements (#13). Provide brief explanation of emergency conditions as outlined in items 2 through 9.

2. Facility: Hillsborough Area Regional Transit Authority (HART) Fleet Maintenance Facility
   4305 East 21ST Avenue Tampa, Florida 33605

3. Name of Emergency Coordinator completing this checklist:

   Name: ________________________________ Telephone Number ____________________

4. Date: ________________ Time of Incident: ____________________

5. Exact location of the spill or emergency incident:

   ________________________________________________________________

6. Material involved: __________________________ Quantity: ______________________

7. Source of Oil Spill/Release:

   ________________________________________________________________

   ________________________________________________________________

8. Cause of Oil Spill/Release or Emergency Incident:

   ________________________________________________________________

   ________________________________________________________________

9. Name of nearest body of water or sewage treatment plant threatened or involved in spill/chemical release:

   ________________________________________________________________

   ________________________________________________________________

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10. Ditch or storm drain reached? YES___ NO___

11. Sanitary sewer impacted? YES___ NO___

12. Weather Conditions at time of spill

13. Notification Requirements:
   If the incident involves:
   a. A spill exceeding reportable quantities escaping a facility building OR
   b. An emergency that threatens public health and/or the environment.

14. Is evacuation of the entire building necessary? YES___ NO___
   If answer is YES, note the time an alarm was sounded. _____________ A.M./P.M (Circle One)

15. Are outside emergency response agencies needed? YES (___) NO (___)
   If yes, contact primary emergency response agencies as needed.

16. Hazard to human health or environment outside the facility (meaning outside facility buildings?)
   YES (___) NO (___) If yes, provide a brief explanation of hazard: See Notification Requirements (#13).
## Discharge Reporting Form

**ATTACHMENT C – EPC Discharge Form**

### Instructions:
- Please print or type all information.
- Complete all applicable boxes.

### General Information
- **Facility Name:**
- **Facility Owner or Operator:**
- **Facility Contact Person:**
- **Telephone number:**
- **County:**
- **Location of discharge (facility street address):**
- **Latitude and Longitude of discharge:**

### Date of Incident
- **Date of incident:**
- **Estimated number of gallons discharged:**

### Method of discovery
- **Air:**
- **Surface water:**
- **Drinking water supply:**

### Type of regulated substances discharged
- **Unknown:**
- **Gasoline:**
- **Diesel:**
- **Unknown substance:**
- **Petroleum:**
- **Kerosene:**

### Discharge origin
- **Drainage system:**
- **Pipe:**
- **Tank:**
- **Other:**

### Causes of discharge
- **Unintentional:**
- **Intentional:**

### Actions taken in response to discharge

### Agencies notified
- **State Waste Portal:**
- **National Response Center:**
- **Local/County:**
- **Other:**

### Pledges:
- **By User:**
- **By Operator or Authorized Representative:**

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STANDARD OPERATING PROCEDURE
HILLSBOROUGH TRANSIT AUTHORITY

UNLOADING OR EMPTYING OF OIL WATER SEPARATORS

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</tbody>
</table>

ORIGINATED BY: ORIGINAL SIGNATURE ON FILE
Dale Smith
Manager of Facility Maintenance

REVIEWED BY: ORIGINAL SIGNATURE ON FILE
Richard Morris
Manager of Fleet Maintenance

REVIEWED BY: ORIGINAL SIGNATURE ON FILE
Thomas Jones
ESMS Coordinator

APPROVED BY: ORIGINAL SIGNATURE ON FILE
James Fetzer
Director of Maintenance

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<td>7.0 PROCEDURE</td>
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**ATTACHMENTS**

ATTACHMENT A – HART SPILL REPORT FORM ............................................7

ATTACHMENT B - EPC DISCHARGE FORM.................................................11
1.0 SCOPE
This SOP applies to all Facilities Department employees involved in the unloading or emptying of the oil water separators.

2.0 PURPOSE
The purpose of this Standard Operating Procedure (SOP) is to provide environmental guidelines for the proper management and emptying of the oil/water separator. Any deviation from this SOP is strictly prohibited. Deviation from the procedures described in this SOP can have significant negative environmental impacts and result in substantial economic loss.

3.0 ABBREVIATIONS / DEFINITIONS

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<tr>
<td>OWS</td>
<td>Oil Water Separator</td>
</tr>
<tr>
<td>HART</td>
<td>Hillsborough Transit Authority</td>
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</table>

4.0 REFERENCES
Discharge of Oil CFR Title 40-Part 110
Oil Pollution Prevention (Spill, Pollution Control & Countermeasures Plan) CFR Title 40-Part 112
ASOP-0008 Emergency Response Contingency Plan
FSOP-0003 Spill Response Safety Procedures

5.0 FORMS
Attachment A
Attachment B

6.0 REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS
Safety Cones
Caution Tape
Eye Protection
Gloves

7.0 PROCEDURE
A. Meet the approved contractor and escort them to the site of the Oil Water Separator (OWS) with their vacuum truck.
B. There are two (2) Oil Water Separators located on-site.
   a. The Preventive Maintenance building OWS is located on the North side of the building in front of the tank farm.
   b. The Heavy Maintenance building OWS is located on the West side of the building in front of bay 14.

C. The Facilities Technician will direct the contractor where to park the vacuum truck to service and empty the OWS and minimize any disruption to normal activities. The Facilities Technician will then place safety cones and caution tape around vehicle to clearly mark the work area for safety.

D. Verify all emergency procedures with contractor prior to beginning the emptying of the OWS.

E. Contractor will gain access to the OWS by removing the manhole cover and unscrewing the six inch (6”) PVC cap.

F. Contractor will place vacuum hose inside tank and remove the contents of the OWS into the vacuum truck.

G. Once completed the contractor shall use a catch bucket to prevent any contaminants from hitting the pavement.

H. After all work is completed the facilities technician signs the waste manifest prior to contractor leaving the site.

I. Within 45 days Facilities will receive a completed waste manifest that is signed off on by the disposal facility.

J. If an emergency spill was to occur during emptying of the OWS that meets one or more the following conditions;
   1. The hazards of the material are not fully known and understood by the employees,
   2. The proper protective equipment is not available to the employees,
   3. The spill is not of a manageable size and type,
   4. Employees present at the time of incident have not been trained to deal with the spill,

K. Follow emergency response procedures as described in ASOP-0008 *Emergency Response Contingency Plan*.

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L. Otherwise, follow spill response & clean-up procedures as described in FSOP-0003 Spill Response Safety Procedures

M. Internal Reporting & Notification
   1. The details of all spills must be documented by designated personnel during the spill on a Spill Report Form (Attachment A).
   2. If an event occurs that triggers the use of a Spill Report Form, the Risk Department must be immediately notified and a completed Spill Report Form must be submitted to Risk before the end of the shift.

N. External Reporting & Notification
   1. Minor & Major Spills
      a. If oil product enters any navigable waterway or tributary, the National Response Center will be immediately notified. Please reference the HART SPCCP for contact information.
   2. Federal Notification
      a. Regulations require reporting of spills, with written information to the EPA Region 4 Administrator within 60 days and the National Response Center within 7 days if:
         b. A single discharge of more than 1,000 gallons, and/or
         c. Any two discharges of more than 42 gallons in any 12 month period.
         d. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager.
   3. State and Local Notification
      a. To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under 62-770 and 62-761 F.A.C., a reportable quantity is defined as:
         b. If spilled on the surface of the land, any quantity of oil over 25 gallons.
         c. If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.
<table>
<thead>
<tr>
<th>SUBJECT: UNLOADING OR EMPTYING OF OIL WATER SEPARATORS</th>
<th>SOP</th>
<th>REVISION</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSOP-0002</td>
<td></td>
<td></td>
<td>6 of 10</td>
</tr>
</tbody>
</table>

d. Notification of the discovery shall also be made to EPC within 24 hours or before the close of the County's next business day.

e. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager using **EPC Discharge Form (Attachment B)**.
ATTACHMENT A –SPILL REPORT FORM
Risk Management Department

TO BE COMPLETED BY DESIGNATED PERSONNEL **DURING THE SPILL.**

**Federal Notification:**
Regulations require reporting of spills, with written information submitted to the USEPA Region 4 Administrator within 60 days if:

- A single discharge of more than 1,000 gallons, and/or
- Any two discharges of more than 42 gallons in any 12 month period.

The address for the USEPA Region 4 Administrator is provided below:

US EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303
404-562-9900 1-800-241-1754

**Note:** Be prepared to provide response agencies with the information marked with an asterisk (*) on this checklist. Response agencies may also be called for assistance inside facility boundaries.

**State and Local Notification:**
To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under the Florida Administrative Rules Chapters 62-770 and 62-761 F.A.C., a reportable quantity (RQ) is defined as follows:

- If spilled on the surface of the land, any quantity of oil over 25 gallons.
- If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.

Notification of the discovery shall also be made to the County (Environmental Protection Commission) within 24 hours or before the close of the County's next business day. The address for the Environmental Protection Commission is provided below:

Environmental Protection Commission
3629 Queen Palm Drive
Tampa, Florida 33619
813-627-2600

If one or both of these criteria are met, contact the **Florida Division of Emergency Management: (850) 413-9969.**
*1. Did the contaminant release enter navigable waters of the United States (Lake/ River or storm sewer or storm drain/tributary to the Lake/River)?

   YES (__) NO (___)

   If yes, see Notification Requirements (#13). Provide brief explanation of emergency conditions as outlined in Items 2 through 9.

*2. Facility: Hillsborough Area Regional Transit Authority (HART) Fleet Maintenance Facility

   4305 East 21ST Avenue Tampa, Florida 33605

*3 Name of Emergency Coordinator completing this checklist:

   Name: _________________________________ Telephone Number: ________________________

*4 Date: ________________, Time of Incident: ___________________________

*5 Exact location of the spill or emergency incident:

   ____________________________________________________________________________

*6 Material involved: ________________________________ Quantity: ________________________

*7 Source of Oil Spill/Release:

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________

*8 Cause of Oil Spill/Release or Emergency Incident:

   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
   ____________________________________________________________________________
*9. Name of nearest body of water or sewage treatment plant threatened or involved in spill/chemical release:

________________________________________________________________________

*10. Ditch or storm drain reached? YES___ NO___

*11. Sanitary sewer impacted? YES___ NO___

*12. Weather Conditions at time of spill

13. Notification Requirements:
   If the incident involves:
   a. A spill exceeding reportable quantities escaping a facility building OR
   b. An emergency that threatens public health and/or the environment.

14. Is evacuation of the entire building necessary? YES___ NO___
   If answer is YES, note the time an alarm was sounded. _______________A.M./P.M (Circle One)

15. Are outside emergency response agencies needed? YES (___) NO (___)
   If yes, contact primary emergency response agencies as needed.

16. Hazard to human health or environment outside the facility (meaning outside facility buildings?)
   YES (___) NO (___) If yes, provide a brief explanation of hazard: See Notification Requirements (#13).

________________________________________________________________________
ATTACHMENT B – EPC DISCHARGE REPORT FORM

Discharge Reporting Form
PLEASE PRINT OR TYPE

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

3. General Information
Facility name: ____________________________
Facility Owner or Operator: ____________________________
Facility Contact Person: ____________________________
Facility Mailing address: ____________________________
Location of discharge (facility street address): ____________________________
Latitude and Longitude of discharge (if known): ____________________________

4. Date of receipt of test results or discovery of confirmed discharge: ____________

5. Estimated number of gallons discharged: ____________

6. Discharge affected: [ ] Air [ ] Soil [ ] Ground water [ ] Drinking water well(s) [ ] Shoreline [ ] Surface water (water body name)

7. Method of discovery (check all that apply):
[ ] Internal inspection [ ] Inventory control [ ] Groundwater analytical samples
[ ] Steam/steam injection [ ] Surface analytical tests or samples [ ] Visual observation
[ ] Closure/Closure Assistance [ ] Soil analytical tests or samples [ ] Other

8. Type of regulated substance discharged: (check one)
[ ] Hazardous substances – includes CERCLA substances from ESTs above reportable quantities, pesticides, ammonia, chlorine, and derivatives

9. Discharge originated from as: (check all that apply):
[ ] Dispensing system [ ] Pipe [ ] Other
[ ] Tank [ ] Fitting [ ] Drinking
[ ] Unknown [ ] Valve failure [ ] Vehicle
[ ] Other [ ] Tanker [ ] Airplane
[ ] Other [ ] Pipeline [ ] Drum

10. Cause of the discharge: (check all that apply)
[ ] Leak connection [ ] Punctured [ ] Collision
[ ] Fire/Explosion: [ ] Overfill [ ] Vehicle Accident
[ ] Other [ ] Human error [ ] Installation failure

11. Actions taken in response to the discharge:

12. Comments:

13. Agencies notified (as applicable):
[ ] State Warning Point [ ] National Response Center
[ ] Fire Department [ ] County Tanks Program
[ ] DEP (district/person)

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: ____________________________
Signature of Owner, Operator or Authorized Representative: ____________________________

Print Date: 11/25/2015 12:29 PM
Original Date of Issue: 11/23/15
Current Issue Date: 11/23/15
Revision:

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STANDARD OPERATING PROCEDURE
HILLSBOROUGH TRANSIT AUTHORITY

SPILL RESPONSE SAFETY PROCEDURES

<table>
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<tr>
<th>REVISION</th>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>RLSE NO.</th>
<th>INITIALS</th>
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<tr>
<td>001</td>
<td>2/13/15</td>
<td>Major revisions to Section 8.0, added new Spill Report Form (Attachment), &amp; updated Emergency Contact info</td>
<td>02</td>
<td>TJ</td>
</tr>
<tr>
<td>002</td>
<td>7/16/15</td>
<td>Updated Contact List</td>
<td>03</td>
<td>DS</td>
</tr>
</tbody>
</table>

ORIGINATED BY: ___________________________________________ Original Signature on File
Dale Smith
Manager of Facilities Maintenance

REVIEWED BY: ___________________________________________ Original Signature on File
Thomas Jones
ESMS Coordinator

APPROVED BY: ___________________________________________ Original Signature on File
Robert Andis
Interim Director of Maintenance

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ESMS
1.0 SCOPE
The following Spill Response Safety Procedure has been prepared for the Hillsborough Transit Authority. Implementation of this plan is intended to mitigate or protect Authority personnel and the surrounding community from injury; prevent contamination of the bay and storm sewers with hazardous materials; prevent damage to the environment; or a combination of these. This plan will be implemented in the event of a spill or release of hazardous or non-hazardous materials and waste. This procedure is designed in accordance with all Federal and State laws with respect to emergency preparedness and prevention of emergency events.

This procedure is intended as a guide of emergency procedures in the event of a material spill. The document is also part of the HART Emergency Response Contingency Plan as a reference source to familiarize local emergency response agencies, fire and police departments on operations relating to hazardous and non-hazardous materials and wastes and emergency response for HART.

2.0 PURPOSE
The purpose of the procedure is to protect life in emergency spill situations resulting from the release of all types of substances. Facility hazards need to be addressed in a comprehensive and coordinated manner. Accordingly, this guidance is broadly constructed to allow for personnel to address both physical and chemical hazards associated with events such as chemical releases or spills.

The objective of this SOP is to ensure that spills or releases of regulated non-hazardous or hazardous materials are investigated, reported; and precautions are taken to minimize impact to human health and the environment. In addition, it specifically prohibits some actions in order to avoid falling under the OSHA definition of “Hazardous Waste Operations and Emergency Response” (HAZWOPER) 29 CFR 1910.120. Any deviation from this SOP is strictly prohibited. Deviation from the procedures described in this SOP can have significant negative environmental impacts and result in substantial economic loss.

3.0 ABBREVIATIONS / DEFINITIONS

<table>
<thead>
<tr>
<th>ABBREVIATIONS</th>
<th>DEFINITIONS</th>
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</thead>
<tbody>
<tr>
<td>AST</td>
<td>Aboveground Storage Tank</td>
</tr>
<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
</tr>
</tbody>
</table>
4.0 REFERENCES
Occupational Safety and Health Act
62-770 & 62-761 F.A.C
ASOP-0008R3 Emergency Response Contingency Plan
ASOP-0010 Waste Management Plan

5.0 FORMS
Attachment A (Spill Report Form)
Attachment B (EPC Discharge Form)

6.0 ASSESSMENTS
A. Chemical Identification
Material Safety Data Sheets (MSDS) for all chemicals used by the Authority can be found in the heavy maintenance facility hallway near the employee rest rooms. Additional MSDS books are located in the Inventory Control area, Facilities Maintenance work areas, Paint and Body bays, the Preventive

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Maintenance building, the Communications and Electronics work area, the Marion Transit Center, the University Area Transit Center, Operator’s lounge, and the Route Maintenance work area at the 21st Avenue Facility and in Route Maintenance vehicles.

1. The MSDS book for the Streetcar facility is located on the first floor next to the stair way.

B. Chemical Types, Quantities and Locations

<table>
<thead>
<tr>
<th>CHEMICAL TYPE</th>
<th>QUANTITY</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diesel Fuel</td>
<td>5 – 20,000 gallon AST</td>
<td>West of Fuel Lane</td>
</tr>
<tr>
<td>Gear Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Used Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Antifreeze</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>55 gallon drum</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Grease</td>
<td>55 gallon drum</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Transmission Fluid</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Antifreeze</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>DEF Fluid</td>
<td>275 gallon Tote</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Miscellaneous Flammable Paint Products</td>
<td>Storage Closet</td>
<td>Inventory Control Receiving Area</td>
</tr>
<tr>
<td>Miscellaneous Flammable Paint Products</td>
<td>Storage Cabinets</td>
<td>Maintenance Body Shops – (2)</td>
</tr>
<tr>
<td>Vehicle and Solar Light Batteries</td>
<td>Battery Room</td>
<td>Maintenance Facility</td>
</tr>
</tbody>
</table>
7.0 REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS
None

8.0 PROCEDURE
A. Supervisor Responsibilities
1. Following notification of a material spill, the on-duty supervisors will:
   a. Request activation of internal facility alarms and communication systems as necessary.
   b. Notify emergency response units, necessary HART personnel and HART Public Information Office if required.
   c. Establish a Command Post within safe distance of the emergency site that is capable of internal and external communications; unless incapacitated, the Command Post will be the HART Dispatch Office.
   d. Provide information on special hazards to all departments and personnel involved with the emergency.
   e. Assess possible hazards and take reasonable measures necessary to ensure that fires, explosions and other releases do not occur, recur or spread.
   f. Obtain and record information on the character, exact source, amount and physical extent of any released materials and the effects of the release, fire or explosion (e.g. the effects of any toxic, irritating or asphyxiating gases that are generated, or the effects of any hazardous surface water runoff from water or chemical agents used to control fire and heat induced explosions).
   g. Document all steps taken, personnel notified, and all other pertinent information. Take pictures if necessary.

B. Spills
1. If an emergency spill occurs and one or more of the following conditions exist;
   a. The hazards of the material are not fully known and understood by the employees;
b. The proper protective equipment is not available to the employees;

c. The spill is not of a manageable size and type;

d. Employees present at the time of incident have not been trained to deal with the spill;

Follow emergency response procedures as described in ASOP-000R3 Emergency Response Contingency Plan. If the emergency spill doesn’t meet any of these criteria then continue as directed in this procedure.

2. Any employee seeing a hazardous waste or chemical spill at the facility will:

a. Notify a supervisor or dispatcher to report the spill location.

b. If it is possible and safe to do so, shutdown any nearby equipment.

c. Attempt to contain the spill, if trained to do so, using the proper personal protective gear and equipment.

d. If the material spill releases into the environment, occurs on right-of-ways or materials are spilled from HART vehicles on roadways, U.S. Liquids may be called depending on the size and content of the spill.

3. Once notified of the emergency spill situation, supervisors will:

a. Evaluate the level of threat or hazard.

b. Determine whether HART personnel will handle the emergency response of 911 will be called.

c. Ensure non-essential persons are protected and evacuated from the spill area and account for the same. If it is possible and safe to do so, conduct a walk-through of the affected area to assure all employees and visitors are clear.

d. Coordinate emergency response activities of HART employees until the Fire Department arrives.

e. Notify the HART Risk, Safety and Security Department and any other pertinent managerial personnel.
f. Once successfully contained, coordinate clean-up and other pertinent follow-up procedures.

g. During the spill, document the details of the spill using a *Spill Report Form (Attachment A)*. Take pictures if necessary.

h. Documentation shall include at a minimum:
   i. Date and time spill happened.
   ii. Location of spill, address or street block if possible.
   iii. Where navigable waters of the United States impacted?
   iv. Name of personnel completing the report form.
   v. Material that was spilled.
   vi. Amount spilled or estimated total spill.
   viii. Cause of Oil Spill/Release or Emergency Incident.
   ix. What happened and who was involved?
   x. How was the spill cleaned up?
   xi. Name of nearest body of water or sewage treatment plant threatened or involved in spill chemical release.
   xii. Was a ditch or storm drain reached?
   xiii. Was a sanitary sewer impacted?
   xiv. Weather Conditions at time of spill
   xv. If the incident involves: (A) a spill exceeding reportable quantities escaping a facility building OR (B) an emergency that threatens public health and/or the environment.
   xvi. Is building evacuation necessary and if so what time was an alarm sounded?
   xvii. Are outside emergency response agencies needed?
   xviii. Is there hazard to human health or environment outside the facility (meaning outside facility buildings?)

4. Reporting & Notification
   a. Internal Reporting & Notification
i. The details of all spills must be documented by designated personnel during the spill on a Spill Report Form (Attachment A).

ii. If an event occurs that triggers the use of a Spill Report Form, the Risk Department must be immediately notified and a completed Spill Report Form must be submitted to Risk before the end of the shift.

b. External Reporting & Notification

   i. Minor & Major Spills

      a. If oil product enters any navigable waterway or tributary, the National Response Center will be immediately notified. Please reference the HART SPCCP for contact information.

   ii. Federal Notification

      a. Regulations require reporting of spills, with written information to the EPA Region 4 Administrator within 60 days and the National Response Center within 7 days if:

         b. A single discharge of more than 1,000 gallons, and/or

         c. Any two discharges of more than 42 gallons in any 12 month period.

      d. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager.

   iii. State and Local Notification

      a. To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under 62-770 and 62-761 F.A.C., a reportable quantity is defined as:

         b. If spilled on the surface of the land, any quantity of oil over 25 gallons.

         c. If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.
d. Notification of the discovery shall also be made to EPC within 24 hours or before the close of the County’s next business day.

e. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager using an **EPC Discharge Form (Attachment B)**.

C. Equipment

1. Location of Emergency Chemical Spill Kit
   a. For off property chemical spills that are small enough to be handled by HART employees, there is a 4 foot by 4 foot yellow storage container marked “HAZMAT Spill Kit” located in Bay #10 in the heavy maintenance building.
   b. For on property chemical spills that are small enough to be handled by HART employees, there are 55 gallon yellow drum “HAZMAT Spill Kits” located in the center of the heavy maintenance and PM buildings.

2. Contents of Emergency Chemical Spill Kit
   a. The following items are contained in the large spill kit which as the capacity of absorbing 80 gallons of liquid:
      - Oil absorbent
      - Containment boom
      - Absorbent pads
      - 15 gallon hazardous waste steel drum
      - 2 plastic shovels
      - 2 push brooms
      - 5 pairs of gloves
      - 5 sets of eye protection
      - 10 safety cones
   b. The following items are contained in the 55 gallon drum spill kit which has the capacity of absorbing 45 gallons of liquid:
      - Oil absorbent
      - Containment boom
• Absorbent pads
• Yellow 55 gallon drum
• 1 plastic shovel
• 1 push broom
• 1 pair of gloves
• 1 set of eye protection
c. Any employee who is to be involved in any emergency response clean-up must be trained to perform this function and must wear prescribed PPE.

3. Waste Disposal
   a. Spill and absorbent materials from clean-up actions are to be placed in waste drums or other appropriate waste container at the HART facility.
   b. Spilled material of petroleum based materials, (i.e. oils, hydraulic fluids and fuels) should not be mixed with water-based materials (i.e. coolant).
   c. All containers must be labeled with its contents such as Used Oil, Used Coolant, Waste Sweepings, etc.
   d. Please reference the ASOP-0010 Waste Management Plan for more information regarding waste management.

D. Emergency Contact Phone Numbers

<table>
<thead>
<tr>
<th>CONTACT</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire Department and Law Enforcement</td>
<td>911</td>
</tr>
<tr>
<td>U.S. Liquids for Chemical Spills</td>
<td>623-5302, 624-5302 (24 hour Hotline)</td>
</tr>
<tr>
<td>EOC Central Command</td>
<td>236-3800</td>
</tr>
<tr>
<td>ADT Security Alarm Service</td>
<td>806-7000</td>
</tr>
<tr>
<td>Stanley Security Solution (Fire Alarm)</td>
<td>901-5177</td>
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<tr>
<td>SUBJECT:</td>
<td>SPILL RESPONSE SAFETY PROCEDURES</td>
</tr>
<tr>
<td>----------</td>
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<tbody>
<tr>
<td>HART Dispatch</td>
<td>626-3548 (Hotline)</td>
<td></td>
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<tr>
<td></td>
<td>623-5835 ext. 1101,</td>
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<tr>
<td></td>
<td>1016, 1017, 1019 or 1020</td>
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<tr>
<td>Primary</td>
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<td>Emergency</td>
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<tr>
<td>Coordinator</td>
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<tr>
<td>Dale Smith</td>
<td>384-6436</td>
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<tr>
<td>Manager of</td>
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<tr>
<td>Maintenance</td>
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<tr>
<td>Michael Hunt</td>
<td>384-6377</td>
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<tr>
<td>Asst. Manager</td>
<td>309-1604 (cell)</td>
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</tr>
<tr>
<td>of Facilities</td>
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<td></td>
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<tr>
<td>and Streetcar</td>
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<td>Maintenance</td>
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<tr>
<td>Rickey Kendall</td>
<td>384-6622</td>
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<tr>
<td>Director of</td>
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<tr>
<td>Risk &amp;</td>
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<tr>
<td>Environmental</td>
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<td>Safety</td>
<td></td>
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<tr>
<td>Alan Tuchman</td>
<td>384-6308</td>
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<tr>
<td>Manager of</td>
<td>394 6234 (cell)</td>
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<tr>
<td>Transportation</td>
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<tr>
<td>Supervision</td>
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<tr>
<td>Oscar McDaniel</td>
<td>384-6447</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Bus Transportation Manager</td>
<td>Insert (cell)</td>
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</tbody>
</table>

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ATTACHMENT A – HART SPILL REPORT FORM

SPILL REPORT FORM

Risk Management Department

TO BE COMPLETED BY DESIGNATED PERSONNEL DURING THE SPILL.

**Federal Notification:**
Regulations require reporting of spills, with written information submitted to the USEPA Region 4 Administrator within 60 days if:

- A single discharge of more than 1,000 gallons, and/or
- Any two discharges of more than 42 gallons in any 12 month period.

The address for the USEPA Region 4 Administrator is provided below:

US EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303
404-562-9900 1-800-241-1754

**Note:** Be prepared to provide response agencies with the information marked with an asterisk (*) on this checklist. Response agencies may also be called for assistance inside facility boundaries.

**State and Local Notification:**
To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under the Florida Administrative Rules Chapters 62-770 and 62-761 F.A.C., a reportable quantity (RQ) is defined as follows:

- If spilled on the surface of the land, any quantity of oil over 25 gallons.
- If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.
Notification of the discovery shall also be made to the County (Environmental Protection Commission) within 24 hours or before the close of the County's next business day. The address for the Environmental Protection Commission is provided below:

Environmental Protection Commission
3629 Queen Palm Drive
Tampa, Florida 33619
813-627-2600

If one or both of these criteria are met, contact the Florida Division of Emergency Management: (850) 413-9969.
*1. Did the contaminant release enter navigable waters of the United States (Lake/ River or storm sewer or storm drain/tributary to the Lake/River)?

YES (__) NO (___)

If yes, see Notification Requirements (#13). Provide brief explanation of emergency conditions as outlined in Items 2 through 9.

*2. Facility: Hillsborough Area Regional Transit Authority (HART) Fleet Maintenance Facility 4305 East 21ST Avenue Tampa, Florida 33605

*3 Name of Emergency Coordinator completing this checklist:

Name: ____________________________ Telephone Number: ____________________________

*4 Date: __________, Time of Incident: ____________________________

*5 Exact location of the spill or emergency incident:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

*6 Material involved: ____________________________ Quantity: ____________________________

*7 Source of Oil Spill/Release:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

*8 Cause of Oil Spill/Release or Emergency Incident:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

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**9. Name of nearest body of water or sewage treatment plant threatened or involved in spill/chemical release:**

________________________________________________________________________

**10. Ditch or storm drain reached? YES___ NO___**

**11. Sanitary sewer impacted? YES___ NO___**

**12. Weather Conditions at time of spill________________________________________________________________________**

**13. Notification Requirements:**
If the incident involves:

a. A spill *exceeding reportable quantities* escaping a facility building OR
b. An emergency that *threatens public health and/or the environment.*

**14. Is evacuation of the entire building necessary? YES___ NO___**
If answer is YES, note the time an alarm was sounded. _______________A.M./P.M (Circle One)

**15. Are outside emergency response agencies needed? YES (___) NO (___)**
If yes, contact primary emergency response agencies as needed.

**16. Hazard to human health or environment outside the facility (meaning outside facility buildings?)**
YES (___) NO (___) If yes, provide a brief explanation of hazard: *See Notification Requirements (#13).*

________________________________________________________________________

________________________________________________________________________
### Discharge Reporting Form

**PLEASE PRINT OR TYPE**

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:**
   - **Facility Owner or Operator:**
   - **Facility Contact Person:**
   - **Facility mailing address:**
   - **Location of discharge:**
   - **Facility 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
   - Ground water
   - Drinking water well(s)
   - Sediment
   - Surface water (water body name)

7. **Method of discovery (check all that apply):**
   - Liquid detector (automatic or manual)
   - Vapor detector (automatic or manual)
   - External 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
   - Used or waste oil
   - Gasoline
   - Aviation gas
   - Diesel
   - Heating oil
   - New lub oil
   - Kerosene
   - Mineral acid
   - Hazardous substance - includes CERCLA substances from CTS above reportable quantities, pesticides, ammonia, chlorine, and derivatives
   - Other

9. **Discharge originated from (check all that apply):**
   - Dispersing system
   - Pipe
   - Tank
   - Pumping
   - Valves
   - Valve failure
   - Other

10. **Cause of the discharge (check all that apply):**
    - Loose connection
    - Pumping
    - Fire/explosion
    - Overfill
    - Spill
    - Human error
    - Collision
    - Vehicle Accident
    - Installation failure

11. **Actions taken in response to the discharge:**

12. **Comments:**

13. **Agencies notified (as applicable):**
    - State Warning Post
    - National Response Center
    - Fire Department
    - County Tanks Program
    - DEP (district/person)

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:  
Signature of Owner, Operator or Authorized Representative:

---

**ATTACHMENT B – EPC DISCHARGE REPORT FORM**

---

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# STANDARD OPERATING PROCEDURE

HILLSBOROUGH TRANSIT AUTHORITY

## SPILL RESPONSE SAFETY PROCEDURES

<table>
<thead>
<tr>
<th>REVISION</th>
<th>DATE</th>
<th>DESCRIPTION</th>
<th>RLSE NO.</th>
<th>INITIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>2/13/15</td>
<td>Major revisions to Section 8.0, added new Spill Report Form (Attachment), &amp; updated Emergency Contact info</td>
<td>02</td>
<td>TJ</td>
</tr>
<tr>
<td>002</td>
<td>7/16/15</td>
<td>Updated Contact List</td>
<td>03</td>
<td>DS</td>
</tr>
</tbody>
</table>

**ORIGINATED BY:**
Dale Smith
Manager of Facilities Maintenance

**REVIEWED BY:**
Thomas Jones
ESMS Coordinator

**APPROVED BY:**
Robert Andis
Interim Director of Maintenance

---

Review Date: 7-16-15

---

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<tr>
<td>2.0 PURPOSE</td>
<td>3</td>
</tr>
<tr>
<td>3.0 ABBREVIATIONS / DEFINITIONS</td>
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<td>8.0 PROCEDURE</td>
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</tr>
</tbody>
</table>

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1.0 SCOPE

The following Spill Response Safety Procedure has been prepared for the Hillsborough Transit Authority. Implementation of this plan is intended to mitigate or protect Authority personnel and the surrounding community from injury; prevent contamination of the bay and storm sewers with hazardous materials; prevent damage to the environment; or a combination of these. This plan will be implemented in the event of a spill or release of hazardous or non-hazardous materials and waste. This procedure is designed in accordance with all Federal and State laws with respect to emergency preparedness and prevention of emergency events.

This procedure is intended as a guide of emergency procedures in the event of a material spill. The document is also part of the HART Emergency Response Contingency Plan as a reference source to familiarize local emergency response agencies, fire and police departments on operations relating to hazardous and non-hazardous materials and wastes and emergency response for HART.

2.0 PURPOSE

The purpose of the procedure is to protect life in emergency spill situations resulting from the release of all types of substances. Facility hazards need to be addressed in a comprehensive and coordinated manner. Accordingly, this guidance is broadly constructed to allow for personnel to address both physical and chemical hazards associated with events such as chemical releases or spills.

The objective of this SOP is to ensure that spills or releases of regulated non-hazardous or hazardous materials are investigated, reported; and precautions are taken to minimize impact to human health and the environment. In addition, it specifically prohibits some actions in order to avoid falling under the OSHA definition of “Hazardous Waste Operations and Emergency Response” (HAZWOPER) 29 CFR 1910.120. Any deviation from this SOP is strictly prohibited. Deviation from the procedures described in this SOP can have significant negative environmental impacts and result in substantial economic loss.

3.0 ABBREVIATIONS / DEFINITIONS

<table>
<thead>
<tr>
<th>ABBREVIATIONS</th>
<th>DEFINITIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>AST</td>
<td>Aboveground Storage Tank</td>
</tr>
<tr>
<td>CFR</td>
<td>Code of Federal Regulations</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPA</td>
<td>Environmental Protection Agency</td>
</tr>
<tr>
<td>EPC</td>
<td>Environmental Protection Commission</td>
</tr>
<tr>
<td>FAC</td>
<td>Florida Administrative Code</td>
</tr>
<tr>
<td>HART</td>
<td>Hillsborough Transit Authority</td>
</tr>
<tr>
<td>HAZMAT</td>
<td>Hazardous Material</td>
</tr>
<tr>
<td>HAZWOPER</td>
<td>Hazardous Waste Operations and Emergency Response</td>
</tr>
<tr>
<td>MSDS</td>
<td>Material Safety Data Sheet</td>
</tr>
<tr>
<td>OSHA</td>
<td>Occupational Safety and Health Act</td>
</tr>
<tr>
<td>PM</td>
<td>Preventive Maintenance</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal Protection Equipment</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedure</td>
</tr>
<tr>
<td>TPD</td>
<td>Tampa Police Department</td>
</tr>
<tr>
<td>U.S. Liquids</td>
<td>Qualified HAZMAT Clean-up Contracted Company</td>
</tr>
<tr>
<td>UST</td>
<td>Underground Storage Tank</td>
</tr>
</tbody>
</table>

4.0 REFERENCES
Occupational Safety and Health Act
62-770 & 62-761 F.A.C
ASOP-0008R3 Emergency Response Contingency Plan
ASOP-0010 Waste Management Plan

5.0 FORMS
Attachment A (Spill Report Form)
Attachment B (EPC Discharge Form)

6.0 ASSESSMENTS
A. Chemical Identification
Material Safety Data Sheets (MSDS) for all chemicals used by the Authority can be found in the heavy maintenance facility hallway near the employee rest rooms. Additional MSDS books are located in the Inventory Control area, Facilities Maintenance work areas, Paint and Body bays, the Preventive

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ESMS
Maintenance building, the Communications and Electronics work area, the Marion Transit Center, the University Area Transit Center, Operator's lounge, and the Route Maintenance work area at the 21st Avenue Facility and in Route Maintenance vehicles.

1. The MSDS book for the Streetcar facility is located on the first floor next to the stair way.

B. Chemical Types, Quantities and Locations

<table>
<thead>
<tr>
<th>CHEMICAL TYPE</th>
<th>QUANTITY</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diesel Fuel</td>
<td>5 – 20,000 gallon AST</td>
<td>West of Fuel Lane</td>
</tr>
<tr>
<td>Gear Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Used Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Antifreeze</td>
<td>1 – 1,000 gallon AST</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>55 gallon drum</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Grease</td>
<td>55 gallon drum</td>
<td>PM Facility</td>
</tr>
<tr>
<td>Grease</td>
<td>55 gallon drum</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Transmission Fluid</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Motor Oil</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Antifreeze</td>
<td>1 – 1,000 gallon AST</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>DEF Fluid</td>
<td>275 gallon Tote</td>
<td>Maintenance Building – Bay 11</td>
</tr>
<tr>
<td>Miscellaneous Flammable Paint Products</td>
<td>Storage Closet</td>
<td>Inventory Control Receiving Area</td>
</tr>
<tr>
<td>Miscellaneous Flammable Paint Products</td>
<td>Storage Cabinets</td>
<td>Maintenance Body Shops – (2)</td>
</tr>
<tr>
<td>Vehicle and Solar Light Batteries</td>
<td>Battery Room</td>
<td>Maintenance Facility</td>
</tr>
</tbody>
</table>
7.0 REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS
None

8.0 PROCEDURE

A. Supervisor Responsibilities
   1. Following notification of a material spill, the on-duty supervisors will:
      a. Request activation of internal facility alarms and communication systems as necessary.
      b. Notify emergency response units, necessary HART personnel and HART Public Information Office if required.
      c. Establish a Command Post within safe distance of the emergency site that is capable of internal and external communications; unless incapacitated, the Command Post will be the HART Dispatch Office.
      d. Provide information on special hazards to all departments and personnel involved with the emergency.
      e. Assess possible hazards and take reasonable measures necessary to ensure that fires, explosions and other releases do not occur, recur or spread.
      f. Obtain and record information on the character, exact source, amount and physical extent of any released materials and the effects of the release, fire or explosion (e.g. the effects of any toxic, irritating or asphyxiating gases that are generated, or the effects of any hazardous surface water runoff from water or chemical agents used to control fire and heat induced explosions).
      g. Document all steps taken, personnel notified, and all other pertinent information. Take pictures if necessary.

B. Spills
   1. If an emergency spill occurs and one or more of the following conditions exist;
      a. The hazards of the material are not fully known and understood by the employees;

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b. The proper protective equipment is not available to the employees;

c. The spill is not of a manageable size and type;

d. Employees present at the time of incident have not been trained to deal with the spill;

Follow emergency response procedures as described in ASOP-000R3 Emergency Response Contingency Plan. If the emergency spill doesn’t meet any of these criteria then continue as directed in this procedure.

2. Any employee seeing a hazardous waste or chemical spill at the facility will:
    a. Notify a supervisor or dispatcher to report the spill location.
    b. If it is possible and safe to do so, shutdown any nearby equipment.
    c. Attempt to contain the spill, if trained to do so, using the proper personal protective gear and equipment.
    d. If the material spill releases into the environment, occurs on right-of-ways or materials are spilled from HART vehicles on roadways, U.S. Liquids may be called depending on the size and content of the spill.

3. Once notified of the emergency spill situation, supervisors will:
   a. Evaluate the level of threat or hazard.
   b. Determine whether HART personnel will handle the emergency response of 911 will be called.
   c. Ensure non-essential persons are protected and evacuated from the spill area and account for the same. If it is possible and safe to do so, conduct a walk-through of the affected area to assure all employees and visitors are clear.
   d. Coordinate emergency response activities of HART employees until the Fire Department arrives.
   e. Notify the HART Risk, Safety and Security Department and any other pertinent managerial personnel.
f. Once successfully contained, coordinate clean-up and other pertinent follow-up procedures.

g. During the spill, document the details of the spill using a Spill Report Form (Attachment A). Take pictures if necessary.

h. Documentation shall include at a minimum:
   i. Date and time spill happened.
   ii. Location of spill, address or street block if possible.
   iii. Where navigable waters of the United States impacted?
   iv. Name of personnel completing the report form.
   v. Material that was spilled.
   vi. Amount spilled or estimated total spill.
   viii. Cause of Oil Spill/Release or Emergency Incident.
   ix. What happened and who was involved?
   x. How was the spill cleaned up?
   xi. Name of nearest body of water or sewage treatment plant threatened or involved in spill chemical release.
   xii. Was a ditch or storm drain reached?
   xiii. Was a sanitary sewer impacted?
   xiv. Weather Conditions at time of spill
   xv. If the incident involves: (A) a spill exceeding reportable quantities escaping a facility building OR (B) an emergency that threatens public health and/or the environment.
   xvi. Is building evacuation necessary and if so what time was an alarm sounded?
   xvii. Are outside emergency response agencies needed?
   xviii. Is there hazard to human health or environment outside the facility (meaning outside facility buildings?)

4. Reporting & Notification
   a. Internal Reporting & Notification
i. The details of all spills must be documented by designated personnel during the spill on a Spill Report Form (Attachment A).

ii. If an event occurs that triggers the use of a Spill Report Form, the Risk Department must be immediately notified and a completed Spill Report Form must be submitted to Risk before the end of the shift.

b. External Reporting & Notification

   i. Minor & Major Spills
      a. If oil product enters any navigable waterway or tributary, the National Response Center will be immediately notified. Please reference the HART SPCCP for contact information.

   ii. Federal Notification
      a. Regulations require reporting of spills, with written information to the EPA Region 4 Administrator within 60 days and the National Response Center within 7 days if:
         b. A single discharge of more than 1,000 gallons, and/or
         c. Any two discharges of more than 42 gallons in any 12 month period.
         d. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager.

   iii. State and Local Notification
      a. To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under 62-770 and 62-761 F.A.C., a reportable quantity is defined as:
         b. If spilled on the surface of the land, any quantity of oil over 25 gallons.
         c. If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.
d. Notification of the discovery shall also be made to EPC within 24 hours or before the close of the County’s next business day.

e. Any spill requiring external reporting will be reported by the HART Risk and Environmental Safety Manager using an EPC Discharge Form (Attachment B).

C. Equipment

1. Location of Emergency Chemical Spill Kit
   a. For off property chemical spills that are small enough to be handled by HART employees, there is a 4 foot by 4 foot yellow storage container marked “HAZMAT Spill Kit” located in Bay #10 in the heavy maintenance building.
   b. For on property chemical spills that are small enough to be handled by HART employees, there are 55 gallon yellow drum “HAZMAT Spill Kits” located in the center of the heavy maintenance and PM buildings.

2. Contents of Emergency Chemical Spill Kit
   a. The following items are contained in the large spill kit which as the capacity of absorbing 80 gallons of liquid:
      - Oil absorbent
      - Containment boom
      - Absorbent pads
      - 15 gallon hazardous waste steel drum
      - 2 plastic shovels
      - 2 push brooms
      - 5 pairs of gloves
      - 5 sets of eye protection
      - 10 safety cones
   b. The following items are contained in the 55 gallon drum spill kit which has the capacity of absorbing 45 gallons of liquid:
      - Oil absorbent
      - Containment boom
• Absorbent pads
• Yellow 55 gallon drum
• 1 plastic shovel
• 1 push broom
• 1 pair of gloves
• 1 set of eye protection

c. Any employee who is to be involved in any emergency response clean-up must be trained to perform this function and must wear prescribed PPE.

3. Waste Disposal

a. Spill and absorbent materials from clean-up actions are to be placed in waste drums or other appropriate waste container at the HART facility.

b. Spilled material of petroleum based materials, (i.e. oils, hydraulic fluids and fuels) should not be mixed with water-based materials (i.e. coolant).

c. All containers must be labeled with its contents such as Used Oil, Used Coolant, Waste Sweepings, etc.

d. Please reference the **ASOP-0010 Waste Management Plan** for more information regarding waste management.

D. Emergency Contact Phone Numbers

<table>
<thead>
<tr>
<th>CONTACT</th>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fire Department and Law Enforcement</td>
<td>911</td>
</tr>
<tr>
<td>U.S. Liquids for Chemical Spills</td>
<td>623-5302</td>
</tr>
<tr>
<td></td>
<td>624-5302</td>
</tr>
<tr>
<td></td>
<td>(24 hour Hotline)</td>
</tr>
<tr>
<td>EOC Central Command</td>
<td>236-3800</td>
</tr>
<tr>
<td>ADT Security Alarm Service</td>
<td>806-7000</td>
</tr>
<tr>
<td>Stanley Security Solution (Fire Alarm)</td>
<td>901-5177</td>
</tr>
<tr>
<td>SUBJECT:</td>
<td>SPILL RESPONSE SAFETY PROCEDURES</td>
</tr>
<tr>
<td>---</td>
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<td></td>
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<table>
<thead>
<tr>
<th></th>
<th>HART Dispatch</th>
<th>626-3548 (Hotline)</th>
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<tbody>
<tr>
<td></td>
<td>623-5835 ext. 1101, 1016, 1017, 1019 or 1020</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Primary Emergency Coordinator</th>
<th>384-6436</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Dale Smith Manager of Facility Maintenance</td>
<td>526-1302 (cell)</td>
</tr>
<tr>
<td></td>
<td>Michael Hunt Asst. Manager of Facilities and Streetcar Maintenance</td>
<td>384-6377</td>
</tr>
<tr>
<td></td>
<td></td>
<td>309-1604 (cell)</td>
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<tr>
<td></td>
<td>Rickey Kendall Director of Risk &amp; Environmental Safety</td>
<td>384-6622</td>
</tr>
<tr>
<td></td>
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<td>309-1618 (cell)</td>
</tr>
<tr>
<td></td>
<td>Alan Tuchman Manager of Transportation Supervision</td>
<td>384-6308</td>
</tr>
<tr>
<td></td>
<td></td>
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<tr>
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</tr>
<tr>
<td></td>
<td></td>
<td>Insert (cell)</td>
</tr>
</tbody>
</table>
ATTACHMENT A – HART SPILL REPORT FORM

Hillsborough Area Regional Transit Authority
1201 E. 7th Avenue • Tampa, Florida 33605
(813) 223-6831 • fax (813) 223-7976 • www.goHART.org

SPILL REPORT FORM
Risk Management Department

TO BE COMPLETED BY DESIGNATED PERSONNEL DURING THE SPILL.

Federal Notification:
Regulations require reporting of spills, with written information submitted to the USEPA Region 4 Administrator within 60 days if:

- A single discharge of more than 1,000 gallons, and/or
- Any two discharges of more than 42 gallons in any 12 month period.

The address for the USEPA Region 4 Administrator is provided below:

US EPA, Region 4
Sam Nunn Atlanta Federal Center
61 Forsyth Street, SW
Atlanta, GA 30303
404-562-9900 1-800-241-1754

Note: Be prepared to provide response agencies with the information marked with an asterisk (*) on this checklist. Response agencies may also be called for assistance inside facility boundaries.

State and Local Notification:
To satisfy the state reporting requirements, the location and quantity of any spill must be determined. Under the Florida Administrative Rules Chapters 62-770 and 62-761 F.A.C., a reportable quantity (RQ) is defined as follows:

- If spilled on the surface of the land, any quantity of oil over 25 gallons.
- If spilled into the waters of the state, any quantity that would produce a visible oil slick, oil solids, or coat aquatic life, habitat, or property with oil.

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Notification of the discovery shall also be made to the County (Environmental Protection Commission) within 24 hours or before the close of the County's next business day. The address for the Environmental Protection Commission is provided below:

Environmental Protection Commission
3629 Queen Palm Drive
Tampa, Florida 33619
813-627-2600

If one or both of these criteria are met, contact the Florida Division of Emergency Management: (850) 413-9969.

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*1. Did the contaminant release enter navigable waters of the United States (Lake/ River or storm sewer or storm drain/tributary to the Lake/River)?

YES ( ) NO ( )

If yes, see Notification Requirements (#13). Provide brief explanation of emergency conditions as outlined in Items 2 through 9.

*2. Facility: Hillsborough Area Regional Transit Authority (HART) Fleet Maintenance Facility
4305 East 21st Avenue Tampa, Florida 33605

*3 Name of Emergency Coordinator completing this checklist:
Name: ___________________________ Telephone Number: ___________________________

*4 Date: ______________ Time of Incident: ___________________________

*5 Exact location of the spill or emergency incident:

________________________________________________________________________

*6 Material involved: ___________________________ Quantity: ___________________________

*7 Source of Oil Spill/Release:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

*8 Cause of Oil Spill/Release or Emergency Incident:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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9. Name of nearest body of water or sewage treatment plant threatened or involved in spill/chemical release:

10. Ditch or storm drain reached? YES ___ NO ___

11. Sanitary sewer impacted? YES ___ NO ___

12. Weather Conditions at time of spill

13. Notification Requirements:
   If the incident involves:
   a. A spill exceeding reportable quantities escaping a facility building OR
   b. An emergency that threatens public health and/or the environment.

14. Is evacuation of the entire building necessary? YES ___ NO ___
   If answer is YES, note the time an alarm was sounded. ______________A.M./P.M. (Circle One)

15. Are outside emergency response agencies needed? YES (___) NO (___)
   If yes, contact primary emergency response agencies as needed.

16. Hazard to human health or environment outside the facility (meaning outside facility buildings?)
   YES (___) NO (___) If yes, provide a brief explanation of hazard: See Notification Requirements (#13).

   ____________________________________________________________

   ____________________________________________________________

   ____________________________________________________________
Discharge Reporting Form

PLEASE PRINT OR TYPE

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

1. Facility ID Number (if applicable): __________________________

2. Date of form completion: __________________________

3. General information
   Facility name: __________________________
   Facility Owner or Operator: __________________________
   Facility Contact Person: __________________________
   Facility Mailing address: __________________________
   Phone number: __________________________
   County: __________________________
   Latitude and Longitude of discharge (if known): __________________________

4. Date of receipt of test results or discovery of confirmed discharge: __________________________

5. Estimated number of gallons discharged: __________________________

6. Discharge affected: [ ] Air [ ] Soil [ ] Groundwater [ ] Drinking water well(s) [ ] Slopeline [ ] Surface Water (water body name)

7. Method of discovery (check all that apply)
   [ ] Internal inspection
   [ ] Inventory control
   [ ] Monitoring wells
   [ ] Automatic tank gauging
   [ ] Manual tank gauging
   [ ] Closure/Closure Assistance
   [ ] Groundwater analytical samples
   [ ] Soil analytical tests or samples
   [ ] Visual observation
   [ ] Other

8. Type of regulated substance discharged: (check one)
   [ ] Gasoline
   [ ] Aviation gas
   [ ] Jet fuel
   [ ] Heating oil
   [ ] New/Used oil
   [ ] Mineral acid
   [ ] Hazardous substance - include CRCLIA substances from USTs above reportable quantities; pesticides, ammonia, chlorine, and derivatives (write in name or Chemical Abstract Service (CAS) number)
   [ ] Other

9. Discharge originated from: (check all that apply)
   [ ] Dispensing system
   [ ] Pipe
   [ ] Tank
   [ ] Unknown
   [ ] Valve failure
   [ ] Barge
   [ ] Tugboat/tanker
   [ ] Other vessel
   [ ] Other

10. Cause of the discharge: (check all that apply)
    [ ] Loss of containment
    [ ] Punctured
    [ ] Fire/explosion
    [ ] Spill
    [ ] Overfill
    [ ] Human error
    [ ] Collision
    [ ] Vehicle Accident
    [ ] Installation failure

11. Actions taken in response to the discharge:

12. Comments:

13. Agencies notified (as applicable):
   [ ] State Emergency Center
   [ ] National Response Center
   [ ] Fire Department
   [ ] County Tanks Program
   [ ] DEP (District) person

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: __________________________

Signature of Owner, Operator or Authorized Representative: __________________________

Print Date: 7/16/2015 11:58 AM
Original Date of Issue: 12/11/2014
Current Issue Date: 2/13/2014
Revision: 001

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### STANDARD OPERATING PROCEDURE

HILLSBOROUGH TRANSIT AUTHORITY

**CFC REMOVAL FOR SCRAP METAL PRIOR TO DISPOSAL OF ASSET**

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**ORIGINATED BY:** _Original signature on file in MDC_________ Dale Smith, Manager of Facilities _____________

**REVIEWED BY:** _Original signature on file in MDC_________ Cindy Jennings, Administrative Assistant I _____________

**APPROVED BY:** _Original signature on file in MDC_________ Steve Taylor, Director of Maintenance _____________
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<table>
<thead>
<tr>
<th>SECTION</th>
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<tr>
<td>3. ABBREVIATIONS / DEFINITIONS</td>
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<td>4. REFERENCES</td>
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<td>6. REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS</td>
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<tr>
<td>ATTACHMENT A – REQUEST FOR DISPOSAL APPROVAL OF FIXED ASSETS</td>
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<tr>
<td>ATTACHMENT B – REFRIGERANT REMOVAL CERTIFICATION FORM</td>
<td>6</td>
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</tbody>
</table>
1. SCOPE

This SOP is for the use of all HART maintenance employees involved in the disposal of HART assets that may contain CFCs or HCFCs.

2. PURPOSE

This SOP is a guide to outline the proper steps for the disposal of any HART asset that may contain CFCs or HCFCs. The USEPA has regulations addressing the venting of CFCs, HCFCs, Freon, or other refrigerants from assets designated for disposal. No person may vent CFCs or HCFCs into the atmosphere.

3. ABBREVIATIONS / DEFINITIONS

<table>
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<tbody>
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<tr>
<td>SOP</td>
<td>Standard Operating Procedure</td>
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<td>Chlorofluorocarbons</td>
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<td>HCFCs</td>
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</table>

4. REFERENCES

Section 608 of the Clean Air Act  
40 CFR Part 82, Subpart F

5. FORMS

Attachment A – Request for Disposal Approval of Fixed Assets  
Attachment B – Refrigerant Removal Certification Form

6. REQUIRED SAFETY EQUIPMENT / SPECIAL TOOLS

Freon Recovery Unit

7. PROCEDURES

7.1 Asset Disposal Procedure

Before recycling or disposing of equipment that contains a refrigerant, an EPA certified technician must evacuate the refrigerant using capture or recycling equipment prior to disposal.
A. Once an asset has been identified for disposal the Manager of Facilities shall fill out an asset disposal form and send for appropriate approvals and signatures.

B. After the Manager of Facilities receives the approved disposal form, the appropriate method of disposal shall be determined. If the asset is to be disposed of as scrap metal an inspection will be conducted by a Facilities Technician.

C. If the inspection determines the asset does not contain any CFCs or HCFCs the asset can be transported and placed in the scrap metal dumpster by the Facilities Maintenance department.

D. If the inspection determines the asset contains CFCs or HCFCs the refrigerant must be evacuated prior to the disposal of the asset. The refrigerant must be evacuated and handled by an EPA certified technician following all Local, State and Federal guidelines.

E. Intentionally venting ozone depleting compounds (CFCs and HCFCs) used as refrigerants into the atmosphere while repairing, servicing or disposing is prohibited.

F. After the Freon has been recovered the copper line must be cut to expose the system.

G. Once the system has been evacuated and refrigerant line cut open the technician must fill out the Freon recovery form verifying the system is free of any CFCs. The completed form must be returned to the Manager of Facilities.

H. After receiving a completed and dated Refrigerant Removal Certification Form the Manager of Facilities will approve the proper method of disposal for the asset.
<table>
<thead>
<tr>
<th>Date</th>
<th>Title</th>
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<th>Description</th>
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Hillsborough Transit Authority Request for Disposal Approval of Fixed Assets
ATTACHMENT B – REFRIGERANT REMOVAL CERTIFICATION FORM

REFRIGERANT REMOVAL CERTIFICATION FORM

TYPE OF UNIT:

MANUFACTURER, MODEL NUMBER AND SERIAL NUMBER:

ASSET NUMBER:

I CERTIFY THAT CFCs OF HCFCs HAVE BEEN REMOVED FROM THIS ASSET ACCORDING TO EPA REGULATIONS.

SIGNATURE OF CERTIFIED TECHNICIAN__________________________

PRINT NAME______________________________________________

TITLE_____________________________________________________

DATE______________________________________________________
# STANDARD OPERATING PROCEDURE

## HILLSBOROUGH TRANSIT AUTHORITY

### CFC REMOVAL FOR SCRAP METAL PRIOR TO DISPOSAL OF ASSET

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**ORIGINATED BY:** Dale Smith, Manager of Facilities  
**DATE:** 3-6-12

**REVIEWED BY:** Cindy Jennings, Administrative Assistant I  
**DATE:** 3-6-12

**APPROVED BY:** Steve Taylor, Director of Maintenance  
**DATE:** 3-6-12
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ATTACHMENT A – REQUEST FOR DISPOSAL APPROVAL OF FIXED ASSETS: 5

ATTACHMENT B – REFRIGERANT REMOVAL CERTIFICATION FORM: 6
1. SCOPE

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40 CFR Part 82, Subpart F

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Attachment B – Refrigerant Removal Certification Form

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# ATTACHMENT A – REQUEST FOR DISPOSAL APPROVAL OF FIXED ASSETS

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<th>Name</th>
<th>Position</th>
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Total: 3 items approved.
ATTACHMENT B – REFRIGERANT REMOVAL CERTIFICATION FORM

REFRIGERANT REMOVAL CERTIFICATION FORM

TYPE OF UNIT:

MANUFACTURER, MODEL NUMBER AND SERIAL NUMBER:

ASSET NUMBER:

I CERTIFY THAT CFCs OF HCFCs HAVE BEEN REMOVED FROM THIS ASSET ACCORDING TO EPA REGULATIONS.

SIGNATURE OF CERTIFIED TECHNICIAN ________________________________

PRINT NAME ________________________________

TITLE ________________________________

DATE ________________________________
## OPERATIONS AND MAINTENANCE DEPARTMENT

### FSOPs

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## OPERATIONS AND MAINTENANCE DEPARTMENT
### FSOPs

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