

# East Cocalico Township

100 Hill Road, Denver, PA 17517  
Phone: (717) 336-1720 Fax: (717) 336-1724  
E-mail: Township@eastcocalicotownship.com  
Website: www.eastcocalicotownship.com

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Time Discharge Discovered: \_\_\_\_\_

Date of Last Rain Event: \_\_\_\_\_ Estimated Quantity of Rain: \_\_\_\_\_ in.

LOCATION OF DISCHARGE (nearby street intersections, addresses, and/or landmarks for reference):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHERE WAS DISCHARGE FOUND?  OPEN DITCH  STREAM  PIPE OUTFALL  OTHER: \_\_\_\_\_

WAS WATER FLOW OBSERVED?  NO  YES \_\_\_\_\_

WAS FLOW SOLID OR PULSING?  SOLID  PULSING \_\_\_\_\_

WAS A PHOTO TAKEN?  NO  YES (Please attach a copy of photo to form)

ODOR:  NONE  MUSTY  SEWAGE  ROTTEN EGGS  SOUR MILK  OTHER: \_\_\_\_\_

COLOR:  CLEAR  RED  YELLOW  BROWN  GREEN  GREY  OTHER: \_\_\_\_\_

CLARITY:  CLEAR  CLOUDY  OPAQUE

WAS THERE AN: OILY SHEEN  YES  NO  
GARBAGE/SEWAGE  YES  NO  
OTHER: \_\_\_\_\_

ADDITIONAL INFORMATION TO ASSIST IN THE INVESTIGATION: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*Follow up Investigation (to be completed by CCD staff)*

OUTFALL NO: \_\_\_\_\_ INSPECTOR NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**FIELD ANALYSIS:**

WATER TEMP: \_\_\_\_\_ °F / °C CHLORINE (Total): \_\_\_\_\_ mg/l

pH: \_\_\_\_\_ COPPER: \_\_\_\_\_ mg/l

PHENOL: \_\_\_\_\_ mg/l DETERGENTS: \_\_\_\_\_ mg/l

WAS A LABORATORY SAMPLE COLLECTED? NO YES

(if yes attach copy of chain-of-custody record)

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

DATA SHEET FILLED OUT BY: (signature): \_\_\_\_\_ DATE: \_\_\_\_\_

Additional notes to file: \_\_\_\_\_

\_\_\_\_\_

Follow-up with Complainant: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_