

# Emergency Incident Notification Form

This form is to be used for emergencies which meet BCER Level 1, 2, or 3 Classification. Emergency level incidents must be reported to the Regulator within 1 hour of the incident.

EMCR 24-hour reporting number: 1-800-663-3456

Report Details							
Incident Date / Time	Date			Time			
BCER Notified Date / Time	Date			Time			
Incident Classification	Consequence (0-4)	Escalation (0-4)		Level (1-3)			
EMCR Number	<input type="checkbox"/> Not applicable						
Location							
Permit Holder							
Activity Type	<input type="checkbox"/> Well <input type="checkbox"/> Facility <input type="checkbox"/> Pipeline <input type="checkbox"/> Road <input type="checkbox"/> AACT/ANC <input type="checkbox"/> Geophysical Program <input type="checkbox"/> Short-Term Water Use <input type="checkbox"/> Changes In and About a Stream <input type="checkbox"/> Other:						
BCER License Information <input type="checkbox"/> Unknown	License Number:						
	Segment Number If Pipeline:						
	LOC ID If Changes In and About a Stream:						
	POD # If Short-Term Water Use:						
Location Information At least one type required if license information is unknown	NTS:	Quarter (A-D)	Unit (1-100)	Block (A-L)	Map (82-83, 92-95, 102-103, 114)	Sheet (A-P)	Grid (1-16)
	DLS:	LSD (1-16)	Section (1-36)		Township (76-88)		Range (13-26)
	UTM:	Zone (7-12)		Easting		Northing	
	GPS:	Latitude			Longitude		
	Location Description:						

Contact Information			
If additional information is required, please attach separately			
Reporting Contact	Name:		Company:
	Phone #:		Email:
Additional Contacts If applicable	Name:	Type:	Company:
	Phone #:		Email:
	Name:	Type:	Company:
	Phone #:		Email:
	Name:	Type:	Company:
	Phone #:		Email:
Contractors / Third Parties Directly Involved If applicable	Name:		Type:
	Company:		Phone #:
	Name:		Type:
	Company:		Phone #:
Other Agency Notifications			
Incident Description			
Incident Type(s) Check all that apply	<input type="checkbox"/> Spill (Liquid or Solid) <input type="checkbox"/> Spill (Gaseous) <input type="checkbox"/> Drilling Kick <input type="checkbox"/> Induced Seismicity <input type="checkbox"/> Equipment/ Structural Damage <input type="checkbox"/> Hydrotechnical <input type="checkbox"/> Fire/Explosion <input type="checkbox"/> Security Threat <input type="checkbox"/> Vehicle/Heavy Equipment <input type="checkbox"/> Loss of Well Control <input type="checkbox"/> Geotechnical <input type="checkbox"/> Environmental <input type="checkbox"/> Other:		
Main Industry Activities	<input type="checkbox"/> Construction <input type="checkbox"/> Well Drilling/ Completion <input type="checkbox"/> Operations/ Maintenance <input type="checkbox"/> Deactivation/ Decommission/ Restoration		
Secondary Industry Activities Check all that apply	<input type="checkbox"/> Fluid Transfer <input type="checkbox"/> Pipeline Boring/HDD <input type="checkbox"/> Third Party – Unintentional Damage <input type="checkbox"/> Third Party – Intentional Damage <input type="checkbox"/> Third Party – Undefined <input type="checkbox"/> Other:		
Incident Description			

Material Information				
Complete if Incident Type – Spill is selected				
Material Spilled Check all that apply	<input type="checkbox"/> Natural Gas	<input type="checkbox"/> Oil	<input type="checkbox"/> Emulsion	<input type="checkbox"/> Produced Water
	<input type="checkbox"/> Condensate	<input type="checkbox"/> Liquified Natural Gas	<input type="checkbox"/> Acid Gas	<input type="checkbox"/> LVP Fluids (Pentane Plus)
	<input type="checkbox"/> HVP Fluids	<input type="checkbox"/> Bentonite	<input type="checkbox"/> Hydraulic Oil	<input type="checkbox"/> Diesel/Fuel
	<input type="checkbox"/> Fresh Water	<input type="checkbox"/> Hydrogen	<input type="checkbox"/> Ammonia	<input type="checkbox"/> Methanol
	<input type="checkbox"/> Other (please describe):			
	Does the release contain H2S? <input type="checkbox"/> Yes:      ppm <input type="checkbox"/> No <input type="checkbox"/> N/A			
Environment Type Check all that apply	<input type="checkbox"/> Wildland	<input type="checkbox"/> Agricultural Land	<input type="checkbox"/> Developed Land	
	<input type="checkbox"/> Muskeg/Stagnant Water	<input type="checkbox"/> Lake	<input type="checkbox"/> Stream	
Land Classification Check all that apply	<input type="checkbox"/> Crown	<input type="checkbox"/> Private	<input type="checkbox"/> First Nations Reserve	<input type="checkbox"/> ALR
Confined to Lease or Right of Way	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	<input type="checkbox"/> Unknown
Initial Spill Volume	Volume		Unit	
Impacts				
Public Check all that apply	<input type="checkbox"/> Notified	<input type="checkbox"/> Sheltered	<input type="checkbox"/> Evacuated	<input type="checkbox"/> Infrastructure
	<input type="checkbox"/> Injury	<input type="checkbox"/> Fatality		
Wildlife/Livestock <input type="checkbox"/> Not applicable				
Equipment Loss <input type="checkbox"/> Not applicable	Value: Description:			
Ancillary Damage <input type="checkbox"/> Not applicable				
Regulatory Information (BCER Use Only)				
Emergency Officer				
Oversight	<input type="checkbox"/> BCER	<input type="checkbox"/> Out of Jurisdiction	<input type="checkbox"/> Not Reportable	
Intake Situation	<input type="checkbox"/> Evolving		<input type="checkbox"/> Stable	
Staff Dispatched				
Additional Notes				