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| The TCEQ Blue and Green Logo | Texas Commission on Environmental Quality Pesticides General Permit Number TXG870000Adverse Incident Report |

Within 24 hours of becoming aware of the potential adverse incident, verbally notify your nearest Texas Commission on Environmental Quality (TCEQ) Regional office or the TCEQ 24-Hour Spill Reporting Line at 1-800-832-8224. Within 14 days of becoming aware of an adverse incident, submit a written report to your nearest TCEQ regional office. Information indicated by a star (\*) is required for both the notification and report.

1. Date and Time the 24-Hour Notification was reported to TCEQ: Click or tap here to enter text.
2. \*Person making notification: Click or tap here to enter text.
3. \*Phone Number: Click or tap here to enter text.
4. \*Permittee Name and Mailing Address: Click or tap here to enter text.
5. \*TCEQ Authorization Number under the Pesticide General Permit: TXG87 Click or tap here to enter text.
6. \*Contact Person: Click or tap here to enter text.
7. Phone Number (if different than person making notification):
8. \*Date and Time of incident: Click or tap here to enter text.
9. \*How did you become aware of the adverse incident? Click or tap here to enter text.
10. \*Describe the location and magnitude of the adverse incident. (Include waterways, highways, etc.; lat/long and the area impacted, i.e., number of acres or miles of stream affected). Click or tap here to enter text.
11. Provide a description of the habitat and the circumstances under which the adverse incident occurred (including any available ambient water data). Click or tap here to enter text.
12. \*Describe the adverse impact. (Include the impact or organisms killed or distressed and the appearance of the water, e.g., sheen, color, clarity, etc.) Click or tap here to enter text.
13. List the target and non-target organism(s) that were affected: Click or tap here to enter text.
14. List all pesticide products, including the EPA pesticide registration number, for each pesticide that was applied in the area of the adverse incident. Click or tap here to enter text.
15. \*Describe all corrective actions that have been taken or will be taken, including dates and times. Click or tap here to enter text.
16. Provide the pesticide application rate, application site (e.g., water's edge, above, or different to water), and method of application. Click or tap here to enter text.
17. List any laboratory tests that were performed, including the dates when they were conducted. Provide a summary of the test results immediately upon availability. Click or tap here to enter text.
18. If applicable, explain why the adverse incident could not have been caused by exposure to the pesticide. Click or tap here to enter text.
19. Describe any additional corrective actions that have been or will be taken to prevent recurrence. Click or tap here to enter text.

Name and Title: Click or tap here to enter text.

Signature and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_