

**Spill Notification & Complaint Reporting Form**  
**Illicit Discharge Elimination Program**  
**City of Flint, Genesee County**

Complaint made by: \_\_\_\_\_

Phone #: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Location of Discharge: \_\_\_\_\_ Offending Party (if known) \_\_\_\_\_

Nature of Problem (i.e. paper waste, odor, color, etc.): \_\_\_\_\_

Is this an Emergency?  
 Yes  (Then Phone 911)  No  
 Nature of Emergency: \_\_\_\_\_

- Initial Contact made to:
- 911
  - Fire Dept. \_\_\_\_\_
  - Police Dept. \_\_\_\_\_
  - GCDC (810) 732-1590
  - GCHD (810) 257-3612
  - GCRC (810) 767-4920
  - PEAS Hotline (State) 1-800-292-4706

Additional Comments:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Site Investigation**

Date of Observation: \_\_\_\_\_

Investigating Agency: \_\_\_\_\_

Location of Discharge: \_\_\_\_\_

Initial Investigation  
 Follow-up Investigation

Crew Members: \_\_\_\_\_

Investigation Location: \_\_\_\_\_

Observations (odor, color, volume, etc):  
 \_\_\_\_\_  
 \_\_\_\_\_

Actions Taken:  
 \_\_\_\_\_  
 \_\_\_\_\_

Danger to health and/or environment:  
 Yes  No

Were photos taken:  Yes\*  No

Date Corrected: \_\_\_\_\_  
 \* Please attach copies

If necessary:  
 Agency Referred to: \_\_\_\_\_  
 Agency Contact: \_\_\_\_\_  
 Method of Communication:  
 E-mail  Letter/memo  Phone

Content of Communication:  
 \_\_\_\_\_  
 \_\_\_\_\_

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Compliance Information & Schedule:
_____
_____
_____
Date Violation Was Resolved: _____

1. Take down complaint information.
2. Fill out the Spill Notification form for the Illicit Discharge Elimination Reporting System.
3. Inform the caller that the problem will be further investigated and thank him/her for calling in.
4. If the problem is HAZMAT related, please phone 911.
5. If the Problem is related to a construction site and there is sediment leaving that site, please call Genesee County Health Department at: (810) 257-3603.

6. Please fax/email completed form to:

(i)	Emily Koryto , EGLE	DLZ-Michigan, Inc.	Genesee County Drain Comm.
	Fax #: (517) 282-6723	Laura Gruzowski	Sue Kubic
	Email: KoryotoE2@michigan.gov	(248) 836-4053	(810) 732-1590
		Email: lgruzowski@dlz.com	<a href="mailto:skubic@co.genesee.mi.us">skubic@co.genesee.mi.us</a>