

# Malfunction Report Form

Plant ID \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Phone \_\_\_\_\_

**Incident Information:** Type – (Check All That Apply)

Malfunction \_\_\_\_\_ Spill \_\_\_\_\_ Deviation \_\_\_\_\_

Courtesy \_\_\_\_\_ Emergency \_\_\_\_\_

Permit No. \_\_\_\_\_ Unit ID \_\_\_\_\_

Description

Start Date \_\_\_\_\_ Start Time \_\_\_\_\_

Finish Date \_\_\_\_\_ Finish Time \_\_\_\_\_

Cause \_\_\_\_\_

Pollutants Emitted \_\_\_\_\_ Estimated Emissions \_\_\_\_\_ Pounds

Wind Speed \_\_\_\_\_ MPH \_\_\_\_\_ Direction \_\_\_\_\_

Corrective Action \_\_\_\_\_

Normal Operating Hours/yr: \_\_\_\_\_ Total Equipment Downtime \_\_\_\_\_

Reporting Information: Hammond Department of Environmental Management

HDEM Employee Contacted \_\_\_\_\_ Call Date \_\_\_\_\_

Report Made By \_\_\_\_\_ Call Time \_\_\_\_\_

Hammond Department Of Environmental Management  
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Hammond, Indiana 46320  
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219-853-6343 – fax  
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