



Spill Prevention and Control Plan

Purpose

This Spill Prevention and Control Plan establishes procedures for the proper storage, handling, refueling, and cleanup of petroleum and hazardous materials (e.g., fuel, oil, hydraulic fluid) to prevent impacts to nearby habitats and resources.

Spill Prevention Measures

- A spill containment kit with absorbent pads and materials will be maintained on site by the Contractor for the duration of construction.
- A designated waste drum will be kept on site for the temporary storage of used absorbent materials. All waste will be disposed of off-site in accordance with applicable local, state, and federal regulations.

The Contractor shall adhere to the following storage, refueling, and spill response requirements.

Petroleum and Hazardous Materials Storage and Refueling

- Refueling of vehicles or machinery shall occur **only** within the Construction Laydown Area.
 - Refueling shall take place on an impervious pad with secondary containment capable of containing fuels.
 - The refueling area shall be located at least **100 feet** from wetlands, watercourses, and any aquifer protection areas.
 - Any fuel or hazardous materials stored on site shall be placed on an impervious surface with secondary containment and located a minimum of **100 feet** from wetlands or watercourses.
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Initial Spill Response Procedures

In the event of a spill:

1. Stop operations and shut down equipment immediately.
2. Eliminate all potential sources of sparks or open flames.
3. Contain the source of the spill.
4. Estimate the approximate volume of material released.
5. Identify natural flow paths and take steps to prevent migration to wetlands or waterways.
6. Notify nearby workers of the spill.



Spill Cleanup and Containment

- Retrieve appropriate materials from the on-site spill response kit.
 - Place absorbent materials directly on the spill area.
 - Prevent spread by placing absorbents around the perimeter of the spill.
 - Isolate and eliminate the source of the release.
 - Arrange for proper disposal of contaminated materials through a licensed disposal company in accordance with all applicable regulations.
 - Notify appropriate local, state, and/or federal agencies as required.
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Emergency Contact Information:

Project Owner

LSE Phobos LLC
18 North Main Street, 2nd Floor
West Hartford, CT 06107
Phone: (410) 274-2716
Email: jmacel@lodestarenergy.com

State Police – Troop L

452A Bantam Road
Litchfield, CT 06759
Phone: (860) 953-9949 or (860) 626-7900

Morris Fire Company

15 South Street
Morris, CT 06763
Phone: (860) 567-7441

Operations & Maintenance Provider

Ameresco
Phone: (800) 916-8066
Email: ROC@ameresco.com

Connecticut DEEP – Emergency Spill Reporting

Spill Reporting / Emergency Response Unit: (860) 424-3338 or toll-free (866) 337-7745 (24 hours/day)
Alternate Dispatch: (860) 424-3333 or (860) 424-3000



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Connecticut Department of Public Health – Water Section

410 Capitol Avenue,
MS#12DWS
P.O. Box 340308
Hartford, CT 06134-0308
Phone:

- General Number: (860) 509-7333
 - After Hours Number: (860) 692-2333
 - Emergency Number (24/7): (860) 509-8000
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Spill Incident Reporting

All spill incidents shall be documented using the form below and submitted to the project owner, operations and maintenance provider, and applicable regulatory agencies, including but not limited to CT DEEP and the Connecticut Department of Public Health Water Section.



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Spill Incident Report Form

Project Name: _____

Site Location: _____

Date of Incident: ____ / ____ / ____

Time of Incident: ____ : ____ AM/PM

Reported By: _____

Job Title: _____

1. Incident Description

- **Type of Spill:** Oil Hydraulic Fluid Coolant Battery Electrolyte Other:

- **Description of Spill:**

- **Estimated Volume:** _____ (gallons/liters)
- **Cause of Spill:** Equipment Failure Human Error Weather/Natural Unknown
 Other: _____

2. Location Details

- **Exact Location of Spill:**

- **Nearby Sensitive Areas:** Storm Drain Waterbody Soil Vegetation Other:

- **Access & Containment:**

3. Immediate Actions Taken

- Spill Contained Area Secured Evacuated Personnel Emergency Services Contacted
- **Description of Immediate Actions:**



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- **Containment Materials Used:** Absorbent Pads Booms Dikes Neutralizer
Other: _____
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4. Environmental Impact

- **Surface Water Impact:** Yes No
 - **Soil Impact:** Yes No
 - **Vegetation Impact:** Yes No
 - **Wildlife Impact:** Yes No
 - **Other Impacts:**

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5. Notifications

- **Internal Notification:** Site Supervisor Environmental Officer Safety Officer
 - **External Notification:** Local Fire Department State Environmental Agency
Utility Company
 - **Time of Notification:** ____ : ____ AM/PM
 - **Report Number (if issued):** _____
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6. Equipment & Materials Affected

Equipment / Material Damage? (Y/N) Notes

7. Witnesses

Name	Job Title	Telephone



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8. Corrective & Preventive Measures

- **Short-term Corrective Action:**

- **Long-term Preventive Measures:**

- **Responsible Person / Department:**

9. Report Completed By

- **Name:** _____
- **Job Title:** _____
- **Signature:** _____
- **Date:** ____ / ____ / _____