



City of Daphne
Illicit Discharge Notification
Form



Form Completed By:

First Name: _____ Last Name: _____
Address: _____ + _____
City: _____ State: _____ Zip Code: _____
Phone No. : _____ Email: _____

Incident Discharge and Description Information:

Date Discharge Discovered: _____ Time Discharge Discovered: _____
Potential Source of Discharge: _____
Street Location: _____
Nearest Water body (if known): _____
Nature of Discharge Spill Intermediate Continuous
Odor: None Sewage Rancid/Sour Sulphur (rotten egg) Gas
Appearance: Clear Sheen Cloudy Gray Other
Solids/Floatables: None Fish Kill Sewage Tissue Unknown

Other Information/Comments:

Submit this form via email to epm@daphneal.com, via fax at (251)621-3719 or deliver to
Environmental Programs, City Hall, 1705 Main Street, Daphne AL 36526 .

If you have any questions, please call (251) 621-3080.

If this is an emergency or if you feel that the substance being discharge may be a hazardous or toxic
substance, please contact the City of Daphne's Police or Fire Department at (251)-621-9100.