

**SAN DIEGO POLICE DEPARTMENT
PROCEDURE**

DATE: September 16, 2015

NUMBER: 8.16 – CRITICAL INCIDENTS

SUBJECT: INCIDENTS INVOLVING HAZARDOUS MATERIALS,
WEAPONS OF MASS DESTRUCTION,
EMERGENCIES AT GENERAL ATOMICS, AND
TRANSPORTATION OF NUCLEAR MATERIALS

RELATED POLICY: N/A

ORIGINATING DIVISION: OPERATIONAL SUPPORT

NEW PROCEDURE:

PROCEDURAL CHANGE:

SUPERSEDES: DP 8.16 – 03/13/2012

**All portions of this document are deemed by the San Diego Police
Department to be records of its security procedures and are exempt from
disclosure under the California Public Records Act by Section 6254(f) of the
California Government Code.**

DELETED – RECORDS OF SECURITY

SAN DIEGO POLICE DEPARTMENT		
HAZARDOUS MATERIALS/WASTE EMERGENCY DISPOSAL/IMPOUND REPORT		
SEE DEPARTMENT PROCEDURE 8.16 FOR GUIDELINES		
DATE OF PICKUP:	TIME OF REQUEST:	
DISPOSAL COMPANY:	ARRIVAL TIME:	
NAME OF DISPOSAL CO. REP:		
MANIFEST #:	APPROVING DUTY LIEUTENANT:	
EVIDENCE: <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTACT OFFICER/UNIT:	
WAS THIS A MULTI-JURISDICTIONAL /AGENCY/INCIDENT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, IDENTIFY INVOLVED AGENCIES/JURISDICTIONS:		
IDENTIFY THE PROSECUTING DEPARTMENT/AGENCY:		
NAME OF PROPERTY OWNER:		
ADDRESS OF OWNER:	CITY:	STATE: ZIP:
OWNER'S TELEPHONE:	WAS OWNER PRESENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF PERSON IN POSSESSION OF PROPERTY (IF DIFFERENT FROM OWNER):		
ADDRESS:	CITY:	STATE: ZIP:
TELEPHONE:		
RELATIONSHIP TO OWNER (RENTER, GUEST, ETC.):		
TYPE OF PROPERTY (RESIDENTIAL, BUSINESS, MOTEL/HOTEL, VEHICLE, ETC.):		
RETURN THIS FORM ALONG WITH THE FOLLOWING DOCUMENTS TO: EMERGENCY MANAGEMENT — M.S. 728 <ol style="list-style-type: none"> 1. BLUE COPY OF THE MANIFEST 2. "GENERATOR'S COPY" (YELLOW) OF MANIFEST 3. SERVICE ORDER FROM DISPOSAL COMPANY 4. COPIES OF ANY RELATED REPORTS 		
OFFICER:	ID:	DIVISION:
APPROVED BY:	ID:	DATE/TIME:
FOR OFFICE USE ONLY: <ul style="list-style-type: none"> <input type="checkbox"/> ALL DOCUMENTS RECEIVED FROM OFFICER <input type="checkbox"/> BLUE MANIFEST COPY MAILED TO STATE HEALTH DEPARTMENT <input type="checkbox"/> COMPUTER UPDATED 		