

Data Element	Type	Definition
Report Submission Source	Text	Submission method of incident report (paper form, web or xml transmission).
Report Number	Text	The submission source and 10-digit code that contains the year, month and sequence the incident report was received. The report number uniquely identifies each report.
Number of Lines per Incident	Numeric	Displays the number of lines per Incident due to multiple shippers, commodities, and packages involved in an incident.
Report Type	Text	Type of incident report being filed. Taken from Form DOT F 5800.1, Section I, #1.
Date of Incident	Date	Date the incident occurred. Taken from Form DOT F 5800.1, Section II, #3.
Time of Incident	Text	Time the incident occurred. Taken from Form DOT F 5800.1, Section II, #4.
NRC Number	Text	If this incident was reported to the National Response Center (NRC), this is the report number NRC assigned to the incident. Taken from Form DOT F 5800.1, Section II, #5.
Federal DOT Agency Name	Text	If this incident was reported to another Federal DOT agency, the agency code is entered here. Taken from Form DOT F 5800.1, Section II, #6.
Federal DOT Report Number	Text	If this incident was reported to another Federal DOT agency, the report number is entered here. Taken from Form DOT F 5800.1, Section II, #6.
Incident City	Text	City name in which the incident occurred. Taken from Form DOT F 5800.1, Section II, #7.
Incident County	Text	County in which the incident occurred. Taken from Form DOT F 5800.1, Section II, #7.
Incident State	Text	State in which the incident occurred. Taken from Form DOT F 5800.1, Section II, #7.
Incident Postal Code	Text	Postal code in which the incident occurred. Taken from Form DOT F 5800.1, Section II, #7.
Incident Non-US State	Text	If the incident occurred outside the US the foreign state that the incident occurred.
Incident Country	Text	Country in which the incident occurred.
Incident Route	Text	Street Address, Mile Marker, Yard name, Airport, Body of Water or River on which the incident occurred. Taken from Form DOT F 5800.1, Section II, #7.
Mode of Transportation	Text	Describes the mode of transportation in which the incident occurred. Taken from Form DOT F 5800.1, Section II, #8.
Transportation Phase	Text	Transportation phase when the incident occurred. Taken from Form DOT F 5800.1, Section II, #9.
Carrier/Reporter Name	Text	Name of the company responsible for transport of the product. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter Street Name	Text	Street address of the carrier. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter City	Text	City name the carrier resides in. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter State	Text	State the carrier resides in. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter Postal Code	Text	Postal code the carrier location. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter Non-US State	Text	If carrier resides outside the US the foreign state that the carrier resides in.
Carrier/Reporter FED DOT ID	Text	Modal carrier identifier number or code. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter HAZMAT Reg ID	Text	The Hazardous Materials Registration number of the carrier. Taken from Form DOT F 5800.1, Section II, #10.
Carrier/Reporter Country	Text	Country the carrier resides in.
Shipper Name	Text	Name of the company shipping a product. Taken from Form DOT F 5800.1, Section II, #11.
Shipper Street Name	Text	Street address of the shipper. Taken from Form DOT F 5800.1, Section II, #11.
Shipper City	Text	City name that the shipper resides in. Taken from Form DOT F 5800.1, Section II, #11.

Shipper State	Text	State that the shipper resides in. Taken from Form DOT F 5800.1, Section II, #11.
Shipper Postal Code	Text	Postal code that the shipper resides in. Taken from Form DOT F 5800.1, Section II, #11.
Shipper Non-US State	Text	If shipper resides outside the US the foreign state that the shipper resides in.
Shipper Country	Text	Country that the shipper resides in.
Shipper Waybill/Shipping Paper	Text	Identification number of papers used to identify shipment of hazardous materials being transported. Taken from Form DOT F 5800.1, Section II, #11.
Shipper HAZMAT Registration ID	Text	The Hazardous Materials Registration number of the shipper. Taken from Form DOT F 5800.1, Section II, #11.
Origin City	Text	City name where shipment of the hazardous material originated. Taken from Form DOT F 5800.1, Section II, #12.
Origin State	Text	State where shipment of the hazardous material originated. Taken from Form DOT F 5800.1, Section II, #12.
Origin Postal Code	Text	Postal code of state where shipment of the hazardous materials originated. Taken from Form DOT F 5800.1, Section II, #12.
Origin Non-US State	Text	If the shipment originated outside the US, the foreign state that the shipment originated.
Origin Country	Text	Country that the shipment originated.
Destination City	Text	City name where shipment of the hazardous materials is destined. Taken from Form DOT F 5800.1, Section II, #13.
Destination State	Text	State where shipment of the hazardous materials is destined. Taken from Form DOT F 5800.1, Section II, #13.
Destination Postal Code	Text	Zip code of state where shipment of the hazardous materials is destined. Taken from Form DOT F 5800.1, Section II, #13.
Destination Non-US State	Text	If the shipment is destined outside the US, the foreign state that the shipment is destined.
Destination Country	Text	Country that the shipment is destined.
Commodity Short Name	Text	Short name of the product being transported.
Commodity Long Name	Text	Name of the product being transported. Taken from Form DOT F 5800.1, Section II, #14.
Technical/Trade Name	Text	Commonly used name of the product being transported. Taken from Form DOT F 5800.1, Section II, #15.
Identification Number	Text	United Nations identification number of the product being transported. Taken from Form DOT F 5800.1, Section II, #17.
Hazardous Class Code	Text	2-digit code to identify the hazard class of the product being transported. Taken from Form DOT F 5800.1, Section II, #16.
Hazardous Class	Text	The hazard class name of the product being transported. Taken from Form DOT F 5800.1, Section II, #16.
Packing Group	Text	The packing group of the product being transported. Taken from Form DOT F 5800.1, Section II, #18.
Quantity Released	Numeric	Amount of material released converted into standardized units. Taken from Form DOT F 5800.1, Section II, #19.
Unit of Measure	Text	Code that indicates the "Units of Measure" of the standardized units. Taken from Form DOT F 5800.1, Section II, #19.
HAZMAT Waste Indicator	Text	Identifies whether the material being transported is listed as a hazardous waste. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section II, #20.
HAZMAT Waste EPA Number	Text	EPA Manifest Number of the hazardous waste. Taken from Form DOT F 5800.1, Section II, #20.
HMIS Toxic by Inhalation Ind	Text	Indicates whether the material being transported is listed as a Toxic by Inhalation material.
TIH Hazard Zone	Text	Hazard zone for the Toxic by Inhalation material. Taken from Form DOT F 5800.1, Section II, #21.
Material Shipment Approval Ind	Text	Indicates if the material was shipped under an exemption, an approval, or a Competent Authority Certificate. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section II, #22.
Material Shipment Approval Nbr	Text	The exemption, approval, or a Competent Authority Certificate identification number. Taken from Form DOT F 5800.1, Section II, #22.
Undeclared HAZMAT Shipment Ind	Text	Indicates that this is an undeclared hazardous materials shipment. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section II, #23.

Packaging Type	Text	Indicates the package type. Taken from Form DOT F 5800.1, Section III, #24.
What Failed Code	Text	The numeric code that identifies what part of the packaging failed and was the immediate cause of the release. Taken from Form DOT F 5800.1, Section III, #25.
What Failed Description	Text	The description of the code that identifies what part of the package failed and was the immediate cause of the release. Taken from Form DOT F 5800.1, Section III, #25.
How Failed Code	Text	The numeric code that describes how the corresponding part of the packaging failed. Taken from Form DOT F 5800.1, Section III, #25.
How Failed Description	Text	The description of how the corresponding part of the packaging failed. Taken from Form DOT F 5800.1, Section III, #25.
Failure Cause Code	Text	The numeric code that identifies what caused the corresponding part of the packaging to fail in the way it did. Taken from Form DOT F 5800.1, Section III, #25.
Failure Cause Description	Text	The description of what caused the corresponding part of the packaging to fail in the way it did. Taken from Form DOT F 5800.1, Section III, #25.
Identification Markings	Text	Identifies package markings or other information. Taken from Form DOT F 5800.1, Section III, #26a.
Cont1 Packaging Type	Text	Package type for the non-bulk, IBC, or non-specification package. Taken from Form DOT F 5800.1, Section III, #26b.
Cont1 Material of Construction	Text	Material of construction for the non-bulk, IBC, or non-specification package. Taken from Form DOT F 5800.1, Section III, #26b.
Cont1 Head Type	Text	Head type for the non-bulk, IBC, or non-specification package. Taken from Form DOT F 5800.1, Section III, #26b.
Cont1 Package Capacity	Numeric	The package capacity, converted into standardized units. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Package Capacity UOM	Text	Code that indicates the "Units of Measure" of the standardized package capacity. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Package Amount	Numeric	The amount of material, converted into standardized units, in the package. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Package Amount UOM	Text	Code that indicates the "Units of Measure" of the standardized amount of material in the package. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Pkg Number in Shipment	Numeric	Number of packages being transported. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Pkg Shipment Nbr Failed	Numeric	Number of packages releasing material in the incident. Taken from Form DOT F 5800.1, Section III, #27.
Cont1 Package Manufacturer	Text	Name of the company that manufactures the packaging. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Pkg Manufacturer Date	Date	Date that the package was manufactured. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Package Serial Number	Text	The package serial number. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Package Last Test Date	Date	Date that the bulk package was last tested or inspected. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Test Material Of Const	Text	Material that the bulk package is constructed. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Pkg Dsign Pressure Rptd	Numeric	The design pressure for the package. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Dsign Pressure UOM Rptd	Text	Code that indicates the "Units of Measure" for the design pressure. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Pkg Shell Thickness Rptd	Numeric	The shell thickness for the package. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Shell Thickness UOM Rptd	Text	Code that indicates the "Units of Measure" for the shell thickness. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Head Thickness Reported	Numeric	The head thickness for the package. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Head Thickness UOM Rptd	Text	Code that indicates the "Units of Measure" for the head thickness. Taken from Form DOT F 5800.1, Section III, #28.

Cont1 Pkg Srvc Pressure Rpted	Numeric	The service pressure for the package. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Srvc Pressure UOM Rpted	Text	Code that indicates the "Units of Measure" for the service pressure. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Valve or Device Fail Ind	Text	Indicate that a valve or device failed. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Valve or Device Type	Text	Valve or device type. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Val Device Manufacturer	Text	The valve manufacturer. Taken from Form DOT F 5800.1, Section III, #28.
Cont1 Valve or Device Model	Text	The valve model. Taken from Form DOT F 5800.1, Section III, #28.
Cont2 Package Type	Text	Inner package type for the non-bulk, IBC, or non-specification package. Taken from Form DOT F 5800.1, Section III, #26b.
Cont2 Material of Construction	Text	Inner package material of construction for the non-bulk, IBC, or non-specification package. Taken from Form DOT F 5800.1, Section III, #26b.
Cont2 Package Capacity	Numeric	The inner package capacity as reported by the preparer. Taken from Form DOT F 5800.1, Section III, #27.
Cont2 Capacity UOM Reported	Text	The "Units of Measure" for the inner package capacity as reported by the preparer. Taken from Form DOT F 5800.1, Section III, #27.
Cont2 Package Amount	Numeric	The inner package capacity as reported by the preparer. Taken from Form DOT F 5800.1, Section III, #27.
Cont2 Package Amount UOM	Text	The "Units of Measure" for the inner package capacity as reported by the preparer. Taken from Form DOT F 5800.1, Section III, #27.
Cont2 Pkg Number in Shipment	Numeric	Number of inner packages being transported. Taken from Form DOT F 5800.1, Section III, #27.
Cont2 Pkg Shipment Nbr Failed	Numeric	Number of inner packages releasing material in the incident. Taken from Form DOT F 5800.1, Section III, #27.
RAM Package Category	Text	Indicates the Radioactive Packaging category (A = Type A, B = Type B, C = Type C, E = Excepted, and I = Industrial). Taken from Form DOT F 5800.1, Section III, #29.
RAM Package Certification	Text	Indicates the certification of the radioactive package (S = Self Certified and U = U. S. Certification). Taken from Form DOT F 5800.1, Section III, #29.
RAM Package Certification Nbr	Text	Indicates the Radioactive Certificate Number that the package is shipped under. Taken from Form DOT F 5800.1, Section III, #29.
RAM Nuclide(s) Present	Text	Indicates the Radioactive Nuclide(s) present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM Transport Index	Numeric	Indicates the transport index of the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM UOM	Text	Units of measure for the transport index, for the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM Activity Rpted	Numeric	Indicates the activity of the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM UOM Rpted	Text	Units of measure for the activity, for the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM Activity	Numeric	The activity of the Radioactive materials present in the package, converted into standardized units. Taken from Form DOT F 5800.1, Section III, #29.
RAM Activity UOM	Text	Code that indicates the "Units of Measure" of the standardized units for the activity of the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
RAM Material Safety Index	Text	Indicates the Critical Safety Index of the Radioactive materials present in the package. Taken from Form DOT F 5800.1, Section III, #29.
Spillage (Result) Ind	Text	Identifies whether the commodity released as a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.

Fire (Result) Ind	Text	Identifies whether a fire occurred as a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
Explosion (Result) Ind	Text	Identifies whether an explosion occurred as a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
Water Sewer (Result) Ind	Text	Identifies whether the commodity entering a waterway or sewer system was a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
Gas Dispersion (Result) Ind	Text	Identifies whether gas dispersion was a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
Environmental Damage (Result)	Text	Identifies whether environmental damage occurred as a consequence of the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
No Release (Result) Ind	Text	Identifies if there was no release of material for this incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #30.
Fire/EMS Report Ind	Text	If a fire crew or EMS unit responded to the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #31.
Fire EMS/EMS Report Nbr	Text	If a fire crew or EMS unit responded to the incident, include the report number. Taken from Form DOT F 5800.1, Section IV, #31.
Police Report Ind	Text	If a police unit responded to the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #31.
Police Report Nbr	Text	If a police unit responded to the incident, include the report number. Taken from Form DOT F 5800.1, Section IV, #31.
In-House Cleanup Ind	Text	In-house cleanup occurred for this incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #31.
Other Cleanup Ind	Text	Other cleanup occurred for this incident. Taken from Form DOT F 5800.1, Section IV, #31.
Damage More Than 500	Text	Estimated damages exceed \$500. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #32.
Material Loss	Numeric	Dollar value of the material lost. Taken from Form DOT F 5800.1, Section IV, #32.
Carrier Damage	Numeric	Dollar value of the damage sustained by the carrier. Taken from Form DOT F 5800.1, Section IV, #32.
Property Damage	Numeric	Dollar value of the damage sustained to public or private property. Taken from Form DOT F 5800.1, Section IV, #32.
Response Cost	Numeric	Dollar value of the response cost. Taken from Form DOT F 5800.1, Section IV, #32.
Remediation Cleanup Cost	Numeric	Dollar value of the remediation cost. Taken from Form DOT F 5800.1, Section IV, #32.
Damage Other (Old Form)	Numeric	Dollar value of other damage. Taken from the old Form DOT F.5800.1, Section V, #23E.
Total Amount of Damages	Numeric	Total Amount of Damages. This figure includes the cost of the material lost, carrier damage, property damage, response costs, and remediation clean-up costs.
HAZMAT Fatality Indicator	Text	A person was fatally injured by contact with the hazardous material or its vapors or by a fire or explosion that resulted from the hazardous material. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #33a.
HAZMAT Fatalities Employees	Numeric	Number of employees fatally injured due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #33a.
HAZMAT Fatalities Responders	Numeric	Number of emergency responders fatally injured due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #33a.
HAZMAT Fatality General Public	Numeric	Number of the general public fatally injured due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #33a.
Hazmat Fatalities (Old Form)	Numeric	Number of fatalities due to the hazardous material (the value has been taken from incident data prior to 2005).

Total Hazmat Fatalities	Numeric	Total fatalities due to the hazardous material.
Non_HAZMAT Fatality Indicator	Text	A person was fatally injured but it was not caused by contact with the hazardous material or its vapors or by a fire or explosion that resulted from the hazardous material. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #33b.
Non-HAZMAT Fatalities	Numeric	Number of people fatally injured due to causes other than the hazardous material. Taken from Form DOT F 5800.1, Section IV, #33b.
HAZMAT Injury Indicator	Text	A person was injured by contact with the hazardous material or its vapors or by a fire or explosion that resulted from the hazardous material. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT Hospitalized Employees	Numeric	Number of employees hospitalized, admitted to a medical facility, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT Hospitalized Responders	Numeric	Number of emergency responders hospitalized, admitted to a medical facility, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT Hospitalized Gen Public	Numeric	Number of the general public hospitalized, admitted to a medical facility, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT Hospitalized (Old Form)	Numeric	Number of hospitalized injuries due to the hazardous material (the value has been taken from incident data prior to 2005).
Total Hazmat Hosp Injuries	Numeric	Total hospitalized injuries due to the hazardous material.
HAZMAT NonHosp Employees	Numeric	Number of employees injured, but not hospitalized, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT NonHosp Responders	Numeric	Number of emergency responders injured, but not hospitalized, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT NonHosp General Public	Numeric	Number of the general public injured, but not hospitalized, due to the hazardous material. Taken from Form DOT F 5800.1, Section IV, #34.
HAZMAT NonHosp (Old Form)	Numeric	Number of non-hospitalized injuries due to the hazardous material (the value has been taken from incident data prior to 2005).
Total Hazmat NonHosp Injuries	Numeric	Total non- hospitalized injuries due to the hazardous material.
Total Hazmat Injuries	Numeric	Total hospitalized and non-hospitalized injuries due to the hazardous material.
Evacuation Indicator	Text	The incident required the evacuation or removal of persons from a specific area because of possible or actual contact with the hazardous materials involved in the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #35.
Public Evacuated	Numeric	Number of the general public that were evacuated. Taken from Form DOT F 5800.1, Section IV, #35.
Employees Evacuated	Numeric	Number of employees that were evacuated. Taken from Form DOT F 5800.1, Section IV, #35.
Total Evacuated	Numeric	Total number of people that were evacuated. Taken from Form DOT F 5800.1, Section IV, #35.
Total Evacuation Hours	Numeric	The duration, to the nearest hour, of the evacuation. Taken from Form DOT F 5800.1, Section IV, #35.
Major Artery Closed	Text	A road or transportation facility was closed due to the incident. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #36.
Major Artery Hours Closed	Numeric	The duration, to the nearest hour, the road or transportation facility was closed. Taken from Form DOT F 5800.1, Section IV, #36.

Material Involved in Accident	Text	The hazardous material was involved in a crash or derailment. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #37.
Estimated Speed	Numeric	The estimated speed at the time of the crash. Taken from Form DOT F 5800.1, Section IV, #37.
Weather Conditions	Text	The weather conditions at the time of the crash. Taken from Form DOT F 5800.1, Section IV, #37.
Vehicle Overturn	Text	Identifies whether a vehicle overturned. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #37.
Vehicle Left Roadway/Track	Text	Identifies whether a left the roadway or track. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section IV, #37.
Passenger Aircraft Indicator	Text	Indicates whether the shipment in question was on a commercial passenger aircraft. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #38.
Cargo Passenger Baggage Ind	Text	Indicates if the material was tendered (accepted for shipment) as cargo, or was located in a passenger's baggage, either in the cabin or baggage compartment on a commercial passenger aircraft. Taken from Form DOT F 5800.1, Section V, #38.
Incident Occurrence	Text	Indicates where in the course of transportation the incident occurred or was discovered. Taken from Form DOT F 5800.1, Section V, #39.
Shiphase Non-Transported Ind	Text	Shipment had not been transported. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #40.
Shiphase Air First Flight Ind	Text	Shipment had been transported by air (first flight). The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #40.
Shiphase Air SubFlight Ind	Text	Shipment had been transported by air (subsequent flights). The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #40.
Shiphase Init Transport Ind	Text	Shipment had been transported by highway to the cargo facility. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #40.
Shiphase Transfer Indicator	Text	Shipment had been transferred at a sort center/cargo facility. The values are 'Yes' or 'No' and it defaults to 'No' if no value was entered. Taken from Form DOT F 5800.1, Section V, #40.
Contact Name	Text	Name of the incident report preparer. Taken from Form DOT F 5800.1, Section VIII.
Contact Title	Text	Title of the incident report preparer. Taken from Form DOT F 5800.1, Section VIII.
Contact Business Name	Text	Business Name of where incident report preparer works. Taken from Form DOT F 5800.1, Section VIII.
Contact Street	Text	The street address of the business, which the incident report preparer works. Taken from Form DOT F 5800.1, Section VIII.
Contact City	Text	The city name of the business, which the incident report preparer works. Taken from Form DOT F 5800.1, Section VIII.
Contact State	Text	The state of the business, which the incident report preparer works. Taken from Form DOT F 5800.1, Section VIII.
Contact Postal Code	Text	The postal code of the business, which the incident report preparer works. Taken from Form DOT F 5800.1, Section VIII.
Contact Non-US State	Text	If the business is outside the US, the foreign state of the business, that the incident report preparer, resides.
Contact Country	Text	The country of the business, which the incident report preparer works.
Preparer of Incident Report	Text	Function of preparers business; carrier, shipper, facility owner/operator of the incident report preparer. Taken from Form DOT F 5800.1, Section VIII.
Description of Events	Text	The text entered in the "Description of Events and Packaging Failure," Part VI of Form DOT F 5800.1
Recommendations/Actions Taken	Text	The text entered in the "Recommendations/Actions Taken to Prevent Recurrence," Part VII of Form DOT F 5800.1

HMIS Serious Incident Ind	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Fatality	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Injury	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Flight Plan	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Evacuations	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Major Artery	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Bulk Release	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Marine Pollutant	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Serious Radioactive	Text	The values are 'Yes' or 'No' and are based on the new definition of a serious incident. See http://hazmat.dot.gov/pubs/inc/serious_incident_new_def.pdf for definition.
HMIS Container Short Descr	Text	The container short description assigned by PHMSA based on Packaging Description, Identification Markings (Form DOT F 5800.1, Section III, #24, #26a and #26b) or the Description of Events (Form DOT 5800.1, Section VI)
HMIS Container Code	Text	The container code assigned by PHMSA based on Packaging Description, Identification Markings (Form DOT F 5800.1, Section III, #24, #26a and #26b) or the Description of Events (Form DOT 5800.1, Section VI)
HMIS Container Description	Text	The container description assigned by PHMSA based on Packaging Description, Identification Markings (Form DOT F 5800.1, Section III, #24, #26a and #26b) or the Description of Events (Form DOT 5800.1, Section VI)
HMIS Bulk Incident Indicator	Text	Identifies if the incident involved a bulk or non bulk package. Assigns a value of 'Yes' or 'No' based on the container size. Form DOT F 5800.1, Section III, #24 and #27.
Undeclared Shipment	Text	Identifies if the incident had an undeclared shipment. Assigns a value of 'Yes' or 'No' based on the information provided in Form DOT F 5800.1, Section I, #1 and Section II, #23.

Notes:

1. An electronic version of the Hazardous Materials Incident Report Form DOT F 5800.1 is published at <http://hazmat.dot.gov/pubs/inc/spill/IncidentForm010105.pdf>
2. The data dictionary references the new Form DOT 5800.1 and not the form used prior to 2005. The new form might or might not contain all the fields in the old form.