

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

July 27, 2000

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

Dear Mr. Zimmermann:

Please inform this office within five days of the receipt of this letter the current status of the implementation of the Preliminary Groundwater Investigation Workplan dated January 21, 2000. This workplan prepared by One Environment included the installation of three monitoring wells. The workplan was approved in a letter dated February 4, 2000.

If you have any questions, please contact me at (510) 567-6774.

Sincerely,



Larry Seto
Sr. Hazardous Materials Specialist

Cc: Cheryl Madden, One Environment, 240 Termino Avenue, Long Beach, CA 90803
Files

FAX

One Environment
240 Termino Avenue
Long Beach, CA 90803

Date 2/4/00

Number of pages including cover sheet 2

To:

Larry Seto
Alameda Co.

From:

Cheryl Madden

Phone

Fax Phone

510-337-9335

CC:

Phone

Fax Phone

562-987-1096

562-987-9120

REMARKS:

Urgent

For your review

Reply ASAP

Please comment

Larry-

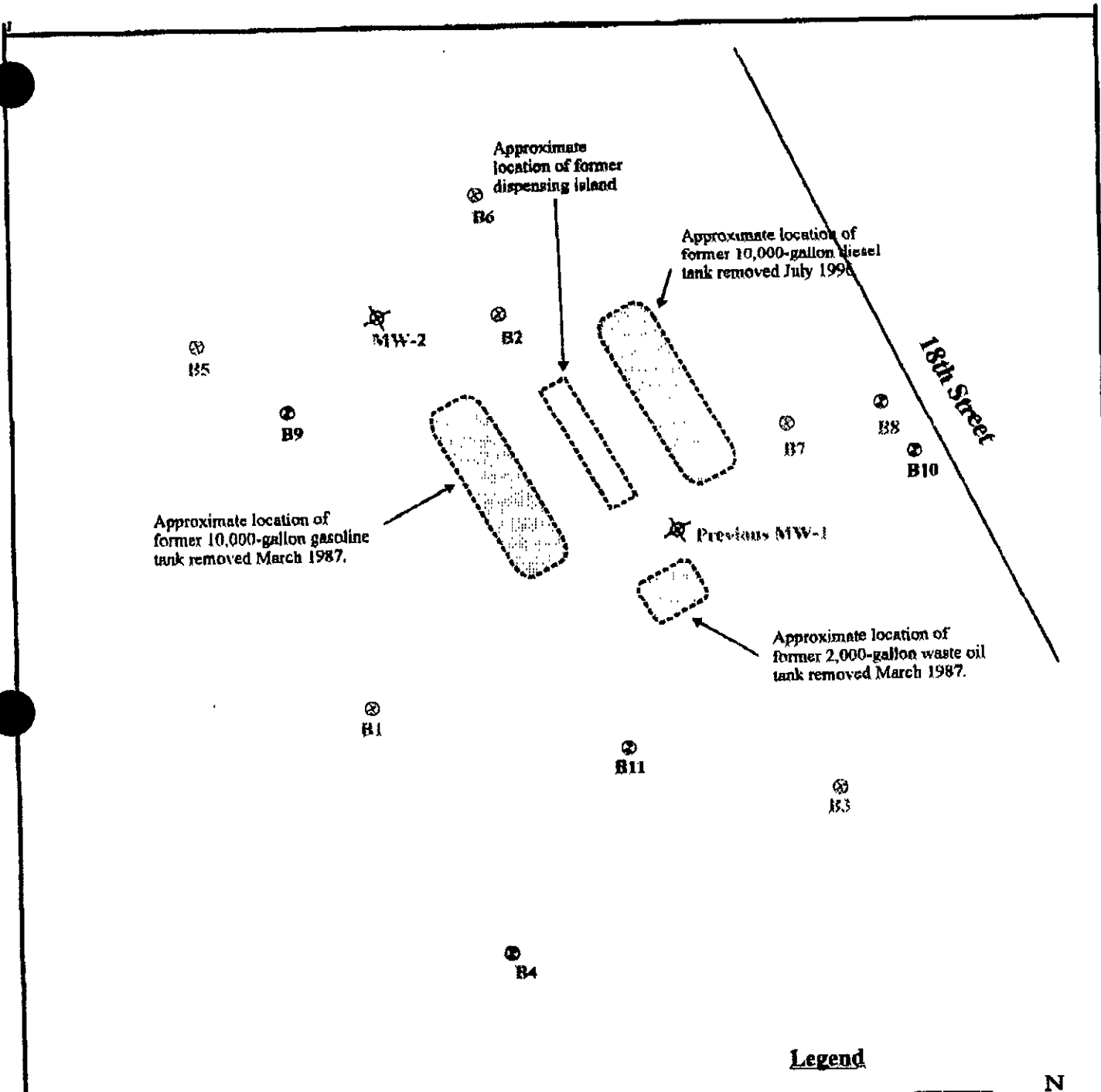
Here is the revised FIGURE 3 FOR the

Roadway site.

Let me know if you have any questions.

Thanks,

Cheryl



Note:
 The former location of USTs and dispensing island is estimated based upon previous drawings.

One Environment

Project: Roadway Express - Oakland
 1708 Wood Street
 Oakland, California

Revised Figure 3: Site Plan And Boring Location

File No.: REX-Oakland, CA Date: February 2000

Designed by: C.A.M. Drawn by: C.A.M.

Legend

- MW-1 Existing observation wells
- B8 Soil borings performed by Bcon Environmental
- B9 Proposed Spoil Borings/ Groundwater Wells

N

 Scale: 1" = 20'
 on center

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION (LOP)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

February 4, 2000

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

Dear Mr. Zimmermann:

I have reviewed your Preliminary Groundwater Investigation Workplan Dated January 21, 2000 that was prepared by One Environment. It is acceptable with the condition that the soil and ground water samples be tested for the presence of oil and grease. If results are greater than 100 ppm in soil or 10 mg/L in groundwater, then the samples must be tested for the presence of semi-volatiles and halogenated volatiles.

If you have any questions, please contact me at (510) 567-6774.

Sincerely,



Larry Seto
Sr. Hazardous Materials Specialist

Cc: Cheryl Madden, One Environment, 240 Termino Avenue, Long Beach, CA 90803
Files

00 FEB -2 PM 2:47

January 31, 2000

Mr. Larry Seto
Sr. Hazardous Materials Specialist
Alameda County Health Care Services
131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

RE: Groundwater Investigation Work Plan for Roadway Express, Inc. 1708 Wood Street,
Oakland, CA 94607

Dear Mr. Seto:

I am including a copy of the Groundwater Investigation Workplan for the Roadway Express site located in Oakland. The Workplan includes field activities to determine groundwater gradient and the absence or presence of Methyl-Tert Butyl Ether (MTBE).

Please review the Workplan and contact me at (562) 987-1096 with any questions you may have. We will commence the investigation upon your approval.

Sincerely,



Cheryl Madden
Geologist

Cc: Robert E. Zimmermann – Roadway Express, Inc.

ENVIRONMENTAL
PROTECTION

ROADWAY
Express

99 AUG 13 PM 3:48

P.O. BOX 471 • 1077 GORGE BOULEVARD • AKRON, OH 44309-0471 • (330) 384-1717

August 9, 1999

Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
Attn: Mr. Larry Seto

**RE: Submittal of Landowner Notification Form
Roadway Express, Inc.
1708 Wood Street
Oakland, CA 94067**

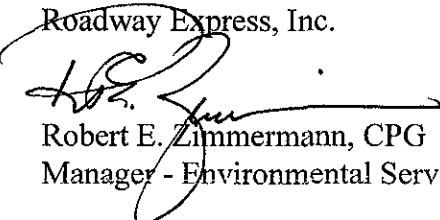
Dear Mr. Seto:

In response to your May 26, 1999 letter and in accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, Roadway Express, Inc., certify that I am the sole landowner for the above site

If you have any questions or need additional information, please feel free to contact me at (330) 258-2412.

Very truly yours,

Roadway Express, Inc.


Robert E. Zimmermann, CPG
Manager - Environmental Services

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

1131 Harbor Bay Parkway, Suite 250

Alameda, CA 94502-6577

(510) 567-6700

(510) 337-9335 (FAX)

June 23, 1999

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

INTENT TO MAKE A DETERMINATION THAT NO FURTHER ACTION IS
REQUIRED OR ISSUE A CLOSURE LETTER FOR ROADWAY EXPRESS, 1708
WOOD STREET, OAKLAND, CA 94607

Dear Mr. Zimmermann:

This letter is to inform you that Alameda County Environmental Health Department, Local Oversight Program (LOP), intends to make a determination that no further action is required at the above site or to issue a closure letter. Please notify this agency of any input and recommendations you may have on these proposed actions within 20 days of the date of this letter.

In accordance with section 25297.15 of Ch. 6.7 of the Health & Safety Code, you must provide certification to the local agency that all of the current record fee title owners have been informed of the proposed action. Please provide this certification to this office within 20 days of the date of this letter.

If you have any questions about these proposed actions, please contact Larry Seto at (510) 567-6774.

Sincerely,

Thomas Peacock
Manager, LOP

cc: Chuck Headlee, RWQCB
Leroy Griffin, City of Oakland Fire Department, 505-14th Street, 7th Floor,
Oakland, CA 94612
Larry Seto, Alameda County Environmental Health
Files

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



May 26, 1999

ENVIRONMENTAL HEALTH SERVICES
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9335 (FAX)

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

Dear Mr. Zimmermann:

I have reviewed the Preliminary Soil and Groundwater Investigation Report dated June 5, 1998 that was prepared by BCon Environmental. I have also received a letter dated September 10, 1998 from One Environment that identified the rationale for the selection of the eight borehole (B-1 to B-8) locations. Groundwater gradient has not been established at the subject site.

A groundwater sample taken from boring B7 in July '97 contained 840 ppb TPH(gas). Before site closure can be obtained for this site, the groundwater at the site must be tested for the presence of Methyl-Tert Butyl Ether (MTBE). A workplan identifying the boring locations must be submitted to this office for approval before work commences.

If you have any questions, please contact me at (510) 567-6774.

Sincerely,



Larry Seto
Sr. Hazardous Materials Specialist

Cc: Cheryl Madden, One Environmental, 240 Termino Avenue,
Long Beach, CA 90803
Mark Barwinski, BCon Environmental, 2251 Ohio Avenue,
Signal Hill, CA 90806
Files

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9335 (FAX)

May 26, 1999

Mr. Robert Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

LANDOWNER NOTIFICATION AND PARTICIPATION REQUIREMENTS

Dear Mr. Zimmermann:

This letter is to inform you of new legislative requirements pertaining to cleanup and closure of sites where an unauthorized release of hazardous substance, including petroleum, has occurred from an underground storage tank (UST). Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code requires the primary or active responsible party to notify all current record owners of fee title to the site of: 1) a site cleanup proposal, 2) a site closure proposal, 3) a local agency intention to make a determination that no further action is required, and 4) a local agency intention to issue a closure letter. Section 25297.15(b) requires the local agency to take all reasonable steps to accommodate responsible landowners' participation in the cleanup or site closure process and to consider their input and recommendations.

For purposes of implementing these sections, you have been identified as the primary or active responsible party. Please provide to this agency, within twenty (20) calendar days of receipt of this notice, a complete mailing list of all current record owners of fee title to the site. You may use the enclosed "list of landowners" form (sample letter 2) as a template to comply with this requirement. If the list of current record owners of fee title to the site changes, you must notify the local agency of the change within 20 calendar days from when you are notified of the change.

If you are the sole landowner, please indicate that on the landowner list form. The following notice requirements do not apply to responsible parties who are the sole landowner for the site.

LANDOWNER NOTIFICATION

Re: Roadway Express, 1708 Wood Street, Oakland, CA 94607

May 26, 1999

Page 2 of 2

In accordance with Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code, you must certify to the local agency that all current record owners of fee title to the site have been informed of the proposed action before the local agency may do any of the following:

- 1) consider a cleanup proposal (corrective action plan)
- 2) consider a site closure proposal
- 3) make a determination that no further action is required
- 4) issue a closure letter

You may use the enclosed "notice of proposed action" form (sample letter 3) as a template to comply with this requirement. Before approving a cleanup proposal or site closure proposal, determining that no further action is required, or issuing a closure letter, the local agency will take all reasonable steps necessary to accommodate responsible landowner participation in the cleanup and site closure process and will consider all input and recommendations from any responsible landowner.

Please call me at (510) 567-6774 should you have any questions about the content of this letter.

Sincerely,



Larry Sétó
Sr. Hazardous Materials Specialist

Attachments

cc: Chuck Headlee, RWQCB

SAMPLE LETTER (2): LIST OF LANDOWNERS FORM

Name of local agency
Street address
City

SUBJECT: CERTIFIED LIST OF RECORD FEE TITLE OWNERS FOR (*Site Name and Address*)

(Note: Fill out item 1 if there are multiple site landowners. If you are the sole site landowner, skip item 1 and fill out item 2.)

1. In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (*name of primary responsible party*), certify that the following is a complete list of current record fee title owners and their mailing addresses for the above site:

2. In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (*name of primary responsible party*), certify that I am the sole landowner for the above site.

Sincerely,

Signature of primary responsible party

Name of primary responsible party

SAMPLE LETTER 3: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY

Name of local agency
Street address
City

SUBJECT: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY
FOR *(Site Name and Address)*

In accordance with section 25297,15(a) of Chapter 6.7 of the Health & Safety Code, I, *(name of primary responsible party)*, certify that I have notified all responsible landowners of the enclosed proposed action. Check space for applicable proposed action(s):

- cleanup proposal (corrective action plan)
- site closure proposal
- local agency intention to make a determination that no further action is required
- local agency intention to issue a closure letter

Sincerely,

Signature of primary responsible party

Name of primary responsible party

cc: Names and addresses of all record fee title owners

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9335 (FAX)

June 23, 1999

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

INTENT TO MAKE A DETERMINATION THAT NO FURTHER ACTION IS
REQUIRED OR ISSUE A CLOSURE LETTER FOR ROADWAY EXPRESS, 1708
WOOD STREET, OAKLAND, CA 94607

Dear Mr. Zimmermann:

This letter is to inform you that Alameda County Environmental Health Department, Local Oversight Program (LOP), intends to make a determination that no further action is required at the above site or to issue a closure letter. Please notify this agency of any input and recommendations you may have on these proposed actions within 20 days of the date of this letter.

In accordance with section 25297.15 of Ch. 6.7 of the Health & Safety Code, you must provide certification to the local agency that all of the current record fee title owners have been informed of the proposed action. Please provide this certification to this office within 20 days of the date of this letter.

If you have any questions about these proposed actions, please contact Larry Seto at (510) 567-6774.

Sincerely,

Thomas Peacock
Manager, LOP

cc: Chuck Headlee, RWQCB
Leroy Griffin, City of Oakland Fire Department, 505-14th Street, 7th Floor,
Oakland, CA 94612
Larry Seto, Alameda County Environmental Health
Files

ONE ENVIRONMENT

September 10, 1998

Mr. Larry Seto
Sr. Hazardous Materials Specialist
Alameda County Health Care Services
131 Harbor Bay Parkway
Suite 250
Alameda, CA 94502-6577

STID 4072

RE: Roadway Express, Inc. 1708 Wood Street, Oakland, CA 94607

Dear Mr. Seto:

I have recently reviewed your letter dated July 14, 1998 regarding the subsurface investigation activities conducted at the Roadway Express, Inc. facility located at 1708 Wood Street, Oakland, California. The following identifies the criteria utilized to select the eight borehole (B-1 to B-8) locations. A "Soil and Groundwater Investigation Work Plan", prepared by Environmental Audit, Inc. was submitted to Ms. Jennifer Eberle of the Alameda County Health Care Services Agency dated November 14, 1996. The Workplan was submitted in order to delineate the soil and/or groundwater contamination, if any, at the subject site.

Ms. Eberle approved the Workplan on December 12, 1996 with the addition that each groundwater sample that contains Oil and Grease at or above 10 mg/L will also be analyzed for HVOCs and SVOCs. The boring locations and depths were selected to provide information regarding the possible presence of regulated chemicals below the ground surface. The investigation was conducted in accordance with the approved Workplan in attempt to determine the extent of soil and/or ground water contamination, if any, beneath the former USTs areas. The eight borings were advanced in close vicinity of the former USTs as well as the former dispenser island.

Ground water gradient has not been established at the subject site. However, according to Terranext's "Contour Map of Ground Water Elevation" at Southern Pacific Transportation Company located at 1399 Wood Street, Oakland, California (January 1996), groundwater flow direction was reported to the east with a gradient of 0.008.

Please review and contact me with any questions at (562) 987-1096.

Sincerely,



Cheryl Madden
Geologist

Cc: Robert E. Zimmermann – Roadway Express, Inc.

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



July 14, 1998

ENVIRONMENTAL HEALTH SERVICES

1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9335 (FAX)

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

Dear Mr. Zimmermann:

I have reviewed the Preliminary Soil and Groundwater Investigation Report dated June 5, 1998 that was prepared by Bcon Environmental. Please identify the criteria used to select the eight boreholes (B-1 to B-8) locations. In addition, please identify whether groundwater gradient been established at the above site

If you have any questions, please contact me at (510) 567-6774.

Sincerely,



Larry Seto
Sr. Hazardous Materials Specialist

Cc: Cheryl Madden, One Environmental, 240 Termino Avenue,
Long Beach, CA 90803

Files

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



June 1, 1998

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9432

Mr. Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron, OH 44310
STID 4072

RE: Roadway Express, 1708 Wood Street, Oakland, CA 94607

Dear Mr. Zimmermann:

On July 24, 1997, seven (7) Geoprobes were advanced at the above site implementing a Soil and Groundwater Investigation Workplan prepared by Environmental Audit Inc. A summary report documenting the results of this investigation has not been submitted to this office for review. Please submit a copy of this report to my attention within 10 days of the receipt of this letter.

If you have any questions, please contact me at (510) 567-6774.

Sincerely,



Larry Seto
Sf. Hazardous Materials Specialist

Cc: Cheryl Madden, One Environmental, 240 Termino Avenue,
Long Beach, CA 90803
Files

white - env. health
yellow - facility
pink - files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # _____ Site Name Roadway Express Today's Date 7/24/97
Site Address 1708 Wood St.
City Oakland Zip 94607 Phone _____

____ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- ____ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- ____ II. Hazardous Materials Business Plan, Acutely Hazardous Materials
- III. Under ground Storage Tanks

Geoprobe invest.

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

9:30 onsite.

Comments:

Met Cheryl Madden, Mark Burwinsky + Liz M. They plan to do 7 Geoprobe points around former USTs. The work plan indicated 6 points, but we are adding 1 extra point at the former dispenser area, but will only analyze soil, not gw. 1st boring hit gw at ~4' bgs (B1). Using continuous core.

10:45 set up dispenser boring (B2). Geoprobe could not collect soil to 10' bgs.

11:05 offsite

Contact Cheryl A. Madden
Title Geologist
Signature [Signature]

Inspector J. Eberle
Signature [Signature]

II, III



ONE ENVIRONMENT

ENVIRONMENTAL
PROTECTION
97 FEB 11 AM 10:04

February 4, 1997

Ms. Jennifer Eberle
Hazardous Materials Specialist
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

RE: Roadway Express, Inc. 1708 Wood Street, Oakland, CA 94607

Dear Ms. Eberle,

I am submitting a summary of the October 30, 1996 sampling event on behalf of Roadway Express, Inc. The following is a synopsis of the event:

October 29, 1996:

- The pump island was removed by H.B. Covey. Stained soil was excavated at the dispenser area. Soil was removed to 4' bgs near the previous diesel dispenser. Bay muds were encountered at 3' bgs. There were no hydrocarbon odors noted in the bay muds. There were two large concrete "footers" encountered during the excavation activities. The "footers" were not removed due to their size. The origin of the "footers" is unknown.
- Water from the tank pit flowed into the new excavation. The excavated soil (sandy silt) had a high petroleum odor. The southwestern sidewall of the pump island had some discoloration, and was excavated to the edge of the concrete pad. The northeast sidewall was excavated to pea gravel of the prior tank pit (refer to attached Figure). Upon evaluation of the excavation, the contamination appeared to be delineated to the east. The extent of contamination to the west could not be determined by visual observation. The soil was stockpiled and covered with plastic.

October 30, 1996:

- One soil sample was collected from the southwest wall, approximately 2' bgs (sample D2), and one sample was collected from the bottom of the pump island excavation (4 1/2' bgs, sample D1). Inspector B. Chan was present during the over excavation and sampling activities. Sample D2 had a noticeable petroleum odor while sample D1 had no detectable odor. The soil samples were collected per approved methods.
- The soil samples were transported to BC Analytical according to proper procedures.

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



December 12, 1996
LOP STID 4072

Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron OH 44309

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION (LOP)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

RE: Roadway Express site, 1708 Wood St., Oakland CA 94607

Dear Mr. Zimmermann,

Thank you for submitting the "Soil and Ground Water Investigation Work Plan," prepared by Environmental Audit, Inc., dated 11/14/96. As you probably know, the work plan involves the installation of six Geoprobe points, and the collection of soil and water samples. **This work plan is acceptable for implementation, on the condition that EACH groundwater sample which contains O&G at or above 10 mg/L will also be analyzed for HVOCs and SVOCs.** In addition, it would be acceptable to delete the soil analysis at the 1' bgs interval. However, the soil sample at the groundwater interval should be analyzed in each boring, as per the work plan.

Please notify me by telephone at least 2 business days ahead of field work. I will try to arrange to do a site visit. I can be contacted at 510-567-6761.

In addition, you are requested to submit the laboratory results and sample location map (or simply the report) for sampling below the dispenser asap. This work was conducted on 10/30/96.

Sincerely,

Jennifer Eberle
Hazardous Materials Specialist

cc: Edward Leonhardt, Environmental Audit Inc., 1000-A Ortega Way, Placentia CA 92670-7125
Cheryl Madden, One Environment, 3736 Brayton Ave., Long Beach, CA 90807
JEberle/file

je.4072-A



ONE ENVIRONMENT

October 7, 1996

Ms. Jennifer Eberle
Alameda County Department of Health
1131 Harbor Bay Parkway
Alameda, CA 94502

RE: Submittal of signed Manifests
Roadway Express, Inc.
1708 Wood Street
Oakland, CA 94607

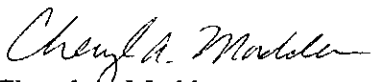
Dear Jennifer:

Enclosed you will find a copy of the two Manifests from the disposal of the rinseate and tank pit during the UST removal process at the above site. These two Manifests include the signature of the disposal facility for your records.

In reference to the additional activities to be conducted at the site, the soil excavation beneath the pump island will take place on Wednesday, October 16, 1996. I will be onsite to collect the confirmation samples for analysis. I will forward the results of the analysis upon receipt. The requested Work Plan will be forwarded for your review by the stated deadline.

If you have any further questions, please contact me at your convenience.

Sincerely,
ONE ENVIRONMENT


Cheryl A. Madden
Geologist, REA

cc: R.E. Zimmermann/Roadway Express, Inc. Environmental Dept.

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-96)
Place this in type. Form designed for use on 8 1/2 (12-pitch) typewriter.

See Instructions on back of form

Department of Toxic Substances Control
Sacramento, California

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **CA10000119112537262** Manifest Document No. **37262** 2. Page 1 of 1 Information in the shaded areas is not required by Federal law. **FES4**

3. Generator's Name and Mailing Address
3736 Brynton Ave, Roadway Express, Long Beach, CA 90807

A. State Manifest Document Number **96237262**

4. Generator's Phone **(714) 457-3462**
5. Transporter 1 Company Name **EVERGREEN ENVIRONMENTAL SERVICES** 6. US EPA ID Number **CA1D9824132612**

B. State Generator's ID
C. State Transporter's ID
D. Transporter's Phone **(800) 972-5284**

7. Transporter 2 Company Name
8. US EPA ID Number

E. State Transporter's ID
F. Transporter's Phone

9. Designated Facility Name and Site Address
EVERGREEN OIL, INC. 6880 Smith Avenue Newark, CA 94560 10. US EPA ID Number **CA1D9808874118**

G. State Facility's ID
H. Facility's Phone

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol

a. **Oil & water NON-RCRA HAZARDOUS WASTE, LIQUID**

0 10 1 T T 0 380 G

b.
c.
d.

EPA/Other

12. Additional Descriptions for Materials Listed Above
13. Handling Codes for Materials Listed Above

15. Special Handling Instructions and Additional Information
24 Hour Emergency Response Telephone No.: CHEMTREC 1-800-424-9300 DOT ERG 31 WEAR PROTECTIVE EQUIPMENT

Invoice # **Site Address 1708 Wood St. Oakland, CA 94607**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **JOE CLIFTON CONSULTANT** Signature

Month **07** Day **11** Year **96**

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name **Sean Fay** Signature

Month **07** Day **10** Year **96**

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name
Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.
Printed/Typed Name **John Jones** Signature

Month **07** Day **11** Year **96**

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7550
 GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAK00001912536054		Manifest Document No. 36054		2. Page 1 of 1		Information in the shaded area is not required by Federal law. EESA			
3. Generator's Name and Mailing Address Rouveny Express 1708 Woodst Oakland CA 94607				A. State Manifest Document Number 96236054		B. State Generator's ID					
4. Generator's Phone (570) 763 7921		6. US EPA ID Number CAID982413262		C. State Transporter's ID		D. Transporter's Phone (800) 972-5284					
5. Transporter 1 Company Name EVERGREEN ENVIRONMENTAL SERVICES		8. US EPA ID Number		E. State Transporter's ID		F. Transporter's Phone					
7. Transporter 2 Company Name		10. US EPA ID Number CAID980887418		G. State Facility's ID		H. Facility's Phone (510) 795-4400					
9. Designated Facility Name and Site Address EVERGREEN OIL, INC. 6880 Smith Avenue Newark, CA 94560		11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) a. WATER + Oil NON-RCRA HAZARDOUS WASTE, LIQUID		12. Containers No. Type 0 0 1 T T		13. Total Quantity 0 2 1 7 6		14. Unit Wt/Vol G		I. Waste Number State 221 EPA/Other None	
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above a. 01 b. c. d.		15. Special Handling Instructions and Additional Information 24 Hour Emergency Response Telephone No.: CHEMTREC 1-800-424-9300 Invoice # DOT ERG 31 WEAR PROTECTIVE EQUIPMENT 528255		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.					
Printed/Typed Name X Cheryl Madden / DNL ENVIRONMENT		Signature Cheryl A. Madden		Month Day Year 07 11 96		17. Transporter 1 Acknowledgement of Receipt of Materials: Printed/Typed Name Dennis Emery Signature Dennis Emery Month Day Year 07 11 96					
Printed/Typed Name		Signature		Month Day Year		18. Transporter 2 Acknowledgement of Receipt of Materials: Printed/Typed Name					
Printed/Typed Name		Signature		Month Day Year		19. Discrepancy Indication Space					
Printed/Typed Name John Jones		Signature John Jones		Month Day Year 07 11 96		20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					

DO NOT WRITE BELOW THIS LINE.

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

Hazardous Materials Inspection Form

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

II, III

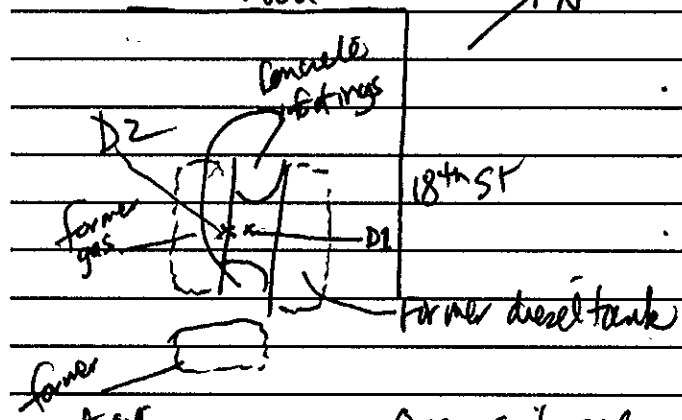
Site ID # _____ Site Name Roadway Express Today's Date 10/30/96
Site Address 1708 Wood St
City Oak Zip 94607 Phone _____

____ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?
Inspection Categories:
____ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
____ II. Hazardous Materials Business Plan, Acutely Hazardous Materials
 III. Under ground Storage Tanks - follow up

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

Present to witness over excavation of dispenser island & take confirmatory soil sample
Wood ↗ N



Cheryl Madden - One Environment present

- A limited amt of soil ~ 3 cyd was removed beneath the dispenser due to the presence of concrete footings
- Water from diesel pit entered the excavation & filled the exc pit. Pit excavated to ~ 4'.

→ smells like it's impacted

- One soil spk taken from west wall ~ 2' bg (D2)
- One ^{satd} spk taken from pit floor - D1, grey clay - no odor

Run sples for TCHd, g, BTEX and TOG SS20 E+P

Contact _____
Title _____
Signature Cheryl Madden

Inspector B. CHAN
Signature BChan

II, III

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



Alameda County
Environmental Protection Division
1131 Harbor Bay Parkway, Room 250
Alameda CA 94502-6577

CC4580

September 16, 1996
LOP STID 4072
page 1 of 3

Robert E. Zimmermann
Roadway Express Inc.
1077 Gorge Blvd.
Akron OH 44309

RE: Roadway Express site, 1708 Wood St., Oakland CA 94607

Dear Mr. Zimmermann,

Thank you for submitting the "Report on Underground Storage Tank Removal," prepared by One Environment, dated 7/22/96, under your cover letter dated 8/21/96. This report documents activities associated with the removal of one 10,000-gallon diesel UST on 7/11/96. Soil samples collected from the native clay (beyond the contaminated backfill material) below the UST indicated non-detectable (ND) concentrations of contaminants. However, the backfill material was stockpiled and sampled; results indicated 7,400 parts per million (ppm) of TPH-diesel (and ND benzene). Soil sampled below the dispenser was also sampled; results indicated 11,000 ppm of TPH-diesel (and ND benzene).

The tar wrap on the UST was absent in the area of the fill port. This indicates the probability of UST overfilling, resulting in the tar wrap dissolving. The presence of elevated concentrations of TPH-d below the dispenser indicates that there was a dispenser and/or piping leak as well.

Due to these elevated concentrations of TPH-diesel, you are requested to perform a Soil and Water Investigation (SWI), as per Sect. 2724 of Chapter 16, Division 3, Title 23, California Code of Regulations. Rapid site assessment methods (i.e. cone penetrometer testing, geoprobe, hydropunch, etc.) are suggested to qualitatively assess impacts and to define the extent of any groundwater contaminant plume, as a first step of the SWI. The results of the rapid site assessment methods will determine whether "permanent" groundwater monitoring wells may be required. **Please submit a workplan for a SWI within 60 days, or by November 16, 1996.** The workplan should address impacts to groundwater, as well as soil sampling as defined below. The definition of the lateral and vertical extent of the soil contamination around the dispenser may be determined when the dispenser island is removed, soil is removed, and confirmatory soil sampling is conducted. This project is due to take place shortly, as per a telecon with Cheryl Madden of One Environment today, and this project may proceed without a workplan. **Please notify me at least 2 business days prior to field activities by telephone.**

In addition, the stockpiled soil should be properly disposed within 60 days. Please submit legible disposal documentation.

September 16, 1996
LOP STID 4072
Robert E. Zimmermann
page 2 of 3

A review of our UST inspection file revealed several documents from R.S. Eagan and Co. and Roadway, dating back to 1987. These documents indicate that two other USTs (10,000-gallon gasoline and a motor oil UST) were removed on 3/31/87, and two additional USTs (10,000-gallon unknown UST and 2,000-gallon waste oil UST) were closed in place on 5/5/87.

R.S. Eagan indicated that they installed a 4" monitoring well (MW) where each of the two USTs were removed. Note that no MW Installation report was found in our files. A laboratory report was attached for soil samples taken during tank removal, as well as two groundwater samples. Soil results indicate ND TPHg and BTX on the gasoline UST, and up to 770 ppm Oil and Grease (O&G) (unknown EPA or DHS method) on the motor oil UST at 11'bgs (TPHg and BTX were ND). Groundwater was apparently sampled only once from the wells; results indicated 500 mg/L TPHg (and <0.07 mg/L benzene) at the MW near the former gasoline UST, and 21 mg/L O&G at the MW near the former motor oil UST. Note that the relatively high concentration of TPH-g (500 mg/L) combined with the absence of benzene (note the raised detection limit) is unusual. Note also that the concentration of O&G was relatively high also.

A report by Groundwater Technology, signed by a Certified Engineering Geologist, stated they drilled three soil borings around the two USTs closed in place near the shop (as seen in the small sketch map on the boring logs), and apparently sampled one soil sample from each boring. Results indicated ND BTEX and a maximum TPHg of 14.4 ppm.

I have enclosed copies of all these documents for your information. There is a contradiction in the size of the motor oil UST removed: Roadway's letter indicates 6,000-gallon while R.S. Eagan's letter indicates 2,000-gallon.

Due to the presence of 770 mg/kg and 21 mg/L Oil and Grease in soil and groundwater, respectively, in the vicinity of the former motor oil UST, further soil and groundwater sampling should be conducted in this area (in at least 2 locations). Samples should be analyzed for Oil and Grease by method 5520, at a minimum. If O&G is found in soil at or above 100 mg/kg, or at or above 10 mg/L in groundwater, then semi-volatiles (via method 8270) and halogenated volatiles (via method 8010) should also be analyzed. **This should be included in the SWI. In addition, TPH-gasoline should be included in the SWI in soil and groundwater samples in the area of the former 10,000-gallon gasoline UST in at least 2 locations.** Since the contamination detected in 1987 has had nearly 10 years to degrade and disperse in the subsurface, it is possible that this investigation will reveal highly reduced concentrations, degraded constituents, or ND concentrations.

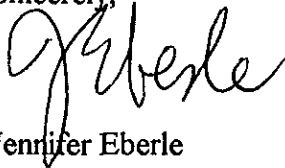
If you have any questions, please contact me at 510-567-6761; our fax number is 510-337-9335. **Feel free to submit reports on double-sided paper in order to save precious trees.**

September 16, 1996
LOP STID 4072
Robert E. Zimmermann
page 3 of 3

There are state funds available for remediation of UST sites. These funds reimburse responsible parties, such as yourselves, for the costs associated with remediation. I have enclosed a brochure outlining this program. Included are phone numbers for people to help you with this process.

Please note that the UST CleanUp Fund specifies bidding requirements and deductibles. **Please direct questions re the Fund to Christopher Stevens (916-227-4519) or Jim Munch (916-227-4430) of the State Water Resources Control Board, UST CleanUp Fund.**

Sincerely,



Jennifer Eberle
Hazardous Materials Specialist

cc: Cheryl Madden, One Environment, 3736 Brayton Ave., Long Beach, CA 90807
JEberle/file

je.4072

enclosure

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.	
REPORT DATE 07/24/96		CASE #		SIGNED: <i>Eberle</i> DATE: 9-16-96	
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT CHERYL A. MADDEN / ONE ENVIRONMENT		PHONE (310) 427-5462		SIGNATURE Cheryl A. Madden
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME ONE ENVIRONMENT		
	ADDRESS 3736 BRAYTON AVE LONG BEACH CA 90807				
RESPONSIBLE PARTY	NAME ROADWAY EXPRESS, INC. <input type="checkbox"/> UNKNOWN		CONTACT PERSON BOB ZIMMERMANN		PHONE (330) 258-2412
	ADDRESS 1077 GORGE BLVD. AKRON OH 44310				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) ROADWAY EXPRESS, INC.		OPERATOR SAME		PHONE ()
	ADDRESS 1708 WOOD STREET OAKLAND CA 94607				
	CROSS STREET 18th street				
IMPLEMENTING AGENCIES	LOCAL AGENCY ALAMEDA CO., DEPT. OF ENVIRONMENTAL HEALTH		CONTACT PERSON JENNIFER EBERLE		PHONE (510) 567-6700
	REGIONAL BOARD				
SUBSTANCES INVOLVED	(1) NAME DIESEL FUEL		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
	(2)		<input type="checkbox"/> UNKNOWN		
DISCOVERY/ABATEMENT	DATE DISCOVERED 07/10/96		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER		
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input checked="" type="checkbox"/> OTHER		
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 07/10/96				
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER		
	CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input checked="" type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY				
	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (BT) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input checked="" type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT) <i>During UST REMOVAL.</i>				
COMMENTS	UPON REMOVAL OF UST, BACKFILL MATERIAL (SAND) WAS IMPACTED WITH DIESEL (11,000 PPM). BACKFILL MATERIAL WAS REMOVED & STOCKPILED FOR DISPOSAL. NATIVE CLAY WAS ENCOUNTERED & SAMPLED AT WATER-SOIL INTERFACE. CLAY NOT IMPACTED.				
	Dispenser had				

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A



ENVIRONMENTAL PROTECTION

COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM 1 NEW PERMIT 3 RENEWAL PERMIT 5 CHANGE OF INFORMATION 7 PERMANENTLY CLOSED SITE
 2 INTERIM PERMIT 4 AMENDED PERMIT 6 TEMPORARY SITE CLOSURE

I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)

DEVELOPER FACILITY NAME Roadway Express, Inc.		NAME OF OPERATOR Roadway Express, Inc.	
ADDRESS 1709 Wood ST.		NEAREST CROSS STREET	PARCEL # (OPTIONAL)
CITY NAME Oakland	STATE CA	ZIP CODE 94607	SITE PHONE # WITH AREA CODE 510-763-7921
<input checked="" type="checkbox"/> BOX TO INDICATE <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LOCAL-AGENCY DISTRICTS <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> FEDERAL-AGENCY			
TYPE OF BUSINESS <input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE E. P. A. I. D. # (optional)

EMERGENCY CONTACT PERSON (PRIMARY)

EMERGENCY CONTACT PERSON (SECONDARY) - optional

DAYS: NAME (LAST, FIRST) Gidash Thomas	PHONE # WITH AREA CODE 510-763-7921	DAYS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE
NIGHTS: NAME (LAST, FIRST) Gidash Thomas	PHONE # WITH AREA CODE 510 763 7921	NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME Roadway Express, Inc.	CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 1077 GORGE Blvd.	<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY	<input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	
CITY NAME Akron	STATE OH	ZIP CODE 44309	PHONE # WITH AREA CODE 330-258-2412

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER Roadway Express, Inc.	CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 1077 GORGE Blvd.	<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY	<input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	
CITY NAME Akron	STATE OH	ZIP CODE 44309	PHONE # WITH AREA CODE 330-258-2412

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 323-9555 if questions arise.

TY (TK) HQ 44-02107216

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input checked="" type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND
	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 99 OTHER	

VI. LEGAL NOTIFICATION AND BILLING ADDRESS Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING: I. II. III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) Roadway Express, Inc. Robert E. Zimmerman	APPLICANT'S TITLE Supervisor - Env. Serv.	DATE MONTH/DAY/YEAR 8/21/96
--	--	--------------------------------

LOCAL AGENCY USE ONLY

COUNTY # [] []	JURISDICTION # [] [] []	FACILITY # [] [] [] [] [] []
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.
FORM A (5-91) FOR003A-5

STATE OF CALIFORNIA
 STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED:

I. TANK DESCRIPTION COMPLETE ALL ITEMS - SPECIFY IF UNKNOWN

A. OWNER'S TANK I. D. #	001	B. MANUFACTURED BY.	UNKNOWN
C. DATE INSTALLED (MO/DAY/YEAR)	1978	D. TANK CAPACITY IN GALLONS:	10,000

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input checked="" type="checkbox"/> 1 PRODUCT	C. <input type="checkbox"/> 1a REGULAR UNLEADED	<input checked="" type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 5 JET FUEL	
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED					C. A. S. #

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM	<input type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input type="checkbox"/> 95 UNKNOWN
	<input checked="" type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank)	<input checked="" type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 95 UNKNOWN
	IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___		<input checked="" type="checkbox"/> 99 OTHER NONE
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input checked="" type="checkbox"/> 91 NONE	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
		<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
E. SPILL AND OVERFILL	SPILL CONTAINMENT INSTALLED (YEAR) _____		OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) _____

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A (U) 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 99 OTHER
B. CONSTRUCTION	A (U) 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN
				A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A (U) 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A U 4 FIBERGLASS PIPE
	A U 5 ALUMINUM	A U 6 CONCRETE	A U 7 STEEL W/ COATING	A U 8 100% METHANOL COMPATIBLE W/FRP
	A U 9 GALVANIZED STEEL	A U 10 CATHODIC PROTECTION	A U 95 UNKNOWN	A (U) 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input checked="" type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING _____ GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input type="checkbox"/>
---	--	--

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) Robert E. Zimmerman DATE 8/21/96

LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW
 ROBERT E. ZIMMERMAN - SUPERVISOR ENVIRONMENTAL SERVICES

STATE I.D. #	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE		PERMIT EXPIRATION DATE	

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # _____ Site Name Roadway Express Today's Date 7/11/96

Site Address 1708 Wood St. (UST is near 18th St.)

City Oakland Zip 94607 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Hazardous Materials Business Plan, Acutely Hazardous Materials
- III. Under ground Storage Tanks

Removal of
10,000 - gal
UST.

1.5 lb 100
15 1000
150 10,000

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

~~9:10 arrived onsite. They are not ready because their crane has not arrived. Met Cheryl Madden of One Environment. She said that she got a history of other ~~800~~ USTs from Roadway: on 3/31/87, two USTs were closed in place near the garage, partly due to being partly under the bldg. They were a 10K unknown xxx UST and a 2K waste oil UST. On 3/31/87, two USTs were removed: 10K gasoline UST on the other side of the pump island, and 6K motor oil UST near the pump island. 9:40 left site. 5:00 rtr'd to site. 5:12 Crane~~

arrived. 250 lb dry ice. 5:30 Leroy Griffin of OFD arrived. Cheryl says the stockpiled soil is likely contaminated. It will be sampled for composite for offhaul. Evergreen pumped 2100 gal. from pit this a.m. They have the manifest.

5:36 Removal of UST: tar wrapped steel, missing tar wrap at fill end, no obvious holes, diesel product adhering to bottom of UST. Some gw in bottom of pit w/ diesel sheen. Niets + Sons transported UST (# 95570615).

6:00 Sampled East end. gw entering pit ~ 5' bgs. The sandy backfill in tank pit has strong HC odor + will be removed from pit + added to existing SP for later offhaul. Cheryl will sample SP tonight. Fax lab results to 510-337-9335 - 5-day TAP.

6:08 Sampled diesel dispenser at 1.5' bgs.
6:15 left site

Contact Cheryl Madden
Title One Environment
Signature Cheryl Madden

Inspector Jennifer Eberle
Signature Jennifer Eberle

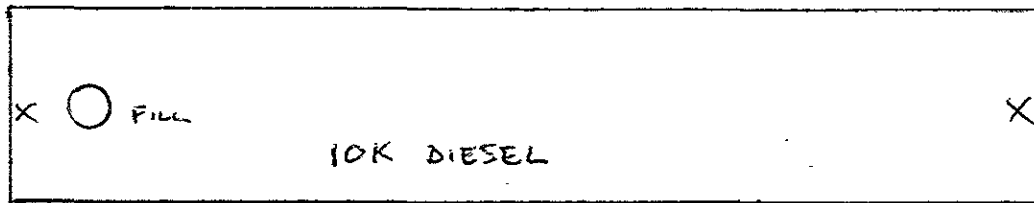
II, III

18TH ST.

6' CHAIN LINK

TO WOOD ST.
300 YARDS TO OFFICE

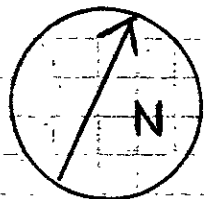
clay
TP-West - 7' by 5'



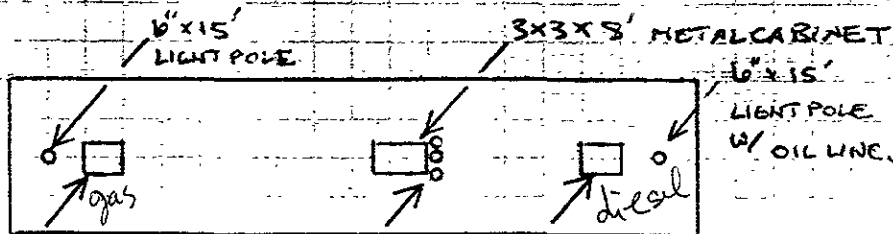
TP-East - 5' 20'
clay (beyond
contaminated
stratum)

40'
Sandy
w/depth

40'



c/c



5'

120' TO FENCE

PRODUCT AND V.R. LINE
BUT NO PUMP

1 BENNETT 3788
PUMP

3 - 3' VENT LINES

170' TO FENCE

4" SLOTTED MONITORING WELL
WATER 5" FROM GRADE
9' LIGHT GREY CLAY/MOA - NO ODOOR

c/c

ROADWAY TRUCKING
170 WOOD ST.
OAKLAND, CA, 94621

SCOPE: REMOVAL OF 10K DIESEL TANK

Transfer of Eligible Local Oversight Case

STID 4072 Date of input: MK 7/23/96

Date: 7-23-96 From: J. Eberle

Site Name: Roadway Express

Address: 1708 Wood St City: Oak Zip: 607

To be eligible for LOP, case must meet 3 qualifications:

1. Y N Tanks Removed? # of removed? 1 Date removed: 7-11-96

2. Y N Samples received? Contamination level: 11,000 ppm
Type of test TPH-d
Contamination should be over 100 ppm TPH to qualify for LOP

3. Y N Petroleum? Circle Type(s):
• Avgas • leaded • unleaded • fuel oil • jet
• diesel • waste oil • kerosene • solvents

Procedure to follow should your site meet all the above qualifications:

1.
 - a. Close the deposit refund case.
 - b. Account for ALL time you have spent on the case.
 - c. Turn in account sheet to Leslie.

If there are funds still remaining it is still better to transfer the case to LOP as the rate for LOP allows more overhead. **DO NOT** attempt to continue to oversee the site simply because there are funds remaining!

Remaining DepRef \$'s: 102,46

DepRef Case Closed with Candyce/Leslie? Y N (If no, explain why below.)

2. Submit the completed A and B permit application forms to NORMA.
3. Give the entire case to the proper LOP staff.

Jennifer Eberle

Project Specialist

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PARKWAY, RM 250
ALAMEDA, CA 94502-6577
PHONE # 510/567-6700
FAX # 510/337-9335

ACCEPTED

Underground Storage Tank Closure Permit Application
Alameda County Division of Hazardous Waste, 1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and satisfactory under the requirements of the State and Local Health Laws. Changes to your plans should be indicated by the Department are to ensure compliance with State and local laws. The permit process is not to be released for issuance of any required utility shut-offs for construction/destruction.
One copy of the approved plans must be on the job site available to all contractors and craftsmen involved in the removal.

Any changes or alterations of these plans and specifications must be submitted to this office. The contractor must be notified of any changes in advance of the start of work. Building Department is required to inspect and approve any changes to the plans. A permit is required for any work that must be completed at least 72 hours prior to the beginning of the work.
Permit Inspection:

Removal of Tanks and Piping
Sampling
Final Inspection
Issuance of a permit to operate, b) permit to close, closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:

Contact Specialist:

J. Eberle 6-28-96
See comments p. 4 & 5.

soil below UST and/or soil returned to excavation may need to be removed if contaminant concentrations are significant.

UNDERGROUND TANK CLOSURE PLAN

*** Complete according to attached instructions ***

- Name of Business ROADWAY EXPRESS 310-427-5462
Business Owner or Contact Person (PRINT) CHERLY MADDEN
- Site Address 1708 WOOD STREET
City OAKLAND Zip 94607 Phone (510) 763-7921
- Mailing Address SAME
City _____ Zip _____ Phone _____
- Property Owner ROADWAY EXPRESS
Business Name (if applicable) SAME
Address 1077 GORGE BLVD
City, State AKRON OHIO Zip 44310
- Generator name under which tank will be manifested
ROADWAY EXPRESS

EPA ID# under which tank will be manifested CAD 980887418

~~CAL 000 0191 2015 579~~
12:13 PM 3/21
ENVIRONMENTAL PROTECTION DIVISION

4072

6-27-96:

6. Contractor H.B. COVEY, INC. current + active
 Address 350 E. COMMERCIAL ST. Corp.
 City POMONA exp 2-28-98 Phone (909) 623-2502
 License Type* A C61-D40 HAZ LA County ID# 2 69354

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board.

7. Consultant (if applicable) ONE ENVIRONMENT
 Address 3736 BRATON AVE.
 City, State LONG BEACH CA 90007 Phone (310) 427-5462

8. Main Contact Person for Investigation (if applicable)
 Name SAME Title _____
 Company _____
 Phone _____

9. Number of underground tanks being closed with this plan 1
 Length of piping being removed under this plan 20'
 Total number of underground tanks at this facility (**confirmed with owner or operator) 1

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

**** Underground storage tanks must be handled as hazardous waste ****

a) Product/Residual Sludge/Rinsate Transporter
 Name NIETO & SONS TRUCKING, INC. EPA I.D. No. CAT080016116
 Hauler License No. 673912 License Exp. Date _____
 Address P.O. BOX 760
 City YORBA LINDA State CA Zip 92686

b) Product/Residual Sludge/Rinsate Disposal Site
 Name NIETO & SONS TRUCKING, INC. EPA ID# CAT080016116
 Address P.O. BOX 760
 City YORBA LINDA State CA Zip 92686

DTSC - Teri Paterson
says they're ok.

c) Tank and Piping Transporter

Name NIETO & SONS TRUCKING, INC. EPA I.D. No. CAT080016116
Hauler License No. 673912 License Exp. Date _____
Address P.O. BOX 760 Neg # 0503
City YORBA LINDA State CA Zip 92686

d) Tank and Piping Disposal Site

Name CROSBY & OVERTON EPA I.D. No. CAD028409019
Address 1610 W. 17th STREET
City LONG BEACH State CA Zip 90813

11. Sample Collector

Name CHERYL MADDEN
Company ONE ENVIRONMENT
Address 170 WOOD STREET
City OAKLAND State CA Zip 94621 Phone (510) 763-7921

12. Laboratory

Name ENTECH ANALYTICAL LABS *ok*
Address 525 DEL REY AVE. SUITE E
City SUNNY VALE State CA Zip 94086
State Certification No. CAELAP#1364

13. Have tanks or pipes leaked in the past? Yes[] No[] Unknown[x]

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

REMOVE RESIDUAL PRODUCT

PURGING WITH DRY ICE

1.5 lb per 100 gal UST

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be permanently plugged.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
10,000 GALLONS	5/96 ? diesel	SOIL	1-2 FEET BELOW TANK INVERT ON BOTH SIDES. DISPENSER SAMPLE

One soil sample must be collected for every 20 linear feet of piping that is removed. A ground water sample must be collected if any ground water is present in the excavation.

Excavated/Stockpiled Soil

Stockpiled Soil Volume (estimated)

75 -100 TONS

Sampling Plan

COMPOSITE SAMPLES FROM STOCKPILE

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

Will the excavated soil be returned to the excavation immediately after tank removal? yes no unknown

If yes, explain reasoning TANK IS LOCATED IN HEAVY TRAFIC AREA & STOCKPILE

WILL DAMAGE BUSINESS ACTIVITY

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from Alameda County. This means that the contractor, consultant, or responsible party must communicate with the specialist IN ADVANCE of backfilling operations.

16. Chemical methods and associated detection limits to be used for analyzing samples:

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

17. Submit Site Health and Safety Plan (See Instructions)

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
TPH DIESEL FUEL BTEX	3550	418-1, 8015/8020 8020 or 8240	.05

18. Submit Worker's Compensation Certificate copy

Name of Insurer STATE FUND

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery.

The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business H.E. COVEY, INC.

Name of Individual BRET COVEY

Signature *Bret Covey* Date 6-10-96

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business ROADWAY EXPRESS

Name of Individual _____

Signature _____ Date _____

FROM ALAMEDA CO EHS HAZ-OPS

510 337 9335

1996, 06-28

10:52

#702 P.01/01

Post-It™ brand fax transmittal memo 7671		# of pages
To	Bob Zimmerman	Phone
Co.	Mann	Co.
Dept.		Phone #
Fax #		Fax #

Alameda County
510-337-9335

18. Submit Worker's Compensation Certif.

Name of Insurer STATE FUND

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CONTRACTOR INFORMATION

Name of Business H.A. COVEY, INC.

Name of Individual BRET COVEY

Signature [Signature] Date 6-10-96

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (circle one)

Name of Business ROADWAY EXPRESS

Name of Individual ROBERT E. ZIMMERMANN

Signature [Signature] Date 6/28/96

ALAMEDA COUNTY ENVIRONMENTAL PROTECTION DIVISION

DECLARATION OF SITE ACCOUNT REFUND RECIPIENT

There may be excess funds remaining in the Site Account at the completion of this project. The PAYOR (person or company that issues the check) will use this form to predesignate another party to receive any funds refunded at the completion of this project. In the absence of this form, the PAYOR will receive the refund.

SITE INFORMATION:

Site ID Number
(if known)

ROADWAY EXPRESSE

Name of Site

170 WOOD STREET

Street Address

OAKLAND, CA 94621

City, State & Zip Code

I designate the following person or business to receive any refund due at the completion of all deposit/refund projects:

H.B. COVEY, INC.

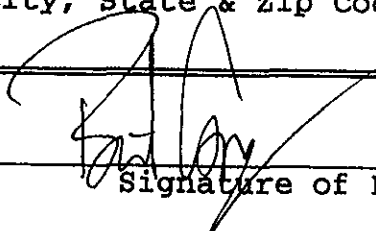
Name

350 E. COMMERCIAL

Street Address

POMONA, CA 91767

City, State & Zip Code


Signature of Payor


Date

H.B. COVEY, INC.

Name of Payor
(PLEASE PRINT CLEARLY)

H.B. COVEY, INC.
Company Name of Payor

RETURN FORM TO:

*County of Alameda, Environmental Protection
1131 Harbor Bay Parkway, Rm 250
Alameda CA 94502-6577
Phone#(510) 567-6700*

**STATE
COMPENSATION
INSURANCE
FUND**

P.O. BOX 420807, SAN FRANCISCO, CA 94142-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

MAY 15, 1996

POLICY NUMBER: 046-96 UNIT 0004803
CERTIFICATE EXPIRES: 1-1-97

ROADWAY EXPRESS
178 WOOD ST
OAKLAND CA 94621

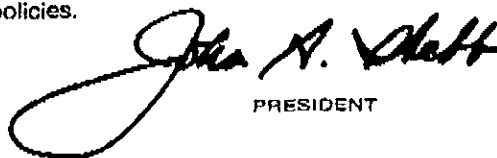
JOB: INSURANCE VERIFICATION

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon ten days' advance written notice to the employer.

We will also give you TEN days' advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.


PRESIDENT

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000 PER OCCURRENCE

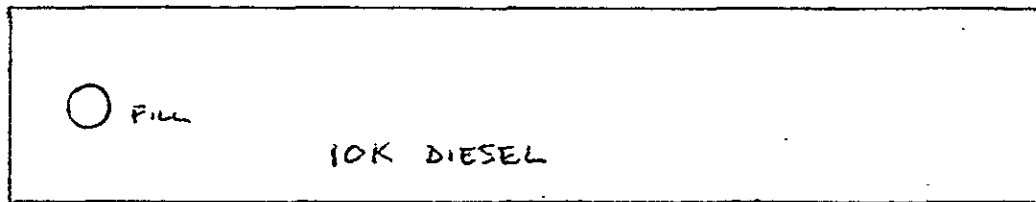
EMPLOYER

H.S. COVERY, INC.
350 COMMERCIAL ST
POMONA CA 91766

18TH ST.

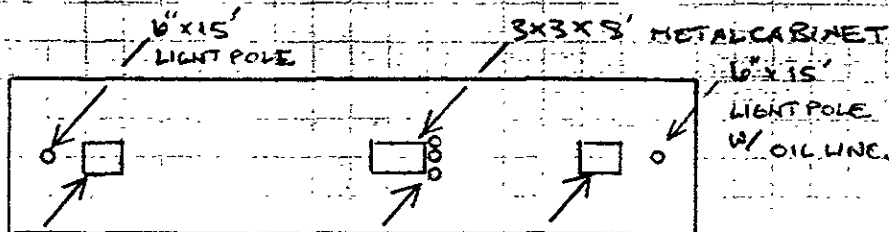
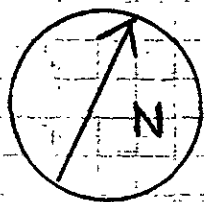
6' GRADE LINK

TO WOOD ST.
300 YARDS TO OFFICE



20'

40'



5'

120' TO FENCE

PRODUCT AND V.R. LINE
BOT NO. PUMP

1 BENNETT 3788
PUMP

3\" x 3\" VENT LINES

170' TO FENCE

4\" SLATED MONITORING WELL
WATER 5\" FROM GRADE
9\" LIGHT GREY CLAY/MOA - NO ODOOR

ROADWAY TRUCKING
170 WOOD ST.
OAKLAND, CA 94621

SCOPE: REMOVAL 1 10K DIESEL TANK

From:

ONE ENVIRONMENT
CHERYL MADDEN
3736 BRAYTON AVENUE
LONG BEACH, CA 90807

Fax Phone Number:

(310)490-0724

Voice Phone Number:

(310)427-5462

To:

QuickSend

Fax Phone Number:

15103379335

Voice Phone Number:

Number of Pages:

2

Date:

6/28/96-3:02:57 PM

Roadway Express, Inc. Permit

Notes:

Jennifer, I wanted to make sure you had a copy of this permit.

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

5/15/1996

INSURED:

Lohman Insurance
1305 Gene Autry Way
Anaheim, CA 92805
(714) 634-2683 FAX (714) 634-3704

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	A	ACCEPTANCE INS. CO. (ECI-OH.)
COMPANY LETTER	B	CENTURY NATIONAL INS. CO.
COMPANY LETTER	C	CENTURY SURETY INSURANCE CO.
COMPANY LETTER	D	
COMPANY LETTER	E	

INSURER:

H.B. COVEY, INC.
350 E. COMMERCIAL
POMONA, CALIFORNIA 91767-5506

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY				
	X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR OWNERS & CONTRACTORS PROT X \$10,000 DED.	EC 29100099	10/01/95	10/01/96	GENERAL AGGREGATE \$ 1,000,000 PRODUCTS-COMP/OP AGG. \$ INCLUDED PERSONAL & ADV. INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED. EXPENSE (Any one person) \$ 1,000 COMBINED SINGLE LIMIT \$ 1,000,000
B	AUTOMOBILE LIABILITY				
	X ANY AUTO ALL OWNED AUTOS X SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY X PHYS. DAMAGE	HAP 67074	10/01/95	10/01/96	BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ EACH OCCURRENCE \$ AGGREGATE \$
	EXCESS LIABILITY				
	UMBRELLA FORM OTHER THAN UMBRELLA FORM WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
	OTHER				
C	PROPERTY & CONTR. EQUIPMENT	POLICY # PENDING	10/01/95	10/01/96	

DESCRIPTION OF OPERATIONS/LOCATIONS/SPECIAL ITEMS/SPECIAL ITEMS

CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSURED AS RESPECTS WORK PERFORMED FOR THEM BY THE NAMED INSURED.

CERTIFICATE HOLDER

ROADWAY EXPRESS
170 WOOD STREET
OAKLAND CA 94621

CANCELLATION:

10 days cancellation notice if non-payment of premium.

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

HEALTH CARE SERVICES

AGENCY
DAVID J. KEARIS, Agency Director



STD 4072
5E

RAFAT A. SHAHID, Assistant Agency Director
DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

HAZARDOUS MATERIALS RELEASE AND NOTIFICATION REPORT, (H&SC 25180.7) EMERGENCY RESPONSE

1 INFORMATION RECEIVED BY: JAMES SINGH ^{he's} probably from
DATE: 11/08 TIME: _____

2 INCIDENT LOCATION: Roadway Express 1708 WOOD ST. Roadway
CITY: OAKLAND ZIP: 94607

3 DATE OF INCIDENT: 11/8/96 TIME OF INCIDENT: 0830
4 REPORTED BY: Roadway Express AGENCY: _____
ADDRESS: 1708 WOOD ST. OAKLAND 94607 CITY, ZIP: _____
TELEPHONE: (510) 763-7521 CONTACT: Tom Giossi
PHONE: _____

5 TYPE OF DISCHARGE:
 Discharge from vehicle License Plate No. _____
 Manifest/Shipping Information:
 Abandoned Material Name: _____
City: _____ fixed facility
 Other (specify) _____ Address: 1708 WOOD ST, OAKLAND
Zip Code: 94607

6 ESTIMATED QUANTITY DISCHARGED: 2 GAL
QUANTITY THREATENED TO BE RELEASED: NONE

7 NATURE OF MATERIAL:
 Solid Liquid Gas Powder Granular
 Radioactive Other
Chemical Name: PAINT Common Name: PAINT

8 HAZARDOUS PROPERTIES: Corrosive Ignitable TOXIC
 Reactive Other

9 HAZARDOUS MATERIAL WAS RELEASED TO:
 Air Storm Drain San Francisco Bay Sanitary Sewer
 Other Natural Waterway (creek, lake, reservoir) Groundwater
 Groundsurface (soil, road, etc.) Other (specify) TRAILER

WEATHER CONDITIONS: CLEAR

NUMBER OF INJURED PERSONS REQUIRING HOSPITALIZATION: NONE
Names and Addresses of Hospitals Utilized: _____

12 PERSONS PRESENT AT SCENE:

Name: LYN RAY Affiliation: ROADWAY EXPRESS Phone: (510) 763-7921

13 RESPONSIBLE PARTY:

Name: ROADWAY EXPRESS Phone: (510) 763-7921
Address: 1708 WOOD ST. OAKLAND, CA 94607

14 EVIDENCE COLLECTED (samples, photographs, etc.)

PHOTOS

15 CLEAN-UP ACTIONS:

Names and Addresses of Persons Doing Clean-up:

ROADWAY EXPRESS 1708 WOOD ST. OAKLAND, CA 94607

Description of Clean-up Actions:

CONTAINED SPILL OF BOOMS; USED ADSORBENTS TO CLEAN UP SPILL. ALL MISC & PLACES IN NEARBY DRUMS & CABELLON

16 TIME INCIDENT CLOSED: 1700

17 ELAPSED TIME: 8 Hr.

18 DISCHARGE NOT TO BE NOTIFIED:

Unlikely to Cause Substantial Injury to Public Health & Safety
 Public Knowledge Ongoing Criminal Investigations
 Permitted Discharge Other

19 [] DISCHARGE TO BE NOTIFIED:

Factors Determining That This Hazardous Waste Discharge Or Potential Discharge Is Likely To Cause Substantial Injury To The Public Health Or Safety:

20 NOTIFICATION:

- Board of Supervisors
- Health Officer
- Alameda County Press Room
- Reporting Agency or Individual

By copy of this report to the above listed agencies and officials, we are hereby submitting this information on behalf of all designated employees of the Department of Environmental Health, according to section 25180.7, Health & Safety Code. The information submitted in this report is based upon the best available information at the time the report was completed.

Inspector's Name: _____ Date: _____
Inspector's signature: _____

Post-It brand fax transmittal memo 7671		# of pages >	2
To	<u>Tom</u>	From	<u>Tom</u>
Co.		Co.	<u>RE</u>
Dept.		Phone #	

ONE ENVIRONMENT

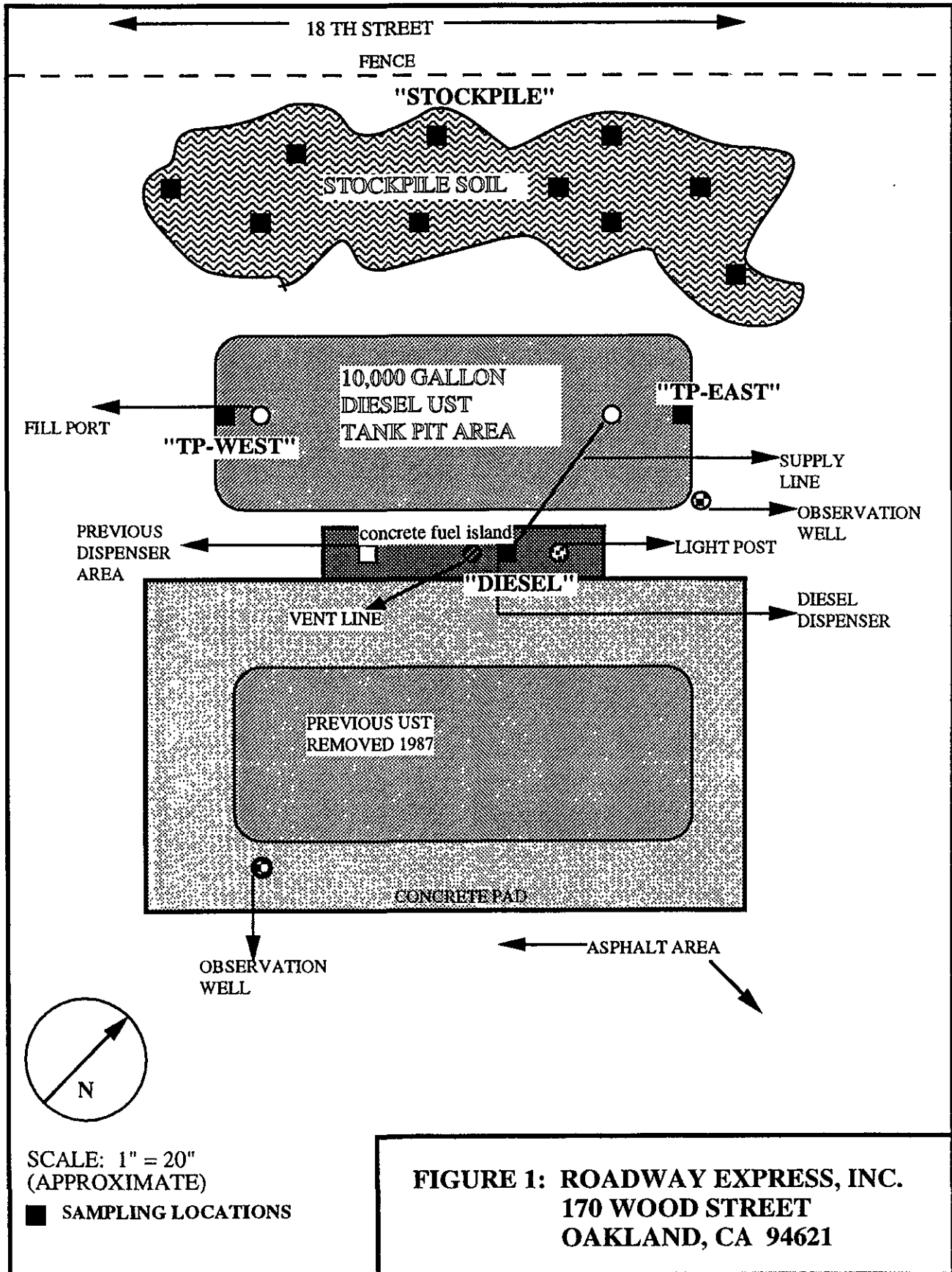


FIGURE 1: ROADWAY EXPRESS, INC.
170 WOOD STREET
OAKLAND, CA 94621

**ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PARKWAY, RM 250
ALAMEDA, CA 94502-6577
PHONE # 510/567-6700
FAX # 510/337-9335**

VENNITER CBERKE

Project Specialist

RECEIVED

Underground Storage Tank Closure Permit Application
Alameda County Division of Hazardous Materials
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

These closure/removal plans have been received and found to be a violation and as per any other the following of State and Local Health Laws. Changes to your plans must be filed by the Department and is subject to review by State and Local Health. The project must be completed and released for release of any required utility and other construction/alteration.
One copy of the approved plans must be on the job site available to all contractors and craftsmen involved in the project.
Any changes or alterations of these plans and specifications must be submitted to this Division prior to the start and during the construction of the project. Changes must be submitted at least 72 hours prior to the following day. See instructions.

Removal of Tanks and Piping
Sampling
Final Inspection

Issuance of a permit to operate, b) permit to close, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:

Contact Specialist:

*V. Venner 6-28-96
see comments p. 475.*

soil below UST and/or soil returned to excavation may need to be removed if contaminant concentrations are significant.

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

1. Name of Business ROADWAY EXPRESS 310-427-5462
Business Owner or Contact Person (PRINT) CHERLY MADDEN

2. Site Address 1708 WOOD STREET
City OAKLAND Zip 94607 Phone (510) 763-7921

3. Mailing Address SAME
City _____ Zip _____ Phone _____

4. Property Owner ROADWAY EXPRESS
Business Name (if applicable) SAME
Address 1077 GORGE BLVD
City, State AKRON OHIO Zip 44310

5. Generator name under which tank will be manifested
ROADWAY EXPRESS

EPA ID# under which tank will be manifested CAD980887418
~~CA 000 0191 2019 96~~
~~ENVIRONMENTAL PROTECTION~~
JUN 29 1996 PM 3:21

4072

6. Contractor H.B. COVEY, INC. ^{6-21-16:} *current + active*
Address 350 E. COMMERCIAL ST. Corp.
City POMONA *exp 2-28-98* Phone (909) 623-2502
License Type* A C61-D40 HAZ *LA County* ID# 2 69354

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board.

7. Consultant (if applicable) ONE ENVIRONMENT
Address 3736 BRATON AVE.

City, State LONG BEACH CA 90007 Phone (310) 427-5462

8. Main Contact Person for Investigation (if applicable)
Name SAME Title _____
Company _____
Phone _____

9. Number of underground tanks being closed with this plan 1
Length of piping being removed under this plan 20'
Total number of underground tanks at this facility (**confirmed with owner or operator) 1

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

**** Underground storage tanks must be handled as hazardous waste ****

a) Product/Residual Sludge/Rinsate Transporter

Name NIETO & SONS TRUCKING, INC. EPA I.D. No. CAT080016116

Hauler License No. 673912 License Exp. Date _____

Address P.O. BOX 760

City YORBA LINDA State CA Zip 92686

b) Product/Residual Sludge/Rinsate Disposal Site

Name NIETO & SONS TRUCKING, INC. EPA ID# CAT080016116

Address P.O. BOX 760

City YORBA LINDA State CA Zip 92686

DISC - Jen Paterson
says they're ok

c) Tank and Piping Transporter

Name NIETO & SONS TRUCKING, INC. EPA I.D. No. CAT080016116
Hauler License No. 673912 License Exp. Date _____
Address P.O. BOX 760 Neg # 0503
City YORBA LINDA State CA Zip 92686

d) Tank and Piping Disposal Site

Name CROSBY & OVERTON EPA I.D. No. CAD028409019
Address 1610 W. 17th STREET
City LONG BEACH State CA Zip 90813

11. Sample Collector

Name CHERYL MADDEN
Company ONE ENVIRONMENT
Address 170 WOOD STREET
City OAKLAND State CA Zip 94621 Phone (510) 763-7921

12. Laboratory

Name ENTECH ANALYTICAL LABS *ok*
Address 525 DEL REY AVE. SUITE E
City SUNNY VALE State CA Zip 94086
State Certification No. CAELAP#1364

13. Have tanks or pipes leaked in the past? Yes[] No[] Unknown[x]

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

REMOVE RESIDUAL PRODUCT

PURGING WITH DRY ICE

1.5 lb per 100 gal UST

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be permanently plugged.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
10,000 GALLONS	5/96 ? diesel	SOIL	1-2 FEET BELOW TANK INVERT ON BOTH SIDES. DISPENSER SAMPLE

One soil sample must be collected for every 20 linear feet of piping that is removed. A ground water sample must be collected if any ground water is present in the excavation.

Excavated/Stockpiled Soil

<p>Stockpiled Soil Volume (estimated)</p> <p>75 -100 TONS</p>	<p align="center">Sampling Plan</p> <p>COMPOSITE SAMPLES FROM STOCKPILE</p>
--	--

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

Will the excavated soil be returned to the excavation immediately after tank removal? [X] yes [] no [] unknown

If yes, explain reasoning TANK IS LOCATED IN HEAVY TRAFFIC AREA & STOCKPILE

WILL DAMAGE BUSINESS ACTIVITY

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from Alameda County. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling operations.

16. Chemical methods and associated detection limits to be used for analyzing samples:

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

17. Submit Site Health and Safety Plan (See Instructions)

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
<p>TPH DIESEL FUEL BTEX</p>	<p>3550</p>	<p>418-1, 8015/8020 8020 or 8240</p>	<p>.05</p>

18. Submit Worker's Compensation Certificate copy

Name of Insurer STATE FUND

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery.

The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business H. B. COVEY, INC.

Name of Individual BRET COVEY

Signature *Bret Covey*

Date 6-10-96

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business ROADWAY EXPRESS

Name of Individual _____

Signature _____

Date _____

FROM ALAMEDA CO EHS HAZ-OPS

510 337 9336

1996-06-28

10:52

#702 P.01/01

- 18. Submit Worker's Compensation Certif.
- 19. Submit Plot Plan *******(See Instructi.
- 20. Enclose Deposit (See Instructions)

Post-It™ brand fax transmittal memo 7071		# of pages
To	Bob Zimmer	From
Co.	Mann	Co.
Dept.		Phone #
Fax #		510-337-9335

- 21. Report any leaks or contamination to this office within 5 days of discovery. The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.
- 22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.
- 23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box B for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business H.A. COVEY, INC.

Name of Individual BRET COVEY

Signature [Signature] Date 6-10-96

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (circle one)

Name of Business ROADWAY EXPRESS

Name of Individual ROBERT E. ZIMMERMANN

Signature [Signature] Date 6/27/96

INSTRUCTIONS

General Instructions

- * Three (3) copies of this plan plus attachments and a deposit must be submitted to this Department.
- * Any cutting into tanks requires local fire department approval.
- * One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.
- * State of California Permit Application Forms A and B are to be submitted to this office. One Form A per site, one Form B for each removed tank.

Line Item Specific Instructions

2. SITE ADDRESS
Address at which closure is taking place.
5. EPA I.D. NO. under which the tanks will be manifested
EPA I.D. numbers may be obtained from the State Department of Toxic Substances Control, 916/324-1781.
6. CONTRACTOR
Prime contractor for the project.
10. STATE REGISTERED HAZARDOUS WASTE TRANSPORTERS/FACILITIES
 - a) All residual liquids and sludges are to be removed from tanks before tanks are inerted.
 - c) Tanks must be hauled as hazardous waste.
 - d) This is the place where tanks will be taken for cleaning.
15. TANK HISTORY AND SAMPLING INFORMATION

Use History - This information is essential and must be accurate. Include tank installation date, products stored in the tank, and the date when the tank was last used.

Material to be sampled - e.g. water, oil, sludge, soil, etc.

Location and depth of samples - e.g. beneath the tank a maximum of two feet below the native soil/backfill interface, side wall at the high water mark, etc.

16. CHEMICAL METHODS AND ASSOCIATED DETECTION LIMITS

See attached Table 2.

17. SITE HEALTH AND SAFETY PLAN

A site specific Health and Safety plan must be submitted. We advocate the site health and safety plan include the following items, at a minimum:

- a) The name and responsibilities of the site health and safety officer;
- b) An outline of briefings to be held before work each day to appraise employees of site health and safety hazards;
- c) Identification of health and safety hazards of each work task. Include potential fire, explosion, physical, and chemical hazards;
- d) For each hazard, identify the action levels (contaminant concentrations in air) or physical conditions which will trigger changes in work habits to ensure workers are not exposed to unsafe chemical levels or physical conditions;
- e) Description of the work habit changes triggered by the above action levels or physical conditions;
- f) Frequency and types of air and personnel monitoring - along with the environmental sampling techniques and instrumentation - to be used to detect the above action levels. Include instrumentation maintenance and calibration methods and frequencies;
- g) Confined space entry procedures (if applicable);
- h) Decontamination procedures;
- i) Measures to be taken to secure the site, excavation and stockpiled soil during and after work hours (e.g. barricades, caution tape, fencing, trench plates, plastic sheeting, security guards, etc.);
- j) Spill containment/emergency/contingency plan. Be sure to include emergency phone numbers, the location of the phone nearest the site, and directions to the hospital nearest the site;
- k) Documentation that all site workers have received the appropriate OSHA approved trainings and participate in appropriate medical surveillance per 29 CFR 1910.120; and
- l) A page for employees to sign acknowledging that they have read and will comply with the site health and safety plan.

The safety plan must be distributed to all employees and contractors working in hazardous waste operations on site. A complete copy of the site health and safety plan along with any standard operating procedures shall be on site and accessible at all times.

NOTE: These requirements are excerpts from 29 CFR Part 1910.120(b)(4), Hazardous Waste Operations and Emergency Response; Final Rule, March 6, 1989. Safety plans of certain underground tank sites may need to meet the complete requirements of this Rule.

19. PLOT PLAN

The plan should consist of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale;
- b) North Arrow;
- c) Property Lines;
- d) Location of all Structures;
- e) Location of all relevant existing equipment including tanks and piping to be removed and dispensers;
- f) Streets;
- g) Underground conduits, sewers, water lines, utilities;
- h) Existing wells (drinking, monitoring, etc.);
- i) Depth to ground water; and
- j) All existing tank(s) and piping in addition to the tank(s) being removed.

20. DEPOSIT

A deposit, payable to "County of Alameda" for the amount indicated on the Alameda County Underground Storage Tank Fee Schedule, must accompany the plans.

21. Blank Unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from this office or from the San Francisco Bay Regional Water Quality Control Board (510/286-1255). Larger quantities may be obtained directly from the State Water Resources Control Board at (916) 739-2421.

22. TANK CLOSURE REPORT

The tank closure report should contain the following information:

- a) General description of the closure activities;
- b) Description of tank, fittings and piping conditions. Indicate tank size and former contents; note any corrosion, pitting, holes, etc.;

- c) Description of the excavation itself. Include the tank and excavation depth, a log of the stratigraphic units encountered within the excavation, a description of root holes or other potential contaminant pathways, the depth to any observed ground water, descriptions and locations of stained or odor-bearing soil, and descriptions of any observed free product or sheen;
- d) Detailed description of sampling methods; i.e. backhoe bucket, drive sampler, bailer, bottle(s), sleeves
- e) Description of any remedial measures conducted at the time of tank removal;
- f) To-scale figures showing the excavation size and depth, nearby buildings, sample locations and depths, and tank and piping locations. Include a copy of the plot plan prepared for the Tank Closure Plan under item 19;
- g) Chain of custody records;
- h) Copies of signed laboratory reports;
- i) Copies of "TSDF to Generator" Manifests for all hazardous wastes hauled offsite (sludge, rinsate, tanks and piping, contaminated soil, etc.); and
- j) Documentation of the disposal of/and volume and final destination of all non-manifested contaminated soil disposed offsite.

FAX

Date 3/3/97

Number of pages including cover sheet 8

TO: Jennifer Eberle
Alameda Co.

FROM: Cheryl Madden
One Environment
240 Termino Avenue
Long Beach, CA 90803

Phone 510-567-6761
Fax
Phone 510-337-9335

Phone 310-987-1096
Fax 310-987-9120
Phone

CC:

REMARKS: Urgent For your review Reply ASAP Please Comment

Jennifex.

Attached are copies of signed Manifests with soil tonnage. Let ME know if you have any questions.

Thank you.

Cheryl

Altamont Landfill and Resource Recovery Facility
10840 Altamont Pass Road
Livermore, California 94550
510/455-6349 • FAX: 510/455-7381



A Waste Management Company

FAX TRANSMITTAL SHEET
FROM THE DESK OF NOEMIA VIEIRA
PHONE# (510) 455-7317
FAX # (510) 455-7383

DATE 2-27-99
ATTN Cherryl Madon
FAX 310-989-9120

NUMBER OF PAGES INCLUDING COVER SHEET 7

MESSAGE _____

26.39 TONS

450611

3528

Lutrel TRUCKING, INC.

6315 SNOW ROAD
BAKERSFIELD, CALIFORNIA 93308

Phone (805) 399-0246 • FAX (805) 399-0311

NON-HAZARDOUS MATERIALS DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Roadway Express, Inc.
ADDRESS 1700 Wood St.
CITY, STATE, ZIP OAKLAND, CA 94607

PHONE NO. 510 763-7921

CONTAINERS: No. _____ VOLUME _____ WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

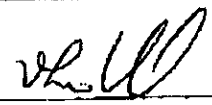
DESCRIPTION Diesel Contaminated Soil GENERATING PROCESS UST Removal
COMPONENTS OF WASTE PPM % COMPONENTS OF WASTE PPM %

- 1. N/A _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____
- 7. _____
- 8. _____

PROPERTIES: pH _____ SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS:

THE GENERATOR CERTIFIES THAT THE MATERIALS DESCRIBED ARE 100% NON-HAZARDOUS


Thomas Gordon  10/30/96
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Lutrel Trucking, Inc.
ADDRESS 6315 Snow Rd.
CITY, STATE, ZIP Bakersfield, CA 93308
PHONE NO. (805) 399-8246
TRUCK, UNIT, I.D. NO. 25

SERVICE ORDER NO. _____

PICK UP DATE 10/30/96

David L. Marcan  10/30/96
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Waste Management of Alameda Co.
ADDRESS 1840 Attainment Pass Rd.
CITY, STATE, ZIP Livermore, CA 94550
PHONE NO. 510 449-6349

DISPOSAL METHOD LANDFILL OTHER _____

F.P.C. 10-30-96
TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	
C/O		RT/CO	HWDF NONE	

DISCREPANCY

15.40 Tons

Profile # 450 611

3529

Lutrel TRUCKING, INC.

6315 SNOW ROAD,
BAKERSFIELD, CALIFORNIA 93308

Phone (805) 399-0246 • FAX (805) 399-0311

NON-HAZARDOUS MATERIALS DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Roadway Express, Inc.
 ADDRESS 1708 Wood St.
 CITY, STATE, ZIP OAKland, CA 94607 PHONE NO 510, 763-7721

CONTAINERS: No _____ VOLUME _____ WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

DESCRIPTION Diesel Contaminated Soil GENERATING PROCESS UST Removal

COMPONENTS OF WASTE	PPM	%	COMPONENTS OF WASTE	PPM	%
1 <u>n/a</u>			5		
2			6		
3			7		
4			8		

PROPERTIES: pH _____ SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: _____

THE GENERATOR CERTIFIES THAT THE MATERIALS DESCRIBED ARE 100% NON-HAZARDOUS

THOMAS GEDSON [Signature] 10/30/96
 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TRANSPORTER

NAME Lutrel Trucking, Inc.
 ADDRESS 6315 Snow Rd SERVICE ORDER NO _____
 CITY, STATE, ZIP Bakersfield, CA 93308 PICK UP DATE 10-30-96
 PHONE NO 805, 399-0246
 TRUCK UNIT ID NO 256-714 David E. Burks David E. Burks
 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

TSD FACILITY

NAME Waste Management of Alameda County DISPOSAL METHOD LANDFILL OTHER _____
 ADDRESS 10840 Altamont Pass Rd.
 CITY, STATE, ZIP Livermore, CA 94550
 PHONE NO (510) F.P. 10-30-96
 TYPED OR PRINTED FULL NAME & SIGNATURE DATE

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	
C/D		RT/CD	HWDF NONE	

14.91 TONS

3525

Labret TRUCKING, INC.

6315 SNOW ROAD
BAKERSFIELD, CALIFORNIA 93308

Phone (805) 399-0246 • FAX (805) 399-0311

NON-HAZARDOUS MATERIALS DATA FORM

TO BE COMPLETED BY GENERATOR

NAME Roadway Express, Inc.
 ADDRESS 1700 Wood St.
 CITY, STATE, ZIP DAK LAKE, CA 94607 PHONE NO. 514 763-7921

CONTAINERS: No _____ VOLUME _____ WEIGHT _____

TYPE: TANK TRUCK DUMP TRUCK DRUMS CARTONS OTHER _____

DESCRIPTION Direct Contaminated Soil GENERATING PROCESS U-T Removal

COMPONENTS OF WASTE	PPM	%	COMPONENTS OF WASTE	PPM	%
1. <u>N/A</u>			5		
2. _____			6		
3. _____			7		
4. _____			8		

PROPERTIES: pH _____ SOLID LIQUID SLUDGE SLURRY OTHER _____

HANDLING INSTRUCTIONS: _____

THE GENERATOR CERTIFIES THAT THE MATERIALS DESCRIBED ARE 100% NON-HAZARDOUS

TYPED OR PRINTED FULL NAME & SIGNATURE

DATE

TRANSPORTER

NAME All-Waste
 ADDRESS 12475 Llagas SERVICE ORDER NO. _____
 CITY, STATE, ZIP SAN MARTIN, CA PICK UP DATE 12/30/96
 PHONE NO. (805) 321-1030 4986
 TRUCK UNIT, ID NO. 986 TYPED OR PRINTED FULL NAME & SIGNATURE _____ DATE _____

TSD FACILITY

NAME Waste Management of Alameda Co DISPOSAL METHOD LANDFILL OTHER _____
 ADDRESS 10840 Altamont Pass Rd
 CITY, STATE, ZIP Livermore, CA 94550
 PHONE NO. 510 447-7543

TYPED OR PRINTED FULL NAME & SIGNATURE DATE _____

GEN	OLD/NEW	L	A	TONS
TRANS		S	B	
C/O		RT/CD	HWDF NONE	DISCREPANCY

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19.14 TONS

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C.A.L.0000.19.12.5	Manifest Document No. 0004	2. Page 1 of 1
3. Generator's Name and Mailing Address Roadway Express, Inc. 1700 Wood Street OAKLAND, CA 94607				
4. Generator's Phone (510) 763-7121				
5. Transporter 1 Company Name LUREL TRUCKING, INC. BAKERSFIELD, CA	6. US EPA ID Number			
7. Transporter 2 Company Name All-WASTE 12475 Llagas, San Martin, CA	8. US EPA ID Number			
9. Designated Facility Name and Site Address ALTMONT LANDFILL 10840 ALTAMONT PASS RD. LIVERMORE, CA 94550		10. US EPA ID Number C.A.D.9.8 1 3 8 2.7 3.2	A. Transporter's Phone (805) 399-0246	B. Transporter's Phone (800) 321-1030
			C. Facility's Phone 510-449-6349	
11. Waste Shipping Name and Description a. Non-Hazardous (RCRA) Solid Waste		12. Containers No. Type 0.0.1	13. Total Quantity	14. Unit Wt/Vol
D. Additional Descriptions for Materials Listed Above Diesel Contaminated Soil From UST Removal.		E. Handling Codes for Wastes Listed Above WEAR PROTECTIVE EQUIPMENT.		
15. Special Handling Instructions and Additional Information PROFILE # 452611 CUSTOMER NAME Roadway Express, Inc.				
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting process discharges of Hazardous Waste				
Printed/Typed Name Thomas Giddish		Signature	Month Day Year 10 30 96	
17. Transporter 1 Acknowledgment of Receipt of Materials Printed/Typed Name		Signature	Month Day Year	
18. Transporter 2 Acknowledgment of Receipt of Materials Printed/Typed Name		Signature	Month Day Year	
19. Discrepancy Indication Space				
20. Facility Owner or Operator Certification of receipt of waste materials covered by this manifest except as noted in item 19				
Printed/Typed Name Bob Thompson		Signature	Month Day Year 10 30 96	

ORIGINAL - RETURN TO GENERATOR

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20.09 TONS

NON-HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAL-000019125	Manifest Document No. 0026	R. Page 1 of 1
3. Generator's Name and Mailing Address Roadway Express Inc. 1708 Wood Street OAKLAND, CA 94607				
4. Generator's Phone (510) 763-7121				
5. Transporter 1 Company Name Lute Trucking, Inc. (Bakersfield, CA)	6. US EPA ID Number			
7. Transporter 2 Company Name All-Waste (San Martin, CA)	8. US EPA ID Number			
9. Designated Facility Name and Site Address ALTAMONT LANDFILL 10840 ALTAMONT PASS RD. LIVERMORE, CA 94550	10. US EPA ID Number ICAD981382732	A. Transporter's Phone (805) 399-2246	B. Transporter's Phone (800) 321-1030	C. Facility's Phone 510-449-6349
11. Waste Shipping Name and Description * Non-Hazardous (RCRA) Solid Waste	12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	
	001			
D. Additional Descriptions for Materials Listed Above Diesel Contaminated Soil From UST Removal.		E. Handling Codes for Wastes Listed Above WEAR PROTECTIVE EQUIPMENT.		
15. Special Handling Instructions and Additional Information PROFILE # 450411 CUSTOMER NAME Roadway Express, Inc.				
16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste				
Printed/Typed Name Thomas Giddosh		Signature <i>[Signature]</i>	Month Day Year 10 30 96	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name David L. Maguire		Signature <i>[Signature]</i>	Month Day Year 10 30 96	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name:		Signature	Month Day Year	
19. Discrepancy Indication Space				
20. Facility Owner or Operator. Certification of receipt of waste materials covered by this manifest except as noted in item 15				
Printed/Typed Name <i>[Signature]</i>		Signature Bob Thompson	Month Day Year 10 30 96	

GENERATOR

TRANSPORTER

FACILITY

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17.2 TONS

Lutred L59

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. **C.A.L.0.0.0.0.1.9.1.2.5** Manifest Document No. **0005** 2. Page 1 of 1

3. Generator's Name and Mailing Address **Roadway Express Inc. 1708 Wood Street OAKLAND, CA 94607**

4. Generator's Phone (510) 763-7921

5. Transporter 1 Company Name **Lutred Trucking, Inc. 6315 Snow Rd Bakersfield, CA** 8. US EPA ID Number

7. Transporter 2 Company Name **All-WASTE 12475 Llanos, San Martin, CA** 10. US EPA ID Number

9. Designated Facility Name and Site Address **ALTMONT LANDFILL 10840 ALTAMONT PASS RD. LIVERMORE, CA 94550** C.A.D.9.8.1.3.8.2.7.3.2

A. Transporter's Phone **(805) 399-0246**
 B. Transporter's Phone **(800) 321-1030**
 C. Facility's Phone **510-449-6349**

11. Waste Shipping Name and Description	12. Containers		13. Total Quantity	14. Unit Wt/Val
	No	Type		
a. NON-HAZARDOUS (RCRA) SOLID WASTE	001			
b.				
c.				
d.				

D. Additional Descriptions for Materials Listed Above **Diesel Contaminated Soil From UST Removal.** E. Handling Codes for Wastes Listed Above **WEAR PROTECTIVE EQUIPMENT.**

15. Special Handling Instructions and Additional Information **PROFILE # 450611**
CUSTOMER NAME Roadway Express, Inc.

16. GENERATOR'S CERTIFICATION: I certify the materials described above on this manifest are not subject to federal regulations for reporting proper disposal of Hazardous Waste

Printed/Typed Name **Thomas Giddens** Signature *[Signature]* Month **10** Day **30** Year **96**

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name **Tom Masegosa** Signature *[Signature]* Month **10** Day **30** Year **96**

18. Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____

19. Discrepancy Indication Space

20. Facility Owner or Operator: Certification of receipt of waste materials covered by this manifest except as noted in item 19

Printed/Typed Name **Bob Thompson** Signature *[Signature]* Month **10** Day **20** Year _____

ORIGINAL - RETURN TO GENERATOR

TABLE #2
RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR
UNDERGROUND TANK LEAKS

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u>		<u>WATER ANALYSIS</u>	
Unknown Fuel	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Leaded Gas	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	BTX&E	8020 OR 8240	BTX&E	602 or 624
	TPH AND BTX&E	8260	TOTAL LEAD AA	
	TOTAL LEAD AA			
	-----Optional-----			
	TEL	DHS-LUFT	TEL	DHS-LUFT
	EDB	DHS-AB1803	EDB	DHS-AB1803
Unleaded Gas	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Diesel, Jet Fuel and Kerosene	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Fuel/Heating Oil	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Chlorinated Solvents	CL HC	8010 or 8240	CL HC	601 or 624
	BTX&E	8020 or 8240	BTX&E	602 or 624
	CL HC AND BTX&E	8260	CL HC AND BTX&E	8260
Non-chlorinated Solvents	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602 or 624
	TPH AND BTX&E	8260	TPH and BTX&E	8260
Waste and Used Oil or Unknown (All analyses must be completed and submitted)	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	TPH AND BTX&E	8260		
	O & G	5520 D & F	O & G	5520 B & F
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	CL HC	8010 or 8240	CL HC	601 or 624
	ICAP or AA TO DETECT METALS: Cd, Cr, Pb, Zn, Ni			
	METHOD 8270 FOR SOIL OR WATER TO DETECT:			
	PCB*		PCB	
	PCP*		PCP	
	PNA		PNA	
	CREOSOTE		CREOSOTE	

* If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)

Reference: Tri-Regional Board Staff Recommendations for Preliminary Evaluation and Investigation of Underground Tank Sites, 10 August 1990

EXPLANATION FOR TABLE #2: MINIMUM VERIFICATION ANALYSIS

1. OTHER METHODOLOGIES are continually being developed and as methods are accepted by EPA or DHS, they also can be used.
2. For DRINKING WATER SOURCES, EPA recommends that the 500 series for volatile organics be used in preference to the 600 series because the detection limits are lower and the QA/QC is better.
3. APPROPRIATE STANDARDS for the materials stored in the tank are to be used for all analyses on Table #2. For instance, seasonally, there may be five different jet fuel mixtures to be considered.
4. To AVOID FALSE POSITIVE detection of benzene, benzene-free solvents are to be used.
5. TOTAL PETROLEUM HYDROCARBONS (TPH) as gasoline (G) and diesel (D) ranges (volatile and extractible, respectively) are to be analyzed and characterized by GCFID with a fused capillary column and prepared by EPA method 5030 (purge and trap) for volatile hydrocarbons, or extracted by sonication using 3550 methodology for extractable hydrocarbons. Fused capillary columns are preferred to packed columns; a packed column may be used as a "first cut" with "dirty" samples or once the hydrocarbons have been characterized and proper QA/QC is followed.
6. TETRAETHYL LEAD (TEL) analysis may be required if total lead is detected unless the determination is made that the total lead concentration is geogenic (naturally occurring).
7. CHLORINATED HYDROCARBONS (CL HC) AND BENZENE, TOLUENE, XYLENE AND ETHYLBENZENE (BTX&E) are analyzed in soil by EPA methods 8010 and 8020 respectively, (or 8240) and in water, 601 and 602, respectively (or 624).
8. OIL AND GREASE (O & G) may be used when heavy, straight chain hydrocarbons may be present. Infrared analysis by method 418.1 may also be acceptable for O & G if proper standards are used. **Standard Methods" 17th Edition, 1989, has changed the 503 series to 5520.**
9. **PRACTICAL QUANTITATION REPORTING LIMITS are influenced by matrix problems and laboratory QA/QC procedures. Following are the Practical Quantitation Reporting Limits:**

	<u>SOIL PPM</u>	<u>WATER PPB</u>
TPH G	1.0	50.0
TPH D	1.0	50.0
BTX&E	0.005	0.5
O & G	50.0	5,000.0

Based upon a Regional Board survey of Department of Health Services Certified Laboratories, the Practical Quantitation Reporting Limits are attainable by a majority of laboratories with the exception of diesel fuel in soils. The Diesel Practical Quantitation Reporting Limits, shown by the survey, are:

ROUTINE	MODIFIED PROTOCOL
\leq 10 ppm (42%)	\leq 10 ppm (10%)
\leq 5 ppm (19%)	\leq 5 ppm (21%)
\leq 1 ppm (35%)	\leq 1 ppm (60%)

When the Practical Quantitation Reporting Limits are not achievable, an explanation of the problem is to be submitted on the laboratory data sheets.

- LABORATORY DATA SHEETS are to be signed and submitted and include the laboratory's assessment of the condition of the samples on receipt including temperature, suitable container type, air bubbles present/absent in VOA bottles, proper preservation, etc. The sheets are to include the dates sampled, submitted, prepared for analysis, and analyzed.
- IF PEAKS ARE FOUND, when running samples, that do not conform to the standard, laboratories are to report the peaks, including any unknown complex mixtures that elute at times varying from the standards. Recognizing that these mixtures may be contrary to the standard, they may not be readily identified; however, they are to be reported. At the discretion of the LIA or Regional Board the following information is to be contained in the laboratory report:

The relative retention time for the unknown peak(s) relative to the reference peak in the standard, copies of the chromatogram(s), the type of column used, initial temperature, temperature program is C/minute, and the final temperature.

- REPORTING LIMITS FOR TPH are: gasoline standard \leq 20 carbon atoms, diesel and jet fuel (kerosene) standard \leq 50 carbon atoms. It is not necessary to continue the chromatography beyond the limit, standard, or EPA/DHS method protocol (whichever time is greater).

EPILOGUE

ADDITIVES: Major oil companies are being encouraged or required by the federal government to reformulate gasoline as cleaner burning fuels to reduce air emissions. MTBE (Methyl-tertiary butyl ether), ETHANOL (ethyl alcohol), and other chemicals may be added to reformulate gasolines to increase the oxygen content in the fuel and thereby decrease undesirable emissions (about four percent with MTBE). MTBE and ethanol are, for practical purposes, soluble in water. The removal from the water column will be difficult. Other compounds are being added by the oil companies for various purposes. The refinements for detection and analysis for all of these additives are still being worked out. If you have any questions about the methodology, please call your Regional Board representative.