

HK2, INC./SEMCO

1751 LESLIE STREET • SAN MATEO, CA 94402 • (415) 572-8033 • (415) 572-9734 FAX

GENERAL ENGINEERING & ENVIRONMENTAL CONTRACTORS LICENSE NO. 719103 (A, B, C57, C61, D40, HAZ, ASB)

October 10, 1996

ref: 96-0236

Juliet Shin
Alameda County
Department of Environmental Health
1131 Harbor Bay Parkway
Alameda, California 94502
(510) 567-6700 phone
(510) 337-9335 fax


re: Home heating oil tank removal at 845 Pacific Ave., Alameda, California.

Dear Ms. Juliet Shin,

Enclosed is the tank removal report for the site referenced above. Please let us know if you have any questions.

Sincerely,

HK2, Inc./SEMCO


Mark Dysert
Environmental Specialist

cc: William Sheehan

Tank Removal Report

Site Location:

**845 Pacific Ave.
Alameda, California**

Prepared For:

**William Sheehan
1236 Bay Street
Alameda, California 94501
(510) 522-0978 phone**

Submitted To:

**Juliet Shin
Alameda County Department of Environmental Health
1131 Harbor Bay Parkway
Alameda, California 94502
(510) 567-6700 phone
(510) 337-9335 fax**

Prepared By:

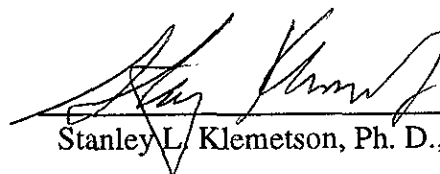
**HK2, Inc./SEMCO
1751 Leslie Street
San Mateo, California 94402
(415) 572-8033 phone
(415) 572-9734 fax**

Job # 96-0236

CERTIFICATION

This report was prepared by HK2, Inc./SEMCO under the professional direction and review of the person whose name and seal are shown below.

The recommendations and professional opinions presented herein, are within the limits prescribed by the client and were prepared in accordance with generally accepted professional engineering and industrial hygiene practices. There is no other warranty either expressed or implied.



Stanley L. Klemetson, Ph. D., P.E.



Tank Removal Report
845 Pacific Ave.
Alameda, California

SEMCO/HK2, Inc. was contracted to remove one (1) 750 home heating oil tank (UST) from the residential site located at 845 Pacific Ave., Alameda, California. This report covers the tank removal and soil sampling activities.

On September 18, 1996 HK2, Inc. removed the concrete surface in order to access the tank. The soil was removed from the top and along one side of the tank and stockpiled on site. The tank was inerted with 100 lbs. of solid carbon dioxide (dry ice) until acceptable levels of oxygen and lower explosive limits were reached to meet safety requirements.

Captain Steve McKinnley of the Alameda Fire Department was on site to verify the tank readings and witness the removal, loading and sampling activities.

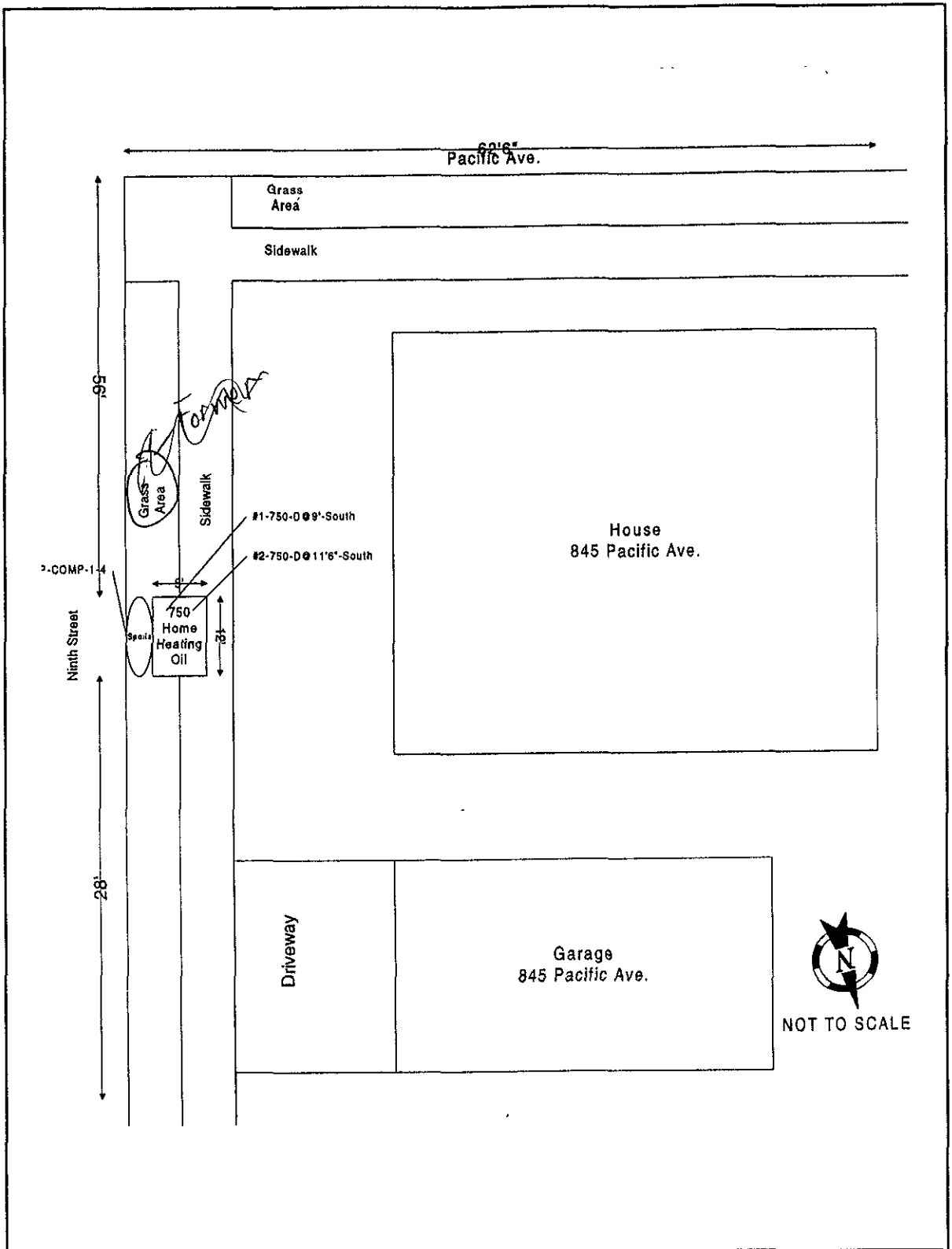
The tank had some small holes ranging in size from 1/8"-1/4". The soil had odor and discoloration. The most apparent presence of hydrocarbons was in the south end of the excavation at the fill end of the tank.

The tank was loaded onto Dexanna Ltd. and transported to Erickson, Inc. for disposal under manifest number 95269995.

Three (3) soil samples were collected. Sample #1-750-D@9'-South was collected from the bottom of the south end of the excavation 9' below ground surface (bgs), approximately 2' below the former tank in native sandy soil. Sample #2-750-D@11'6"-South was collected from the bottom of the south end of the excavation 11'6" bgs, approximately 4.5' below the former tank in native sandy soil. The third sample, SP-COMP-1-4, a four (4) tube composite sample was collected from the excavated material.

Soil samples were collected in clean brass tubes, which were sealed with Teflon tape, pre-formed plastic end caps and masking tape. The samples were properly labeled, entered onto a chain of custody and placed in an iced cooler for transportation to North State Environmental for the analysis of Total Petroleum Hydrocarbons as Diesel (TPH-D), Benzene, Toluene, Ethylbenzene, Xylenes (BTEX), ICP 5 Metals and RCI. Analytical results are presented in the Appendix.

This report was prepared from field technicians worksheets, inspector's field notes and analytical data pertaining to this site.



Site Layout and Sampling Locations

Appendix



North State Environmental
 Chemical Waste Disposal · Trucking · Consulting

CERTIFICATE OF ANALYSIS

Lab No:	96-677	Date Sampled:	09-18-96
Client:	SFMCO/H2K	Date Extracted:	09-20-96
Project:	Sheehan, 845 Pacific Avenue #96-0236	Date Analyzed:	09-21-96

Benzene, Toluene, Ethylbenzene and Xylenes by Method 8020
 Diesel range hydrocarbons by EPA method 8015M
 Reactive Cyanide by SW-846 Chapter 7, Section 7.3.3.2
 Reactive Sulfide by SW-846 Chapter 7, Section 7.3.4.2
 pH of Soil Wastes by Method 9045
 Flashpoint by Method 1010 Closed Cup Pensky-Martens

SAMPLE NO	CLIENT ID	ANALYTE	METHOD	RESULT
96-677-01	#1-750-D @ 9'- South SOIL	Benzene	8020	3.6 mg/Kg
		Toluene	8020	1.4 mg/Kg
		Ethylbenzene	8020	1.9 mg/Kg
		Xylenes	8020	7.5 mg/Kg
		Diesel	8015M	135 mg/Kg
96-677-02	#2-750-D @ 11' 6"-South SOIL	Benzene	8020	3.2 mg/Kg
		Toluene	8020	2.5 mg/Kg
		Ethylbenzene	8020	2.0 mg/Kg
		Xylenes	8020	13 mg/Kg
		Diesel	8015M	800 mg/Kg
		Nickel	7520	40 mg/Kg
		Zinc	7950	23 mg/Kg
		Chromium	7190	39 mg/Kg
		Cadmium	7130	ND
		Lead	7420	6 mg/Kg
		Cyanide	CH7 7.3.3.2	ND<20mg/Kg
		Sulfide	CH7 7.3.4.2	ND<10mg/Kg
		pH	9045	7.24
Flashpoint	1010	> 200 F		
96-677-03	SP-COMP-1-4 COMPOSITE SOIL	Benzene	8020	ND
		Toluene	8020	ND
		Ethylbenzene	8020	ND
		Xylenes	8020	ND
		Diesel	8015M	490 mg/Kg



North State Environmental
Chemical Waste Disposal • Trucking • Consulting

CERTIFICATE OF ANALYSIS

Lab No:	96-677	Date Sampled:	09-18-96
Client:	SEMCO/112K	Date Extracted:	09-20-96
Project:	Sheehan, 845 Pacific Avenue #96-0236	Date Analyzed:	09-21-96

Quality Control/Quality Assurance Summary-Soil


Analyte	Method	Reporting Limit	Blank	MS/MSD Recovery	RPD
Benzene	8020	0.005 mg/Kg	ND	88	22
Toluene	8020	0.005 mg/Kg	ND	96	7
Ethylbenzene	8020	0.005 mg/Kg	ND	108	4
Xylenes	8020	0.010 mg/Kg	ND	81	32
Diesel	8015M	1 mg/Kg	ND	99	8
Nickel	7520	5.0 mg.Kg	ND	100/100	0
Zinc	7950	1.0 mg/Kg	ND	90/89	1
Chromium	7190	5.0 mg/Kg	ND	75/76	1
Cadmium	7130	2.0 mg/Kg	ND	101/100	1
Lead	7420	2.0 mg/Kg	ND	101/101	0

Cyanide and Sulfide Check Spike stds were run. Xylene Flashpoint check was run.

pH meter was calibrated using 3 buffer solutions from Spectrum Chemical Co., at pH 4, 7, and 10.

ELAP Certificate NO: 1753

Reviewed and Approved:


John A. Murphy, Laboratory Director

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 09/30/96	CASE # #96-0236	SIGNED _____ DATE _____

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Mark Dyser	PHONE (415) 572-8033	SIGNATURE 	
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input checked="" type="checkbox"/> OTHER contractor	COMPANY OR AGENCY NAME SEMCO/HK2, Inc.		
	ADDRESS 1751 Leslie St STREET San Mateo CITY California STATE 94402 ZIP			

RESPONSIBLE PARTY	NAME William Sheehan <input type="checkbox"/> UNKNOWN	CONTACT PERSON SAME	PHONE (510) 522-0978
	ADDRESS 1236 Bay St. STREET Alameda CITY California STATE 94501 ZIP		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Residence	OPERATOR N/A	PHONE () N/A
	ADDRESS 845 Pacific Ave STREET Alameda CITY Alameda COUNTY ZIP CROSS STREET Ninth St.		

IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Department of Environmental Health	AGENCY NAME Alameda County Department of Environmental Health	CONTACT PERSON Juliet Shin	PHONE (510) 567-6763
	REGIONAL BOARD Regional Water Quality Board		CONTACT PERSON Diane Mims	PHONE (510) 286-1255

SUBSTANCES INVOLVED	(1) NAME Home Heating Oil	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2)	<input type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED 09/18/96	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 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 type="checkbox"/> OTHER		
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE _____			

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
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CASE TYPE	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)
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CURRENT STATUS	CHECK ONE ONLY <input checked="" type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input 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		
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REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS)		
	<input checked="" type="checkbox"/> OTHER (OT) <u>NO ACTION TAKEN</u>		

COMMENTS	_____ _____ _____
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6. Contractor HKA Inc / SEMCO
Address 1751 Lueslie St.
City San Mateo, CA 94402 Phone _____
License Type A, B, C61/040, C57/AZ ID# 719103

*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) N/A
Address _____
City, State _____ Phone _____

8. Main Contact Person for Investigation (if applicable)
Name Chuck Kiper Title President
Company HKA, INC / SEMCO
Phone 415-572-8033

9. Number of underground tanks being closed with this plan 1
Length of piping being removed under this plan Unknown
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 Evergreen Environmental EPA I.D. No CAD980695761
Hauler License No. 0242 License Exp. Date 7/97
Address 6880 Smith Ave.
City Newark State CA Zip 94560

b) Product/Residual Sludge/Rinsate Disposal Site
Name Evergreen Environmental EPA ID# CAD980695761
Address 6880 Smith Avenue
City Newark State CA Zip 94560

c) Tank and Piping Transporter

Name Dexamma, LTD EPA I.D. No. CAD982438566
Hauler License No. 2883 License Exp. Date 4/30/97
Address 3104 Athens Ct.
City Concord State CA Zip 94519

d) Tank and Piping Disposal Site

Name Erickson, CMC. EPA I.D. No. CAD009466392
Address 255 Parr Blvd.
City Richmond State CA Zip 94801

11. Sample Collector

Name Chuck Kiper
Company HKA, Inc / SEMCO
Address 1751 Leslie St.
City SAN MATEO State CA Zip 94402 Phone 415-572-8033

12. Laboratory

Name No. State ENVIRONMENTAL
Address 98 So. Spruce St.
City So. SAN FRANCISCO State CA Zip 94080
State Certification No. 1753

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:

High pressure hot water detergent wash,
20 lbs per 1000 gallons dry ice

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)		
250 gallon	Heating Oil	Soil Water (if applicable)	2 feet below one end of UST into Native Soil @ Soil/water interface

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)	Sampling Plan
<p>Est - 5 yds - if soil is to be reused on site, one discrete sample every 20 cu. yds is required, if soil is to be disposed off site one composite per every 50 yds is required</p>	<p>Soil Samples taken from tank excavation will be collected, placed in glass tubes, sealed w/teflon tape, caps & placed on ice, transported to a State Certified Lab under Chain of Custody & analyzed for constituents of the tank.</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? [] yes [] no [] unknown

If yes, explain reasoning _____

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>Fuel/Heating Oil</p>	<p>Soil { TPH-D BTEX</p> <p>Water TPH-D BTEX</p>	<p>3550 8020 or 8240</p> <p align="center">↓</p>	<p>1 1 ppm 0.005 to 0.5 ppm</p> <p>0.5 ppB 50 ppB</p>

18. Submit Worker's Compensation Certificate copy

Name of Insurer California Comp

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 HKS, INC / SEMCO

Name of Individual Rhonda Reames-Kiper

Signature Rhonda Reames-Kiper Date _____

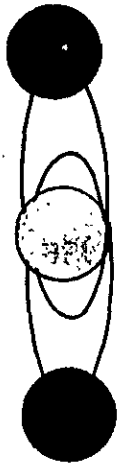
PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business _____

Name of Individual William Sheehan

Signature William Sheehan Date _____

by Rhonda Reames-Kiper



Abel Carbonic

CUSTOMER NUMBER	PURCHASE ORDER NO.	DATE	DELIVERY NUMBER
	176-0236	8/7/71	9-954162

BY ACCEPTING THIS ORDER, CUSTOMER AGREES TO ALL OF THE TERMS AND CONDITIONS SET FORTH HEREIN, INCLUDING THOSE PRINTED ON THE REVERSE SIDE.

NAME	ACCEPTED BY:
HVZ	<i>[Signature]</i>
SHIPPED TO	
845 Pacific Ave Akwada	

20 SOLID	21 HALF	22 SLICES	23 PELLETS	24 AIRPORT	29 WET ICE	
UNIT	DESCRIPTION				CODE	POUNDS
	DRY ICE	ORM-A	UN1845		23	50

[Handwritten signature]

This Memorandum

is an acknowledgment that a Bill of Lading has been issued and is not the Original Bill of Lading, nor a copy or duplicate, covering the property named herein, and is intended solely for filing or record.

William Sheehan
845 Pacific Avenue

Shipper's No. *96-023*

Carrier _____ Agent's No. **0977**

RECEIVED, subject to the classifications and tariffs in effect on the date of the receipt by the carrier of the property described in the Original Bill of Lading,

at *Alameda, Calif. 918* 19____ from *Seneca HK*

the property described below in apparent good order except as noted (contents and condition of contents of packages unknown) marked, consigned and destined as shown below which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway, road or routes, or within the territory of its highway, steam, motor or delivery to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of said property over all or any portion of said route to destination and as to each party in any here interested in it or any of said property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law whether printed or written, herein contained including the conditions on back hereof which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee—For purposes of notification only)

Consigned to **Erickson, Inc.** **255 Parr Blvd.**

Destination **Richmond,** State of **Calif.** Zip Code **94801** County of **Contra Costa**

Routing **Dexanna** Delivering Carrier **Dexanna** Vehicle or Car Initial **2** No. **T-1**

Collect On Delivery

\$ _____ and remit to: _____

C. O. D. charge to be paid by { Shipper Consignee

Street _____ City _____ State _____

No Packages	Description of Articles, Special Marks, and Exceptions	Weight (Sub to Car.)	Class or Rate	Check Column
1	Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid. Manifest # 95269995 Tank # <u>18859</u> Loading Time: <u>13:30</u> to <u>14:15</u> = <u>3/4 Hr.</u>	<i>750 lbs.</i>		

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statements
 The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges

(Signature of Consignor)

If charges are to be prepaid, write or stamp here, "TO BE PREPAID."

Received \$ _____ to apply to prepayment of the charges on the property described hereon

Agent or Cashier

Per _____ (the signature here acknowledges only the amount Prepaid)

Charges Advanced

\$ _____

If the shipment moves between two ports by a carrier by water the law requires that the bill of lading shall state whether it is carriers or shippers weight NOTE—Where the rate is dependent on value shippers are required to state specifically in writing the agreed or declared value of the property

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per

Seneca HK Shipper, Per *Chuck K...* **Dexanna** Agent, Per *[Signature]*

Permanent post-office address of shipper,

(This Bill of Lading is to be signed by the shipper and agent of the carrier issuing same)

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. CAD001061488		Manifest Document No. 00977		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.									
		3. Generator's Name and Mailing Address William Sheehay 1036 Bay Street - Alameda, California						A. State Manifest Document Number 95269995									
4. Generator's Phone 510 522-0978						B. State Generator's ID											
5. Transporter 1 Company Name Dexanna				6. US EPA ID Number CAD982438566		C. State Transporter's ID											
7. Transporter 2 Company Name						D. Transporter's Phone (510) 637-1292											
8. US EPA ID Number						E. State Transporter's ID											
9. Designated Facility Name and Site Address Erickson, Inc. - 255 Parr Blvd. Richmond, California 94301						F. Transporter's Phone											
10. US EPA ID Number CAD009466392						G. State Facility's ID CAD009466392											
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol		15. Waste Number					
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.						001		T P		DRY ICE		P		State 512			
														EPA/Other NONE			
														State			
														EPA/Other			
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above											
Qty. <u>1</u> Empty Storage Tank # <u>18859</u> . Tank has been inerted with 15 Lbs. DRY ICE per 1000 gallons capacity.						a. _____ b. _____ c. _____ d. _____											
15. Special Handling Instructions and Additional Information																	
Keep away from sources of ignition. Site Location: <u>845 Pacific Avenue - Alameda, California</u> 24 Hr. Contact Name: <u>William Sheehay</u> & Phone # <u>(510) 522-0978</u>																	
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 WILLIAM J. SHEEHAY				Signature <i>William J. Sheehay</i>				Month 09		Day 18		Year 1996					
17. Transporter 1 Acknowledgement of Receipt of Materials				Printed/Typed Name James R. Cox				Signature <i>James R. Cox</i>				Month 09		Day 18		Year 1996	
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				Signature				Month		Day		Year					

DO NOT WRITE BELOW THIS LINE.

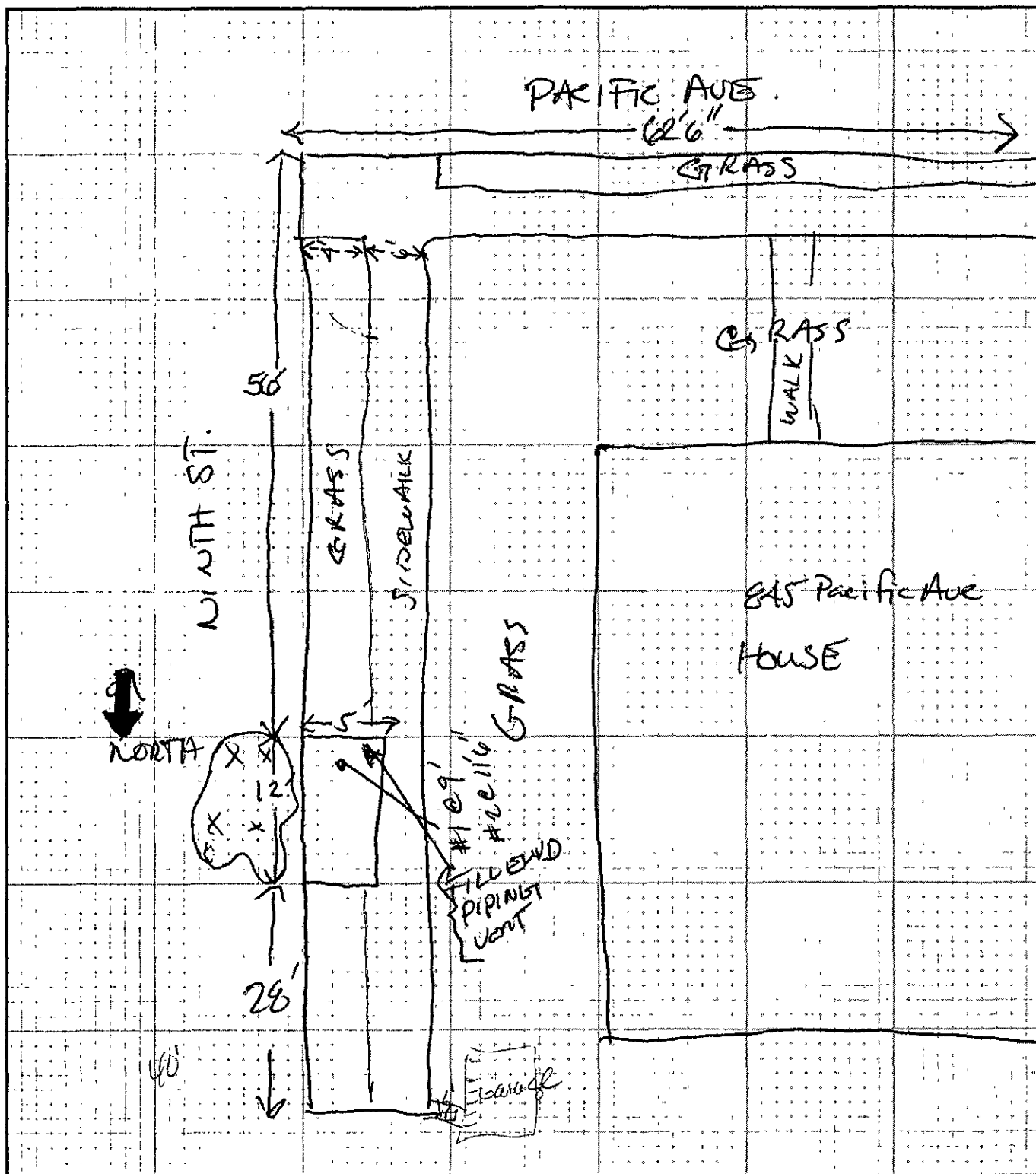
SEMCO
 1741 Leslie Street
 San Mateo, Calif. 94402
 (415) 572-8033

License No. 449864
 A, B, & C-61/D40
 Hazardous Substance Certificate

SEMCO
 431 W. Hatch Rd.
 Modesto, Calif. 95351
 (209) 524-9653

SITE PLAN

SUBMITTED TO:		DESCRIPTION OF JOB:	
		Job	845 Pacific Ave
		Address	#96-0236
		City	State
		Phone	Date 9/18



SEMCO ENVIRONMENTAL CONTRACTORS

SAN MATEO - (800)831-2344 (415)572-8033
 MODESTO - (800)585-9293 (209)524-9653

UST CLOSURE INSPECTION WORKSHEET

845 Pacific Ave.
 UST SITE ADDRESS

Residence
 BUSINESS NAME

#96-0236
 JOB #

LOWE
 ENV. HEALTH INSP.

Capt. McKinley / Akumeda
 FIRE INSP.

9/18
 DATE

NOTES

	Tank ID #	Tank Volume	Date Tank Closed
1	# 12859	750	9/18
2			
3			
4			
5			
6			

UST CONDITION	TANK #	/				
	LEL OK'D	✓				
	PRODUCT FREE	✓				
	HOLES/PITS	YES				
	TANK CUT/CLEANED	NO				
	RUST/SCALES	YES				
SOIL CON. DITION	VAPOR	YES 3'				
	DISCOLORATION	YES				
GROUND WATER	SMELL	NO				
	FLOATING PRODUCT	NO				
ANALYTICALS REQUESTED	TPH GAS					
	TPH DIESEL	X				
	TOTAL OIL AND GREASE					
	BTXLE (8020)	X				
	TOTAL LEAD					
	CI HC (8010)					
	8010 & 8020 or 8240					
	8270					
Cd, Cr, Pb, Zn, Ni						

- 1:30 0% LEL 4% O₂
- TANK DIA. - 38" x 10'
 - TANK VOL. - 750
 - DEPTH BOTTOM - 7'
 - DEPTH TOP - 4 1/4'
 - EXCAVATION LENGTH - 12'
 - WIDTH - 5'
 - Concrete - 8' x 20" x 4"
 - (5) 55 gal drums oil/sewage water.
 - 9' encountered odor/discoloration green. Attenuated @ 11/6" mostly south end
 - Soil type: Clayey Sand (native)
 - few small holes 1/8" - 1/4"
 - Back fill with excavated material
 - VISQUEEN BETWEEN SPOILS AND FILL.
 - Fill material on top (from REMED)

PROJECT MANAGER

TANK MANIFEST #

DEPTH OF EXCAVATION

LIQUID MANIFEST #

7'

DIMENSION OF EXCAVATION

DEPTH TO GROUNDWATER

12' x 5'

≈ 12'