

Facsimile Transmission Face Sheet



City of Oakland



FIRE DEPARTMENT
OFFICE OF EMERGENCY SERVICES

TO: Don Atkinson-Adams

FAX: 337-9335
~~567-6739~~

FROM: H. Goiny

PHONE: 238-7253

NOTES: Tank removal info. page w/ the
depth of samples taken - Get me know
if you need more info.

NO. PAGES INCLUDING THIS: 2 DATE: 2/18/98 TIME: 11:05 a.m.

CITY OF OAKLAND
FIRE DEPARTMENT
OFFICE OF EMERGENCY SERVICES DIVISION
505 14th Street, 7th Floor
Oakland, CA 94612
PHONE (510) 238-3938
FAX (510) 238-7761

PAUL S. ROSENSTEIN*

*MEMBER OF THE BAR
IN CALIFORNIA AND NEW YORK

PAUL S. ROSENSTEIN

ATTORNEY AT LAW

55 SANTA CLARA AVENUE, SUITE 250
OAKLAND, CALIFORNIA 94610-1375

TELEPHONE
(510) 465-5782

FAX
(510) 452-4881

Alameda County
OCT 16 2002
Environmental Health

October 11, 2002

Barney M. Chan, Hazardous Materials Specialist
ALAMEDA COUNTY HEALTH CARE SERVICES
1131 Harbor Bay Parkway, Suite 250
Alameda, California 94502-6577

Re: Guy's Diesel, 3820 San Leandro Street, Oakland, CA 94621

Dear Mr. Chan:

If you will recall from my January 16, 2001 letter to Michael O'Connor, Esq., Alameda County District Attorney's Office, I represent Kelly Engineer.

We were finally able to obtain a copy of the tank closure report from ACRC, Inc., the contractor that performed the tank removal, a copy of which report is enclosed herewith.

We apologize for the delay in getting this information to you, but, as indicated in my earlier correspondence, we were having difficulty with ACRC, Inc., which had agreed to provide the tank closure report and then delayed in providing the report.

Please do not hesitate to call me if you require additional information.

Sincerely,


PAUL S. ROSENSTEIN

PSR/m

cc: Susan M. Torrence, Esq.
Deputy District Attorney
cc: Mr. Kelly Engineer

o No Signature
o no soil despatch
is complete. good!

4055 / (89)

ACRC INC.

AMERICAN CONSULTING REMEDIATION AND CONSTRUCTION

Alameda County
OCT 16 2002
Environmental Health

**TANK CLOSURE REPORT
3820 SAN LEANDRO STREET
OAKLAND, CA**

Tank Removal Information

- **Date of removal:** 01/20/98
- **Personnel involved:** ACRC Inc. - Jeff Orwig site foreman
Ernesto Martinez
John's Excavating - John & Mike
Erickson Inc. - Transport and disposal of tanks
Oakland Fire Department - Hernan Gomez, Hazardous
Materials Inspector
- **Tanks:**
 - 2 - 8000 gallon diesel tanks - single wall, steel
 - 1 - 8000 gallon gasoline tank - single wall, steel
 - 1 - 4000 gallon gasoline tank - single wall, steel

Tank Removal Process

All City of Oakland Fire Department, State of California and California Regional Water Quality Board procedures and regulations were followed during the tank removal and disposal process.

Site excavation and demolition took place on January 19 - 20. All concrete was removed from over the tanks. In addition, the concrete drive slabs were removed in order to complete station upgrades as required. Concrete was hauled to a recycle site. Tanks were pulled on 01/20/98. Hernan Gomez, Hazardous Materials Inspector was present during the tank pull operation and soil sampling. Tanks were loaded on a truck from Erickson Inc. and hauled to their plant for disposal. Soil had been excavated from the pit area using an excavator. Soil was stock piled next to the pit area. Ground water flowed into the pit area from the adjacent ground at a depth of approximately 12'. Soil samples were taken at the direction of Inspector Gomez. One sample was taken from the bottom of the tank pit at approximately 14'6", which was 2' below the bottom of the tanks before they were removed. Samples were taken in the side walls of the pit above the water line. Additional samples were taken from the stock piled dirt for composite analysis. Please refer to site plan for locations of samples. The excavator was used to grab a bucket full of soil from under the ground water that was draining into the pit. Samples were taken using brass tubes. The tubes were labeled and placed into a cooler which had blue ice in it. The cooler was taken to the lab by a courier as soon as the sampling was completed. The tank pit was excavated to a depth of 16' for the new tanks which were installed at a later date. No water samples were taken in the pit. New tanks were installed on 01/23/98. Pea gravel was used for back fill material. All dirt excavated from the tank pit was stockpiled on the site. After the soil samples have been analyzed and results provided to the Fire Department, soil will be removed in an acceptable manner to the Department.

Laboratory Analysis

See attached lab reports.

Entech Analytical Labs, Inc.

CA ELAP# 2224

525 Del Rey Avenue, Suite E • Sunnyvale, CA 94086 • (408) 735-1550 • Fax (408) 735-1554

ACRC, Inc.
2491 San Ramon Valley Blvd.
Suite 1-430
San Ramon, CA 94583


Date:	1/21/98
Date Received:	1/20/98
Date Analyzed:	1/20/98
Project:	3820
Sampled By:	Client

Certified Analytical Report

Soil Sample Analysis:

Test	#1	#2	#3	#4	Units	PQL	EPA Method #
Sample Matrix	Soil	Soil	Soil	Soil			
Sample Date							
Sample Time	11:30						
Lab #	E1902	E1903	E1904	E1905			
DF-Diesel	1	50	50	1			
TPH-Diesel	180	3,200	3,700	11 ²	mg/kg	1.0 mg/kg	8015M
DF-Gas/BTEX	10	1,250	1,250	125			
TPH-Gas	34	2,600	1,400	170	mg/kg	1.0 mg/kg	8015M
Benzene	0.11	34	5.0	0.88	mg/kg	0.005 mg/kg	8020
Toluene	ND	5.3	3.5	0.48	mg/kg	0.005 mg/kg	8020
Ethyl Benzene	0.12	47	26	1.5	mg/kg	0.005 mg/kg	8020
Xylenes	0.24	170	6.5	0.71	mg/kg	0.005 mg/kg	8020

1. DLR=DF x PQL
2. TPH-Diesel chromatogram for Lab#E1905, although within the reporting limits, does not match the typical Diesel pattern
3. Analysis performed by Entech Analytical Labs, Inc. (CAELAP #2224)


Michael N. Golden, Lab Director

DF=Dilution Factor
DLR=Detection Reporting Limit

PQL=Practical Quantitation Limit
ND=None Detected at or above DLR

Entech Analytical Labs, Inc.

CA ELAP# 22

525 Del Rey Avenue, Suite E • Sunnyvale, CA 94086 • (408) 735-1550 • Fax (408) 735-1554

ACRC, Inc.
2491 San Ramon Valley Blvd.
Suite 1-430
San Ramon, CA 94583


Date:	1/21/98
Date Received:	1/20/98
Date Analyzed:	1/20/98
Project:	3820
Sampled By:	Client

Certified Analytical Report

Soil Sample Analysis:

Test	#5	Composite (A,B,C)	Composite (D,E,F)	Units	PQL	EPA Method #
Sample Matrix	Soil	Soil	Soil			
Sample Date						
Sample Time						
Lab #	E1906	E1907	E1908			
DF-Diesel	10	20	20			
TPH-Diesel	510	1,700	1,200	mg/kg	1.0 mg/kg	8015M
DF-Gas/BTEX	62	25	25			
TPH-Gas	130	260	750 ²	mg/kg	1.0 mg/kg	8015M
Benzene	0.82	0.16	0.14	mg/kg	0.005 mg/kg	8020
Toluene	0.42	0.40	0.34	mg/kg	0.005 mg/kg	8020
Ethyl Benzene	2.2	1.0	1.5	mg/kg	0.005 mg/kg	8020
Xylenes	8.6	4.2	7.0	mg/kg	0.005 mg/kg	8020

1. DLR=DF x PQL
2. DF=62
3. Analysis performed by Entech Analytical Labs, Inc. (CAELAP #2224)


Michael N. Golden, Lab Director

DF=Dilution Factor
DLR=Detection Reporting Limit

PQL=Practical Quantitation Limit
ND=None Detected at or above DLR

Entech Analytical Labs, Inc.

525 Del Rey Avenue, Suite E
Sunnyvale, CA 94086

QUALITY CONTROL RESULTS SUMMARY

QC Batch #: DS980105

Matrix: Soil

Units: mg/Kg

Date analyzed: 01/16/98

Date extracted: 01/16/98

Quality Control Sample: E1663

PARAMETER	Method #	MB	SA	SR	SP	SP	SPD	SPD	RPD	QC LIMITS	
		mg/Kg	mg/Kg	mg/Kg	mg/Kg	%R	mg/Kg	%R		RPD	%R
Diesel	8015M	<1.0	25	ND	19	77	20	80	3.1	25	50-150

Note: LCS and LCSD results reported for the following Parameter:

None

Acceptable LCS and LCSD results are reported when matrix interferences cause MS and MSD results to fall outside established QC limits.

Definition of Terms:

MB: Method Blank

na: Not Analyzed in QC batch

SA: Spike Added

SR: Sample Result

RPD(%): Duplicate Analysis - Relative Percent Difference

SP: Spike Result

SP (%R): Spike % Recovery

SPD: Spike Duplicate Result

SPD (%R): Spike Duplicate % Recovery

NC: Not Calculated

Entech Analytical Labs, Inc.

525 Del Rey Avenue, Suite E
Sunnyvale, CA 94086

QUALITY CONTROL RESULTS SUMMARY

METHOD: Gas Chromatography

QC Batch #: GBG2980120

Matrix: Soil

Units: ug/kg

Date Analyzed: 01/20/98

Quality Control Sample: E1848

PARAMETER	Method #	MB ug/kg	SA ug/kg	SR ug/kg	SP ug/kg	SP % R	SPD ug/kg	SPD %R	RPD	QC LIMITS (ADVISORY)	
										RPD	%R
Benzene	8020	<5.0	80	ND	76	95	79	98	3.6	25	50-150
Toluene	8020	<5.0	80	ND	76	95	79	98	3.3	25	50-150
Ethyl Benzene	8020	<5.0	80	ND	79	99	78	97	2.0	25	50-150
Xylenes	8020	<5.0	240	ND	236	98	237	99	0.4	25	50-150
Gasoline	8015	<1000.00	1000	ND	870	87	1040	104	17.8	25	50-150

Note: LCS and LCSD results reported for the following Parameters:
None

Acceptable LCS and LCSD results are reported when matrix interferences cause MS and MSD results to fall outside established QC limits.

Definition of Terms:

- na: Not Analyzed in QC batch
- MB: Method Blank
- SA: Spike Added
- SR: Sample Result
- RPD(%): Duplicate Analysis - Relative Percent Difference
- SP: Spike Result
- SP (%R): Spike % Recovery
- SPD: Spike Duplicate Result
- SPD (%R): Spike % Recovery
- NC: Not Calculated

Entech Analytical Labs, Inc.

525 Del Rey Avenue, Suite E
Sunnyvale, CA 94086

QUALITY CONTROL RESULTS SUMMARY

METHOD: Gas Chromatography

QC Batch #: GBG4980120

Matrix: Soil

Units: ug/kg

Date Analyzed: 01/20/98

Quality Control Sample: E1886

PARAMETER	Method #	MB ug/kg	SA ug/kg	SR ug/kg	SP ug/kg	SP % R	SPD ug/kg	SPD %R	RPD	QC LIMITS (ADVISORY)	
										RPD	%R
Benzene	8020	<5.0	80	ND	70	88	70	88	0.1	25	50-150
Toluene	8020	<5.0	80	ND	70	87	71	88	1.2	25	50-150
Ethyl Benzene	8020	<5.0	80	ND	72	90	73	91	0.3	25	50-150
Xylenes	8020	<5.0	240	ND	229	96	222	92	3.5	25	50-150
Gasoline	8015	<1000.00	1000	ND	740	74	760	76	2.7	25	50-150

Note: LCS and LCSD results reported for the following Parameters:

None

Acceptable LCS and LCSD results are reported when matrix interferences cause MS and MSD results to fall outside established QC limits.

Definition of Terms:

na: Not Analyzed in QC batch

MB: Method Blank

SA: Spike Added

SR: Sample Result

RPD(%): Duplicate Analysis - Relative Percent Difference

SP: Spike Result

SP (%R): Spike % Recovery

SPD: Spike Duplicate Result

SPD (%R): Spike % Recovery

NC: Not Calculated

Entech Analytical Labs, Inc.

525 Del Rey Avenue, Suite E • Sunnyvale, CA 94086 • Telephone: (408) 735-1550 (800) 287-1799 • Fax: (408) 735-1554

Chain of Custody/Analysis Work Order

Ag 1 of 2

Client: AIRC. Inc
 Address: 2491 San Ramon Valley Blvd Suite 1430 SAN RAMON
 Contact: JEFF CRUICK
 Telephone #: 510 837 4032
 Date Received: _____
 Turn Around: Asma 24^{hours} 11:00 am

Project ID: 3820

Purchase Order #: _____

Sampler/Company: _____ Telephone #: _____

Special Instructions/Comments
Per 510 837 3124

LAB USE ONLY

Samples arrived chilled and intact:

Yes _____ No _____

Notes: _____

Sample Information								Requested Analysis						
Lab #	Sample ID	Grab/Composite	Matrix	Date Collected	Time Collected	Pres.	Sample Container	CAS	Diesel	R6				
E902	#1	Grab - side wall			11:30									
E1903	#2	N#16												
E1904	3	steering												
E1905	4	tbl												
E1904	5	N#26												
	#2	near #1												
E1907	B3	Bom #1												
	C	cont #1												

Relinq. By: <u>Jeff Cruick</u>	Received By: <u>Debra</u>	Date: <u>1/20/08</u>	Time: <u>11:48</u>
Relinq. By: _____	Received By: _____	Date: _____	Time: _____
Relinq. By: _____	Received By: _____	Date: _____	Time: _____

Entech Analytical Labs, Inc.

525 Del Rey Avenue, Suite E • Sunnyvale, CA 94086 • Telephone: (408) 735-1550 (800) 287-1799 • Fax: (408) 735-1554

Chain of Custody/Analysis Work Order

pg 2 of 2

Client: ACDE DZ
 Address: _____
 Contact: [Signature]
 Telephone #: _____
 Date Received: _____
 Turn Around: ~~Normal~~ 24 hours

Project ID: 3820
 Purchase Order #: _____

Sampler/Company: _____	Telephone #: _____
Special Instructions/Comments	

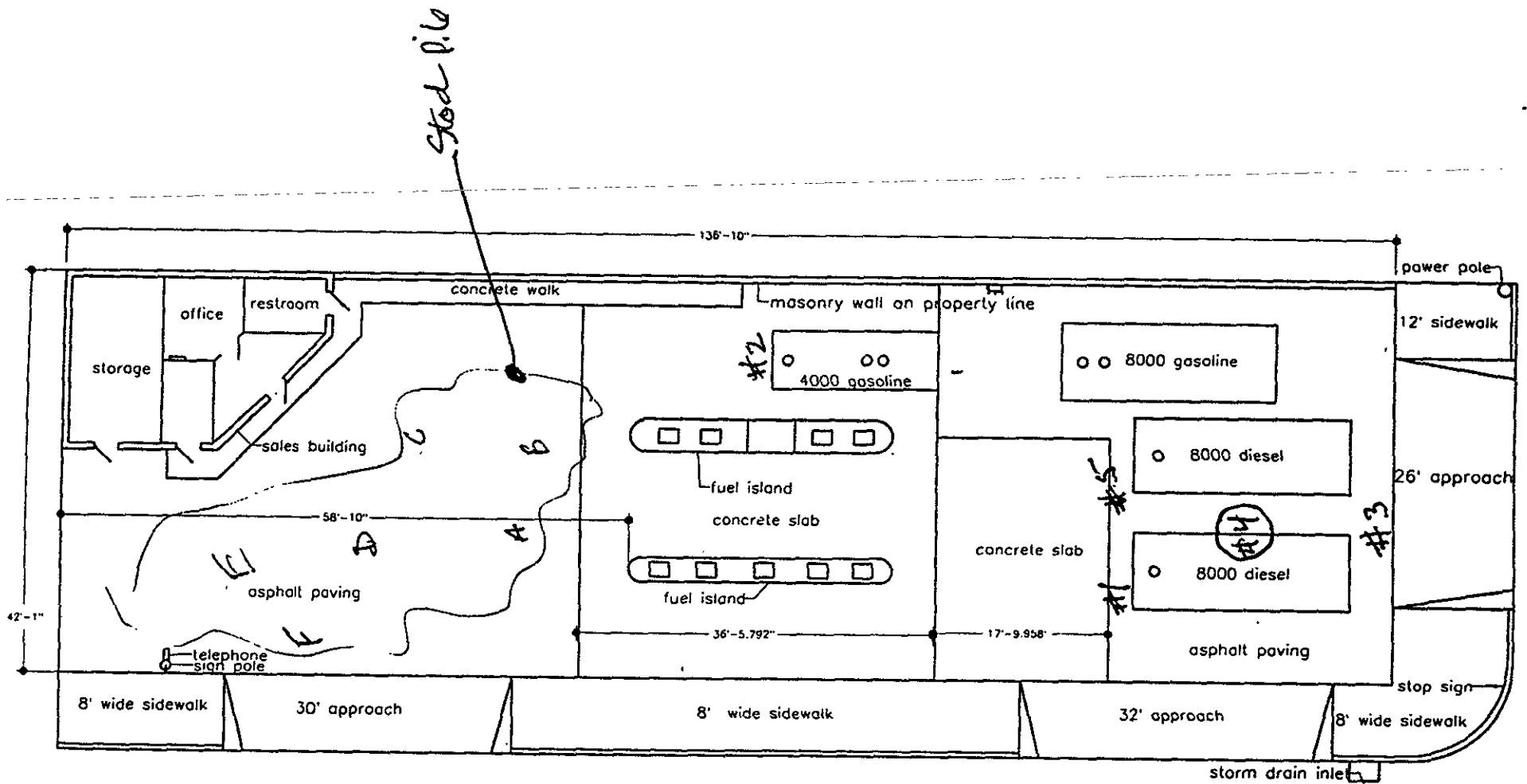
LAB USE ONLY

Samples arrived chilled and intact:

Yes No

Notes: _____

Sample Information								Requested Analysis							
Lab #	Sample ID	Grab/Composite	Matrix	Date Collected	Time Collected	Pres.	Sample Container								
<i>E1908</i>	<i>D</i>	<i>Com #2</i>						<i>CAS</i>	<i>Bz</i>	<i>Res</i>	<i>Co</i>				
	<i>E</i>	<i>Com #2</i>													
	<i>F</i>	<i>Com #2</i>													
Relinq. By: <u>[Signature]</u>								Received By: <u>[Signature]</u>				Date: <u>1/20/98</u>		Time: <u>11:45</u>	
Relinq. By: _____								Received By: _____				Date: _____		Time: _____	
Relinq. By: _____								Received By: _____				Date: _____		Time: _____	



1. The building, sign and pole and telephone will remain.
2. The concrete slab at the west end of the property between the building and the sidewalk will remain.
3. The underground tanks, pump islands and equipment and all concrete and asphalt paving is to be removed.
4. The fuel piping is to be removed.
5. The concrete walk at the building is to be removed.
6. The island booth is to be removed.
7. The newer of the island light poles and rectangular fixtures are to be salvaged and reused.

DEMOLITION PLAN

717demo

Supporting Reports and Documents

We have included copies of all other reports and chain of custody reports as related to the removal of the two underground tanks.

43

X 1/23/98

HEI

238	Insp. Griffin	<input type="checkbox"/>	Inspected By	Facility Contact Print Name
238	Insp. Johnson	<input type="checkbox"/>		KELLY, ENRIQUE
238	Insp. Crawford	<input type="checkbox"/>		Facility Contact Signature
238	Insp. Gomez	<input checked="" type="checkbox"/>		

Date: 1/23/98

Inspection Report

Insulation of 3 Tanks - 1 Tank is a split one
 12,000 gal = 20,000 gal

Note: Make sure it be changed because some portion
 of the Co. - For now we allowed contractor
 to drop into pit, the tanks, - record them
 13,000 gal Tank gauge had problems - Problem fixed +
 readings taken - Tank in problem
 50,000 gal Tank in problem

Note: Storm drain in the corner of 39th Ave + S.L.
 need to be cleaned up. Pit gassed - vent unit +

Site Number	Facility Name	Facility Address
	Guy's Service	3820 San Leandro St

NON-HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.

4. Generator's Name and Mailing Address

844 S. ...
3820 ...
Generator's Phone: (510) 797-8511

5. Transporter Company Name

CLEARWATER ENVIRONMENTAL

6. US EPA ID No.

600000743

7. Transporter Phone

(510) 797-8511

8. Designated Facility Name and Site Address

ALVISO INDEPENDENT OIL
5002 ARCHER STREET
ALVISO, CA 95002

9. US EPA ID No.

600101743

10. Facility Phone

(510) 797-8511

11. Waste Shipping Name and Description

Non-Hazardous waste liquid

12. Containers

No. Type

001 111

13. Total Quantity

2000

14. Unit

gals

15. Special Handling Instructions or Other Information

WASTE

Handling Codes by Hazard Class Above

Emergency Contact

(510) 797-8511
Attn: Kirk Hayward

16. GENERATOR'S CERTIFICATION

I hereby certify that the information furnished on this form is true and accurate and that I am a person authorized to sign this form for the purposes of the Federal regulations for reporting proper disposal of Hazardous Waste.

Printed/Typed Name

Signature

Month Day Year

Signature

Month Day Year

Printed/Typed Name

Signature

Month Day Year

Signature

Month Day Year

Printed/Typed Name

Signature

Month Day Year

Signature

Month Day Year

Printed/Typed Name

Signature

Month Day Year

Signature

Month Day Year

Printed/Typed Name

Signature

Month Day Year

Signature

Month Day Year

Signature

Month Day Year

GENERATOR

TRANSPORTER

FACILITY

NON-HAZARDOUS WASTE MANIFEST

GENERATOR

Generator's Name and Mailing Address
Guy's Services
3815 San Bernardino Ave, Hayward, CA 94618
 Generator's Phone: **510-281-1110**

7. Transporter Company Name
CLEARWATER ENVIRONMENTAL
 US EPA ID Number
CAR000007013

6. Facility's Phone
(510) 797-8511

8. Designated Facility Name and SRA Address
ALVISO INDEPENDENT OIL
5002 ARCHER STREET
ALVISO, CA 95002
 US EPA ID Number
CAL000161743

10. Facility's Phone
(510) 797-8511

11. Waste Shipping Name and Description
Non-Hazardous waste, liquid

Containers No.	Type	Total Quantity	Unit Weight
1001	LT	19.50	KG

15. Special Handling Instructions and Additional Information
 Wear PPE
 Emergency Contact
(510) 797-8511
 Attn: Kirk Hayward

Handling Codes for Wastes Listed Above


16. GENERATOR'S CERTIFICATION: I certify that the waste described above on this manifest is not subject to any other federal regulations for reporting, tracking, or disposal of hazardous waste.

TRANSPORTER

17. Printed/Typed Name
Jeff Orsini

Signature


17. Printed/Typed Name
DAVIS Morrison

Signature


FACILITY

18. Discrepancy Indication Space

19. Printed/Typed Name

Signature

NON-HAZARDOUS WASTE MANIFEST

1. Generator's Name and Address:
 BAY'S SERVICE
 1200 S. ...
 (Generator's Phone: 510-797-8511)

6. Transporter Company Name: CLEARWATER ENVIRONMENTAL
 US EPA ID Number: CAR000007013

7. Transporter's Phone: (510) 797-8511

8. Designated Facility Name and Site Address:
 ALVISO INDEPENDENT OIL
 5002 ARCHER STREET
 ALVISO, CA 95002

9. US EPA ID Number: CAL000161743
 10. Facility's Phone: (510) 797-8511

11. Waste Shipping Name and Description:
 Non-Hazardous waste, liquid

12. Container No.	13. Container Type	14. Total Quantity	15. Unit
001	DRUM	250.5	G

15. Special Handling Instructions and Additional Information:
 Wear PPE
 Emergency Contact:
 (510) 797-8511
 Attn: Kirk Hayward

16. Handling Codes for Waste Listed Above	

16. GENERATOR'S CERTIFICATION: (Copy the manifest described above on this manifest are not subject to state or federal regulations for reporting proper disposal of hazardous waste.)

17. Generator's Signature:
 Printed/Typed Name: JEFF ...
 Signature: [Handwritten Signature]

18. Date: 10/12/78

17. Transporter Acknowledgment of Receipt of Materials:
 Printed/Typed Name: Steve R. Stone
 Signature: [Handwritten Signature]

18. Date: 10/12/78

19. Facility Owner or Operator:
 Printed/Typed Name: [Blank]

GENERATOR

TRANSPORTER

FACILITY

308 (304) CALIFORNIA CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550
 GENERATOR FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. <i>CA001138173819723647</i>	Manifest Document No. <i>1/1</i>	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <i>310 PUY'S DIESEL 261 6090 3820 SAN LEANDRO STREET OAKLAND CALIFORNIA</i>						
4. Generator's Phone						
5. Transporter 1 Company Name		6. US EPA ID Number				
7. Transporter 2 Company Name		8. US EPA ID Number				
9. Designated Facility Name and Site Address <i>250 SMITH AVE ALTA ADR DR. 915601 VALI 13118 57418</i>		10. US EPA ID Number				
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers				
a. <i>USED OIL FROM RURA HAZARDOUS WASTE LIQUID</i>		No.	Type			
15. Special Handling Instructions and Additional Information <i>SEND MANIFEST TO: ACRC SUITE 1-430 2491 SAN RAMON VALLEY 509 2A HAVILLARD 115</i>						
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 <i>KELLY ENGINEER</i>		Signature <i>[Signature]</i>		Month <i>11</i>	Day <i>19</i>	Year <i>11</i>
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		Month <i>11</i>	Day <i>19</i>	Year <i>11</i>
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature <i>[Signature]</i>		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.

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.	Manifest Document No.	2. Page 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address SIO 261 6290		CA0001387384 736510		1 of 1	
4. Generator's Phone		5. Transporter 1 Company Name WASTE OIL RECOVERY		6. US EPA ID Number WA0000137592	
7. Transporter 2 Company Name		8. US EPA ID Number		9. Designated Facility Name and Site Address ALUSO CIL 5002 ARTHUR ALUSO CIL 2500Z	
10. US EPA ID Number		11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	
13. Total Quantity		14. Unit Wt/Vol		1. Waste Number	
15. Special Handling Instructions and Additional Information LRL 27 WLDL YEAR 24 NOV 511 5330750		16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and classified, packaged, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.		17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name: D FAJIN Signature: <i>[Signature]</i> Month: 11 Day: 10 Year: 11	
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.

Information in the shaded areas is not required by Federal law.

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.	Manifest Document No.	2. Page 1 of 1
3. Generator's Name and Mailing Address GUY'S DIESEL 3055 SAN LEONARDO ST RICHMOND CA 94801				
4. Generator's Phone (510) _____				
5. Transporter 1 Company Name Tipton Towing		6. US EPA ID Number 1111111111111111		
7. Transporter 2 Company Name		8. US EPA ID Number		
9. Designated Facility Name and Site Address ERICKSON, INC. 155 Parr Blvd. Richmond, CA. 94801		10. US EPA ID Number 1111111111111111		
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	a. NON-RCRA Hazardous Waste Solid Waste Empty Storage Tank.		12. Containers No. Type	13. Total Quantity
	b.			
	c.			
	d.			
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Always wear hardhats when working around U.G.S.T.'s 24 Hr. Contact Name JEFF RUIZ Phone 510-877-9222				
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 JEFF RUIZ		Signature <i>[Signature]</i>		Month Day Year 1 15 89
17. Transporter 1 Acknowledgement of Receipt of Materials				
Printed/Typed Name BOB SOMMA		Signature <i>[Signature]</i>		Month Day Year 0 1 1 2 0 9
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.

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

Information in the shaded area is not required by Federal law.

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CA1C0P1138733H0000011	Manifest Document No.	2. Page 1 1 of 1		
3. Generator's Name and Mailing Address GUYS SERVICE GAS DIESEL 3820 SAN LEANDRO ST OAKLAND CA 94601						
4. Generator's Phone (510)						
5. Transporter 1 Company Name T... ..	6. US EPA ID Number					
7. Transporter 2 Company Name	8. US EPA ID Number					
9. Designated Facility Name and Site Address ERICKSON, INC. 155 Parr Blvd. Richmond, CA. 94801		10. US EPA ID Number				
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		
		No.	Type			
		a. NON-RCRA Hazardous Waste Solid Waste Empty Storage Tank.			T P	P
		b.				
		c.				
d.						
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Always wear handhats when working around U.G.S.T.'s 24 Hr. Contact Name. JEFF DRURY Phone. 510-237-1032						
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 JEFF DRURY		Signature <i>[Signature]</i>		Month Day Year 12 20 91		
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name BOB SANNA		Signature <i>[Signature]</i>		Month Day Year 01 12 01 93		
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month Day Year		
19. Discrepancy Indication Space <i>[Handwritten notes]</i>						
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 <i>[Signature]</i>		Month Day Year		

DO NOT WRITE BELOW THIS LINE.

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 04/20/98		CASE #		SIGNED _____ DATE _____		
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT JEFF ORWIG		PHONE (510) 837 4032		SIGNATURE <i>Jeff Orwig</i>	
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME ACRC INC			
	ADDRESS 2491 SAN RAMON VALLEY BLVD SUITE 1430 SAN RAMON CA 94583					
RESPONSIBLE PARTY	NAME Kelly Engineer		CONTACT PERSON Kelly Engineer		PHONE (510) 674 9798	
	ADDRESS 1791 Pine Street Concord CA		CITY STATE ZIP			
SITE LOCATION	FACILITY NAME (IF APPLICABLE) Guy's Diesel		OPERATOR Kelly Engineer		PHONE (510) 674 9798	
	ADDRESS 3820		CITY Oakland		STATE ZIP CA 94601	
	CROSS STREET					
IMPLEMENTING AGENCIES	LOCAL AGENCY City of Oakland - Fire Services Agency		CONTACT PERSON HERNAN GOMEZ		PHONE (510) 238 7252	
	REGIONAL BOARD SAN FRANCISCO BAY REGION		PHONE ()			
SUBSTANCES INVOLVED	(1) NAME Soil - impacted w/ Gasar Diesel		QUANTITY LOST (GALLONS) _____ <input type="checkbox"/> UNKNOWN			
	(2) _____		_____ <input type="checkbox"/> UNKNOWN			
DISCOVERY/ABATEMENT	DATE DISCOVERED 02/02/98		HOW DISCOVERED <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL		<input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS	
	DATE DISCHARGE BEGAN _____ <input checked="" type="checkbox"/> UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY)			
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE _____		<input type="checkbox"/> REMOVE CONTENTS <input 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 checked="" type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER _____			
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 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					
	CHECK APPROPRIATE ACTION(S) <input type="checkbox"/> CAP SITE (CS) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (BT) <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 type="checkbox"/> OTHER (OT) _____					
COMMENTS						