

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

Certified Mail # P 143 588 418  
02/03/98

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

Notice of Responsibility

StID#: 6898  
Housewives Market  
818 Jefferson St  
Oakland, CA 94607

SITE

Date First Reported 12/12/97  
Substance: Gasoline  
Funding (Federal or State): S  
Multiple RPs?:

Janet Howley  
City Of Oakland, Community Dev  
1333 Broadway St., 4th Fl  
Oakland, Ca 94612

Responsible Party (RP)  
Property Owner

You are hereby notified that pursuant to Section 25297.1 of the Health and Safety Code, the above site has been placed in the Local Oversight Program. The above individual(s) or entity(ies) has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 227-4349 or telephone (916) 227-4408.

Pursuant to Section 25299.37(c) (7) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact this office for further information about the site designation process.

Please contact Larry Seto, Senior Hazardous Materials Specialist at this office at (510) 567-6700 if you have any further questions.

Richard A. Pantages, Chief  
Contract Project Director

Please Circle One  Add  Delete  Change

Reason: New Site

C: Lori Casias, SWRCB  
Larry Seto, Senior Hazardous Materials Specialist

#6898 P 143 588 418  
L. Seto

US Postal Service  
**Receipt for Certified Mail**

No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to Janet Howley	
City of Oakland, Comm. Dev.	
Street & Number 1333 Broadway St., 4th Floor	
Post Office, State, & ZIP Code Oakland CA 94612	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: L. Seto #6898

Janet Howley  
City of Oakland Community Dev.  
1333 Broadway St., 4t Floor  
Oakland CA 94612

4a. Article Number  
P 143 588 418

4b. Service Type  
 Registered  Certified  
 Express Mail  Insured  
 Return Receipt for Merchandise  COD

7. Date of Delivery

2/12/98

5. Received By: (Print Name)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

X

Thank you for using Return Receipt Service.