

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail #
10/25/1999 Z 330 741 265

ENVIRONMENTAL HEALTH SERVICES

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Stoddard Solvent
Source : Federally Funded
MultiRPs?: Yes

Mr. Michael Champion
Na
P. O. Box 489
Moss Beach, C A 94038

Responsible Party (RP) # 5
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Linda Champion as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date 10/28/99

Please Circle One Add Delete Change

Reason: RP#3 & #4

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

Report: ReImb97M 5/99

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):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to: **STID 819**
Mr. Michael Champion
Ne
P.O. Box 489
Mass Beach, CA. 94038

4a. Article Number

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

10/25/1999

LIST OF RESPONSIBLE PARTIES FOR

<div data-bbox="175 344 315 411" style="border: 1px solid black; padding: 2px;">SITE</div>	<div data-bbox="358 331 935 457">StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608</div>	<div data-bbox="971 331 1544 457">Date First Reported 10/04/1990 Substance: Stoddard Solvent Petroleum (X) Yes Source: F</div>
<div data-bbox="167 491 592 646">Mr. Don Rotocil Current Property Owner 2200 Browning Street Berkeley, CA 94702 (510) 526-0887</div>	<div data-bbox="941 508 1382 604" style="border: 1px solid black; padding: 5px;">Responsible Party #1 Property Owner</div>	
<div data-bbox="167 680 683 835">Mr. Frank Champion And Ms. Linda Champion 9441 Laguna Lake Way Elk Grove, California 95758 (916) 684-2993</div>	<div data-bbox="941 697 1382 827" style="border: 1px solid black; padding: 5px;">Responsible Party #2 Contact Person Contact Company</div>	
<div data-bbox="167 869 646 1024">Paulette Satterley Na 14601 Guadalupe Drive Rancho Murieta, CA 95683 (916) 354-2241</div>	<div data-bbox="941 886 1382 1016" style="border: 1px solid black; padding: 5px;">Responsible Party #3 Contact Person Contact Company</div>	
<div data-bbox="167 1058 553 1184">Paula Champion-braig Na 280 Mountain Avenue Piedmont, CA 94611</div>	<div data-bbox="941 1075 1382 1205" style="border: 1px solid black; padding: 5px;">Responsible Party #4 Contact Person Contact Company</div>	
<div data-bbox="167 1247 586 1373">Mr. Michael Champion Na P. O. Box 489 Moss Beach, CA 94038</div>	<div data-bbox="941 1264 1382 1394" style="border: 1px solid black; padding: 5px;">Responsible Party #5 Contact Person Contact Company</div>	

4580

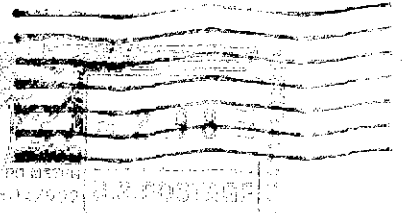
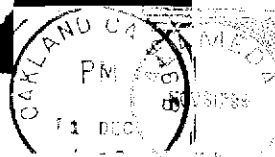


ALAMEDA COUNTY
HEALTH CARE SERVICES AGENCY
Department Of Environmental Health
Environmental Protection Division
1131 Harbor Bay Parkway, Suite 400
Alameda, CA 94502-6577

Fold at line over top of envelope to
the right of the return address

CERTIFIED

Z 330 741 265



MAIL

RECEIVED
DEC 21 1992
UNCLAIMED

1st Notice 12-9
2nd Notice
Return 12-19

Mr. Michael Champion
Na
P.O. Box 489
Moss Beach, CA 94038

94038-5443



ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail #Z 115 363 880
10/25/1999 Z 196 176 877

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Stoddard Solvent
Source : Federally Funded
MultiRPs?: Yes

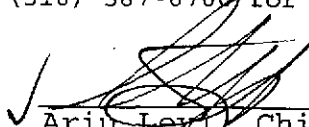
Mr. Frank Champion
And Ms. Linda Champion
9441 Laguna Lake Way
Elk Grove, California 95758

Responsible Party (RP) # 2
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Linda Champion as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date 10/28/99

Please Circle One Add Delete Change

Reason: RP #3 + #4

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

Report: ReImb97M 5/99

Z 115 363 880

US Postal Service
Receipt for Certified Mail

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

Sent to <i>City of Paris (CLEAN)</i>	
Street & Number <i>3516 ADELIN ST</i>	
Post Office, State, & ZIP Code <i>OAKLAND, CA 94608</i>	
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	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

Z 176 176 877



Receipt for Certified Mail

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

PS Form 3800, March 1993

Sent to <i>73 L CHAMPION</i>	
Street and No. <i>9441 LAGUNA LAKE WY</i>	
P.O., State and ZIP Code <i>ELK GROVE, CA 95758</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/o. 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 serv. (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to: *STED 819*
Mr. Frank Champion &
Linda Champion
9441 Laguna Lake Way
Elk Grove, CA 95758

4a. Article Number

4b. Service Type

- Registered
- Certified
- Express Mail
- Insured
- Return Receipt for Merchandise
- COD

7. Date of Delivery

12/9/99

5. Received By (Print Name)

Linda Champion

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

6. Signature (Addressee or Agent)

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

10/25/1999

LIST OF RESPONSIBLE PARTIES FOR

<p>SITE</p>	<p>StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608</p>	<p>Date First Reported 10/04/1990 Substance: Stoddard Solvent Petroleum (X) Yes Source: F</p>
<p>Mr. Don Rotocil Current Property Owner 2200 Browning Street Berkeley, C A 94702 (510) 526-0887</p>		<p>Responsible Party #1 Property Owner</p>
<p>Mr. Frank Champion And Ms. Linda Champion 9441 Laguna Lake Way Elk Grove, California 95758 (916) 684-2993</p>		<p>Responsible Party #2 Contact Person Contact Company</p>
<p>Paulette Satterley Na 14601 Guadalupe Drive Rancho Murieta, Ca 95683 (916) 354-2241</p>		<p>Responsible Party #3 Contact Person Contact Company</p>
<p>Paula Champion-braig Na 280 Mountain Avenue Piedmont, Ca 94611</p>		<p>Responsible Party #4 Contact Person Contact Company</p>
<p>Mr. Michael Champion Na P. O. Box 489 Moss Beach, C A 94038</p>		<p>Responsible Party #5 Contact Person Contact Company</p>

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P 367 604 089

04/21/92
STID# 819

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

Notice of Requirement to Reimburse

Leah Champion

P.o. Box 489
Moss Beach, Ca 94038

Responsible Party
Property Owner

City of Paris Cleaning & Dyeing
3516 Adeline St.
Oakland, CA 94608

SITE

Date First Reported 10/04/90
Substance: Gasoline
Petroleum: (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Susan HUGO, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: ^{CHANGE} Reason: New *RP* INFORMATION

P 367 604 089

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(SH) (See Reverse) #819

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to Leah Champion	
Street and No. P.O. Box 489	
P.O., State and ZIP Code Moss Beach, CA 94038	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

SENDER: Complete items 1 and 2 and check additional services if desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent the item from being returned to you. The return receipt fee will provide you the name of the person delivered and the date of delivery. For additional fees the following services are available. Consult postmaster for rates and check box(es) for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to: (SH) #819 Leah Champion P.O. Box 489 Moss Beach, CA 94038	4. Article Number P 367 604 089
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Address <i>Leah Champion</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 5/13/92	

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # Z 196 176 876
10/25/1999 Z 196 176 878

ENVIRONMENTAL HEALTH SERVICES

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Stoddard Solvent
Source : Federally Funded
MultiRPs?: Yes

Mr. Michael Champion
Na
P. O. Box 489
Moss Beach, C A 94038

Responsible Party (RP) # 5
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Linda Champion as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.

[Signature]
Ariu Levi Chief
Contract Project Director

Date 10/26/99

Please Circle One Add Delete Change

Reason: RP#3 + #4

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

Z 196 176 876



Receipt for Certified Mail

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

PS Form 3800, March 1993

Sent to		City of Paris Cleanings	
Street and No.		3510 ADELINE ST	
P.O. State and ZIP Code		OURLAND CA 94608	
Postage	\$		
Certified Fee			
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees	\$		
Postmark or Date			

Z 196 176 878



Receipt for Certified Mail

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

PS Form 3800, March 1993

Sent to		M. CHAMPION	
Street and No.		P.O. BOX 489	
P.O. State and ZIP Code		MOSS BEACH, CA 94038	
Postage	\$		
Certified Fee			
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered			
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees	\$		
Postmark or Date			

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> 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): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery	
3. Article Addressed to: MR. MICHAEL CHAMPION MOSS BEACH, CA 94038		4a. Article Number Z 196 176 878	
5. Received By: (Print Name) LEAH CHAMPION		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature (Addressee or Agent) Leah Champion		7. Date of Delivery 10-29-91	
		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994

102595-90-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

10/25/1999

LIST OF RESPONSIBLE PARTIES FOR

SITE	StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608	Date First Reported 10/04/1990 Substance: Stoddard Solvent Petroleum (X) Yes Source: F
------	--	---

Mr. Don Rotocil
Current Property Owner
2200 Browning Street
Berkeley, C A 94702
(510) 526-0887

Responsible Party #1
Property Owner

Mr. Frank Champion
And Ms. Linda Champion
9441 Laguna Lake Way
Elk Grove, California 95758
(916) 684-2993

Responsible Party #2
Contact Person
Contact Company

Paulette Satterley
Na
14601 Guadalupe Drive
Rancho Murieta, Ca 95683
(916) 354-2241

Responsible Party #3
Contact Person
Contact Company

Paula Champion-braig
Na
280 Mountain Avenue
Piedmont, Ca 94611

Responsible Party #4
Contact Person
Contact Company

Mr. Michael Champion
Na
P. O. Box 489
Moss Beach, C A 94038

Responsible Party #5
Contact Person
Contact Company

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail #
09/24/1999

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Gasoline
Source : Federally Funded
MultiRPs?: Yes

Mr. Frank Champion
And Ms. Lynda Champion
9441 Laguna Lake Way
Elk Grove, California 95758

Responsible Party (RP) # 2
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified _____ as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.

Ariu Levi, Chief
Contract Project Director

Date 9/27/89

Please Circle One Add Delete Change

Reason: Added RP#3

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 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 service (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to:

MR FRANK CHAMPION
& MS. LINDA CHAMPION
19441 CASUNA LAKE WY.
ELK GROVE, CA 95758

4a. Article Number

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

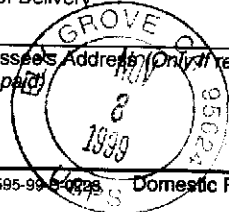
5. Received By: (Print Name)

Linda Champion

6. Signature (Addressee or Agent)

Linda Champion

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



Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/24/1999

LIST OF RESPONSIBLE PARTIES FOR

<div data-bbox="180 348 318 415" style="border: 1px solid black; padding: 2px;">SITE</div>	<div data-bbox="363 338 938 464">StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608</div>	<div data-bbox="972 338 1547 464">Date First Reported 10/04/1990 Substance: Gasoline Petroleum (X) Yes Source: F</div>
<div data-bbox="168 495 500 527">Ms. Leah Champion</div> <div data-bbox="168 558 553 619">P.o. Box 489 Moss Beach CA 94038</div>		<div data-bbox="943 516 1385 611" style="border: 1px solid black; padding: 2px;">Responsible Party #1 Property Owner</div>
<div data-bbox="168 684 686 840">Mr. Frank Champion And Ms. Lynda Champion 9441 Laguna Lake Way Elk Grove, California 95758 (916) 684-2993</div>		<div data-bbox="943 705 1385 831" style="border: 1px solid black; padding: 2px;">Responsible Party #2 Contact Person Contact Company</div>
<div data-bbox="168 873 594 1029">Mr. Don Rotocil Current Property Owner 2200 Browning Street Berkeley, C A 94702 (510) 526-0887</div>		<div data-bbox="943 894 1385 1020" style="border: 1px solid black; padding: 2px;">Responsible Party #3 Contact Person Contact Company</div>

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # P 143 589 294
10/25/1999 143 589 295

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Stoddard Solvent
Source : Federally Funded
MultiRPs?: Yes

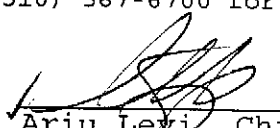
Paula Champion-braig
Na
280 Mountain Avenue
Piedmont, Ca 94611

Responsible Party (RP) # 4
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Linda Champion as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.


Ariu Levi, Chief
Contract Project Director
Date 10/26/90

Please Circle One Add Delete Change
Reason: RP #3 + #4

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

P 143 589 294

P 143 589 295

US Postal Service
Receipt for Certified Mail

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

Sent to <i>CITY OF PARS CLEANING</i>	
Street & Number <i>3516 ADELINE ST</i>	
Post Office, State, & ZIP Code <i>OAKLAND, CA 94608</i>	
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	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail

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

Sent to <i>P. CHAMPION</i>	
Street & Number <i>280 MOUNTAIN AVE.</i>	
Post Office, State, & ZIP Code <i>PIEDMONT, CA 94611</i>	
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	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 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 serv. (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to:
Paula Champion-BVAIG
NA
280 MOUNTAIN AVE.
PIEDMONT, CA 94611

4a. Article Number

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- Certified
- Insured
- COD

7. Date of Delivery

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

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-99-B-0223

Domestic Return Receipt

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

10/25/1999

LIST OF RESPONSIBLE PARTIES FOR

SITE	StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608	Date First Reported 10/04/1990 Substance: Stoddard Solvent Petroleum (X) Yes Source: F
------	--	---

Mr. Don Rotocil
Current Property Owner
2200 Browning Street
Berkeley, C A 94702
(510) 526-0887

Responsible Party #1 Property Owner
--

Mr. Frank Champion
And Ms. Linda Champion
9441 Laguna Lake Way
Elk Grove, California 95758
(916) 684-2993

Responsible Party #2 Contact Person Contact Company

Paulette Satterley
Na
14601 Guadalupe Drive
Rancho Murieta, Ca 95683
(916) 354-2241

Responsible Party #3 Contact Person Contact Company

Paula Champion-braig
Na
280 Mountain Avenue
Piedmont, Ca 94611

Responsible Party #4 Contact Person Contact Company

Mr. Michael Champion
Na
P. O. Box 489
Moss Beach, C A 94038

Responsible Party #5 Contact Person Contact Company

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail # Z 115 363 882
10/25/1999 Z 115 363 881

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Stoddard Solvent
Source : Federally Funded
MultiRPs?: Yes

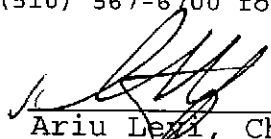
Paulette Satterley
Na
14601 Guadalupe Drive
Rancho Murieta, Ca 95683

Responsible Party (RP) # 3
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Linda Champion as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date 10/26/99

Please Circle One Add Delete Change

Reason: RP #3 + #4

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

7 115 363 881

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to P. SACORLEY	
Street & Number 14601 GUADALUPE DR	
Post Office, State, & ZIP Code RANCHO MURIETA, CA	
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	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

7 115 363 882

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to CITY OF PETERS CLEANERS	
Street & Number 3516 ADRIANE ST	
Post Office, State, & ZIP Code DALLAS, TX 75208	
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	
TOTAL Postage & Fees	\$
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):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to:
PAULETTE SACORLEY
MA
14601 GUADALUPE DR.
RANCHO MURIETA, CA 95683

4a. Article Number

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

7. Date of Delivery
10/29/99

5. Received By: (Print Name)
Paulette Sacorley

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

6. Signature (Addressee or Agent)
P. Sacorley

PS Form 3811, December 1994

102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

10/25/1999

LIST OF RESPONSIBLE PARTIES FOR

SITE	StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608	Date First Reported 10/04/1990 Substance: Stoddard Solvent Petroleum (X) Yes Source: F
------	--	---

Mr. Don Rotocil
Current Property Owner
2200 Browning Street
Berkeley, CA 94702
(510) 526-0887

Responsible Party #1 Property Owner
--

Mr. Frank Champion
And Ms. Linda Champion
9441 Laguna Lake Way
Elk Grove, California 95758
(916) 684-2993

Responsible Party #2 Contact Person Contact Company

Paulette Satterley
Na
14601 Guadalupe Drive
Rancho Murieta, CA 95683
(916) 354-2241

Responsible Party #3 Contact Person Contact Company

Paula Champion-braig
Na
280 Mountain Avenue
Piedmont, CA 94611

Responsible Party #4 Contact Person Contact Company

Mr. Michael Champion
Na
P. O. Box 489
Moss Beach, CA 94038

Responsible Party #5 Contact Person Contact Company



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail #
09/24/1999

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

Notice of Responsibility

StID# 819
City of Paris Cleaning & Dyeing
3516 Adeline St
Oakland, CA 94608

SITE

Date First Reported 10/04/1990
Substance: Gasoline
Source : Federally Funded
MultiRPs?: Yes

Mr. Don Rotocil
Current Property Owner
2200 Browning Street
Berkeley, CA 94702

Responsible Party (RP) # 3
(list of all RP's attached)

Pursuant to Sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified _____ as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notification have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

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 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 Juliet M Shin, Senior Hazardous Materials Specia at this office at (510) 567-6700 for futher information about the site designation process.

Ariu Levi
Ariu Levi, Chief
Contract Project Director

Date 9/27/99

Please Circle One Add Delete Change

Reason: Added RP# 3

C: Lori Casias, SWRCB
Juliet M Shin, Senior Hazardous Materials Specia

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/24/1999

LIST OF RESPONSIBLE PARTIES FOR

SITE	StID: 819 City of Paris Cleaning & Dyeing 3516 Adeline St Oakland, CA 94608	Date First Reported 10/04/1990 Substance: Gasoline Petroleum (X) Yes Source: F
Ms. Leah Champion P.O. Box 489 Moss Beach CA 94038	Responsible Party #1 Property Owner	
Mr. Frank Champion And Ms. Lynda Champion 9441 Laguna Lake Way Elk Grove, California 95758 (916) 684-2993	Responsible Party #2 Contact Person Contact Company	
Mr. Don Rotocil Current Property Owner 2200 Browning Street Berkeley, C A 94702 (510) 526-0887	Responsible Party #3 Contact Person Contact Company	

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P 367 604 732

03/09/92
STID# 819

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

Notice of Requirement to Reimburse

Frank Champion
City Of Paris Cleaners
3516 Adeline St.
Oakland C A 94608


Responsible Party
Property Owner

City of Paris Cleaning & Dyeing
3516 Adeline St.
Oakland, CA 94608

Date First Reported 10/04/90
Substance: Gasoline
Petroleum: (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Tom PEACOCK, Supervising Hazardous Materials Specialist at this office if you have any questions concerning this matter.


Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use: Add: X Reason: New Case



02-0111 911155

P 367 604 732

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

PS Form 3800, June 1985 U.S. G.P.O. 1985-234-555

Sent to	Frank Champion
Street and No.	3516 Adeline St.
P.O., State and ZIP Code	Oakland CA 94608
Postage	430-4530
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.29
Postmark or Date	3-13-92 4PM

STID 819 (handwritten)

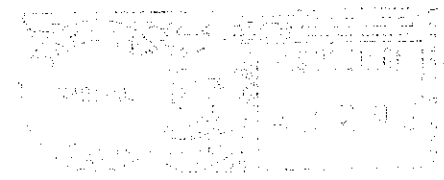
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) **JE** 2. Restricted Delivery (Extra charge)

3. Article Addressed to: STID 819 Frank Champion City of Paris Cleaners 3516 Adeline St. Oakland CA 94608	4. Article Number
5. Signature - Address X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

ALAMEDA COUNTY
HEALTH CARE SERVICES AGENCY

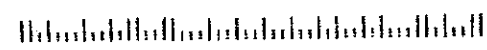
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621



[Handwritten signature]
RECEIVED
POST OFFICE
OAKLAND, CA

Frank Champion
City of Paris Cleaners
3516 Adeline St.
Oakland CA 94608

[Handwritten signature]



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/o. 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 service (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to: **STID 819**
Paulette Sathenley
Ne
14601 Guadalupe Dr.
Rancho Murieta, CA 95683

4a. Article Number

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

7. Date of Delivery **12/4/99**

5. Received By: (Print Name)
Robert Sathenley

6. Signature (Addressee or Agent)

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

Thank you for using Return Receipt Service.