

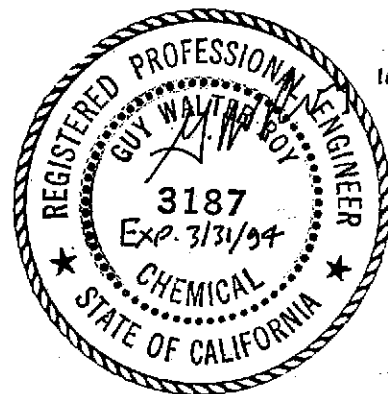
**CONTAMINATED SOIL OVER-EXCAVATION
FINAL REPORT
3635 13th Avenue
Oakland, CA 94610**

Prepared For

**John Williamson
1511 Wellington Street
Oakland, CA 94602**

Prepared By

**All Environmental, Inc.
2641 Crow Canyon Road, Suite 5
San Ramon, CA 94583**



11/29/93

November 18, 1993

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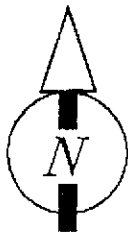
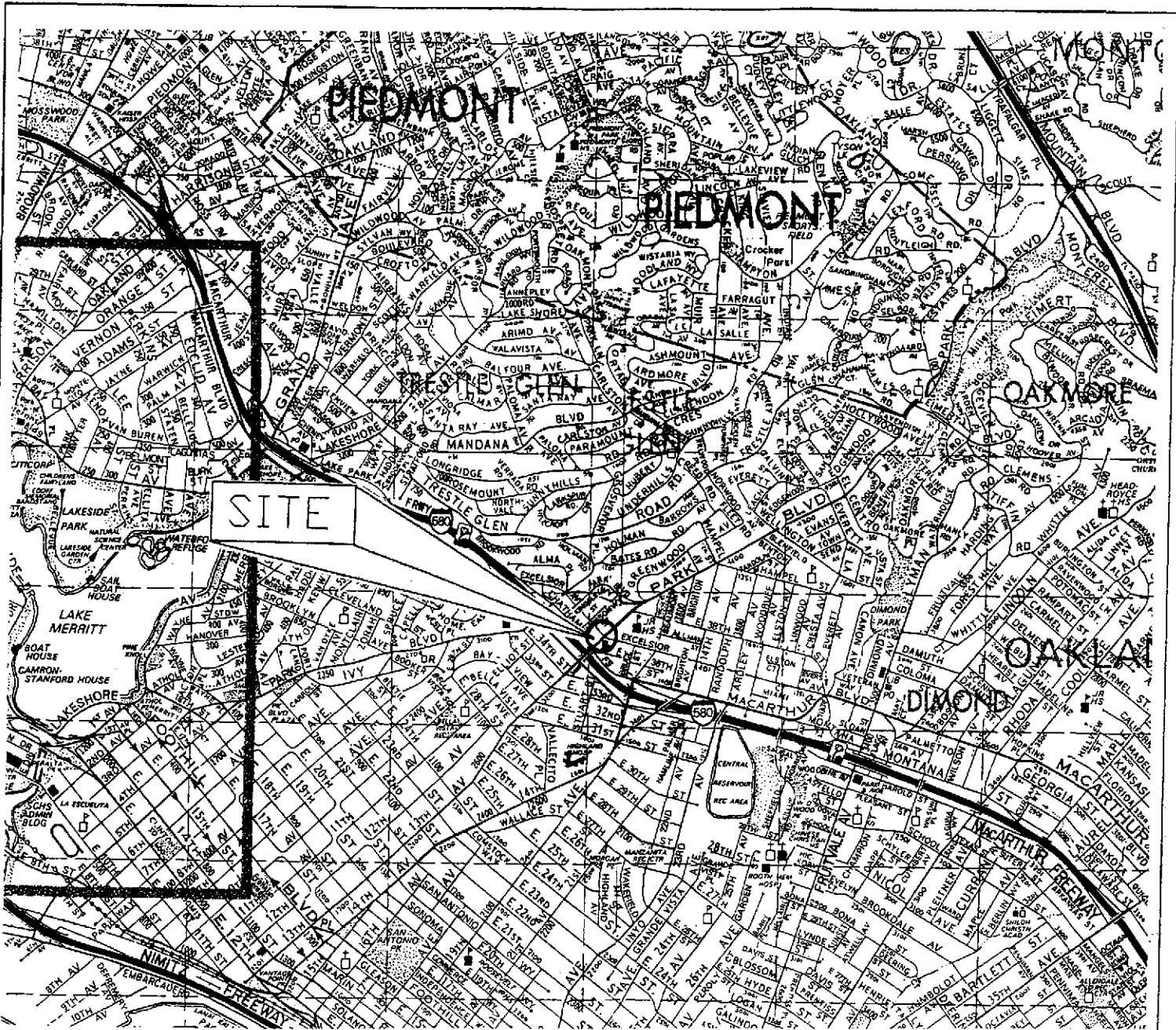
1.0 INTRODUCTION

All Environmental Inc. (AEI) has prepared this final report to document the building demolition, hydraulic lift removal and contaminated soil over-excavation performed at 3635 13th Avenue in Oakland, California (Figure 1: Site Location Map and Figure 2: Site Map). A 1,000-gallon gasoline tank, a 500-gallon gasoline tank, and a 250-gallon waste oil tank were removed from the site by Aqua Science Engineers on December 15, 1992. The waste oil tank was reported as being heavily pitted and having numerous holes.

At the time of tank removal, soil samples taken from the tank excavation showed the waste oil tank to be the primary concern at this site. Laboratory analyses indicated concentrations of oil & grease to be 8,200 parts per million (ppm), with 290 ppm TPH-gasoline, and 255 ppm lead. Concentrations of gasoline greater than 100 ppm are considered "Actionable" levels by the Tri-Regional Board Guidelines. All Environmental, Inc. was retained by the property owner to perform contracting and consulting services to overexcavate the contaminated soil, remove and dispose of two hydraulic lifts from inside the repair shop, backfill the excavation, and dispose of the contaminated soil at a Class III Landfill.

2.0 PERMITS AND NOTIFICATIONS

An Underground Storage Tank Unauthorized Release / Contamination Site Report was filed with the Alameda County Health Care Services Agency (ACHCSA) in response to the ACHCSA request dated June 22, 1993. Cal OSHA and the Bay Area Air Quality Management District were notified by fax of the over-excavation and building demolition activities five days prior to the project initiation date. A building permit was obtained from the City of Oakland Development Services Department on September 10, 1993 for demolition activities on the site. Copies of the notification documents and building permit are contained in Appendix A.



From Thomas Bros. Map - 1993

ALL ENVIRONMENTAL, INC.
2641 CROW CANYON RD, SAN RAMON

SCALE: 1 INCH = 2,200 FT.

APPROVED BY:

DRAWN BY: S.P.

DATE: 11/22/93

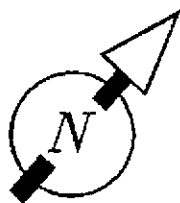
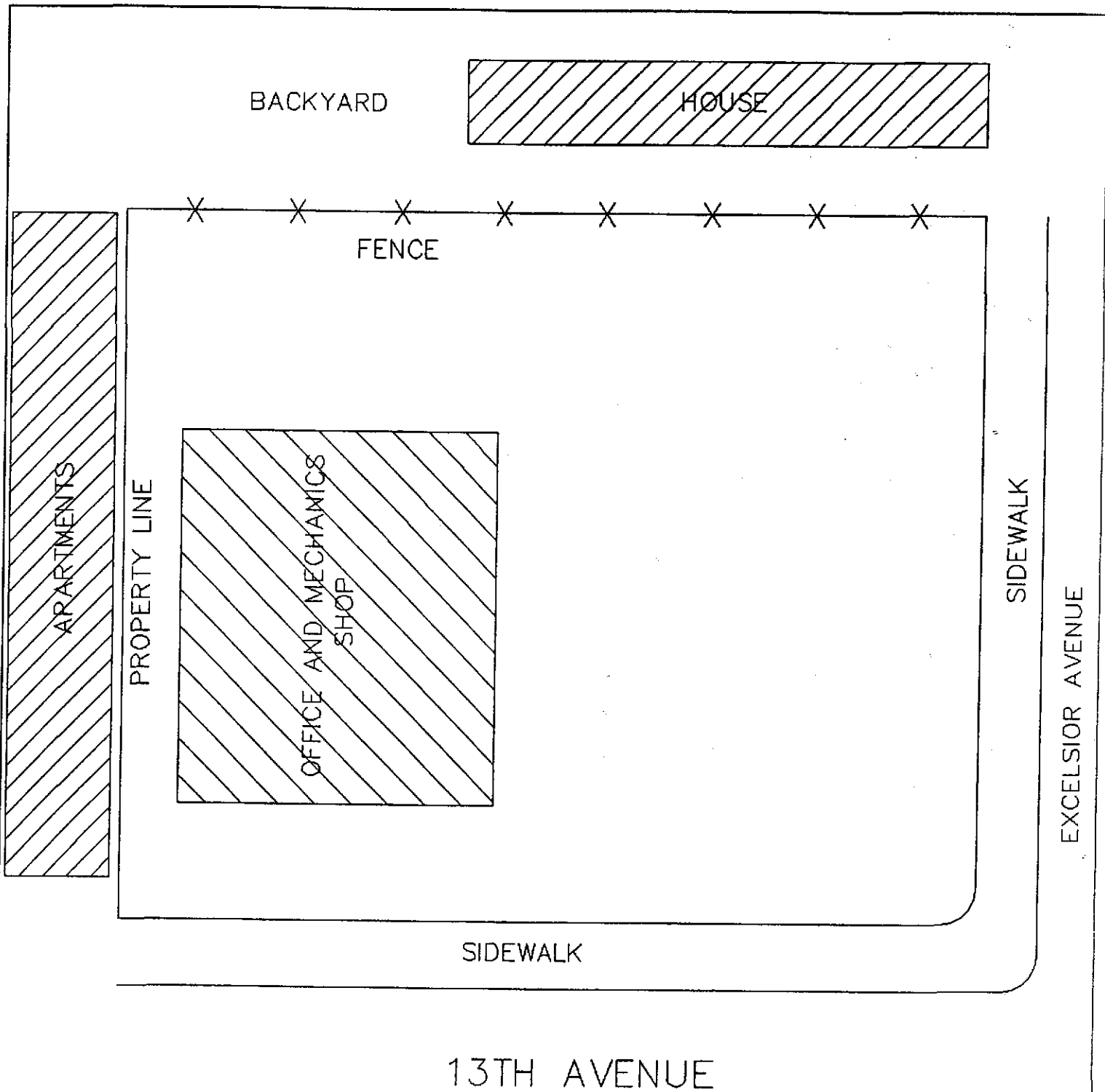
REVISED: S.P.

SITE LOCATION MAP

3635 13TH AVENUE

DRAWING NUMBER:

FIGURE 1



ALL ENVIRONMENTAL, INC.			
2641 CROW CANYON RD, SAN RAMON			
SCALE: NOT TO SCALE	APPROVED BY:	DRAWN BY: S.P.	
DATE: 11/19/93		REVISED: S.P.	
SITE MAP			
3635 13TH. AVENUE			DRAWING NUMBER: FIGURE 2

3.0 SITE DEMOLITION

As the tank removal report dated January 20, 1993 detailed, the area of the waste oil tank had significant soil contamination. In response to ACHCSA recommendations for further soil excavation, AEI found the most efficient, cost-effective method would require the removal and disposal of office and shop building materials, concrete slabs, and associated ground cover. Site demolition was initiated on September 13, 1993.

4.0 EXCAVATION OF CONTAMINATED SOIL AND REMOVAL OF HYDRAULIC LIFTS

All Environmental mobilized on site for overexcavation on September 13, 1993. Project personnel included Steve Peshorn - Project Engineer, Steve DeHope - Construction Superintendent and Dusty Roy - Hazardous Technician.

All Environmental excavated approximately 360 total cubic yards of soil to complete the project. Approximately 260 cubic yards of contaminated soil was removed prior to the initial sampling of the excavation bottom and sidewalls. Results from the sample analysis indicated that further soil removal would be required on the southeast end of the excavation. An additional 100 cubic yards of soil was removed until no further odor or stained soil was apparent. Soil samples were then taken from the southeast end of the excavation and newly stockpiled soil. Laboratory analyses of these soil samples confirmed that ~~the contaminated~~ soil was successfully over-excavated.

Native material around the tank consisted primarily of a gray-blue stiff clay with some silt to a depth of 18 feet. Greenish soil was encountered from 9' to 18' depth below grade. There

was a mild odor of aged gasoline and a noticeable amount of staining within the soil that was excavated. There was a small amount of water in the bottom of the pit at 18' below ground surface.

5.0 SAMPLING AND ANALYSES

On September 13 & 14, samples of the excavation sidewalls (SWN, SWS, SWE, SWW), one sample along the bottom of the excavation (EB-19), and one sample from under each of the hydraulic lifts (HLN, HLS) were taken. Each (4) stockpile of excavated soil was sampled by taking four different soil samples at different depths and locations within the stockpile and compositing these four samples at the laboratory (STKP 1-4, STKP 5-8, STKP 9-12 & STKP 13-16). Analytical results are tabulated on the following page (Table I: Initial Soil Sample Results) and a copy from the laboratory is enclosed in Appendix C. Figure 3 shows the initial sample locations. Following the continued overexcavation of the southeast wall, one soil sample was taken from the sidewall (EW-12) and two composite samples were taken from the stockpiled soil (STKP 1-4 & STKP 5-8). Analytical results from these samples can be found in Table II: Southeast Wall Overexcavation Sample Results and a copy from the laboratory is enclosed in appendix C. Figure 4 shows the final sample locations.

Table I: Initial Soil Sample Results

9-13 to 14-93

Sample I.D.	Gasoline (mg/kg) ✓	Hydraulic Fluid (mg/kg)	Benzene (ug/kg) ✓	Toluene (ug/kg)	Ethyl Benzene (ug/kg)	Total Xylenes (ug/kg)	Lead (mg/kg)	Oil & Grease (mg/kg)
EB-19	N.D. ✓	---	N.D. ✓	N.D.	N.D.	N.D.	6.9 ✓	N.D. ✓
SWE	400 ✓	---	1000 ✓	1500	1600	5100	6.2 ✓	2100 ✓
SWN	N.D. ✓	---	N.D. ✓	N.D.	N.D.	N.D.	9.1 ✓	N.D. ✓
SWS	9.4 ✓	---	24 ✓	36	38	120	4.7 ✓	N.D. ✓
SWW	N.D. ✓	---	N.D. ✓	N.D.	N.D.	N.D.	8.4 ✓	N.D. ✓
HLN	---	N.D. ✓	---	---	---	---	---	---
HLS	---	270 ✓	---	---	---	---	---	---
STKP 1-4*	6.0 ✓	---	15 ✓	23	24	77	8.7 ✓	740 ✓
STKP 5-8*	19 ✓	---	48 ✓	71	76	240	6.7 ✓	380 ✓
STKP 9-12*	27 ✓	---	68 ✓	100	110	340	15 ✓	1300 ✓
STKP 12-16*	17 ✓	---	43 ✓	64	68	220	12 ✓	1400 ✓

BACKYARD



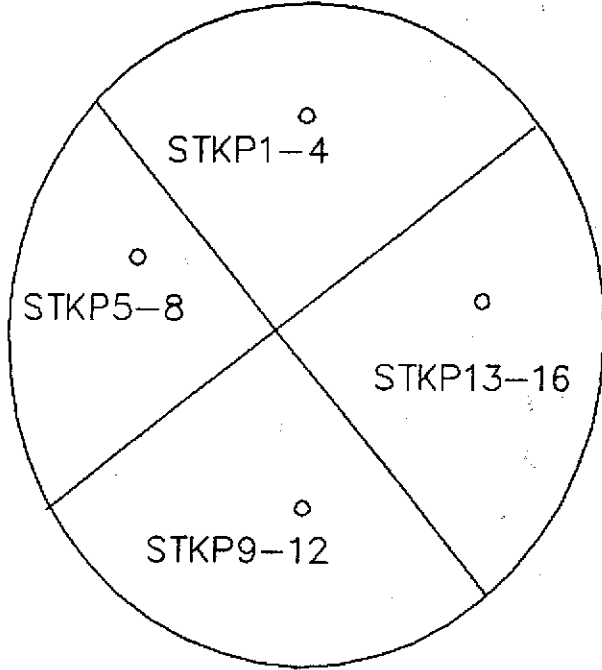
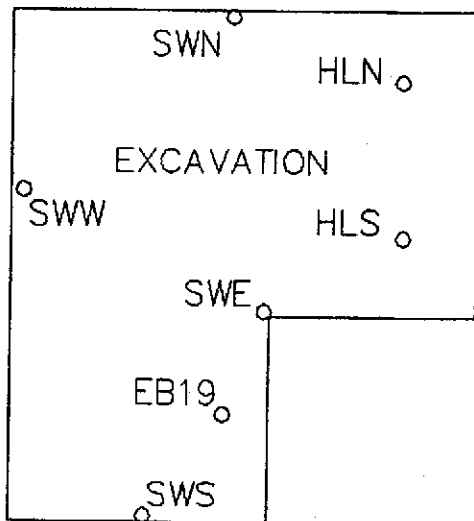
HOUSE

FENCE

INITIAL STOCKPILED SOIL

APARTMENTS

PROPERTY LINE

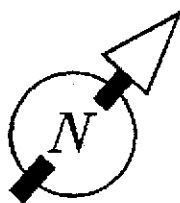


SIDEWALK

EXCELSIOR AVENUE

SIDEWALK

13TH AVENUE



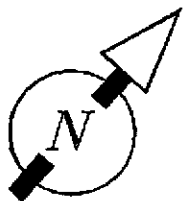
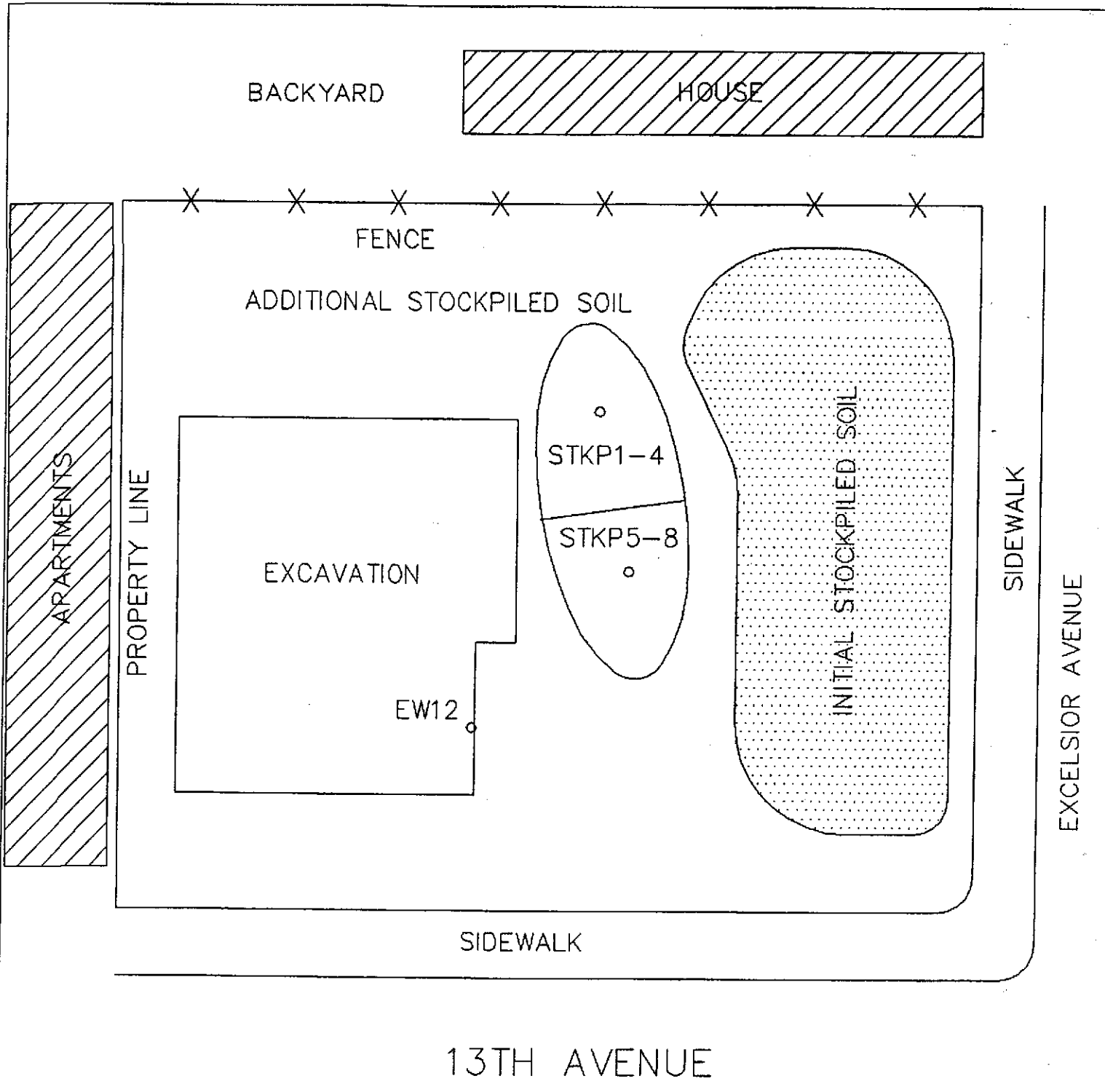
ALL ENVIRONMENTAL, INC.
2641 CROW CANYON RD, SAN RAMON

DATE: 11/19/93	APPROVED BY:	DRAWN BY: S.P.
		REVISED: S.P.

INITIAL SAMPLE LOCATION MAP

3635 13TH. AVENUE

DRAWING NUMBER:
FIGURE 3



ALL ENVIRONMENTAL, INC. 2641 CROW CANYON RD, SAN RAMON		
SCALE: NOT TO SCALE	APPROVED BY:	DRAWN BY: S.P.
DATE: 11/19/93		REVISED: S.P.
FINAL SAMPLE LOCATIONS		
3635 13TH. AVENUE		DRAWING NUMBER: FIGURE 4

Table II: Southeast Wall Overexcavation Sample Results

9-21-93

Sample I.D.	Gasoline (mg/kg)	Hydraulic Fluid (mg/kg)	Benzene (ug/kg)	Toluene (ug/kg)	Ethyl Benzene (ug/kg)	Total Xylenes (ug/kg)	Oil & Grease (mg/kg)
EW-12	N.D. /	N.D. /	N.D. /	N.D. /	N.D. /	N.D. /	26 /
STKP (1-4)*	39 /	----	10 /	15 /	19 /	63 /	620 /
STKP (5-8)*	25 /	----	6.5 /	9.6 /	12 /	40 /	450 /

(mg/kg) = ppm or parts per million

(ug/kg) = ppb or parts per billion

N.D. = Not Detected

---- = Not Analyzed For

* Compositied soil samples

Soil samples were collected by driving a 6-inch by 2-inch stainless steel tube into the soil using a wooden mallet. The samples of stockpiled material were taken as a composite of four sub-samples. The four samples were composited as one sample at the laboratory. All soil samples were secured using aluminum foil, teflon caps and sealed with duct tape, then put on ice and transported back to the office where they were placed in cold storage until the laboratory picked up the samples. All samples were transported under chain of custody procedures to Priority Environmental Labs in Milpitas, California.

6.0 CONTAMINATED SOIL DISPOSAL

The stockpile of contaminated soil was profiled for disposal into the Vasco Road Landfill in Livermore, California. The landfill required an STLC CAM 17 metals analysis for the stockpiled soil prior to acceptance for disposal. Results of this analysis yielded acceptable levels of the 17 metals tested for. STLC CAM 17 soil analysis results can be found in Appendix C. **The 360 yards of contaminated soil was loaded onto a truck and transported**

under a Non-Hazardous Waste Manifest to the Vasco Road Landfill on November 9, 1993.

Copies of the Non-Hazardous Waste Manifests can be found in Appendix D. ✓

260 yd³ ✓

7.0 BACKFILLING AND RESURFACING

The excavation was backfilled with 440.75 tons of clean import fill that was placed in one foot lifts and compacted to approximately 90% compaction to prevent long term settling.

The site was not resurfaced at the request of the property owner.

8.0 DISCUSSION AND CONCLUSIONS

All Environmental, Inc. provided demolition services for the removal of the office, shop building materials and concrete slab. Two hydraulic lifts were removed, transported and disposed of at an appropriate licensed facility and as per ACHCSA request, soil samples were collected and analyzed from each of former lift areas. Sample results from the north hydraulic lift area yielded non-detectable concentrations of TPH-hydraulic fluid in the soil, while soil sample results from the south hydraulic lift area showed 270 ppm of TPH-hydraulic fluid. 260 cubic yards of contaminated soil was subsequently excavated from around the south hydraulic lift area and the former waste oil tank pit. The soil was removed and properly disposed of at Vasco Road Landfill in Livermore. Soil sampling following the overexcavation showed that further overexcavation was necessary. ✓

According to the guidelines issued by the California Regional Water Quality Control Board (RWQCB) the presence of 100 ppm or more of total petroleum hydrocarbons (TPH) in the soil indicates a confirmed fuel release and are considered "Actionable" levels. Removal and disposal or in-situ remediation is generally required for soils containing greater than 1,000

ppm TPH. Decisions regarding remediation of soil containing between 100 and 1,000 ppm TPH are made on a case-by-case basis, but remediation is commonly recommended for hydrocarbon contamination of over 100 ppm. The maximum concentrations encountered following the initial overexcavation were 400 ppm TPH as gasoline, 1,000 parts per billion (ppb) of benzene, 1,500 ppb of toluene, 1,600 ppb of ethyl benzene, 5,100 ppb of total xylenes and 2,100 ppm of oil and grease.

Following the results of the initial overexcavation sample analysis, an additional 100 cubic yards of soil was overexcavated along the southeast wall. Further soil sampling yielded non-detectable levels of contamination within the excavation. However, a small amount of water was encountered on the bottom of the pit at 18' below ground surface.

Laboratory analyses, of all the soil samples taken, indicate that soil remediation has been completed. To determine whether petroleum hydrocarbons have impacted groundwater beneath the site, AEI recommends that three monitoring wells be placed on the site in a triangulated configuration with one monitoring well located within 10 feet of the excavation in the downgradient position.

9.0 REPORT LIMITATIONS

This report presents a summary of work completed by All Environmental, Inc., including observations and descriptions of site conditions encountered. Where appropriate, it includes analytical results for samples taken during the course of the work. The number and location of samples are chosen to provide required information, but it cannot be assumed that they are representative of areas not sampled. All conclusions and/or recommendations are based on these analyses and observations, and the governing regulations. Conclusions beyond those stated and reported herein should not be inferred from this document.

All Environmental, Inc. warrants that all services were performed in accordance with generally accepted practices, in the environmental engineering and construction field, which existed at the time and location of the work.

APPENDIX A

PERMITS AND NOTIFICATION DOCUMENTS



11-10-93
 out date to
 /hc

BUILDING PERMIT APPLICATION
 THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED & FEES PAID.

OWNER	BUILDING ADDRESS 3635 13 TH AVE
	TRACT BLOCK PAGE LOT PARCEL
	NAME 70th Williamcn
OWNER	ADDRESS 1511 Wellington St
	CITY STATE ZIP Oakland CA 94602
	TENANT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE)
ARCH. ENGR.	NAME LICENSE #
	ADDRESS PHONE
	CITY STATE ZIP
CONTRACTOR	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.
	LICENSE AND CLASS 654919/A + 11A51 BUSINESS
	CONTRACTOR NAME All Environmental Inc
	ADDRESS 2641 Crow Canyon Rd #5
	CITY STATE ZIP PHONE San Ramon CA 94583 8203224
OWNER/BUILDER	SIGNATURE [Signature] DATE 9/11/93
	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):
	<input type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business Professions Code; The Contractor's License Law does not apply to an Owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale).
	<input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or apartments thereon, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code).
	<input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code; The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).
WORKER'S COMPEN	<input type="checkbox"/> I am exempt under Sec. _____, B&PC, for this reason _____
	Signature of Owner or Authorized Agent DATE
	I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (See 3800, Lab. C.).
	Policy Company Name
	<input type="checkbox"/> Certified copy is hereby furnished. <input type="checkbox"/> Certified copy is filed with the city building inspection department. Signature DATE [Signature] DATE 9/11/93 (This section need not be completed if the permit is for one hundred dollars \$100 or less.)
LENDER	I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation Laws of California. Signature DATE
	NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Worker's Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.
	I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.)
APPLICANT	LENDERS NAME ADDRESS
	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THE INSPECTION.
	I hereby agree to save, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses which may accrue against the City in consequence of the granting of this permit or from the use or occupancy of any sidewalk, street or subsidewalk, or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted.
	<input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Owner Signature of Contractor or Owner or Agent DATE [Signature] DATE 9/11/93 Also PRINT NAME PIS
	<input type="checkbox"/> Authorized Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner Address of Agent CITY STATE ZIP TELEPHONE

Permit No. B
 Call for Inspection 238-3444
 DATE ISSUED 9-10-93 DATE FILED 9/23/93
 NEW REPAIR ADDITION
 MOVE ALTERATION DEMOLITION
 OTHER

DESCRIBE BRIEFLY ALL PROPOSED CONSTRUCTION WORK.
 Abandoned Gas Station
 DEMO OFFICE STRUCTURE
 12' x 20' (A) 2ND FLOOR

Plan Filed Survey Filed
 Size of Bldg. No. of Stories
 Number of Units Height at Highest Point
 Proposed Use of Bldg. Vacant lot
 Present Use of Bldg. Gas Station II
 Number of Bldgs. on lot C404 Code
 Lot Size
 TYPE OF BUILDING I II III IV F.R. H.T. 1 hr
 OCCUPANCY GROUP A B C E H I R M
 FIRE SPRINKLERS SPECIAL INSPECTION REQUIRED
 ZONING R 70C M S
 Roof Covering
 Exterior Wall
 Valuation of Proposed Work \$
 Include all labor and materials, all lighting, heating, ventilation, water supply, plumbing, electrical, fire sprinklers, elevator equipment therein and thereon.

OFFICIAL USE ONLY	
VALUE:	Appl. Fee \$ 40.00
	Contractor Fee \$ 40.74
	B.R. Tax \$
	Pl. Pl. Rev. \$
	TOTAL \$
	General Fee \$ 193.90
	Contractor Fee \$ 275.00
	State Regs \$
	Mic. Sur. \$ 6.20
	SMIP \$
ADDITIONAL COST:	Address Fee \$
	TOTAL \$ 435.84
	Add'l Fee \$
	Add'l Ch Fee \$
	Add'l State Regs \$
	Add'l Sur. \$
	Add'l SMIP \$
	TOTAL \$

DATE	LICENSE/OWNER VERIFICATION	DATE
34	ZONING & PLANNING NO.	7/2/93
	FIRE MARSHAL	
	HEALTH DEPT.	
	PORT OF OAKLAND	
	HOUSING CONSERVATION	
	MOVING PERMIT NO.	
	SPECIAL ACTIVITY NO.	
	BE & A ITEM NO.	
	HA & AB RES. NO.	
	HANDICAP APPEALS	
	OTHER	

APPL RECD BY [Signature] DATE 9-17-93 PLAN CHECKED BY [Signature] DATE N/A
 PLANS PROCESSED BY [Signature] PERMIT ISSUED BY [Signature]
 FINAL INSPECTION

PERMIT NO. B 9302199 DISTRICT NO. 21 ADDRESS 3635 13th Ave DATE FILED 9-23-93



11526-001
LIC not ✓

BUILDING PERMIT APPLICATION

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED & FEES PAID.

OWNER	BUILDING ADDRESS	3635 13 TH STREET AVE		
	TRACT	BLOCK PAGE	LOT PARCEL	
	NAME	John Williamson		
OWNER	ADDRESS	1511 Wellington ST N/A		
	CITY	STATE	ZIP	PHONE
	Oakland CA 94602			
	TENANT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE)			
ARCH. ENGR.	NAME	LICENSE #		
	ADDRESS	PHONE		
	CITY	STATE	ZIP	
CONTRACTOR	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.			
	LICENSE AND CLASS	654919/A & HA CONTRACTOR BUSINESS		
	CONTRACTOR NAME	All Environmental Inc		
	ADDRESS	2641 Cow Canyon Rd #5		
OWNER/BUILDER	CITY	STATE	ZIP	PHONE
	San Ramon CA 94583 510820322			
	SIGNATURE	DATE		
	Dusty Ross 9/16/93			
OWNER/BUILDER	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):			
	<input type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code). The Contractor's License Law does not apply to an Owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.			
	<input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or appurtenances thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code).			
	<input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project. (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).			
WORKER'S COMPEN	<input type="checkbox"/> I am exempt under Sec. _____, B.P.C. for this reason _____			
	Signature of Owner or Authorized Agent _____ DATE _____			
	I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec 3800, Lab. C.).			
	Policy # _____ Company Name _____			
DER	<input type="checkbox"/> Certified copy is hereby furnished.			
	<input type="checkbox"/> Certified copy is filed with the city building inspection department.			
	Signature _____ Date _____			
	Dusty Ross 9/16/93			
APPLICANT	(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)			
	I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation Laws of California.			
	Signature _____ Date _____			
	NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Worker's Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.			
APPLICANT	I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.)			
	LENDERS NAME _____			
	LENDERS ADDRESS _____			
	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THE INSPECTION.			
APPLICANT	I hereby agree to serve, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses which may accrue against the City in consequence of the granting of this permit or from the use or occupancy of any sidewalk, street or subsidewalk, or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted.			
	<input type="checkbox"/> Contractor			
	<input checked="" type="checkbox"/> Owner			
	Signature of Contractor or Owner or Agent _____ Date _____			
APPLICANT	Also PRINT NAME _____			
	<input type="checkbox"/> Authorized Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner			
	Address of Agent _____ CITY _____ STATE _____ ZIP _____ TELEPHONE _____			
	REV. 4/92			

Permit No. B
Call for Inspection 238-3444

DATE ISSUED 9.10.93 DATE FILED 7/23/93

NEW REPAIR ADDITION
 MOVE ALTERATION DEMOLITION
 OTHER

DESCRIBE BRIEFLY ALL PROPOSED CONSTRUCTION WORK.

ABANDONED GAS STATION -
REMOVE CONCRETE DEMO
MECHANICAL SHED
15 x 25' (B)

Plan Filed _____ Survey Filed _____
Size of Bldg. 375 sq ft No. of Stories _____
Number of Units _____ Height at Highest Point _____
Proposed Use of Bldg. Vacant lot
Present Use of Bldg. Shed
Number of Bldgs. on lot _____ C404 Code _____
Lot Size _____

TYPE OF BUILDING I II III IV V F.R. H.T. 1 hr. A
OCCUPANCY GROUP A B C D H I R M
FIRE SPRINKLERS _____ SPECIAL INSPECTION REQUIRED _____
ZONING R 70C M S
Roof Covering _____
Exterior Wall _____

Valuation of Proposed Work \$ _____
Include all labor and materials, all lighting, heating, ventilation, water supply, plumbing, electrical, fire sprinklers, elevator equipment therein and thereon.

OFFICIAL USE ONLY

VALUE: Appl. Fee \$ 40
Checking Fee \$ 42.30
B.R. Tax \$ _____
PI. Pl. Rev. \$ _____
TOTAL \$ _____

General Fee \$ 137.40
Checking Fee \$ 225
State Regs \$ _____
Mic. Sur. \$ 6.87
SMIP \$ _____
Address Fee \$ _____
TOTAL \$ 1151.57

ADDITIONAL COST:
\$ _____
Date _____
Add'l Fee \$ _____
Add'l Ch Fee \$ _____
TOTAL VALUE: \$ _____
Add'l State Regs \$ _____
Add'l Sur. \$ _____
Add'l SMIP \$ _____
TOTAL \$ _____

DATE	LICENSE/OWNER VERIFICATION	DATE
9/16/93	ZONING & PLANNING NO.	7/23/93
	FIRE MARSHAL	
	HEALTH DEPT.	
	PORT OF OAKLAND	
	HOUSING CONSERVATION	
	MOVING PERMIT NO.	
	SPECIAL ACTIVITY NO.	
	BE & A ITEM NO.	
	HA & AB RES. NO.	
	HANDICAP APPEALS	
	OTHER -	

APPL RECD BY _____ DATE _____ PLAN CHECKED BY _____ DATE _____

PLANS PROCESSED BY _____ DATE _____ PERMIT ISSUED BY _____ DATE _____

FINAL INSPECTION

PERMIT NO. B 9302796
 DISTRICT NO. 5A
 ADDRESS 3635 13th Ave
 DATE FILED 7-23-93

Permit Application and Job Notification Form

Construction Demolition Trenches Excavation Buildings Structures Falsework Scaffolding

State of California
Department of Industrial Relations
Division of Occupational Safety & Health

Concord District Office
Date: ___/___/___
PERMIT No. _____

Sections 6500, 6501 and 6502 of the California Labor Code require that certain activities which by their nature involve substantial risk of injury may not be performed without a permit issued by DOSH. The Labor Code requires that the applicant supply, and that the Division review,

information necessary to evaluate the safety of the worksite subject to permit requirements. A permit will not be issued until evidence has been demonstrated that the place of employment will be safe and healthful.

Applicant refers to the employer applying for the Permit

Employer: All Environmental, Inc.
Address: 2641 Crow Canyon Rd. #5
San Ramon CA 94583
Phone: 510-820-3224

Project Safety Contact: Dustin Roy
Employer's Representative: Steve DeHoe
Title & Phone No: Const. Sup. 510-820-3224
Employer's State Contractor's License No. 654919

Check Applicable Items:

Applicant refers to a knowledgeable person in a position of authority and responsibility for the activity to be covered by this permit.

Applicant is:

- General Building Contractor
 General Engineering Contractor
 Specialty Contractor
Specialty Contractor Type: HAZ
 Other: _____

General Contractor Option
Initial this blank if applicant elects to assume responsibility for obtaining a single permit to cover one multi-employer project, e.g., a high-rise construction project. The duties of employers at the site to obey safety and health laws are not changed by this section. A list of employers on site will be attached by the Division to this application and the list will be updated as necessary.

Type of Permit Sought:

- Annual
 Single Project
 Job Start Notification Only
 Provisional Permit [PLAN CHECK ONLY]

Multiple Project. (If Projects to be covered are similar in all important aspects; work is performed by the same employer; and information concerning each project covered is provided.)

For:

- Construction of: Building Structure
 Demolition of: Building Structure
 Scaffolding and/or Falsework and/or Vertical Shoring
 Tower Crane Erection
 Trench and/or Excavation

Underground Services Alert # 273031
(DIGALERT 1-800-642-2444) Northern CA
(DIGALERT 1-800-422-4133) Southern CA

Any permit based on this application is issued with the understanding that the applicant has knowledge of occupational safety and health orders applicable to the project(s) described in this application and attachments, and that the applicant and supervising personnel will take special care to insure compliance with safety orders reviewed with the applicant by the Division in the application process.

4) The applicant understands that under the permit program, DOSH schedules routine inspections by authorized personnel for the purpose of verifying that holders of permits are meeting their obligation to provide a safe work place for their employees. The Division reserves the right to revoke a permit if it is unable to promptly verify compliance with the terms and conditions of the permit and its issuance.

Issuance of the permit is also conditional upon the following:

- 1) Upon initiation of any new project not described in this application, the holder of an annual permit will provide the Division with a completed Project Description Form describing the new project prior to the start of work, preferably at least one week in advance of start-up date. A phone call may be used to meet the deadline but will not be considered valid notice unless followed in writing by mailing a completed Project Description Form.
- 2) The applicant has implemented a written accident prevention program and Code of Safe Practices which meet the requirements of 8 California Administrative Code, 1509.
- 3) The Division will be notified of significant changes in information provided with this application if such changes might affect the safety of the activity.

5) The applicant understands that failure to comply with any of the above listed conditions for obtaining a permit could result in denial, suspension or revocation of the permit. Employers may appeal these actions to the Director of the Department of Industrial Relations (California Labor Code, Section 6500 et. seq., and 8 California Administrative Code, Section 341).

Is the applicant conducting any activities to be covered by this permit application in partnership or joint venture with any other persons or corporations conducting activities requiring permits? Yes No
If "yes" give details: _____

Have any permits for any project to be covered by the permit application previously been applied for or obtained? Yes No If "yes," when
Aug. 93 from what district office Oakland Pub. Works
in whose name All Env. Inc.

Permit Application and Job Notification Form (Continued)

JOB NOTIFICATION

Specific jobsite location 3635 13th Ave. Field phone 510-914-9763
 Office phone 510-820-3224
 Nearest major cross street MacArthur No. of employees 4
 City Oakland Starting date 9-13-93
 County Alameda Anticipated completion date 9-17-93
 Name and title of jobsite supervisor Steve DeLope High Voltage Lines in Proximity: No Yes
Const. Sup.

TYPE OF JOB

INSTRUCTIONS: THE APPROPRIATE ITEM(S) must be completed and signed by a person knowledgeable about the project and/or jobsite to be covered by a permit. Please fill in or check off blanks where appropriate.

Construction of: Building Structure Height Basement No. Stories
 Type: Steel Frame Tiered Concrete Tilt-up Wood Frame Liftslab Precast Slip Form
 Job Description: _____
 [See 8CCR1709-30,38;Appendix, A Plate A-2-a&b]

Demolition of: Building Structure Height 10' No. of Stories 1
 Steel Frame Wood Frame Concrete Asbestos Involved: Yes No
 Method Used: Demolition Ball Clam Explosives Loader/Tractors Other _____
 [See 8CCR1734-37]

Scaffolding-Falsework-Vertical Shoring: Maximum Height Maximum Span Material
 Job Description: _____
 (Metal > 125' or Wood > 60' requires design by California Civil Engineer, plans at site.) [See 8CCR1644(c)(7)]
 Job Description: _____

Tower Crane Erection/Dismantling: Make and model _____
 Capacity _____ Height _____ Date of Erection ___/___/___ OverHead High Voltage? [Y/N]
 Foundation and/or Support(s) for Crane Designed/Constructed by _____
 Will crane be stepped or jumped? Yes No Estimated Date ___/___/___ [See 8CCR4966]
 Name of crane certifier _____
 Other _____

Trench/Excavation: Dimensions: Depth 8' Width 20' Length 20' Utilities? [Y(N)]
 Soil Analysis will be done Y N Slope Excavation 1 1/2 to 1 Y N
 Name of Competent Person(s): _____
 Protective System: Shoring Sloping Trench Shield Alternate _____
 Job Description: _____

[Alternate Plan or excavation greater than 20 feet deep must be designed by Reg. Professional Engineer] [See 8CCR1540-47]

Fee _____
 Paid _____
 Approved _____
 Conference _____
 Other _____

I hereby certify that, to the best of my knowledge, the above information and assertions are true and correct and that I/the applicant have knowledge of and will comply with the foregoing.

Signature: _____
 Title: _____
 Date: ___/___/___



BAY AREA AIR QUALITY MANAGEMENT DISTRICT

939 ELLIS STREET
SAN FRANCISCO, CALIFORNIA 94109
(415) 771-6000

Regulation 11, Rule 2 Asbestos Demolition/Renovation NOTIFICATION FORM

BAAQMD # _____

Site Information	
Site Address	3635 13 th Ave.
City	Oakland
Zip	94610
Owner Name	Mr. John Williamson
Phone	(510) 769-0100
Specific Location of Project	entire property
<input type="checkbox"/> Single Family Dwelling <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Apartment Building <input type="checkbox"/> Government Building <input type="checkbox"/> School <input type="checkbox"/> Renovation <input type="checkbox"/> Demolition - Fire Training Yes _____ No _____ <input type="checkbox"/> Planned Renovation* (as per Reg. 11-2-216) <input type="checkbox"/> Weekend Work <input type="checkbox"/> Night Work (After 5 PM) *(Attach Work Schedule) <input type="checkbox"/> Cumulative Renovations (each less than 100 square or linear feet)	
Start Date	Completion Date
Material Description:	sheet metal, one story buildings (2), no asbestos
Method(s) of Removal:	tractors
<input type="checkbox"/> Check box if dry removal. In addition to filling this form, please attach a letter requesting conditional approval for dry removal. (This includes, but is not limited to, shot/bead blasting of mastic.)	
Total removal amounts of friable asbestos material only: ** <u>0</u> lin ft / <u>0</u> sq ft / <u>0</u> cu ft	
** Indicate how much of this involves dry, bead-blast, or shot-blast removal: _____	

Contractor Information	
Name	All Environmental
Contact	Greg Gouvea
Mailing Address	2641 Crow Canyon Rd. #5
Phone	(510) 820-3224
City	San Ramon
Zip	94583
Contractor Job No.	1031

Disposal Site Information	
Landfill Name	n/a
City	State

This form prepared by	Greg Gouvea	Title	Project Manager
Company	All Environmental, Inc.	Address	2641 Crow Canyon Rd. #5
City, state, zip	San Ramon CA 94583	Phone	(510) 820-3224



BAY AREA AIR QUALITY MANAGEMENT DISTRICT

939 ELLIS STREET
SAN FRANCISCO, CALIFORNIA 94109
(415) 771-6000

REGULATION 8, RULE 40 Aeration of Contaminated Soil and Removal of Underground Storage Tanks

NOTIFICATION FORM

Removal or Replacement of Tanks
 Excavation of Contaminated Soil

SITE INFORMATION

SITE ADDRESS <u>3635 13th Ave.</u>	
CITY, STATE <u>Oakland CA</u>	ZIP <u>94610</u>
OWNER NAME <u>Mr. John Williamson</u>	
SPECIFIC LOCATION OF PROJECT <u>entire property</u>	
TANK REMOVAL	CONTAMINATED SOIL EXCAVATION
SCHEDULED STARTUP DATE _____	SCHEDULED STARTUP DATE <u>9-13-93</u>
VAPORS REMOVED BY:	STOCKPILES WILL BE COVERED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<input type="checkbox"/> WATER WASH	ALTERNATIVE METHOD OF AERATION (DESCRIBE BELOW):
<input type="checkbox"/> VAPOR FREEING (CO ²)	<u>not aerating</u>
<input type="checkbox"/> VENTILATION	(MAY REQUIRE PERMIT)

CONTRACTOR INFORMATION

NAME <u>All Environmental Inc.</u>	CONTACT <u>Greg Gouvea</u>
ADDRESS <u>2644 Crow Canyon Rd, #5</u>	PHONE (510) <u>820-3224</u>
CITY, STATE, ZIP <u>San Ramon, CA 94583</u>	

CONSULTANT INFORMATION (IF APPLICABLE)

NAME <u>same</u>	CONTACT <u>same</u>
ADDRESS <u>same</u>	PHONE () <u>same</u>
CITY, STATE, ZIP _____	

FOR OFFICE USE ONLY

DATE RECEIVED FAX _____	BY _____	(init.)
DATE POSTMARKED _____	BY _____	(init.)
CC: INSPECTOR NO. _____	DATE _____	BY _____
UPDATE: CONTACT NAME _____	DATE _____	BY _____
BAAQMD N # _____	DATA ENTRY _____	(init.)

APPENDIX B

**LABORATORY ANALYSES AND
CHAIN OF CUSTODY DOCUMENTS**

Priority Environmental Labs

1764 Houret Court
 Milpitas, CA 95035
 (408) 946-9636

S

PEL # 9310009

INV # 24064

Chain of Custody

1764 Houret Ct. Milpitas, CA. 95035 Tel: 408-946-9636

DATE: 10/04/93 PAGE: 1 OF: 1

PROJECT INFORMATION		ANALYSIS REPORT													NUMBER OF CONTAINERS						
PROJECT NAME:		TPH - Gasoline (EPA 5030.8015)	TPH - Gasoline (5030.8015) w/ BTEX (EPA 602.8020)	TPH - Diesel (EPA 3510/3550.8015)	PURGEABLE AROMATICS BTEX (EPA 602.8020)	TOTAL OIL & GREASE (EPA 5520 E&F)	PESTICIDES/PCB (EPA 608.8080)	TOTAL RECOVERABLE HYDROCARBONS EPA 418.1	8010	8270	RCI	STLC CAM 17									
PROJECT MOR: <u>Steve DeHoge</u>		COMP																			
COMPANY: <u>ALI ENV, INC.</u>		Per Mr. Steve DeHoge																			
ADDRESS: <u>2641 Crown Canyon Rd #5</u>		10/04/93																			
CITY: <u>San Ramon, CA 94583</u>		11:05 AM																			
PHONE: <u>510-820-3224 FAX: 510-820-2687</u>																					
SIGNATURE: _____																					
STKP(SA-8A)	PEL(9309062)																				4
STKP(1-4)	PEL(9309045)								X	X	X	X									4
STKP(5-8)																					4
STKP(13-16)																					
INSTRUCTIONS & COMMENTS:																					

PROJECT NAME:	TOTAL # OF CONTAINERS	16
PROJECT NUMBER:	RECD. GOOD COND./COLD	4

RELINQUISHED BY:	1	RECEIVED BY:	1	RELINQUISHED BY:	2	RECEIVED BY:	2
SIGNATURE:	Date:	SIGNATURE:	Date:	SIGNATURE:	Date:	SIGNATURE:	Date:
NAME:	Time:	NAME:	Time:	NAME:	Time:	NAME:	Time:
COMPANY:		COMPANY:		COMPANY:		COMPANY:	



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

September 17, 1993

PEL # 9309045

ALL ENVIRONMENTAL, INC.

Attn: Dusty Roy

Re: Eleven soil samples for Gasoline/BTEX, Hydraulic Fluid, and Oil & Grease analyses.

Project name: Williamson

Project number : 1031

Date sampled: Sept 13-14, 1993

Date extracted: Sept 15-17, 1993

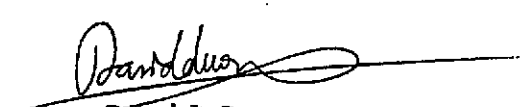
Date submitted: Sept 15, 1993

Date analyzed: Sept 15-17, 1993

RESULTS:

SAMPLE I.D.	Gasoline (mg/Kg)	Hydraulic Fluid (mg/Kg)	Benzene (ug/Kg)	Toluene (ug/Kg)	Ethyl Benzene (ug/Kg)	Total Xylenes (ug/Kg)	Oil & Grease (mg/Kg)
EB 19	N.D.	---	N.D.	N.D.	N.D.	N.D.	N.D.
SWE	400	---	1000	1500	1600	5100	2100
SWN	N.D.	---	N.D.	N.D.	N.D.	N.D.	N.D.
SWS	9.4	---	24	36	38	120	N.D.
SWW	N.D.	---	N.D.	N.D.	N.D.	N.D.	N.D.
HLN	---	N.D.	---	---	---	---	---
HLS	---	270	---	---	---	---	---
STKP1-4*	6.0	---	15	23	24	77	740
STKP5-8*	19	---	48	71	76	240	380
SYKP9-12*	27	---	68	100	110	340	1300
STKP13-16*	17	---	43	64	68	220	1400
Blank Spiked	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.
Recovery	92.6%	---	91.4%	93.5%	90.8%	104.7%	---
Duplicate Spiked							
Recovery	89.4%	---	90.3%	92.1%	88.6%	92.0%	---
Detection limit	1.0	10	5.0	5.0	5.0	5.0	10
Method of Analysis	5030/ 8015	3550 / 8015	8020	8020	8020	8020	5520 D & F

*Composited soil samples.


 David Duong
 Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

September 17, 1993

PEL # 9309045

ALL ENVIRONMENTAL, INC.

Attn: Dusty Roy
Re: Nine soil samples for total Lead analysis.

Project name: Williamson
Project number: 1031

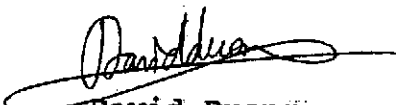
Date sampled: Sept 13-14, 1993
Date extracted: Sept 15-17, 1993

Date submitted: Sept 15, 1993
Date analyzed: Sept 15-17, 1993

RESULTS:

SAMPLE I.D.	Lead (mg/Kg)
EB 19	6.9
SWE	6.2
SWN	9.1
SWS	4.7
SWW	8.4
STKP1-4*	8.7
STKP5-8*	6.7
STKP9-12*	15
STKP13-16*	12
Blank	N.D.
Detection limit	1.0
Method of Analysis	7420

*Composited soil samples.


David Duong
Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

October 11, 1993

PEL # 9310009

ALL ENVIRONMENTAL, INC.

Attn: Steve DeHope

Project name: Williamson
Project number: 1031

Analysis : STLC CAM 17 metals

Sample I.D.: STKP (1-8, 13-16, 5A-8A)

Date Sampled: Sept 13-20, 1993
Date Analyzed: Oct 04-11, 1993

Date Submitted: Sept 15-20, 1993

Method of Analysis: EPA 1310 / 6010

CODE	METAL	CONCENTRATION (mg/Kg)	DETECTION LIMIT (mg/Kg)
Ag	Silver	N.D.	0.05
As	Arsenic	N.D.	0.01
Ba	Barium	1.5	0.05
Be	Beryllium	N.D.	0.01
Cd	Cadmium	N.D.	0.01
Co	Cobalt	0.14	0.05
Cr	Chromium	N.D.	0.05
Cu	Copper	N.D.	0.05
Hg	Mercury	N.D.	0.002
Mo	Molybdenum	N.D.	0.05
Ni	Nickel	0.32	0.05
Pb	Lead	N.D.	0.10
Sb	Antimony	N.D.	0.10
Se	Selenium	N.D.	0.01
Tl	Thallium	N.D.	0.20
V	Vanadium	N.D.	0.05
Zn	Zinc	0.37	0.05

David Duong
Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

September 17, 1993

PEL #: 9309045

ALL ENVIRONMENTAL, INC.

Attn: Dusty Roy

Project name : Williamson

Project location: 1031

Sample I.D.: EB 19

Date Sampled: Sep 13, 1993

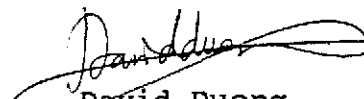
Date Submitted: Sep 15, 1993

Date Analyzed: Sep 15, 1993

Method of Analysis: EPA 8010

Detection limit: 5.0 ug/Kg

COMPOUND NAME	CONCENTRATION (ug/Kg)	SPIKE RECOVERY (%)
Chloromethane	N.D.	-----
Vinyl Chloride	N.D.	82.3
Bromomethane	N.D.	-----
Chloroethane	N.D.	-----
Trichlorofluoromethane	N.D.	-----
1,1-Dichloroethene	N.D.	85.7
Methylene Chloride	N.D.	-----
1,2-Dichloroethene (TOTAL)	N.D.	93.2
1,1-Dichloroethane	N.D.	84.0
Chloroform	N.D.	-----
1,1,1-Trichloroethane	N.D.	-----
Carbon Tetrachloride	N.D.	-----
1,2-Dichloroethane	N.D.	-----
Trichloroethene	N.D.	97.6
1,2-Dichloropropane	N.D.	-----
Bromodichloromethane	N.D.	-----
2-Chloroethylvinylether	N.D.	-----
Trans-1,3-Dichloropropene	N.D.	-----
Cis-1,3-Dichloropropene	N.D.	-----
1,1,2-Trichloroethane	N.D.	-----
Tetrachloroethene	N.D.	90.9
Dibromochloromethane	N.D.	-----
Chlorobenzene	N.D.	-----
Bromoform	N.D.	-----
1,1,2,2-Tetrachloroethane	N.D.	-----
1,3-Dichlorobenzene	N.D.	-----
1,4-Dichlorobenzene	N.D.	-----
1,2-Dichlorobenzene	N.D.	-----


David Duong
Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

October 06, 1993

PEL #: 9310009

ALL ENVIRONMENTAL, INC.

Attn: Steve DeHope

Project name : Williamson

Project location: 1031

Sample I.D.: STKP (1-4,5-8,13-16,5A-8A)

Date Sampled: Sept 13-20, 1993

Date Submitted: Sept 15-20, 1993

Date Analyzed: Oct 04, 1993

Method of Analysis: EPA 8010

Detection limit: 5.0 ug/Kg

COMPOUND NAME	CONCENTRATION (ug/Kg)	SPIKE RECOVERY (%)
Chloromethane	N.D.	-----
Vinyl Chloride	N.D.	81.4
Bromomethane	N.D.	-----
Chloroethane	N.D.	-----
Trichlorofluoromethane	N.D.	-----
1,1-Dichloroethene	N.D.	87.6
Methylene Chloride	N.D.	-----
1,2-Dichloroethene (TOTAL)	N.D.	-----
1,1-Dichloroethane	N.D.	-----
Chloroform	N.D.	-----
1,1,1-Trichloroethane	N.D.	85.5
Carbon Tetrachloride	N.D.	-----
1,2-Dichloroethane	N.D.	92.3
Trichloroethene	N.D.	94.1
1,2-Dichloropropane	N.D.	-----
Bromodichloromethane	N.D.	-----
2-Chloroethylvinylether	N.D.	-----
Trans-1,3-Dichloropropene	N.D.	-----
Cis-1,3-Dichloropropene	N.D.	-----
1,1,2-Trichloroethane	N.D.	-----
Tetrachloroethene	N.D.	90.9
Dibromochloromethane	N.D.	-----
Chlorobenzene	N.D.	-----
Bromoform	N.D.	-----
1,1,2,2-Tetrachloroethane	N.D.	-----
1,3-Dichlorobenzene	N.D.	-----
1,4-Dichlorobenzene	N.D.	-----
1,2-Dichlorobenzene	N.D.	-----

David Duong
Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

October 06, 1993

PEL # 9310009

ALL ENVIRONMENTAL, INC.

Attn: Steve DeHope
Re: One composited soil sample for RCI analysis.

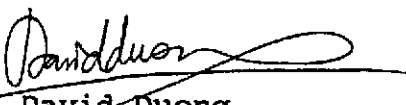
Project name: Williamson
Project number: 1031

Date sampled: Sept 13-20, 1993
Date extracted: Oct 04, 1993

Date submitted: Sept 15-20, 1993
Date analyzed: Oct 04, 1993

RESULTS:

SAMPLE I.D.	REACTIVITY	CORROSIVITY	IGNITABILITY
STKP (1-4,5-8, 13-16,5A-8A)	NO	pH 8.6	NO
Blank	NO	pH 7.0	NO
Method of Analysis	Title 22, CCR 66261.23	Title 22, CCR 66261.22	Title 22, CCR 66261.21


David Duong
Laboratory Director



PRIORITY ENVIRONMENTAL LABS

Precision Environmental Analytical Laboratory

September 23, 1993

PEL # 9309062

ALL ENVIRONMENTAL, INC.

Attn: Steve DeHope

Re: Three soil samples for Gasoline/BTEX, Hydraulic Oil, and Oil & Grease analyses.

Project name: Williamson

Date sampled: Sept 21, 1993

Date submitted: Sept 21, 1993

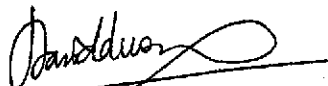
Date extracted: Sept 21-22, 1993

Date analyzed: Sept 21-22, 1993

RESULTS:

SAMPLE I.D.	Gasoline (mg/Kg)	Hydraulic Oil (mg/Kg)	Benzene (ug/Kg)	Toluene (ug/Kg)	Ethyl Benzene (ug/Kg)	Total Xylenes (ug/Kg)	Oil & Grease (mg/Kg)
EW-12'	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.	26
STKP-1, 2, 3, 4A*	39	---	10	15	19	63	620
STKP-5, 6, 7, 8*	25	---	6.5	9.6	12	40	450
Blank	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.	N.D.
Spiked Recovery	82.7%	---	81.4%	84.9%	89.6%	95.1%	---
Duplicate Spiked Recovery	93.5%	---	92.6%	96.3%	95.2%	102.6%	---
Detection limit	1.0	1.0	5.0	5.0	5.0	5.0	10
Method of Analysis	5030/ 8015	3550 / 8015	8020	8020	8020	8020	5520 D & F

*Composited soil samples.


David Duong
Laboratory Director

APPENDIX C

NON-HAZARDOUS WASTE MANIFESTS

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA. 94602 Oakland CA. 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code KA 405 110893 40805

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
soil contaminated w/ gas, oil, + grease	18	Y	01	T	D - Drum
					C - Carton
					B - Bag
					T - Truck
					P - Pounds
					Y - Yards
					O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name Steve DeHoge Signature [Signature] Shipment Date 110993

TRANSPORTER

Truck No. _____ Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) Charles Stubbs
 Address PO Box 1622 Vehicle License No./State 9C42375
Union City CA 94587 Vehicle Certification 413615

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 110993 Driver Signature [Signature] Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470991
 Address 4001 N. Vasco Rd. Livermore CA. 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 110993

PASS CODE _____

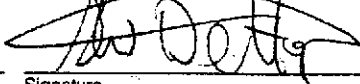
NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
Soil contaminated w/ gas, oil + grease	18	Y	01	T	D - Drum
					C - Carton
					B - Bag
					T - Truck
					P - Pounds
					Y - Yards
					O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.



Generator Authorized Agent Name Steve DeHope Signature  Shipment Date 110993

TRANSPORTER

Truck No. 79 Phone No. 510-487-3397
 Transporter Name Dellatousse Trucking Inc. Driver Name (Print) JIM MARTIN
 Address PO Box 1622 Vehicle License No./State 1R82920
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

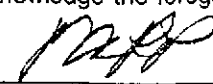
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470451
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

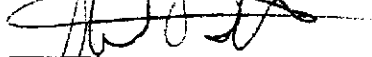
GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Av. Address 3635 13th Ave.
Oakland CA. 94602 Oakland CA. 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805 Containers

Description of Waste	Quantity		Units	No.	Type
Soil contaminated w/ gas, oil, + grease		18	Y	01	T

- Type
 D - Drum
 C - Carton
 B - Bag
 T - Truck
 P - Pounds
 Y - Yards
 O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name Steve DeHoge Signature  Shipment Date 110993

TRANSPORTER

Truck No. 8 Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) Leon W Flandiers
 Address P.O. Box 1622 Vehicle License No./State 26653W Ca
Union City CA 94587 Vehicle Certification 401477, 401794

I hereby certify that the above named material was picked up at the generator site listed above.


I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland, CA 94602 Oakland, CA 94610
 Phone No. 510-530-2993 Phone No. 510-530-2993
 BFI Waste Code CA 405 110893 40805 Containers

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
Soil Contaminated w/ gas, oil + grease	18	Y	01	7	D - Drum
					C - Carton
					B - Bag
					T - Truck
					P - Pounds
					Y - Yards
					O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Steve De Hope Generator Authorized Agent Name [Signature] Signature 110993 Shipment Date

TRANSPORTER

Truck No. _____ Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) CHARLES U. SPA (OIA)
 Address P.O. Box 1622 Vehicle License No./State 9C42436 CALIF.
Union City, CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

[Signature] Driver Signature 110993 Shipment Date [Signature] Driver Signature 110993 Delivery Date

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-447-0491
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

 Name of Authorized Agent Signature [Signature] Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302943 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805 Containers

Description of Waste
Soil contaminated w/ gas, oil, & grease

Quantity	Units	No.	Type
18	✓	01	7

- Type
 D - Drum
 C - Carton
 B - Bag
 T - Truck
 P - Pounds
 Y - Yards
 O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Steve DeHope Generator Authorized Agent Name
[Signature] Signature
110993 Shipment Date

TRANSPORTER

Truck No. _____ Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) J.L. SHELTON JR
 Address Union City CA 94587 Vehicle License No./State 324109Z
PO Box 1622 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

J.L. Shelton Jr. Driver Signature 110993 Shipment Date
J.L. Shelton Jr. Driver Signature 110993 Delivery Date

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4970997
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

[Signature] Name of Authorized Agent 110993 Receipt Date
 _____ Signature _____

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805

Description of Waste	Quantity	Units	Containers	
			No.	Type
Soil contaminated w/ gas, oil, & grease	18	Y	01	<input checked="" type="checkbox"/>

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name Steve DeHoue Signature [Signature] Shipment Date 110993

TRANSPORTER

Truck No. _____ Phone No. 510-987-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) DENNIS HLOCHAK
 Address PO Box 1622 Vehicle License No./State 2SG4034
Union City CA 94587 Vehicle Certification 78

I hereby certify that the above named material was picked up at the generator site listed above.
 Driver Signature [Signature] Shipment Date 110993
 I hereby certify that the above named material was delivered without incident to the destination listed below.
 Driver Signature [Signature] Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470457
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 Name of Authorized Agent _____ Signature [Signature] Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805

Description of Waste	Quantity		Containers		Type
		Units	No.	Type	
Soil contaminated w/ gas oil + grease	18	Y	01	T	D - Drum
					C - Carton
					B - Bag
					T - Truck
					P - Pounds
					Y - Yards
					O - Other

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Generator Authorized Agent Name Steve DeHope Signature [Signature] Shipment Date 110993

TRANSPORTER

Truck No. 79 Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) JIM MARTIN
 Address PO Box 1622 Vehicle License No./State 1R82920
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 110993 Driver Signature [Signature] Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110595 90805 Containers

Description of Waste	Quantity	Units	Containers	
			No.	Type
soil contaminated w/ gas, oil + grease	18	Y	01	T

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

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Generator Authorized Agent Name Steve DeHope Signature [Signature] Shipment Date 110993

TRANSPORTER

Truck No. _____ Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) Charles Stubbs
 Address PO Box 1622 Vehicle License No./State 9C42375
Union City CA 94587 Vehicle Certification 413615

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 110993 Driver Signature [Signature] Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302943
 BFI Waste Code CA 405 110893 40505 Containers

Description of Waste
soil contaminated w/ gas, oil & grease

Quantity	Units	No.	Type
<u>18</u>	<u>Y</u>	<u>01</u>	<u>T</u>

- Type
 D - Drum
 C - Carton
 B - Bag
 T - Truck
 P - Pounds
 Y - Yards
 O - Other

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Generator Authorized Agent Name Steve DeHoje Signature  Shipment Date 110993

TRANSPORTER

Truck No. _____ Phone No. 510-487-3387
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) J. L. Shelton Jr.
 Address P.O. Box 1622 Vehicle License No./State 3241092
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature J. L. Shelton Jr. Shipment Date 110993 Driver Signature J. L. Shelton Jr. Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-9470491
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

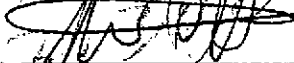
GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805 Containers

Description of Waste	Quantity		Units	No.		Type
Soil Contaminated w/ gas, oil, grease		15	✓	0	1	T

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

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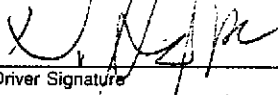
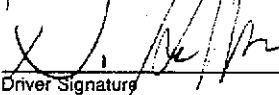
Generator Authorized Agent Name Steve DeHope Signature  Shipment Date 110993

TRANSPORTER

Truck No. _____ Phone No. 510-487-3397
 Transporter Name Della fosse Trucking Inc. Driver Name (Print) Dennis Klockner
 Address PO Box 1622 Vehicle License No./State 2S64034
Union City CA 94587 Vehicle Certification 78

I hereby certify that the above named material was picked up at the generator site listed above.

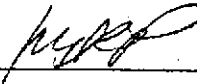
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470494
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

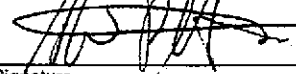
GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-530-2993 Phone No. 510-530-2993
 BFI Waste Code CA 405 110893 40805

Description of Waste	Quantity	Units	Containers	
			No.	Type
soil contaminated w/ gas, oil & grease	18	Y	01	7

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

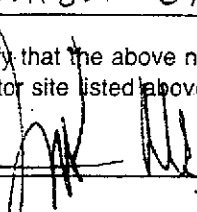
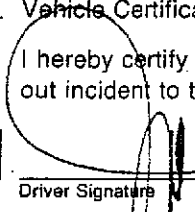
Generator Authorized Agent Name Steve DeHope Signature  Shipment Date 110993

TRANSPORTER

Truck No. 79 Phone No. 510 487-3397
 Transporter Name Dellatasse Trucking Inc. Driver Name (Print) JIM MARTIN
 Address PO Box 1622 Vehicle License No./State 1R82920
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

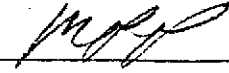
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-447-0491
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

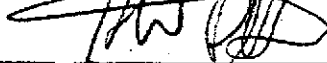
Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Walington Ave Address 3635 13th Ave
Oakland CA, 94602 Oakland CA, 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code EA 405 110893 40805 Containers

Description of Waste
soil contaminated w/gas, oil, grease

Quantity	Units	No.	Type
<u>18</u>	<u>Y</u>	<u>01</u>	<u>T</u>

- Type
 D - Drum
 C - Carton
 B - Bag
 T - Truck
 P - Pounds
 Y - Yards
 O - Other

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Generator Authorized Agent Name Steve DeHope Signature  Shipment Date 110993

TRANSPORTER

Truck No. T30 Phone No. 510-487-3397
 Transporter Name Dellatasse Trucking Inc. Driver Name (Print) Charles Stubbs
 Address PO Box 1622 Vehicle License No./State 9C42375
Union City, CA 94587 Vehicle Certification 9C42375
413615

I hereby certify that the above named material was picked up at the generator site listed above.

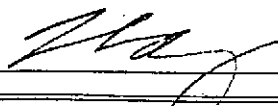
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature Charles Stubbs Shipment Date 110993 Driver Signature Charles Stubbs Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd. Livermore CA, 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

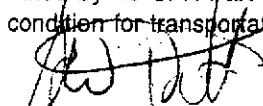
NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code LA 405 110893 40805

Description of Waste	Quantity		Units	Containers		Type
				No.	Type	
Soil contaminated w/ gas, oil, grease		18	Y	01	T	D - Drum
						C - Carton
						B - Bag
						T - Truck
						P - Pounds
						Y - Yards
						O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name STEVE Deltupe Signature  Shipment Date 110993

TRANSPORTER

Truck No. 79 Phone No. 510 487-3397
 Transporter Name DellaFosse Trucking Inc. Driver Name (Print) Sim MARTIN
 Address PO Box 1622 Vehicle License No./State 1282920
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

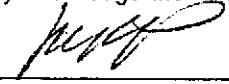
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave Address 3635 13th Ave.
OAKLAND CA 94602 OAKLAND CA 94610
 Phone No. 510-5302773 Phone No. 510-5302773
 BFI Waste Code CA 405 110893 90805

Description of Waste	Quantity	Units	Containers		Type
			No.	Type	
Soil contaminated w/ GAS, oil + GREASE	00018	Y	01	T	D - Drum C - Carton B - Bag T - Truck P - Pounds Y - Yards O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name STEVE DeHope Signature [Signature] Shipment Date 110793

TRANSPORTER

Truck No. _____ Phone No. (510) 487-3397
 Transporter Name Dellafore Trucking Inc. Driver Name (Print) J. L. SHELTON JR.
 Address P.O. Box 1422 Vehicle License No./State 3241092
Union City 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 110993 Driver Signature [Signature] Delivery Date 110993

DESTINATION

Site Name VAXCO ROAD LANDFILL Phone No. 510-4470491
 Address 4001 N VAXCO Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 111093

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
OAKLAND CA 94602 OAKLAND CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110293 10805

Description of Waste	Quantity		Units	Containers		Type
	No.	Type	No.	Type		
Soil contaminated w/Gas, oil + GREASE	000	18	Y	01	T	D - Drum
						C - Carton
						B - Bag
						T - Truck
						P - Pounds
						Y - Yards
						O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name STEVE DeHope Signature [Signature] Shipment Date 110993

TRANSPORTER

Truck No. DeVafosse Trucking Inc. Phone No. (510) 487-3397
 Transporter Name 8 Driver Name (Print) LEON W FLANDERS
 Address P.O. Box 1622 Vehicle License No./State 26653W Ca
Union City CA 94587 Vehicle Certification 401477, 401794

I hereby certify that the above named material was picked up at the generator site listed above.
 I hereby certify that the above named material was delivered without incident to the destination listed below.
 Driver Signature Leon W Flanders Shipment Date 110993 Driver Signature Leon W Flanders Delivery Date 111093

DESTINATION

Site Name Vasco Rd Land fill Phone No. 510-4470471
 Address 4001 N Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.
 Name of Authorized Agent _____ Signature [Signature] Receipt Date 111093

PASS CODE _____

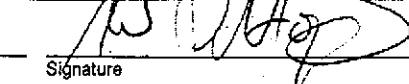
NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington St. Address 3635 13th Ave
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code CA 405 110893 40805

Description of Waste	Quantity		Units	Containers		Type
				No.	Type	
Soil contaminated w/ Gas, oil & grease		18	Y	01	T	D - Drum
						C - Carton
						B - Bag
						T - Truck
						P - Pounds
						Y - Yards
						O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.



Generator Authorized Agent Name STEVE DEHORE Signature  Shipment Date 110993

TRANSPORTER

Truck No. 8 Phone No. 510-487-3397
 Transporter Name Dellafosse Trucking Inc. Driver Name (Print) Leon W Flanders
 Address P.O. Box 1622 Vehicle License No./State 26653W Ca
Union City CA 94587 Vehicle Certification 401477, 401794

I hereby certify that the above named material was picked up at the generator site listed above.

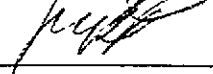
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

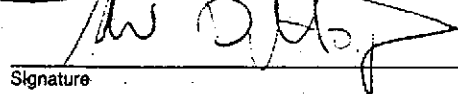
GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave Address 3635 13th Ave
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5302993
 BFI Waste Code EA 405 110893 40805

Description of Waste	Quantity		Units	Containers		Type
				No.	Type	
soil contaminated w/ gas, oil, + grease	18	18	Y	01	T	

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.



Generator Authorized Agent Name Steve DeHope Signature  Shipment Date 110993

TRANSPORTER

Truck No: _____ Phone No. 510 (487) 339711
 Transporter Name Dellafosse Trucking Inc Driver Name (Print) Dennis Klockner
 Address PO Box 1622 Vehicle License No./State 2864034
Union City, CA 94587 Vehicle Certification TTD

I hereby certify that the above named material was picked up at the generator site listed above.

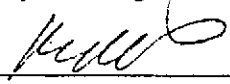
I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature  Shipment Date 110993 Driver Signature  Delivery Date 110993

DESTINATION

Site Name Vasco Road Landfill Phone No. 510-4470491
 Address 4001 N. Vasco Rd. Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature  Receipt Date 110993

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location ~~3635 13th Ave~~ Johns mobile
 Address 1511 Wellington St. Address 2635 13th Ave
Oakland, CA 94602 Oakland, CA 94610
 Phone No. 510-500-2999 Phone No. 510-500-2999
 BFI Waste Code CA 405 11005B 40805A Containers

Description of Waste	Quantity		Units	Containers		Type
	No.	Type		No.	Type	
Soil contaminated w/ Gas, oil & Grease	1	8	4	0	1	T

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name STEVE DeBope Signature [Signature] Shipment Date 11099B

TRANSPORTER

Truck No. _____ Phone No. (510) 487-3397
 Transporter Name DellaFosse Trucking Inc Driver Name (Print) D. L. SHELTON JR
 Address P.O. Box 1622 Vehicle License No./State 3241092
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 11099B Driver Signature [Signature] Delivery Date 11099B

DESTINATION

Site Name VASCO Road Landfill Phone No. 510-497-0491
 Address 4001 N VASCO RD Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 11099B

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave Address 3635 13th Ave
OAKLAND CA 94602 OAKLAND 94610

Phone No. 510-570-2993 Phone No. 510-570-2993

BFI Waste Code CA 405 110893 40805 Containers

Type	No.	Type
D - Drum	0	T
C - Carton	1	
B - Bag		
T - Truck		
P - Pounds		
Y - Yards		
O - Other		

 Description of Waste Soil contaminated w/ GAS, oil + Grease Quantity 00018 Units Y

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

STEVE DellaFosse Generator Authorized Agent Name [Signature] Signature 110993 Shipment Date

TRANSPORTER

Truck No. _____ Phone No. (510) 487-3397
 Transporter Name DellaFosse Trucking Inc. Driver Name (Print) MARKS Stubbs
 Address P.O. Box 1622 Vehicle License No./State 9042455
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

[Signature] Driver Signature 110993 Shipment Date [Signature] Driver Signature 110993 Delivery Date

DESTINATION

Site Name UASCO Road Landfill Phone No. 510-447-0411
 Address 4001 W VASCO Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature [Signature] Receipt Date 110993

PASS CODE _____

APPENDIX D

HEALTH AND SAFETY PLAN

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

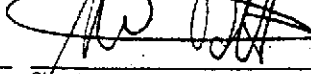
Generator Name John Williamson Generating Location Johns Mobil
 Address 1511 Wellington Ave. Address 3635 13th Ave.
Oakland CA 94602 Oakland CA 94610
 Phone No. 510-5302993 Phone No. 510-5352995
 BFI Waste Code FA 405 110893 40805 Containers

Description of Waste
soil contaminated w/ gas, oil, grease

Quantity	Units	No.	Type
<u>18</u>	<u>✓</u>	<u>01</u>	<u>T</u>

Type
 D - Drum
 C - Carton
 B - Bag
 T - Truck
 P - Pounds
 Y - Yards
 O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

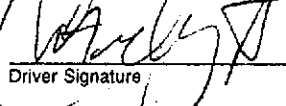

Steve DeHope  110993
 Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Truck No. L-3 Phone No. 510-487-3397
 Transporter Name Della fosse Trucking Inc. Driver Name (Print) CHARLEY SPITOLA
 Address P.O. Box 1622 Vehicle License No./State 9C42436 PA.
Union City CA 94587 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

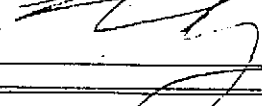
I hereby certify that the above named material was delivered without incident to the destination listed below.

 110993  110993
 Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name Vasco Road Land fill Phone No. 510-4470491
 Address 4001 N. Vasco Rd Livermore CA 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

 110993
 Name of Authorized Agent Signature Receipt Date

PASS CODE _____

ALL ENVIRONMENTAL, INC.

Environmental Engineering & Construction

2641 Crow Canyon Rd., Ste. 5 • San Ramon, CA 94583 • (510) 820-3224

HEALTH AND SAFETY PLAN

Prepared for:

3635 13th Ave. jobsite
Oakland, CA

Prepared for:

Mr. John Williamson
1511 Wellington St.
Oakland, Ca. 94602

prepared by:

ALL ENVIRONMENTAL, INC.
2641 Crow Canyon Rd., Suite 5
San Ramon, Ca. 94583

FAX: (510) 838-2687

authorized, qualified personnel will be allowed in the working area. All personnel arriving or departing the site should log in before entering the exclusion zone. All activities on site must be cleared through the Project Manager.

D. HAZARD EVALUATION

Potential chemical hazards include skin and eye contact or inhalation exposure to potentially toxic concentrations of hydrocarbon vapors. The potential toxic compounds that may exist at the site are listed below with descriptions of specific health effects of each. The list includes the primary potential toxic constituents that may be found in gasoline, diesel or fuel oil, or other motor fuel.

1. Benzene

- a. Colorless to light yellow, flammable liquid with an aromatic odor.
- b. Exposure may irritate eyes, nose and respiratory system and may cause acute restlessness, convulsions, nausea, or depression
- c. Permissible exposure level (PEL) for a time weighted average (TWA) over an eight hour period is 1.0 ppm.

2. Toluene

- a. Colorless liquid with a sweet pungent, benzene like odor.
- b. Exposure may cause fatigue, weakness, confusion, euphoria, dizziness, headaches, dilated pupils, lacrimation, nervousness, insomnia, paresthesia, and dermatitis.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

3. Xylene

- a. Colorless liquid with an aromatic odor.
- b. Exposure may irritate eyes nose and throat and may cause dizziness, excitement, drowsiness, incoordination, corneal vacuolization, anorexia, nausea, vomiting, and dermatitis.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

4. Ethylbenzene

- a. Colorless liquid with an aromatic odor.
- b. Exposure may irritate eyes and mucous membrane and may cause headaches, dermatitis, narcosis and loss of consciousness.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

5. Lead

- a. A heavy ductile soft grey metal.
- b. Exposure may cause weakness, nausea, lassitude, diarrhea, insomnia, anorexia, inflamed mucous membranes and abdominal pains. Lead is a known carcinogen.
- c. Permissible exposure level for a time weighted average over an eight hour period is .05 ppb.

Other on site hazards will be those associated with powered heavy equipment, rigging and moving of large, heavy objects, and falling into an excavation. Heavy equipment used for performing the building demo and soil excavation project may include a backhoe, an excavator, or a crane. Only 40 hour trained personnel will operate equipment or perform any duty associated with this project. A hard hat and steel toed boots are mandatory for all personnel associated with on site project activity. The excavation will be properly sloped for stability, safety, and personnel entry if needed. The site will be inspected on a daily basis for safety and potential cave-ins.

The proximity of adjacent residences and other structures will require particular care during the demolition phase of the project. Underground and overhead lines or piping must be considered live or in use unless known otherwise.

Dusty Roy has been designated to coordinate access control and security on site. All work will strictly follow OSHA guidelines. Personnel shall maintain the maximum distance from the pit and equipment while performing their duties. No one shall enter an excavation that is greater than five feet in depth and no one shall climb on the stockpiled material.

A FIRST AID KIT AND AT A 40 POUND BC FIRE EXTINGUISHER WILL BE AVAILABLE ON SITE. THE SUPERINTENDENT'S VEHICLE IS THE DESIGNATED COMMAND POST IN CASE OF EMERGENCY.

EMERGENCY SERVICES ARE AVAILABLE BY DIALING 911 ON THE TELEPHONE LOCATED IN THE SUPERINTENDENT'S VEHICLE. THIS VEHICLE WILL BE ON SITE AT ALL TIMES.

E. PERSONAL PROTECTIVE CLOTHING

Based on evaluation of potential hazards, level 'D' protective clothing has been designated as the appropriate protection for this project. The level of protective clothing will be upgraded if the organic vapor levels in the operator's breathing zone exceeds 5 ppm above background levels continuously for more than five minutes. If this occurs then level C protection will be used. If the organic concentration in the operator's breathing zone exceeds 200 ppm for 5 minutes and/or the organic vapor concentration two feet above the excavation exceeds 2,000 ppm or

25% of the lower explosive limit, then the equipment will be shut down and the site evacuated. If organic vapor concentrations exceed 200 ppm and work continues then level A or B protection will be required.

"EPA Standard Operating Safety Guidelines" defines the levels of protective clothing as follows:

LEVEL A:

Fully encapsulating suit / SCBA / Hard hat / Steel toe boots / Safety gloves.

LEVEL B:

Splash resistant suit / SCBA / Hard Hat / Steel toe boots / Safety gloves.

LEVEL C:

Half face respirator / Hard hat / Safety glasses / Steel toe boots
Coveralls / Gloves.

LEVEL D:

Coveralls / Hard hat / Safety Glasses / Steel toe boots / Gloves.

If air purifying respirators are authorized, Organic vapor/ w-filter is the appropriate canister for use with the involved substances and concentrations. A competent individual has determined that all criteria for using this type of respiratory protection have been met.

NO CHANGES TO THE SPECIFIED LEVELS OF PROTECTION SHALL BE MADE WITHOUT THE APPROVAL OF THE SITE SAFETY OFFICER.

F. MONITORING INSTRUMENTS

An environmental monitoring instrument shall be used on site at specified intervals. The GasTech instrument will measure organic vapors in the breathing spaces.

G. EMERGENCY HOSPITAL

The hospital selected for a medical emergency is:

HIGHLAND HOSPITAL, EMERGENCY ROOM - (510) 437-4557
1411 E. 31ST ST., OAKLAND

DIRECTIONS TO HOSPITAL FROM THE JOB SITE:

EXIT JOB SITE ON 13TH AVE. AND GO:
RIGHT ON 13TH AVE. TO E. 31ST ST.,
LEFT ON E. 31ST ST. TO HOSPITAL ON LEFT.

READ AND SIGN

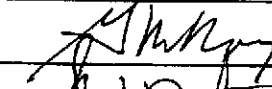
The work party was briefed on the contents of this plan on
SEPTEMBER 17, 1993 at 8:00 AM. All site personnel have read
the above plan and are familiar with its provisions.

NAME:

SIGNATURE:

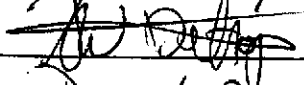
COMPANY NAME:

G.W. Roy



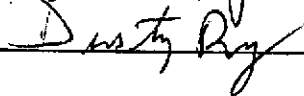
A E I

STEVE DeHope



A.E.I.

Dusty Roy



A E I

HEALTH AND SAFETY PLAN

At
3635 13th Ave.
Oakland, CA

Prepared for:

John Williamson
1511 Wellington St.
Oakland, CA

Prepared by:

ALL ENVIRONMENTAL, INC.
2641 Crow Canyon Road, Ste. 5
San Ramon, CA 94583

A. INTRODUCTION

This Site Specific Health and Safety Plan is written for the soil and groundwater investigation located at the property owned by John Williamson. All job site personnel will follow CAL OSHA safe operating practices as outlined in 29 CFR 1910 and 1926, as well as established guidelines set forth by All Environmental, Inc. or their respective companies.

B. WORK DESCRIPTION

Prepared by: Steve Peshorn (Health and Safety Officer)

Site Manager: Steve DeHope or Designated Alternate

Start Date: February 14, 1994

Address: 3635 13th Avenue
Oakland, CA 94610

Scope of Work: All Environmental, Inc. (AEI) will perform a soil and groundwater investigation at the property located at the above address.

C. SITE/WASTE CHARACTERISTICS

Hazard Level: Serious: Low: XXX
 Moderate: XXX Unknown:

Waste Type: Solid: Contaminated Soil
 Sludge: None
 Liquid: Possible Ground Water
 Gas: None

Hazard Characteristics: Combustible, Toxic

There will be a 10 feet boundary surrounding the drill rig and the stockpiled material. The area within this boundary is considered an exclusion zone and only qualified personnel will be allowed to enter. All personnel arriving or departing the site should log in before entering the exclusion zone. All activities on site must be cleared through the Site Manager.

D. HAZARD EVALUATION

Potential chemical hazards include skin and eye contact or inhalation exposure to potentially toxic concentrations of hydrocarbon vapors. The potential toxic compounds that may exist

at the site are listed below with descriptions of specific health effects of each. The list includes the primary potential toxic constituents that may be found in gasoline or diesel fuel.

1. Benzene

- a. Colorless to light yellow, flammable liquid with an aromatic odor.
- b. Exposure may irritate eyes, nose and respiratory system and may cause acute restlessness, convulsions, nausea, or depression
- c. Permissible exposure level (PEL) for a time weighted average (TWA) over an eight hour period is 1.0 ppm.

2. Toluene

- a. Colorless liquid with a sweet pungent, benzene like odor.
- b. Exposure may cause fatigue, weakness, confusion, euphoria, dizziness, headaches, dilated pupils, lacrimation, nervousness, insomnia, paresthesia, and dermatitis.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

3. Xylene

- a. Colorless liquid with an aromatic odor.
- b. Exposure may irritate eyes nose and throat and may cause dizziness, excitement, drowsiness, incoordination, corneal vacuolization, anorexia, nausea, vomiting, and dermatitis.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

4. Ethylbenzene

- a. Colorless liquid with an aromatic odor.
- b. Exposure may irritate eyes and mucous membrane and may cause headaches, dermatitis, narcosis and loss of consciousness.
- c. Permissible exposure level for a time weighted average over an ten hour period is 100 ppm.

5. Lead

- a. A heavy ductile soft grey metal.
- b. Exposure may cause weakness, nausea, lassitude, diarrhea, insomnia, anorexia, inflamed mucous membranes and abdominal pains. Lead is carcinogenic.
- c. Permissible exposure level for a time weighted average over an eight hour period is .05 ppb.

The Site Manager has been designated to coordinate access control and security on site. All work will strictly follow OSHA guidelines. A safe perimeter has been established at a three feet radius surrounding the site. These boundaries are identified by a fence, yellow caution tape and orange safety cones. Personnel shall

maintain the maximum distance from the drill rig while performing their duties. Additional hazards on site include heavy equipment and overhead lifting equipment. Only 40 hour trained personnel will operate equipment or perform any duty associated with this project. A hard hat and steel toed boots are mandatory for all personnel within the exclusion zone. The site will be inspected on a daily basis for safety.

A FIRST AID KIT AND AT A 40 POUND BC FIRE EXTINGUISHER WILL BE AVAILABLE ON SITE.

EMERGENCY SERVICES ARE AVAILABLE BY DIALING 911 ON THE TELEPHONE LOCATED IN THE PROJECT MANAGER'S VEHICLE. THIS VEHICLE WILL BE ON SITE AT ALL TIMES.

E. PERSONAL PROTECTIVE CLOTHING

Based on evaluation of potential hazards, level 'D' protective clothing has been designated as the appropriate protection for this project. The level of protective clothing will be upgraded if the organic vapor levels in the operator's breathing zone exceeds 5 ppm above background levels continuously for more than five minutes. If this occurs then level C protection will be used. If the organic concentration in the operator's breathing zone exceed's 200 ppm for 5 minutes and/or the organic vapor concentration two feet above the bore hole exceeds 2,000 ppm or 25% of the lower explosive limit, then the equipment will be shut down and the site evacuated. If organic vapor concentrations exceed 200 ppm and work continues then level B protection will be required.

"EPA Standard Operating Safety Guidelines" defines the levels of protective clothing as follows:

LEVEL A:

Fully encapsulating suit / SCRA / Hard hat / Steel toe boots / Safety gloves.

LEVEL B:

Splash resistant suit / SCBA / Hard Hat / Steel toe boots / Safety gloves.

LEVEL C:

Half face respirator / Hard hat / Safety glasses / Steel toe boots
Coveralls / Gloves.

LEVEL D:

Coveralls / Hard hat / Safety Glasses / Steel toe boots / Gloves.

If air purifying respirators are authorized, Organic vapor/ w-filter is the appropriate canister for use with the involved

substances and concentrations. A competent individual has determined that all criteria for using this type of respiratory protection have been met.

NO CHANGES TO THE SPECIFIED LEVELS OF PROTECTION SHALL BE MADE WITHOUT THE APPROVAL OF THE SITE SAFETY OFFICER.

F. MONITORING INSTRUMENTS

The following environmental monitoring instruments shall be used on site at specified intervals.

Lower Explosive Limit (LEL) Meter that will also check the excavation atmosphere for toxic levels will be used to check if the work area is safe.

G. EMERGENCY HOSPITAL

The closest hospital with an emergency room is:

HIGHLAND HOSPITAL

(510) 437-4557

DIRECTIONS FROM THE JOB SITE:

EXIT JOBSITE ON 13TH AVE. AND GO:

RIGHT ON 13TH AVE. TO E. 31ST ST.

LEFT ON E. 31ST STREET

HOSPITAL ON THE LEFT

I. QA OBJECTIVES:

We, at Priority Environmental Labs (PEL), commit to a quality assurance program designed to guarantee our analytical results are valid and properly documented.

II. SAMPLING PROCEDURES:

Sampling should be done according to EPA guidelines. Precautions are taken to avoid sample contamination and to maintain sample integrity. Proper containers and preservation techniques are used if necessary (See Table 1 of this manual). For examples, with water samples requiring volatile organic analysis, 40 ml vials with teflon-lined septa are used. For water samples requiring semi-volatile organic analysis, 1-liter glass bottles with teflon-lined septa are used.

In cases we provide these containers for our clients, we buy only EPA - approved containers. Once they arrive, they are washed in detergent and rinsed first with tap water then with deionized water.

III. SAMPLE CUSTODY:

The sampler is required to secure his samples upon arrival at the laboratory. Next, samples are inspected by our receiver to assure that proper containers, their conditions, and needed preservatives are used. Our receiver also inspects all necessary information such as sample identification, time of collection, sampling techniques, analysis required, etc. are submitted. If needed, we can provide clients with our chain of custody (See Table 2 of this manual). A PEL file number is assigned to each batch of samples to identify it.

Finally, samples are ready to be stored in refrigerators which are daily monitored to make sure their temperatures are less than 4 degrees centigrade (See Table 3,4, and 5 of this manual).

IV. CALIBRATION PROCEDURES AND FREQUENCY:

For routine analyses, a five - point calibration curve is used. Then, a mid - point standard is run every day. If the response factor of this mid - point standard is less than 20% of the calibration curve, the average response factor from the calibration will be used for calculation. Otherwise, a new calibration curve will be established after needed correction measures are performed.

For non - routine analyses, a three - point calibration curve will be established and its average response factor is used for calculation. (See Table 6 for a list of suppliers of standards and reagents that we used).

V. ANALYTICAL PROCEDURES:

Analyses are performed according to methods in Test Methods for Evaluating Solid Waste, SW-846, Third Edition, LUFT, Methods for Organic Chemical Analysis of Municipal and Industrial Waste Water, EPA - 600 / 4-82-057, and other methods approved by either EPA or DHS.

In general, before analyzing samples, we run a reagent water blank to make sure that our instrument, glassware, and reagents are free of contamination.

For each batch of samples, we analyze a sample blank by running a reagent water blank or a clean sample of similar matrix to that of real sample through all steps of preparation and measurement.

Next, a mid - point standard is run to check the validity of our existing calibration curve. Now, we are ready to analyze samples. A duplicate sample and a spiked sample are to be run for anybatch of samples or for every ten samples to check the precision of the result and the percentage of recovery of compounds spiked.

VI. DATA REDUCTION, VALIDATION, AND REPORTING:

Analyst who is responsible for the analysis will perform data reduction and validation by strictly following guideline set by appropriate approved methods.

Later, his data interpretation and calculation will be checked by a supervisor for validity before a typed report is issued. Both the analyst and his supervisor will proofread the report for any error before sending it to the client.

A copy of the report along with a copy of chain of custody, chromatograms if any, calculation sheets, and other information related to the analysis will be kept on file.

VII. INTERNAL QUALITY CONTROL CHECKS:

For every batch of sample, a quality control check sample will be run. This check sample will have all analytes needed to be determined in real samples. If any problem occurs, the correspond supervisor will dertermine the appropriate corrective action.

VIII. PERFORMANCE AND SYSTEM AUDITS:

Several times a month, the supervisor will test the measurement systems with samples of known compositions or behavior to evaluate precision and accuracy without the knowledge of the analyst to determine whether the measurement systems are being used appropriately.

IX. PREVENTIVE MAINTENANCE:

All instruments in the laboratory are regularly checked and maintained following manufacturer's suggestions. Any replacement, modification is timely recorded in an instrument record logbook.

X. PROCEDURES FOR DATA PRECISION AND ACCURACY:

We follow the quality assurance criteria set by California Department of Health Services (See Table 7 of this manual).

XI. CORRECTIVE ACTION:

Whenever a problem occurs, we will apply the following procedires:

- Identifying and defining the problem.
- Assigning responsibility for investigating the problem.
- Investigating the cause of the problem.
- Determining a corrective action to eliminate the problem which may be a combination of :
 - * A thourough check of instruments.
 - * A thourough check of standards, reagents, deionized water.
- Accepting responsibility for the corrective action.
- Evaluating its effectiveness.
- Verifying that the corrective action has eliminate the problem.

XII. QUALITY ASSURANCE REPORT:

Our quality assurance program are maintained periodically. Q/C data are recorded in different logbooks for different methods of analyses. These logbooks are weekly reviewed by our laboratory director.

The final report sent to our clients also includes all quality control data obtained while running samples.