

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		FOR LOCAL AGENCY USE ONLY (HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.) SIGNED: <i>[Signature]</i> DATE: 4/12/94	
REPORT DATE 04 APR 11 PM 11:14 04 APR 11 PM 11:14					
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT KEITH SIMAS		PHONE (510) 865-9503	SIGNATURE <i>[Signature]</i>	
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME XTRA OIL CO.		
	ADDRESS 2307 PACIFIC AVE CITY ALAMEDA STATE CA ZIP 94501				
RESPONSIBLE PARTY	NAME XTRA OIL CO <input type="checkbox"/> UNKNOWN		CONTACT PERSON KEITH SIMAS	PHONE (510) 865-9503	
	ADDRESS 2307 PACIFIC AVE CITY ALAMEDA STATE CA ZIP 94501				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) XTRA OIL DBA SHELL		OPERATOR TED SIMAS	PHONE (510) 865-9503	
	ADDRESS 1701 PARK ST CITY ALAMEDA COUNTY CA ZIP 94501				
	CROSS STREET BUENA VISTA				
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME ALAMEDA COUNTY - ENVIR. HEALTH		CONTACT PERSON JULIETTE SHIN	PHONE (510) 271-4320	
	REGIONAL BOARD SAN FRANCISCO BAY REGION		CONTACT PERSON RICHARD HIETT	PHONE ()	
SUBSTANCES INVOLVED	(1) NAME GASOLINE		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
	(2) NAME DIESEL		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
DISCOVERY/ABATEMENT	DATE DISCOVERED 04 APR 11 PM 11:14	HOW DISCOVERED <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> OTHER			
	DATE DISCHARGE BEGAN UNKNOWN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER			
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 04 APR 11 PM 11:14				
SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER		
	CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY				
	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT)				
	COMMENTS VISIBLE SOIL CONTAMINATION AT TANK REMOVALS. SOIL/WATER SAMPLES FORTHCOMING.				