

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

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

Certified Mail # P 368 729 340  
10/31/96  
STID# 1662

Notice of Requirement to Reimburse

Mike Wue  
N A  
21995 Mission Blvd.  
Hayward, C A 94541

Responsible Party (RP) #1  
Property Owner

Kay Ku  
N A  
P. O. Box 20127  
Castro Valley, C A 94546

Responsible Party (RP) #2

Fountain Cleaners  
2006 Encinal Ave  
Alameda, CA 94501

SITE

Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X) Yes  
Source: F

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

A determination of a secondary RP status may be made if it is shown that one or more of the RP(s) is performing corrective action and it is clear that the party seeking secondary status did not in any way initiate or contribute to the actual discharge. If the primary RP fails to perform corrective action, then the secondary RP will be considered a primary RP. To request designation as a secondary RP, contact this office.

Reimburse Letter  
 10/31/96  
 StID# 1662  
 Page 2

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the SWRCB. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, Please fax your request to Roni Riley at the SWRCB at (916) 227-4349 telephone the SWRCB at (916) 227-4408.  
 Please contact Juliet M Shin, Senior Hazardous Materials Specialist at this office if you have any further questions concerning this matter.

*Gordon Coleman*  
 Gordon Coleman, Acting Chief  
 Contract Project Director

Please Circle One **Add** Delete Change

Reason: RP#3

c: Lori Casias, SWRCB  
 Juliet M Shin, Senior Hazardous Materials Specialist

P 368 729 340

US Postal Service STID 1662  
**Receipt for Certified Mail**  
 No Insurance Coverage Provided.  
 Do not use for International Mail (See reverse)

Sent to <b>Kay Ku</b>	
Street & Number <b>P.O. Box 20127</b>	
Post Office, State, & ZIP Code <b>Castro Valley CA 94546</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Data	

Is your RETURN ADDRESS completed on the reverse side?

<b>SENDER:</b> ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input checked="" type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
3. Article Addressed to: <b>Kay Ku</b> <b>P.O. Box 20127</b> <b>Castro Valley, CA 94546</b> <b>STID 1662</b> <i>2006 Encinal, Alameda</i>	4a. Article Number <b>P 368 729 340</b>	
5. Received By: (Print Name) <i>[Signature]</i>		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD
6. Signature: (Addressee or Agent) <b>X</b>		7. Date of Delivery <b>11-9-96</b>
		8. Addressee's Address (Only if requested and fee is paid)

PS Form 3800 April 1995

Thank you for using Return Receipt Service.



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

Certified Mail #P 368 729 341  
10/31/96  
STID# 1662

Notice of Requirement to Reimburse

Mike Wue  
N A  
21995 Mission Blvd.  
Hayward, C A 94541

Responsible Party (RP) #1  
Property Owner

Kay Ku  
N A  
P. O. Box 20127  
Castro Valley, C A 94546

Responsible Party (RP) #2

Fountain Cleaners  
2006 Encinal Ave  
Alameda, CA 94501

SITE

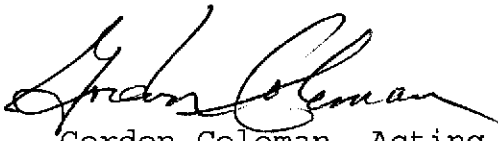
Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X)Yes  
Source: F

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

A determination of a secondary RP status may be made if it is shown that one or more of the RP(s) is performing corrective action and it is clear that the party seeking secondary status did not in any way initiate or contribute to the actual discharge. If the primary RP fails to perform corrective action, then the secondary RP will be considered a primary RP. To request designation as a secondary RP, contact this office.

Reimburse Letter  
10/31/96  
StID# 1662  
Page 2

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Gordon Coleman, Acting Chief  
Contract Project Director

Please Circle One **Add** Delete Change

Reason: RP#3

c: Lori Casias, SWRCB  
Juliet M Shin, Senior Hazardous Materials Specialist

P 368 729 341  
US Postal Service STID 1662  
**Receipt for Certified Mail**  
Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to <b>Mike Wue</b>	
Street or PO Box <b>21995 Mission Blvd.</b>	
Post Office, State & ZIP Code <b>Hayward, CA 94541</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

Certified Mail #P368 729 339  
10/31/96  
STID# 1662

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

Notice of Requirement to Reimburse

Mike Wue  
N A  
21995 Mission Blvd.  
Hayward, C A 94541

Responsible Party (RP) #1  
Property Owner

Mr. & Mrs. Butler  
N A  
251 Marks Road  
Danville, C A 94526

Responsible Party (RP) #3

Fountain Cleaners  
2006 Encinal Ave  
Alameda, CA 94501

SITE


Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X) Yes  
Source: F

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Reimburse Letter  
10/31/96  
StID# 1662  
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Gordon Coleman, Acting Chief  
Contract Project Director

Please Circle One  Add  Delete  Change

Reason: RP#3

c: Lori Casias, SWRCB  
Juliet M Shin, Senior Hazardous Materials Specialist

P 368 729 339

US Postal Service **STID 1662**  
**Receipt for Certified Mail**  
No Insurance Coverage Provided.  
Do not use for International Mail (See reverse)

Sent to <b>Mr &amp; Mrs Butler</b>	
Street Number <b>250 Marks Rd.</b>	
Post Office, State, & ZIP Code <b>Danville, CA 94526</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800 April 1995

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

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

Certified Mail #P 143 589 327  
10/03/96  
STID# 1662

Notice of Requirement to Reimburse

Mike Wue  
Fountain Cleaners  
2006 Encinal Ave.  
Alameda, Ca 94501

Responsible Party (RP) #1  
Property Owner

Kay Ku  
N A  
P. O. Box 20127  
Castro Valley, C A 94546

Responsible Party (RP) #2  
*Property Owner at time of  
Tank Removal*

Fountain Cleaners  
2006 Encinal Ave  
Alameda, CA 94501

SITE

Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X)Yes  
Source: F

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

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Reimburse Letter  
 10/03/96  
 StID# 1662  
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*Gordon Coleman*  
 Gordon Coleman, Acting Chief  
 Contract Project Director

Please Circle One Add Delete Change

Reason: Added RP#2

c: Lori Casias, SWRCB  
 Juliet M Shin, Senior Hazardous Materials Specialist

P 143 589 327

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

Sent to <b>Kay Ku</b>	
Street & Number <b>P.O. Box 20127</b>	
Post Office, State, & ZIP Code <b>Castro Valley, CA 945</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

**SENDER:**

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

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

- Addressee's Address
- Restricted Delivery  
Consult postmaster for fee.

3. Article Addressed to:  
**Kay Ku**  
**A**  
**P.O. Box 20127**  
**Castro Valley, CA 94501**

4a. Article Number  
**P 143 589 327**

4b. Service Type

<input type="checkbox"/> Registered	<input type="checkbox"/> Insured
<input checked="" type="checkbox"/> Certified	<input type="checkbox"/> COD
<input type="checkbox"/> Express Mail	<input checked="" type="checkbox"/> Return Receipt for Merchandise

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

**PS Form 3811, December 1991 U.S. GPO: 1992-487-740**

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt-Certified

PS Form 3800, April 1995

**DOMESTIC RETURN RECEIPT**



ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Agency Director



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

Certified Mail #P 143 589 328  
10/03/96  
STID# 1662

Notice of Requirement to Reimburse

Mike Wue  
Fountain Cleaners  
2006 Encinal Ave.  
Alameda, Ca 94501

Responsible Party (RP) #1  
Property Owner

Kay Ku  
N A  
P. O. Box 20127  
Castro Valley, C A 94546

Responsible Party (RP) #2  
*Property Owner at time of  
Tank Removal*

Fountain Cleaners  
2006 Encinal Ave  
Alameda, CA 94501

SITE

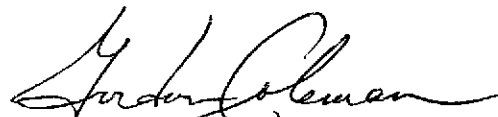
Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X) Yes  
Source: F

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

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Reimburse Letter  
 10/03/96  
 StID# 1662  
 Page 2

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 Gordon Coleman, Acting Chief  
 Contract Project Director

Please Circle One    Add    Delete    Change

Reason: Added RP#2

c: Lori Casias, SWRCB  
 Juliet M Shin, Senior Hazardous Materials Specialist

P 143 589 328

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

Sent to <b>Mike Wue</b>	
Street Number <b>Mountain Cleaners</b>	
<b>2006 Encinal Ave.</b>	
Post Office, State, & ZIP Code <b>Alameda, CA 94501</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
<b>TOTAL Postage &amp; Fees</b>	<b>\$</b>
Postmark or Date	

PS Form 3800, April 1995

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



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

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P 113 815 241

07/10/92  
STID# 1662

DEPARTMENT OF ENVIRONMENTAL HEALTH  
Hazardous Materials Division  
80 Swan Way, Rm. 200  
Oakland, CA 94621  
(510) 271-4530

Notice of Requirement to Reimburse

Mike Wue  
Fountain Cleaners  
2006 Encinal Ave.  
Alameda, Ca 94501

Responsible Party  
Property Owner

Fountain Cleaners  
2006 Encinal Ave.  
Alameda, CA 94501

SITE

Date First Reported 07/10/89  
Substance: Gasoline  
Petroleum: (X) Yes

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

Please contact Juliet M Shin, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief  
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

P 113 815 241



Receipt for Certified Mail

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

(JMS) #1662

PS Form 3800, June 1991

Sent to	
Mike Wue	
Street and No.	
2006 Encinal Avenue	
P.O., State and ZIP Code	
Alameda, CA 94501	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to: (JMS) #1662

Fountain Cleaners  
Attn: Mike Wue  
2006 Encinal Avenue  
Alameda, CA 94501

4a. Article Number  
P 113 815 241

4b. Service Type

<input type="checkbox"/> Registered	<input type="checkbox"/> Insured
<input type="checkbox"/> Certified	<input type="checkbox"/> COD
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Return Receipt for Merchandise

7. Date of Delivery  
7-14-92 SP

5. Signature (Addressee)

*[Signature]*

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

6. Signature (Agent)

*[Signature]*

Thank you for using Return Receipt Service.