ALAMEDA COUNTY

HEALTH CARE SERVICES

AGENCY DAVID J. KEARS, Agency Director



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

Responsible Party

Contact Person

Property Owner

certified mailer #P 367 604 631

January 2, 1992 STID# 814

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

Notice of Requirement to Reimburse

Shell Oil Company ATTN: Jack Brastad P.O.Box 5278

Concord, CA 94524

Bay Super Shell 1800 Powell St. Emeryville, CA 94608

SITE

Date First Reported --/--/82 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. ture has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. YOU ARE HEREBY NOTIFIED that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

If you have any questions concerning this matter please contact Thomas Peacock, Supervising Hazardous Material Specialist, at this office.

Edgar B. Howell, III, Chief Contract Project Director

> Sandra Malos, SWRCB cc:

SWRCB Use

add: X

Reason: New case

P 367 604 631

RECEIPT FOR CERTIFIED MAIL

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

(OCC TICVE/SE)		
Serit be 11 Oil Street and No. 5278 P.O. State and ZIP Code Concord, CA 94 Postage		
Street and No. P.O.Box 5278	,	
P.O. State and ZIP Code Concord, CA 94	524	
Postage	\$	ていた
Certified Fee		79
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt showing to whom and Date Delivered		
Return Receipt showing to whom. Date, and Address of Delivery		
TOTAL Postage and Fees	\$2.29	
Postmark or Date	~/	1
Return Receipt showing to whom. Date, and Address of Delivery TOTAL Postage and Fees Postmark or Date	270	
Mr. Ham Han.		

3 and 4. Put your address in the "RETURN TO" Space on the reverse and from being returned to you. The return receipt fee will to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) requests. Show to whom delivered, date, and addressee's a (Extra charge)	rse side. Failure to do this will prevent this provide you the name of the person delivered g services are available. Consult postmaster sted.
3. Article Addressed to: Shell Oil Co. attn: Jack Brastad P.O.Box 5278 Concord, CA 94524	4. Article Number Type of Service: Registered Insured Cortified COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Agent X 7. Date of Delivery 1.1.9.2 PS Perm 3811, Mar. 1988 * U.S.G.P.O. 1988-212	8. Addressee's Address (ONLY if requested and fee paid)