

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

Certified Mail # Z 773 036 378

11/08/94  
STID# 779

DEPARTMENT OF ENVIRONMENTAL HEALTH  
ALAMEDA COUNTY CC4580  
DEPT. OF ENVIRONMENTAL HEALTH  
ENVIRONMENTAL PROTECTION DIVISION  
1131 HARBOR BAY PKWY., #250  
ALAMEDA CA 94502-6577

Notice of Requirement to Reimburse

Robert Webster:trste ..  
P. O. Box 2485  
S S #608-12  
Los Angeles, C A 90051

Responsible Party #1  
Property Owner

Mr. Michael Wheland  
Arco Petroleum Products Co.  
P.O. Box 5811  
San Mateo, Ca 94402

Responsible Party #2  
Contact Person  
Contact Company

Arco Station #00608  
17601 Hesperian Blvd  
San Lorenzo, CA 94580

SITE

Date First Reported 11/25/85  
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 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 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: Mike Harper, SWRCB

SWRCB Use:

Update : X Reason: Change in RP #1

#779

JMS

Z 773 036 378



**Receipt for Certified Mail**

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

PS Form 3800, March 1993

Sent to	
Michael Whelan	
Street and No.	
P.O. Box 5811	
P.O., State and ZIP Code	
San Mateo CA 94402	
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	

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

Certified Mail # Z 773 036 377

11/08/94  
STID# 779

DEPARTMENT OF ENVIRONMENTAL HEALTH  
ALAMEDA COUNTY CC4580  
DEPT. OF ENVIRONMENTAL HEALTH  
ENVIRONMENTAL PROTECTION DIVISION  
1131 HARBOR BAY PKWY., #250  
ALAMEDA CA 94502-6577

Notice of Requirement to Reimburse

Robert Webster:trste  
P. O. Box 2485  
S S #608-12  
Los Angeles, C A 90051

Responsible Party #1  
Property Owner

Mr. Michael Wheland.  
Arco Petroleum Products Co.  
P.o. Box 5811  
San Mateo, Ca 94402

Responsible Party #2  
Contact Person  
Contact Company

Arco Station #00608  
17601 Hesperian Blvd  
San Lorenzo, CA 94580

SITE

Date First Reported 11/25/85  
Substance: Gasoline  
Petroleum: (X)Yes

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Edgar B. Howell, III, Chief  
Contract Project Director

cc: Mike Harper, SWRCB

SWRCB Use:

Update : X Reason: Chge in RP #1

JMS

#779

Z 773 036 377



**Receipt for Certified Mail**

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

PS Form 3800, March 1993

Sent to		Robert Wester, Trustee
Street and No.		PO Box 2485
P.O., State and ZIP Code		SS #608-12 Los Angeles CA 90051
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		



Certified Mail # P 118 918 686

04/23/92  
STID# 779

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

**Notice of Requirement to Reimburse**

O.e. Bohannon Trust  
P.o. Box 2485  
Los Angeles, Ca 90051

Responsible Party #1  
Property Owner

Mr. Michael Wheland.  
Arco Petroleum Products Co.  
P.o. Box 5811  
San Mateo, Ca 94402

Responsible Party #2  
Contact Person  
Contact Company

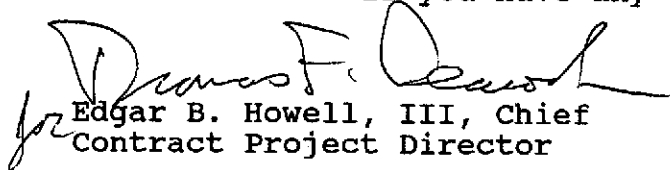
Arco Station #00608  
17601 Hesperian Blvd.  
San Lorenzo, CA 94580

SITE

Date First Reported 11/25/85  
Substance: Gasoline  
Petroleum: (X)Yes

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

  
Edgar B. Howell, III, Chief  
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:  Add: X Reason: New Case

P 118 918 686



**Receipt for  
Certified Mail #779**

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

PS Form 3800, June 1991

Sent to <b>Michael Wheland</b>	
Street and No. <b>P.O. Box 5811</b>	
P.O., State and ZIP Code <b>San Mateo, CA 94402</b>	
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	



Certified Mail # P 118 918 687

04/23/92  
STID# 779

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

**Notice of Requirement to Reimburse**

O.e. Bohannon Trust  
P.o. Box 2485  
Los Angeles, Ca 90051

Responsible Party #1  
Property Owner

Mr. Michael Wheland.  
Arco Petroleum Products Co.  
P.o. Box 5811  
San Mateo, Ca 94402

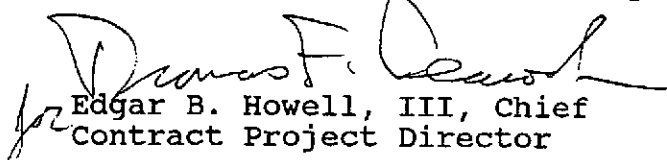
Responsible Party #2  
Contact Person  
Contact Company

Arco Station #00608  
17601 Hesperian Blvd.  
San Lorenzo, CA 94580

SITE Date First Reported 11/25/85  
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.

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for Edgar B. Howell, III, Chief  
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

P 118 918 687



**Receipt for  
Certified Mail #779**  
No Insurance Coverage Provided  
Do not use for International Mail  
(See Reverse)

Sent to	
O.E. Bohannon Trust	
Street and P.O.	
P.O. Box 2485	
P.O., State and ZIP Code	
Los Angeles, CA 90051	
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	

PS Form 3800, June 1991



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 #

04/23/92  
STID# 779

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

**Notice of Requirement to Reimburse**

O.e. Bohannon Trust  
P.o. Box 2485  
Los Angeles, Ca 90051

Responsible Party #1  
Property Owner

Mr. Michael Wheland.  
Arco Petroleum Products Co.  
P.o. Box 5212  
San Lorenzo, CA 94580

Responsible Party #2  
Contact Person  
Contact Company

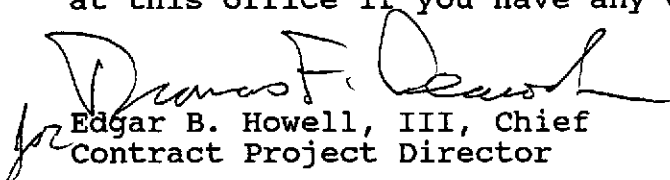
Arco Station #00608  
17601 Hesperian Blvd.  
San Lorenzo, CA 94580

SITE

Date First Reported 11/25/85  
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 Tom PEACOCK, Supervising Hazardous Materials Specialist at this office if you have any questions concerning this matter.

  
Edgar B. Howell, III, Chief  
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

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

certified mailer #P 367 604 630

December 31, 1991

STID# 779

DEPARTMENT OF ENVIRONMENTAL HEALTH

Hazardous Materials Program

80 Swan Way, Rm. 200

Oakland, CA 94621

~~415~~ (510) 271-4320

**Notice of Requirement to Reimburse**

O.E. Bohannon Trust  
P.O. Box 2485  
Los Angeles, CA 90051

Responsible Party  
Property Owner

ARCO Petroleum Products Co.  
ATTN: Chuck Carmel  
P.O. Box 5811  
San Mateo, CA 94402

Responsible Party  
Tank Operator

ARCO Svc. Sta.# 0608  
17601 Hesperian Blvd.  
San Lorenzo, CA 94580

SITE

Date First Reported: 11/25/85  
Substance: gasoline  
Petroleum (X) Yes

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

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

File

Notice of Requirement to Reimburse  
ARCO Svc. Sta.#0608 STID 779  
December 31, 1991  
Page 2 of 2

cc: Sandra Malos, SWRCB

SWRCB Use : add: X Reason: New case

P 367 604 630  
**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(See Reverse)

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

Sept to	Chuck Carmel
Street and No.	P.O. Box 5811
P.O., State and ZIP Code	San Mateo, CA 94402
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, June 1985 # 779

616

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

certified mailer #P 367 604 629

December 31, 1991  
STID# 779

DEPARTMENT OF ENVIRONMENTAL HEALTH  
Hazardous Materials Program  
80 Swan Way, Rm. 200  
Oakland, CA 94621  
(415) 271-4320  
~~XXX~~

**Notice of Requirement to Reimburse**

O.E. Bohannon Trust  
P.O. Box 2485  
Los Angeles, CA 90051

Responsible Party  
Property Owner

ARCO Petroleum Products Co.  
ATTN: Chuck Carmel  
P.O. Box 5811  
San Mateo, CA 94402

Responsible Party  
Tank Operator

ARCO Svc. Sta.# 0608  
17601 Hesperian Blvd.  
San Lorenzo, CA 94580

SITE

Date First Reported: 11/25/85  
Substance: gasoline  
Petroleum (X) Yes

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Edgar B. Howell, III, Chief  
Contract Project Director

File

cc: Sandra Malos, SWRCB

SWRCB Use : add: X Reason: New case

P 367 604 629

**RECEIPT FOR CERTIFIED MAIL**

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

PS Form 3800, June 1985  
 U.S.G.P.O. 1989-234-555

Sent To <b>O.E. Bohannon Trust</b>	
Street and No. <b>P.O. Box 2485</b>	
P.O., State and ZIP Code <b>Los Angeles, CA 90051</b>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

STID #779

779

**Complete Items 1 and 2 when additional services are desired, and complete Items 3 and 4.**  
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

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


3. Article Addressed to: <i>Didn't get husband yet</i> (TP) #779 <b>O.E. Bohannon Trust          P.O. Box 2485          Los Angeles, CA 90051</b>	4. Article Number <b>779 #P 367 604 629</b> Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b>	
5. Signature - Address <b>X</b>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <b>X</b> <i>Sandra</i>	
7. Date of Delivery <b>APR 13 1992</b>	

STID #779

Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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

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

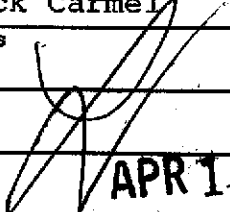
3. Article Addressed to:  #779  Arco Petroleum Products Co. Attn: Michael Wheland P.O. Box 5811 San Mateo, CA 94402	4. Article Number P 118 918 686  Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X 	
7. Date of Delivery <b>APR 28 1992</b>	

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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

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


3. Article Addressed to:  (TP) #779  ARCO Petroleum Products Co. P.O. Box 5811 San Mateo, CA 94402  Attn: Chuck Carmel	4. Article Number # P 367 604 630  Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X 	
7. Date of Delivery <b>APR 13 1992</b>	

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

**INSTRUCTIONS:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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

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

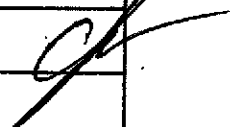
<p>3. Article Addressed to:</p> <p style="text-align: right;">(JMS) #817</p> <p>ARCO Station #05387 Attn: Chuck Carmel P.O. Box 5811 San Mateo, CA 94402</p>	<p>4. Article Number</p> <p style="text-align: center;">P 118 918 708</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered      <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified      <input type="checkbox"/> COD <input checked="" type="checkbox"/> Express Mail      <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b></p>
<p>5. Signature — Address</p> <p>X</p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature — Agent</p> <p>X </p>	
<p>7. Date of Delivery</p> <p style="text-align: center; font-size: 1.5em;">JUN 10 1992</p>	

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

**INSTRUCTIONS:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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

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

<p>3. Article Addressed to:</p> <p style="text-align: right;">#779</p> <p>O.E. Bohannon Trust P.O. Box 2485 Los Angeles, CA 90051</p>	<p>4. Article Number</p> <p style="text-align: center;">P 118 918 687</p> <p>Type of Service:</p> <p><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</p> <p>Always obtain signature of addressee or agent and <b>DATE DELIVERED.</b></p>
<p>5. Signature — Address</p> <p>X</p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature — Agent</p> <p>X </p>	
<p>7. Date of Delivery</p> <p style="text-align: center; font-size: 1.5em;">APR 29 1992</p>	

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT