

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

ENVIRONMENTAL
PROTECTION

99 DEC 21 AM 10:41

Certified Mail #
11/12/1999 Z 330 741 266

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9432

Notice of Responsibility

StID#: 233
Salle's Paint & Body Shop
1049 9th Ave
Oakland, CA 94606

SITE

Date First Reported 09/06/1994
Substance: Diesel
Funding (Federal or State): F
Multiple RPs?: N

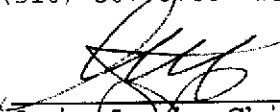
Dick Cochran
Cochran And Celli Real Estate
499 Embarcadero,
Oakland, Ca - 94606

Responsible Party (RP)
Property Owner

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has(have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified Dick Cochran as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 227-4349 or telephone (916) 227-4408.

Pursuant to section 25299.37(c)(7) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact Juliet M Shin, Senior Hazardous Materials Specialist at this office at (510) 567-6700 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date: 11/22/99

Please Circle One Add Delete Change

Reason: New

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

Report: Reimb97 5/99

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- 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. Addressee's Address
- 2. Restricted Delivery

3. Article Addressed to: **STLD 233**
Dick Cochran
Cochran And Celli Real
Estate
499 Embarcadero
Oakland CA, 94606

4a. Article Number

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-99-B-0223

Domestic Return Receipt

Thank you for using Return Receipt Service.

Fold at line over top of envelope to the right of the return address

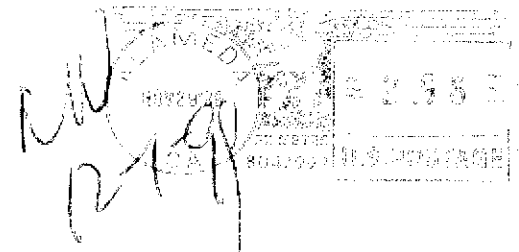
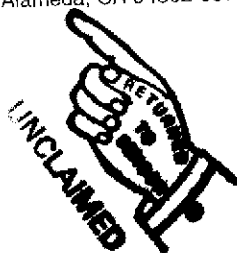
CERTIFIED

2 330 741 266

MAIL



ALAMEDA COUNTY
HEALTH CARE SERV
 Department Of Environm.
 Environmental Protection
 1131 Harbor Bay Parkwa
 Alameda, CA 94502-6577



Dick Cochran
 Cochran And Celli Real Estate
 499 Embarcadero
 Oakland, CA 94606

FINAL NOTICE