

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # 7000 1670 0009 3787 4704
April 15, 2002

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

Notice of Responsibility

Record ID: R00000346
BP Oil Site #11105 /
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

SITE

Date First Reported 03/16/89
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

Azim Shakoori
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

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 BP Oil Company 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) 341-5808 or telephone (916) 341-5700.

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 Scott Seery, Hazardous Materials Specialist, at this office at (510) 567-6783 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date: 4/11/02

Please Circle One Add Delete Change

Reason: Revised RP list

c: Lori Casias, SWRCB
Scott Seery, Hazardous Materials Specialist

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

April 15, 2002

LIST OF RESPONSIBLE PARTIES FOR

SITE

Record ID: R00000346
BP Oil Site #11105 /
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

Date First Reported 03/16/89
Substance: Gasoline
Petroleum (X) Yes
Source: F

Azim Shakoori
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

Responsible Party #1
Property Owner

Scott Hooton
BP Oil Company
Env. Remediation Management
295 SW 41st Street
Renton, WA 98055-4931

Responsible Party #2
Contact Person
Contact Company

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 1670 0009 3787 4704

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To AZIM SHAKOORI
 Street, Apt. No., or PO Box No. 3519 CASTRO VALLEY
 City, State, ZIP CA 94546 - CASTRO VALLEY
PS Form 3800, May 2000 See Reverse for Instructions


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
 Consult postmaster for fee.

3. Article Addressed to:
AZIM SHAKOORI
CASTRO VALLEY CHEVRON
3519 CASTRO VALLEY BLVD
CASTRO VALLEY, CA 94546

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
 X 

4a. Article Number
7000 1670 0009 3787

4b. Service Type 4704
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
4-24-02

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

Thank you for using Return Receipt Service.

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # 7000 1670 0009 3787 4711
April 15, 2002

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

Notice of Responsibility

Record ID: R00000346
BP Oil Site #11105 /
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

SITE

Date First Reported 03/16/89
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

Scott Hooton
BP Oil Company
Env. Remediation Management
295 SW 41st Street
Renton, WA 98055-4931

Responsible Party (RP) #2
(list of all RPs attached)

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 BP Oil Company 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.

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Ariu Levin, Chief
Contract Project Director

Date: 4/16/02

Please Circle One Add Delete Change

Reason: Revised RP list

c: Lori Casias, SWRCB
 Scott Seery, Hazardous Materials Specialist

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

April 15, 2002

LIST OF RESPONSIBLE PARTIES FOR

SITE

Record ID: R00000346
BP Oil Site #11105 /
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

Date First Reported 03/16/89
Substance: Gasoline
Petroleum (X) Yes
Source: F

Azim Shakoori
Castro Valley Chevron
3519 Castro Valley Blvd.
Castro Valley, CA 94546

Responsible Party #1
Property Owner

Scott Hooton
BP Oil Company
Env. Remediation Management
295 SW 41st Street
Renton, WA 98055-4931

Responsible Party #2
Contact Person
Contact Company

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage) (Postmarked)

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To: SCOTT HOOTON
Street, Apt. No., or PO Box No.: 295 SW 41st St
City, State, ZIP+4: RENTON WA 98055-4931

PS Form 3800, May 2000 See Reverse for Instructions

7000 1670 0009 3787 4711

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

Consult postmaster for fee.

3. Article Addressed to:
 SCOTT HUTTON
 295 SW 41 ST. ST.
 RENTON, WA - 98055-4931

4a. Article Number
 7000 1670 0009 3727 4711

4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
 4-24

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)
 X *[Signature]*

Thank you for using Return Receipt Service.

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

Certified Mail # P 367 604 533

03/17/93
STID# 3423

DEPARTMENT OF ENVIRONMENTAL HEALTH
State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
80 Swan Way, Rm 200
Oakland, CA 94621
(510) 271-4530

Notice of Requirement to Reimburse

Ms. Pauline Reith
B P Oil Company
16400 Southcenter Pkwy.
Tukwila, Wa 98188

Responsible Party
Property Owner

BP Service Station #11105
3519 Castro Valley Blv
Castro Valley , CA 94546

SITE

Date First Reported
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 Scott SEERY, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

for

Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

P 367 604 533

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

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

PS Form 3800, June 1985

Sent to	
Street and No.	
P.O., State and ZIP Code	
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	

Put your address in the "RETURN TO" Space on reverse side. Failure to do this will prevent this card from being returned to you. The return receipt 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: Ms. pauline Reith B P Oil Company 16400 Southcenter Pkwy. Tukwila, WA 98188	4. Article Number #P 367 604 533
5. Signature - Addressee X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery JAN 2 1988	8. Addressee's Address (ONLY if requested and fee paid)