

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail # 70031 1940 0005 5777 8432
July 7, 2003

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: R00000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

SITE

Date First Reported: 08/28/1986
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

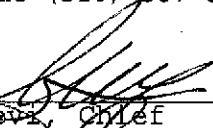
Mr. Mehdi Mohammadian
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

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 Medhi Mohammadian 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 Barney Chan, Hazardous Materials Specialist, at this office at (510) 567-6765 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date: 7/1/03

Please Circle One Add Delete Change

Reason: RE-NAME RPs

c: Jenniffer Jordan, SWRCB
Barney Chan, Hazardous Materials Specialist

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

7001 1940 0005 5777 8432

OFFICIAL USE

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

Sent to
 M.R. MEHDI MOHAMMADIAN/CAL GAS
 Street, Apt. No.;
 or PO Box No. 15595 WASHINGTON AVE
 City, State, ZIP+4
 SAN LORENZO, CA
 PS Form 3800, January 2001 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:
 MR. MEHDI MOHAMMADIAN
 CAL GAS
 15595 WASHINGTON AVE.
 SAN LORENZO, CA 94580

7001 1940 0005 5777 8432

5. Received By: (Print Name)
 6. Signature: (Addressee or Agent)
 X *[Signature]*

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

7. Date of Delivery
 7/10/03

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

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

July 7, 2003

LIST OF RESPONSIBLE PARTIES FOR

SITE

Record ID: R0000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Date First Reported 08/28/1986
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mr. Mehdi Mohammadian
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Responsible Party #1
Property Owner, UST Owner,
Operator

Mrs. Agnes Calleri
10901 Cliffland Ave
Oakland, CA 94605

Responsible Party #2
Past Property Owner, Past
UST Owner/Operator

Ms. Karen Streich
ChevronTexaco
P.O. Box 6012
San Ramon, CA 94583-2324

Responsible Party #3
Past Property Owner and
Past UST Owner

Ms. Marjorie Kayner
Bertram Kubo Trust
20321 Via Espana
Salinas, CA 93908-1261

Responsible Party #4
Past Property Owner, Past
UST Owner/Operator

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail # 7001 1940 0005 5777 8388
July 7, 20003

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: R00000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

SITE

Date First Reported: 08/28/1986
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

Ms. Marjorie Kayner
Bertram Kubo Trust
20321 Via Espana
Salinas, CA 93908-1261

Responsible Party (RP)#4
(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 Medhi Mohammadian 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 Barney Chan, Hazardous Materials Specialist, at this office at (510) 567-6765 for further information about the site designation process.


Ariu Levin, Chief
Contract Project Director

Date: 7/7/03

Please Circle One Add Delete Change

Reason: RE-NAME RPS

c: Jenniffer Jordan, SWRCB
✓ Barney Chan, Hazardous Materials Specialist

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

7001 1940 0005 5777 8388

OFFICIAL USE

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

Sent To
 MS. MARJORIE KAYNER / BERTRAM
 Street, Apt. No.;
 or PO Box No. 20321 VIA ESPANA
 City, State, ZIP+4
 SALINAS CA 93908-1261
 PS Form 3800, January 2001 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):
- Addressee's Address
 - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to: 7001 1940 0005 5777 8388

MS. MARJORIE KAYNER
 BERTRAM KUBO TRUST
 20321 VIA ESPANA
 SALINAS, CA 93908-1261

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

7. Date of Delivery

5. Received By: (Print Name)
 MANDIE KAYNER

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

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

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

July 7, 2003

LIST OF RESPONSIBLE PARTIES FOR

SITE

Record ID: R0000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Date First Reported 08/28/1986
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mr. Mehdi Mohammadian
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Responsible Party #1
Property Owner, UST Owner,
Operator

Mrs. Agnes Calleri
10901 Cliffland Ave
Oakland, CA 94605

Responsible Party #2
Past Property Owner, Past
UST Owner/Operator

Ms. Karen Streich
ChevronTexaco
P.O. Box 6012
San Ramon, CA 94583-2324

Responsible Party #3
Past Property Owner and
Past UST Owner

Ms. Marjorie Kayner
Bertram Kubo Trust
20321 Via Espana
Salinas, CA 93908-1261

Responsible Party #4
Past Property Owner, Past
UST Owner/Operator

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # 700 1 1940 0005 5777 8340
July 7, 2003

Notice of Responsibility

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

Record ID: RO0000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

SITE

Date First Reported: 08/28/1986
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

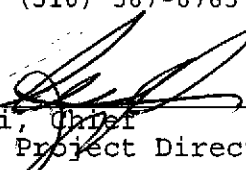
Ms. Karen Streich
ChevronTexaco
P.O. Box 6012
San Ramon, CA 94583

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 Medhi Mohammadian 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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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 Barney Chan, Hazardous Materials Specialist, at this office at (510) 567-6765 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date: 7/3/03

Please Circle One Add Delete Change

Reason: RE-NAME RPS

c: Jenniffer Jordan, SWRCB
Barney Chan, Hazardous Materials Specialist

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

7001 1940 0005 5777 8340

OFFICIAL USE

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

Postmark
Here

Sent To
 MS. KAREN STREICH/CHEURON TEXACO
 Street, Apt. No.,
 or PO Box No. P.O. Box 6012
 City, State, ZIP+4
 SAN RAMON, CA 94583
 PS Form 3800, January 2001 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:

7001 1940 0005 5777 8340

MS. KAREN STREICH
 CHEURON TEXACO
 P.O. Box 6012
 SAN RAMON, CA 94583

4b. Service Type

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

7. Date of Delivery

JUL 10 2003

5. Received By: (Print Name)

RONALD TRISS

6. Signature: (Addressee or Agent)

RT - [Signature]

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

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

July 7, 2003

LIST OF RESPONSIBLE PARTIES FOR

| | | |
|------|-----------------------|--------------------------------|
| SITE | Record ID: R0000374 | Date First Reported 08/28/1986 |
| | Cal Gas | Substance: Gasoline |
| | 15595 Washington Ave | Petroleum (X) Yes |
| | San Lorenzo, CA 94580 | Source: F |

Mr. Mehdi Mohammadian
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Responsible Party #1
Property Owner, UST Owner,
Operator

Mrs. Agnes Calleri
10901 Cliffland Ave
Oakland, CA 94605

Responsible Party #2
Past Property Owner, Past
UST Owner/Operator

Ms. Karen Streich
ChevronTexaco
P.O. Box 6012
San Ramon, CA 94583-2324

Responsible Party #3
Past Property Owner and
Past UST Owner

Ms. Marjorie Kayner
Bertram Kubo Trust
20321 Via Espana
Salinas, CA 93908-1261

Responsible Party #4
Past Property Owner, Past
UST Owner/Operator

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail # 700 1 1940 0005 5777 8173
July 7, 2003

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: R00000374
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

SITE

Date First Reported: 08/28/1986
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y


Mrs. Agnes Calleri
10901 Cliffland Ave
Oakland, CA 94605

Responsible Party (RP)#3
(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 Medhi Mohammadian 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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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 Barney Chan, Hazardous Materials Specialist, at this office at (510) 567-6765 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director
Date: 7/3/02

Please Circle One Add Delete Change
Reason: RE-NAME RPs

c: Jenniffer Jordan, SWRCB
Barney Chan, Hazardous Materials Specialist

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

7001 1940 0005 5777 8173

OFFICIAL USE

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

Sent To
MRS. AGNES CALLERI
 Street, Apt. No.,
 or PO Box No. **10901 CLIFFLAND AVE.**
 City, State, ZIP+ 4 **OAKLAND, CA 94605**

PS Form 3800, January 2001 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
MRS. AGNES CALLERI
10901 CLIFFLAND AVE.
OAKLAND, CA 94605

4a. Article Number **8173**
7001 1940 0005 5777

4b. Service Type

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

7. Date of Delivery
7-10-03

5. Received By: (Print Name)
[Signature]

6. Signature: (Addressee or Agent)
X

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

Thank you for using Return Receipt Service.

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

July 7, 2003

LIST OF RESPONSIBLE PARTIES FOR

| | | |
|------|-----------------------|--------------------------------|
| SITE | Record ID: R0000374 | Date First Reported 08/28/1986 |
| | Cal Gas | Substance: Gasoline |
| | 15595 Washington Ave | Petroleum (X) Yes |
| | San Lorenzo, CA 94580 | Source: F |

Mr. Mehdi Mohammadian
Cal Gas
15595 Washington Ave
San Lorenzo, CA 94580

Responsible Party #1
Property Owner, UST Owner,
Operator

Mrs. Agnes Calleri
10901 Cliffland Ave
Oakland, CA 94605

Responsible Party #2
Past Property Owner, Past
UST Owner/Operator

Ms. Karen Streich
ChevronTexaco
P.O. Box 6012
San Ramon, CA 94583-2324

Responsible Party #3
Past Property Owner and
Past UST Owner

Ms. Marjorie Kayner
Bertram Kubo Trust
20321 Via Espana
Salinas, CA 93908-1261

Responsible Party #4
Past Property Owner, Past
UST Owner/Operator

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, DIRECTOR

Certified Mail # Z 296 048 436
09/25/95 - STID# 1360

DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6777

Notice of Requirement to Reimburse

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Jessen Calleri
Agnes Calleri
10901 Cliffland Drive
Oakland, Ca 94605

Responsible Party #4
FORMER SITE OWNER
FORMER TANK OWNER

Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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 must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

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 or telephone (916) 227-4408. Please contact Scott SEERY, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

George Young
George Young, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB

Please Circle One: Add Delete Change

Reason: NEW RP #4

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/25/95

LIST OF RESPONSIBLE PARTIES FOR

SITE

StID: 1360
Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person

Jessen Calleri
Agnes Calleri
10901 Cliffland Drive
Oakland, Ca 94605

Responsible Party #4
Contact Person

Z 296 048 436



Receipt for Certified Mail

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

PS Form 3800, March 1993

| | |
|---|----|
| Sent to <i>Jessen & Agnes Calleri</i> | |
| Street and No. <i>10901 Cliffland Ave</i> | |
| P.O., State and ZIP Code <i>Oakland, CA 94605</i> | |
| 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/or 2 for additional services.
- Complete items 3, and 4a & 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 mailpieces 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:
*Jessen & Agnes Calleri
10901 Cliffland Drive
Oakland, CA 94605*

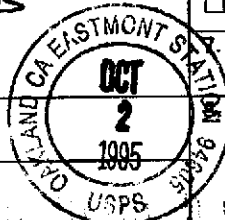
Signature (Addressee)
[Signature]

Signature (Agent)
[Signature]

4a. Article Number
Z 296 048 436

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 type="checkbox"/> Return Receipt for Merchandise |



Date of Delivery
10-2-95

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

RAFAT A. SHAHID, DIRECTOR

Certified Mail # **Z 296 048 435**
09/25/95 - STID# 1360

DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6777

Notice of Requirement to Reimburse

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561

Responsible Party #3
FORMER SITE OWNER

Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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 must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

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 or telephone (916) 227-4408. Please contact Scott SEERY, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

George Young
George Young, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB

Please Circle One: Add Delete Change

Reason: NEW RP #4

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/25/95

LIST OF RESPONSIBLE PARTIES FOR

SITE StID: 1360
Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person

Jessen Calleri
Agnes Calleri
10901 Cliffland Drive
Oakland, Ca 94605

Responsible Party #4
Contact Person

Z 296 048 435



Receipt for Certified Mail

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

PS Form 3800, March 1993

| | |
|---|----|
| Sent to <i>Bert Kubo</i> | |
| Street and No. <i>5772 Sellers Ave</i> | |
| P. O., State, and ZIP Code <i>Oakley, CA 94561</i> | |
| 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 | |

to your RETURN ADDRESS complete on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & 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):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Bert Kubo
5772 Sellers Ave
Oakley, CA 94561
[Signature]

5. Signature (Addressee)

6. Signature (Agent)

4a. Article Number
Z 296 048 435

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

7. Date of Delivery
10-3-95

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

RAFAT A. SHAHID, DIRECTOR

Certified Mail # P 386 338 418
09/25/95 - STID# 1360

DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6777

Notice of Requirement to Reimburse

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
FORMER TANK OWNER
FORMER SITE OWNER

Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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 must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

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George Young

George Young, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB

Please Circle One: Add Delete Change

Reason: NEW RP #4

Standard Form UST03 (6/93) ; Report: ReimRP 5/95

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/25/95

LIST OF RESPONSIBLE PARTIES FOR

SITE StID: 1360
Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person

Jessen Calleri
Agnes Calleri
10901 Cliffland Drive
Oakland, Ca 94605

Responsible Party #4
Contact Person

P 386 338 418



Receipt for Certified Mail

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

| | |
|--|----------------|
| To: <u>Bob Robles</u> | |
| Street: <u>Texaco</u> | |
| P.O., State and ZIP Code: <u>10 Univ. City Plza, 13th Fl, Universal City, CA 91608</u> | |
| Postage | \$ <u>9.60</u> |
| 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 | \$ <u>9.60</u> |
| Postmark or Date | |

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of the 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: Bob Robles
Texaco Refining & Mktg, Inc
10 Universal City Plza, 13th Fl.
Universal City, CA 91608

4a. Article Number: P 386 338 418

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Mailpiece

5. Signature (Addressee)

6. Signature (Agent): [Signature]

7. Date of Delivery: SEP 29 1995

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

PS Form 3800, June 1991

Thank you for using Return Receipt Service

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, DIRECTOR

Certified Mail # P 336 338 417
09/25/95 - STID# 1360

DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6777

Notice of Requirement to Reimburse

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
FORMER TANK OWNER
FORMER SITE OWNER

Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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 must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

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George Young
George Young, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB

Please Circle One: Add Delete Change

Reason: NEW RP #4

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

09/25/95

LIST OF RESPONSIBLE PARTIES FOR

SITE

StID: 1360
Mahdi Mohammadian
15595 Washington St
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes
Source: F

Mehdi Mohammadian
N A
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person

Jessen Calleri
Agnes Calleri
10901 Cliffland Drive
Oakland, Ca 94605

Responsible Party #4
Contact Person

P 386 338 417



Receipt for
Certified Mail

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

| | |
|---|----|
| Send To | |
| <i>Mehdi Mohammadian</i> | |
| Street and No. | |
| <i>15595 Washington Ave</i> | |
| P.O., State and ZIP Code | |
| <i>San Lorenzo, CA 94580</i> | |
| 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

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

Certified Mail # P 113 815 424

04/05/93
STID# 1360

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

Mahdi Mohammadian

15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles

Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

04/05/93

LIST OF RESPONSIBLE PARTIES FOR

SITE

StID: 1360
Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes

Mahdi Mohammadian

15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person
Contact Company

P 113 815 424



Receipt for Certified Mail

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

| | |
|---|----|
| 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 & 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/or 2 for additional services.
- Complete items 3, and 4a & 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.

3. Article Addressed to:
Bob Robles
Texaco Refining & Mktg. Inc.
10 Univ City Plza 13th Fl
Universal City, CA 91608
STID# 1360

4a. Article Number
#P113 815 424

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

7. Date of Delivery
MAY 05 1993

5. Signature (Addressee)

6. Signature (Agent)
[Signature]

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

PS Form 3800, June 1991

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 113 815 423

04/05/93
STID# 1360

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

Mahdi Mohammadian

15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bert Kubo

N A
5772 Sellers Ave.
Oakley, Ca 94561

Responsible Party #3
Contact Person
Contact Company

Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
Substance: Gasoline
Petroleum: (X)Yes

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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

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

04/05/93

LIST OF RESPONSIBLE PARTIES FOR

SITE StID: 1360
Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes

Mahdi Mohammadian
15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plaza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person
Contact Company

P 113 815 423



Receipt for Certified Mail

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

| | |
|---|----|
| 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 & Date Delivered | |
| Return Receipt Showing to Whom, Date, and Addressee's Address | |
| TOTAL Postage & Fees | \$ |
| Postmark or Date | |

JMS

INSTRUCTIONS:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print postage and address on the reverse of this form so that we can return this 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:
P. Kubo
N.A.
5772 Sellers Ave
Oakley, CA 94561
StID #1360

4a. Article Number
#P 113 815 423

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

7. Date of Delivery
5-4-93

5. Signature (Addressee)

6. Signature (Agent)
Mahdi Mohammadian

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

PS Form 3811, December 1991 * U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

PS Form 3800, June 1991

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 113 815 422

04/05/93
STID# 1360

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

Mahdi Mohammadian

15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

SITE

Date First Reported 08/28/86
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: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

04/05/93

LIST OF RESPONSIBLE PARTIES FOR

SITE

StID: 1360
Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580

Date First Reported 08/28/86
Substance: Gasoline
Petroleum (X) Yes

Mahdi Mohammadian

15595 Washington St.
San Lorenzo C A 94580

Responsible Party #1
Property Owner

Bob Robles
Texaco Refining & Mktg., Inc.
10 Univ City Plza 13th Fl
Universal City C A 91608

Responsible Party #2
Contact Person
Contact Company

Bert Kubo
N A
5772 Sellers Ave.
Oakley, Ca 94561
(510) 625-5191

Responsible Party #3
Contact Person
Contact Company

P 113 815 422

Receipt for
Certified Mail

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



| | |
|---|----|
| 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 & Date Delivered | |
| Return Receipt Showing to Whom, Date, and Addressee's Address | |
| TOTAL Postage & Fees | \$ |
| Postmark or Date | |

REVERSE:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & 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:
Mahdi Mohammadian
15595 Washington St.
San Lorenzo, CA 94580
Stid # 1360

4a. Article Number
P113815422

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 type="checkbox"/> Return Receipt for Merchandise |

5. Signature (Addressee)
Mahdi Mohammadian

6. Signature (Agent)

7. Date of Delivery
5/4/93

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

PS Form 3800, June 1991

PS Form 3811, December 1991 * U.S.G.P.O.: 1992-307-530

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.