

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Agency Director



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

October 4, 2007

Mr. Ronald Silberman  
Fordham Properties  
5835 Doyle Street, Suite 101  
Emeryville, CA 94608

Subject: Fuel Leak Case No. RO0000376 (Global ID #T0600101903), Fordham Property, 5515 Doyle Street, Emeryville, CA 94608

Dear Mr. Silberman:

Alameda County Environmental Health (ACEH) staff have reviewed the case file for the above referenced site, including the report entitled, "Work Plan for Soil and Groundwater Investigation," dated August 13, 2007 and prepared on your behalf by Environ International Corporation (Environ). The proposed scope of work as discussed in the work plan recommends the installation of six soil borings, with associated soil and groundwater sampling. The proposed scope of work is acceptable, provided the technical comments discussed below are implemented prior to the field investigation. Submittal of a revised Work Plan is not required unless an alternate scope of work outside that described in the Work Plan and technical comments is proposed.

We request that you address the following technical comments, perform the proposed work, and send us the reports described below. This report is being requested pursuant to the Regional Water Quality Control Board's authority under Section 13267 of the California Water Code. We request that you address the following technical comments, perform the proposed work, and send us the reports described below.

**TECHNICAL COMMENTS**

- 1. Soil Sampling.** Environ recommends soil sampling from select soil borings SGW-2, SGW-3 and SGW-5. ACEH requires soil sample must also be collected from all onsite soil borings. Soil samples are to be collected at discrete intervals identified by your geologist or engineer and at any interval where staining, odor, or elevated PID readings occur and at distinct changes in lithology, at the capillary fringe and at the total depth of the boring. Additionally, there is no mention of total depth for the installation of soil borings in the work plan. Soil borings are to be extended to a depth of 20 feet below ground surface. The recommended analytical suite for soil sampling is acceptable. Please present the results from the soil and groundwater investigation in the report requested below.
- 2. Soil Boring Locations.** The location of the soil borings in their current configuration is acceptable. However, if soil and groundwater contamination is discovered during the preliminary site assessment additional soil borings will be required downgradient or your site.
- 3. Groundwater Sampling.** Environ recommends the collection of grab groundwater samples for each of the soil borings. The proposed groundwater sample analysis recommended by

Environ is acceptable. Please present the results from groundwater sampling in the report requested below.

4. **Geotracker Report Submission.** During our customary check of the Geotracker database, ACEH staff noticed that no documents have been submitted for your site. Please update the Geotracker website to accurately reflect all documents pertinent to this site.

#### TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Steven Plunkett), according to the following schedule:

- **December 15, 2007** – Soil and Groundwater Investigation Report

These reports are being requested pursuant to California Health and Safety Code Section 25296.10, 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

#### ELECTRONIC SUBMITTAL OF REPORTS

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

Submission of reports to the Alameda County ftp site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. Submission of reports to the Geotracker website does not fulfill the requirement to submit documents to the Alameda County ftp site. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitor wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all necessary reports was required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements ([http://www.swrcb.ca.gov/ust/cleanup/electronic\\_reporting](http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting)).

In order to facilitate electronic correspondence, we request that you provide up to date electronic mail addresses for all responsible and interested parties. Please provide current electronic mail addresses and notify us of future changes to electronic mail addresses by sending an electronic mail message to me at [steven.plunkett@acgov.org](mailto:steven.plunkett@acgov.org)

#### PERJURY STATEMENT

Mr. Ronald Silberman  
October 3, 2007  
Page 3

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

#### PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

#### UNDERGROUND STORAGE TANK CLEANUP FUND

Please be aware that you may be eligible for reimbursement of the costs of investigation from the California Underground Storage Tank Cleanup Fund (Fund). In some cases, a deductible amount may apply. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

#### AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 383-1767.

Sincerely,



Steven Plunkett  
Hazardous Materials Specialist

Donna Drogos, ACEH, Steven Plunkett, ACEH, File

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

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

January 18, 2007

Mr. Ronald Silberman  
Fordham Properties  
5835 Doyle Street, Suite 101  
Emeryville, CA 94608

Subject: Fuel Leak Case No. RO0000376, Fordham Property, 5515 Doyle Street, Emeryville, CA 94608 – Request for Work Plan

Dear Mr. Silberman:

Alameda County Environmental Health (ACEH) staff have reviewed the case file for the above referenced site, including the report entitled, "Work Plan for limited Groundwater Investigation," dated January 1998, prepared on your behalf by Soma Corporation. To date ACEH has no record regarding the implementation of the work plan. In addition, underground storage tank (UST) remediation activities completed in 1995 present results from confirmation soil sampling during the removal of one approximately 1000-gallon UST.

Elevated concentrations of total petroleum hydrocarbons as gasoline (TPHg), total petroleum hydrocarbons as diesel (TPHd) and benzene were detected in soil samples collected from the UST excavation at concentrations of up to 5,200 mg/kg, 580 mg/kg and 24 mg/kg, respectively. Therefore, in the interest of moving your case through the regulatory process, ACEH request that you characterize the extent of the release to assess whether a significant impact has occurred to soil and groundwater at or immediately downgradient of your site.

Please submit a work plan detailing your proposal to define the extent of possible soil and groundwater contamination **by February 20, 2007**. This report is being requested pursuant to the Regional Water Quality Control Board's authority under Section 13267 of the California Water Code. We request that you address the following technical comments, perform the proposed work, and send us the reports described below.

**TECHNICAL REPORT REQUEST**

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Steven Plunkett), according to the following schedule:

- **February 20, 2007** – Work Plan for Site Assessment

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

**ELECTRONIC SUBMITTAL OF REPORTS**

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

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In order to facilitate electronic correspondence, we request that you provide up to date electronic mail addresses for all responsible and interested parties. Please provide current electronic mail addresses and notify us of future changes to electronic mail addresses by sending an electronic mail message to me at [steven.plunkett@acgov.org](mailto:steven.plunkett@acgov.org)

#### PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

#### PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

#### LANDOWNER NOTIFICATION REQUIREMENTS

Pursuant to California Health & Safety Code Section 25297.15, the active or primary responsible party for a fuel leak case must inform all current property owners of the site of cleanup actions or

requests for closure. Furthermore, ACEH may not consider any cleanup proposals or requests for case closure without assurance that this notification requirement has been met. Additionally, the active or primary responsible party is required to forward to ACEH a complete mailing list of all record fee title holders to the site. If you have not already submitted a list of record fee title owners in response to the Notice of Responsibility we require that you submit a complete mailing list of all record fee title owners of the site by **February 15, 2007**, which states, at a minimum, the following:

A. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that the following is a complete list of current record fee title owners and their mailing addresses for the above site:*

- OR -

B. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that I am the sole landowner for the above site.*

*(Note: Complete item A if there are multiple site landowners. If you are the sole site landowner, skip item A and complete item B.)*

In the future, for you to meet these requirements when submitting cleanup proposals or requests for case closure, ACEH requires that you:

1. Notify all current record owners of fee title to the site of any cleanup proposals or requests for case closure;
2. Submit a letter to ACEH which certifies that the notification requirement in 25297.15(a) of the Health and Safety Code has been met;
3. Forward to ACEH a copy of your complete mailing list of all record fee title holders to the site; and
4. Update your mailing list of all record fee title holders, and repeat the process outlined above prior to submittal of any additional *Corrective Action Plan* or your *Request for Case Closure*.

Your written certification to ACEH (Item 2 above) must state, at a minimum, the following:

A. *In accordance with Section 25297.15(a) of the Health & Safety Code, I, (name of primary responsible party), certify that I have notified all responsible landowners of the enclosed proposed action. (Check space for applicable proposed action(s)):*

*cleanup proposal (Corrective Action Plan)*

*request for case closure*

*local agency intention to make a determination that no further action is required*

*local agency intention to issue a closure letter*

- OR -

B. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that I am the sole landowner for the above site.*

Mr. Ronald Silberman  
January 16, 2007  
Page 4

(Note: Complete item A if there are multiple site landowners. If you are the sole site landowner, skip item A and complete item B.)

UNDERGROUND STORAGE TANK CLEANUP FUND

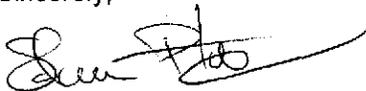
Please be aware that you may be eligible for reimbursement of the costs of investigation from the California Underground Storage Tank Cleanup Fund (Fund). In some cases, a deductible amount may apply. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 383-1767.

Sincerely,



Steven Plunkett  
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

Donna Drogos, ACEH  
Steven Plunkett, ACEH  
File



**SOMA**  
CORPORATION

1260B 45<sup>th</sup> Street  
Emeryville, CA 94608  
(510) 654-3900  
(510) 654-1960 Facsimile  
Fax Cover Sheet

To: Ms. Suzan Hugo From: Robert G. Gilman  
Fax: (510) 337-9335 Pages: 2  
Phone: (510) 567-6780 Date: 05/26/98  
Re: Tentative scheduling for drilling at CC:  
5515 Doyle Street, Emeryville, CA

Urgent     For Review     Please Comment     Please Reply     Please Recycle

● Comments:

Ms. Hugo,

This fax is in regards to the groundwater and soil samples to be taken at 5515 Doyle Street in Emeryville, as described in the Workplan for Limited Groundwater Investigation prepared for Mr. Ron Silberman of Fordham Properties.

Pursuant to your conversation between yourself and Dr. Norman Ozaki, drilling has tentatively been scheduled for Wednesday, June 10. Could you please let me know if this date will work with your schedule?

The information contained in this facsimile is confidential and is intended only for the use of the individual or entity to which it is addressed. If you are not the intended recipient or the person responsible for delivering this facsimile to the recipient, do not use or disclose this facsimile. If you have received this facsimile in error, please notify us immediately by calling us collect. We will arrange for proper shipment of the document back to SOMA so that you will not incur any postage costs. Thank you.

ALAMEDA COUNTY, DEPARTMENT OF  
ENVIRONMENTAL HEALTH

Hazardous Materials Inspection Form

II, III

white -env.health  
yellow -facility  
pink -files

Site ID # \_\_\_\_\_ Site Name FORDHAM PROPERTY Today Date 4/3/91

Site Address 5515 DOYLE ST.

City EMERYVILLE Zip 94608 Phone \_\_\_\_\_

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

\* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

On Site: Overexcavation  
met Plug along  
excavated at 8-9ft deep bgs.  
Site is approx. 4ft higher than  
railroad tracks at track.  
Area of former tank is very  
limited.

Noticeable HC obs. Some staining  
can backfill w/ clean fill.  
Advised Plug to evaluate results  
using ASTM Stds (RBCA)

5 soil samples collected  
1 bottom & 4 sidewalks

II.A BUSINESS PLANS (Title 19)

- \_\_\_ 1. Immediate Reporting 2703
- \_\_\_ 2. Bus. Plan Stds. 25503(b)
- \_\_\_ 3. RR Cars > 30 days 25503.7
- \_\_\_ 4. Inventory Information 25504(a)
- \_\_\_ 5. Inventory Complete 2730
- \_\_\_ 6. Emergency Response 25504(b)
- \_\_\_ 7. Training 25504(c)
- \_\_\_ 8. Deficiency 25505(a)
- \_\_\_ 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- \_\_\_ 10. Registration Form Filed 25533(a)
- \_\_\_ 11. Form Complete 25533(b)
- \_\_\_ 12. RMPP Contents 25534(c)
- \_\_\_ 13. Implement Sch. Req'd? (Y/N)
- \_\_\_ 14. OffSite Conseq. Assess. 25524(c)
- \_\_\_ 15. Probable Risk Assessment 25534(d)
- \_\_\_ 16. Persons Responsible 25534(g)
- \_\_\_ 17. Certification 25534(f)
- \_\_\_ 18. Exemption Request? (Y/N) 25536(b)
- \_\_\_ 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- |                               |   |
|-------------------------------|---|
| General                       | ___ 1. Permit Application 25284 (H&S)   |
|                               | ___ 2. Pipeline Leak Detection 25292 (H&S)  |
|                               | ___ 3. Records Maintenance 2712   |
|                               | ___ 4. Release Report 2651  |
|                               | ___ 5. Closure Plans 2670   |
| Monitoring for Existing Tanks | ___ 6. Method   |
|                               | 1) Monthly Test   |
|                               | 2) Daily Vadose<br>Semi-annual groundwater<br>One time soils                            |
|                               | 3) Daily Vadose<br>One time soils<br>Annual tank test                                   |
|                               | 4) Monthly Gndwater<br>One time soils   |
|                               | 5) Daily Inventory<br>Annual tank testing<br>Cont pipe leak det<br>Vadose/gndwater mon. |
|                               | 6) Daily Inventory<br>Annual tank testing<br>Cont pipe leak det                         |
|                               | 7) Weekly Tank Gauge<br>Annual tank testing   |
|                               | 8) Annual Tank Testing<br>Daily inventory   |
|                               | 9) Other _____  |
| New Tanks                     | ___ 7. Precs Tank Test 2643   |
|                               | Date: _____   |
|                               | ___ 8. Inventory Rec. 2644  |
|                               | ___ 9. Soil Testing 2646  |
|                               | ___ 10. Ground Water 2647   |
| ___ 11. Monitor Plan 2632     |   |
| ___ 12. Access. Secure 2634   |   |
| ___ 13. Plans Submit 2711     |   |
| Date: _____                   |   |
| ___ 14. As Built 2635         |   |
| Date: _____                   |   |

II, III

Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Inspector: \_\_\_\_\_

Signature: William J. Hugo

574

-----cut on this line-----  
Return this part with your check made payable to SWRCB. Use the enclosed envelope and send to the address above.

Local Agency: COUNTY OF ALAMEDA

Site #: 2586  
Site Location:

*New streets  
address*

FORDHAM PROPERTIES  
RONALD SILBERMAN  
~~5743 LANDREGAN ST~~ 5835 DOYLE ST. #115  
EMERYVILLE, CA 94608

FORDHAM PROPERTY  
5515 DOYLE ST  
EMERYVILLE, CA  
94608

*OK Rec  
3.30.95*

*6211*

Total amount due: \$ 268.66

Enter amount paid: \$268.<sup>66</sup>

*connection done  
FYI*

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.		
REPORT DATE 1 <sub>M</sub> 2 <sub>M</sub> 2 <sub>D</sub> 0 <sub>D</sub> 9 <sub>Y</sub> 4 <sub>Y</sub>		CASE # STID # 2586		SIGNED: <i>Susan Hugo</i> DATE: 2/21/94		
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Ronald J. Silberman		PHONE (510) 547-7177		SIGNATURE <i>Ronald J. Silberman</i>	
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME FORDHAM PROPERTIES, INC.			
	ADDRESS 5835 Doyle St. #115 STREET Emeryville CITY CA STATE 94608 ZIP					
RESPONSIBLE PARTY	NAME same as above <input type="checkbox"/> UNKNOWN		CONTACT PERSON		PHONE ( )	
	ADDRESS STREET CITY STATE ZIP					
SITE LOCATION	FACILITY NAME (IF APPLICABLE) 5515 Doyle Street		OPERATOR		PHONE ( )	
	ADDRESS 5515 Doyle St. STREET Emeryville CITY Alameda COUNTY 94608 ZIP					
	CROSS STREET 55th Street					
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Health Care Serv.		CONTACT PERSON Susan Hugo		PHONE (510) 567-6780	
	REGIONAL BOARD SF BAY RWQCB		Department of Environmental Health KEVIN GRAVES		PHONE (510) 286-0435	
SUBSTANCES INVOLVED	(1) NAME Petroleum Hydrocarbons - TPH gasoline, benzene				QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN	
	(2) NAME Toluene, xylene, ethyl benzene				<input checked="" type="checkbox"/> UNKNOWN	
DISCOVERY/ABATEMENT	DATE DISCOVERED 1 <sub>M</sub> 0 <sub>M</sub> 2 <sub>D</sub> 0 <sub>D</sub> 9 <sub>Y</sub> 4 <sub>Y</sub>		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER			
	DATE DISCHARGE BEGAN UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER			
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 1 <sub>M</sub> 0 <sub>M</sub> 2 <sub>D</sub> 0 <sub>D</sub> 9 <sub>Y</sub> 4 <sub>Y</sub>					
SOURCE/CAUSE	SOURCE OF DISCHARGE <input checked="" type="checkbox"/> TANK LEAK <input type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input checked="" type="checkbox"/> CORROSION <input type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER			
	CASE TYPE CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)					
CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input checked="" type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY					
	REMEDIAL ACTION CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT)					
COMMENTS	As soon as break in weather permits, contaminated soil will be removed & disposed.					
	HSC 05 (8/93)					

## INSTRUCTIONS

### EMERGENCY

Indicate whether emergency response personnel and equipment were involved at any time. If so, a Hazardous Material Incident Report should be filed with the State Office of Emergency Services (OES) at 2800 Meadowview Road, Sacramento, CA 95832. Copies of the OES report form may be obtained at your local underground storage tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

### LOCAL AGENCY ONLY

To avoid duplicate notification pursuant to Health and Safety code Section 25180.5, a government employee should sign and date the form in this block. A signature here does not mean that the leak has been determined to pose a significant threat to human health or safety, only that notification procedures have been followed if required.

### REPORTED BY

Enter your name, telephone number, and address. Indicate which party you represent and provide company or agency name.

### RESPONSIBLE PARTY

Enter name, telephone number, contact person, and address of the party responsible for the leak. The responsible party would normally be the tank owner.

### SITE LOCATION

Enter information regarding the tank facility. At a minimum, you must provide the facility name and full address.

### IMPLEMENTING AGENCIES

Enter names of the Local agency and Regional Water Quality Control Board involved.

### SUBSTANCES INVOLVED

Enter the name and quantity lost of the hazardous substance involved. Room is provided for information on two substances if appropriate. If more than two substances leaked, list the two of most concern for cleanup.

### DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the leak.

### SOURCE/CAUSE

Indicate source(s) of leak. Check box(es) indicating cause of leak.

### CASE TYPE

Indicate the case type category for this leak. Check one box only. Case type is based on the most sensitive resource affected. For example, if both soil and ground water have been affected, case type will be "Ground Water". Indicate "Drinking Water" only if one or more municipal or domestic water wells have actually been affected. A "Ground Water" designation does not imply that the affected water cannot be, or is now, used for drinking water, but only that water wells have not yet been affected. It is understood that case type may change upon further investigation.

### CURRENT STATUS

Indicate the category which best describes the current status of the case. Check one box only. The response should be relative to the case type. For example, if case type is "Ground Water", then "Current Status" should refer to the status of the ground water investigation or cleanup, as opposed to that of soil. Descriptions of options follow:

No Action Taken - No action has been taken by responsible party beyond initial report of leak.

Leak Being Confirmed - Leak suspected at site, but has not been confirmed.  
Preliminary Site Assessment Workplan Submitted - workplan/proposal requested of/submitted by responsible party to determine whether ground water has been, or will be, impacted as a result of the release.  
Preliminary Site Assessment Underway - implementation of workplan.  
Pollution Characterization - responsible party is in the process of fully defining the extent of contamination in soil and ground water and assessing impacts on surface and/or ground water.  
Remediation Plan - remediation plan submitted evaluating long term remediation options. Proposal and implementation schedule for appropriate remediation options also submitted.  
Cleanup Underway - implementation of remediation plan.  
Post Cleanup Monitoring in Progress - periodic ground water or other monitoring at site, as necessary, to verify and/or evaluate effectiveness of remedial activities.  
Case Closed - regional board and local agency in concurrence that no further work is necessary at the site.

IMPORTANT: THE INFORMATION PROVIDED ON THIS FORM IS INTENDED FOR GENERAL STATISTICAL PURPOSES ONLY AND IS NOT TO BE CONSTRUED AS REPRESENTING THE OFFICIAL POSITION OF ANY GOVERNMENTAL AGENCY

### REMEDIAL ACTION

Indicate which action have been used to cleanup or remediate the leak. Descriptions of options follow:

Cap Site - install horizontal impermeable layer to reduce rainfall infiltration.  
Containment Barrier - install vertical dike to block horizontal movement of contaminant.  
Excavate and Dispose - remove contaminated soil and dispose in approved site.  
Excavate and Treat - remove contaminated soil and treat (includes spreading or land farming).  
Remove Free Product - remove floating product from water table.  
Pump and Treat Groundwater - generally employed to remove dissolved contaminants.  
Enhanced Biodegradation - use of any available technology to promote bacterial decomposition of contaminants.  
Replace Supply - provide alternative water supply to affected parties.  
Treatment at Hookup - install water treatment devices at each dwelling or other place of use.  
Vacuum Extract - use pumps or blowers to draw air through soil.  
Vent Soil - bore holes in soil to allow volatilization of contaminants.  
No Action Required - incident is minor, requiring no remedial action.

COMMENTS - Use this space to elaborate on any aspects of the incident.

SIGNATURE - Sign the form in the space provided.

### DISTRIBUTION

If the form is completed by the tank owner or his agent, retain the last copy and forward the remaining copies intact to your local tank permitting agency for distribution.

1. Original - Local Tank Permitting Agency
2. State Water Resources Control Board, Division of Clean Water Programs, Underground Storage Tank Program, P.O. Box 944212, Sacramento, CA 94244-2120
3. Regional Water Quality Control Board
4. Local Health Officer and County Board of Supervisors or their designee to receive Proposition 65 notifications.
5. Owner/responsible party.

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

December 12, 1994  
STID# 2586

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

Mr. Ronald Silberman  
Fordham Properties  
5743 Landregan Street  
Emeryville, California 94608

**RE: Underground Storage Tank Removal  
Fordham Property - 5515 Doyle St., Emeryville, CA 94608**

Dear Mr. Silberman:

The Alameda County Department of Environmental Health, Environmental Protection Division has recently reviewed the case file concerning the removal of one 1,000 gallon underground fuel storage tank on October 20, 1994 at the referenced site. We are in receipt of the Underground Tank Removal Report (November, 1994) prepared and submitted by Cottle Engineering for the subject site.

Soil samples collected from the bottom of the excavation at 8 feet below ground surface (bgs) exhibited petroleum hydrocarbon contamination as high as 4,200 ppm TPH gasoline, 0.22 ppm benzene, 87 ppm toluene, 540 ppm xylene and 90 ppm ethyl benzene. The former tank appeared to have visible sign of corrosion and several holes were found near the bottom. Groundwater was not present in the excavation during the removal of the former tank.

Because of the degree of contamination found at the site further environmental assessment is required. A preliminary assessment should be conducted to determine the extent of soil and/or groundwater contamination that has resulted from the former leaking tank. The information gathered by this investigation will be used to assess the need for additional actions at the site.

Groundwater flow direction must be established at the site. At a minimum, one monitoring well should be installed within 10 feet in the verified downgradient location of the former tank excavation. Quarterly groundwater monitoring must be performed to determine extent of the petroleum hydrocarbon contamination. Groundwater monitoring wells must be sampled and analyzed for the following target compounds: TPH gasoline, TPH diesel, benzene, toluene, ethyl benzene, xylene and lead. Groundwater elevation readings must be incorporated in the quarterly sampling.

Until cleanup is complete, you will need to submit reports to this office every three months (or at a more frequent interval, if specified at any time). This reports must include information

Mr. Ronald Silberman  
RE: 5515 Doyle Street, Emeryville, CA 94608  
December 12, 1994  
Page 2 of 2

pertaining to further investigative results; the methods of cleanup actions implemented to date; and the method and disposal of any contaminated material. Copies of manifests for such disposal must be sent to this office. Stockpiled soil from the pit may not be used to backfill these holes without authorization from this office. Only clean fill can be used to backfill the excavation pit. Please provide our office with documentation of the disposal of the stockpiled soil.

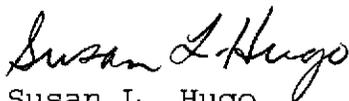
Your work plan must be submitted to this office no later than **February 1, 1995**. All reports and proposals must be submitted under seal of a California Registered Geologist or Registered Civil Engineer with a statement of qualifications for each lead professionals involved with the project.

This letter constitutes a formal requests for technical reports pursuant to California Water Code Section 13267(b). Any extensions of stated deadlines or changes in the workplan must be confirmed in writing and approved by this agency.

Enclosed is a copy of the Underground Storage Tank Unauthorized Release (Leak)/Contamination Site Report which must be completed and submitted to this office **within five working days** upon receipt of this letter.

If you have any questions regarding this letter, please contact me at (510) 567-6780.

Sincerely,

  
Susan L. Hugo  
Senior Hazardous Materials Specialist

Enclosure

cc: Rafat A. Shahid, Director, Environmental Health  
Gil Jensen, Alameda County District Attorney's Office  
Kevin Graves, San Francisco Bay RWQCB  
Edgar B. Howell, Chief, Environmental Protection Div. / file

white - env. health  
yellow - facility  
pink - files

ALAMEDA COUNTY, DEPARTMENT OF  
ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy  
Alameda CA 94502  
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # 2586 Site Name FORDHAM PROPERTY Today's Date 12/12/94

Site Address 5515 Doyle St.

City Emeryville Zip 94608 Phone \_\_\_\_\_

\_\_\_\_ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

**Inspection Categories:**

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
 II. Hazardous Materials Business Plan, Acutely Hazardous Materials  
 III. Under ground Storage Tanks

\* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

**Comments:**

On Site: Met Peng Leong (SOMA),  
Ron Silberman & Joe Pietro (RPs)

Discussed:

- 1) Limited overexcavation - collect verification  
soil samples
- 2) Characterize stockpile soil, for reuse at  
the site (sample one per 20 cu yds)
- 3) Backfill w/ cleanfill
- 4) May use the concrete (after cleaning & lining)  
to backfill the excavation
- 5) Still need to conduct a groundwater  
investigation

Contact \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Inspector \_\_\_\_\_

Signature Juan L. Cruz

II, III

# COTTLE Engineering

ALEC  
HAZMAT

94 NOV 10 PM 1:37

P.O. Box 163  
Antioch, CA 94509  
(510) 754-9938

CA Lic. No. 481444

## TELECOPY COVER SHEET

Date: 11-10-94

Please deliver the following  
message to:

Name: Brian Oliva

Company: Alameda County Health - Haz Mat Division

FAX Phone Number: 337-9385<sup>3</sup>

From: Roy Pantle

Number of pages (including cover page) 4

Notes: We would like to treat this soil on site.

Please call me with your thoughts  
on the subject.

Thank You

This site is 5515 Doyle Street, Emeryville,  
CA.

Please contact Roy at (510) 754-9938  
if you have any questions. FAX (510) 754-8428

<b>McCAMPBELL ANALYTICAL INC.</b>	110 2nd Avenue South, #D7, Pacheco, CA 94553 Tele: 510-798-1620 Fax: 510-798-1622
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Cottle Industries P.O. Box 7 Antioch, CA 94509	Client Project ID: Fordham Park	Date Sampled: 10/20/94
		Date Received: 10/20/94
	Client Contact: Roy Pantle	Date Extracted: 10/20/94
	Client P.O.:	Date Analyzed: 10/20-10/21/94

**Gasoline Range (C6-C12) Volatile Hydrocarbons as Gasoline\*, with BTEX\***  
EPA methods 5030, modified 8015, and 8020 or 602; California RWQCB (SF Bay Region) method GCFID(5030)

Lab ID	Client ID	Matrix	TPH(g) <sup>+</sup>	Benzene	Toluene	Ethylbenzene	Xylenes	% Rec. Surrogate
41744	FP-1	S	760,b	0.22	3.3	14	68	92
41745	FP-2	S	4200,b	ND < 1	87	90	540	87
41746	Comp-FP-1	S	73,b,d	ND < 0.01	0.23	0.34	1.4	110
Detection Limit unless otherwise stated; ND means Not Detected	W	50 ug/L	0.5	0.5	0.5	0.5	0.5	
	S	1.0 mg/kg	0.005	0.005	0.005	0.005	0.005	

\*water samples are reported in ug/L, soil samples in mg/kg, and all TCLP extracts in mg/L  
# cluttered chromatogram; sample peak co-elutes with surrogate peak

+ The following descriptions of the TPH chromatogram are cursory in nature and McCampbell Analytical is not responsible for their interpretation: a) unmodified or weakly modified gasoline is significant; b) heavier gasoline range compounds are significant(aged gasoline?); c) lighter gasoline range compounds (the most mobile fraction) are significant; d) gasoline range compounds are significant; no recognizable pattern; e) TPH pattern that does not appear to be derived from gasoline (?); f) one to a few isolated peaks present; g) strongly aged gasoline or diesel range compounds are significant; h) lighter than water immiscible phase is present.

McCAMPBELL ANALYTICAL INC.

110 2nd Avenue South, #D7, Pacheco, CA 94553  
Tele: 510-798-1620 Fax: 510-798-1622

## QC REPORT FOR HYDROCARBON ANALYSES

Date: 10/20/94

Matrix: Soil

Analyte	Concentration (mg/kg)			Amount Spiked	% Recovery		
	Sample	MS	MSD		MS	MSD	RPD
TPH (gas)	0.000	1.925	1.994	2.03	95	99	3.5
Benzene	0.000	0.194	0.186	0.2	97	93	4.2
Toluene	0.000	0.196	0.188	0.2	98	94	4.2
Ethylbenzene	0.000	0.192	0.188	0.2	96	94	2.1
Xylenes	0.000	0.600	0.584	0.6	100	97	2.7
TPH (diesel)	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TRPH (oil & grease)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

$$\% \text{ Rec.} = (\text{MS} - \text{Sample}) / \text{amount spiked} \times 100$$

$$\text{RPD} = (\text{MS} - \text{MSD}) / (\text{MS} + \text{MSD}) \times 2 \times 100$$



HAZARDOUS WASTE GENERATOR INSPECTION REPORT

STID #:  FACILITY NAME: Fordham Properties PG. 1 OF 1

SUPPLEMENTAL FORM 5515 Doyle St  
Emeryville

# 428262  
UCL - 8 F.D. George Warren Handler: Dexana LTD  
O<sub>2</sub> - 1.9 Permit 4/95  
(Manifest Reviewed)

Tank removed approximately 750 gallons containing fuel, type unknown. Tank rusted with holes noted at bottom tank. Picture taken. Leak definitely occurred.

(1) Composite Sample <sup>11N</sup>  
 taken of Stockpile excavated <sub>5.8'</sub>

10:55am FP-2	X	2 samples taken. 1 foot
10	7' excavation	below tank.
		Groundwater not reached.
10:55am FP-1	X	
		Fill - end

Excavation: Strong odor and discoloration to be evident.

Simplex Analyze for - TPAD & TPHG & BTXES  
 5-Days turn around time - Submit Sample <sup>Analysis</sup> to Brian Oliva.

PRINT NAME: DAVID E GOTTLE SR. INSPECTED BY: Raul Murgillano  
 SIGNATURE: [Signature] DATE: 10/20/94

**ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY  
DEPARTMENT OF ENVIRONMENTAL HEALTH  
HAZARDOUS MATERIALS DIVISION  
80 SWAN WAY, ROOM 200  
OAKLAND, CA 94621  
PHONE NO. 510/271-4320**

*Bruce Allee  
9/28/94*

**ACCEPTED**  
Underground Storage Tank Closure Permit Application  
Alameda County Division of Hazardous Materials  
80 Swan Way, Suite 200,  
Oakland, CA 94621  
Telephone: (510) 271-4320

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction/destruction. One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal. Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws.

Notify this Department at least 72 hours prior to the following required inspections: \*

- Piping
- Removal of Tank(s)
- Sampling
- Final Inspection

Issuance of a permit to operate is dependent on compliance with applicable laws and regulations.

**\*THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS\***

*Alameda County Health Care Services Agency  
Special Inspectors  
O Site Safety Permit  
Comform to Code & CCR (OSHA)*

**UNDERGROUND TANK CLOSURE PLAN**

\* \* \* Complete according to attached instructions \* \* \*

1. Business Name Fordham Properties

Business Owner Fordham Properties

2. Site Address 5515 Doyle Street

City Emeryville Zip 94608 Phone 510-547-7177

3. Mailing Address 5743 Landreagan Street

City Emeryville Zip 94608 Phone 510-547-7177

4. Land Owner Fordham Properties

Address 5743 Landreagan St City, State Emeryville, CA Zip 94608

5. Generator name under which tank will be manifested Fordham Properties

EPA I.D. No. under which tank will be manifested CAC

6. Contractor Cottle Engineering  
Address P.O. Box 163  
City Antioch, CA 94509 Phone 510-754-9935  
License Type A ID# 481444

\*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board. Indicate that the certificate has been received, in addition, to holding the appropriate contractors license type.

7. Consultant N/A  
Address \_\_\_\_\_  
City \_\_\_\_\_ Phone \_\_\_\_\_

8. Contact Person for Investigation  
Name Ray Pantle Title Operations Mgr.  
Phone 510-754-9935

9. Number of tanks being closed under this plan one  
Length of piping being removed under this plan 15 L.F.  
Total number of tanks at facility one

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

\*\* Underground tanks are hazardous waste and must be handled \*\*  
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter  
Name N/A EPA I.D. No. \_\_\_\_\_  
Hauler License No. \_\_\_\_\_ License Exp. Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

b) Product/Residual Sludge/Rinsate Disposal Site  
Name N/A EPA I.D. No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

c) Tank and Piping Transporter

Name Dexanna Ltd. EPA I.D. No. CAD982438566  
Hauler License No. 428262 License Exp. Date \_\_\_\_\_  
Address 3104 Athens Court  
City Concord State CA Zip \_\_\_\_\_

d) Tank and Piping Disposal Site

Name Erickson Environmental EPA I.D. No. CAD009466392  
Address 255 Parr Blvd.  
City Richmond State CA Zip 94801

11. Experienced Sample Collector

Name Roy Puntle  
Company Cottle Engineering  
Address P.O. Box 163  
City Antioch State CA Zip 94509 Phone 510-754-9935

12. Laboratory

Name McC Campbell Analytical  
Address 110 Second Ave. South  
City Pacheco State CA Zip 94553  
State Certification No. 1687

13. Have tanks or pipes leaked in the past? Yes [ ] No

If yes, describe. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Describe methods to be used for rendering tank inert

Introduction of dry ice at a ratio of 2.5...  
lbs. per 100 gallons of tank volume approx.  
One hour prior to removal of the Tank.

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be plugged.

The Bay Area Air Quality Management District (771-6000), along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of explosion proof combustible gas meters to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas meter on site to verify tank inertness.

15. Tank History and Sampling Information

Tank		Material to be sampled (tank contents, soil, ground-water, etc.)	Location and Depth of Samples
Capacity	Use History (see instructions)		
550 gal.	Fuel Storage	soil	1 Foot below bottom of tank

One soil sample must be collected for every 20 feet of piping that is removed. A ground water sample must be collected should any ground water be present in the excavation.

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated)	Sampling Plan
15 yards	One composite from at least five locations in the stockpile

Stockpiled soil must be placed on banded plastic and must be completely covered by plastic sheeting.

16. Chemical methods and associated detection limits to be used for analyzing samples

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
Diesel	TPHD	8015	1.0 ppm
Gasoline (Unleaded)	TPHG BTXE	602/8020/8015	1.0 ppm 0.005 ppm

17. Submit Site Health and Safety Plan (See Instructions)

18. Submit Worker's Compensation Certificate copy

Name of Insurer IPS Insurance

19. Submit Plot Plan (See Instructions)

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)

22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.

I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

Signature of Contractor

Name (please type) DAVID E. COTTLE, SR.

Signature David E. Cottle, Sr.

Date 9-21-94

Signature of Site Owner or Operator

Name (please type) JOE PIERI

Signature Joe Pieri

Date 9-21-94

**HEALTH & SAFETY PLAN**

**for**

**FORDHAM PROPERTIES  
EMERYVILLE, CALIFORNIA**

**SEPTEMBER, 1994**

prepared by:

**COTTLE ENGINEERING  
P.O. BOX 163  
ANTIOCH, CA 94509  
510-754-9935**

## HEALTH AND SAFETY PLAN

### INTRODUCTION:

Cottle Engineering (Cottle) Health and Safety Program is designed to meet the requirements of 29 CFR 1910.120.

The objective of this Health and Safety Plan is to establish health and safety guidelines for the removal of one ~~1,000~~<sup>550</sup> gallon underground fuel storage tank located at 5515 Doyle Street, Emeryville, California. The project will consist of the removal and disposal of one 550 gallon underground fuel storage tank, collecting soil samples for laboratory analyses, and general site cleanup following completion of site operations. General information pertaining to the site is provided in Table 1.

TABLE 1

#### GENERAL INFORMATION HEALTH AND SAFETY PLAN

Fordham Properties  
Emeryville, California

Site: Fordham Properties

Location: 5515 Doyle Street, Emeryville, California

Background Review: Preliminary

#### Site/Hazard Overview

Apparent Hazard: Low

Type of Facility: Fuel Storage

Status of Facility: Inactive

Waste Types: Liquid, Solid

Waste Characteristics: Toxic, Ignitable, Volatile

Hazard Type: Liquids, Vapors

## CHARACTERIZATION OF WASTE PRODUCTS

The chemicals of concern on site are petroleum hydrocarbons. A summary of the health effects is given in Appendix I.

## SITE SAFETY WORK PLAN

### GENERAL:

Operations that will be conducted on the site include the excavation and removal of one 550 gallon single walled fuel storage tank and related piping, the collection of soil samples, and general site cleanup. The procedures for collection of soil and groundwater samples are described in Appendix II.

The Site Safety Officer (Table 3), will assess the hazard of inhalation of vapors or particulate matter according to meteorological conditions and the phase of site operations, and will determine when, and in what areas of the site, personnel will be required to wear respirators.

On site personnel are trained to be aware of the potential for temperature stress during site operations. The combination of overexertion, protective clothing, and ambient temperature extremes could cause stress which could lead to dehydration if body liquids and minerals are not replaced. Heat exhaustion in warm climate, and hypothermia in cold climates, etc.. Rest periods and replacement of body fluids by potable drinking water and electrolyte containing beverages are required to prevent heat stress.

**HEALTH AND SAFETY RESPONSIBILITIES FOR KEY PERSONNEL:**

The Project Manager and the Site Safety Officer will be responsible for planning and coordinating all on site activities and will ensure that a Tailgate Safety Meeting Form is obtained before work begins. They will also ensure that the Tailgate Safety Meeting Form is signed daily by each employee on site and that the Health and Safety Plan is reviewed by all site operations personnel before work begins.

The Site Safety Officer will be responsible for implementing all facets of the Health and Safety Plan during site operations, including briefing all participants in the Health and Safety Plan requirements, ensuring that all necessary permits are on site, enforcing the use of hearing protection where required, establishing the exclusionary zone or other safe zones as appropriate, and determining actions to be taken in case of an on site emergency. The Site Safety Officer will bring all real or potential health and safety problems to the attention of the Project Manager.

The Project Manager will be responsible for determining all site-specific health and safety decisions and will oversee their implementation.

**WORKER TRAINING REQUIREMENTS:**

As required by 29 CFR 1910.120, all site operations personnel will have completed at least 40 hours of health and safety

training prior to entering the site. Additionally, the Site Supervisor will have completed an additional 8 hours of specialized instruction. Evidence is generally demonstrated by a Certificate of Training. In addition, no visitors will be allowed inside the exclusionary zone if compliance with the training provisions of 29 CFR 1910.120 cannot be demonstrated.

**MEDICAL SURVEILLANCE REQUIREMENTS:**

As required by 29 CFR 1910.120, all site operations personnel shall participate in a medical surveillance (Occupational Health) monitoring program (as appropriate for each project).

Documentation will be required from all subcontractor site operations personnel to demonstrate this compliance.

**DOCUMENTATION:**

Compliance with the Health and Safety Plan review requirement will be documented on a sign-off sheet during the safety briefing attendance meetings which will be scheduled at the beginning of field operations and which will be reviewed at the beginning of each day during the conduct of site operations. A sign-off sheet is presented in Appendix III.

This meeting, also known as the Tailgate Safety Meeting, will be conducted by the Site Safety Officer or the Site Operations Supervisor (Table 2). This meeting must be attended by all Cottle employees and other subcontractors working on the project that day. It is strongly recommended that all non-employees at the site also attend.

## GENERAL SAFETY REQUIREMENTS:

The following general safety requirements shall be followed by all site operations personnel, or qualified visitors, working and/or entering the site during the conduct of the site operations.

- \* No site operations personnel or visitors will be allowed on site without the prior knowledge and consent of the Site Safety Officer.
- \* There will be no activities conducted on site without sufficient backup personnel. At a minimum, two persons must be present on the site during the conduct of the site operations. A trained Cottle supervisor, as required by 29 CFR 1910.120, must be present on site at all times during the conduct of site operations.
- \* All site operations personnel shall immediately bring to the attention of the Site Safety Officer of Project Manager any unsafe condition or practice associated with the site activities that they are unable to correct themselves.
- \* There will be no smoking, eating, chewing gum, drinking or tobacco consumption inside the exclusionary zone/controlled area.
- \* Good housekeeping practices will be used on site at all times.
- \* Hands shall be thoroughly cleaned prior to smoking, eating or other activities outside the exclusionary zone/controlled area.
- \* All borings will be monitored to prevent inadvertent contact.
- \* Site operations personnel must avoid unnecessary contamination, including walking through known or suspected "hot spots" or contaminated puddles, kneeling or sitting on the ground, leaning against potentially contaminated barrels or equipment.
- \* A fire extinguisher (minimum rating 10:B:C) will be on site at all times.
- \* Respiratory devices will not be worn with beards, long sideburns, or under any other conditions that prevent a proper seal while the respirator is being worn.

- \* Contact lenses will not be worn with respirators in use.
- \* Only designated personnel will be allowed to operate specialized equipment (e.g. drill rig).
- \* No confined space entry is authorized by this Health and Safety Plan.

**EXCLUSIONARY ZONE/CONTROLLED AREA:**

An Exclusionary Zone will be established immediately around the tank excavation area and the soils stockpile, clearly marked (as needed). A map will be posted on site showing these areas.

The following activities will be conducted in the Exclusionary Zone:

- \* Equipment Staging
- \* Excavation of The Tank and Stockpiling of The Spoil
- \* Soil Sampling

**PERSONAL PROTECTIVE EQUIPMENT:**

The level of protection will be Level D (modified if appropriate) with upgrade to Level C if appropriate. Level D includes the following equipment:

- \* Hard hat
- \* Routine work clothes
- \* Steel-toed safety boots
- \* Protective eye wear
- \* Nitrile gloves (when handling soil, during testing, sampling, shovelling, etc.).

Level D includes the following equipment:

- \* Hard hat
- \* Nitrile gloves
- \* Disposable Tyvek coveralls over work clothes
- \* Disposable PVC booties over steel-toed safety boots
- \* NIOSH-approved full face (or half-face respirator with goggles) equipped with high-efficiency combination cartridges for toxic particulates and organic vapors (on standby)
- \* Earplugs or earmuffs (while working on or around operating equipment)

The decision to upgrade to Level C protective equipment will be determined by the on site Health & Safety Officer.

**DECONTAMINATION:**

Decontamination consists of contamination-reduction phases and personal hygiene for site operations. The following decontamination/contamination reduction steps will be used:

- \* Maximize the use of disposable clothing for personnel protection (latex surgical gloves, Tyvek coveralls, and PVC booties).

- \* Remove disposable PVC booties, Tyvek coveralls, outer gloves, and dispose of them in clean unused garbage bags.
- \* Remove respirator, remove cartridges, and discard them. Return respirator to storeroom at the end of the job. All respirators will be properly washed, sanitized, tagged, and stored.
- \* The garbage bags holding disposable items from the site operations will be placed in securely covered, clearly marked 55-gallon steel drums and placed in an area of the site at the direction of the Site Engineer. Final disposition will be in accordance with the site remedial action.
- \* Wash hands and face with soap immediately upon exiting the Exclusionary Zone.
- \* After departing the site, site operations personnel should shower as soon as possible.
- \* After departing the site, fabric work clothes and undergarments should be washed as soon as possible using routine wash methods.
- \* (As appropriate) each piece of equipment (tools and all vehicles contacting potentially contaminated materials) must be decontaminated before it leaves the operation site. This must be done in an area designated for equipment decontamination (to be determined). Large items of equipment, such as the drill rig, vehicles and trucks, should be subjected to decontamination by high pressure water washes or steam. A special solution, such as Liqui-Nox, a 1% to 2% TSP solution, or Bola degreaser, may have to be used on sampling equipment or heavily soiled items. All wash and rinse water must be contained (on visqueen for large equipment, in 5 gallon buckets for tools), collected and stored in marked 55 gallon drums on site until final disposition is determined.

**PHYSICAL HAZARDS:**

The physical hazards associated with operating heavy equipment are as follows:

- \* Moving machine parts
- \* "Struck by" or rollover injuries from the equipment
- \* Noise levels
- \* Exposure to contaminated particulates while excavating soil

- \* Possible contact with gas or power lines during excavation
- \* Possible contact with underground utilities

All personnel operating the excavating equipment will be experienced with the equipment's operating procedures and safety precautions.

Noise levels for heavy equipment operators may be expected to exceed 85 decibels on the A-weighted scale. Therefore, heavy equipment operators will wear disposable earplugs or earmuffs with a noise reduction rating (NRR) of at least 25 decibels. A hearing conservation program, in conformance with OSHA requirements, will be in effect throughout the duration of the project.

Care will be used when moving excavated spoil to avoid creating dust. An air purifying respirator may be required while performing any operation where sufficient dust may be generated. See Personal Protective Equipment section.

The Project Manager or the Site Safety Officer shall investigate all potential excavation sites for gas and power lines above and below ground before excavating. This includes contacting the Underground Service Alert organization at 800-642-2444 at least 24 hours prior to the job commencement. No excavation will occur in any area where such lines are found.

#### **OCCUPATIONAL EXPOSURE MONITORING:**

In order to prevent overexposures to employees of physical and chemical agents, it may be necessary to conduct monitoring evaluations. Environmental agents of concern on this project may include airborne concentrations of petroleum hydrocarbons, noise, or temperature extremes. The Site Safety Officer may use any of the following equipment to assess employee exposure:

- \* HNu (or similar) Photoionization Detector
- \* Foxboro Organic Vapor Analyzer/Flame Ionization Detector
- \* Draeger Colorimetric Indicator Tubes
- \* Quest Noise Dosimeter
- \* Gilian Personal Air Sampling Pumps, with appropriate media
- \* Metrosonics WBGT Heat Stress Monitor
- \* Combustible gas indicator with ppm scale (Gastech 1314 or equivalent)
- \* Oxygen detector

#### **EMERGENCY INFORMATION:**

A description of local resources available in case of emergency is presented on Table 2.

#### **EMERGENCY PROCEDURES FOR INJURY:**

If an injury should occur on the site and involves exposure to gross contamination, the local emergency contacts (Table 2) will be notified of the incident and of the potential contaminants

involved. Before being transported to the medical care facility, the victim will undergo a gross washdown using clear water after removal of all contaminated clothing. This will reduce the chance of spreading contaminants to the emergency vehicle and local hospital.

If an accident should occur on site which results in a minor injury (e.g., cuts or bruises), a first aid kit and portable eye wash unit will be available for treatment.

If an accident should occur on site which results in a major trauma (e.g., fractured bones or severe lacerations), the local emergency telephone number (911) will be used to contact emergency services. The victim will not be transported in any vehicle other than a fully equipped emergency vehicle.

**SAFETY EQUIPMENT CHECKLIST:**

A safety equipment checklist is presented on Table 3.

**TABLE 2**

**EMERGENCY INFORMATION  
LOCAL RESOURCES**

**HEALTH AND SAFETY PLAN**

**FORDHAM PROPERTIES  
Emeryville, California**

**Ambulance: 510-420-6080**

**Hospital Emergency Room: MERRITT/PERALTA MEDICAL CENTER  
WEBSTER STREET  
OAKLAND, CALIFORNIA  
510-655-4000**

**Route to the Hospital: ENTER THE 580 FREEWAY EASTBOUND, EXIT AT  
TELEGRAPH, GO SOUTH ON TELEGRAPH TO  
WEBSTER, TURN RIGHT ON WEBSTER, LEFT ON  
HAWTHORNE AND PROCEED TO THE EMERGENCY  
ENTRANCE.**

**Local Police: (911)**

**Local Fire: (911)**

**San Mateo County Health Dept.: 510-567-6737**

**Cottle Project Manager: David E. Cottle, Sr.**

**Cottle Site Safety Officer: Alvin Knackstedt**

**Cottle Site Operations Supervisor: David E. Cottle, Sr.**

TABLE 3

SAFETY EQUIPMENT CHECKLIST

HEALTH AND SAFETY PLAN

FORDHAM PROPERTIES  
Emeryville, California

PERSONAL PROTECTION

Full face respirator  
Half face respirator  
High efficiency combination cartridges for  
toxic particulates, organic vapors, and  
acid gasses  
safety boots - industrial grade work boots  
with steel toe  
Tyvek coveralls  
Safety glasses  
Goggles  
Hard hat  
PVC rain gear  
Nitrile Gloves  
Latex gloves  
PVC Booties

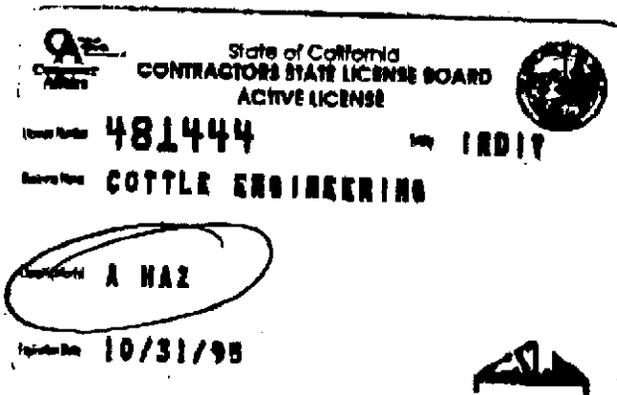
MONITORING AND  
SURVEILLANCE

MISCELLANEOUS:

First aid kit  
Drinking water  
Eye wash kit  
Fire extinguisher  
Ear plugs or earmuffs

PERSONAL DECONTAMINATION EQUIPMENT

Clear water  
5 gallon plastic buckets  
Liqui-Nox  
Hand soap  
Plastic garbage bags  
Paper hand towels



# COTTLE Engineering

P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935

CA Lic. No. 481444

## TELECOPY COVER SHEET

Date: 9-28-94

Please deliver the following  
message to:

Name: Brian Oliva

Company: Alameda County Haz Mat Dept.

FAX Phone Number: 337-9335

From: Roy Pantle

Number of pages (including cover page) 3

Notes: Hazardous Substances License

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Please contact Roy at (510) 754-9935  
if you have any questions, FAX (510) 754-8428

**CORD**

DATE (MM/DD/YY)  
7/08/94

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IPS Insurance Agency, Inc.  
346 West Grantline Road  
Tracy, CA 95376

**COMPANIES AFFORDING COVERAGE**

- COMPANY A AMERICAN INT'L SPEC LINES INS CO.
- COMPANY B NATIONAL UNION FIRE INSURANCE
- COMPANY C
- COMPANY D

D.C. ENGINEERING  
P.O. Box 163  
Antioch, CA 94509

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
<b>GENERAL LIABILITY</b>				GENERAL AGGREGATE \$ 1,000,000
<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	91644-9406049	6/08/94	6/08/95	PRODUCTS-COMP/OP AGG \$ 1,000,000
<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 50,000
<input type="checkbox"/> OWNER'S & CONT PROT				EACH OCCURRENCE \$ 1,000,000
<input checked="" type="checkbox"/> Premises Operations				FIRE DAMAGE (Any one fire) \$ 50,000
				MED EXP (Any one person) \$ 1,000
<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT \$ 1,000,000
<input type="checkbox"/> ANY AUTO	91644-9406049	6/08/94	6/08/95	BODILY INJURY (Per person) \$
<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
<input type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT \$
<input type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY:
<input checked="" type="checkbox"/> Uninsured Motorist				EACH ACCIDENT \$
				AGGREGATE \$
<b>GARAGE LIABILITY</b>				EACH OCCURRENCE \$
<input type="checkbox"/> ANY AUTO				AGGREGATE \$
				STATUTORY LIMITS
<b>EXCESS LIABILITY</b>				EACH ACCIDENT \$
<input type="checkbox"/> UMBRELLA FORM				DISEASE - POLICY LIMIT \$
<input type="checkbox"/> OTHER THAN UMBRELLA FORM				DISEASE - EACH EMPLOYEE \$
<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				
THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				
OTHER				

COPY

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

Additional Insured per attached endorsement

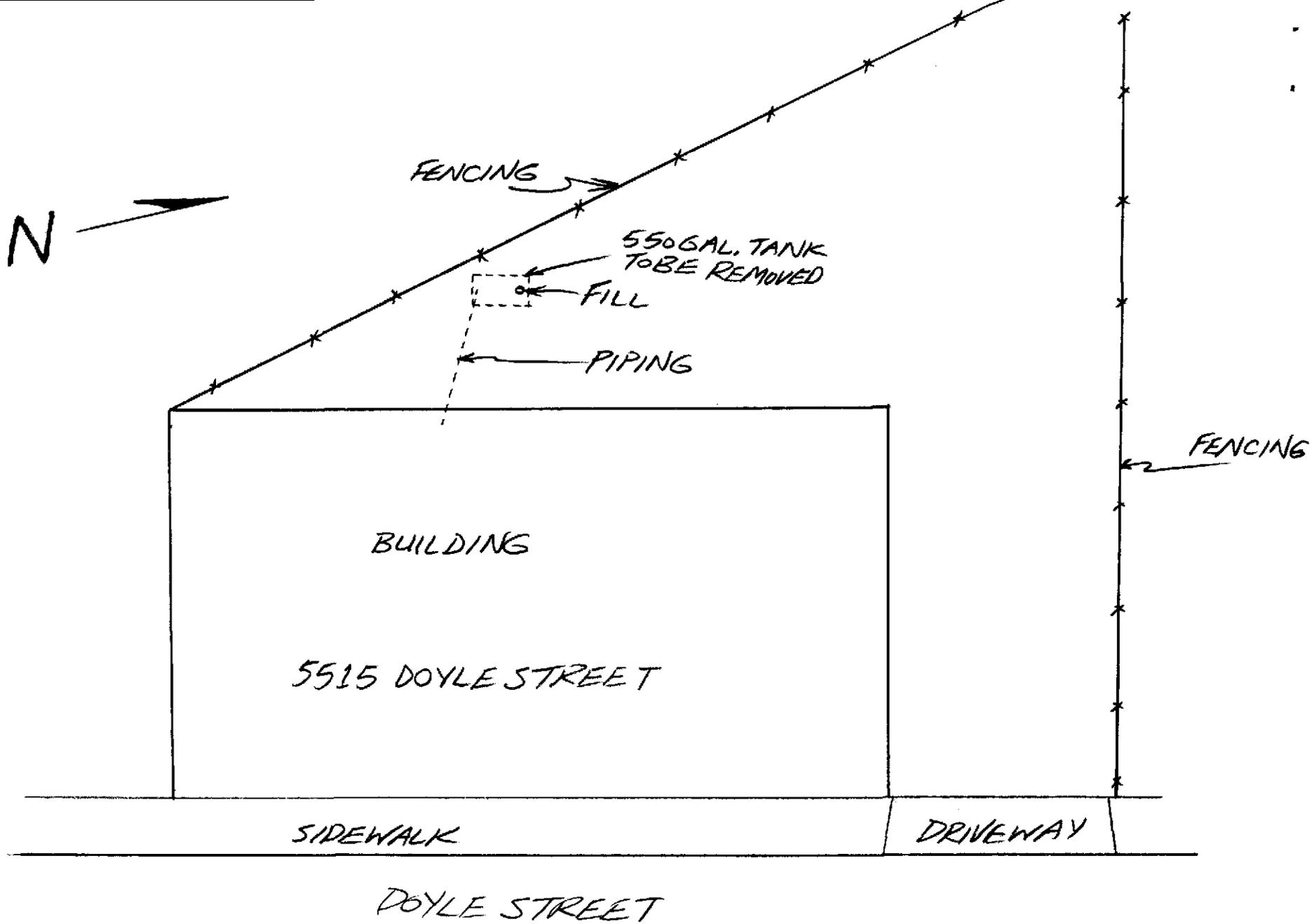
PONDEROSA HOMES, INC.  
6671 Owens Drive  
Pleasanton, CA 94588

ATTN: *Cecile Thompson*

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~SEND BY~~ MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY UPON THE ISSUING COMPANY OR THE OWNERS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE  
*Cecile Thompson*



PLOT PLAN: FORDHAM PROPERTIES  
5515 DOYLE STREET  
EMERYVILLE, CALIFORNIA

STATE OF CALIFORNIA  
STATE WATER RESOURCES CONTROL BOARD  
**UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A**



COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input checked="" type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

**I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)**

DBA OR FACILITY NAME <b>FORDHAM PROPERTIES</b>		NAME OF OPERATOR <b>RON HILL</b>			
ADDRESS <b>5515 DOYLE STREET</b>		NEAREST CROSS STREET	PARCEL # (OPTIONAL)		
CITY NAME <b>EMERYVILLE</b>		STATE <b>CA</b>	ZIP CODE <b>94608</b>	SITE PHONE # WITH AREA CODE <b>510-547-7177</b>	
<input checked="" type="checkbox"/> BOX TO INDICATE <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LOCAL-AGENCY DISTRICTS <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> FEDERAL-AGENCY					
TYPE OF BUSINESS		<input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE <b>ONE</b>
E. P. A. I. D. # (optional)					

**EMERGENCY CONTACT PERSON (PRIMARY)**

**EMERGENCY CONTACT PERSON (SECONDARY) - optional**

DAYS: NAME (LAST, FIRST) <b>HILL, RON</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	DAYS: NAME (LAST, FIRST) <b>PANTLE, ROY</b>	PHONE # WITH AREA CODE <b>510-754-9435</b>
NIGHTS: NAME (LAST, FIRST) <b>HILL, RON</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	NIGHTS: NAME (LAST, FIRST) <b>PANTLE, ROY</b>	PHONE # WITH AREA CODE <b>510-754-9435</b>

**II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)**

NAME <b>FORDHAM PROPERTIES</b>		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS <b>5743 LANDREGAN ST</b>		<input checked="" type="checkbox"/> box to indicate <input checked="" type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME <b>EMERYVILLE</b>		STATE <b>CA</b>	ZIP CODE <b>94608</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>

**III. TANK OWNER INFORMATION - (MUST BE COMPLETED)**

NAME OF OWNER <b>FORDHAM PROPERTIES</b>		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS <b>5743 LANDREGAN ST.</b>		<input checked="" type="checkbox"/> box to indicate <input checked="" type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME <b>EMERYVILLE</b>		STATE <b>CA</b>	ZIP CODE <b>94608</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>

**IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 739-2582 if questions arise.**

TY (TK) HQ **44** - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**V. LEGAL NOTIFICATION AND BILLING ADDRESS**

Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING:    I.     II.     III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) <b>RON HILL</b>	APPLICANT'S TITLE <b>PRESIDENT</b>	DATE MONTH/DAY/YEAR <b>9-21-94</b>
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**LOCAL AGENCY USE ONLY**

COUNTY # [ ] [ ]	JURISDICTION # [ ] [ ] [ ]	FACILITY # [ ] [ ] [ ] [ ] [ ] [ ]
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.

**COTTLE**  
**Industries**

*Providing Service to All Phases of the Petroleum Industry*

Roy Pantle

P.O. BOX 7  
ANTIOCH CA 94509  
510 754-9935  
510 754-1471 Fax

CAL. LIC. NO. A481444  
NEV. LIC. NO. 29403

STATE OF CALIFORNIA  
STATE WATER RESOURCES CONTROL BOARD  
**UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B**



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

<b>MARK ONLY ONE ITEM</b>	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: FORDHAM PROPERTIES

**I. TANK DESCRIPTION** COMPLETE ALL ITEMS -- SPECIFY IF UNKNOWN

A. OWNER'S TANK I. D. # <u>I</u>	B. MANUFACTURED BY: <u>UNKNOWN</u>
C. DATE INSTALLED (MO/DAY/YEAR) <u>UNKNOWN</u>	D. TANK CAPACITY IN GALLONS: <u>550</u>

**II. TANK CONTENTS** IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input type="checkbox"/> 1 MOTOR VEHICLE FUEL <input type="checkbox"/> 2 PETROLEUM <input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 4 OIL <input checked="" type="checkbox"/> 80 EMPTY <input type="checkbox"/> 95 UNKNOWN	B. <input checked="" type="checkbox"/> 1 PRODUCT <input type="checkbox"/> 2 WASTE
C. <input checked="" type="checkbox"/> 1a REGULAR UNLEADED <input type="checkbox"/> 1b PREMIUM UNLEADED <input type="checkbox"/> 2 LEADED		
<input type="checkbox"/> 3 DIESEL <input type="checkbox"/> 4 GASAHOL <input type="checkbox"/> 5 JET FUEL <input type="checkbox"/> 6 AVIATION GAS <input type="checkbox"/> 7 METHANOL <input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)		
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED		
C. A. S. #:		

**III. TANK CONSTRUCTION** MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM <input type="checkbox"/> 1 DOUBLE WALL <input checked="" type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER <input type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank) <input checked="" type="checkbox"/> 1 BARE STEEL <input type="checkbox"/> 5 CONCRETE <input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 2 STAINLESS STEEL <input type="checkbox"/> 6 POLYVINYL CHLORIDE <input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 3 FIBERGLASS <input type="checkbox"/> 7 ALUMINUM <input type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 99 OTHER
C. INTERIOR LINING <input type="checkbox"/> 1 RUBBER LINED <input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 2 ALKYD LINING <input checked="" type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 3 EPOXY LINING <input type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 4 PHENOLIC LINING <input type="checkbox"/> 99 OTHER
IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___		
D. CORROSION PROTECTION <input type="checkbox"/> 1 POLYETHYLENE WRAP <input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 2 COATING <input type="checkbox"/> 91 NONE	<input type="checkbox"/> 3 VINYL WRAP <input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC <input type="checkbox"/> 99 OTHER
E. SPILL AND OVERFILL SPILL CONTAINMENT INSTALLED (YEAR) <u>NONE</u> OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) <u>NONE</u>		

**IV. PIPING INFORMATION** CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A <input checked="" type="radio"/> U 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 99 OTHER
B. CONSTRUCTION	A U 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A U 4 FIBERGLASS PIPE A U 5 ALUMINUM A U 6 CONCRETE A U 7 STEEL W/ COATING A U 8 100% METHANOL COMPATIBLE W/FRP A U 9 GALVANIZED STEEL A U 10 CATHODIC PROTECTION A U 95 UNKNOWN A U 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input checked="" type="checkbox"/> 99 OTHER <u>NINE</u>

**V. TANK LEAK DETECTION**

<input type="checkbox"/> 1 VISUAL CHECK	<input checked="" type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

**VI. TANK CLOSURE INFORMATION**

1. ESTIMATED DATE LAST USED (MO/DAY/YR) <u>6/89</u>	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING <u>0</u> GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
---	---	---

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) <u>RON HILL</u>	DATE <u>9-21-94</u>
--	---------------------

**LOCAL AGENCY USE ONLY** THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE		PERMIT EXPIRATION DATE	



ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, Assistant Agency Director

March 21, 1994

Mr. Ron Silverman  
Fordham Construction Inc.,  
5743 Landregan,  
Emeryville, CA 94608

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

Subject: Underground Storage Tank located at 5515 Doyle St.,  
Emeryville, CA 94608

**Notice of Violation**

Dear Mr. Silverman:

On February 17, 1994, this office conducted an underground storage tank (UST) inspection of the aforementioned facility. This inspection was initiated at the request of the Alameda County District Attorney's Consumer and Environmental Division. Upon inspection of the facility, an underground storage tank was observed at the rear of the site under a concrete pad. Several photographs were also taken indicating the existence of the subject tank.

This tank is subject to permanent closure requirements as stated in Title 23 of the California Code of Regulations Section 2670 (c). An underground storage tank, in which the storage of hazardous substances has ceased, and will not be used, nor is it intended to be used within the next twelve consecutive months, must be removed. The tank must be properly closed as required by Chapter 6.7 of the California Health and Safety Code.

You are therefore directed to obtain a closure permit application from this office and submit this permit application to this office within thirty days.

If you have any questions, please call this office. The telephone number is (510) 271-4320.

Sincerely,

Brian P. Oliva, REHS, REA  
Hazardous Materials Specialist

cc: Edgar Howell, Chief, Division of Hazardous Materials  
Gil Jensen, Alameda County Deputy District Attorney

enclosures: UST Closure Application, Letter