

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY  
DAVID J. KEARS, Agency Director



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

July 24, 2009

DOYLE GRIMIT  
C/O PEGGY GARCIA TRUSTEE  
14618 DUBLIN AVE  
GARDENA CA 905493210

Subject: Fuel Leak Case No. RO0000413 and Geotracker Global ID T0600100667, SITE GRIMIT AUTO REPAIR & SERVICE, 1970 SEMINARY AVE, Oakland CA 94621– Groundwater Monitoring Requirements

Dear DOYLE GRIMIT:

The purpose of this correspondence is to inform you of changes to groundwater monitoring requirements for all fuel leak cases in California. The California State Water Resources Control Board (State Water Board) has approved Resolution No. 2009-0042 (*Actions to Improve Administration of the UST Cleanup Fund and UST Cleanup Program*). Resolution No. 2009-0042 states that, "Regional Water Board and LOP agencies shall reduce quarterly groundwater monitoring requirements to semiannual or less frequent monitoring at all sites unless site-specific needs warrant otherwise and shall notify all responsible parties of the new requirements no later than August 1, 2009. If more than semiannual monitoring is required for a case, the responsible party and State Water board shall be notified of the rationale and the notice shall be posted on Geotracker."

In accordance with Resolution No. 2009-0042, continue semi-annual groundwater monitoring for your site unless site-specific needs warrant otherwise. A semiannual groundwater monitoring should be used only for wells that have been sampled over a minimum of one hydrologic cycle (four consecutive quarters). New monitoring wells should be sampled quarterly for one year before a semiannual monitoring schedule is implemented for new wells.

Any groundwater monitoring wells that are currently sampled on a less frequent schedule than semiannual (annual or longer) may continue to be sampled on the less frequent schedule. Please present results from the semiannual groundwater monitoring in groundwater monitoring reports no later than 60 days following the groundwater sampling event.

If you have any questions, please call me at (510) 639-1279 or send me an electronic mail message at [barbara.jakub@acgov.org](mailto:barbara.jakub@acgov.org).

Sincerely,

A handwritten signature in cursive script that reads "Barbara J. Jakub".

Barbara J. Jakub, P.G.  
Hazardous Materials Specialist

DOYLE GRIMIT  
RO0000413,  
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Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: David Hoexter, Hoexter Consulting, Inc., 734 Torrey Court, Palo Alto, CA 94303  
Leroy Griffin, Oakland Fire Department, 250 Frank H. Ogawa Plaza, Ste. 3341, Oakland, CA 94612-2032  
(Sent via E-mail to: [lgriffin@oaklandnet.com](mailto:lgriffin@oaklandnet.com))  
Donna Drogos, ACEH (Sent via E-mail to: [donna.drogos@accgov.org](mailto:donna.drogos@accgov.org))  
Barbara Jakub, ACEH (Sent via E-mail to: [barbara.jakub@accgov.org](mailto:barbara.jakub@accgov.org))  
Geotracker, File

RESPONSIBLE PARTY OF RECORD AS OF 07/22/2009

**RO0000413, GRIMIT AUTO REPAIR & SERVICE, 1970 SEMINARY AVE , Oakland, CA, 94621**

Alameda County Environmental Health (ACEH) has the following information on record regarding the Responsible Party(ies) for the above referenced site. Please update the following information for our records. Should you have contact information regarding additional Responsible Parties, please correct the information accordingly. Also, please check the "e-mail preferred" box to receive all future correspondences and notifications by e-mail.

E-mail Preferred

Hardcopy Preferred

ACEH is requesting your e-mail address so that we can correspond with you quickly and efficiently regarding your case. Please note that ACEH respects your privacy. Your e-mail address will remain confidential and will not be provided to any third party.

Current Information

DOYLE GRIMIT  
C/O PEGGY GARCIA TRUSTEE  
14618 DUBLIN AVE  
GARDENA CA 905493210

Corrections or Additions

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_  
Office Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_