

SCHARFF & GREBEN

ATTORNEYS AT LAW

WELLS FARGO BUILDING

400 CAPITOL MALL, SUITE 1100

SACRAMENTO, CALIFORNIA 95814

JAN ADAM GREBEN
JEFFORY J. SCHARFF

TELEPHONE
(916) 558-6192
FACSIMILE
(916) 446-1611

February 23, 1993

Scott Seery
Alameda County Environmental Health Dept.
80 Swan Way
Oakland, CA 94621


Re: Joseph Nesbitt Feed Company

Dear Mr. Seary:

I am writing in follow-up to our February 19, 1993 conversation regarding your recent correspondence affecting the Joseph Nesbitt Feed Company. This is to advise you that this office has been requested to provide assistance on behalf of the feed store. We are in the process of issuing Requests for Proposals in order to meet your request on behalf of Alameda County.

If you have any questions concerning this matter, please do not hesitate to call.

Sincerely,



Jeffory J. Scharff

JJS:af

cc: William Nesbitt

clients\nesbitt\seery.1

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST AGENCY DIRECTOR

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

STID 4257

January 12, 1993

William J. Nesbitt
Cynthia R. Voegle
5800 Murrietta Avenue
Van Nuys, CA 91401

-NOTICE OF VIOLATION-

RE: JOSEPH NESBITT COMPANY, 2542 SAN CARLOS AVENUE, CASTRO
VALLEY, ALAMEDA COUNTY

Dear Mr. Nesbitt and Ms. Voegle:

You were advised in correspondence dated January 14, 1991 and again August 12, 1991 that a preliminary site assessment (PSA) must be performed at the referenced site. The PSA was required following closure of an underground storage tank (UST) on June 13, 1990. The PSA work plan was initially due for submittal by February 15, 1991; the second PSA work plan request indicated the work plan was due September 12, 1991. To date, no PSA work plan has been submitted.

Presently you are in violation of Section 2722(c)(1) of Title 23, California Code of Regulations for failure to submit the requested work plan. Additionally, you were advised in the two prior notices that the PSA work plan was a request for technical reports pursuant to California Water Code Section 13267(b), and that failure to respond would result in the referral of your case to the appropriate agency for enforcement action.

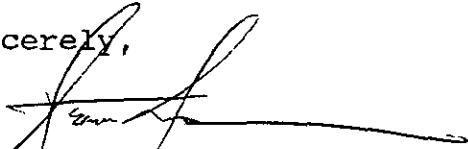
Please be advised that should you fail to appropriately respond to this notice by way of submittal of the requisite PSA work plan, your case will be referred to the Alameda County District Attorney's Office for enforcement action. Please be further advised that the District Attorney's Office is being advised of this case by way of copy of this letter.

A PSA work plan must be submitted to this office within 45 days of the date of this letter, or by **February 26, 1993.**

Mr. Nesbitt / Ms. Voegle
RE: 2542 San Carlos Avenue, Castro Valley
January 12, 1993
Page 2 of 2

Please feel free to call me at 510/271-4320 should you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Scott O. Seery", with a long horizontal flourish extending to the right.

Scott O. Seery, CHMM
Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director
Gil Jensen, Alameda County District Attorney's Office
Rich Hiett, RWQCB
Bob Bohman, Castro Valley Fire Department
Ed Howell - files

DATE: 7-13-92
TO : Local Oversight Program
FROM: Scott
SUBJ: Transfer of Eligible Oversight Case

Site name: Joseph Nesbitt Company
Address: 254a San Carlos Ave city Castro Valley zip 94546
Closure plan attached? Y N DepRef remaining \$ _____
DepRef Project # _____ STID #(if any) 4257
Number of Tanks: 1 removed? Y N Date of removal 6-13-90
Leak Report filed? Y N Date of Discovery _____
Samples received? Y N Contamination: _____
Petroleum Y N Types: Avgas Jet leaded unleaded Diesel
fuel oil waste oil kerosene solvents
Monitoring wells on site 0 Monitoring schedule? Y N
LUFT category 1 2 3 * H S C A R W G O
Briefly describe the following:
Preliminary Assessment none
Remedial Action _____
Post Remedial Action Monitoring _____
Enforcement Action _____

owner:

2544 Castro Valley Blvd

William J. Nesbitt + Cynthia R. Voegel
5800 Marrietta Ave
Van Nuys, Ca 91401

owner:

2542(?) San Carlos Ave

← same

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4829

W E E K L Y I N S P E C T I O N R E C O R D

SELF CONTAINED BREATHING APPARATUS CYLINDERS

Week of: Cylinders Tight? Follow Up Required?

rscbains

DUFOUR, GREBEN & SCHARFF

ATTORNEYS AT LAW

JAMES T. DUFOUR
JAN ADAM GREBEN
JEFFORY J. SCHARFF
STEVEN A. PICCO

819 F STREET
SACRAMENTO, CA
95814

P O BOX 867
SACRAMENTO, CA
95812 0867

(916) 553 3247
FAX (916) 553 3250

91 SEP 12 11:41

September 11, 1991

Mr. Scott Seery
Hazardous Materials Specialist
ALAMEDA COUNTY HEALTH AGENCY
Division of Hazardous Materials
80 Swan Way, Room 200
Oakland, CA 94621

Re: Jos. Nebitt Co.

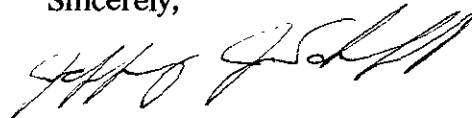
Dear Mr. Seery:

I am writing to you in follow up to our conversation of September 10, 1991. Unfortunately, I was unable to reach you on Monday since your offices were closed.

As we discussed, I am planning to meet with my client to discuss the County's request, some of the underlying legal considerations and then provide a response to your agency. I am tentatively planning to conduct this meeting sometime during the week of September 16, 1991. Thereafter, I believe it is appropriate to schedule a follow up meeting with your office in order to develop a mutually agreeable response strategy in order to foreclose the possibility of the initiation of enforcement proceedings.

Thank you for your courtesy and attention in this matter. If you have further questions please feel free to give me a call.

Sincerely,



JEFFORY J. SCHARFF

JJS:ket

cc: William Nesbitt
Richard Mendonca

09/11/91/24001.01

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



Certified Mailer # P 367 604 323

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621
(415)

August 12, 1991

Mr. William Nesbitt
Joseph Nesbitt Company
5800 Murrietta Avenue
Van Nuys, CA 91401

RE: JOS. NESBITT COMPANY, SAN CARLOS AVENUE SITE, CASTRO VALLEY,
ALAMEDA COUNTY

Dear Mr. Nesbitt:

You were notified by this Department in correspondence dated January 14, 1991, sent under certified mailer # P 062 128 356, that the Jos. Nesbitt Company was required to conduct a Preliminary Site Assessment (PSA) of the referenced Castro Valley site. This requirement was imposed as a result of a review of the facts associated with the closure of a 250-gallon fuel underground storage tank (UST) from this site which suggested the probability of an unauthorized release of product from the UST system.

The January 14 notice required the submittal of a PSA proposal by February 15, and the initiation of field activities no later than March 15, 1991. To date, the requisite PSA proposal has not been submitted nor has any further work been initiated at the site.

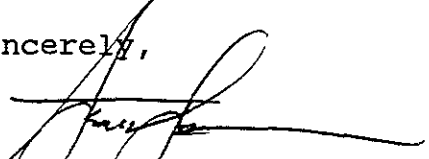
At this time you are directed to submit the requisite Preliminary Site Assessment proposal in accordance with the RWQCB Staff Recommendations for the Initial Evaluation and Investigation of Underground Tanks within 30 days, or by the close of business on September 12, 1991. Accompanying this proposal must be a check totalling \$432 to offset expenses incurred by this Department during oversight of this project.

Please be advised that this is a formal request for technical reports pursuant to California Water Code Section 13267 (b). Failure to respond or a late response will result in the referral of this case to the RWQCB or the Alameda County District Attorney's Office for enforcement action, possibly subjecting the responsible party to civil penalties to the extent provided by law. Any extensions of the stated deadlines, or modifications of the required tasks, must be confirmed in writing by either this agency or the RWQCB.

Mr. William Nesbitt
 RE: Jos. Nesbitt Co., 2544 Castro Valley Blvd
 August 12, 1991
 Page 2 of 2

Should you have any questions about the content of this letter,
 please call me at 415/271-4320.

Sincerely,



Scott O. Seery, CHMM
 Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director, Environmental Health
 Edgar Howell, Chief, Hazardous Materials Division
 Gil Jensen, Alameda County District Attorney's Office
 Lester Feldman, RWQCB
 Howard Hatayama, DHS
 Bob Bohman, Castro Valley Fire Department
 Richard Mendonca
 Jeffery Scharff, Esq.
 files

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees, the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Mr. William Nesbitt
 Joseph Nesbitt Company
 5800 Murrietta Avenue
 Van Nuys, CA 91401

4. Article Number: 55

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Address
 X *J. B. Nesbitt*

6. Signature - Agent
 X

7. Date of Delivery
8/12/91

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

P 367 604 323
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

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

| | |
|---|----|
| Sent to | |
| Street and No | |
| P O, State and ZIP Code | |
| Postage | \$ |
| Certified Fee | |
| Special Delivery Fee | |
| Restricted Delivery Fee | |
| Return Receipt showing to whom and Date Delivered | |
| Return Receipt showing to whom, Date, and Address of Delivery | |
| TOTAL Postage and Fees | \$ |
| Postmark or Date | |

PS Form 3800, June 1985

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mailer # P 062 128 356

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621
(415)

January 14, 1991

Mr. William Nesbitt
Joseph Nesbitt Company
5800 Murrietta Avenue
Van Nuys, CA 91401

(7.5) 888-1062

003 2 1 7 15

RE: JOS. NESBITT COMPANY, SAN CARLOS AVENUE SITE, CASTRO VALLEY,
ALAMEDA COUNTY

Dear Mr. Nesbitt:

This letter follows a telephone conversation I shared January 11, 1991 with Mr. Jeffory Scharff, an attorney with the law firm of Dufour & Scharff. It is my understanding that Mr. Scharff was originally contacted by Mr. Richard Mendonca, the proprietor of the Jos. Nesbitt Company feed store in Castro Valley, to assist him in researching the regulatory requirements for and developing a Preliminary Site Assessment (PSA) proposal for review by this Department. The performance of a PSA was deemed necessary following the review of facts associated with the removal of a 250-gallon former fuel tank from the San Carlos Avenue site during June 1990. Please reference the attached August 2, 1990 correspondence from this Department addressed to Mr. Mendonca describing these events.

Before my January 11 conversation with Mr. Scharff, this Department was under the impression that Mr. Mendonca was the owner of both the tank and subject property. Mr. Scharff indicated that the subject property is still owned by the Jos. Nesbitt Company. As we understand the facts, you are the controlling partner in this company. We further understand that Mr. Scharff, following his notification of your ownership interest in the property, has failed in a number of attempts over the last several weeks to contact you by phone to discuss the issues with this case.

Now that this Department is aware that you are the appropriate representative for the Jos. Nesbitt Company, you are required to arrange for the performance of a PSA. The scope of such an investigation shall be in accordance with the requirements outlined in the attached August 2 correspondence to Mr. Mendonca (and reiterated in this letter), and the San Francisco Bay Regional Water Quality Control Board (RWQCB) Staff Recommendations for the Initial Investigation of Underground Tanks. The major elements of a PSA are summarized in Appendix A (also attached).

Mr. William Nesbitt
RE: 2544 Castro Valley Blvd., Castro Valley
January 14, 1991
Page 2 of 3

In order to proceed with a site investigation, you should obtain professional services of a reputable environmental/geotechnical firm. Your responsibility is to have the consultant submit for review a proposal outlining planned activities pertinent to meeting the criteria broadly outlined in this letter and the attached Appendix A.

This Department will oversee the assessment for this site. This oversight will include our review and comment on work proposals and technical guidance on appropriate investigative approaches. The issuance of well drilling permits, however, will be through the Alameda County Flood Control and Water Conservation District, Zone 7. The RWQCB may choose to take over as lead agency if it is determined following the completion of the initial assessment that there has been a substantial impact upon ground water.

This PSA proposal is due within 30 days of the date of this letter, **or by February 15, 1991**. Once this proposal has been reviewed and approved, **work should commence no later than March 15, 1991**. Accompanying this proposal must be a check payable to Alameda County totalling \$432 to offset the initial expenses incurred by this Department in oversight of this project.

A report must be submitted within 30 days after the completion of this phase of work at the site. Subsequent reports must be submitted quarterly until this site qualifies for final RWQCB "sign off". Such quarterly reports are due the first day of the second month of each subsequent quarter (i.e., November 1, February 1, May 1, and August 1). These reports should describe the status of the investigation and must include, among others, the following elements:

- o Details and results of all work performed during the designated period of time: records of field observations and data, boring and well construction logs, water level data, chain-of-custody forms, laboratory results for all samples collected and analyzed, tabulations of free product thicknesses and dissolved fractions, etc.
- o Status of ground water contamination characterization
- o Interpretation of results: water level contour maps showing gradients, free and dissolved product plume definition maps for each target component, geologic cross sections, etc.
- o Recommendations or plans for additional investigative work or remediation

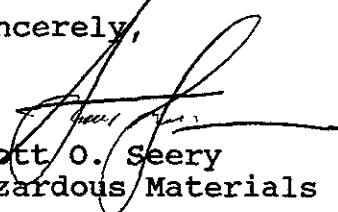
Mr. William Nesbitt
RE: 2544 Castro Valley Blvd., Castro Valley
January 14, 1991
Page 3 of 3

All reports and proposals must be submitted under seal of a California-Registered Geologist, -Certified Engineering Geologist, or -Registered Civil Engineer. Please include a statement of qualifications for each lead professional involved with this project.

Please be advised that this is a formal request for technical reports pursuant to California Water Code Section 13267 (b). Failure to respond or a late response could result in the referral of this case to the RWQCB for enforcement, possibly subjecting the responsible party to civil penalties to a maximum of \$1,000 per day. Any extensions of the stated deadlines, or modifications of the required tasks, must be confirmed in writing by either this agency or the RWQCB.

Should you have any questions about the content of this letter, please call me at 415/271-4320.

Sincerely,



Scott O. Seery
Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director, Alameda County
Department of Environmental Health
Edgar Howell, Chief, Hazardous Materials Division
Gil Jensen, Alameda County District Attorney's Office
Lester Feldman, RWQCB
Howard Hatayama, DHS
Bob Bohman, Castro Valley Fire Department
Richard Mendonca
Jeffory Scharff, Esq.
files

P 062 128 356

RECEIPT FOR CERTIFIED MAIL

POSTAGE AND FEES PAID BY ADDRESSEE
FIRST CLASS PERMIT NO. 100 VAN NUYS, CA

(See Reverse)

Sent to **MR. WILLIAM NESBITT**
 Street and No. **JOSEPH NESBITT CO.**
5800 MURRIETTA AVE.
 City, State and ZIP Code **VAN NUYS, CA 91401**
 Postage **5**
 Certified Fee
 Special Delivery Fee
 Registered Fee
 Insured Fee
 Date of Delivery
 Postmark or Date

PS Form 3800, June 1985

98

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO:" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge)
 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
MR. WILLIAM NESBITT
JOSEPH NESBITT CO.
5800 MURRIETTA AVE.
VAN NUYS, CA 91401

4. Article Number
P062 128 356

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Address
 X *William Nesbitt*

6. Signature - Agent
 X

7. Date of Delivery
Jan 29 1988

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



DUFOUR & SCHARFF

ATTORNEYS AT LAW

JAMES T. DUFOUR
JEFFORY J. SCHARFF

ENVIRONMENTAL & OSHA LAW
AGRICULTURAL LAW
GOVERNMENT RELATIONS

819 F STREET
SACRAMENTO, CA
95814

P.O. BOX 867
SACRAMENTO, CA
95812 0867

(916) 553-3247
FAX (916) 553-3250

October 23, 1990

90 OCT 24 AM 10:59

Scott Seery
Alameda County Health Agency
Division of Hazardous Materials
Department of Environmental Health
80 Swan Way, Room 200
Oakland, CA 94621

Re: Jos. Nesbitt Company

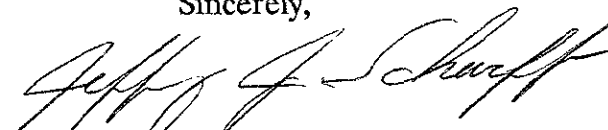
Dear Mr. Seery:

This is in follow up to our telephone conversation of this date regarding the above referenced matter.

Pursuant to these discussions, I would request an additional thirty (30) days to submit a proposal for further investigation on the property.

Thank you for your assistance in this matter.

Sincerely,



JEFFORY J. SCHARFF

JJS:sra

cc: William Nesbitt

Richard Mendonca

\\tr\lsee1023.jnc

431 West Hatch Road
Modesto, California 95351
(209) 524-9653
FAX (209) 524-0503

1741 Leslie Street
San Mateo, California 94402
(415) 572-8033
FAX (415) 572-9734

SEMCO
James C. Bateman Petroleum Services Inc.
General Engineering and Environmental Contractor
License NO. 449864 A, B, C-61, D-40
(800) 533-9293

Date: August 13, 1990

To: Jos Nesbitt Co. Inc.
2544 Castro Valley Blvd.
Castro Valley, CA 94546

90 AUG 16 PM 10:37

REGARDING:

Job Name: Jos Nesbitt Co. Inc.
Job Location: Santa Clara St.
Castro Valley, CA

WE ARE SENDING YOU THE FOLLOWING ITEMS:

| | | | |
|-------------------------------------|--------------------------|-------------------------------------|-------------------------|
| <input type="checkbox"/> | Laboratory Analysis | <input type="checkbox"/> | Chain of Custody |
| <input checked="" type="checkbox"/> | Hazardous Waste Manifest | <input checked="" type="checkbox"/> | Tank Disposition Record |

Remarks: _____

Copy: Alameda County
470 27th St.
Oakland, CA 94612

Signed: _____

Melissa Hamlet

Please print or type. (Form designed for use on site (12-pitch typewriter).)

72129

90177222
IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8602; WITHIN CALIFORNIA CALL 1-800-862-7550

| | | | | | | |
|--|--|---|--|---|---|--|
| UNIFORM HAZARDOUS WASTE MANIFEST | | 1. Generator's US EPA ID No. CAC1000261633 | Manifest Document No. 0100011 | Page 1 1 of 1 | Information in the shaded areas is not required by Federal law. | |
| 9. Generator's Name and Mailing Address Jos Mexbirt Inc. 2544 Castle Valley Blvd Castle Valley, CA 94546 | | | A. State Manifest Document Number 90177222 | | B. State Generator's ID | |
| 4. Generator's Phone (415) 581-2184 | | 6. US EPA ID Number ICAD181443281 | | C. State Transporter's ID 01336 | | D. Transporter's Phone 908 365-3629 |
| 5. Transporter 1 Company Name Fuller Excavating | | 7. Transporter 2 Company Name | | E. State Transporter's ID | | F. Transporter's Phone |
| 9. Designated Facility Name and Site Address ERICKSON INC. 255 PARR BLVD Richmond, CA 94801 | | 10. US EPA ID Number ICAD10109466392 | | G. State Facility's ID C1AD10109466392 | | H. Facility's Phone 415 235-1393 |
| 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) | | | 12. Containers No. Type | 13. Total Quantity | 14. Unit Wt/Vol | 1. Waste No. |
| a. WASTE, Empty STORAGE TANK (S) NON-RCRA HAZARDOUS WASTE SOLID | | | 11 TP | 250 P | | State 512 EPA/Other NONE |
| b. | | | | | | State EPA/Other |
| c. | | | | | | State EPA/Other |
| d. | | | | | | State EPA/Other |
| J. Additional Descriptions for Materials Listed Above EMPTY LEADED GASOLINE TANK # 3743 FILLED WITH 15 GALS OIL PER 1,000 GALLON CAPACITY | | | K. Handling Codes for Wastes Listed Above a. 01 | | | |
| 15. Special Handling Instructions and Additional Information 24 hr GENERATOR Ph# 415-581-2184 | | | | | | |
| 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford. | | | | | | |
| Printed/Typed Name RICHARD MENDONCA | | Signature R. Mendonca | | Month Day Year 10/6/13/9C | | |
| 17. Transporter 1 Acknowledgement of Receipt of Materials | | | | | | |
| Printed/Typed Name JOHN ESQUIVEL | | Signature John Esquivel | | Month Day Year 10/6/13/9C | | |
| 18. Transporter 2 Acknowledgement of Receipt of Materials | | | | | | |
| Printed/Typed Name | | Signature | | Month Day Year | | |
| 19. Discrepancy Indication Space | | | | | | |
| 20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 15. | | | | | | |
| Printed/Typed Name HARRIS L. STOUT | | Signature Harris L. Stout | | Month Day Year 10/6/13/9C | | |

No 3743
SEMPO
72129

CERTIFICATE
Certified Services Company
255 Parr Boulevard
Richmond, California 94801

Day or Night
Telephone
(415) 235-1393

For: Erickson, Inc. Tank No.(s.) 3743 Location: Richmond Date: 6/20 Time: 9:30
Test Method: Visual Gastech/1314 SMPN Last Product: LEADED GASOLINE

This is to certify that I have personally determined that the tank(s) in the following list are in accordance with the American Petroleum Institute and have found the condition of each to be in accordance with its assigned designation. This certificate is based

on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

| Tank(s) | Condition |
|------------------------|---|
| 1- <u>A50</u> Gal Tank | Safe For Fire Oxy 20.9 % LEL -1 % |
| | |
| | |
| | |

Remarks: _____

In the event of any physical or atmospheric changes affecting the gas-free condition of the above tanks, or if in any doubt immediately stop all hot work and contact the

undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

Standard Safety Designation:

Safe for Men: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

Safe for Fire: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration than permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

Representative Jim Cox Title Supv.

Inspector [Signature]

431 West Hatch Road
Modesto, CA 95351
(209) 524-9653
FAX (209) 524-0503

1741 Leslie Street
San Mateo, Ca 94402
(415) 572-8033
FAX (415) 572-9734

S E M C D
James C. Bateman Petroleum Services Inc.
General Engineering and Environmental Contractor
License No. 449864 A, B, C-61, D-40

TANK DISPOSITION RECORD

Date: August 13, 1990
Generator's Name: Jos Nesbitt Co., Inc.
Address: 2544 Castro Valley Blvd.
Castro Valley, CA 94546

Tank Identification:

Identification Number: 3743
Capacity: 250 Gallon
Construction: Steel
Product: Leaded Gasoline

Delivered To: Certified Services Company
255 Parr Blvd.
Richmond, CA 94801

I hereby declare that the information above is accurate and that the tank was in proper condition for transport by highway, according to applicable government regulations.

Melissa Hamlett
Signature

8-13-90
Date

STRAIGHT BILL OF LADING
ORIGINAL - NOT NEGOTIABLE

Shipper's No. _____

kt
CARRIER: Erickson Trucking, Inc.

SCAC

Carrier's No. 019
Date _____

TO: LMC Corp.
Consignee 600 S. 4th St.
Street Richmond, CA 94805
Destination _____ Zip _____

FROM: Erickson, Inc.
Shipper 255 Parr Blvd.
Street Richmond, CA 94801
Origin _____ Zip _____

Route: _____ Vehicle Number _____

| No. Shipping Units | Kind of Packages, Description of Articles (IF HAZARDOUS MATERIALS - PROPER SHIPPING NAME) | HAZARD CLASS | I.D. Number | WEIGHT (subject to correction) | RATE | LABELS REQUIRED (or exemption) |
|--------------------|--|--------------|-------------|--------------------------------|------|--------------------------------|
|--------------------|--|--------------|-------------|--------------------------------|------|--------------------------------|

Non-Dot regulated material gas free triple rinsed underground tanks for scrap

7226/3760

None

N/A

N/A

N/A

None

72102/3752

72129/3743

72130/3747

Remit C.O.D. to: 72062/3721 / 72108/3733
Address: _____
City: _____ State: _____ Zip: _____

COD Amt: \$

C.O.D. FEE:
Prepaid
Collect \$

NOTE — Where the rate is dependent on value, shippers are required to state specifically in writing the agreed or declared value of the property. The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding \$ _____ Per _____

Subject to Section 7 of the conditions, if the shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statement:
The carrier shall not make delivery of the shipment without payment of freight and all other lawful charges.
(Signature of Consignor)

FREIGHT CHARGES
 PREPAID COLLECT

RECEIVED, subject to the classifications and lawfully filed tariffs in effect on the date of issue of this Bill of Lading, the property described above in apparent good order, except as noted (contents and condition of contents of packages unknown), marked, consigned, and destined as indicated above which said carrier (the word carrier being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its route, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed as to each carrier of all or any of, said property over all or any portion of said route to destination and as to each party at any time interested in all or any said property, that every service to be performed hereunder shall be subject to all the bill of lading terms and conditions in the governing classification on the date of shipment.

Shipper hereby certifies that he is familiar with all the bill of lading terms and conditions in the governing classification and the said terms and conditions are hereby agreed to by the shipper and accepted for himself and his assigns.

This is to certify that the above-named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

PLACARDS REQUIRED

None

PLACARDS SUPPLIED

YES NO — FURNISHED BY CARRIER DRIVER SIGNATURE: _____

SHIPPER: Erickson, Inc.

CARRIER: _____

PER: Sharnan Lowry

PER: _____

DATE: 6/20

DATE: _____

EMERGENCY RESPONSE TELEPHONE NUMBER: US, 255/393

Manned 24 hours/day by a person with knowledge of the hazards of the material and emergency response information or who has access to a person with that knowledge.

LMC 410 (8-88)

WEIGHMASTER CERTIFICATE
THIS IS TO CERTIFY that the following described commodity was weighed, measured, or counted by a weighmaster whose signature is on this certificate who is a recognized authority of accuracy as prescribed by Chapter 7 (commencing with Section 12321) of Division 5 of the California Business and Professions Code, administered by the Division of Measurements, Standards of the California Department of Fluid and Agriculture.



- 600 SOUTH 4th STREET RICHMOND, CALIFORNIA 94804 (415) 236-0606
- 1800 MONTEREY HIGHWAY SAN JOSE, CALIFORNIA 95112 (408) 294-8443
- 130 NORTH 12th STREET SACRAMENTO, CALIFORNIA 95814 (916) 444-3380
- 740 NORTH WILSON WAY STOCKTON, CALIFORNIA 95205 (209) 466-6875
- 699 SEAPORT BLVD REDWOOD CITY, CALIF 94063 (415) 369-4161

DATE: 6/20/90
DIV: 984227

| GROSS WEIGHT | TARE | NET |
|-------------------------|-------------------------|-----------|
| 10-24 06/20/90 45060 lb | 11 47 06/20/90 28980 lb | 8.04 N.T. |

TYPE OF PURCHASE
 CASH CHECK ON ACCT I/C PRE PAID

VENDOR NO: 9 CHECK NO: 13755

AMOUNT PER N.T.: 40 PER LT.: 321.60

COMMODITY: TANKS CODE: 201 INV: 1 CK BY: EL WEIGHED FOR: ERICKSON TANK

| | | | |
|------------------------|-------------------------------|-----------------|--|
| FRT CODE | FREIGHT COST | B/L NO | * DUNNAGE OR EXCESS TARE — EXPLAIN BELOW |
| DRIVER'S NAME | VEHICLE LICENSE/LMC NO | ADDRESS | |
| DRIVER'S LICENSE NO | TRAILER LICENSE NO /RR CAR NO | POINT OF ORIGIN | |
| DISMANTLER NO /SEAL NO | CARRIERS NAME /WB NO | | |

| | | | |
|------------------------|---|---|---|
| LMC METALS WEIGHMASTER | FOR SALVAGE VEHICLE SALES: hereby certify under penalty of perjury that any vehicles sold have been cleared for dismantling with the Department of Motor Vehicles | HOLD HARMLESS AGREEMENT: Seller, buyer, and hold buyer harmless from damages, demands and liabilities, including reasonable attorney's fees, resulting from the breach of any warranty hereunder and driver agrees to be responsible for damage to vehicle during unloading | BILL OF SALE: I warrant that I am the owner (or owner's representative) of the material described hereon and have the right to sell same that it contains no hazardous material as defined by Federal or State law and that for payment hereby received I sell and convey title to LMC METALS |
|------------------------|---|---|---|

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



Certified Mailer # P 062 127 744

August 2, 1990

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621
(415)

Mr. Richard Mendonca
Joseph Nesbitt Company
2544 Castro Valley Blvd.
Castro Valley, CA 94546

RE: UNDERGROUND STORAGE TANK CLOSURE REPORT; JOS. NESBITT COMPANY,
SAN CARLOS STREET SITE, CASTRO VALLEY: REQUEST FOR PRELIMINARY
SITE ASSESSMENT (PSA) PROPOSAL

Dear Mr. Mendonca:

This Department has completed review of the report of laboratory analyses and chain-of-custody forms, as submitted under SEMCO cover dated June 29, 1990. This report documents the analyses performed upon a single soil sample collected June 13, 1990 during the closure of one 250 gallon fuel tank at the San Carlos Street site.

The results of the laboratory analyses indicate that those motor fuel constituents for which analyses were performed were not detected in the sample collected at the time of closure. However, observations made of the tank during closure identified the presence of numerous holes along the bottom of the tank, and that fuel odors were evident in proximity to the excavation. Such observations identify the likelihood that an unauthorized release has occurred at this site.

As a result of these observations, you are requested to perform additional investigative work to ensure that there has not been an impact to ground water underlying this site. This preliminary site assessment (PSA) will help to define the vertical and lateral impact upon ground water and soils resulting from any releases from the tanks prior to their removal. The information gathered by this investigation will be used to determine an appropriate course of action to remediate the site, if necessary. The PSA must be conducted in accordance with the RWQCB Staff Recommendations for the Initial Evaluation and Investigation of Underground Tanks. The major elements of such an investigation are summarized in the attached Appendix A.

In order to proceed with a site investigation, you should obtain professional services of a reputable environmental/geotechnical firm. Your responsibility is to have the consultant submit for review a proposal outlining planned activities pertinent to meeting the criteria broadly outlined in this letter and the attached Appendix A.

S.S.

SENDER: Complete items 1 and 2 when additional services are desired and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

| | |
|---|--|
| <p>3. Article Addressed to:</p> <p>MR Richard MENDONCA Joseph Nesbitt Co. 2544 CASTRO Valley Blvd CASTRO Valley, CA 94546</p> | <p>4. Article Number</p> <p>P 062 127 744</p> <p>Type of Service:</p> <p>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</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p> |
| <p>5. Signature - Addressee</p> <p>X <i>R Mendonca</i></p> | <p>8. Addressee's Address (ONLY if requested and fee paid)</p> |
| <p>6. Signature - Agent</p> <p>X</p> | |
| <p>7. Date of Delivery</p> <p>8/4</p> | |

Mr. Richard Mendonca
RE: Jos. Nesbitt Co., San Carlos Street site
August 2, 1990
Page 2 of 3

This Department will oversee the site assessment for the referenced facility. This oversight will include our review and comment on work proposals and technical guidance on appropriate investigative approaches. The issuance of well drilling permits, however, will be through the Alameda County Flood Control and Water Conservation District, Zone 7. The RWQCB may choose to take over as lead agency if it is determined following the completion of the initial assessment that there has been a substantial impact upon ground water.

This PSA proposal is due within 30 days of the date of this letter, **or by September 2, 1990.** Once this proposal has been reviewed and approved, **work should commence no later than October 2, 1990.** Accompanying this proposal must be a check payable to Alameda County totalling \$375 to offset expenses incurred by this Department in oversight of this project.

A report must be submitted within 30 days after the completion of this phase of work at the site. Subsequent reports must be submitted quarterly until this site qualifies for final RWQCB "sign off". Such quarterly reports are due the first day of the second month of each subsequent quarter (i.e., November 1, February 1, May 1, and August 1). These reports should describe the status of the investigation and must include, among others, the following elements:

- o Details and results of all work performed during the designated period of time: records of field observations and data, boring and well construction logs, water level data, chain-of-custody forms, laboratory results for all samples collected and analyzed, tabulations of free product thicknesses and dissolved fractions, etc.
- o Status of ground water contamination characterization
- o Interpretation of results: water level contour maps showing gradients, free and dissolved product plume definition maps for each target component, geologic cross sections, etc.
- o Recommendations or plans for additional investigative work or remediation

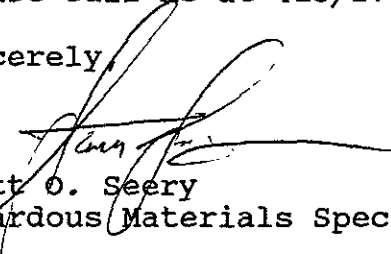
All reports and proposals must be submitted under seal of a California-Registered Geologist, -Certified Engineering Geologist, or -Registered Civil Engineer. Please include a statement of qualifications for each lead professional involved with this project.

Mr. Richard Mendonca
RE: Jos. Nesbitt Co., San Carlos Street site
August 2, 1990
Page 3 of 3

Please be advised that this is a formal request for technical reports pursuant to California Water Code Section 13267 (b). Failure to respond or a late response could result in the referral of this case to the RWQCB for enforcement, possibly subjecting the responsible party to civil penalties to a maximum of \$1,000 per day. Any extensions of the stated deadlines, or modifications of the required tasks, must be confirmed in writing by either this agency or the RWQCB.

Should you have any questions about the content of this letter, please call me at 415/271-4320.

Sincerely,


Scott O. Seery
Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director, Alameda County
Department of Environmental Health
Edgar Howell, Chief, Hazardous Materials Division
Gil Jensen, Alameda County District Attorney's Office
Lester Feldman, RWQCB
Howard Hatayama, DHS
Bob Bohman, Castro Valley Fire Department
files

9

P 062 127 744

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

| | |
|------------------------------------|----|
| Sent to | |
| Street and No | |
| P.O. State and ZIP Code | |
| Postage | \$ |
| Certified Fee | |
| Priority Delivery Fee | |
| Registered Mail Fee | |
| Special Delivery Fee | |
| Signature Required Fee | |
| Return Receipt by First-Class Mail | |
| Return Receipt by Registered Mail | |
| Postmark or Date | \$ |

PS Form 3800 (2-77)

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

Hazardous Materials Inspection Form

II, III

white -env.health
yellow -facility
pink -files

Site ID # _____ Site Name Jos Nesbitt Co Today's Date 6/13/90

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)

Site Address 2544 Castro Valley Blvd.

City Castro Valley Zip 94546 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 Removal

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) 25524(c)
- 14. OffSite Conseq. Assess. 25534(d)
- 15. Probable Risk Assessment 25534(g)
- 16. Persons Responsible 25534(i)
- 17. Certification 25534(j)
- 18. Exemption Request? (Y/N) 25536(b)
- 19. Trade Secret Requested? 25538

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

III. UNDERGROUND TANKS (Title 23)

- | | |
|---------|---|
| General | <input type="checkbox"/> 1. Permit Application 25284 (H&S) |
| | <input type="checkbox"/> 2. Pipeline Leak Detection 25292 (H&S) |
| | <input type="checkbox"/> 3. Records Maintenance 2712 |
| | <input type="checkbox"/> 4. Release Report 2651 |
| | <input type="checkbox"/> 5. Closure Plans 2670 |

- | | |
|-------------------------------|------------------------------------|
| Monitoring for Existing Tanks | <input type="checkbox"/> 6. Method |
| | 1) Monthly Test |
| | 2) Daily Vadose |
| | Semi-annual groundwater |
| | One time soils |
| | 3) Daily Vadose |
| | One time soils |
| | Annual tank test |
| | 4) Monthly Gndwater |
| | One time soils |
| 5) Daily Inventory | |
| Annual tank testing | |
| Cont pipe leak def | |
| Vadose/gndwater mon. | |
| 6) Daily Inventory | |
| Annual tank testing | |
| Cont pipe leak def | |
| 7) Weekly Tank Gauge | |
| Annual tank testing | |
| 8) Annual Tank Testing | |
| Daily Inventory | |
| 9) Other _____ | |

- | | |
|-----------|---|
| New Tanks | <input type="checkbox"/> 7. Precls Tank Test 2643 |
| | Date: _____ |
| | <input type="checkbox"/> 8. Inventory Rec. 2644 |
| | <input type="checkbox"/> 9. Soil Testing 2646 |
| | <input type="checkbox"/> 10. Ground Water. 2647 |

- | | |
|-------------|--|
| New Tanks | <input type="checkbox"/> 11. Monitor Plan 2632 |
| | <input type="checkbox"/> 12. Access. Secure 2634 |
| | <input type="checkbox"/> 13. Plans Submit 2711 |
| | Date: _____ |
| | <input type="checkbox"/> 14. As Built 2635 |
| Date: _____ | |

Comments:

Service, 1741 Leslie St San Mateo
Manifest # 90177222

Fuller Excavating taking to
Erickson, hauler # 013356 exp

Oct 90, 250 gal tank,
Numerous holes in bottom of the
tank.

Odor of fuel present.

Send sample results to this
office.

1 sample taken -
VPH as gas.

Contact: Chuck

Title: Senior Rep.

Signature: Chuck Kupin

Inspector: Anna Leach

Signature: _____

II, III

STATE OF CALIFORNIA—HEALTH AND WELFARE AGENCY

SIGES DEHEHEHAN, Governor

DEPARTMENT OF HEALTH SERVICES

714 764 7 STREET

R.D. BOX 142732

SACRAMENTO, CA 95834-7320



(916) 324-2430

*** HAZARDOUS WASTE HAULER REGISTRATION ***

NAME AND ADDRESS OF REGISTERED HAULER:Allied Petroleum
P.O. Box 193
Kilmar, CA 95324HAULER REGISTRATION NO: 1168EXPIRATION DATE: April 30, 1991

THIS IS TO CERTIFY THAT THE FIRM NAMED ABOVE IS DULY REGISTERED TO HAUL HAZARDOUS WASTE IN THE STATE OF CALIFORNIA IN ACCORDANCE WITH THE PROVISIONS OF CHAPTER 6.5, DIVISION 20 OF THE HEALTH AND SAFETY CODE AND CHAPTER 30, DIVISION 4, TITLE 22 OF THE CALIFORNIA CODE OF REGULATIONS.

THIS REGISTRATION MUST BE CARRIED IN THE VEHICLE USED TO TRANSPORT HAZARDOUS WASTE.


(AUTHORIZED SIGNATURE)

MAY 07 1990

(Date)

S E M C O
James C. Bateman Petroleum Services, Inc.
General & Engineering Contractors
License No. 449864 A,B & C-61

1741 Leslie St.
 San Mateo, CA 94402
 (415) 572-8033

431 W. Hatch Road
 Modesto, CA 95351
 (209) 524-9653

DATE: 5/7/90 TIME: 2:27

FAX TO: Alameda County FAX # 568-3706

ATTENTION: Scott Seery

FROM: SEMCO
 1741 LESLIE ST.
 SAN MATEO, CA 94402

FAX# (415) 572-9734

SENDER: Phander

TOTAL NUMBER OF PAGES INCLUDING COVER: 2

COMMENTS: Per your request -
Allied Petroleum -
Expiration 4/30/90

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL ME AT (415) 572-8033.

AGORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

11/3/89

PRODUCER

R. L. Stewart Ins. Agency
P.O. Box 1515
Oakdale, Ca. 95361

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

COMPANIES AFFORDING COVERAGE

| | | | | |
|---------|----------|----------------|---|------------------------|
| CODE | SUB-CODE | COMPANY LETTER | A | American Star Ins. Co. |
| INSURED | | COMPANY LETTER | B | Fairmont Ins. Co. |
| | | COMPANY LETTER | C | |
| | | COMPANY LETTER | D | |
| | | COMPANY LETTER | E | |

Semco, Inc.
431 West Hatch Rd.
Modesto, Ca. 95351

COVERAGES

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.

| CO LTR | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | ALL LIMITS IN THOUSANDS | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|--|-------------------------|----------------------------------|-----------------------------------|--|-------------------|-----------|-----------------------------|-----------|-------------------------------|------------------------|-----------------|-----------|----------------------------|--------|----------------------------------|-------|-----------------------|----|----------------------------|----|------------------------------|----|-----------------|----|
| A | GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR. OWNER'S & CONTRACTOR'S PROT. | AMS 1-509826 | 10/1/89 | 10/1/90 | <table border="0"> <tr><td>GENERAL AGGREGATE</td><td>\$ 1,000,</td></tr> <tr><td>PRODUCTS-COMP/OPS AGGREGATE</td><td>\$ 1,000,</td></tr> <tr><td>PERSONAL & ADVERTISING INJURY</td><td>\$ 1,000,</td></tr> <tr><td>EACH OCCURRENCE</td><td>\$ 1,000,</td></tr> <tr><td>FIRE DAMAGE (Any one fire)</td><td>\$ 50,</td></tr> <tr><td>MEDICAL EXPENSE (Any one person)</td><td>\$ 5,</td></tr> <tr><td>COMBINED SINGLE LIMIT</td><td>\$</td></tr> <tr><td>BODILY INJURY (Per person)</td><td>\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td>\$</td></tr> <tr><td>PROPERTY DAMAGE</td><td>\$</td></tr> </table> | GENERAL AGGREGATE | \$ 1,000, | PRODUCTS-COMP/OPS AGGREGATE | \$ 1,000, | PERSONAL & ADVERTISING INJURY | \$ 1,000, | EACH OCCURRENCE | \$ 1,000, | FIRE DAMAGE (Any one fire) | \$ 50, | MEDICAL EXPENSE (Any one person) | \$ 5, | COMBINED SINGLE LIMIT | \$ | BODILY INJURY (Per person) | \$ | BODILY INJURY (Per accident) | \$ | PROPERTY DAMAGE | \$ |
| GENERAL AGGREGATE | \$ 1,000, | | | | | | | | | | | | | | | | | | | | | | | | |
| PRODUCTS-COMP/OPS AGGREGATE | \$ 1,000, | | | | | | | | | | | | | | | | | | | | | | | | |
| PERSONAL & ADVERTISING INJURY | \$ 1,000, | | | | | | | | | | | | | | | | | | | | | | | | |
| EACH OCCURRENCE | \$ 1,000, | | | | | | | | | | | | | | | | | | | | | | | | |
| FIRE DAMAGE (Any one fire) | \$ 50, | | | | | | | | | | | | | | | | | | | | | | | | |
| MEDICAL EXPENSE (Any one person) | \$ 5, | | | | | | | | | | | | | | | | | | | | | | | | |
| COMBINED SINGLE LIMIT | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| BODILY INJURY (Per person) | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| BODILY INJURY (Per accident) | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| PROPERTY DAMAGE | \$ | | | | | | | | | | | | | | | | | | | | | | | | |
| | AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY | | | | | | | | | | | | | | | | | | | | | | | | |
| | EXCESS LIABILITY OTHER THAN UMBRELLA FORM | | | | <table border="0"> <tr><td>EACH OCCURRENCE</td><td>\$</td><td>AGGREGATE</td><td>\$</td></tr> </table> | EACH OCCURRENCE | \$ | AGGREGATE | \$ | | | | | | | | | | | | | | | | |
| EACH OCCURRENCE | \$ | AGGREGATE | \$ | | | | | | | | | | | | | | | | | | | | | | |
| B | WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY OTHER | F48637 | 9/5/89 | 9/90 | <table border="0"> <tr><td>STATUTORY</td><td>\$ 1,000,</td><td>(EACH ACCIDENT)</td></tr> <tr><td></td><td>\$ 1,000,</td><td>(DISEASE-POLICY LIMIT)</td></tr> <tr><td></td><td>\$ 1,000,</td><td>(DISEASE-EACH EMPLOYEE)</td></tr> </table> | STATUTORY | \$ 1,000, | (EACH ACCIDENT) | | \$ 1,000, | (DISEASE-POLICY LIMIT) | | \$ 1,000, | (DISEASE-EACH EMPLOYEE) | | | | | | | | | | | |
| STATUTORY | \$ 1,000, | (EACH ACCIDENT) | | | | | | | | | | | | | | | | | | | | | | | |
| | \$ 1,000, | (DISEASE-POLICY LIMIT) | | | | | | | | | | | | | | | | | | | | | | | |
| | \$ 1,000, | (DISEASE-EACH EMPLOYEE) | | | | | | | | | | | | | | | | | | | | | | | |

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

All California Operations

CERTIFICATE HOLDER

COUNTY OF ALAMEDA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

470 - 27TH ST., RM. 322
OAKLAND, CA 94612
PHONE NO. 415/874-7237

DEPARTMENT OF ENVIRONMENTAL HEALTH

470 - 27th Street, Oakland, CA 94612
Telephone: (415) 874-7237

ACCEPTED 505-90
58-90

Insurance of a permit to operate is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

Final Inspection
Removal of Tank and Piping
Sampling
6-13
6-13
6-13

Acceptance of these accepted plans must be on the job and to all contractors and craftsmen involved with the project.
The Department of Environmental Health has the authority to issue permits for construction.
The Department of Environmental Health has the authority to issue permits for construction.
The Department of Environmental Health has the authority to issue permits for construction.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

- Business Name Gas Reslitt Co.
Business Owner Rich Mendonca
- Site Address 2544 Castro Valley Blvd.
City Castro Valley Zip 94546 Phone 581-2184
- Mailing Address 2544 Castro Valley Blvd
City Castro Valley Zip 94546 Phone 581-2184
- Land Owner Gas Reslitt Co
Address 2544 Castro Valley City, State Castro Valley CA Zip 94546
- EPA I.D. No. CAC 000 261 633
- Contractor Semco
Address 1741 Leslie Street
City San Mateo Phone 572-8033
License Type A, B & C-61 ID# 449864
- Other (Specify) _____
Address _____
City _____ Phone _____

8. Contact Person for Investigation

Name Chuck Kiper Title Vice President
Phone 572-8033

9. Total No. of Tanks at facility 1

10. Have permit applications for all tanks been submitted to this office? Yes [] No []

11. State Registered Hazardous Waste Transporters/Facilities

a) Product/Waste Transporter

Name Allied Petroleum EPA I.D. No. CAD 98065675128
Address P.O. Box 193 Hauler # 1168
City Hellman State CA Zip 95327

b) Rinsate Transporter

Name Allied Petroleum EPA I.D. No. CAD 98065675128
Address P.O. Box 193
City Hellman State CA Zip 95327

c) Tank Transporter

Name Erickson EPA I.D. No. CAD 009466392
Address 255 Par Blvd
City Richmond State CA Zip _____

d) Contaminated Soil Transporter

Name Erickson EPA I.D. No. CAD 009466392
Address 255 Par Blvd
City Richmond State CA Zip _____

12. Sample Collector

Name Jernco / Chuck Kiper
Company Jernco
Address 1741 Hasler St
City San Mateo State CA Zip 94402 Phone 572-8033

13. Sampling Information for each tank or area

| Tank or Area | | Material sampled | Location & Depth |
|---------------------|--|--|------------------------------------|
| Capacity 250 | Historic Contents (past 5 years) GAS | SOIL, AND GROUNDWATER IF ENCOUNTERED | NATIVE SOIL/ BACKFILL INTERFACE |

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

If yes, describe. _____

15. NFPA methods used for rendering tank inert? Yes [] No []

If yes, describe. Remove residual product, high
pressure hot water detergent wash, 20105 dry
ice inserted per 1000 gallon capacity, final surge
with venting

16. Laboratories

Name Superior Analytical
 Address 1555 Burke Unit 1
 City San Francisco State CA Zip 94124
 State Certification No. #220

17. Chemical Methods to be used for Analyzing Samples

| Contaminant Sought | EPA, DHS, or Other Sample Preparation Method Number | EPA, DHS, or Other Analysis Number |
|--------------------|---|------------------------------------|
| BTXE TPH | 8020 5030 | 8020 6CF10 |

18. Site Safety Plan submitted? Yes No

19. Workman's Compensation: Yes No

Copy of Certificate enclosed? Yes No

Name of Insurer American Star & Taurmont

20. Plot Plan submitted? Yes No

21. Deposit enclosed? Yes No

22. Please forward to this office the following information within 60 days after receipt of sample results.


- a) Chain of Custody Sheets
- b) Original Signed Laboratory Reports
- c) TSD to Generator copies of wastes shipped and received
- d) Attachment A summarizing laboratory results

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.

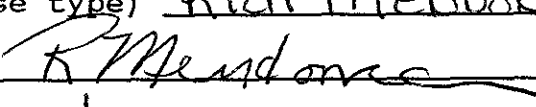
I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I will notify the Department of Environmental Health at least two (2) working days (48 hours) in advance to schedule any required inspections. 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.

Signature of Contractor

Name (please type) Chuck Kiper
Signature 
Date 4/18/90

Signature of Site Owner or Operator

Name (please type) Rich Mendonca
Signature 
Date 4/16/90

NOTES:

1. Any changes in this document must be approved by this Department.
2. Any leaks discovered must be submitted to this office on an underground storage tank unauthorized leak/contamination site report form within 5 days of its discovery.
3. Three (3) copies of this plan must be submitted to this Department. One copy must be at the construction site at all times.
4. A copy of your approved plan must be sent to the landowner.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

ATTACHMENT A

SAMPLING RESULTS

| Tank or Area | Contaminant | Location & Depth | Results (specify units) |
|--------------|-------------|------------------|-------------------------|
| | | | |

INSTRUCTIONS

2. SITE ADDRESS

Address at which closure or modification is taking place.

5. EPA I.D. NO.

This number may be obtained from the State Department of Health Services, 916/324-1781.

6. CONTRACTOR

Prime contractor for the project.

7. OTHER

List professional consultants here.

12. SAMPLE COLLECTOR

Persons who are collecting samples.

13. SAMPLING INFORMATION

Historic contents - the principal product(s) used in the last 5 years.

Material sampled - i.e., water, oil, sludge, soil, etc.

16. LABORATORIES

Laboratories used for chemical and geotechnical analyses.

17. CHEMICAL METHODS:

All sample collection methods and analyses should conform to EPA or DHS methods.

Contaminant - Specify the chemical to be analyzed.

Sample Preparation Method Number - The means used to prepare the sample prior to analyses - i.e., digestion techniques, solvent extraction, etc. Specify number of method and reference if not an EPA or DHS method.

Analysis Method Number - The means used to analyze the sample - i.e., GC, GC-MS, AA, etc. Specify number of method and reference if not a DHS or EPA method.

NOTE:

Method Numbers are available from certified laboratories.

18. SITE SAFETY PLAN

A plan outlining protective equipment and additional specialized personnel in the event that significant amount of hazardous materials are found. The plan should consider the availability of respirators, respirator cartridges, self-contained breathing apparatus (SCBA) and industrial hygienists.

19. ATTACH COPY OF WORKMAN'S COMPENSATION

20. PLOT PLAN

The plan should consists of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale
- b) North Arrow
- c) Property Line
- d) Location of all Structures
- e) Location of all relevant existing equipment including tanks and piping to be removed
- f) Streets
- g) Underground conduits, sewers, water lines, utilities
- h) Existing wells (drinking, monitoring, etc.)
- i) Depth to ground water
- j) All existing tanks in addition to the ones being pulled