

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY



DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, DIRECTOR

DEPARTMENT OF ENVIRONMENTAL HEALTH

ALAMEDA COUNTY-ENV. HEALTH DEPT.
ENVIRONMENTAL PROTECTION DIV.
1131 HARBOR BAY PKWY., #250
ALAMEDA CA 94502-6577
(510)567-6700

Certified Mail # Z 296 048 444
10/27/95 - STID# 3581

Notice of Requirement to Reimburse

Mark Miller
Chevron U S A
P. O. Box 5004
San Ramon, C A 94583

Responsible Party
Property Owner


Chevron
1801 Park St
Alameda , CA 94501

SITE

Date First Reported 10/18/95
Substance: Gasoline
Petroleum: (X)Yes
Source: F

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing site investigation or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Section 25297.1 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board (SWRCB) not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above referenced underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the SWRCB. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please fax your request to Roni Riley at the SWRCB at (916) 227-4349 or telephone (916) 227-4408. Please contact Eva CHU, Hazardous Materials Specialist at this office if you have any questions concerning this matter.


Gordon Coleman, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB
Add: X Reason: New Case
Delete: _____ Reason: _____
Change: _____ Reason: _____

#3581
EC

Z 296 048 444



**Receipt for
Certified Mail**

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

PS Form 3800, March 1993

Sent to Mark Miller	
Street and No. P.O. Box 5004	
P.O., State and ZIP Code San Ramon CA 94583	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Certified Mail #
10/27/95 - STID# 3581

Notice of Requirement to Reimburse

Mark Miller
Chevron U S A
P. O. Box 5004
San Ramon, C A 94583

Responsible Party
Property Owner

Chevron
1801 Park St
Alameda , CA 94501

SITE

Date First Reported 10/18/95
Substance: Gasoline
Petroleum: (X)Yes
Source: F

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Gordon Coleman, Acting Chief
Contract Project Director

c: Mike Harper, SWRCB

Add: _____ Reason: _____
Delete: _____ Reason: _____
Change: _____ Reason: _____

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID L. KEARS, Agency Director

State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P 367 604 023

03/23/92
STID# 3581

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

Notice of Requirement to Reimburse

Harsch Investment Corp.
P.o. Box 2708
Portland, Or 97208

Responsible Party
Property Owner

Alameda Chevron Carwash
1801 Park St.
Alameda , CA 94501

SITE

Date First Reported
Substance: Gasoline
Petroleum: (X)Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Dennis BYRNE, Senior Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

Post-It® Fax Note	7671	Date	11-16	# of pages	1
To	<i>Eva Chu</i>	From	<i>Yari</i>		
Co./Dept.		Co.			
Phone #		Phone #			
Fax #	510-337-9335	Fax #			

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ENVIRONMENTAL PROTECTION

Alameda County CC4580
Environmental Health
1131 Harbor Bay Pkwy., #250
Alameda CA 94502-6577

95 NOV -2 PM 1:55

39



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

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

Consult postmaster for fee.

3. Article Addressed to: E. Chu #3581
RO805
Mark Miller
Chevron USA
P.O. Box 5004
San Ramon CA 94583

4a. Article Number
Z 296 048 444

4b. Service Type

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

7. Date of Delivery
NOV 1 1995

5. Received By: (Print Name)

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

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

PS Form 3811, December 1994



Thank you for using Return Receipt Service.