

FAX COVER SHEET**ALFA ENVIRONMENTAL REMEDIATION SERVICES****P.O.BOX 1630****PLEASANTON, CA 94566****(510) 462-9763 Fax:(510) 462-9726****DATE:3/29/95****TRANSMITTING TO: Mr. Scott O. Seery, CHMM,
Senior Hazardous Materials Specialist****Alameda County Health Care Services Agency****FROM: Valentin Constantinescu- ALFA ENVIRONMENTAL****Our facsimile number: (510) 462-9726****Number of pages being sent including this cover sheet:12****If any part of transmission is illegible or missing, you can reach Valentin****at (510) 462-9763.****Message:****RE: Hiro's Nursery / ALFA's experience.****Dear Mr. Seery:****As per your request, enclosed please find copies of some permits, diplomas, etc.****I have a M.Sc. degree in geological engineering, and fifteen (15) years experience in geology/environmental. As you probably know, in order to become Registered Geologist, the State Board requires original transcripts of original Diplomas, etc. and only those individuals showing at least a B.S. degree in Geology are approved to take the examination. On March 27, 1995 I took the geology examination (see attached letter).**

I am also a Registered Environmental Assessor (#05246, exp. 6/30/95), an AHERA certified Building Inspector for Asbestos - UC Berkeley (#2199BI, exp. 2/23/96) and a Certified Environmental Compliance Manager (#574, exp. 12/31/95).

My wife, Adriana, is a R.E.A., a Certified Hazardous Materials Manager (CHMM) - UC Berkeley (see attachment). She has a M.Sc. degree in Geology and she was approved to take the Registered Geologist examination.

Mr. Marvin D. Kirkeby is a Professional Engineer (#14001, exp. 3/31/97). Mr. Kirkeby supervises our field activity, reviews and corrects our reports. He worked with us from 1992.

Other personnel: microbiologist for bioremediations, civil engineer (remediation), environmental specialist (environmental compliance), and a chemist (PhD).

ALFA Environmental Remediation Services was founded in 1992. Most of our clients are in San Mateo County and Santa Clara County. We performed numerous Phase I Environmental Site Assessments (ESA) as well as Phase II ESA (soil and groundwater testing). We installed groundwater monitoring wells, surged and purged the wells and prepared Quarterly Groundwater Monitoring Reports.

In attachment are presented copies of some of our most recent permits to drill shallow groundwater monitoring wells (approx. 20-30 ft), deep wells (approx. 100 ft), piezometers, and vapor extraction wells.

We prepared closure plans, work plans (including for Hiro's nursery) for gasoline contaminated sites, and for VOCs contaminated sites. These workplans have been approved and for some sites we have direct correspondence with the RWQCB (see Attachment).

Need more information about ALFA ? Please call Michele Shoemaker at San Mateo County (415) 599-1679 or Leslie Gordon at SCVWD (408) 927-0710 (project Western Microwave).

If you have questions please call (510) 462-9763 or page me at (510) 702-9803.

Sincerely your,

ALFA Environmental Remediation Services



*Valentin Constantinescu, R.E.A., C.E.C.M.
Senior Geologist*

Attachment

We have copies of the following letters/workplans:

September workplan - J.P. Cummings (JPC).

December 8, 1994 - request for clarification (ACHCA).

December 15, 1994 - addition to the september workplan (JPC).

December 19, 1994 - Work plan accepted as ammended (ACHCA).

While working for another company, I studied the Hiro's nursery file including McLaren Hart's report and I collected soil samples and prepared the closure report for the other tank.

Approximately 2 years ago ALFA prepared a workplan for this site.

STATE OF CALIFORNIA
California Environmental Protection Agency

Valentin Constantinescu

has fulfilled the requirements for registration as a

**REGISTERED ENVIRONMENTAL ASSESSOR
(REA)**

Date: October 1993

REA Number: REA-05246



James M. Strock
Secretary for Environmental Protection
California Environmental Protection Agency

University of Environmental Sciences

by virtue of the authority vested in them have conferred on

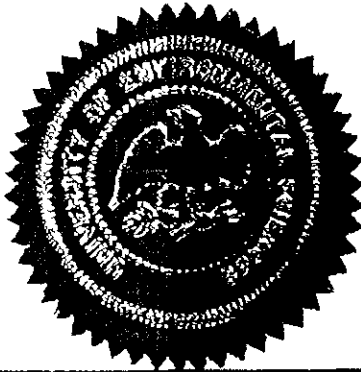
Valentin Constantinescu

*who has satisfactorily pursued the studies and passed the examinations
required for the professional credentials of*

Certified Environmental Compliance Manager CECM

and is therefore qualified for Professional Registration with the

International Registry of Environmental Engineers and Compliance Professionals



Sealed and signed March 14, 1994

Valid thru December 31, 1994

M. Ray Curtis

President

Bob Mayer

Chairman

STATE OF CALIFORNIA
California Environmental Protection Agency

Viorica-Adriana Constantinescu

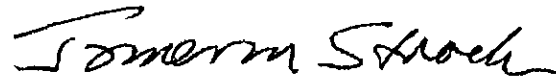
**has fulfilled the requirements for registration as a
REGISTERED ENVIRONMENTAL ASSESSOR
(REA)**

September 1993

Date: _____

REA-05220

REA Number: _____



James M. Stock
Secretary for Environmental Protection
California Environmental Protection Agency

University of California, Berkeley

U N I V E R S I T Y E X T E N S I O N

This is to certify that

Viorica-Adriana Constantinescu

has successfully completed requirements for the

Certificate in Hazardous Materials Management



Mary J. Metz
Dean, University Extension

August 31, 1993

TOTAL P.07

03-29-1995 09:55AM FROM 510 462 9726 TO 3379335 P.07



HEALTH SERVICES AGENCY

ENVIRONMENTAL HEALTH SERVICES DIVISION

October 18, 1994

ATTN: Randy Feriante
1185 O'Brien Drive
Menlo Park, CA 94025

SMCo SITE #330118

SUBJECT: SUBSURFACE INVESTIGATION AT 1612 EL CAMINO REAL, REDWOOD CITY, CALIFORNIA

Thank you for the Installation of One Groundwater Monitoring Well, Soil, and Groundwater Sampling report by Alfa Environmental Remediation Services dated October 10, 1994 for the subject site. Continued quarterly groundwater monitoring is required. The next groundwater sampling should occur on or before December 6, 1994.

The site-specific gradient must be determined at the site. The on-site well must be used with at least two other nearby groundwater monitoring wells. Your consultant may contact this office for addresses in the vicinity of the site which have groundwater monitoring wells. Should you have questions, you may reach me at (415) 599-1679.

Sincerely,

Michele Shoemaker
Hazardous Materials Specialist
County Remedial Oversight Program

cc: Valentin Constantinescu, ALFA Environmental Remediation Services, P.O. Box 1630, Pleasanton, CA 94566

SAN MATEO COUNTY BOARD OF SUPERVISORS

RUBEN BARRALES • MARY GRIFFIN • TOM HUENING • TED LEMPert • MICHAEL D. NEVIN

HEALTH SERVICES AGENCY DIRECTOR
MARGARET TAYLOR

ENVIRONMENTAL HEALTH SERVICES DIVISION DIRECTOR
BRIAN ZAMORA, MPH, REHS

590 HAMILTON STREET, REDWOOD CITY, CALIFORNIA 94063

PHONE (415) 363-4305 • TDD (415) 573-3206 • FAX (415) 363-7882

Santa Clara Valley Water District



WELL CONSTRUCTION APPLICATION

5750 Almaden Expressway, San Jose, CA 95118 (408) 265-2600

FC 168 (04-22-92) (DP 4-90)

TO BE COMPLETED BY DISTRICT

District Permit No.: 95W00088 Date Issued: 1-31-95 Well Registration No.:
Geologic Setting: 1 Expiration Date: 7-31-95 Driller's Log No.: 5700888

TO BE COMPLETED BY OWNER AND DRILLER

Property Owner: SOBATO DEVELOPMENT COMPANIES Well Owner: WESTERN MICROWAVE, INC. Drilling Co: SOIL EXPLORATION SERVICES
Address: 10600 DE ANZA BLVD, STE. 200 Address of Well Site: 1271-1273 REARWOOD AVENUE Driller's Contractors License Number: C-57 582 696
City, State, Zip: CUPERTINO, CA 95014 City, State, Zip: SAN JUAN VALLE, CA 94086 Address: P.O. BOX 188
Telephone No: (408) 446-0700 Telephone No: (408) 738-2300 City, State, Zip: BENICIA, CA 94510
Assessor's Parcel No. of Well site: Book 104 Page 31 Parcel 028 Owner's/Consultant's Well No: B Telephone No: (707) 745-2928

Estimated depth of completed well: [] Less than 50 ft. [X] 50 to 300 ft. [] Over 300 ft.
Purpose of Well: [] Domestic [] Municipal/Industrial [] Agricultural [X] *Monitoring [] Cathodic Protection
*Monitoring wells are those constructed for the purpose of obtaining repetitive water level measurements and/or repetitive air samples for analysis.

THIS SECTION TO BE COMPLETED FOR ALL MONITORING WELLS OR EXTRACTION/RECOVERY WELLS

Purpose of Monitoring Well: [] To comply with City or County Hazardous Materials Storage Permit Ordinance [X] Exploration studies
[] Other (specify): [] Extraction/Recovery

NAME OF BUSINESS AT WELL SITE:

If proposed well is to meet compliance with a Hazardous Materials Storage Permit Ordinance has the City or County been contacted? [] Yes [X] No

ACFA ENVIRONMENTAL REMEDIATION SERVICES
Consultant's Name (Company):
Address: P.O. BOX 1630
City, State, Zip: PEASANTON, CA 94566
Telephone No.: (510) 462-9763

Type of monitoring device: [X] Groundwater [] Vadose
Type of extraction device: [] Groundwater [] Vadose
Monitoring well use: [] Depth [X] Quality [] Chloride
Vadose device installation: [] Vapor [X] Interface [] Suction Lysimeter
Signature of Responsible Professional: [Signature]
RCE No. 14001 Expires 3/31/97
Registration No. Civil OR Certificate No. Engineering
Engineer Geologist

TOPOGRAPHIC FEATURES

Well is to be constructed: [] In a public sidewalk [] In a public road [] On public property [X] On private property [] On SCVWD property
Within 50 ft of the top of a creek bank [] Yes [] No Within 50 ft. of any existing well [X] Yes [] No
Within 50 ft. of a sanitary sewer [] Yes [X] No Within 150 ft. of a cesspool or seepage pit [] Yes [X] No
Within 100 ft. of a pit privy, septic tank, leachfield [] Yes [X] No Other wells exist on this property [X] Yes [] No
Status: [X] Active [] Inactive [] Abandoned

CERTIFICATION BY WELL OWNER/AGENT AND DRILLER/AGENT:

I certify that the information given above is correct to the best of my knowledge. I certify that the well will be constructed in compliance with the conditions of this permit, the Santa Clara Valley Water District's Ordinance 90-1 and, if applicable, the Hazardous Materials Storage Permit Ordinance of the County or City, as appropriate. It is my responsibility as the well owner to notify this District of any changes in the purpose of this well from that which is indicated on this application form.

[Signature] Date 11/31/95
Signature of Well Owner/Agent
[Signature] Date 11/31/95
Signature of Driller/Agent

MONITORING WELL PLAN APPROVAL
City/County:
Approved by:
Date:

IMPORTANT: A minimum 24-hour notice must be given to SCVWD Well Inspection Dept. prior to installing the annular seal. Call (408) 927-0710 Ext. 660. For weekends, holidays, after hours call (408) 395-8121 or (408) 927-0714.

Santa Clara Valley Water District



WELL CONSTRUCTION APPLICATION

PC 158 (04-22-92) (DP 4-901)

5750 Almaden Expressway, San Jose, CA 95118 (408) 265-2600

TO BE COMPLETED BY DISTRICT

District Permit No.: 94WVWD Date issued: 2-15-94 Well Registration No. Geologic Setting: 1 Expiration Date: 2-15-95 Driller's Log No.

TO BE COMPLETED BY OWNER AND DRILLER

Property Owner: SOBRATO DEVELOPMENT CORP Well Owner (if different): WESTERN MICROWAVE DRILLING CO: ENVIRONMENTAL CONTROL ASSOCIATES Address: 10600 DEANZA BLVD. Address of Well Site: 1271 REARWOOD AVE Driller's Contractors License Number (C-57 Req'd): C57-51942A City, State, Zip: CUPERTINO, CA 95014 City, State, Zip: SAN JUAN VALLE, CA 94086 Address: 3011 TWIN PALMS DRIVE Telephone No: (408) 446-0700 Telephone No: (408) 738-2300 City, State, Zip: APTOS, CA 95003 Assessor's Parcel No. of Well site: Book 104 Page 31 Parcel 02A Owner's/Consultant's Well No: VE5 Telephone No: (408) 662-8178

Estimated depth of completed well: [] Less than 50 ft. [] 50 to 300 ft. [] Over 300 ft. Purpose of Well: [] Domestic [] Municipal/Industrial [] Agricultural [x] *Monitoring [] Cathodic Protection *Monitoring wells are those constructed for the purpose of obtaining repetitive water level measurements and/or repetitive air samples for analysis. This includes wells constructed for general exploration and investigation purposes as well as those to be constructed in conformance with the Hazardous Materials Storage Permit Ordinance for site-specific groundwater monitoring of existing underground hazardous materials storage tanks.

THIS SECTION TO BE COMPLETED FOR ALL MONITORING WELLS OR EXTRACTION/RECOVERY WELLS

Purpose of Monitoring Well: [] To comply with City or County Hazardous Materials Storage Permit Ordinance [x] Exploration studies [x] Other (specify): VAPOR EXTRACTION [x] Extraction/Recovery NAME OF BUSINESS AT WELL SITE: DEANZA MANUFACTURING. If proposed well is to meet compliance with a Hazardous Materials Storage Permit Ordinance has the City or County been contacted? [] Yes [x] No

Consultant's Name (Company): ALFA ENVIRONMENTAL REMEDIATION SERVICES Address: P.O. BOX 1630 City, State, Zip: PLEASANTON, CA 94566 Telephone No.: (510) 462-9763 Type of monitoring device: [] Groundwater [x] Vadose Type of extraction device: [] Groundwater [] Vadose Monitoring well use: [] Depth [] Quality [] Chloride Vadose device installation: [x] Vapor [] Interface [] Suction lysimeter Signature of Responsible Professional: [Signature] 1A001 3/2/97 Registration No. Civil Engineer OR Certificate No. Engineering Geologist

TOPOGRAPHIC FEATURES Well is to be constructed: [] In a public sidewalk [] In a public road [] On public property [x] On private property [] On SCVWD property Within 50 ft of the top of a creek bank [] Yes [x] No Within 50 ft. of any existing well [x] Yes [] No Within 50 ft. of a sanitary sewer [] Yes [x] No Within 150 ft of a cesspool or seepage pit [] Yes [x] No Within 100 ft. of a pit privy, septic tank, leachfield [] Yes [x] No Other wells exist on this property [x] Yes [] No Status: [x] Active [] Inactive [] Abandoned

CERTIFICATION BY WELL OWNER/AGENT AND DRILLER/AGENT:

I certify that the information given above is correct to the best of my knowledge. I certify that the well will be constructed in compliance with the conditions of this permit, the Santa Clara Valley Water District's Ordinance 90-1 and, if applicable, the Hazardous Materials Storage Permit Ordinance of the County or City, as appropriate. It is my responsibility as the well owner to notify this District of any changes in the purpose of this well from that which is indicated on this application form.

Signature of Well Owner/Agent: [Signature] Date: 12/19/94 Signature of Driller/Agent: [Signature] Date: 12/19/94

MONITORING WELL PLAN APPROVAL City/County: Approved by: Date:

IMPORTANT: A minimum 24-hour notice must be given to SCVWD Well Inspection Dept. prior to installing the annular seal. Call (408) 927-0710 Ext. 660. For weekends, holidays, after hours call (408) 395-8121 or (408) 927-0714.

STATE OF CALIFORNIA

PETE WILSON, Governor

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD

SAN FRANCISCO BAY REGION

2101 WEBSTER STREET, SUITE 500

OAKLAND, CA 94612

(510) 286-1255

April 6, 1994
File No. 2189.8195(HK)Ibrahim Hefni, Ph.D., CEO
Western Microwave, Inc.
495 Mercury Drive
Sunnyvale, CA 94086Subject: Proposed Installation of Two Additional Extraction Wells and Four Piezometers
at the Western Microwave Site, 1271 Reamwood Avenue, Sunnyvale

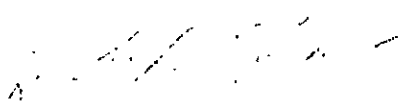
Dear Dr. Hefni:

This letter responds to Alfa Environmental's letter dated March 22, 1994. In its letter, Alfa Environmental on behalf of Western Microwave proposes to install two additional extraction wells and four piezometers at the subject site. In addition, Alfa requests the Regional Water Quality Control Board's approval regarding the location of the additional wells.

I do not have any objection with the proposed location of the extraction wells. Regarding the location of piezometers, it would be appropriate to determine their location after installing the extraction wells to investigate the area of influence. Please note that Western Microwave must install all its wells following guidelines of the Santa Clara Valley Water District.

If you have any questions, please call Habte Kifle of my staff at (510) 286-0467.

Sincerely,


Steve I. Morse, Chief
South Bay Toxics Divisioncc: Tom Iwamura, SCVWD
Ben Gikis, City of Sunnyvale
William Burns, Sobrato Development Company
Masood Ghassemi, Lockheed
Deborah Harkins, InterimAlfa Environmental, President
Alfa Manufacturing Services, Inc.
1271 Reamwood Avenue
Sunnyvale, CA 94089

Santa Clara Valley Water District

WELL INSPECTION COMPLETION NOTICE

FC 158A (07-26-89) (DP 4-901)

From: WELL SECTION	Date: 8/17/94	Permit No.: 94W0516
Inspector: MIKE HELLER	Date of Inspection: 8/30/94	Well Registration No.: EI 0651W17309
Well Owner: SOBRATO DI VILLAMONTI	City or County: SUNNYVALE	
Address of Well Site: 1771 REAMWOOD	Consultant: ALFA ENV. PLEASANTON	
Drilling Company: BAYLAND M.P.		

PURPOSE OF WELL:

- Domestic
- Agricultural
- Municipal/Industrial
- Cathodic Protection

*Monitoring Well Use

- *Vadose
- *Groundwater (EXTRACTION)
- *Other _____

1. Well completed according to provisions of Santa Clara Valley Water District Permit Yes No (If "No", see comments below)
2. Depth of Surface Annular Seal - 9'

Comments: ID=720 BENT=79-7 HOLLOW NEAT
 SCR=720-10 PVC=4"
 SAND=720-4"

Distribution: White - Well Section Yellow - Water Revenue Pink - Permittee Goldenrod - City/County



**STATE BOARD OF REGISTRATION FOR
GEOLOGISTS AND GEOPHYSICISTS**
400 R STREET, SUITE 4060, SACRAMENTO, CA 95814
TELEPHONE: (916) 445-1920



March 15, 1995

VALENTIN - CONSTANTINESCU
4330-J VALLEY AVENUE
PLEASANTON, CA 94566

Re: Application Number: 1351
Geologist Examination

Dear Mr./Ms. CONSTANTINESCU:

You have been approved to take the geology examination on Monday, March 27, 1995, at the Elk's Lodge #6, 6446 Riverside Boulevard, Sacramento, CA 95831.

Registration begins at 7:15 a.m.. The examination will be approximately seven hours long. The morning session of the examination begins at 8:00 a.m. and ends at 11:00 a.m. and the afternoon session begins at 12:15 p.m. and ends at 5:00 p.m. (times are approximate). You will be given a one hour break between the sessions. Please register early and bring this letter and a photo identification (i.e., driver's license, passport). If you arrive at the examination site after 8:00 a.m. you will not be admitted into the examination.

Below is a list of required and optional items which may be brought into the examination room. All other items are prohibited.

REQUIRED ITEMS

Pencils (Number 2 only)
Calculator (battery operated, silent)
Erasers
Colored Pencils
Engineering Scale
Compass
Protractor
Triangles

OPTIONAL ITEMS

Rolling Ruler
Proportional Dividers
Stereo-net
Tape
DO NOT BRING
Tracing Paper
It Will Be
Provided, If Needed

You may not smoke, use the telephones, or leave the examination site during the examination. If you bring backpacks, briefcases, large purses, or other large bags, you will be required to place them in a secure area designated by the proctor. It is suggested that these items not be taken into the examination room. The board cannot guarantee the environmental conditions at the examination location. You may wish to bring an extra sweater or jacket.

If you cannot appear for the examination, you may obtain a postponement from the Board if you submit a letter or fax requesting such by March 23, 1995. You are allowed two postponements. After two postponements, your application will become void and you must reapply. Additionally, if you fail to appear for the examination without obtaining a postponement from the Board your application will become void and you will be required to reapply. Enclosed for your information is a scope of the examination. If you have any questions, please