

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
(510) 567-6700
(510) 337-9432

December 16, 1999

Ms. Karen M. Stefonek
Madison Park Real Estate Investment Trust
1155 Fifth Street, Suite 101
Oakland, California 94607

**Subject: Risk Management Plan for the Former Continental Baking Co.
1010 46th Street, Emeryville, California 94608 (STID #6400)**

Dear Ms. Stefonek:

This agency issued a "Remedial Action Completion Certification" for the above referenced property on October 29, 1999. However, a risk management plan (RMP) is required prior to any construction activities at the site. The RMP should include at a minimum the following items:

- 1) An acceptable health and safety plan to be followed during any activities involving exposure to soil and groundwater contamination
- 2) If soils and groundwater are generated during construction activities at the site, a soil management plan and groundwater management plan should be developed
- 3) Site mitigating measures to prevent any potential vertical conduits between the shallow and deeper aquifers
- 4) Description of site history, summary of the residual chemicals of concern in soil and groundwater and site development map showing areas to be landscaped, location of buildings, etc.

You will need to submit a deposit of \$1,000.00 payable to Alameda County Environmental Health Services for regulatory oversight on the subject site. At the completion of the project, any unused monies will be refunded to you or your designee. The deposit refund mechanism is authorized in Section 6.92.040L of the Alameda County Ordinance Code. Work on the project will be debited at the ordinance specified rate, currently at \$100 per hour.

If you have any questions concerning this letter or the subject site, please call me at (510) 567-6780, e-mail at shugo@co.alameda.ca.us.

Sincerely,

Susan L. Hugo
Hazardous Materials Specialist

c: Ariu Levi, Chief, Hazardous Materials Programs
Chuck Headlee, San Francisco Bay RWQCB
Claudia Cappio / Ignacio Dayrit, City of Emeryville, 2200 Powell St. 12th Fl., Emeryville, CA 94608
SH / files



MPR

madison park real estate investment trust

ENVIRONMENTAL
"The Live-Work REIT" PROTECTION

99 DEC 13 PM 4: 53

*12/14/99
talked to
Karen Stefonek
- letter by end of next
week*

December 8, 1999

STTD 6 PD

Susan Hugo
Hazardous Materials Specialist
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

RE: Former Continental Baking Co., 1010 46th Street, Emeryville, CA 94608

Dear Ms. Hugo:

Thank you for forwarding the case closure letter for the above-referenced property to me. I note that as a condition of case closure, we are to file a "risk management plan" with your office. However, we are uncertain of what that entails. As you know I left messages for you on November 8, November 18, and December 6 regarding this query. Though you did try to reach me on November 26, the busy holiday season seems to be taking its toll and we haven't been able to connect as of yet.

We are preparing for selective demolition on the property. Are there any materials you can send me regarding the risk management plan that we need to file? If it's easier to respond via email, please contact me at karen.stefonek@gte.net. Or, please call me at your earliest convenience.

Sincerely,

Karen M. Stefonek
Associate Development Director

**MPR**

madison park real estate investment trust

*"The Live-Work REIT"**20840
closed*

September 16, 1999

Susan Hugo
Hazardous Materials Specialist
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

*LOP
case closed
STI*

RE: Former Continental Baking Co., 1010 46th Street, Emeryville, CA 94608

Dear Ms. Hugo:

It was a pleasure speaking with you this afternoon. In particular, thank you for your reassurance that you will cause the case closure letter to be issued as soon as possible. As we discussed, the lack of a case closure letter has stalled our rehabilitation of the above-referenced property. In fact, it remains the only impediment to construction. We are ready to begin now, and will, in fact, begin as soon as we receive the case closure letter. Each day that we are delayed results in overtime costs and interest expense that we are anxious to minimize. Thus, as I mentioned above, your prompt response is very much appreciated.

I understand that you have received URS Greiner Woodward Clyde's report, and that you expect to draft a recommendation and send it to the review board by the end of the week. It is also my understanding that the report shows that any contamination was well below allowable limits. Therefore, we anticipate a swift response from the board in issuing the case closure letter. You estimated 2-3 weeks, but no later than 4 weeks. Obviously, we will provide you or the board with any assistance you require that would result in a case closure letter within the lesser timeframe.

Please call me with any questions or concerns. Once again, thank you for your prompt response to our concerns.

Sincerely,

Karen M. Stefonek
Associate Director of Development

LOP - CHANGE RECORD REQUEST FORM

printed:
10/28/1999

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

Insp:

AGENCY # : 10000 SOURCE OF FUNDS: F SUBSTANCE: 12034
 StID : 6400 LOC: -0-
 SITE NAME: Former Continental Baking Co DATE REPORTED : 03/11/1993
 ADDRESS : 1010 46th St DATE CONFIRMED: 03/11/1993
 CITY/ZIP : Emeryville 94608 MULTIPLE RPs : Y

SITE STATUS

 CASE TYPE: S CONTRACT STATUS: 4 PRIOR CODE:3B2 EMERGENCY RESP: -0-
 RP SEARCH: S DATE COMPLETED: 04/28/1999
 PRELIMINARY ASMNT: C DATE UNDERWAY: 12/22/0092 DATE COMPLETED: 08/10/0099
 REM INVESTIGATION: - DATE UNDERWAY: -0- DATE COMPLETED: -0-
 REMEDIAL ACTION: - DATE UNDERWAY: -0- DATE COMPLETED: -0-
 POST REMED ACT MON:- DATE UNDERWAY: -0- DATE COMPLETED: -0-

ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 04/29/1999
 LUFT FIELD MANUAL CONSID: 2HSCAWG
 CASE CLOSED: Y DATE CASE CLOSED: 10/29/1999 ✓
 DATE EXCAVATION STARTED : 12/22/1992 REMEDIAL ACTIONS TAKEN: ED

RESPONSIBLE PARTY INFORMATION

 RP#1-CONTACT NAME: Mr. Larry Brown
 COMPANY NAME: Interstate Brands Corporation
 ADDRESS: 1324 Arden Way
 CITY/STATE: Sacramento, California 95815

RP#2-CONTACT NAME: Mr. John Protopappas
 COMPANY NAME: Wayne Avenue Partners
 ADDRESS: 1155 5th Street Suite 101
 CITY/STATE: Oakland, California 94607

INSPECTOR VERIFICATION:

NAME SUSAN L. HUGO SIGNATURE *Susan L. Hugo* DATE 10/29/99

DATA ENTRY INPUT:

Name/Address Changes Only			Case Progress Changes	
ANPNPGMS _____	LOP _____	DATE _____	LOP _____	DATE _____

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

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

May 18, 1999

STID 6400

Interstate Brands Corporation
Attn: Mr. Larry Brown
1324 Arden Way
Sacramento, CA 95815

RE: Former Continental Baking Co., 1010 46th Street, Emeryville, CA 94608

LANDOWNER NOTIFICATION AND PARTICIPATION REQUIREMENTS

Dear Mr. Brown:

This letter is to inform you of new legislative requirements pertaining to cleanup and closure of sites where an unauthorized release of hazardous substance, including petroleum, has occurred from an underground storage tank (UST). Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code requires the primary or active responsible party to notify all current record owners of fee title to the site of: 1) a site cleanup proposal, 2) a site closure proposal, 3) a local agency intention to make a determination that no further action is required, and 4) a local agency intention to issue a closure letter. Section 25297.15(b) requires the local agency to take all reasonable steps to accommodate responsible landowners' participation in the cleanup or site closure process and to consider their input and recommendations.

For purposes of implementing these sections, you have been identified as the primary or active responsible party. Please provide to this agency, within twenty (20) calendar days of receipt of this notice, a complete mailing list of all current record owners of fee title to the site. You may use the enclosed "list of landowners" form (sample letter 2) as a template to comply with this requirement. If the list of current record owners of fee title to the site changes, you must notify the local agency of the change within 20 calendar days from when you are notified of the change.

If you are the sole landowner, please indicate that on the landowner list form. The following notice requirements do not apply to responsible parties who are the sole landowner for the site.

LANDOWNER NOTIFICATION

Re: 1010 46th Street, Emeryville

May 18, 1999

Page 2 of 2

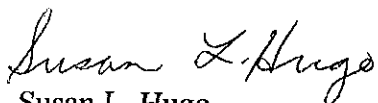
In accordance with Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code, you must certify to the local agency that all current record owners of fee title to the site have been informed of the proposed action before the local agency may do any of the following:

- 1) consider a cleanup proposal (corrective action plan)
- 2) consider a site closure proposal
- 3) make a determination that no further action is required
- 4) issue a closure letter

You may use the enclosed "notice of proposed action" form (sample letter 3) as a template to comply with this requirement. Before approving a cleanup proposal or site closure proposal, determining that no further action is required, or issuing a closure letter, the local agency will take all reasonable steps necessary to accommodate responsible landowner participation in the cleanup and site closure process and will consider all input and recommendations from any responsible landowner.

Please call me at (510) 567-6780 should you have any questions about the content of this letter.

Sincerely,



Susan L. Hugo
Hazardous Materials Specialist

Attachments

cc: Chuck Headlee, RWQCB
John Protopappas, Wayne Avenue Partners, 1155 5th St., Suite 101, Oakland, CA 94607
SH / files

SAMPLE LETTER (2): LIST OF LANDOWNERS FORM

Name of local agency
Street address
City

SUBJECT: CERTIFIED LIST OF RECORD FEE TITLE OWNERS FOR (*Site Name and Address*)

(Note: Fill out item 1 if there are multiple site landowners. If you are the sole site landowner, skip item 1 and fill out item 2.)

1. 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:

2. 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.

Sincerely,

Signature of primary responsible party

Name of primary responsible party

SAMPLE LETTER 3: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY

Name of local agency
Street address
City

SUBJECT: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY FOR
(Site Name and Address)

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 have notified all responsible landowners of the enclosed proposed action. Check space for applicable proposed action(s):

- cleanup proposal (corrective action plan)
- site closure proposal
- local agency intention to make a determination that no further action is required
- local agency intention to issue a closure letter

Sincerely,

Signature of primary responsible party

Name of primary responsible party

cc: Names and addresses of all record fee title owners

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

Insp:

AGENCY # : 10000	SOURCE OF FUNDS: F	SUBSTANCE: 12034
StID : 6400	LOC:	
SITE NAME: Former Continental Baking Co	DATE REPORTED : 03/11/93	
ADDRESS : 1010 46th St	DATE CONFIRMED: 03/11/93	
CITY/ZIP : Emeryville 94608	MULTIPLE RPs : Y	

SITE STATUS

CASE TYPE: S	CONTRACT STATUS: 3	PRIOR CODE:3B2	EMERGENCY RESP:
RP SEARCH: S			DATE COMPLETED: 04/28/99
PRELIMINARY ASMNT: C	DATE UNDERWAY:		DATE COMPLETED:
REM INVESTIGATION:	DATE UNDERWAY:		DATE COMPLETED:
REMEDIAL ACTION:	DATE UNDERWAY:		DATE COMPLETED:
POST REMED ACT MON:	DATE UNDERWAY:		DATE COMPLETED:

ENFORCEMENT ACTION TYPE:	DATE ENFORCEMENT ACTION TAKEN:
LUFT FIELD MANUAL CONSID: 2HSCAWG	
CASE CLOSED:	DATE CASE CLOSED:
DATE EXCAVATION STARTED : 12/22/92	REMEDIAL ACTIONS TAKEN: ED

RESPONSIBLE PARTY INFORMATION

RP#1-CONTACT NAME: Mr. Larry Brown
COMPANY NAME: Interstate Brands Corporation
ADDRESS: 1324 Arden Way
CITY/STATE: Sacramento, California 95815

RP# -CONTACT NAME: Mr. John Protopappas
COMPANY NAME: Wayne Avenue Partners
ADDRESS: 1155 5th Street Suite 101
CITY/STATE: Oakland, California 94607

INSPECTOR VERIFICATION:			
NAME _____	SIGNATURE _____	DATE _____	
DATA ENTRY INPUT:			
Name/Address Changes Only		Case Progress Changes	
ANNPMS _____	LOP _____	DATE _____	LOP _____ DATE _____

LOP - CHANGE RECORD REQUEST FORM

printed:
04/28/99

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

Insp:

AGENCY # : 10000 SOURCE OF FUNDS: F SUBSTANCE: 12034
StID : 6400 LOC:
SITE NAME: Continental Baking Co DATE REPORTED : 03/11/93
ADDRESS : 1010 46th St DATE CONFIRMED: 03/11/93
CITY/ZIP : Emeryville 94608 MULTIPLE RPs : Y

SITE STATUS

CASE TYPE: S CONTRACT STATUS: 3 PRIOR CODE:3B2 EMERGENCY RESP:
RP SEARCH: S DATE COMPLETED: 04/28/99
PRELIMINARY ASMNT: C DATE UNDERWAY: DATE COMPLETED:
REM INVESTIGATION: DATE UNDERWAY: DATE COMPLETED:
REMEDIAL ACTION: DATE UNDERWAY: DATE COMPLETED:
POST REMED ACT MON: DATE UNDERWAY: DATE COMPLETED:

ENFORCEMENT ACTION TYPE: DATE ENFORCEMENT ACTION TAKEN:
LUFT FIELD MANUAL CONSID: 2HSCAWG
CASE CLOSED: DATE CASE CLOSED:
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CITY/STATE: Sacramento, California 95815

RP# -CONTACT NAME: Mr. John Protopappas
COMPANY NAME: Wayne Avenue Partners
ADDRESS: 1155 5th Street Suite 101
CITY/STATE: Oakland, California 94607

INSPECTOR VERIFICATION:

NAME _____ SIGNATURE _____ DATE _____

DATA ENTRY INPUT:

Name/Address Changes Only

Case Progress Changes

ANPPGMS _____ LOP _____ DATE _____

LOP _____ DATE _____

*4/21/99
Please change the
site name to -
Interstate Brands Baking Co.
Thanks
Loren*

Transfer of Eligible Local Oversight Case

R.P. Name:

Address
Phone # (510) 452-2944

STID 6400 Date transferred 4/23/99

Date: 4/20/99 From: SUSAN L. HUGO

Site Name: Former Continental Baking Co.

Address: 1010 - 46th St. City: Emeryville Zip: 94608

To be eligible for LOP, case must meet 3 qualifications:

1. Y N Tanks Removed? # of removed? 1 Date removed: 1992

2. Y N Samples received? Contamination level: _____ ppm
Type of test _____
Contamination should be over 100 ppm TPH to qualify for LOP

3. Y N Petroleum? Circle Type(s): • Avgas • leaded • unleaded • fuel oil • jet
• diesel • waste oil • kerosene • solvents

Procedure to follow should your site meet all the above qualifications:

1.
 - a. NA Close the deposit refund case.
 - b. NA Account for **ALL** time you have spent on the case.
 - c. NA Turn in account sheet to Leslie.
If there are funds still remaining it is still better to transfer the case to LOP as the rate for LOP allows more overhead. **DO NOT** attempt to continue to oversee the site simply because there are funds remaining!

Remaining DepRef \$'s: _____
DepRef Case Closed with Candyce/Leslie? Y N (If no, explain why below.)

2. Submit the completed A and B permit application forms to NORMA.
3. Give the entire case to the proper LOP staff.

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

MEMORANDUM

TO Leslie Peters FROM Susan Hugo DATE 1/20/89
SUBJECT STID 3928 - Continental Baking Co.
1010 - 46th St. Oakland 94609

Please change address to: ~~945~~ 53rd St. Oakland
94609, but keep the STID # 3928. Interstate Brands.

Attached LOP transfer for 1010 46th St. Emeryville 94608
need a new STID #.

The site has been divided into 2 properties.

Transfer of Eligible Local Oversight Case

R.P. Name: DeVryne Ave. Partners.
 Address: 1155 - 5th St Suite 101 Oakland 94607
 Phone # (510) 452-2944
 STID _____ Date transferred _____

Date: 4/20/99 From: SUSAN L. HUGO

Site Name: San Francisco Herb & Natural Tea Co.

Address: 1010 - 46th St. City: Emeryville Zip: 94608

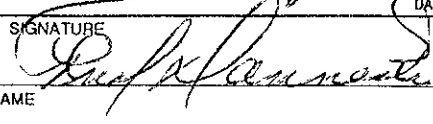
To be eligible for LOP, case must meet 3 qualifications:

1. Y N Tanks Removed? # of removed? 1 Date removed: 1992
2. Y N Samples received? Contamination level: _____ ppm
 Type of test _____
 Contamination should be over 100 ppm TPH to qualify for LOP
3. Y N Petroleum? Circle Type(s): • Avgas • leaded • unleaded • fuel oil • jet
 • diesel • waste oil • kerosene • solvents

Procedure to follow should your site meet all the above qualifications:

1.
 - a. NA Close the deposit refund case.
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 If there are funds still remaining it is still better to transfer the case to LOP as the rate for LOP allows more overhead. **DO NOT** attempt to continue to oversee the site simply because there are funds remaining!
 Remaining DepRef \$'s: _____
 DepRef Case Closed with Candyce/Leslie? Y N (If no, explain why below.)
2. Submit the completed A and B permit application forms to NORMA.
3. Give the entire case to the proper LOP staff.

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 0 <u>9</u> <u>2</u> <u>d</u> 4 <u>9</u> <u>v</u> 3 <u>v</u>		CASE #		SIGNED <u>Susan J. Hugo</u> 10/13/93 DATE	
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Fred Dannecker		PHONE x260 (415) 552-0950		SIGNATURE 
	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 Continental Baking Company (CBC)		
	ADDRESS 1525 Bryant STREET San Francisco CITY CA STATE 94103 ZIP				
RESPONSIBLE PARTY	NAME <u>Same</u> <input checked="" type="checkbox"/> UNKNOWN		CONTACT PERSON		PHONE ()
	ADDRESS STREET CITY STATE ZIP				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) CBC		OPERATOR CBC		PHONE ()
	ADDRESS 1010 46th Street STREET Oakland CITY Alameda COUNTY ZIP 94609				
	CROSS STREET Adeline				
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Health Agency		CONTACT PERSON Susan Hugo		PHONE (510) 271-4530
	REGIONAL BOARD RWQCB, Oakland, CA		PHONE ()		
SUBSTANCES INVOLVED	(1) NAME Diesel Fuel			QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN	
	(2)			<input type="checkbox"/> UNKNOWN	
DISCOVERY/ABATEMENT	DATE DISCOVERED 1 <u>2</u> <u>2</u> <u>d</u> 2 <u>0</u> <u>9</u> <u>v</u> 2 <u>v</u>		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 M M D D Y Y <input checked="" type="checkbox"/> 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 <u>2</u> <u>2</u> <u>d</u> 2 <u>0</u> <u>9</u> <u>v</u> 2 <u>v</u>				
SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" 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 type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER		
	CASE TYPE CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input 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 type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input checked="" 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	COMMENTS				