aqua science engineers inc.

December 5, 1994

PROJECT REPORT
UNDERGROUND STORAGE TANK REMOVAL
(ASE JOB NO. 2807)

for

Eden Medical Center
20103 Lake Chabot Road
Castro Valley, California

Submitted by:

Aqua Science Engineers
2411 Old Crow Canyon Road, #4
San Ramon, California 94583
(510) 820-9391

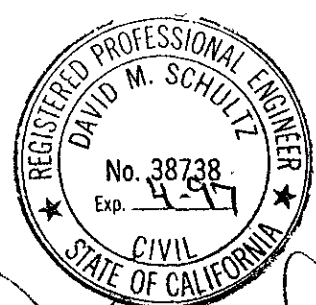


TABLE OF CONTENTS

FIGURES

APPENDICES

1.0 INTRODUCTION

This report documents the removal, disposal and related activities of the underground storage tank (UST) closure performed at the Eden Medical Center (EMC) located at 20103 Lake Chabot Road in Castro Valley, California (Figure 1). The following USTs were removed from the site (Figure 2):

UST I.D.	TYPE AND SIZE UST	FORMER CONTENTS
1	Steel, 10,000 gallon	Diesel
2	Steel, 10,000 gallon	Diesel
3	Steel, 3,000 gallon	Diesel

The scope of services provided by Aqua Science Engineers, Inc. (ASE), was in accordance with ASE proposal No. 94-168 and included the following tasks:

- o Preparing a Health and Safety Plan.
- o Obtaining necessary permits from appropriate agencies.
- o Removing and disposing of liquids from the USTs.
- o Removing and disposing of the USTs.
- o Sampling and analyzing the soil beneath the USTs.
- o Sampling and analyzing the stockpiled soil.
- o Backfilling the excavation to grade.
- o Offhauling contaminated soil.
- o Preparing this report of methods and findings.

2.0 PERMITS

Permits and approvals required to remove the USTs were obtained by ASE from the Alameda County Fire Department (ACFD), the Alameda County Health Care Services Agency (ACHCSA), CAL-OSHA, and the Bay Area Air Quality Management District (BAAQMD). Copies of these permits, application forms, and notification documents are contained in Appendix C.

3.0 MOBILIZATION

ASE mobilized for on-site activities on October 20, 1994. Field operations were conducted by trained technicians who are certified per the mandatory 40-hour safety program as specified in the OSHA Hazardous Waste Operations and Emergency Response Standard (29 CFR 1910.120). A tailgate safety meeting was conducted and the Health and Safety Plan was signed by all field personnel.

4.0 PRE-EXCAVATION ACTIVITIES

ASE staff began on-site activities on October 20, 1994 by excavating and removing the overburden soils surrounding the three (3) USTs. The soils were stockpiled on site and covered with visqueen. The excavated soil was stained and odorous in a majority of the areas uncovered. There were no pump islands or pumps above or near the USTs; the diesel fuel was used for the hospital's emergency generators. Once the USTs were uncovered, ASE installed a temporary fence around the excavations.

5.0 LIQUID REMOVAL

Upon completion of the uncovering activities, ASE planned to have the residual liquids of the USTs evacuated and then the insides of the USTs triple rinsed with tap water. However, it was determined by ASE personnel that the two 10,000 gallon USTs (tanks 1 & 2) still contained several thousands of gallons of product. EMC staff believed that the USTs were emptied since their new emergency fuel storage tank had been installed. Therefore, ASE only evacuated and rinsed the 3,000 gallon UST (tank 3). The rinseate and residual product of tank 3, approximately 325 gallons, were pumped out and transported to the Alviso Independent Oil Facility in Alviso, California under hazardous waste manifest No. 93730035 by Waste Oil Recovery Systems (WORS), a licensed hazardous waste hauler. A copy of the manifest is attached in Appendix B.

The product that was discovered in tanks 1 and 2 was evacuated late that night (October 20) by Erickson, Inc. EMC contracted Erickson to perform this portion of the project; manifests are within EMC's custody.

6.0 TANK PREPARATION

ASE returned to the site on October 21, 1994 for removal of the USTs. Prior to UST removal, ASE inerted the USTs by adding dry ice and compressed nitrogen (supplied by EMC) to the USTs. The UST removal operations were witnessed by Mr. Scott Seery of the ACHCSA and inspectors from the ACFD. The Lower Explosive Limit (LEL) of the USTs atmospheres was measured and found to be within the allowable range; therefore, approval for the USTs removal was granted by the ACFD. The cable straps that held the USTs down were then removed by ASE and the product and vent piping in the immediate vicinity was removed and or capped.

7.0 TANK REMOVAL OPERATIONS

On October 21, 1994, the USTs were lifted from the excavation by use of a crane (tanks 1 & 2) and a backhoe (tank 3), placed on plastic sheeting, hand cleaned, and inspected by ASE, ACHCSA and the ACFD prior to being loaded onto the transport vehicles. Upon inspection of the USTs, they were found to be in fairly decent shape. No obvious holes or cracks were noted on any of the three USTs.

Water had collected in the bottom of the excavations; however it was most likely due to local irrigation pipes and/or run-off of irrigation activities. Stained and odorous soils were identified at the bottom of the excavation holding the two 10,000 gallon USTs. It was impossible to see the absolute bottom of the excavations due to the presence of the water in the excavations. Equally, the concrete pads that the USTs were strapped to remained in the excavations.

The USTs were transported to the Erickson, Inc. facility in Richmond, CA (a licensed recycling facility, No. CAD009466392) by Erickson, Inc. (State Transporter's ID No. 430347 and 430348) under Manifest No's. 92652997 and 93132245 where they were properly disposed. See Appendix B for a copy of the manifests. Also see Appendix D for a copy of the Tank Disposal Certificates.

8.0 SOIL SAMPLE COLLECTION AND CHEMICAL ANALYSES

There existed several impediments at the site which did not allow ASE to fulfill the typical sampling requirements set forth by ACHCSA. The impediments were as follows: (a) all three USTs were installed on and strapped to concrete pads which made sampling beneath the USTs impossible; (b) the pads were submerged in water which limited the visual identification of their edges; (c) a portable building lay at the east edge of the excavation holding the two 10,000 gallon USTs limiting the reach of the backhoe bucket; (d) the presence of an exposed clay sewer line located along the west and south edges of the excavation holding the two 10,000 gallon USTs; and (e) radical sloughing of the sidewalls of the excavation holding the two 10,000 gallon USTs. Therefore, under the guidance of Mr. Scott Seery of the ACHCSA, ASE collected only three soil samples from the UST excavations. ASE also sampled the stockpiled soil by collecting two 4-point composites (samples STKP-No. and STKP So.).

Sample T1S, 12' was collected from the southern sidewall of the excavation holding the two 10,000 gallon USTs at a depth of 12-feet below ground

surface (bgs). Samples T3S, 9' and T3N, 9' were collected from below the 3,000 gallon UST from the north and south ends at 9-feet bgs. Each of the samples collected were moist to saturated with the water found in both excavations. The soil samples were collected in 2" diameter x 6" brass sample tubes. The soil samples were sealed on both ends using Teflon tape, plastic end caps, and duct tape, labeled, placed on dry ice, and transported directly to the analyzing laboratory under proper chain of custody procedures. Samples were submitted to and analyzed by American Environmental Network of Pleasant Hill, CA (DOHS 1172).

The above-referenced samples were analyzed for the following: Total Petroleum Hydrocarbons (TPH) as diesel by EPA method 3550, benzene, toluene, ethylbenzene, and total xylenes (BTEX) by EPA method 8020. Analyses results are shown below in Table One; copies of original laboratory data can be found in Appendix A.

TABLE ONE
SOIL SAMPLE RESULTS
All Results in Parts Per Million

Sample ID.	TPH Diesel	Benzene	Toluene	Ethyl Benzene	Total Xylenes
2 x 10,000 gal – T1S, 12'	15	<0.005	<0.005	<0.005	<0.005
T3S, 9'	<10	<0.005	<0.005	<0.005	<0.005
3,000 gal T3N, 9'	32	<0.005	<0.005	<0.005	<0.005
STKP-So.*	72	<0.005	<0.005	<0.005	<0.02
STKP-No.*	79	<0.005	<0.005	<0.005	<0.02
EPA MTD.	3550	8020	8020	8020	8020

* Composited sample (performed at the lab)

9.0 EXCAVATION BACKFILLING

Both EMC and ASE were concerned about the possible dangers of having the excavations opened for a undetermined period of time. Upon making this point to Mr. Seery of the ACHCSA, he agreed and noted in his report that backfilling activities should and could take place immediately. Therefore, on October 26, 1994 ASE imported clean fill (3/4 drain rock, base rock, and topsoil) and completely backfilled the excavations.

10.0 FATE OF STOCKPILED SOIL

Based on the analytical results of samples STKP-So. and STKP-No., the stockpiled soil was profiled and accepted into BFI Livermore's landfill. On December 1, 1994 ASE removed 263.11 tons of soil from the site and disposed of it as non-hazardous material at the BFI-Livermore facility. Copies of the manifests can be found in Appendix B.

11.0 CONCLUSIONS AND RECOMMENDATIONS

Three (3) USTs were removed and disposed of from the Eden Medical Center located at 20103 Lake Chabot Road in Castro Valley, California. Soil samples collected from the bottom of the excavations indicated low detectable concentrations of TPH as diesel. The presence of visual staining and odorous soil in the excavation holding the two 10,000 gallon USTs is an indication that some form of release, overspill, or leak had occurred. The soil sample collected from the afore-mentioned excavation should not be viewed as representative due to the sampling impediments discussed in an earlier section.

The soil sample collected from the bottom of the excavation holding the 3,000 gallon UST did result in a low detectable concentration of TPH as diesel. However, due to the lack of odorous soil, visual staining, and benzene, it appears that the concentration can be viewed as insignificant.

Aqua Science Engineers, Inc. therefore recommends the following:

* No further action necessary in respect to the 3,000 gallon UST.

* Include the area surrounding the former 10,000 gallon USTs in the existing Local Oversite Plan directed by the ACHCSA. Possible future activities may include the installation of groundwater monitoring wells to determine the extent, if any, of the existing soil contamination migrating into the groundwater.

12.0 REPORT LIMITATIONS

The results of this investigation represent conditions at the time and specific location at which soil samples were collected, and for the specific parameters analyzed by the laboratory. It does not fully characterize the site for contamination resulting from sources other than the former USTs and associated plumbing at the site, or for parameters not analyzed for by

the laboratory. All of the laboratory work cited in this report was prepared under the direction of independent CSDHS certified laboratory. The independent laboratory is solely responsible for the contents and conclusions of the chemical analysis data.

ASE appreciates the opportunity to assist with the environmental needs of this property. Should questions or comments arise, please feel free to give us a call at (510) 820-9391.

Respectfully submitted,

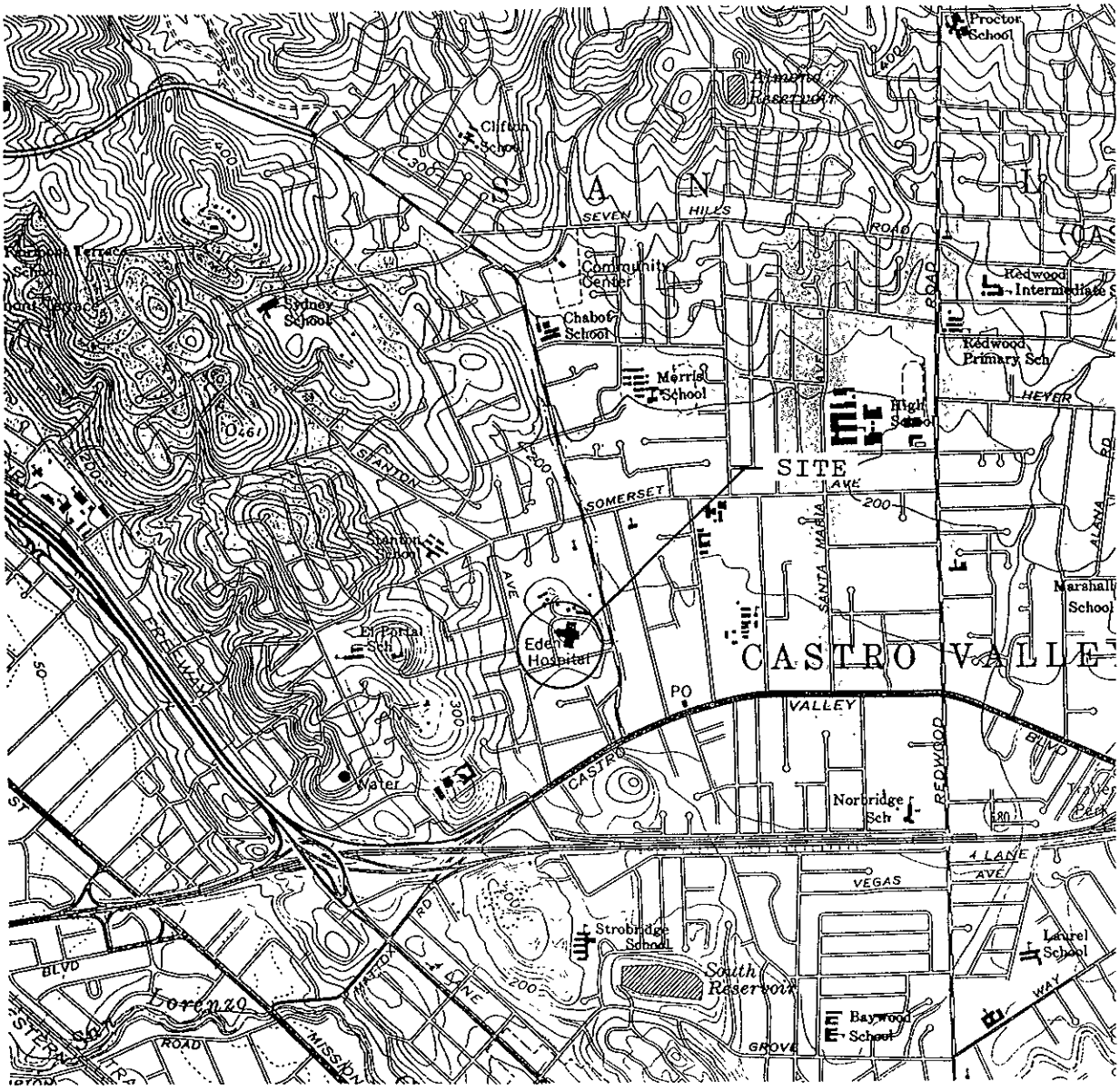
AQUA SCIENCE ENGINEERS, INC.

David Allen
Project Manager

Enclosures: Figure 1 - Site Location map
Figure 2 - Site Plan
Appendices A - D

cc: Eden Medical Center, Mr. Robert Bosold
ACHCSA, Mr. Scott Seery
RWQCB, San Francisco Bay Region, Mr. Kevin Graves

FIGURES

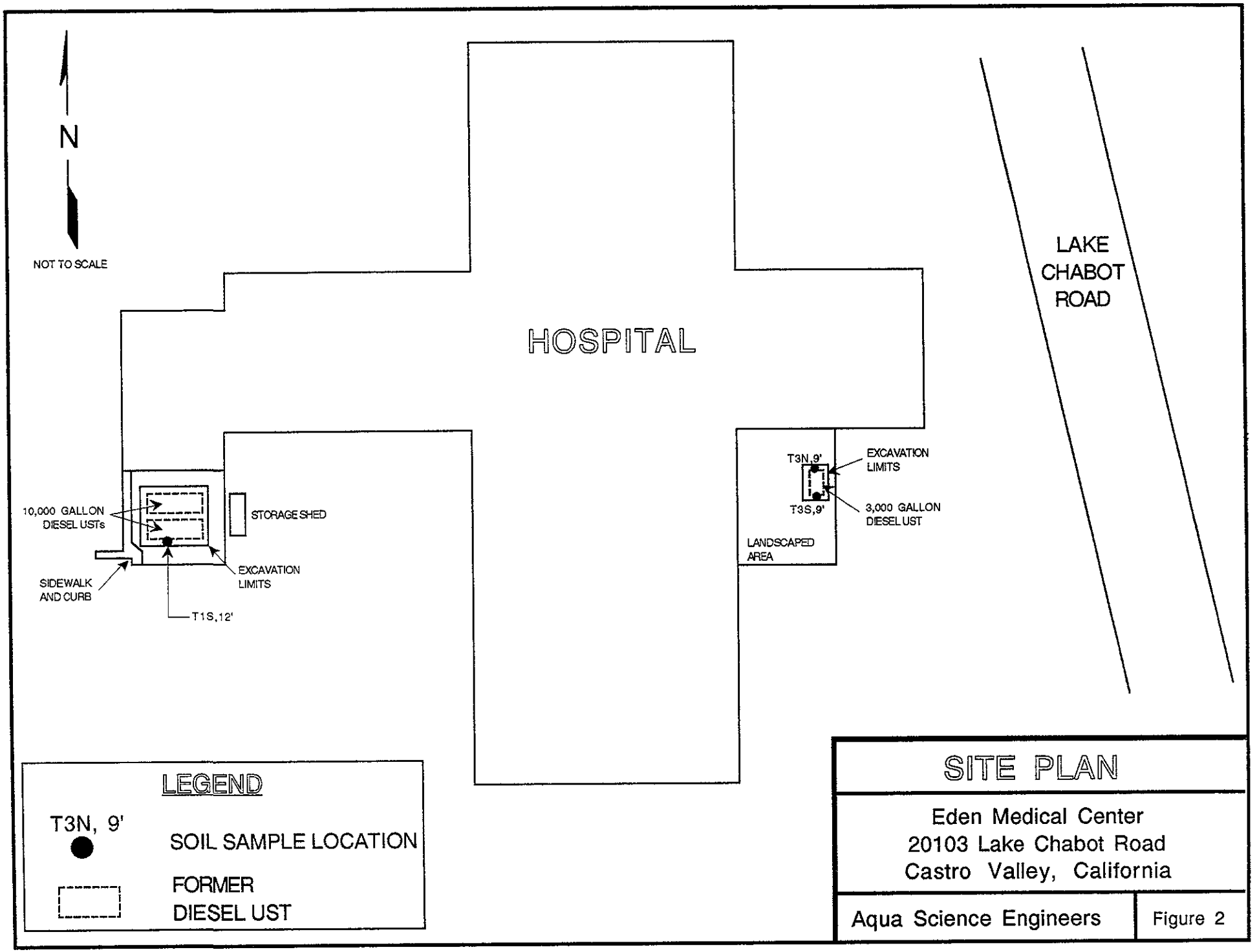


SITE LOCATION MAP

Eden Medical Center
20103 Lake Chabot Road
Castro Valley, California

Aqua Science Engineers | Figure 1

BASE: Hayward, CA 7.5 minute quadrangle topographic map, dated 1980, scale 1:24,000.



SITE PLAN

Eden Medical Center
20103 Lake Chabot Road
Castro Valley, California

Aqua Science Engineers | Figure 2

APPENDIX A

LABORATORY ANALYSES
and
CHAIN OF CUSTODY SHEETS

American Environmental Network

Certificate of Analysis

DOHS Certification: 1172 AIHA Accreditation: 11134

AQUA SCIENCE ENGINEERS, INC
2411 OLD CROW CANYON RD. #4
SAN RAMON, CA 94583

ATTN: ROBERT KITAY
CLIENT PROJ. ID: 2807
CLIENT PROJ. NAME: EDEN HOSPITAL

REPORT DATE: 11/04/94

DATE(S) SAMPLED: 10/21/94

DATE RECEIVED: 10/24/94

AEN WORK ORDER: 9410292

PROJECT SUMMARY:

On October 24, 1994, this laboratory received 3 soil sample(s).

Client requested sample(s) be analyzed for organic parameters. Results of analysis are summarized on the following page(s).

Please see quality control report for a summary of QC data pertaining to this project.

If you have any questions, please contact Client Services at (510) 930-9090.

Larry Klein
Laboratory Director

AQUA SCIENCE ENGINEERS, INC.

AEN JOB NO: 9410292
DATE SAMPLED: 10/21/94
DATE RECEIVED: 10/24/94
CLIENT PROJ. ID: 2807

Client Sample Id.	AEN Lab Id.	Extractable Hydrocarbons as Diesel (mg/kg)	Benzene (mg/kg)	Toluene (mg/kg)	Ethyl-benzene (mg/kg)	Total Xylenes (mg/kg)
T1S 12'	01	15	ND	ND	ND	ND
T3S 9'	02	ND	ND	ND	ND	ND
T3N 9'	03	32	ND	ND	ND	ND
Reporting Limit		10	0.005	0.005	0.005	0.005
EPA Method:		3550 GCFID	8020	8020	8020	8020
Instrument:						
Date Extracted:		10/30/94	NA	NA	NA	NA
Date Analyzed:		11/02/94	10/28/94	10/28/94	10/28/94	10/28/94

NA = Not Applicable
ND = Not Detected

AEN (CALIFORNIA)
QUALITY CONTROL REPORT

AEN JOB NUMBER: 9410292

CLIENT PROJECT ID: 2807

Quality Control and Project Summary

All laboratory quality control parameters were found to be within established limits.

Definitions

Laboratory Control Sample (LCS)/Method Spike(s): Control samples of known composition. LCS and Method Spike data are used to validate batch analytical results.

Matrix Spike(s): Aliquot of a sample (aqueous or solid) with added quantities of specific compounds and subjected to the entire analytical procedure. Matrix spike and matrix spike duplicate QC data are advisory.

Method Blank: An analytical control consisting of all reagents, internal standards, and surrogate standards carried through the entire analytical process. Used to monitor laboratory background and reagent contamination.

Not Detected (ND): Not detected at or above the reporting limit.

Relative Percent Difference (RPD): An indication of method precision based on duplicate analysis.

Reporting Limit (RL): The lowest concentration routinely determined during laboratory operations. The RL is generally 1 to 10 times the Method Detection Limit (MDL). Reporting limits are matrix, method, and analyte dependent and take into account any dilutions performed as part of the analysis.

Surrogates: Organic compounds which are similar to analytes of interest in chemical behavior, but are not found in environmental samples. Surrogates are added to all blanks, calibration and check standards, samples, and spiked samples. Surrogate recovery is monitored as an indication of acceptable sample preparation and instrumental performance.

D: Surrogates diluted out.

#: Indicates result outside of established laboratory QC limits.

QUALITY CONTROL DATA

METHOD: EPA 3550 GCFID

AEN JOB NO: 9410292
DATE EXTRACTED: 10/30/94
INSTRUMENT: C
MATRIX: SOIL

Surrogate Standard Recovery Summary

Date Analyzed	Client Id.	Lab Id.	Percent Recovery n-Pentacosane
11/02/94	T1S 12'	01	75
11/02/94	T3S 9'	02	76
11/02/94	T3N 9'	03	86
QC Limits:			45-120

DATE EXTRACTED: 10/30/94
DATE ANALYZED: 11/02/94
SAMPLE SPIKED: 9410291-07
INSTRUMENT: C

Matrix Spike Recovery Summary

Analyte	Spike Added (mg/kg)	Average Percent Recovery	RPD	QC Limits Percent Recovery	QC Limits RPD
Diesel	34	90	8	44-108	13

Daily method blanks for all associated analytical runs showed no contamination over the reporting limit.

QUALITY CONTROL DATA

METHOD: EPA 8020, 5030 GCFID

AEN JOB NO: 9410292
INSTRUMENT: E
MATRIX: SOIL

Surrogate Standard Recovery Summary

Date Analyzed	Client Id.	Lab Id.	Percent Recovery Fluorobenzene
10/28/94	T1S 12'	01	96
10/28/94	T3S 9'	02	97
10/28/94	T3N 9'	03	98
QC Limits:			84-117

DATE ANALYZED: 10/27/94
SAMPLE SPIKED: 9410283-23
INSTRUMENT: E

Matrix Spike Recovery Summary

Analyte	Spike Added (ug/kg)	Average Percent Recovery	RPD	QC Limits Percent Recovery	QC Limits RPD
Benzene	35.5	93	4	80-130	26
Toluene	95.7	97	3	75-129	27
Hydrocarbons as Gasoline	1000	98	7	66-128	34

Daily method blanks for all associated analytical runs showed no contamination over the reporting limit.

*** END OF REPORT ***

9410292

Aqua Science Engineers, Inc.
2411 Old Crow Canyon Road, #4,
San Ramon, CA 94583
(510) 820-9391 - FAX (510) 837-4853

Chain of Custody

DATE 10-21-94 PAGE 1 OF 1

SAMPLERS (SIGNATURE) Robert E. Kitay (PHONE NO.) (510) 820-9391

PROJECT NAME Eden Hospital NO. 2807

ADDRESS 20103 Lake Chabot Road, Castro Valley, CA

ANALYSIS REQUEST

SPECIAL INSTRUCTIONS:

SAMPLE ID.	DATE	TIME	MATRIX	NO. OF SAMPLES	TPH-GASOLINE (EPA 5030/8015)	TPH-GASOLINE/BTEX (EPA 5030/8015-8020)	TPH-DIESEL (EPA 3510/8015)	PURGABLE AROMATICS (EPA 602/8020) BTEX Only	PURGABLE HALOCARBONS (EPA 601/8010)	VOLATILE ORGANICS (EPA 624/8240)	BASE/NUETRALS, ACIDS (EPA 625/8270)	OIL & GREASE (EPA 5520 E&F or B&F)	LUFT METALS (5) (EPA 6010+7000)	TITLE 22 (CAM 17) (EPA 6010+7000)	TCLP (EPA 1311/1310)	STLC- CAM WET (EPA 1311/1310)	REACTIVITY CORROSIVITY IGNITABILITY					
T1S 12'	10/21	16:40	Soil	1			X	X														
T3S 9'	↓	15:32	↓	↓			X	X														
T3N 9'	↓	15:25	↓	↓			X	X														

RELINQUISHED BY:	RECEIVED BY:	RELINQUISHED BY	RECEIVED BY LABORATORY:	COMMENTS:
Robert E. Kitay 14:47	Michael McMullen 14:47	Michael McMullen 15:15	Gina Gillespie 1515	
(signature) (time)	(signature) (time)	(signature) (time)	(signature) (time)	
Robert E. Kitay 10-24-94	Michael McMullen 10/24/94	10/24/94	Gina Gillespie 10-24-94	
(printed name) (date)	(printed name) (date)	(printed name) (date)	(printed name) (date)	
Company- ASE	Company- AEN	Company-	Company- AEN	

American Environmental Network

Certificate of Analysis

DOHS Certification: 1172 AIHA Accreditation: 11134

AQUA SCIENCE ENGINEERS, INC
2411 OLD CROW CANYON RD. #4
SAN RAMON, CA 94583

ATTN: DAVE ALLEN
CLIENT PROJ. ID: 2807
CLIENT PROJ. NAME: EDEN MED. CTR.

REPORT DATE: 11/22/94

DATE(S) SAMPLED: 11/10/94

DATE RECEIVED: 11/10/94

AEN WORK ORDER: 9411148

PROJECT SUMMARY:

On November 10, 1994, this laboratory received 8 soil sample(s).

Client requested samples be composited into two samples and analyzed for inorganic and organic parameters. Portion for reactivity was subcontracted to a DOHS certified laboratory; subcontract report is included. Results of analysis are summarized on the following pages.

Please see quality control report for a summary of QC data pertaining to this project.

If you have any questions, please contact Client Services at (510) 930-9090.

Larry Klein
Laboratory Director

AQUA SCIENCE ENGINEERS, INC

SAMPLE ID: STKP-NO.
AEN LAB NO: 9411148-01
AEN WORK ORDER: 9411148
CLIENT PROJ. ID: 2807

DATE SAMPLED: 11/10/94
DATE RECEIVED: 11/10/94
REPORT DATE: 11/22/94

ANALYTE	METHOD/ CAS#	RESULT	REPORTING LIMIT	UNITS	DATE ANALYZED
Corrosivity in soil (pH)	EPA 9045	7.3		S.U.	11/14/94
Flash Point/Ignitability	EPA 1010	NFD		deg. F	11/14/94
#Extraction for TPH	EPA 3550	-		Extrn Date	11/11/94
TPH as Diesel	GC-FID	79 *	10	mg/kg	11/14/94
EPA 8020 - Soil matrix	EPA 8020				
Benzene	71-43-2	ND	0.005	mg/kg	11/12/94
Chlorobenzene	108-90-7	ND	0.005	mg/kg	11/12/94
1,2-Dichlorobenzene	95-50-1	ND	0.005	mg/kg	11/12/94
1,3-Dichlorobenzene	541-73-1	ND	0.005	mg/kg	11/12/94
1,4-Dichlorobenzene	10-46-7	ND	0.005	mg/kg	11/12/94
Ethylbenzene	100-41-4	ND	0.005	mg/kg	11/12/94
Toluene	108-88-3	ND	0.005	mg/kg	11/12/94
Xylenes, total	1330-20-7	ND	0.02	mg/kg	11/12/94

NFD=No flash detected at or below 140 degrees F.

ND = Not detected at or above the reporting limit
* = Value above reporting limit

AQUA SCIENCE ENGINEERS, INC

SAMPLE ID: STKP-SO.
AEN LAB NO: 9411148-02
AEN WORK ORDER: 9411148
CLIENT PROJ. ID: 2807

DATE SAMPLED: 11/10/94
DATE RECEIVED: 11/10/94
REPORT DATE: 11/22/94

ANALYTE	METHOD/ CAS#	RESULT	REPORTING LIMIT	UNITS	DATE ANALYZED
#Extraction for TPH	EPA 3550	-		Extrn Date	11/11/94
TPH as Diesel	GC-FID	72 *	10	mg/kg	11/14/94
EPA 8020 - Soil matrix	EPA 8020				
Benzene	71-43-2	ND	0.005	mg/kg	11/12/94
Chlorobenzene	108-90-7	ND	0.005	mg/kg	11/12/94
1,2-Dichlorobenzene	95-50-1	ND	0.005	mg/kg	11/12/94
1,3-Dichlorobenzene	541-73-1	ND	0.005	mg/kg	11/12/94
1,4-Dichlorobenzene	10-46-7	ND	0.005	mg/kg	11/12/94
Ethylbenzene	100-41-4	ND	0.005	mg/kg	11/12/94
Toluene	108-88-3	ND	0.005	mg/kg	11/12/94
Xylenes, total	1330-20-7	ND	0.02	mg/kg	11/12/94

ND = Not detected at or above the reporting limit
* = Value above reporting limit

AEN (CALIFORNIA)
QUALITY CONTROL REPORT

AEN JOB NUMBER: 9411148

CLIENT PROJECT ID: 2807

Quality Control and Project Summary

All laboratory quality control parameters were found to be within established limits.

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D: Surrogates diluted out.

#: Indicates result outside of established laboratory QC limits.

QUALITY CONTROL DATA

METHOD: EPA 3550 GCFID

AEN JOB NO: 9411148
DATE EXTRACTED: 11/11/94
INSTRUMENT: C
MATRIX: SOIL

Surrogate Standard Recovery Summary

Date Analyzed	Client Id.	Lab Id.	Percent Recovery n-Pentacosane
11/14/94	STKP-NO.	01	79
11/14/94	STKP-SO.	02	71
QC Limits:			45-120

DATE EXTRACTED: 11/08/94
DATE ANALYZED: 11/12/94
SAMPLE SPIKED: 9411034-09
INSTRUMENT: C

Matrix Spike Recovery Summary

Analyte	Spike Added (mg/kg)	Average Percent Recovery	RPD	QC Limits Percent Recovery	QC Limits RPD
Diesel	34	92	8	44-108	13

Daily method blanks for all associated analytical runs showed no contamination over the reporting limit.

QUALITY CONTROL DATA

METHOD: EPA 8020

AEN JOB NO: 9411148
INSTRUMENT: E
MATRIX: SOIL

Surrogate Standard Recovery Summary

Date Analyzed	Client Id.	Lab Id.	Percent Recovery 1-Chloro-2-Fluorobenzene
11/12/94	STKP-NO.	01	89
11/12/94	STKP-SO.	02	93
QC Limits:			84-117

DATE ANALYZED: 11/08/94
SAMPLE SPIKED: 9411087-02
INSTRUMENT: G

Matrix Spike Recovery Summary

Analyte	Spike Added (ug/kg)	Average Percent Recovery	RPD	QC Limits Percent Recovery	QC Limits RPD
Benzene	500	93	<1	79-116	8
Toluene	500	93	<1	80-118	8

Daily method blanks for all associated analytical runs showed no contamination over the reporting limit.

*** END OF REPORT ***

Sequoia Analytical

680 Chesapeake Drive, Redwood City, CA 94063, (415) 364-9600, FAX (415) 364-9233
1900 Bates Avenue, Suite L, Concord, CA 94520, (510) 686-9600, FAX (510) 686-9689
819 Striker Avenue, Suite 8, Sacramento, CA 95834, (916) 921-9600, FAX (916) 921-0100

American Environmental Net.
3440 Vincent Road
Pleasant Hill, CA 94523

Attention: Denise Harrington

Client Proj. ID: 9411148
Sample Descript: STKP-No.
Matrix: SOLID
Analysis Method: Comb
Lab Number: 9411816-01

Sampled: 11/10/94
Received: 11/14/94

Analyzed: 11/14/94
Reported: 11/15/94

QC Batch Number: IN111494084600A

Reactivity

Analyte	Detection Limit mg/Kg	Sample Results mg/Kg
Reactivity:		
Sulfide	13	N.D.
Cyanide	0.50	N.D.
Reaction with Water		N.D.

Analytes reported as N.D. were not present above the stated limit of detection.

SEQUOIA ANALYTICAL - ELAP #1210

Mark Cargasacchi
Project Manager

Sequoia Analytical

680 Chesapeake Drive, Redwood City, CA 94063, (415) 364-9600, FAX (415) 364-9233
1900 Bates Avenue, Suite L, Concord, CA 94520, (510) 686-9600, FAX (510) 686-9689
819 Striker Avenue, Suite 8, Sacramento, CA 95834, (916) 921-9600, FAX (916) 921-0100

American Environmental Network
3440 Vincent Road
Pleasant Hill, CA 94523
Attention: Denise Harrington

Client Project ID: 9411148
Matrix: Solid
Work Order #: 9411816 -01

Reported: Nov 15, 1994

QUALITY CONTROL DATA REPORT

Analyte:	Reactive Sulfide	Reactive Cyanide
QC Batch#:	IN111494084600A	IN111594084600A
Analy. Method:	SW-846	SW-846
Prep. Method:	N/A	N/A
Analyst:	K. Newberry	J. Heider
MS/MSD #:	-	-
Sample Conc.:	-	-
Prepared Date:	-	-
Analyzed Date:	-	-
Instrument I.D.#:	-	-
Conc. Spiked:	-	-
Result:	-	-
MS % Recovery:	-	-
Dup. Result:	-	-
MSD % Recov.:	-	-
RPD:	-	-
RPD Limit:	-	-
LCS #:	LCS111494	LCS111594
Prepared Date:	11/14/94	11/15/94
Analyzed Date:	11/14/94	11/15/94
Instrument I.D.#:	Manual	Manual
Conc. Spiked:	10 mg/L	0.20 mg/L
LCS Result:	10	0 050
LCS % Recov.:	100	25

MS/MSD LCS Control Limits	80-120	6.5-40

SEQUOIA ANALYTICAL

Mark J. Cargasacchi
Project Manager

Please Note:
The LCS is a control sample of known, interferent-free matrix that is analyzed using the same reagents, preparation, and analytical methods employed for the samples. The matrix spike is an aliquot of sample fortified with known quantities of specific compounds and subjected to the entire analytical procedure. If the recovery of analytes from the matrix spike does not fall within specified control limits due to matrix interference, the LCS recovery is to be used to validate the batch.

** MS = Matrix Spike, MSD = MS Duplicate, RPD = Relative % Difference

Reporting Information:

1. Client: AEN
Address:
Contact: DENISE HARRINGTON
Alt. Contact:

American Environmental Network
3440 Vincent Road, Pleasant Hill, CA 94523
Phone (510) 930-9090
FAX (510) 930-0256

AEN

Page 1 of 1

REQUEST FOR ANALYSIS / CHAIN OF CUSTODY

Lab Job Number:
Lab Destination: SEQUOIA
Date Samples Shipped: 11/14/94
Lab Contact: MARK CARGASACCHI
Date Results Required: 11/15/94
Date Report Required: ASAP
Client Phone No.: (510) 930-9090
Client FAX No.: (510) 930-0256

Address Report To:
2. #1

Send Invoice To:
3. #1

Send Report To: 1 or 2 (Circle one)

Client P.O. No.: _____ Client Project I.D. No.: 9411148

9411816

RUSH

Sample Team Member (s) _____

Lab Number	Client Sample Identification	Air Volume	Date/ Time Collected	Sample Type*	Pres.	No. of Cont.	Type of Cont.	ANALYSIS: Reactivity (SW846)	Comments / Hazards
	STKP - No.		11/10/94	8	COLD	1	glass	X	01A

Relinquished by: (Signature) Lynn Gillespie	DATE 11-14-94	TIME 0900	Received by: (Signature) Charlie Cal
Relinquished by: (Signature) Charlie Cal	DATE 11-14-94	TIME 1240	Received by: (Signature)
Relinquished by: (Signature)	DATE	TIME	Received by: (Signature) Suzanne Fu
Method of Shipment			Lab Comments

DATE 11/14/94 TIME 0900
DATE TIME
DATE 11.14.94 TIME 1240

*Sample type (Specify): 1) 37mm 0.8 µm MCEF 2) 25mm 0.8 µm MCEF 3) 25mm 0.4 µm polycarb. filter
4) PVC filter, diam. ____ pore size ____ 5) Charcoal tube 6) Silica gel tube 7) Water 8) Soil 9) Bulk Sample
10) Other _____ 11) Other _____

COPIES: WHITE - JOB FILE YELLOW PROJECT FILE PINK - CLIENT

R-7,S-N 9411148

Aqua Science Engineers, Inc.
2411 Old Crow Canyon Road, #4,
San Ramon, CA 94583
(510) 820-9391 - FAX (510) 837-4853

Chain of Custody

DATE 11/10/94 PAGE 1 OF 1

SAMPLERS (SIGNATURE) P. Allen (PHONE NO.) 820-9391

PROJECT NAME EDEN MEDICAL CENTER NO. 2807

ADDRESS CASTRO VALLEY

ANALYSIS REQUEST

SPECIAL INSTRUCTIONS:

3-DAY T.A.T.

	SAMPLE ID.	DATE	TIME	MATRIX	NO. OF SAMPLES	TPH-GASOLINE (EPA 5030/8015)	TPH-GASOLINE/BTEX (EPA 5030/8015-8020)	TPH-DIESEL (EPA 3510/8015)	PURGABLE AROMATICS (EPA 602/8020)	PURGABLE HALOCARBONS (EPA 601/8010)	VOLATILE ORGANICS (EPA 624/8240)	BASE/NUETRALS, ACIDS (EPA 625/8270)	OIL & GREASE (EPA 5520 E&F or B&F)	LUFT METALS (5) (EPA 6010+7000)	TITLE 22 (CAM 17) (EPA 6010+7000)	TCLP (EPA 1311/1310)	STLC- CAM WET (EPA 1311/1310)	REACTIVITY CORROSIVITY IGNITABILITY
*	STKP-NO.	11/10	13:30	SOIL	4			X	X									X
**	STKP-SO.	11/10	13:45	SOIL	4			X	X									

RELINQUISHED BY:	RECEIVED BY:	RELINQUISHED BY:	RECEIVED BY LABORATORY:
D. Allen 16:15			Gina Gillespie 1700
(signature) (time)	(signature) (time)	(signature) (time)	(signature) (time)
D. Allen 11/10/94	Jim Palladino 11/10/94	Jim Palladino 11/10/94	Gina Gillespie 11-10-94
(printed name) (date)	(printed name) (date)	(printed name) (date)	(printed name) (date)
Company- ASE 1630	Company- AEN 1630	Company- AEN 1700	Company- AEN

COMMENTS:
* Composite & into 1 prior to analyses.

APPENDIX B

HAZARDOUS WASTE MANIFESTS

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

93730035

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. CAD107653812 — Manifest Document No. 14310105315 — 2. Page 1 of 1 — Information in the shaded areas is not required by Federal law.

GENERATOR

3. Generator's Name and Mailing Address: EDEN MEDICAL CENTRE, 20103 LAKE CHABOT ROAD, CASTRO VALLEY, CA 94546
4. Generator's Phone: (510) 889-5059

A. State Manifest Document Number: 93730035
B. State Generator's ID:
C. State Transporter's ID: 22164
D. Transporter's Phone: 510-533-0750
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: 408 262 2705

5. Transporter 1 Company Name: WASTE OIL RECOVERY — 6. US EPA ID Number: CAD010062657
7. Transporter 2 Company Name — 8. US EPA ID Number:

9. Designated Facility Name and Site Address: ALVISO OIL, 5002 ARCHER ST., ALVISO CA 95002 — 10. US EPA ID Number: CAL000148571

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste Numbers
a. USED OILS, NON RCRA HAZARDOUS WASTE, LIQUID	001	T	00325	G	State 221 EPA/Other NA
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other

J. Additional Descriptions for Materials Listed Above: WASTE STAND BY DIESEL GEN

K. Handling Codes for Wastes Listed Above: a. T01 b. c. d.

15. Special Handling Instructions and Additional Information
ERG 27
PROTECTIVE GEAR
24 HOUR I.D. RS 5105330750

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	Signature	Month	Day	Year
BOB COSTANZO		10	20	94

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
A FALCON		10	20	94

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[redacted]				

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

DTSC 8022A (9/93)
EPA 8700—22

Blue To. GENERATOR SENDS THIS COPY TO DTSC WITHIN 30 DAYS.
P.O. Box 400, Sacramento, CA 95812-0400

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. *Form designed for use on elite (12-pitch) typewriter.*

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD076538214	93132245		

3. Generator's Name and Mailing Address
EDEN Medical Center
20103 Lake Chabot Rd
Castro Valley, CA. 94546

4. Generator's Phone 510-886-5059

A. State Manifest Document Number: 93132245
B. State Generator's ID:
C. State Transporter's ID: 2303 H
D. Transporter's Phone: 510-635-7387
E. State Transporter's ID:
F. Transporter's Phone:
G. State Facility's ID:
H. Facility's Phone: (510) 262-1[illegible]

5. Transporter 1 Company Name: ERICKSON INC.
6. US EPA ID Number: CAT000946392
7. Transporter 2 Company Name:
8. US EPA ID Number:
9. Designated Facility Name and Site Address
Erickson, Inc.
255 Parr Blvd.
Richmond, Ca. 94801
10. US EPA ID Number: CAD009466392

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol.
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.	002	TP	13000	P
b.				
c.				
d.				

J. Additional Descriptions for Materials Listed Above
K. Handling Codes for Wastes Listed Above

15. Special Handling Instructions and Additional Information
Qty. 2 Empty Storage Tank(s) #14768 14769
, . Tank(s) have been inerted with 15 lbs.
Dry Ice Per 1000 Gallon Capacity. 24 HR CONTACT Security 24 HR PHONE 570-889-5059

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.
Keep away from sources of ignition. Always wear hardhats when working around
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	Signature	Month	Day	Year
BOB COSTANZO	Bob Costanzo	10	21	94

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
Robert Haney	Robert Haney	10	21	94

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

G-

Blue: GENERATOR SENDS THIS COPY TO DTSC WITHIN 30 DAYS.
To: P.O. Box 400, Sacramento, CA 95812-0400

DTSC 8022A (7/92)
EPA 8700—22

GENERATOR

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER, 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7550

93132245

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. Form designed for use on elite (12-pitch) typewriter.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

UNIFORM HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
CAD071663821	14524997		

3. Generator's Name and Mailing Address
Eden Medical Center
20103 Lake Chabot Rd.
Castro Valley, CA. 94546

4. Generator's Phone 510-889-5059

5. Transporter 1 Company Name: Trident Truck Lines
6. US EPA ID Number: CAD982484370

7. Transporter 2 Company Name
8. US EPA ID Number

9. Designated Facility Name and Site Address
Erickson, Inc.
255 Parr Blvd.
Richmond, Ca. 94801
10. US EPA ID Number: CAD009466392

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers No.	12. Containers Type	13. Total Quantity	14. Unit Wt/Vol
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.	001	TP	10000	P
b.				
c.				
d.				

15. Special Handling Instructions and Additional Information
Keep away from sources of ignition. Always wear hardhats when working around U.G.S.T.'s 24 Hr. Contact Name Security & Phone 510-889-5059

GENERATOR

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the 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 federal, state and international laws.

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	Signature	Month	Day	Year
BOB COSTANZO		10	21	94

TRANSPORTER

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year
[illegible]		10	21	94

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name	Signature	Month	Day	Year

FACILITY

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Printed/Typed Name	Signature	Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

Blue: GENERATOR SENDS THIS COPY TO DTSC WITHIN 30 DAYS.
To: P.O. Box 400, Sacramento, CA 95812-0400

DTSC 8022A (7/92)
EPA 8700—22

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802. WITHIN CALIFORNIA, CALL 1-800-852-7550.

92652997

NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

TYPICAL (1 OF 12)

If waste is asbestos waste, complete Sections I, II, III and IV.
If waste is NOT asbestos waste, complete only Sections I, II and III.

No. 398130

Section I: GENERATOR (Generator completes all of Section I)

a. Generator Name: Eden Medical Center
b. Generating Location: Eden Medical Center
c. Address: 20103 Lake Chabot Rd
Castro Valley, CA 94546
d. Address: 20103 Lake Chabot Rd
Castro Valley, CA 94546
e. Phone No.: 510-889-5059
f. Phone No.: 510-889-5059

If owner of the generating facility differs from the generator, provide:

g. Owner's Name: _____
h. Owner's Phone No.: _____

i. BFI WASTE CODE: CA 405 112894 22419 Containers

j. Description of Waste: Soil Contaminated with Diesel

Quantity: 24 Units: T No.: _____ TYPE: _____

TYPE
DM - METAL DRUM
DP - PLASTIC DRUM
B - BAG
BA - 6 MIL. PLASTIC BAG or WRAP
T - TRUCK
O - OTHER

UNITS
P - POUNDS
Y - YARDS
M³ - CUBIC METERS
Y³ - CUBIC YARDS
O - OTHER

GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; **AND, if the waste is a treatment residue of a previously restricted hazardous waste** subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR Part 268 and is no longer a hazardous waste as defined by 40 CFR Part 261.

Bob Costa
Generator Authorized Agent Name

Bob Costa
Signature

12/19/94
Shipment Date

Section II: TRANSPORTER (Generator complete a-d, Transporter I complete e-g, Transporter II complete h-n)

TRANSPORTER I

a. Name: T.E. O'Connor + Sons
b. Address: P.O. Box 1194
Pleasanton, CA 94566
c. Driver Name/Title: Shawn McLeod-Driver (PRINT/TYPE)
d. Phone No.: 510-846-7124
e. Truck No.: 47
f. Vehicle License No./State: SMT47 - Calif.

Acknowledgement of Receipt of Materials.

g. Shawn McLeod (Driver Signature)
12/19/94 (Shipment Date)

TRANSPORTER II

h. Name: _____
i. Address: _____
j. Driver Name/Title: _____ (PRINT/TYPE)
k. Phone No.: _____
l. Truck No.: _____
m. Vehicle License No./State: _____

Acknowledgement of Receipt of Materials.

n. _____ (Driver Signature)
_____ (Shipment Date)

Section III: DESTINATION (Generator completes a-d, destination site completes e-f.)

a. Site Name: BFI Livermore
b. Physical Address: Vasco Rd.
Livermore, CA
c. Phone No.: 510-447-0191
d. Mailing Address: 4001 Vasco Rd.
Livermore, CA 94550

e. Discrepancy Indication Space: _____

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

f. _____ (Name of Authorized Agent)
_____ (Signature)
12/19/94 (Receipt Date)

Section IV: ASBESTOS (Generator complete a-d, f, g, Operator* completes e.)

a. Operator's* Name: _____
b. Operator's* Phone No.: _____
c. Operator's* Address: _____
d. Special Handling Instructions and additional information: _____

OPERATOR'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 government regulations

e. Operator's* Name & Title: _____

INVOICE

BROWNING FERRIS INDUSTRIES
OF CALIFORNIA
VASCO ROAD LANDFILL
4001 N. VASCO ROAD
LIVERMORE, CA 94550

INVOICE DATE
12/01/94
INVOICE NO.
941200
INVOICE AMOUNT

Dist. 0405

AQUA SCIENCE ENGINEERS
2411 Old Crow Canyon Rd #4
San Ramon, Ca 94583

ACCOUNT BALANCE DUE
AMOUNT PAID

PLEASE ENTER AMOUNT PAID

TO RECEIVE PROPER CREDIT PLEASE RETURN THIS PORTION WITH YOUR PAYMENT.

TERMS: PAYABLE UPON RECEIPT

INVOICE NO. INVOICE DATE

DATE	DOC. REFERENCE NO.	DESCRIPTION	AMOUNT
12/01/94		Dec 1st, 1994 263.11 tons of Petroleum contaminated soil to Vasco Road Landfill	

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS

BROWNING FERRIS INDUSTRIES
VASCO ROAD LANDFILL
4001 N. VASCO ROAD
LIVERMORE, CA 94550

510 447 0491

PLEASE PAY FROM THIS INVOICE

NO OTHER BILLING WILL BE MADE

1/86

250 173

APPENDIX C

PERMITS

Scott Seery

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND, CA 94621
PHONE NO. 510/271-4320

ACCEPTED
DEPARTMENT OF ENVIRONMENTAL HEALTH
470 - 27th Street, Third Floor
Oakland, CA 94612
Telephone: (4-5) 874-7237

10-17-94
1305

These plans have been reviewed and found to be acceptable and essentially meet the requirements of State and local health laws. Changes to your plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction.

One copy of these accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.

Any change or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspection Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 48 hours prior to the following required inspections:

_____Removal of Tank and Piping
_____Sampling
_____Final Inspection

Issuance 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 PRIOR APPROVALS.

UNDERGROUND TANK CLOSURE PLAN

*** * * Complete according to attached instructions * * ***

1. Business Name EDEN MEDICAL CENTER

   Business Owner SAME

2. Site Address 20103 LAKE CHABOT ROAD

   City CASTRO VALLEY Zip 94546 Phone 510.889-5059

3. Mailing Address SAME

   City _____ Zip _____ Phone _____

4. Land Owner SAME

   Address _____ City, State _____ Zip _____

5. Generator name under which tank will be manifested _____

   EDEN MEDICAL CENTER

   EPA I.D. No. under which tank will be manifested CAD076538214

ALAMEDA COUNTY FIRE DEPARTMENT

APPLICATION # 94-1074

FIRE DEPARTMENT/PLANS APPLICATION

FIRE MARSHAL'S OFFICE
1426 164th Avenue
San Leandro, CA 94578
510-670-5853 • FAX 510-276-5915

APPLICATION TYPE: INSPECTION DATE REC'D: 10/15/94 BY:

CATEGORY:

➤ PROJECT INFORMATION

PROJECT ADDRESS: 20103 LAKE CHABOT ROAD CROSS STREET: CASTRO VALLEY BLVD.

CITY: CASTRO VALLEY ZIP: 94546 JOB PHONE: 510 · 409 · 3536

APN #: SDR #: PM/TRACT MAP #:

DESCRIPTION OF WORK/ACTIVITY:

(3) DIESEL UST'S REMOVAL BUILDING PERMIT #: N/A

➤ APPLICANT

NAME: AQUA SCIENCE ENGINEERS PHONE # (H): (W): 510 · 820 · 9391

ADDRESS: 2411 OLD CROW CANYON RD. #4 SAN RAMON ZIP: 94583

➤ OWNER

NAME: EDEN MEDICAL CENTER PHONE # (H): (W): 510 · 889 - 5059

ADDRESS: 20103 LAKE CHABOT RD. CASTRO VALLEY ZIP: 94546

➤ CONTRACTOR

NAME: AQUA SCIENCE ENGINEERS PHONE # (H): (W): 510 · 820 · 9391

ADDRESS: 2411 OLD CROW CANYON RD. #4 SAN RAMON ZIP: 94583

CONTRACTOR'S LICENSE TYPE & NUMBER: A - HAZ #487000

➤ = APPLICANT TO FILL IN THESE SECTIONS

APPLICANT'S SIGNATURE: David Allen for ASE, Inc. DATE: 10·18·94

FOR OFFICE ONLY

FEES

Fees are due and payable by check or money order, made out to Alameda County Fire Department, upon submittal of plans and application. If additional fees are required, such shall be paid prior to issuance of a Certificate of Occupancy, project final, or a Fire Permit.

BASE FEE REQUIRED: $ 160.00 (016600) REC'D BY: DATE: 10/15/94

CONSULTANT'S FEE: $ REC'D BY: DATE:

ADDITIONAL FEES: $ REC'D BY: DATE:

APPROVALS

FIRE PERMIT #: ISSUED DATE: EXPIRATION DATE:

PERMIT ISSUED BY: DATE: FEE:

APPLICATION/PLANS APPROVAL: BY: DATE:

State of California
Department of Industrial Relations
Division of Occupational Safety & Health

ACTIVITY NOTIFICATION FORM

Buildings Structures Scaffolding Falsework Demolition Trenches Excavations

Company Name: AQUA SCIENCE ENGINEERS, INC. Field Phone: 510-409-3536

Permit Number: 560211 Office Phone: 510-820-9391

Specific Activity Location: 20103 LAKE CHABOT RD Number of Employees: 4

Nearest Major Cross Street: CASTRO VALLEY BLVD. Starting Date: 10-20-94

City: CASTRO VALLEY Anticipated Completion Date: 10-30-94

County: ALAMEDA High Voltage Lines in Proximity? No X Yes ____

INSTRUCTIONS: The appropriate item(s) must be completed and signed by a person knowledgeable about the project for each activity covered by a permit. Please fill in or check off the blanks where appropriate.

Construction of: Building ____ Structure ____ **Type:** Steel Frame ____ Tiered ____ Concrete ____

Tilt-up ____ Wood Frame ____ Liftslab ____ Precast ____ Slip Form ____ Depth ____ No. of Stories ____

Description: ____

(See 8 CCR 1709-30: Appendix A Plate A-2-a & b.)

Scaffolding: Height ____ Metal ____ Wood ____ Wood over 60 Feet ____ Metal over 125 Feet ____

*Metal>125 Feet or Wood>60 Feet requires design by California Registered Civil Engineer & Plans at Site.(See 8 CCR 1644(c)(7))

escription: ____

Falsework/Vertical Shoring: Maximum Height ____ Maximum Span ____ Material ____

Description: ____

(See 8 CCR 1717)

Demolition of: Building ____ Structure ____ Height ____ No of Stories ____ **Type:** Steel Frame ____

Wood Frame ____ Concrete ____ Demolition Ball ____ Clam ____ Explosives ____

Loader/Tractors ____ Other ____

(See 8 CCR 1734-37)

Trenches/Excavation: Depth Range(Min/Max)* 12'-14' Width Range(Min/Max) 12'-14' Total Length 22'

Ground Protection Method: Shoring ____ Sloping X Trench Shield ____ Professional Engineer ____

Underground Services Alert(USA) Number 333157 (NORTH 1-800-642-2444/SOUTH 1-800-422-4133)

Soil Analysis to be done? Yes ____ No X If No, You **Must** Slope 1.5 to 1.

scription: UST EXCAVATION + REMOVAL

(See 8 CCR 1504, 1540-1547)

* Ground protection methods for excavations deeper than 20 feet must be designed by a Registered Professional Engineer. See 8 CCR 1541.1, Appendix F.

BAY AREA AIR QUALITY
MANAGEMENT DISTRICT
939 ELLIS STREET
SAN FRANCISCO CALIFORNIA 94109
(415) 771-6000

N. Lew

REGULATION 8, RULE 40
Aeration of Contaminated Soil and
Removal of Underground Storage Tanks

X NOTIFICATION FORM
Removal or Replacement of Tanks
___ Excavation of Contaminated Soil

SITE INFORMATION

SITE ADDRESS 20193 LAKE CHABOT ROAD
CITY, STATE CASTRO VALLEY CA ZIP 94546
OWNER NAME EDEN MEDICAL CENTER
SPECIFIC LOCATION OF PROJECT SOUTH END OF HOSPITAL COMPLEX

TANK REMOVAL

SCHEDULED STARTUP DATE 10-20-94
VAPORS REMOVED BY:
- [ ] WATER WASH
- [ ] VAPOR FREEING (CO^2)
- [ ] VENTILATION

CONTAMINATED SOIL EXCAVATION

SCHEDULED STARTUP DATE ____
STOCKPILES WILL BE COVERED? YES ____ NO ____
ALTERNATIVE METHOD OF AERATION (DESCRIBE BELOW):
____
(MAY REQUIRE PERMIT)

CONTRACTOR INFORMATION

NAME AQUA SCIENCE ENGINEERS, INC CONTACT DAVID ALLEN
ADDRESS 2411 OLD CROW CANYON RD, # PHONE (510) 820-9391
CITY, STATE, ZIP SAN RAMON CA 94583

CONSULTANT INFORMATION
(IF APPLICABLE)

NAME AS ABOVE CONTACT ____
ADDRESS ____ PHONE ( ) ____
CITY, STATE, ZIP ____

FOR OFFICE USE ONLY

DATE RECEIVED FAX 10/12/94 BY DPT (init.)
DATE POSTMARKED ____ BY ____ (init.)
CC: INSPECTOR NO. 571 DATE @ 10/12/94 BY DPT (init.)
UPDATE: CONTACT NAME ____ DATE ____ BY ____ (init.)
BAAQMD N # ____ DATA ENTRY 10/12/94

1/91

* See reverse for instructions

APPENDIX D

TANK DISPOSAL CERTIFICATES

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE

CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 20100

CUSTOMER
AQUA SCIENCE E
JOB NO.
964274

FOR: ERICKSON, INC. TANK NO. 14769

LOCATION: RICHMOND DATE: 94/10/31 TIME: 10:27

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT D

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition 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 SIZE 3000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS WASTE FACILITY.
ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK SHIPPED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions 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 permissable 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 that 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.

Francisco Crazo — REPRESENTATIVE

TITLE

Dave Sad — INSPECTOR

GP5995

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE

CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 20132

CUSTOMER
AQUA SCIENCE E
JOB NO.
964274

FOR: ERICKSON, INC. TANK NO. 14767

LOCATION: RICHMOND DATE: 94/10/28 TIME: 10:15

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT D

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition 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 SIZE 10000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS WASTE FACILITY.
ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK SHIPPED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions 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 permissable 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 that 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 TITLE INSPECTOR

CP599.

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE

CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 20135

CUSTOMER
AQUA SCIENCE E
JOB NO.
864274

FOR: ERICKSON, INC. TANK NO. 14768

LOCATION: RICHMOND DATE: 94/10/28 TIME: 10:24

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT D

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition 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 SIZE 10000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: ~~OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%~~
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN ~~CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS~~ WASTE FACILITY.
~~ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK~~ SHIPPED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions 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 permissable 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 that 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.

Juanita Cuaco

REPRESENTATIVE | TITLE | INSPECTOR

CP599