

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

September 15, 2006

Mr. Wilred Garfinkle
c/o Dr. Jay Garfinkel
352 Capetown Drive
Alameda, Ca 94501

Ms. Janet Koike
Cal Vita Limited Liability CX
2237 Prince Street
Berkeley, CA 94705

Subject: Fuel Leak Case No. ~~2006-0001~~ Clamp Swing, 2515 Blanding Avenue, Alameda CA

Dear Mr. Garfinkle:

Alameda County Environmental Health (ACEH) staff has reviewed the fuel leak case file for the subject site and the document entitled, "Revised Work Plan," dated August 17, 2006, which was prepared on your behalf by W.A. Craig Inc. This Work plan presents responses to ACEH technical comments (dated July 5, 2005) on the previous Work Plan entitled, "Site Investigation Work Plan" dated March 1, 2006 and prepared by W.A. Craig Inc. The "Revised Workplan," dated August 15, 2006, adequately incorporates or addresses the technical comments in our July 5, 2006 correspondence. ACEH concurs with the Response to Agency Comments and Revised Work Plan.

We request that you perform the proposed work, and send us the reports described below. Please provide 72-hour advance written notification to this office (e-mail preferred to steven.plunkett@acgov.org) prior to the start of field activities.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Steven Plukett), according to the following schedule:

- **60 Days After Completion of Investigation – Soil and Groundwater Investigation Report**

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

ELECTRONIC SUBMITTAL OF REPORTS

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

Submission of reports to the Alameda County ftp site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. Submission of reports to the Geotracker website does not fulfill the requirement to submit documents to the Alameda County ftp site. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitor wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all necessary reports was required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

AGENCY OVERSIGHT

Mr. Wilred Garfinkle
September 15, 2006
Page 3

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 567-6791.

Sincerely,



Steven Plunkett
Hazardous Materials Specialist

cc: Mr. Fred Muller
W.A. Craig Inc.
6940 Tremont Rd.
Dixon, CA 95620

Donna Drogos, ACEH
Steven Plunkett, ACEH
File

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

July 5, 2006

Mr. Wilred Garfinkle
c/o Dr. Jay Garfinkel
352 Capetown Drive
Alameda, Ca 94501

Ms. Janet Koike
Cal Vita Limited Liability CX
2237 Prince Street
Berkeley, CA 94705

Subject: Fuel Leak Case No. RO0002513, Clamp Swing, 2515 Blanding Avenue, Alameda CA

Dear Mr. Garfinkle:

I was recently assigned as the case worker for the above referenced site. Please send future correspondence for this site to my attention. Alameda County Environmental Health (ACEH) staff has reviewed the fuel leak case file for the above-referenced site and the document entitled, "Site Investigation Work Plan," dated February 1, 2006. The Work Plan proposes to advance five soil borings to 25 feet below ground surface to define the lateral and vertical extent of petroleum hydrocarbons in soil and groundwater. Based on our review of the case file and the Investigation Work Plan, we request some revisions to the work plan, which are described in the technical comments below. Therefore, we request that you address the technical comments below and submit a revised work plan to ACEH by **August 15, 2006**.

TECHNICAL COMMENTS

1. **Proposed Sampling Locations.** ACEH agrees with the proposed soil boring locations B1 through B5. During field screening of soil samples with the photo-ionization detector (PID), ACEH suggest using the head space volatilization test to accurately measure the volatile organic compound (VOC) concentration in the soil. This screening method provides a higher level of accuracy then the direct screening of the soil core.
2. **Soil Sampling and Analysis.** We request that soil samples be collected from the capillary fringe in each boring and from any interval where staining, odor, elevated PID readings or distinct changes in lithology are observed. If no staining, odor, elevated PID readings or changes in lithology occur, the proposed depths for soil sampling are acceptable. All soil samples are to analyzed for the following constituents; TPHg, TPHd, BTEX, MTBE, TAME, ETBE, DIPE, TBA, EtOH, EDB, EDC and Total Lead. Please present the results of the soil and groundwater investigation in the report requested below.

- 3. Depth-discrete Groundwater Sampling.** ACEH requests that prior to the collection of groundwater samples, soil boring data be used to select intervals for groundwater sampling. After evaluation of the soil boring data is complete and the groundwater sampling intervals are chosen, potential water-bearing layers below first encountered groundwater are to be targeted for groundwater sampling. All groundwater samples are to be analyzed for the following constituents; TPHg, TPHd, BTEX, MTBE, TAME, ETBE, DIPE, TBA, EtOH, EDB, EDC and Total Lead. Please present the results of the groundwater sampling in the soil and groundwater investigation report requested below.

It is unclear from the Work Plan if grab groundwater samples are to be collected from the same boring as the soil samples. ACEH suggests a new boring be advanced adjacent to the soil boring location allowing depth discrete grab groundwater samples to be collected without interruption. Please clarify your grab groundwater sampling methodology before the implementation of the proposed sampling activities and present your approach for depth discrete groundwater sampling in the revised work plan requested below.

- 4. Conduit Study.** The purpose of the conduit study is to locate and determine the probability of the dissolved hydrocarbons encountering preferential pathways and conduits that could spread contamination off site. Please evaluate the potential for dissolved fuel hydrocarbons to migrate along the utility trenches (including sewers, storm drains, trench backfill, pipelines, etc). Please submit map(s) and cross sections indicating the location and depth of utility lines and trenches within and near the site. Please include these results in the Soil and Groundwater Investigation Report requested below.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Steven Plunkett), according to the following schedule:

- **August 15, 2006** – Revised Work Plan
- **September 30, 2006** – Soil and Groundwater Investigation Report

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

ELECTRONIC SUBMITTAL OF REPORTS

ACEH's Environmental Cleanup Oversight Programs (LOP and SLIC) now request submission of reports in electronic form. The electronic copy is intended to replace the need for a paper copy and is expected to be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program FTP site are provided on the attached "Electronic Report Upload Instructions." Submission of reports to the Alameda County

FTP site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitoring wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all reports is required in Geotracker (in PDF format). Please visit the State Water Resources Control Board for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 383-1767.

Wilfred Garfinkle
July 5 2006
Page 4

Sincerely,

A handwritten signature in black ink, appearing to read "Steven Plunkett", with a long, sweeping horizontal line extending to the right.

Steven Plunkett
Hazardous Materials Specialist

cc: Mr. Fred Muller
W.A. Craig Inc.
6940 Tremont Rd.
Dixon, CA 95620

Donna Drogos, ACEH
Steven Plunkett, ACEH
File

Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC)	ISSUE DATE: July 5, 2005
	REVISION DATE: May 31, 2006
	PREVIOUS REVISIONS: October 31, 2005, December 16, 2005
SECTION: Miscellaneous Administrative Topics & Procedures	SUBJECT: Electronic Report Upload (ftp) Instructions

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities.

REQUIREMENTS

- Entire report including cover letter must be submitted to the ftp site as a **single portable document format (PDF) with no password protection**. (Please do not submit reports as attachments to electronic mail.)
- It is **preferable** that reports be converted to PDF format from their original format, (e.g., Microsoft Word) rather than scanned.
- Signature pages and perjury statements **must** be included and have either original or electronic signature.
- **Do not password protect the document**. Once indexed and inserted into the correct electronic case file, the document will be secured in compliance with the County's current security standards and a password. **Documents with password protection will not be accepted.**
- Each page in the PDF document should be rotated in the direction that will make it easiest to read on a computer monitor.
- Reports must be named and saved using the following naming convention:
RO#_Report Name_Year-Month-Date (e.g., RO#5555_WorkPlan_2005-06-14)

Additional Recommendations

- A separate copy of the tables in the document should be submitted by e-mail to your Caseworker in **Excel** format. These are for use by assigned Caseworker only.

Submission Instructions

- 1) Obtain User Name and Password:
 - a) Contact the Alameda County Environmental Health Department to obtain a User Name and Password to upload files to the ftp site.
 - i) Send an e-mail to dehloptoxic@acgov.org
or
 - ii) Send a fax on company letterhead to (510) 337-9335, to the attention of: **ftp Site Coordinator**.
 - b) In the subject line of your request, be sure to include "**ftp PASSWORD REQUEST**" and in the body of your request, include the **Contact Information, Site Addresses, and the Case Numbers (RO# available in Geotracker) you will be posting for.**
- 2) Upload Files to the ftp Site
 - a) Using Internet Explorer (IE4+), go to <ftp://alcoftp1.acgov.org>
 - (i) Note: Netscape and Firefox browsers will not open the FTP site.
 - b) Click on File, then on Login As.
 - c) Enter your User Name and Password. (Note: Both are Case Sensitive.)
 - d) Open "My Computer" on your computer and navigate to the file(s) you wish to upload to the ftp site.
 - e) With both "My Computer" and the ftp site open in separate windows, drag and drop the file(s) from "My Computer" to the ftp window.
- 3) Send E-mail Notifications to the Environmental Cleanup Oversight Programs
 - a) Send email to dehloptoxic@acgov.org notify us that you have placed a report on our ftp site.
 - b) Copy your Caseworker on the e-mail. Your Caseworker's e-mail address is the entire first name then a period and entire last name at acgov.org. (e.g., firstname.lastname@acgov.org)
 - c) The subject line of the e-mail must start with the RO# followed by **Report Upload**. (e.g., Subject: RO1234 Report Upload)

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



October 4, 2004

Mr. Wilfred and Ms. Wilma Garfinkle
2938 Northwood Drive
Alameda, CA 94501

Cal Vita Limited Liability CX
c/o Ms. Janet Koike
2237 Prince Street
Berkeley, CA 94705

Ladies and Gentlemen:

Subject: Workplan for Fuel Leak Investigation, Site No. ~~110-000000~~ 110-000003, Clamp Swing, 2515 Blanding Avenue, Alameda, CA

Alameda County Environmental Health (ACEH) is in receipt of your letter dated September 13, 2004, regarding a workplan submittal concerning the above subject site. Please be advised that California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations, and/or recommendations, be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, it must be prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement. AS previously stated in September 2, 2004, you are required to submit a work plan by **November 2, 2004**.

Should you have any questions, please do not hesitate to call me at (510) 567-6876.

Sincerely,

Amir K. Gholami
Hazardous Materials Specialist, REHS

cc: City of Alameda, Building & Planning Department, 2263 Santa Clara Ave,
Alameda 94501
D. Drogos, A. Gholami

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

JAY GARFINKLE

9/20/04
AG

ALAMEDA COUNTY
SEP 17 2004
EMERGENCY SERVICES

Amir Gholami, REHS
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda CA 94502

September 13, 2004

[REDACTED]

Dear Mr. Gholami:

My parents, Wilma and Wilfred Garfinkle, the former owners of the subject property at 2515 Blanding Avenue in Alameda have asked me to respond to your letter of September 2, 2004 on their behalf.

As I understand the history of the project, the tank was removed in September 2002 under the direct onsite supervision of a representative of your office, and we were instructed by him to close the site a few days or weeks after the tank had been removed. Then in October 2002 you asked us to reopen the site and take additional samples of soil and groundwater and run a third set of tests. These were completed in January 2003.

In April 2003 you sent a letter to us stating that there were unacceptable levels of contamination in the soil and ground water samples tested. I subsequently spoke with Ms. Donna Drogos in your agency, but she was unable to tell me exactly what levels would be acceptable, and I have not been able to find that information elsewhere.

In your letter of April 2003 you indicated that you had reports of the September 2002 removal but not of the subsequent work. I am somewhat confused by this as it was the contamination levels in the "subsequent" samples, those taken in January 2003 that you found unacceptably high, and I personally copied the January 2003 report that I found in your files during a visit to your agency a few months ago.

In your letter of September 2, 2004 you stated that your agency had not been notified of the transfer of the property to a new title holder yet you sent a copy of your letter to her. I'm baffled as to why would you send a copy of your September 2, 2004 letter to Cal Vita, c/o Ms. Janet

Koike at 2237 Prince Street, Berkeley, CA 94705 if you did not know that she was the current title holder.

Is it possible that there are two separate files on this property, one with some of the correspondence and a second with the remainder of the correspondence? In any event, please note that on or about April 9, 2003 Cal Vita LLC became the owners of the property.

You indicated in your April 2003 letter a necessity for additional studies and requested that we send you a proposal as to how this might be accomplished.

It has been our contention that since the tank was not in use after the early 1950's when the property was acquired by my grandfather who, we believe, had no knowledge of the tanks' existence, and since there were only a few gallons of residual fuel in the tank and there was no reported breach in its integrity on extraction from its underground location that it would be logical to conclude that any ongoing contamination, if in fact, there really was any, that might have been related to the tank would have been at only a very minimal rate over the past fifty years. ~~And, therefore, any ongoing significant contamination would have had to have come from the much larger 2000 gallon underground tank which was recently removed from its significantly contaminated site located just a few yards away on the neighboring property or from their fueling activities which continued into the 1970's just across the street from our tank or, possibly, from street resurfacing activities, or leakage from their parked or idling vehicles.~~

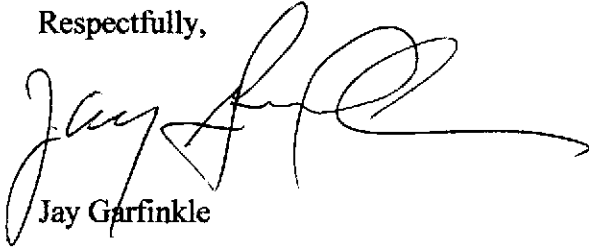
In any event, it has now been two years since the tank was removed and over twenty months since samples of the soil and groundwater were collected, analyzed, and the results reported to you. And since there have been, to the best of our knowledge, no ongoing activities that would adversely affect the levels of contamination, save possibly for the effects of tidal action in the estuary we believe that it should be sufficient to simply re-sample the areas previously examined with the possible addition of sampling to be done ten to perhaps fifty feet away from the original sample sites as opposed to ongoing monitoring..

~~This will give you and us an indication of the lateral extent of the contamination and information as to the rate of natural diminution in contamination levels. We believe that this approach adequately addresses your agency's concerns regarding soil and groundwater contamination that may have resulted from the presence of the underground tank that was removed from 2515 Blanding Avenue in September 2002 which we believe was done in compliance with your agency's guidelines and was done under your agency's supervision.~~

Therefore, to satisfy your request for a plan of action regarding an analysis of possible residual contamination of the soil and groundwater at 2415 Blanding Avenue we are proposing that samples of the soil be taken from the same locations that were sampled in 2002 and 2003 in addition to several sites peripheral to the original ones. We believe that our proposal should be more than adequate considering that the contamination occurred so long ago, was a relatively trivial amount and at this late date would constitute only a very minimal risk to the environment.

I would appreciate it if you would respond to me directly with a copy to my parents or, if that is not permissible, please copy me your letter to them.

Respectfully,

A handwritten signature in black ink, appearing to read "Jay Garfinkle". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Jay Garfinkle

cc: Janet Koike

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



RO2513

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

September 2, 2004

Mr. Wilfred and Ms. Wilma Garfinkle
2938 Northwood Drive
Alameda, CA 94501

Cal Vita Limited Liability CX
c/o Ms. Janet Koike
2237 Prince Street
Berkeley, CA 94705

Ladies and Gentlemen:

Subject: Late Letter for Fuel Leak Investigation, Site No. RO0002513, Clamp Swing, 2515 Blanding Avenue, Alameda, CA

The work plan requested in Alameda County Environmental Health (ACEH) correspondence dated April 4, 2003, has not been received by the requested due date of May 4, 2003. Your work plan is currently 16 months late. Your fuel leak site is not in compliance with ACEH directives. You are requested to submit the work plan by **November 2, 2004**.

If the report is not submitted by the requested due date, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement follow up. Enforcement follow up may include administrative action or monetary penalties of up to \$10,000 per day for each day of violation of the California Health and Safety Code, Section 25299.76.

Please note that further delays in investigation, late reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund to reimburse you for the cost of cleanup.

LANDOWNER NOTIFICATION REQUIREMENTS

Pursuant to California Health & Safety Code Section 25297.15, the active or primary responsible party for a fuel leak case must inform all current property owners of a site of cleanup actions or requests for closure. Furthermore, ACEH may not consider any cleanup proposals or requests for case closure without assurance that this notification requirement has been met. ACEH hereby requires that you:

1. Notify all current record owners of fee title to the site of the proposed action;
2. Submit a letter to ACEH which certifies that the notification requirement in 25297.15(a) of the Health and Safety Code has been met;
3. Forward to ACEH a copy of your complete mailing list of all record fee title holders to the site; and
4. Update your mailing list of all record fee title holders, and repeat the process outlined above prior to submittal of any additional *Corrective Action Plan* or your *Request for Case Closure*.

Your written certification to ACEH should state, at a minimum, the following:

1. In accordance with section 25297.15(a) 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 (Request for Case Closure)
 local agency intention to make a determination that no further action is required
 local agency intention to issue a closure letter

- OR -

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.

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

It appears that the subject site has been sold recently. ACEH has not been notified of this record fee title holder change as required by the above referenced code. We request that you send us the notification requested above by **September 16, 2004**.

PERJURY STATEMENT


All work plans, technical reports, or technical documents submitted to this office must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

If you have any questions, please call me at (510) 567-6876.

Sincerely,



Amir K. Gholami
Hazardous Materials Specialist, REHS

cc: City of Alameda, Building & Planning Department, 2263 Santa Clara Ave, Alameda 94501
D. Drogos, A. Gholami

Drogos, Donna, Env. Health

From: Drogos, Donna, Env. Health
Sent: Tuesday, August 31, 2004 5:58 PM
To: 'planbldg@ci.alameda.ca.us'
Subject: planning dept contact

Greetings,

I want to cc: the planner overseeing development at 2515 Blanding Ave, Alameda (Clamp Swing) on a letter we are issuing re: environmental contamination at the subject site.
I have your address as City of Alameda, 2263 Santa Clara Ave, Alameda 94501.
Can you give me the name of the planner assigned to this project?

Thanks, Donna

Donna L. Drogos, PE
LOP/TOXICS Program Manager
Alameda County Environmental Health
1131 Harbor Bay Parkway
Alameda, CA 94502

510-567-6721
donna.drogos@acgov.org

Drogos, Donna, Env. Health

From: Ben Garfinkle [bgarfinkle@clampswing.com]
Sent: Wednesday, March 24, 2004 2:50 PM
To: Donna.Drogos@acgov.org
Subject: 2515 Blanding Alameda

Hi Donna,

I would like to confirm if you received the email I sent on 3/15. Did you get it? If so, when do you expect I might get a reply?

Thanks

Ben Garfinkle
567-1605

3/29/2004

Drogos, Donna, Env. Health

From: Ben Garfinkle [bgarfinkle@clampswing.com]
Sent: Monday, March 15, 2004 4:16 PM
To: Donna.Drogos@acgov.org
Subject: FW: Allied Engineering

Hi Donna,

Rob Weston said the matter of the tank located at Allied Engineering (2421 Blanding Ave.) in Alameda has been passed on to the Local Oversight Program and suggested I contact you to see what the status is. To briefly remind you, my parents were the owners of the property at 2515 Blanding Ave. and had a very small tank (120-300 gallon) removed in September of 2002. This tank had been abandoned around 1954, prior to the purchase of the property by my Grandfather. When the report indicated that monitoring may be needed, we questioned how such a small tank, not used for 50 years, could still be impacting the environment. Even if it was full and had a leak when it was abandoned, its contents would have been emptied perhaps decades ago. What could monitoring possibly accomplish now?

We suggested that the problems still evident in the area may have been coming from a tank located on the adjacent property at Allied. We know it was a 2000 gallon tank and was installed after ours was taken out of service. We also know it was used until the 1970's or even 1980's. Coupled with the fact that the water table at both sites is very high and affected by tidal action, made us very suspicious as to the source of the current problem. It appears that twice a day for the last 50 years, any contamination from the Allied tank has been pushed toward our former property. Rob mentioned that it was full of a gas and water mixture when removed, there was contamination of the soil and the odor of gas was very strong. Can you please tell us what action has been taken since the oversight group has received this case and who has been assigned to it? Can we get a copy of the lab results? Most importantly, the current owner of the property (at 2515 Blanding) is trying to get permits to improve her property. She would like to know when our case will be closed. Do you now have enough evidence to close our case?

Thank you for your attention to this matter and I look forward to your reply. Please send a copy of your response to Robert Lane, Esq.

Ben Garfinkle
510-567-1600

cc: Robert Lane, Esq.
3557 Grand Ave.
Oakland, CA 94610

3/29/2004

R. KINGSBURY LANE
CORPORATION
3657 GRAND AVENUE
OAKLAND, CALIFORNIA 94610-2009
(510) 465-1933

ROBERT K. LANE
ATTORNEY AT LAW

2513

April 11, 2003

Amir K. Gholami, REHS
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

Fax and Mail
337.9335

RE: 2515 Blanding Ave., Alameda, California
RO0002513

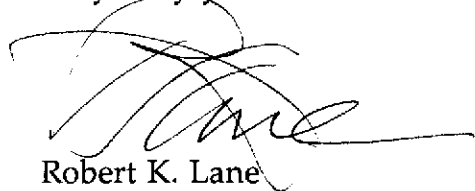
Dear Amir:

As you know this office represents the Garfinkles with regard to the potential remediation of the above property. On April 10th the fee title to the property transferred to Cal Vita Limited Liability Company, the manager and principal of which is Janet Koike. The Garfinkles will remain as the responsible parties for any remediation made necessary as a result of the tank removal. Please direct ALL correspondence with regard to this property to this office using both mail and fax at 510.465.2003. Also send copies to:

1. Janet Koike at fax number 510.841.0941
2. Ben Garfinkle at fax number 510.567.1830

Please also continue sending copies to the Alameda address of the Garfinkles.

Very truly yours,



Robert K. Lane

RKL:bl

ccc by fax

cc: Janet Koike: Fax 841.0941
Myra Mitzman: Fax 338.0202

Alameda County
APR 16 2003
Environmental Health

11:04am

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



April 4, 2003

RO0002513

Mr. Wilfred Garfinkle
2938 Northwood Dr
Alameda, CA 94501

Re: Fuel Leak Investigation, Site No. RO0002513, Clamp Swing, 2515 Blanding Ave.,
Alameda, CA 94501

Dear Mr. Garfinkle:

Alameda County Environmental Health (ACEH) staff reported a release from your former gasoline underground storage tank (UST) system removed from your property on September 12, 2002. This office subsequently listed the subject site on our database of fuel leak sites. Our office acts as the lead agency to oversee the investigation and cleanup of petroleum hydrocarbon releases. We have recently reviewed the information in our file and determined that up to 1,450 ppm TPHG, 105 ppm TPHD were left in place in soil, up to 8,910 ppb TPHG and 22,000 ppb TPHD were detected in groundwater, petroleum odors were noted from the tank excavation, and that a soil and groundwater investigation is necessary at this site to progress toward case closure.

Please define the extent of soil and groundwater at your site. This type of investigation usually involves drilling one or more soil borings and collecting soil samples for chemical analyses. Groundwater monitoring wells may be needed and groundwater sampled to properly characterize groundwater contamination. Other options for additional investigation may be appropriate to define contamination at your site.

Please submit a work plan detailing your proposal to define the extent of soil and groundwater contamination by **May 4, 2003**. This report is being requested pursuant to the Regional Water Quality Control Board's (Regional Board) authority under Section 13267 of the California Water Code.

REQUEST FOR INFORMATION

ACEH's files for the subject site contains one report documenting UST removal activities, dated September 27, 2002, prepared by Golden Gate Tank Removal, Inc. It appears that additional work was performed at this site however; report(s) documenting this work have not been submitted to us. We request that you submit copies of any other reports you have documenting additional investigation activities or other work related to this UST system/site by **May 4, 2003**.

ENVIRONMENTAL HEALTH SERVICES

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

AB 681 (MACHADO) CHAPTER 255, STATUTES OF 1998

AB 681 (Machado) Chapter 255, Statutes of 1998, has made legislative changes to Chapters 6.7 and 6.75 of the Health and Safety Code adding new requirements to landowner notification and participation requirements for fuel leak investigations. These legislative changes require the active or primary responsible party for a fuel leak case to ensure that all current property owners of the site are informed of cleanup actions or requests for closure and to forward to ACEH a complete mailing list of all record fee title holders to the site so that we can ensure that they are listed as responsible parties and kept informed about cleanup and closure decisions.

Additionally, the primary or active responsible party must certify in writing that the notification requirement of Health and Safety Code, Section 25297.15, has been met and provide a mailing list of all record fee title owners to the local agency. This certification shall be included with a perjury statement in the cover letter transmitting reports, work plans, and requests for closure.

UST CLEANUP FUND

Please be advised that you might be eligible for reimbursement of the costs of investigation from the California UST Cleanup Fund (Fund). In some cases, a deductible amount may apply. Enclosed is a fact sheet concerning the Fund. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement follow up. Enforcement follow up may include administrative action or monetary penalties of up to \$10,000 per day for each day of violation of the California Health and Safety Code, Division 20, Chapter 6.75.

Should you have any questions, please do not hesitate to call me at (510) 567-6876.

Sincerely,



Amir K. Gholami, REHS
Hazardous Materials Specialist

Enclosure: USTCF Fact Sheet

C: Law Office of Robert Lane 3657 Grand Ave, Oakland, 94610

D. Drogos, A. Gholami

Wilfred Garfinkle
2938 Northwood Drive
Alameda, CA 94501
(510) 523-1951

Alameda County
MAR 19 2003
Environmental Health

March 15, 2003

Mr. Arui Levi, Chief
Contract Program Director
Alameda County Health Care Services
Environmental Protection Dept.
1131 Harbor Bay Pkwy, Suite 250
Alameda, CA 94502-6577

✓ RO2513

MT 4/10/03
3/24/02
file

Re: Record ID: RO0002513
Substance: Gasoline

Dear Mr. Levi:

The purpose of this letter is to acknowledge receipt of your letter of February 19, 2003, and to confirm that I, Wilfred Garfinkle, along with my wife, Wilma Garfinkle, are the sole owners of the property known as "Clamp-Swing Pricing Company, 2515 Blanding Avenue, Alameda, CA 94501." Please note that I have kept my wife apprised of the fee title and all matters regarding this property and your agency.

I sincerely hope that this information will enable your agency to issue a letter stating that "no further action is necessary," so that we may resolve this matter promptly and the property may finally be sold.

Sincerely yours,

Wilfred Garfinkle

R. KINGSBURY LANE

CORPORATION

1547 GRAND AVENUE

OAKLAND, CALIFORNIA 94610 2000

(510) 465-1111

ROBERT K. LAUC
ATTORNEY AT LAW

RO 2513

*Carusky
RE 3/11/03
12/13/03
RKL*

March 12, 2003

Amir K. Gholami, RHHS
Alameda County Health Care Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

Fax and Mail
337.9335

RE: 2515 Blanding Ave., Alameda, California
Landowner Notification Letter of March 4, 2003

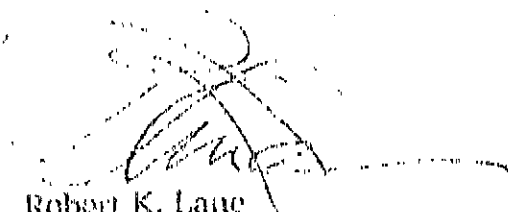
Dear Amir:

Since receiving your above referenced letter of March 4, 2003, I have tried numerous times to reach you on the phone to clarify the language of the letter but I always get your voice mail and no return call, thus this letter.

The letter appears to allow for a meeting now to "make a determination that no further action is required". This is what we have been requesting for some time. Please indicate in writing at your earliest convenience that such a meeting can occur now or that we misunderstand the thrust of your letter.

Thank you.

Very truly yours,



Robert K. Lauc

RKL:bl
cc: by fax

cc: Janet Koike
c/o Dean Treadway: Fax 834.9158

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



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

March 4, 2003

RO0002513

Mr. Wilfred Garfinkle
2938 Northwood Dr
Alameda, CA 94501

RE: Clamp Swing, 2515 Blanding Ave., Alameda, CA 94501

LANDOWNER NOTIFICATION AND PARTICIPATION REQUIREMENTS

Dear Mr. Garfinkle:

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: 2515 Blanding Ave., Alameda

March 4, 2003

Page 2 of 2

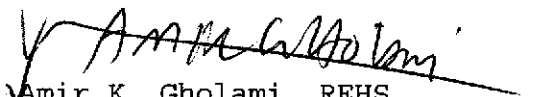
In accordance with Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code, you must certify to the local agency that all current record owners of fee title to the site have been informed of the proposed action before the local agency may do any of the following:

- 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) 567-6876 if you have any questions about the content of this letter.

Sincerely,


Amir K. Gholami, REHS
Hazardous Materials Specialist

cc: Reger Breweer, RWQCB

Attachments: Sample letter 2 and Sample letter 3, which must be filled out by the Responsible Party and mailed to Alameda County.

Alameda County Health care Services Agency
Environmental Health Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

"List of Landowners" form
(Sample Letter 2)

SUBJECT: CERTIFIED LIST OF RECORD FEE TITLE OWNERS FOR (Site
name and address)
(to be filled in by the primary responsible party and mailed to
Alameda County)

(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

Alameda County Health care Services Agency
Environmental Health Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

**"Notice of Proposed Action" form
(Sample Letter 3)**

SUBJECT: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY FOR
(site name and address)
(to be filled in by the primary responsible party and mailed to
Alameda county)

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

RO-2513

ALAMEDA COUNTY - ENVIRONMENTAL HEALTH

Transfer of Eligible Local Oversight Case

STID _____ Date of input/By: _____

Date: 1-29-03

From: RWESTON

Site Name: _____

Address: 2515 BLANDING AVE City: ALAMEDA Zip: 94501

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

1. Y N Tanks Removed? # of removed? 1 Date removed: 9-12-02
2. Y N Samples received? Contamination level: 1450 ppm
Type of test TPHG
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. _____ Close the deposit refund case.
 - b. _____ Account for **ALL** time you have spent on the case.
 - c. _____ 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
DAVID J. KEARS, Agency Director



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

October 24, 2002

SR 0003017

Willfred & Wilma Garfinkle
2938 Northwood Drive
Alameda, California 94501

RE: Underground storage tank removal, 2515 Blanding Avenue, Alameda CA 94501

Dear Mr. & Mrs. Garfinkle:

The office has received and reviewed the tank closure report prepared by Tracy Wallace, of Golden Gate Tank Removal, Inc. The report identifies petroleum constituents outside of the tank and in the subsurface. Based on field observations during the removal process this office is requesting additional investigation to more clearly define the extent of contamination.

Please direct your consultant to perform a scope of work that will accomplish the following tasks:

1. Resample soil in the former excavation at a similar depth,
2. Excavate down to groundwater and grab a groundwater sample.

All samples will be properly handled under chain of custody and analyzed for the same constituents as initially analyzed with the addition of chlorinated solvents. Your consultant shall notify this office at least 48 hours in advance of the fieldwork so that we may be present to direct the sampling.

Please contact me at (510) 567-6781 should you have any questions.

Sincerely,

Robert Weston
Sr. Hazardous Materials Specialist

cc: Tracy Wallace, GGTR
Janet Koike, 2237 Prince Street, Berkeley CA 94705
Susan Hugo, Manager, ACDEH



Alameda County
OCT 14 2002
Environmental Health

September 20, 2002
GGTR Job #8258

Willfred & Wilma Garfinkle
2938 Northwood Drive
Alameda, CA 94501

Re: Underground Storage Tank Located at
1926 Everett Street
Alameda, California

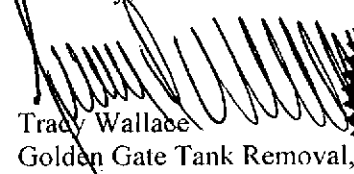
Dear Mr. & Mrs. Garfinkle:

As you know, on August 22, 2002, Golden Gate Tank Removal, Inc. contracted with you to remove one-1,000 gallon underground heating oil fuel storage tank. The evidence of an underground fuel storage tank on the property was a fuel pipe in the building and a permit card on file with the city of Alameda Fire Department indicating that a 1,000 gallon crude oil tank was installed in January of 1934. However, after further investigation of the existing pipe and ultimately, after considerable work to find the underground storage tank, no tank was located.

On September 4, and September 7, 2002, Golden Gate Tank Removal, Inc. mobilized our equipment to begin work on the project. An electromagnetic device was used to obtain the signature pattern or possible location of the location of the tank. The concrete was removed and the dirt excavated which failed to present any evidence of the tank. We then began a series of excavations along the frontage of the property to locate the tank. These excavations were in line with the most probable location of the tank.

Following a thorough subsurface investigation of the site, it appears that the underground tank has been removed at a previous time. If you have any questions, please feel free to contact me at (415) 512-1555.

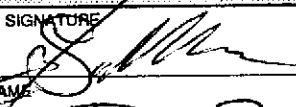
Sincerely,


Tracy Wallace
Golden Gate Tank Removal, Inc.



To: Rob Weston

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 09/12/02		CASE #		SIGNED _____ DATE _____		
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT SAUNDRA MORA		PHONE (415) 512-1555		SIGNATURE 	
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME Golden Gate Tank Removal Inc			
	ADDRESS 255 _____ STREET SHIPLEY CITY SAN FRANCISCO STATE CA ZIP 94107					
RESPONSIBLE PARTY	NAME WILFRED & WILMA GARFINKLE <input type="checkbox"/> UNKNOWN		CONTACT PERSON WILFRED & WILMA GARFINKLE		PHONE (510) 813-9951	
	ADDRESS 2938 _____ STREET NORTHWOOD DRIVE CITY ALAMEDA STATE CA ZIP 94501					
SITE LOCATION	FACILITY NAME (IF APPLICABLE)		OPERATOR		PHONE ()	
	ADDRESS 2515 _____ STREET BLANDING AVE CITY ALAMEDA COUNTY ALAMEDA ZIP 94501					
	CROSS STREET EVERETT ST					
IMPLEMENTING AGENCIES	LOCAL AGENCY ALAMEDA COUNTY HEALTH AGENCY		CONTACT PERSON Robert Weston		PHONE (510) 567-0781	
	REGIONAL BOARD CRWQCB		PHONE ()			
SUBSTANCES INVOLVED	(1) NAME LEAD GASOLINE		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		<input type="checkbox"/> UNKNOWN	
	(2)		<input type="checkbox"/> UNKNOWN			
DISCOVERY/ABATEMENT	DATE DISCOVERED 09/12/02		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		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	
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN		HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 09/12/02			
	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 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 checked="" type="checkbox"/> OTHER (OT) NO ACTION TAKEN AT THIS TIME					
COMMENTS						

Alameda County
 Environmental Health
 SEP 18 2002

**UNDERGROUND STORAGE TANK CLOSURE/REMOVAL
FIELD INSPECTION REPORT**

SP-000 3017

Facility Name: <u>CLAMP SWAMP</u>	SFHD:	Date: <u>9-12-02</u>
Facility Address: <u>2515 BLANDING</u>	Contact on site: <u>SABULSON</u>	
Inspector: <u>DWIGHTSON</u>	Contractor/Consultant: <u>COBURN GATE TANK REMOVAL</u>	

General Requirements	Yes	No	N/A
Approved closure plan on site.	✓		
Changes to approved plan noted.			✓
Residuals properly stored/transported.	✓		
Receipt for adequate dry ice noted.			✓

General Requirements	Yes	No	N/A
Site Safety Plan properly signed.	✓		
40B:C fire extinguisher on site.	✓		
"No Smoking" signs posted.	✓		
Gas detector challenged by inspector.		✓	1

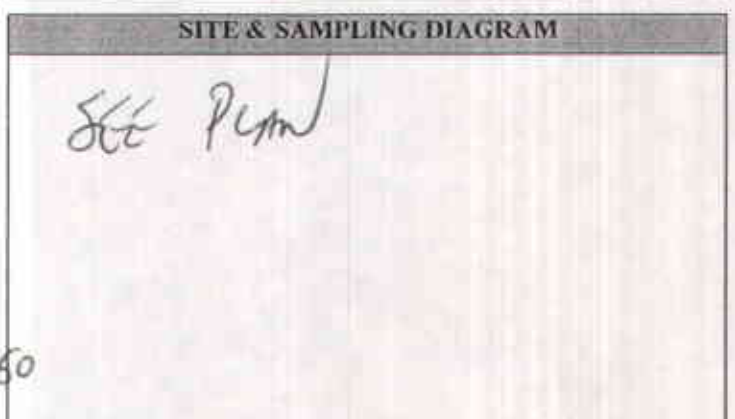
Tank Observations	T #1	T #2	T #3	T #4
Tank Capacity (gallons)	300			
Material last stored	UNK			
Dry ice used (pounds)	250			
Combustible gas concentration as %LEL. (Note time & sampling point)				
(1)	0			
(2)				
(3)				
Oxygen concentration as % volume. (Note time & sampling point)				
(1)	4			
(2)				
(3)				
Tank Material	STEEL			
Wrapping/Coating, if any	NONE			
Obvious holes?				

Tank Observations	T #1	T #2	T #3	T #4
Obvious corrosion?	NO			
Obvious odors from tank?	YES			
Seams intact?	YES			
Tank bed backfill material	CLAY			
Obvious discoloration?	YES			
Obvious odors ex tank bed?	YES			
Water in excavation?	NO			
Sheen/product on water?	N/A			
Tank tagged by transporter?	YES			
Tank wrapped for transport?	NO			
Tank plugged w/ vent cap?	NO			
Date/time tank hauled off?	9/12/02	11:10 Am		
No. of soil samples taken?	5			
Depth of soil samples (ft. bgs)	10 FT			

Piping Removal	Yes	No	N/A
All piping removed hauled off w/ tanks?	✓		
Obvious holes on pipes?			
Obvious odors from pipes?		✓	
Obvious soil discoloration in piping trench?			✓
Obvious odors from piping trench?			✓
Water in piping trench?			✓
Number & depth of soil samples from piping trench?			
Number & depth of water samples from piping trench?			

General Observations	Yes	No	N/A
Leak from any tank suspected?	✓		
"Leak Report" form given to the operator?	✓		
Obviously contaminated soil excavated?		✓	
Soil stockpile sampled?	✓		
Stockpile lined AND covered?	✓		
Water in excavation sampled?			
Number/depth of water samples taken?		10 FT (1)	
All samples properly preserved for transport?	✓		

Additional Observations	Yes	No	N/A
Soil/water sampling protocols acceptable?	✓		
Sampling "chain of custody" noted?	✓		
Tank pit filled in or covered?		✓	
Tank pit fenced or barricaded?	✓		
Transporter a registered HW hauler?	✓		
Uniform HW Manifest completed?	✓		
Contractor/Consultant reminded of complete UST Removal Report due within 30 days?	✓		
Date/Time removal/closure operations completed?			9/12/02 11:50
OT hours or additional charges due from contractor?			



Notes/Comments: VERY OLD TANK INSTALLED IN SIDEWALK.
ONLY ≈ 5 FT OF PIPE FOUND ASSOCIATED WITH THE TANK.
SAMPLED FOR UNKNOWN FUEL.

ONLY ONE TANK FOUND.



9 09-12-02
P0001324.JPG



10 09-12-02
P0001325.JPG



11 09-12-02
P0001326.JPG



12 09-12-02
P0001327.JPG



13 09-12-02
P0001328.JPG



14 09-12-02
P0001329.JPG



2515 Blanding Avenue
Alameda, CA 94501
January 3, 2003
excavation pumped out by vacuum truck
1000 gallons of water removed

1/3/2003 10:03am



1/3/2003 10:03am



1/3/2003 10:00am



1/3/2003 10:26am

2518 Blandine Avenue
Alameda, CA 94501
January 3, 2003

TOTAL DEPTH
10 FT

overexcavation of previous tank pit

9/6/02

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
 ENVIRONMENTAL HEALTH SERVICES
 1131 HARBOR BAY PARKWAY, RM 250
 ALAMEDA, CA 94502-6577
 PHONE # 510/567-6700

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Hazardous Materials
 1131 Harbor Bay Parkway, Suite 250
 Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure 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/renovation.

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

Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

- Removal of Tank(s) and Piping
- Sampling
- Final Inspection

Issuance of a permit to operate, by permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

Contract Signature:

ROBERT WESTON

USE REVISED TABLE 11

UNKNOWN FUEL ANALYSIS

UNDERGROUND TANK CLOSURE PLAN

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

1. Name of Business _____
 Business Owner or Contact Person (PRINT) _____ Contact is: Ben Garfinkle
 2. Site Address 2515 Blanding Avenue
 City Alameda Zip 94501 Phone (510) 567-1600 ext. 106
 3. Mailing Address 2938 Northwood Drive
 City Alameda Zip 94501 Phone (510) 813-9951
 4. Property Owner Wilfred & Wilma Garfinkle
 Business Name (if applicable) N/A
 Address 2938 Northwood Drive
 City, State Alameda, CA Zip 94501
 5. Generator name under which tank will be manifested
Wilfred & Wilma Garfinkle
- EPA ID# under which tank will be manifested C A C 002555805 _ _ _ _



6. Contractor Golden Gate Tank Removal, Inc.
 Address 255 Shipley Street
 City San Francisco, CA Phone (415) 512-1555
 License Type A, Haz, 616521 ID# 94-3381177
7. Consultant (if applicable) None
 Address _____
 City, State _____ Phone _____
8. Main Contact Person for Investigation (if applicable)
 Name Tracy Wallace Title President
 Company Golden Gate Tank Removal, Inc.
 Phone (415) 512-1555
9. Number of underground tanks being closed with this plan One
 Length of piping being removed under this plan Unknown
 Total number of underground tanks at this facility (**confirmed with owner or operator) One *2*
10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

**** Underground storage tanks must be handled as hazardous waste ****

a) Product/Residual Sludge/Rinsate Transporter

Name Clearwater Environmental Management, Inc. EPA I.D. No. CAR000007013
 Hauler License No. 118459 License Exp. Date November 11, 2002
 Address P.O. Box 2407
 City Union City State CA zip 94587-2407

b) Product/Residual Sludge/Rinsate Disposal Site

Name Clearwater Environmental Management, Inc. EPA ID# CAR000007013
 Address P.O. Box 2407
 City Union City State CA zip 94587-2407

c) Tank and Piping Transporter

Name Ecology Control Industries (E.C.I.) EPA I.D. No. CAD009466392
Hauler License No. 1533 License Exp. Date March 3, 2003
Address 255 Parr Boulevard
City Richmond, State CA zip 94801

d) Tank and Piping Disposal Site

Name E.C.I. EPA I.D. No. CAD009466392
Address 255 Parr Boulevard
City Richmond, State CA zip 94801

11. Sample Collector

Name Salvador Mora, Project Manager
Company Golden Gate Tank Removal, Inc.
Address 255 Shipley Street
City San Francisco, State CA zip 94107 Phone (415) 512-1555

12. Laboratory

Name North State Labs
Address 90 South Spruce Avenue, Suite V
City South San Francisco, State CA zip 94080
State Certification No. 1753

13. Have tanks or pipes leaked in the past? Yes[] No[] Unknown[X]

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

Removal of residual product, purge, inert (dry ice) and rinse. If necessary, with the consent of
the Alameda Fire Department, we will follow procedure with cutting of tanks (Please see
attachment).

Before tanks are pumped out and inerted, all associated piping must be flushed back into the tank(s). All accessible piping must then be removed. Inaccessible piping must be permanently plugged using grout.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to have a functional combustible gas indicator on-site to verify that the tank(s) is inerted.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
120 ³⁰⁰ gallon	Gasoline	Soil, Groundwater if encountered	TBD
1,500 gallon	Heating Oil	Soil, Groundwater if encountered	TBD

One soil sample must be collected for every 20 linear feet of piping that is removed. A ground water sample must be collected if any ground water is present in the excavation.

Excavated/Stockpiled Soil

Stockpiled Soil Volume (estimated)	Sampling Plan
10 Yards	4 point composite for every 50 cubic yard, 4 point composite for every 20 cubic yards if reused.

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

Will the excavated soil be returned to the excavation immediately after tank removal? yes no unknown

If yes, explain reasoning _____

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from this office. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling activities.

16. Chemical methods and associated detection limits to be used for analyzing samples:

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

17. Submit Site Health and Safety Plan (See Instructions)

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
TPH-D	Brass tube containment	8015	0.5 ppm
BTEX		8210	.005 ppm
MTBE		8020 (Confirmed by method 8260)	.005 ppm

18. Submit Worker's Compensation Certificate copy

Name of Insurer State Compensation Insurance Fund

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

21. **Report all leaks or contamination to this office within 5 days of discovery.**

The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. **Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.**

23. **Submit State (Underground Storage Tank Permit Application) Forms A and B (one-B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)**

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan is approved.

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

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business Golden Gate Tank Removal, Inc.

Name of Individual Cathy Keller

Signature *Cathy Keller - On Behalf of Owner* Date August 27, 2002

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

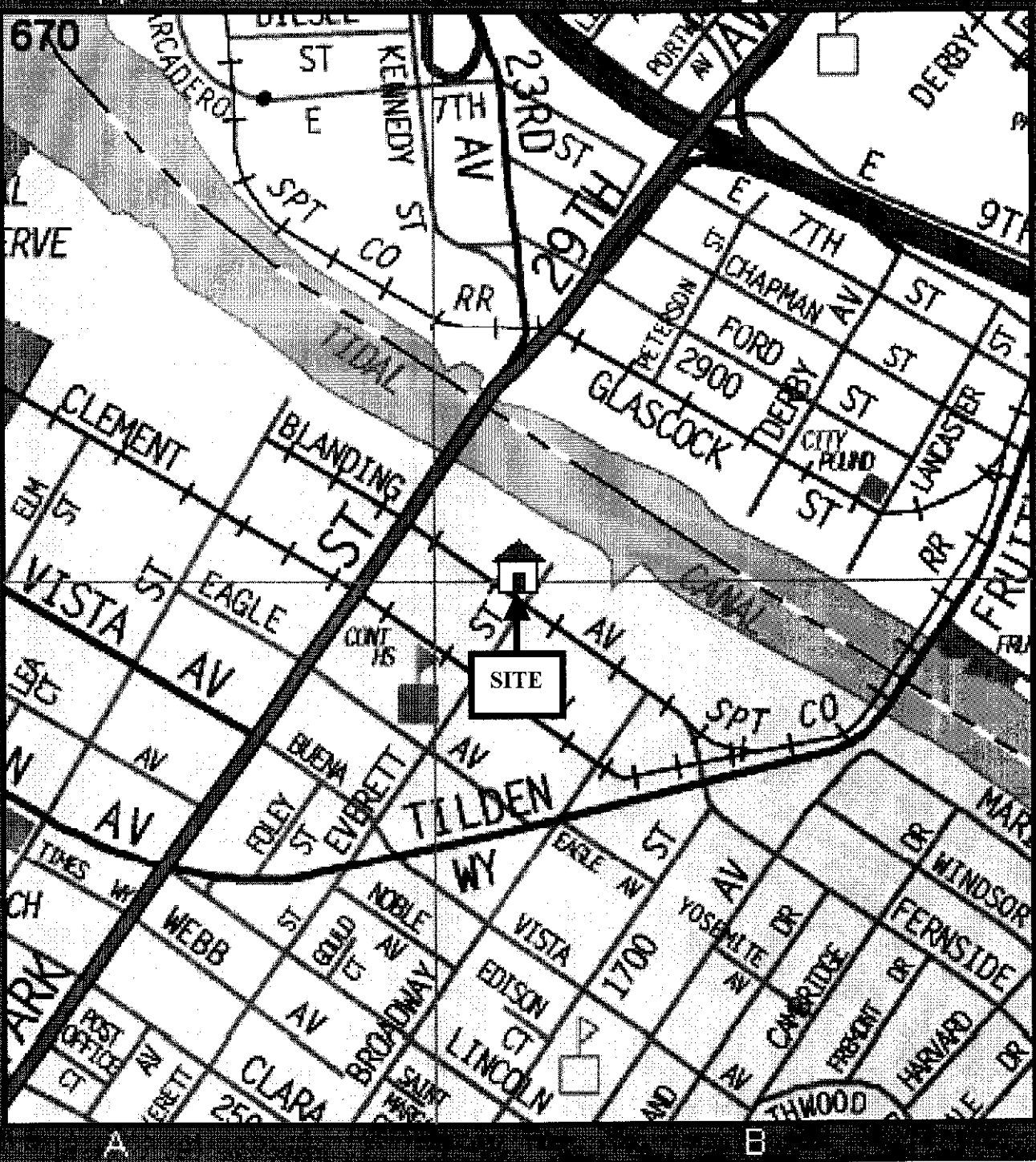
Name of Business _____

Name of Individual Wilfred & Wilma Garfinkle

Signature *Cathy Keller - On Behalf of Owner* Date August 27, 2002



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GOLDEN GATE TANK REMOVAL, INC.

255 Shipley Street
San Francisco, California 94107
Telephone (415) 512-1555 Fax (415) 512-0964

VICINITY MAP

2515 Blanding Avenue
Alameda, CA 94501

Project 8259

By: Cathy

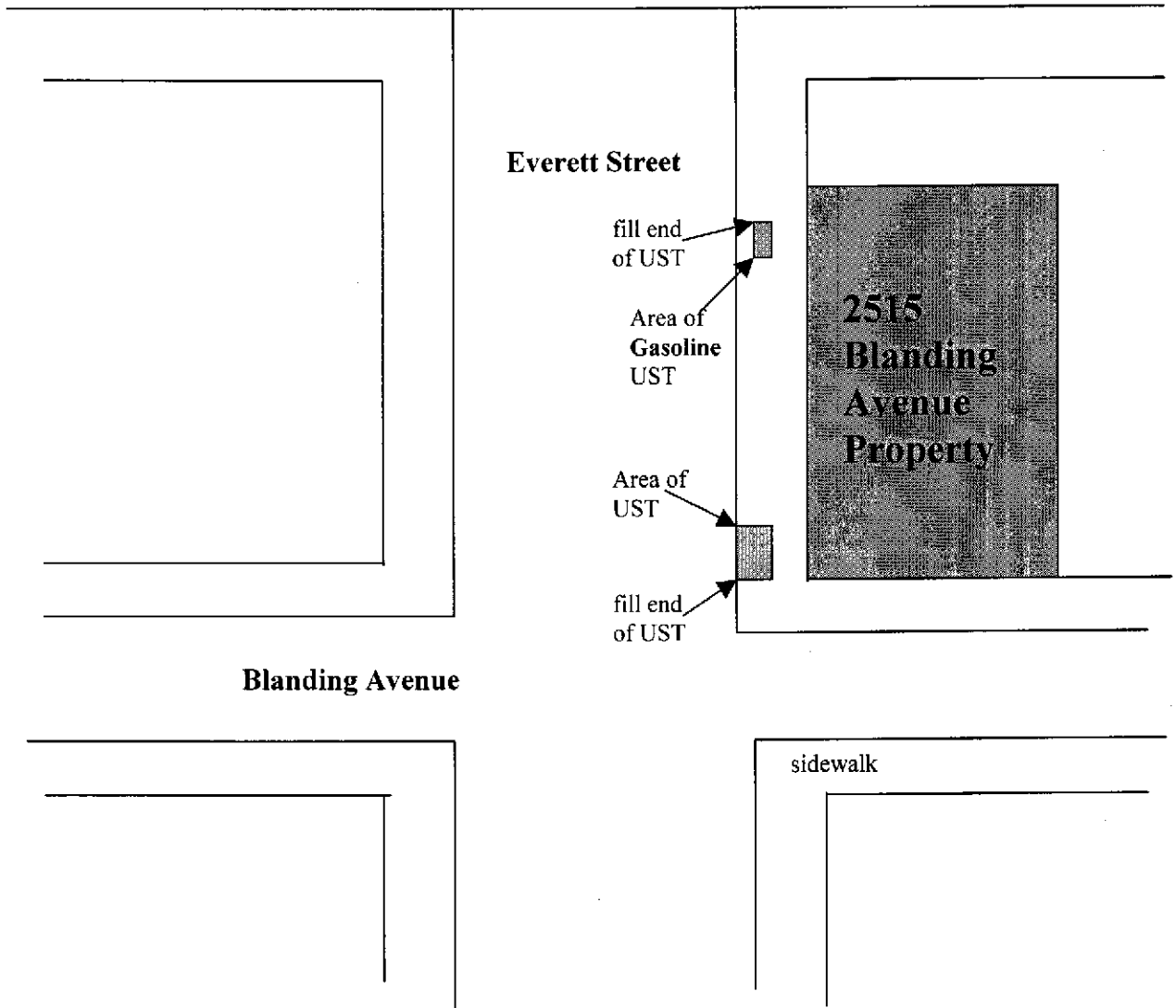
Not to scale

August 2002

Figure 1



Canal



GOLDEN GATE TANK REMOVAL, INC.

255 Shipley Street

San Francisco, California 94107

Telephone (415) 512-1555 Fax (415) 512-0964

SITE MAP

2515 Blanding Avenue

San Francisco, California 94501

Project 8259

By: Cathy

Not to scale

August 2002

Figure 2



UNIFIED PROGRAM CONSOLIDATED FORM
UNDERGROUND STORAGE TANK FORM
PAGE 1



(two pages per tank)

Page **1** of **2**

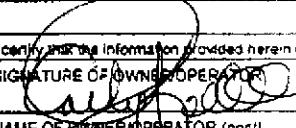
- TYPE OF ACTION (Check one item only)
- | | | | |
|---|--|---|---|
| <input type="checkbox"/> 1. NEW SITE PERMIT | <input type="checkbox"/> 4. AMENDED PERMIT
<i>(Specify reason - local use only)</i> | <input type="checkbox"/> 5. CHANGE OF INFORMATION
<i>(Specify change - local use only)</i> | <input type="checkbox"/> 6. TEMPORARY SITE CLOSURE |
| <input type="checkbox"/> 3. RENEWAL PERMIT | | | <input type="checkbox"/> 7. PERMANENTLY CLOSED SITE |
| | | | <input checked="" type="checkbox"/> 8. TANK REMOVED |

BUSINESS NAME (Same as FACILITY NAME or OBA - Doing Business As) Wilfred & Wilma Garfinkle		FACILITY ID # 1	
LOCATION WITHIN SITE (Optional) 2515 Blanding Avenue			
I. TANK DESCRIPTION			
TANK ID # Unknown	432 TANK MANUFACTURER Unknown	433 COMPARTMENTALIZED TANK <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	434 <i>If "Yes", complete one page for each compartment.</i>
DATE INSTALLED (YEAR/MO) Unknown	435 TANK CAPACITY IN GALLONS 120	436 NUMBER OF COMPARTMENTS	
438 ADDITIONAL DESCRIPTION (For local use only)			
II. TANK CONTENTS			
439 TANK USE		440 PETROLEUM TYPE	
<input checked="" type="checkbox"/> 1. MOTOR VEHICLE FUEL <i>(If marked, complete Petroleum Type)</i> <input type="checkbox"/> 2. NON-FUEL PETROLEUM <input type="checkbox"/> 3. CHEMICAL PRODUCT <input type="checkbox"/> 4. HAZARDOUS WASTE <i>(Includes Used Oil)</i> <input type="checkbox"/> 95. UNKNOWN		<input checked="" type="checkbox"/> 1a. REGULAR UNLEADED <input type="checkbox"/> 2. LEADED <input type="checkbox"/> 5. JET FUEL <input type="checkbox"/> 1b. PREMIUM UNLEADED <input type="checkbox"/> 3. DIESEL <input type="checkbox"/> 6. AVIATION FUEL <input type="checkbox"/> 1c. MIDGRADE UNLEADED <input type="checkbox"/> 4. GASOHOL <input type="checkbox"/> 99. OTHER _____	
		441 COMMON NAME (from Hazardous Materials Inventory page)	442 CAS # (from Hazardous Materials Inventory page)
III. TANK CONSTRUCTION			
443 TYPE OF TANK (Check one item only)			
<input checked="" type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL		<input type="checkbox"/> 3. SINGLE WALL WITH EXTERIOR MEMBRANE LINER <input type="checkbox"/> 4. SINGLE WALL IN A VAULT <input type="checkbox"/> 5. SINGLE WALL WITH INTERNAL BLADDER SYSTEM <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER _____	
444 TANK MATERIAL - primary tank (Check one item only)			
<input checked="" type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 2. STAINLESS STEEL		<input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 5. CONCRETE <input type="checkbox"/> 8. FRP COMPATIBLE W/100% METHANOL <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER _____	
445 TANK MATERIAL - secondary tank (Check one item only)			
<input type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 2. STAINLESS STEEL		<input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 5. CONCRETE <input type="checkbox"/> 6. FRP COMPATIBLE W/100% METHANOL <input type="checkbox"/> 9. FRP NON-CORRODIBLE JACKET <input type="checkbox"/> 10. COATED STEEL <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER _____	
447 TANK INTERIOR LINING OR COATING (Check one item only)			
<input type="checkbox"/> 1. RUBBER LINED <input type="checkbox"/> 2. ALKYD LINED		<input type="checkbox"/> 3. EPOXY LINING <input type="checkbox"/> 4. PHENOLIC LINING <input type="checkbox"/> 5. GLASS LINING <input type="checkbox"/> 6. UNLINED <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER _____	
448 OTHER CORROSION PROTECTION IF APPLICABLE (Check one item only)			
<input type="checkbox"/> 1. MANUFACTURED CATHODIC PROTECTION <input type="checkbox"/> 2. SACRIFICIAL ANODE		<input type="checkbox"/> 3. FIBERGLASS REINFORCED PLASTIC <input type="checkbox"/> 4. IMPRESSED CURRENT <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER _____	
449 SPILL AND OVERFILL (Check all that apply)			
<input type="checkbox"/> 1. SPILL CONTAINMENT <input type="checkbox"/> 2. DROP TUBE <input type="checkbox"/> 3. STRIKER PLATE		YEAR INSTALLED: 450 _____ TYPE (For local use only): 451 _____ OVERFILL PROTECTION EQUIPMENT: YEAR INSTALLED 452 <input type="checkbox"/> 1. ALARM <input type="checkbox"/> 3. FILL TUBE SHUT OFF VALVE <input type="checkbox"/> 2. BALL FLOAT <input type="checkbox"/> 4. EXEMPT	
IV. TANK LEAK DETECTION			
453 IF SINGLE WALL TANK (Check all that apply):		454 IF DOUBLE WALL TANK OR TANK WITH BLADDER (Check one item only):	
<input type="checkbox"/> 1. VISUAL (EXPOSED PORTION ONLY) <input type="checkbox"/> 2. AUTOMATIC TANK GAUGING (ATG) <input type="checkbox"/> 3. CONTINUOUS ATG <input type="checkbox"/> 4. STATISTICAL INVENTORY RECONCILIATION (SIR) + BIENNIAL TANK TESTING		<input type="checkbox"/> 1. VISUAL (SINGLE WALL IN VAULT ONLY) <input type="checkbox"/> 2. CONTINUOUS INTERSTITIAL MONITORING <input type="checkbox"/> 3. MANUAL MONITORING	
<input type="checkbox"/> 5. MANUAL TANK GAUGING (MTG) <input type="checkbox"/> 6. VADOSE ZONE <input type="checkbox"/> 7. GROUNDWATER <input type="checkbox"/> 8. TANK TESTING <input type="checkbox"/> 99. OTHER _____			
V. TANK CLOSURE INFORMATION / PERMANENT CLOSURE IN PLACE			
455 ESTIMATED DATE LAST USED (YR/MO/DAY) Unknown	456 ESTIMATED QUANTITY OF SUBSTANCE REMAINING Unknown gallons	457 TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

UNDERGROUND STORAGE TANK FORM

PAGE 2

(two pages per tank)

VI. PIPING CONSTRUCTION (Check all that apply)			
UNDERGROUND PIPING		ABOVEGROUND PIPING	
SYSTEM TYPE	<input type="checkbox"/> 1. PRESSURE	<input checked="" type="checkbox"/> 2. SUCTION	<input type="checkbox"/> 3. GRAVITY 458
CONSTRUCTION/MANUFACTURER	<input checked="" type="checkbox"/> 1. SINGLE WALL	<input type="checkbox"/> 3. LINED TRENCH	<input type="checkbox"/> 99. OTHER 460
	<input type="checkbox"/> 2. DOUBLE WALL MANUFACTURER	<input type="checkbox"/> 95. UNKNOWN	<input type="checkbox"/> 99. OTHER 463
MATERIALS AND CORROSION PROTECTION	<input checked="" type="checkbox"/> 1. BARE STEEL	<input type="checkbox"/> 6. FRP COMPATIBLE W/ 100% METHANOL	<input checked="" type="checkbox"/> 1. BARE STEEL
	<input type="checkbox"/> 2. STAINLESS STEEL	<input type="checkbox"/> 7. GALVANIZED STEEL	<input type="checkbox"/> 2. STAINLESS STEEL
	<input type="checkbox"/> 3. PLASTIC COMPATIBLE WITH CONTENTS	<input type="checkbox"/> 95. UNKNOWN	<input type="checkbox"/> 3. PLASTIC COMPATIBLE WITH CONTENTS
	<input type="checkbox"/> 4. FIBERGLASS	<input type="checkbox"/> 8. FLEXIBLE (HDPE)	<input type="checkbox"/> 4. FIBERGLASS
	<input type="checkbox"/> 5. STEEL W/ COATING	<input type="checkbox"/> 9. CATHODIC PROTECTION 454	<input type="checkbox"/> 5. STEEL W/ COATING
			<input type="checkbox"/> 6. FRP COMPATIBLE W/ 100% METHANOL
			<input type="checkbox"/> 7. GALVANIZED STEEL
			<input type="checkbox"/> 8. FLEXIBLE (HDPE)
			<input type="checkbox"/> 9. CATHODIC PROTECTION
			<input type="checkbox"/> 95. UNKNOWN 465
			<input type="checkbox"/> 99. OTHER
VII. PIPING LEAK DETECTION (Check all that apply)			
UNDERGROUND PIPING		ABOVEGROUND PIPING	
SINGLE WALL PIPING 466		SINGLE WALL PIPING 467	
PRESSURIZED PIPING (Check all that apply)		PRESSURIZED PIPING (Check all that apply)	
<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS	
<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST		<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST	
<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1 GPH)	
CONVENTIONAL SUCTION SYSTEMS		CONVENTIONAL SUCTION SYSTEMS (Check all that apply)	
<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PUMPING SYSTEM + TRIENNIAL PIPING INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PIPING AND PUMPING SYSTEM	
SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING)		SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING)	
<input type="checkbox"/> 7. SELF MONITORING		<input type="checkbox"/> 7. SELF MONITORING	
GRAVITY FLOW		GRAVITY FLOW (Check all that apply)	
<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 8. DAILY VISUAL MONITORING	
		<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)	
SECONDARILY CONTAINED PIPING		SECONDARILY CONTAINED PIPING	
PRESSURIZED PIPING (Check all that apply)		PRESSURIZED PIPING (Check all that apply)	
10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (Check one)		10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (check one)	
<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS		<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS	
<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION		<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION	
<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF		<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF	
<input type="checkbox"/> 11. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITH FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 11. AUTOMATIC LEAK DETECTOR	
<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)	
SUCTION/GRAVITY SYSTEM		SUCTION/GRAVITY SYSTEM	
<input type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS	
EMERGENCY GENERATORS ONLY (Check all that apply)		EMERGENCY GENERATORS ONLY (Check all that apply)	
<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS	
<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITHOUT FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST)	
<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)	
<input type="checkbox"/> 17. DAILY VISUAL CHECK		<input type="checkbox"/> 17. DAILY VISUAL CHECK	
VIII. DISPENSER CONTAINMENT			
DISPENSER CONTAINMENT	<input type="checkbox"/> 1. FLOAT MECHANISM THAT SHUTS OFF SHEAR VALVE	<input type="checkbox"/> 4. DAILY VISUAL CHECK	
DATE INSTALLED 468	<input type="checkbox"/> 2. CONTINUOUS DISPENSER PAN SENSOR + AUDIBLE AND VISUAL ALARMS	<input type="checkbox"/> 5. TRENCH LINER / MONITORING	
	<input type="checkbox"/> 3. CONTINUOUS DISPENSER PAN SENSOR WITH AUTO SHUT OFF FOR DISPENSER + AUDIBLE AND VISUAL ALARMS	<input type="checkbox"/> 6. NONE 489	
IX. OWNER/OPERATOR SIGNATURE			
I certify that the information provided herein is true and accurate to the best of my knowledge.			
SIGNATURE OF OWNER/OPERATOR	DATE		470
	August 29, 2002		
NAME OF OWNER/OPERATOR (print)	TITLE OF OWNER/OPERATOR		472
Cathy Keller - On Behalf of the Owner	Office Manager		
Permit Number (For local use only) 473	Permit Approved (For local use only)	474	Permit Expiration Date (For local use only) 475



UNIFIED PROGRAM CONSOLIDATED FORM
UNDERGROUND STORAGE TANK FORM
PAGE 1



(two pages per tank)

- TYPE OF ACTION (Check one item only)
- | | | | |
|---|--|---|---|
| <input type="checkbox"/> 1. NEW SITE PERMIT | <input type="checkbox"/> 4. AMENDED PERMIT
<i>(Specify reason - local use only)</i> | <input type="checkbox"/> 5. CHANGE OF INFORMATION
<i>(Specify change - local use only)</i> | <input type="checkbox"/> 6. TEMPORARY SITE CLOSURE |
| <input type="checkbox"/> 3. RENEWAL PERMIT | | | <input type="checkbox"/> 7. PERMANENTLY CLOSED SITE |
| | | | <input checked="" type="checkbox"/> 8. TANK REMOVED |

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) Wilfred & Wilma Garfinkle	FACILITY ID #
--	---------------

LOCATION WITHIN SITE (Optional) 2515 Blanding Avenue	431
--	-----

I. TANK DESCRIPTION			
TANK ID # Unknown	432	TANK MANUFACTURER Unknown	433
COMPARTMENTALIZED TANK		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<i>If "Yes", complete one page for each compartment.</i>			
DATE INSTALLED (YEAR/MO) Unknown	435	TANK CAPACITY IN GALLONS 1,500	436
NUMBER OF COMPARTMENTS		437	

ADDITIONAL DESCRIPTION (For local use only)	438
---	-----

II. TANK CONTENTS	
TANK USE <input checked="" type="checkbox"/> 1. MOTOR VEHICLE FUEL <i>(If marked, complete Petroleum Type)</i> <input type="checkbox"/> 2. NON-FUEL PETROLEUM <input type="checkbox"/> 3. CHEMICAL PRODUCT <input type="checkbox"/> 4. HAZARDOUS WASTE <i>(Includes Used Oil)</i> <input type="checkbox"/> 95. UNKNOWN	439
PETROLEUM TYPE <input type="checkbox"/> 1a. REGULAR UNLEADED <input type="checkbox"/> 1b. PREMIUM UNLEADED <input type="checkbox"/> 1c. MIDGRADE UNLEADED <input type="checkbox"/> 2. LEADED <input type="checkbox"/> 3. DIESEL <input type="checkbox"/> 4. GASOHOL <input type="checkbox"/> 5. JET FUEL <input type="checkbox"/> 6. AVIATION FUEL <input checked="" type="checkbox"/> 99. OTHER Heating Oil	440
COMMON NAME (from Hazardous Materials Inventory page)	441
CAS # (from Hazardous Materials Inventory page)	442

III. TANK CONSTRUCTION	
TYPE OF TANK (Check one item only) <input checked="" type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL	443
<input type="checkbox"/> 3. SINGLE WALL WITH EXTERIOR MEMBRANE LINER <input type="checkbox"/> 4. SINGLE WALL IN A VAULT <input type="checkbox"/> 5. SINGLE WALL WITH INTERNAL BLADDER SYSTEM <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER	

TANK MATERIAL - primary tank (Check one item only) <input checked="" type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 2. STAINLESS STEEL	444
<input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 5. CONCRETE <input type="checkbox"/> 6. FRP COMPATIBLE W/100% METHANOL <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER	

TANK MATERIAL - secondary tank (Check one item only) <input type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 2. STAINLESS STEEL	445
<input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 5. CONCRETE <input type="checkbox"/> 6. FRP COMPATIBLE W/100% METHANOL <input type="checkbox"/> 9. FRP NON-CORRODIBLE JACKET <input type="checkbox"/> 10. COATED STEEL <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER	

TANK INTERIOR LINING OR COATING (Check one item only) <input type="checkbox"/> 1. RUBBER LINED <input type="checkbox"/> 2. ALKYD LINED	446
<input type="checkbox"/> 3. EPOXY LINING <input type="checkbox"/> 4. PHENOLIC LINING <input type="checkbox"/> 5. GLASS LINING <input type="checkbox"/> 6. UNLINED <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER	

OTHER CORROSION PROTECTION IF APPLICABLE (Check one item only) <input type="checkbox"/> 1. MANUFACTURED CATHODIC PROTECTION <input type="checkbox"/> 2. SACRIFICIAL ANODE	447
<input type="checkbox"/> 3. FIBERGLASS REINFORCED PLASTIC <input type="checkbox"/> 4. IMPRESSED CURRENT <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER	

SPILL AND OVERFILL (Check all that apply)	YEAR INSTALLED 450	TYPE (For local use only) 451	OVERFILL PROTECTION EQUIPMENT: YEAR INSTALLED	452
<input type="checkbox"/> 1. SPILL CONTAINMENT <input type="checkbox"/> 2. DROP TUBE <input type="checkbox"/> 3. STRIKER PLATE			<input type="checkbox"/> 1. ALARM <input type="checkbox"/> 2. BALL FLOAT <input type="checkbox"/> 3. FILL TUBE SHUT OFF VALVE <input type="checkbox"/> 4. EXEMPT	

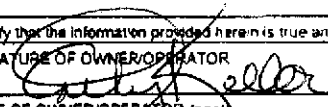
IV. TANK LEAK DETECTION	
IF SINGLE WALL TANK (Check all that apply): <input type="checkbox"/> 1. VISUAL (EXPOSED PORTION ONLY) <input type="checkbox"/> 2. AUTOMATIC TANK GAUGING (ATG) <input type="checkbox"/> 3. CONTINUOUS ATG <input type="checkbox"/> 4. STATISTICAL INVENTORY RECONCILIATION (SIR) + BIENNIAL TANK TESTING	453
<input type="checkbox"/> 5. MANUAL TANK GAUGING (MTG) <input type="checkbox"/> 6. VADOSE ZONE <input type="checkbox"/> 7. GROUNDWATER <input type="checkbox"/> 8. TANK TESTING <input type="checkbox"/> 99. OTHER	
IF DOUBLE WALL TANK OR TANK WITH BLADDER (Check one item only): <input type="checkbox"/> 1. VISUAL (SINGLE WALL IN VAULT ONLY) <input type="checkbox"/> 2. CONTINUOUS INTERSTITIAL MONITORING <input type="checkbox"/> 3. MANUAL MONITORING	454

V. TANK CLOSURE INFORMATION / PERMANENT CLOSURE IN PLACE		
ESTIMATED DATE LAST USED (YR/MO/DAY) Unknown	455	ESTIMATED QUANTITY OF SUBSTANCE REMAINING Unknown gallons
	456	TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	457	

UNDERGROUND STORAGE TANK FORM

PAGE 2

(Two pages per tank)

VI. PIPING CONSTRUCTION (Check all that apply)			
UNDERGROUND PIPING		ABOVEGROUND PIPING	
SYSTEM TYPE	<input type="checkbox"/> 1. PRESSURE	<input checked="" type="checkbox"/> 2. SUCTION	<input type="checkbox"/> 3. GRAVITY 458
CONSTRUCTION/MANUFACTURER	<input checked="" type="checkbox"/> 1. SINGLE WALL	<input type="checkbox"/> 3. LINED TRENCH	<input type="checkbox"/> 09. OTHER 460
	<input type="checkbox"/> 2. DOUBLE WALL MANUFACTURER	<input type="checkbox"/> 95. UNKNOWN	<input type="checkbox"/> 99. OTHER 463
MATERIALS AND CORROSION PROTECTION	<input checked="" type="checkbox"/> 1. BARE STEEL	<input type="checkbox"/> 6. FRP COMPATIBLE W/ 100% METHANOL	<input checked="" type="checkbox"/> 1. BARE STEEL
	<input type="checkbox"/> 2. STAINLESS STEEL	<input type="checkbox"/> 7. GALVANIZED STEEL	<input type="checkbox"/> 2. STAINLESS STEEL
	<input type="checkbox"/> 3. PLASTIC COMPATIBLE WITH CONTENTS	<input type="checkbox"/> 95. UNKNOWN	<input type="checkbox"/> 3. PLASTIC COMPATIBLE WITH CONTENTS
	<input type="checkbox"/> 4. FIBERGLASS	<input type="checkbox"/> 8. FLEXIBLE (HDPE)	<input type="checkbox"/> 4. FIBERGLASS
	<input type="checkbox"/> 5. STEEL W/ COATING	<input type="checkbox"/> 9. CATHODIC PROTECTION 454	<input type="checkbox"/> 5. STEEL W/ COATING
		<input type="checkbox"/> 6. FRP COMPATIBLE W/ 100% METHANOL	<input type="checkbox"/> 95. UNKNOWN 465
		<input type="checkbox"/> 7. GALVANIZED STEEL	
		<input type="checkbox"/> 8. FLEXIBLE (HDPE)	<input type="checkbox"/> 09. OTHER
		<input type="checkbox"/> 9. CATHODIC PROTECTION	
		<input type="checkbox"/> 95. UNKNOWN	
VII. PIPING LEAK DETECTION (Check all that apply)			
UNDERGROUND PIPING		ABOVEGROUND PIPING	
SINGLE WALL PIPING 456		SINGLE WALL PIPING 467	
PRESSURIZED PIPING (Check all that apply)		PRESSURIZED PIPING (Check all that apply)	
<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS	
<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST		<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST	
<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1 GPH)	
CONVENTIONAL SUCTION SYSTEMS		CONVENTIONAL SUCTION SYSTEMS (Check all that apply)	
<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PUMPING SYSTEM + TRIENNIAL PIPING INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PIPING AND PUMPING SYSTEM	
SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING)		SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING)	
<input type="checkbox"/> 7. SELF MONITORING		<input type="checkbox"/> 7. SELF MONITORING	
GRAVITY FLOW		GRAVITY FLOW (Check all that apply)	
<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 8. DAILY VISUAL MONITORING	
		<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)	
SECONDARILY CONTAINED PIPING		SECONDARILY CONTAINED PIPING	
PRESSURIZED PIPING (Check all that apply)		PRESSURIZED PIPING (Check all that apply)	
10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (Check one)		10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (check one)	
<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS		<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS	
<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION		<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION	
<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF		<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF	
<input type="checkbox"/> 11. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITH FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 11. AUTOMATIC LEAK DETECTOR	
<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)	
SUCTION/GRAVITY SYSTEM		SUCTION/GRAVITY SYSTEM	
<input type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS	
EMERGENCY GENERATORS ONLY (Check all that apply)		EMERGENCY GENERATORS ONLY (Check all that apply)	
<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS	
<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITHOUT FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST)	
<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)	
<input type="checkbox"/> 17. DAILY VISUAL CHECK		<input type="checkbox"/> 17. DAILY VISUAL CHECK	
VIII. DISPENSER CONTAINMENT			
DISPENSER CONTAINMENT	<input type="checkbox"/> 1. FLOAT MECHANISM THAT SHUTS OFF SHEAR VALVE	<input type="checkbox"/> 4. DAILY VISUAL CHECK	
DATE INSTALLED 468	<input type="checkbox"/> 2. CONTINUOUS DISPENSER PAN SENSOR + AUDIBLE AND VISUAL ALARMS	<input type="checkbox"/> 5. TRENCH LINER / MONITORING	
	<input type="checkbox"/> 3. CONTINUOUS DISPENSER PAN SENSOR WITH AUTO SHUT OFF FOR DISPENSER + AUDIBLE AND VISUAL ALARMS	<input type="checkbox"/> 6. NONE 469	
IX. OWNER/OPERATOR SIGNATURE			
I certify that the information provided herein is true and accurate to the best of my knowledge			
SIGNATURE OF OWNER/OPERATOR	ATE	470	
	August 29, 2002		
NAME OF OWNER/OPERATOR (print) 471	TITLE OF OWNER/OPERATOR	472	
Cathy Keller - On Behalf of the Owner	Office Manager		
Permit Number (For local use only) 473	Permit Approved (For local use only)	474	Permit Expiration Date (For local use only) 475



UNIFIED PROGRAM CONSOLIDATED FORM
UNDERGROUND STORAGE TANK FACILITY FORM

(one page per site)



- TYPE OF ACTION (Check one item only)
- | | | | |
|---|--|--|---|
| <input type="checkbox"/> 1. NEW SITE PERMIT | <input type="checkbox"/> 3. RENEWAL PERMIT | <input type="checkbox"/> 5. CHANGE OF INFORMATION (Specify change) - | <input type="checkbox"/> 7. PERMANENTLY CLOSED SITE |
| <input type="checkbox"/> 2. DISTRIBUTOR | <input type="checkbox"/> 4. AMENDED PERMIT | (local use only) _____ | <input checked="" type="checkbox"/> 8. TANK REMOVED |
| <input type="checkbox"/> 3. FARM | <input type="checkbox"/> 6. TEMPORARY SITE CLOSURE | | |
- 400

I. FACILITY / SITE INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) Wilfred & Wilma Garfinkle		FACILITY ID #	
NEAREST CROSS STREET Blanding Avenue		FACILITY OWNER TYPE	
BUSINESS TYPE <input type="checkbox"/> 1. GAS STATION <input type="checkbox"/> 3. FARM <input checked="" type="checkbox"/> 5. COMMERCIAL <input type="checkbox"/> 2. DISTRIBUTOR <input type="checkbox"/> 4. PROCESSOR <input type="checkbox"/> 6. OTHER		<input type="checkbox"/> 1. CORPORATION <input type="checkbox"/> 4. LOCAL AGENCY/DISTRICT* <input checked="" type="checkbox"/> 2. INDIVIDUAL <input type="checkbox"/> 5. COUNTY AGENCY* <input type="checkbox"/> 3. PARTNERSHIP <input type="checkbox"/> 6. STATE AGENCY* <input type="checkbox"/> 7. FEDERAL AGENCY*	
TOTAL NUMBER OF TANKS AT SITE 2 (two)	Is facility on Indian Reservation or trustlands? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If owner of UST is public agency, name of supervisor of division, section or office which operates the UST. (This is the contact person for the tank records.)	

II. PROPERTY OWNER INFORMATION

PROPERTY OWNER NAME Wilfred & Wilma Garfinkle		PHONE (510) 813-9951
MAILING OR STREET ADDRESS 2938 Northwood Drive		
CITY Alameda	STATE CA	ZIP CODE 94501
PROPERTY OWNER TYPE <input type="checkbox"/> 1. CORPORATION <input checked="" type="checkbox"/> 2. INDIVIDUAL <input type="checkbox"/> 4. LOCAL AGENCY / DISTRICT <input type="checkbox"/> 6. STATE AGENCY <input type="checkbox"/> 3. PARTNERSHIP <input type="checkbox"/> 5. COUNTY AGENCY <input type="checkbox"/> 7. FEDERAL AGENCY		

III. TANK OWNER INFORMATION

TANK OWNER NAME Same as # 2		PHONE
MAILING OR STREET ADDRESS		
CITY	STATE	ZIP CODE
TANK OWNER TYPE <input type="checkbox"/> 1. CORPORATION <input type="checkbox"/> 2. INDIVIDUAL <input type="checkbox"/> 4. LOCAL AGENCY / DISTRICT <input type="checkbox"/> 6. STATE AGENCY <input type="checkbox"/> 3. PARTNERSHIP <input type="checkbox"/> 5. COUNTY AGENCY <input type="checkbox"/> 7. FEDERAL AGENCY		

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER

TY (TK) HQ	4	4	-	Call (916) 322-9669 if questions arise
------------	---	---	---	--

V. PETROLEUM UST FINANCIAL RESPONSIBILITY

INDICATE METHOD(S)	<input checked="" type="checkbox"/> 1. SELF-INSURED	<input type="checkbox"/> 4. SURETY BOND	<input type="checkbox"/> 7. STATE FUND	<input type="checkbox"/> 10. LOCAL GOVT MECHANISM
	<input type="checkbox"/> 2. GUARANTEE	<input type="checkbox"/> 5. LETTER OF CREDIT	<input type="checkbox"/> 8. STATE FUND & CFO LETTER	<input type="checkbox"/> 99. OTHER: _____
	<input type="checkbox"/> 3. INSURANCE	<input type="checkbox"/> 6. EXEMPTION	<input type="checkbox"/> 9. STATE FUND & CO	

VI. LEGAL NOTIFICATION AND MAILING ADDRESS

Check one box to indicate which address should be used for legal notifications and mailing. Legal notifications and mailings will be sent to the tank owner unless box 1 or 2 is checked.

1. FACILITY 2. PROPERTY OWNER 3. TANK OWNER

VII. APPLICANT SIGNATURE

Certification: I certify that the information provided herein is true and accurate to the best of my knowledge.

SIGNATURE OF APPLICANT 	DATE August 29, 2002	PHONE (415) 512-1555
NAME OF APPLICANT (print) Cathy Keller - On Behalf of the Owner	TITLE OF APPLICANT Office Manager	

STATE UST FACILITY NUMBER (For local use only)	428	1998 UPGRADE CERTIFICATE NUMBER (For local use only)	429
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State of California

Contractors State License Board

Pursuant to Chapter 9 of Division 3 of the Business and Professions Code
and the Rules and Regulations of the Contractors State License Board,
the Registrar of Contractors does hereby issue this license to:

GOLDEN GATE TANK REMOVAL INC



to engage in the business or act in the capacity of a contractor
in the following classification(s):

A - GENERAL ENGINEERING CONTRACTOR
C-8 - CONCRETE
HAZ - HAZARDOUS SUBSTANCES REMOVAL
HIC - HOME IMPROVEMENT CERTIFICATION

Witness my hand and seal this day,

February 28, 2001

Issued March 26, 1991

Reissued February 27, 2001



State of
California
Department of
Consumer
Affairs

Stephen P. Sands
Registrar of Contractors

Reassigned 616521

License Number

Signature of Licensee

Signature of License Qualifier

This license is the property of the Registrar of Contractors, is not
transferrable, and shall be returned to the Registrar upon demand
when suspended, revoked, or invalidated for any reason. It becomes
void if not renewed.



**STATE
COMPENSATION
INSURANCE
FUND**

P.O. BOX 807, SAN FRANCISCO, CA 94101-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

ISSUE DATE: 10-01-01

POLICY NUMBER: 571-01 UNIT 0007200
CERTIFICATE EXPIRES: 10-01-02

GOLDEN GATE TANK REMOVAL
255 SHIPLEY STREET
SAN FRANCISCO CA 94107

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon 30 days' advance written notice to the employer.

We will also give you 30 days' advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance is not an insurance policy and does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of any contract or other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

Kenneth C. Bollier
PRESIDENT

EMPLOYER'S LIABILITY LIMIT INCLUDING DEFENSE COSTS: \$1,000,000.00 PER OCCURRENCE.

ENDORSEMENT #2085 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE 10/01/01 IS ATTACHED TO AND FORMS A PART OF THIS POLICY.

EMPLOYER

LEGAL NAME

GOLDEN GATE TANK REMOVAL INC.
255 SHIPLEY ST
SAN FRANCISCO CA 94107

GOLDEN GATE TANK REMOVAL, INC

PRINTED: 09-17-01 P0408



**ATTENTION: Alameda County
Environmental Health Services**

**Health Permit Application
Underground Tank Removal**

**2515 Blanding Avenue
Alameda, CA 94501**

August 27, 2002

904

**Golden Gate Tank Removal, Inc.
255 Shipley Street
San Francisco, California 94107**

Job # 8259



**SITE SAFETY PLAN
UNDERGROUND TANK REMOVALS**

**2515 BLANDING AVENUE
ALAMEDA, CALIFORNIA 94501**

AUGUST 29, 2002

**GOLDEN GATE TANK REMOVAL, INC.
255 SHIPLEY STREET
SAN FRANCISCO, CALIFORNIA 94107**

PROJECT # 8259

SITE HAZARD INFORMATION

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR THE SITE

Owners Name: Wilfred & Wilma Garfinkle
Site Address: 2515 Blanding Avenue
Alameda, CA 94501
Directions to Site: Cross Street is: Everette Avenue

Consultant On Site: Golden Gate Tank Removal, Inc. Phone number: 415/512-1555
Site Safety Officer: Salvador Mora Phone Number: 415/512-1555
Type of Facility: _____ Mobile Number: (415) 559-3092
Site Activities: Drilling construction Tank Excavation Soil Excavation
 Work in Traffic Area Groundwater Extraction Vapor Extraction Above Ground Remediation
 Other: Tank Removals

Hazardous Substances

Name (CAS#)	Expected Concentration	Health Affects
<u>Gasoline</u>	<u>Minimal</u>	_____
<u>Heating Oil</u>	<u>Minimal</u>	_____

Physical Hazards

Noise Excavations/Trenches
 Traffic Other: _____
 Underground Hazards _____
 Overhead Lines _____
Potential Explosions and Fire hazards: _____

Level of Protection Equipment

A B C D See Personal Protective Equipment

Personal Protective Equipment

R = Required A = As Needed

<u>R</u> Hard Hat	<u>A</u> Safety Eye wear (Type) _____
<u>A</u> Safety Boots	<u>A</u> Respirator (Type) <u>1/2 Face</u>
<u>R</u> Orange Vest	<u>A</u> Filter (Type) <u>Carbon</u>
<u>A</u> Hearing Protection	<u>A</u> Gloves (Type) <u>Leather</u>
_____ Tyvek Coveralls	_____ Other _____

SITE HAZARD INFORMATION

Monitoring Equipment On Site

- Organic Vapor Analyzer
- Air Sampling Pump
- Oxygen Meter
- Combustible Gas Meter
- H2S Meter
- Other _____

Site Control Measures Normal Pedestrian, Orange Cones, Traffic Signs

Decontamination Procedures Warm Water Soap

Hospital/Clinic Alameda Hospital Phone (510) 522-3700

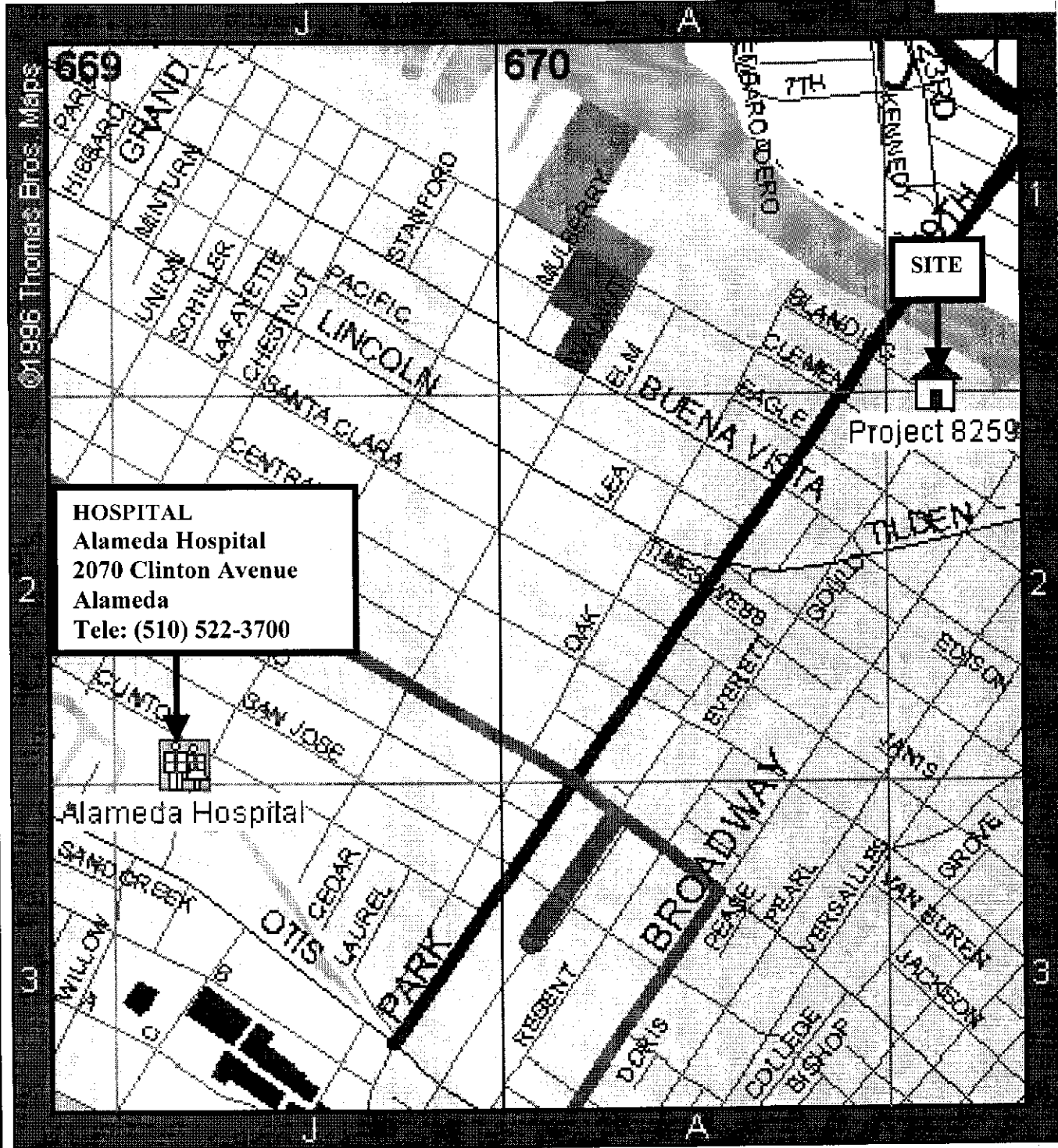
Hospital Address 2070 Clinton Avenue

Paramedic 911 Fire Dept. 911 Police Dept. 911

Emergency/Contingency Plans & Procedures See Safety Procedures

Site Hazard Information Provided By: Cathy Keller / On Behalf of the Owner Phone: (415) 512-1555

Signature:  Date: August 29, 2002



HOSPITAL
 Alameda Hospital
 2070 Clinton Avenue
 Alameda
 Tele: (510) 522-3700

Alameda Hospital

GOLDEN GATE TANK REMOVAL

255 Shipley Street
 San Francisco, California 94107
 Telephone (415) 512 1555 Fax (415) 512 0964

HOSPITAL MAP

2515 Blanding Avenue
 Alameda, CA 94501

Project 8259	By: Cathy	Not to scale	August 2002	Figure H
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1.0 PURPOSE

This operating procedure establishes minimum procedures for protecting personnel against the hazardous properties during the performance of the removal of an underground storage tank and related activities. All employees and subcontractors of Golden Gate Tank Removal, Incorporated shall follow this plan. This plan is developed to work with the California Occupational Safety and Health Code to quickly prepare and issue a site safety plan for the removal of an underground storage tank and the related activities.

2.0 APPLICABILITY

This procedure is applicable to the removal of underground storage tanks and the related activities. Listed below are some of, but not limited to, the activities and substances that may be encountered during the project.

Activities:

The work to be performed will include: the excavation of potentially contaminated soil in order to expose the underground storage tank, the stock piling of soil, the removal and manifested disposal of the tank, the recovery of soil samples from the excavation and stockpiled soil, and the backfill and resurfacing of the excavation.

Substances:

- Diesel Fuel Oil (Home Heating Oil)
- Lead and Unleaded Gasoline
- Diesel Fuel
- Motor Oil (Used and Unused)

3.0 RESPONSIBILITY AND AUTHORITY

Personnel responsible for project safety are the business unit's Health and Safety Officer (HSO), the Project Manager (PM), and the Site Safety Officer (SSO).

The HSO is responsible for reviewing and approving the site safety plan and advising both the PM and SSO on health and safety matters. The HSO has the authority to audit compliance with the provisions of the site safety plan, suspend work or modify work practices for safety reasons, and to dismiss from the site any individual whose conduct on-site endangers the health and safety of themselves and/or others.

The PM is responsible for having the site safety plan prepared and distributed to all field personnel and to an authorized representative of each firm contracted to assist with the on-site work.

The SSO is responsible for assisting the PM with on-site implementation of site safety plan. The SSO may suspend work anytime he/she determines that the provisions of the site safety plan are inadequate to ensure worker safety and inform the PM and HSO of individuals whose on-site behavior jeopardizes their health and safety or the health and safety of others.

4.0 HAZARD EVALUATION/CRITERIA

Chemical

The general types of chemical hazards associated with this project are exposure to various chemical substances, including but not limited to, petroleum hydrocarbon liquids and vapors, caustic and acidic mists, liquids and solids.

Exposure to elevated levels of hydrocarbon vapors presents potential health risks that need to be properly controlled. Work practices and methods will be monitored to limit exposures. Where elevated exposures persist, respiratory protection will be the primary control method to protect personnel from inhalation of hydrocarbon vapors.

Physical

The general types of physical hazards associated with this project are:

- Mechanical hazards: swinging objects, machinery, etc.
- Physical lifting, shoveling, climbing (ladder), etc.
- Electrical hazards: buried cables and overhead power lines
- Thermal hazards: heat stress, and heat exhaustion
- Acoustical hazards: excessive noise created by machinery

Flammability

The general types of flammable hazards associated with this project are fire hazards: natural gas and product lines, flammable petroleum hydrocarbons, and motor driven equipment.

Petroleum distillate fuels possess two intrinsic hazardous properties, namely, flammability and toxicity. The flammable property of the oil and fuels presents a far greater hazard to field personnel than toxicity because it is difficult to protect against and can result in catastrophic consequences. Being flammable, the vapors of volatile components of crude oil and the fuels can be explosive when confined.

Eliminating any one of the three factors needed to produce combustion can minimize the probability of fire and explosion. Two of the factors, ignition source and vapor concentration, can be controlled in many cases. Prohibiting open fires and smoking on-site, installing spark arrestors on engines and turning off engines when ladders are approached can control ignition. Introducing dry ice (solid carbon dioxide) in the tank can reduce vapor concentrations in the headspace; the carbon dioxide gas will displace the combustible vapors.

5.0 HEALTH AND SAFETY DIRECTIVES

Site-Specific Safety Briefing

Before fieldwork begins, all field personnel, including subcontractor employees must be briefed on their work assignments and safety procedures contained in this document.

Personal Protective Equipment

Each field team member shall have on-site, before the commencement of work, the following personal protective equipment:

- NIOSH-approved full or half face respirator with organic vapor cartridges (cartridges will be supplied pending the work criteria).
- Hard-hat and safety vest
- Leather work boots, steel toed boots are strongly suggested
- Leather work gloves
- Ear protection, earphone type or ear plugs
- Eye protection, safety glasses and splash proof goggles

Equipment Usage

Hard-hats and safety vests must be worn at all times when on the job site.

Safety goggles must be worn when working within 10 feet of any operating heavy equipment (e.g., jackhammer, and backhoe). Splash-proof goggles or face shields must be worn whenever product quantities of fuel are encountered.

Respirators must be worn whenever total airborne hydrocarbon levels in the breathing zone of field personnel reach or exceed a 15-minute average of 25 PPM. If total airborne hydrocarbons in the breathing zone exceed 100 PPM, work must be suspended, personnel directed to move a safe distance from the source, and the HSO or designee consulted.

Chemical-resistant safety boots must be worn during the performance of work where surface soil is obviously contaminated.

Monitoring

Personal exposure to ambient airborne hazards will be monitored to assure that personnel exposures do not exceed acceptable limits and that appropriate selection of protective equipment items is made. If concentrations approach criteria levels, all personnel will be notified of possible site safety changes. Audits will be conducted by the Safety Officer to insure compliance with the Safety Plan and to provide additional support as required.

Area Control

Access to hazardous and potential hazardous work sites must be controlled to reduce the probability of occurrence of physical injury and chemical exposure of field personnel, visitors and the public. A hazardous or potential hazardous area includes area where a tank removal or related activity is being performed and/or field personnel are required to wear respirators.

Cordons, barricades, and/or emergency traffic cones or posts, depending on conditions must identify the boundaries of hazardous and potentially hazardous areas. If such areas are left unattended, signs warning of the danger and forbidding entry must be placed around the perimeter if the areas are accessible to the public. Trenches and other large holes must be guarded with wooded or metal barricades spaced no further than 20 feet apart and connected with yellow caution tape. The barricades must be placed no less than two feet from the edge of the excavation or hole.

Entry to hazardous areas shall be limited to individuals who must work in those areas. Unofficial visitors must not be permitted to enter hazardous areas while work in those areas is in progress.

Official visitors should be discouraged from entering hazardous areas, but may be allowed to enter only if they agree to abide by the safety officer and are informed of the potential dangers that could be encountered in the areas.

Decontamination

Field decontamination of personnel and equipment is not required except when contamination is obvious (visual or by odor). Recommended de-contamination procedures follow:

Personnel

Gasoline, heating oil, diesel and oil should be removed from skin using a mild detergent and water. Hot water is more effective than cold. Liquid dishwashing detergent is more effective than hand soap. If weathered to an asphaltic condition, mechanics waterless hand cleaner is recommended for initial cleaning followed by detergent and water.

Equipment

Gloves, respirators, hard-hats, boots and goggles should be cleaned as described under personnel. However, if boots do not become clean after washing with detergent and water, they should be cleaned with a strong solution of trisodium phosphate and hot water. If this fails, clean with diesel oil followed by detergent and water to remove diesel oil.

Sampling equipment, augers, vehicle undercarriages, and tires should be steamed cleaned. The steam cleaner is a convenient source of hot water for personnel and protective equipment cleaning.

6.0 SAFETY AND HEALTH TRAINING

Each individual on the job site should have been or is preparing to attend the 40 hour Hazardous Materials Handling Course as required by the California Occupational Safety and Health Association. In addition, the HSO conducts BI-weekly health and safety meetings.

Each morning before fieldwork begins, all field personnel, including subcontractor employees, must attend the site-specific safety briefing at their work site to receive assignments and safety procedures.

7.0 RECORD KEEPING REQUIREMENT

The following record keeping requirements will be maintained in the program file indefinitely. The particular organizations responsible for these records are also listed.

- Copy of this Health and Safety Plan – Golden Gate Tank Removal, Incorporated
- Health and Safety Training Certification Form for Site Safety Officer - Golden Gate Tank Removal
- Any accident/illness report forms – All parties
- Personal sampling results - Golden Gate Tank Removal
- Documentation of employees medical ability to perform work and wear respirators – All parties

Prepared By:


Cathy Keller
Golden Gate Tank Removal, Inc.

RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR UNDERGROUND TANK LEAKS

For Use by Unidocs Member Agencies or where approved by your Local Jurisdiction

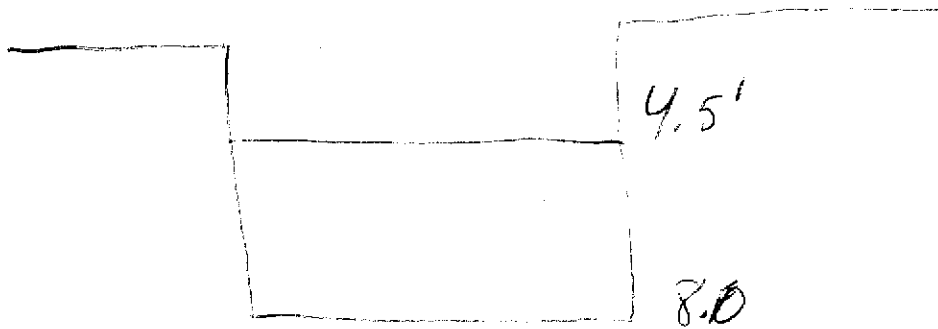
TABLE #2
REVISED 1 MARCH 1999

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u> (SW-846 METHOD)		<u>WATER ANALYSIS</u> (Water/Waste Water Method)	
Gasoline (Leaded and Unleaded)	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by	8260 for soil and	524.2/624 (8260) for water	
	TOTAL LEAD	AA	TOTAL LEAD	AA
	--Optional--			
	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
Unknown Fuel	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by	8260 for soil and	524.2/624 (8260) for water	
TOTAL LEAD	AA	TOTAL LEAD	AA	
	--Optional--			
	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
Diesel, Jet Fuel, Kerosene, and Fuel/Heating Oil	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by	8260 for soil and	524.2/624 (8260) for water	
	CL HC	8260	CL HC	524.2/624 (8260)
Chlorinated Solvents	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
Nonchlorinated Solvents	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
Waste, Used, or Unknown Oil	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	O&G	9070	O&G	418.1
	BTEX	8260	BTEX	524.2/624 (8260)
	CL HC	8260	CL HC	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by	8260 for soil and	524.2/624 (8260) for water	
	METALS (Cd, Cr, Pb, Ni, Zn) by	ICAP or AA for soil water		
	PCB*, PCP*, PNA, CREOSOTE by	8270 for soil and	524/625 (8270) for water	
		If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)		

NOTES:

1. 8021 replaces old methods 8020 and 8010
2. 8260 replaces old method 8240
3. Reference: Table B-1 in Appendix B of "Expedited Site Assessment Tools for Underground Storage Tank Sites: A Guide for Regulators" (EPA 510-B-97-001).

11-27-02



SIDEWALK STREET SIDE 4.5 FT

Print out sent by: EC

HAZARDOUS MATERIALS

GENERATOR - HMBP - UST - LOP
Site List as of 02/19/2003
City of Alameda

ALAMEDA COUNTY
page 1

StID	Name of Site	Site Address	Zip	STATUS PER PROG.			LastInsp					
				G	H	U		StW	D/R	L	PBR	
904	Clamp-Swing Pricing Running Count:	2515 Blanding Ave	501 C M									06/13/1999

NOTE: A file exists for each program category if there is a letter beneath it.

STATUS DESCRIPTIONS:

G ... GEN:	C = Current	I = Inactive	N = Non Generator	Q = Need Insp/Fac. Survey	R = Returned Mail
H ... HMBP:	C = Part II M = Part 1 E = Exempt	I = Inactive	N = Not Eligible	P = Need HMBP Part 1 or 2	R = Returned Mail
U ... UGT:	C = UGT Forms Submitted E = Exempt	N = No UGT Present	F = Need UGT Application	R = Removed UST	
StW ..Storm:	Y = Storm Inspection by this office	I = Inactive			R = Returned Mail
D/R .DepRef:	R = Tank Removal	M = Site Mitigation	MOD = Modification		
L ... LOP:	A = Active	I = Inactive			