

ACC Environmental Consultants, Inc.

Letter of Transmittal

7977 Capwell Drive, Suite 100
 Oakland, California 94621
 Phone: (510) 638-8400
 Fax: (510) 638-8404
 email: tbausman@accenv.com

Date: Tuesday, April 08, 2003

Alameda County
 APR 11 2003
 Environmental Health

From: Trevor Bausman
 Environmental Division

To: Mr. Victor Ivry
 C/O Pipeco Holding
 29 Brookside Road
 Orinda, California 94563
925/254-1762
925/254-1940 fax

RE: 1685 24th Street, Oakland, California

Pages: Work Plan with attachments (excluding this cover page)

Comments:

Enclosed is the Work Plan to conduct a subsurface investigation at 1685 24th Street, Oakland, California.

ACC has communicated with Hernan Gomez of the Oakland Fire Services Agency regarding this site, who has relayed that the Alameda County Health Care Services Agency will eventually be the agency to oversee this property. In order to hasten the oversight agency response approving the Work Plan, ACC has forwarded one copy to both Hernan Gomez and Ms. Dona Drogos of the ACHCSA.


Please call me directly at (510) 638-8400 ext. 113 if you have any questions regarding this project.

We are sending you the following items:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Draft | <input type="checkbox"/> Final | <input type="checkbox"/> Survey Documents | <input type="checkbox"/> Prints / Drawings |
| <input type="checkbox"/> Change Order | <input type="checkbox"/> Analytical Results | <input type="checkbox"/> Records | <input type="checkbox"/> Specifications |
| <input checked="" type="checkbox"/> Other: Work Plan | | | |

Transmitted as checked below:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> For approval | <input type="checkbox"/> Approved as submitted | <input type="checkbox"/> Resubmit for approval | <input type="checkbox"/> By US Mail |
| <input checked="" type="checkbox"/> For your use | <input type="checkbox"/> Approved as noted | <input type="checkbox"/> Submit for distribution | <input type="checkbox"/> By Express Mail |
| <input type="checkbox"/> As required | <input type="checkbox"/> Returned for corrections | <input type="checkbox"/> As corrected | <input type="checkbox"/> Hand-delivered |
| <input type="checkbox"/> Other: | <input type="checkbox"/> Returning loaned items | <input type="checkbox"/> By facsimile | |

Signed: 

Distribution: OFSA / ACHCSA

April 8, 2003

Mr. Victor Ivry
c/o Pipeco Holding
29 Brookside Road
Orinda, California 94563

RE: Work Plan – Additional Subsurface Investigation
1685 24th Street, Oakland, California
ACC Project Number: 6744-001.00

Dear Mr. Ivry:

ACC Environmental Consultants, Inc., (ACC) presents this Work Plan (WP) to perform additional subsurface investigation at 1685 24th Street, Oakland, California (Site). The purpose is to further characterize suspect petroleum hydrocarbon impacts in soil and groundwater in the vicinity of seven former underground storage tanks (USTs) identified at the Site. ACC understands that the Oakland Fire Service Agency will likely forward this case to the Alameda County Health Care Services Agency (ACHCSA) for regulatory oversight. In order to facilitate timely approval of the WP, ACC is also forwarding a copy of the WP directly to the ACHCSA and will follow-up with them as the lead regulatory agency.

INTRODUCTION

The general goals of this additional subsurface investigation will be to: 1) advance 12 exploratory soil borings to further characterize soil and groundwater in the vicinity of the former underground storage tanks (USTs); 2) further investigate the potential for vertical and horizontal migration of petroleum hydrocarbons in the subsurface; 3) obtain additional data regarding human health and ecological risk associated with residual petroleum hydrocarbons in the subsurface; and 4) prepare a report of findings for submission to the ACHCSA as the lead regulatory agency.

BACKGROUND

The subject property is bound by 24th Street to the north, Willow Street to the west, and the Pacific Pipe Company (PPC) pipe storage yards to the east and south (Figure 1). Circa 1966 to 1990, the subject property was utilized as a taxicab maintenance facility. From 1990 to the present, automotive repair operations have been conducted at the site by Lee's Auto Shop. In April 1987, seven underground storage tanks (USTs) were reportedly removed from the Site. According to records obtained at the Oakland Fire Department Office of Emergency Services, three 1,000 gallon gasoline USTs, two 8,000-gallon USTs, and two 7,500-gallon USTs were permitted for the Site. UST removal records indicate that two 7,500-gallon gasoline USTs, two 10,000-gallon gasoline USTs, and one 550-gallon waste oil tank were removed. While exact removed UST locations are unknown, they have been approximated on Figure 2.

Mr. Victor Ivry
April 8, 2003
Page 2

A copy of the information obtained during file review at the Oakland Fire Department is attached.

ACC conducted an initial subsurface investigation at the Site in August 2002. Subsurface soil and groundwater characterization was requested by another party for due diligence purposes due to historical site use and documented USTs at the Site. In order to confirm suspect soil and groundwater impacts from the former USTs, ACC located and advanced seven exploratory soil borings to collect representative soil and grab groundwater samples. Soil boring TB-1 and TB-2 were advanced on August 2, 2002 and "step-out" soil borings B25 through B29 were advanced on August 12, 2002. Field indications and analytical results of gasoline impact were evident in several soil and groundwater samples.

TPHg was reported in the grab groundwater sample from soil boring TB-1 at 5,000 ppb with relatively minor associated BTEX. TEPH was reported in sample TB-1-W at 2,000 ppb. TPHg was reported in soil in soil borings B25, B28, and B29 at concentrations ranging from 36 to 190 ppm. Traces of free-phase floating product (free product) were observed on groundwater in soil boring B25, as evidenced by grab groundwater sample analytical results in B25-W. The reported concentrations of TPHg and BTEX were significant but localized. Groundwater was generally encountered at approximately 7.5 feet bgs.

Former investigation conclusions

TPHg, BTEX, and TEPH as diesel were the primary constituents of concern identified in soil and groundwater. Subsurface impacts were not entirely characterized but appear to be largely localized to the general vicinity of the former USTs and horizontal and vertical migration potential is estimated to be minimal. Generally, sample analytical results indicate a substantial release from the former USTs. TPHg and BTEX concentrations are above regulatory action levels and may represent an unacceptable human health risk and/or the necessity for site use restrictions. In addition, HVOCs were reported in one groundwater sample at low concentrations but indicate that groundwater may be impacted by halogenated solvents originating from the subject site.

A copy of ACC's August 21, 2002 *Subsurface Investigation Report* is attached.

SCOPE OF WORK

ACC proposes the following scope of work to further characterize subsurface conditions in the vicinity of the former USTs,:

- Advance 12 proposed exploratory soil borings to total depths of approximately 8 to 16 feet below ground surface (bgs) to log encountered soils and collect representative media samples;

- Collect representative soil and grab groundwater samples from the logged, continuously cored soil borings, and prepare a cross section as shown on Figure 2;
- Submit each soil and grab groundwater sample to a state certified analytical laboratory for analysis of TPHg, BTEX, and MTBE by EPA Method 8260B and select soil and grab groundwater samples for analysis of total extractable petroleum hydrocarbons by EPA Method 3510/8015M and HVOCs by ; and
- Prepare a letter report of findings for submission to the ACHCSA.

All work will be performed according to Tri-Regional Guidelines set forth by the Regional Water Quality Control Board, San Francisco Bay Region (RWQCB) and standard ACC sampling protocols (attached).

RATIONALE FOR PROPOSED SCOPE OF WORK

ACC proposes to advance 12 Geoprobe[®] exploratory soil borings to total depths of approximately 16 bgs. Proposed soil boring locations are illustrated on Figure 2. The primary goal of obtaining data from these sampling locations is to further characterize soil and groundwater conditions in the vicinity of the former UST locations. Based on a UST depth of 8 to 10 feet bgs and a groundwater depth of approximately 8 feet bgs, ACC believes the primary migration pathway is in groundwater. Since exact locations of the removed USTs are unknown, these proposed soil boring locations are estimated to provide representative data primarily for groundwater. Soil impacts are estimated to be minimal and logged encountered soils will be represented on a cross section along the estimated direction of groundwater flow.

The secondary goal of this investigation is to assess potential human health risk associated with residual gasoline constituents in soil and groundwater. ACC proposes to compare sample analytical results with petroleum hydrocarbon risk-based screening levels (RBSLs) promulgated by the RWQCB. Due to the lack of mitigating factors and the likely scenario of long-term commercial site use, RBSLs appear appropriate for a Tier 1 risk evaluation.

The soil borings will be continuously cored and soil will be logged and screened for field indications of contamination. Vadose and saturated soils will be specifically logged for their estimated permeability and migration potential. Based on soil screening results, selected representative soil sample will be prepared for analysis. Soil screening will be done with a calibrated ppbRAE PID. This PID measures volatile constituents in air in the ppb range and is highly effective at prioritizing potential soil samples for analysis. Soil samples exhibiting the highest PID readings, or soil samples collected immediately above first encountered groundwater will be prepared for analysis. Proposed sample analyses are summarized in Table 1.

TABLE 1 - PROPOSED ANALYSES

Soil Boring	Depth	Matrix	Constituent Analysis
TB-3	7.0-7.5	Soil	TPHg, BTEX, TEPH
	8.0-12.0	Water	TPHg, BTEX, TEPH, HVOCs
TB-4	7.0-7.5	Soil	TPHg, BTEX, TEPH
	8.0-12.0	Water	TPHg, BTEX, TEPH, HVOCs
TB-5	7.0-7.5	Soil	TPHg, BTEX, TEPH
	8.0-12.0	Water	TPHg, BTEX, TEPH
TB-6	8.0-12.0	Water	TPHg, BTEX,
TB-7	8.0-12.0	Water	TPHg, BTEX, TEPH, HVOCs
TB-8	7.0-7.5	Soil	TPHg, BTEX
TB-9	7.0-7.5	Soil	TPHg, BTEX
	8.0-12.0	Water	TPHg, BTEX
TB-10	7.0-7.5	Soil	TPHg, BTEX,
TB-11	7.0-7.5	Soil	TPHg, BTEX,
	8.0-12.0	Water	TPHg, BTEX,
TB-12	7.0-7.5	Soil	TPHg, BTEX,
	7.0-7.5	Soil	TPHg, BTEX
TB-13	7.0-7.5	Soil	TPHg, BTEX
	8.0-12.0	Water	TPHg, BTEX
TB-14	8.0-12.0	Water	TPHg, BTEX, TEPH, HVOCs

DRILLING PROGRAM

A drilling permit will be obtained from the Alameda County Public Works Agency (ACPWA) prior to fieldwork. The proposed soil boring locations are illustrated on Figure 2. All soil borings will be clearly marked and outlined in white paint. Underground Service Alert will be notified at least 2 business days prior to performing drilling activities.

Exploratory soil borings will be advanced in a manner similar to the previously advanced exploratory soil borings. The soil borings will be advanced using a hydraulically driven Geoprobe[®] sampling tool equipped with 2.0-inch inside diameter clear acetate liners. Drilling will be performed under the direction of a Staff Geologist, and the subsurface materials in the borings will be identified and logged according to the Unified Soil Classification System. The sampling probe and rods will be pre-cleaned prior to use and between sample drives by washing them with a trisodium phosphate and potable water solution, a potable water rinse, and distilled water rinse. The work will be conducted in one day and soil cuttings will not be generated.

Grab groundwater samples will be collected in select proposed borings. Samples will be collected with the use of a temporary stainless steel screen. The pre-cleaned HydroPunch[®] tool will be hydraulically driven to the desired depth, retracted, and the 4-foot long screen exposed to the formation. Water samples will then be collected using disposable polyethylene tubing equipped with a

Mr. Victor Ivry
April 8, 2003
Page 5

check valve or bailed with a polyethylene bailer inserted into the HydroPunch tool. The grab groundwater samples will be placed in approved, laboratory-supplied sample vials without headspace, sealed, and stored in a pre-chilled, insulated container pending transport to a state-certified analytical laboratory. Every effort will be made to minimize disturbance of the groundwater samples prior to placement in the sample containers and maintaining the samples at the four degrees Celsius prior to analysis.

The soil samples will be submitted to a state-certified analytical laboratory following standard chain of custody procedures for analysis. Standard turnaround time for analytical results is seven working days. Following drilling and sample collection, the soil boring will be abandoned with neat cement to just below the surface (3 to 6 inches). The soil boring will then be completed with concrete to grade to match the surrounding material.

REPORT PREPARATION


A technical report discussing fieldwork, observations and findings, analytical results, conclusions, and recommendations will be prepared for submission to the ACHCSA.

HEALTH AND SAFETY PLAN

A site-specific health and safety plan which encompasses the proposed work at the site and complies with the requirements of 29 CFR Part 1910.120 will be prepared and present during field activities.

If you have any questions concerning this work plan, please call me at (510) 638-8400, ext. 109.

Sincerely,

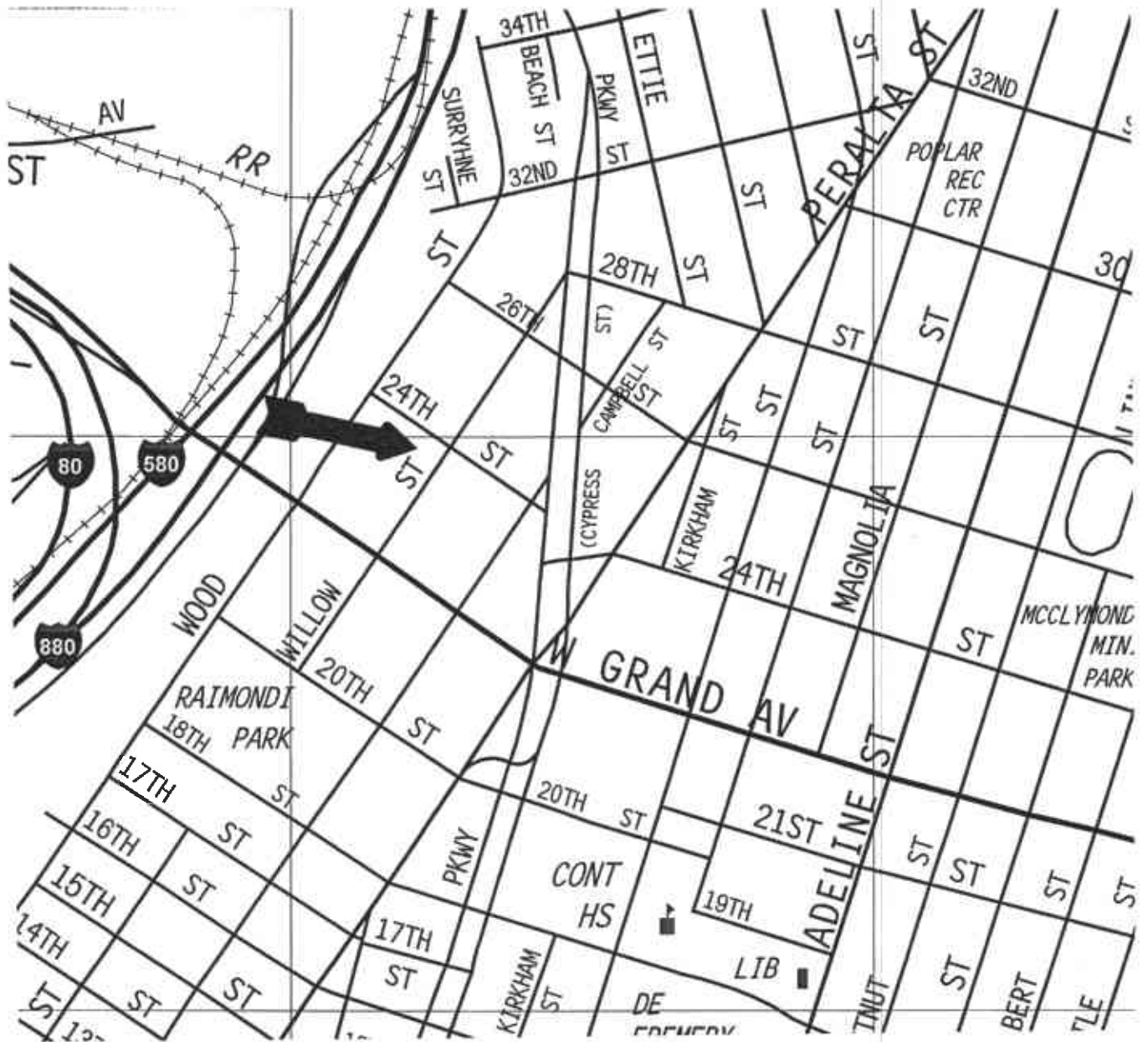


David R. DeMent, RG, REA II
Environmental Division Manager

/drd:ejg

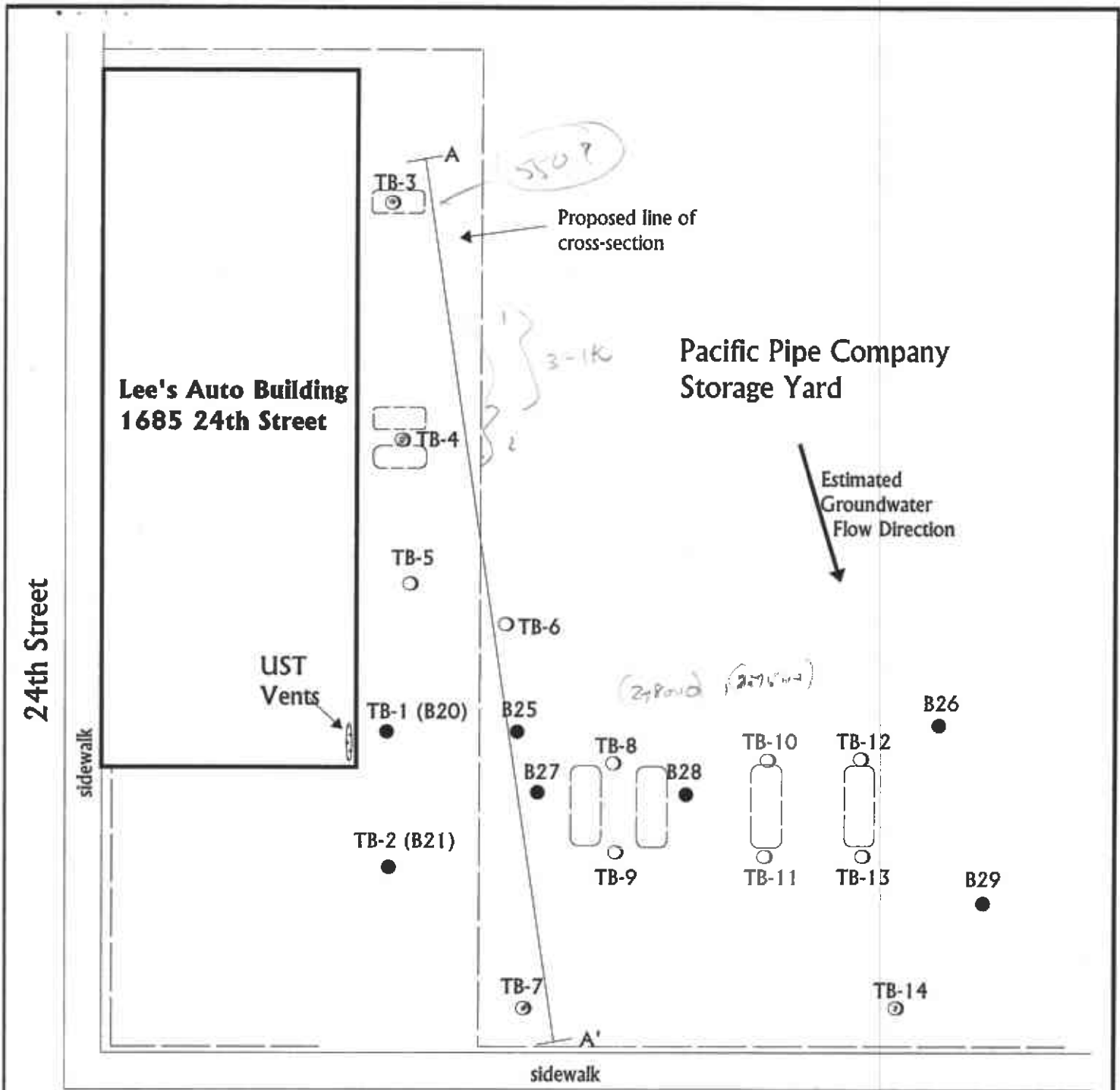
cc: Mr. Hernan Gomez, Oakland Fire Services Agency
Ms. Dona Drogos, Alameda County Health Care Services

FIGURES



Source: Bay Area Metro Thomas Guide 2002

Title: Location Map 1685 24th Street Oakland, California	
Figure Number: 1	Scale: None
Project No: 6744-001.00	Drawn By: EJG
A • C • C ENVIRONMENTAL CONSULTANTS	Date: 4/8/03
7977 Capwell Drive, Suite 10 Oakland, California 94621 (510) 638-8400 Fax: (510) 638-840	



Legend

- TB-14 Proposed Boring Locations
- B29 Boring Locations
- Approximate Former UST Locations
- Fence Line

Map Source: Winter Construction Inc.

Title: **Proposed Soil Boring Locations
1685 24th Street
Oakland, California**

Figure Number: 2

Scale: 1" = 30'

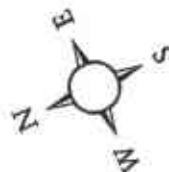
Project No.: 6744-001.00

Drawn By: EJG

A·C·C
ENVIRONMENTAL
CONSULTANTS

Date: 4/7/03

7977 Capwell Drive, Suite 10
Oakland, California 94621
(510) 638-8400 Fax: (510) 638-8404



APPENDICES

OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES

HAZARDOUS MATERIALS UNIT

505 - 14th Street, Oakland, CA 94612 (510) 238-3938

HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
477	Gee's Auto Repair	1685 24 th St	07

Inspection Report

Permission to inspect granted

Follow-up investigation - Joint insp. w/ D.A's special investigator Jay Patel -

Things to do: 2 Storm drains in the back needs to be cleaned + closed - 2 wks. to clean up the 2 drains 1 month to closed them -

No more washing of autos in the back
 No working on the outside
 Remove w.o. stored on site

Facility Contact/ Print Name:	Inspected By:	<input type="checkbox"/> Insp. Griffin 238-7759
LEN Huggins	HEGA	<input type="checkbox"/> Insp. Johnson 238-3804
Facility Contact Signature:		<input type="checkbox"/> Insp. Craford 238-7758
<i>[Signature]</i>		<input checked="" type="checkbox"/> Insp. Gomez 238-7253
	Date:	3/11/99

OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES

HAZARDOUS MATERIALS UNIT

505 - 14th Street, Oakland, CA 94612 (510) 238-3938

HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
477	Lee's Auto Repair	1885 24 th St.	07

Inspection Report

Permission to insp. granted

Auto repair - Complaint call

BMP are not applied - Antifreeze was observed running towards the storm drain - Need to stop disposing of antifreeze in the street -

Stop working on vehicles on the street

Waste oil - 365 gal & oil filters 110

Waste antifreeze 150 gal

W. oil need to be removed - Storage more than 90 days -

Absorbent material should be disposed as haz. waste + keep records of the disposal -

Issues to deal w/ : illegal disposal of haz. waste
Storage of w. o. passed the 90 days period

Haz. waste records for the disposal of absorbent material

Facility Contact/ Print Name:

LEN FLYNN H

Facility Contact/ Signature:

[Handwritten Signature]

Inspected By:

- Insp. Griffin 238-7759
- Insp. Johnson 238-3804
- Insp. Craford 238-7758
- Insp. Gomez 238-7253

AEGA

Date: 3/2/99

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

FACILITY NAME: <i>Lees Auto Repair</i>	EPA I.D.#: <i>CAL 000039308</i>
ADDRESS: <i>1685 24th St.</i>	DATE: <i>3/2/99</i>

	CODE SECTION	COMPLIANCE				CODE SECTION	COMPLIANCE		
		YES	NO	N/A			YES	NO	N/A
1. IDENTIFICATION NUMBER					6. CONTINGENCY/BUSINESS PLAN <i>HMB P need to submit</i>				
(a) Obtained EPA I.D. Number	66262.12(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(a) Contingency Plan Complete	66265.52(a-f)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Transporter and TSDF Have EPA I.D.#	66265.12(c)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b) Copy of Plan on Site	66265.53	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. PRE-TRANSPORT REQUIREMENTS					7. PREPAREDNESS AND PREVENTION				
(a) HW Containers Labeled	66262.31	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(c) Contingency/Business Plan Submitted	66265.53(b)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) HW Label Properly Filled Out	66262.32(14)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(d) Plan Amended as Necessary	66265.54	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) HW Accumulation of Time Not Exceeded	66262.34 (c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(e) ER Coordinator Familiar w/Plan	66265.55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Accumulation Date Indicated	66262.34(f)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. EMERGENCY PROCEDURES				
(e) Description of HW Contents	66262.34(f)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(a) Internal Commun./Alarm Provided	66265.32(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) HW Containers in Good Condition	66265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(b) A Device to Call Outside Provided	66265.32(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(g) HW Compatible with Containers	66265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(c) Spill Control Systems Available	66265.32(c)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(h) HW Containers Closed/Sealed	66265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(d) Maintain ER Equipment	66265.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(i) HW Storage Area Inspected Weekly	66265.174	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(e) Security Measure	66265.14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(j) Tank & Tank Equip. Inspected Daily	66265.195	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(f) Maintain Adequate Aisle Space	66265.35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(k) Incompatible HW in Separate Containers	66265.199	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(g) Arrangements w/Local Agencies	66235.37	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(l) Proper Management of Used Oil Filters	66266.130	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. WASTE STREAMS				
3. RECORDKEEPING AND REPORTING					(a) Character/Source/Extent of ER Determined	66265.56	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(a) HW Analysis Kept 5 Yrs./Land Disposal	66262.11	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b) Proper Agencies Notified of Health Hazard	66265.56	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Biennial Report Submitted to State	66262.41	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(c) ER Data Submitted to DTSC & LIA	66265.56	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. MANIFEST/RECEIPTS					(d) Uncontrol. Release HW Property Handled	66235.56	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(a) HW Shipped with Proper Manifest	66262.20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. TRAINING <i>Only 2 people</i>				
(b) Manifests Kept for Last 3 Years	66262.40(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(a) Training Program Provided	66265.16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) HW Analysis Kept for 3 Years	66262.40(c)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	(b) Personnel Trained & Supervised	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Manifests Received from TSDF	66262.42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(c) HW Personnel Trained within 6 Months	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. TRAINING <i>Only 2 people</i>					(d) Training Records Kept on Site	66265.16(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(a) Training Program Provided	66265.16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(e) Training Records Maintained for 3 Years	66265.16(e)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Personnel Trained & Supervised	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	(f) Training Records Complete	66265.16(1,2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) HW Personnel Trained within 6 Months	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All above code sections refer to the California Code of Reg. Title 22				
(d) Training Records Kept on Site	66265.16(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Source Reduction Plan Completed				
(e) Training Records Maintained for 3 Years	66265.16(e)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25244.19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Training Records Complete	66265.16(1,2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pollution Prevention				
Source Reduction Plan Completed					Health & Safety Code				

REMARKS:

*Storage of waste oil over 90 days - Records not kept on site
Illegal discharge of hazardous waste*

**OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES
HAZARDOUS MATERIALS UNIT
505 - 14th Street, Oakland, CA 94612 (510) 238-3938**

HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	LEE AUTO	1685 24th ST	07

Inspection Report

PERMISSION TO INSPECT GRANTED

EPA ID # CAL 0000 59308

DESPSAL RECORDS ON SITE -

WASTE OIL RELABLY - 533 0751 - 7

ALLOWS ANTIFREEZE + OIL MIXING? NO

SEPARATE RECEIPTS - FURTHER DESPOSAL RECORDS GREAT

① MUST MAINTAIN WASTE RECORDS FOR
CONTAMINATION ABSENT

② FIRE EXTINGUISHERS UP TO DATE - MUST
MOUNT & LABEL

③ KEEP EXTERIOR CLEAN!

④ COMPLETE HMBP - 30 PAYS

EXTERIOR

MSDS - FOR MAJOR CHEMS - ALL MINORS NEEDED
444 9851

Facility Contact/ Print Name:	Inspected By:	<input type="checkbox"/> Insp. Griffin 238-7759
<i>Ken Humphreys</i>		<input type="checkbox"/> Insp. Johnson 238-3804
Facility Contact/ Signature:		<input checked="" type="checkbox"/> Insp. Craford 238-7758
<i>Humphreys Phil</i>		<input type="checkbox"/> Insp. Gomez 238-7253
	Date:	2-23-99

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

FACILITY NAME: LEE AUTO EPA I.D.#: CAL 0000 59308

ADDRESS: 1685 24th St (07) DATE: _____

	CODE SECTION	COMPLIANCE				CODE SECTION	COMPLIANCE		
		YES	NO	N/A			YES	NO	N/A
1. IDENTIFICATION NUMBER					6. CONTINGENCY/BUSINESS PLAN				
(a) Obtained EPA I.D. Number	66262.12(a)	<input checked="" type="checkbox"/>			(a) Contingency Plan Complete	66265.52(a-f)			
(b) Transporter and TSDF Have EPA I.D.#	66265.12(c)	<input checked="" type="checkbox"/>			(b) Copy of Plan on Site	66265.53			
2. PRE-TRANSPORT REQUIREMENTS					7. PREPAREDNESS AND PREVENTION				
(a) HW Containers Labeled	66262.31		<input checked="" type="checkbox"/>		(c) Contingency/Business Plan Submitted	66265.53(b)			
(b) HW Label Properly Filled Out	66262.32(14)		<input checked="" type="checkbox"/>		(d) Plan Amended as Necessary	66265.54			
(c) HW Accumulation of Time Not Exceeded	66262.34 (c)	<input checked="" type="checkbox"/>			(e) ER Coordinator Familiar w/Plan	66265.55			<input checked="" type="checkbox"/>
(d) Accumulation Date Indicated	66262.34(f)		<input checked="" type="checkbox"/>		8. EMERGENCY PROCEDURES				
(e) Description of HW Contents	66262.34(f)	<input checked="" type="checkbox"/>			(a) Internal Commun./Alarm Provided	66265.32(a)	<input checked="" type="checkbox"/>		
(f) HW Containers in Good Condition	66265.171	<input checked="" type="checkbox"/>			(b) A Device to Call Outside Provided	66265.32(b)	<input checked="" type="checkbox"/>		
(g) HW Compatible with Containers	66265.172	<input checked="" type="checkbox"/>			(c) Spill Control Systems Available	66265.32(c)	<input checked="" type="checkbox"/>		
(h) HW Containers Closed/Sealed	66265.173	<input checked="" type="checkbox"/>			(d) Maintain ER Equipment	66265.33	<input checked="" type="checkbox"/>		
(i) HW Storage Area Inspected Weekly	66265.174	<input checked="" type="checkbox"/>			(e) Security Measure	66265.14	<input checked="" type="checkbox"/>		
(j) Tank & Tank Equip. Inspected Daily	66265.195	<input checked="" type="checkbox"/>			(f) Maintain Adequate Aisle Space	66265.35	<input checked="" type="checkbox"/>		
(k) Incompatible HW in Separate Containers	66265.199	<input checked="" type="checkbox"/>			(g) Arrangements w/Local Agencies	66235.37	<input checked="" type="checkbox"/>		
(l) Proper Management of Used Oil Filters	66266.130	<input checked="" type="checkbox"/>			9. WASTE STREAMS				
3. RECORDKEEPING AND REPORTING					(a) Character/Source/Extent of ER Determined	66265.56			
(a) HW Analysis Kept 5 Yrs./Land Disposal	66262.11		<input checked="" type="checkbox"/>		(b) Proper Agencies Notified of Health Hazard	66265.56			
(b) Biennial Report Submitted to State	66262.41		<input checked="" type="checkbox"/>		(c) ER Data Submitted to DTSC & LIA	66265.56			
4. MANIFEST/RECEIPTS					(d) Uncontrol. Release HW Property Handled	66235.56			<input checked="" type="checkbox"/>
(a) HW Shipped with Proper Manifest	66262.20		<input checked="" type="checkbox"/>		5. TRAINING				
(b) Manifests Kept for Last 3 Years	66262.40(a)		<input checked="" type="checkbox"/>		(a) Training Program Provided	66265.16			
(c) HW Analysis Kept for 3 Years	66262.40(c)		<input checked="" type="checkbox"/>		(b) Personnel Trained & Supervised	66265.16(b)			
(d) Manifests Received from TSDF	66262.42		<input checked="" type="checkbox"/>		(c) HW Personnel Trained within 6 Months	66265.16(b)			
5. TRAINING					(d) Training Records Kept on Site	66265.16(d)			
(a) Training Program Provided	66265.16				(e) Training Records Maintained for 3 Years	66265.16(e)			
(b) Personnel Trained & Supervised	66265.16(b)				(f) Training Records Complete	66265.16(1,2)			<input checked="" type="checkbox"/>
(c) HW Personnel Trained within 6 Months	66265.16(b)				All above code sections refer to the California Code of Reg. Title 22				
(d) Training Records Kept on Site	66265.16(d)				Source Reduction Plan Completed	25244.19			
(e) Training Records Maintained for 3 Years	66265.16(e)				Pollution Prevention		Health & Safety Code		
(f) Training Records Complete	66265.16(1,2)				REMARKS: <u>WASTE RECORDS & LABELING</u> <u>NEED TO BE DONE</u>				

**OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES
HAZARDOUS MATERIALS UNIT
505 - 14th Street, Oakland, CA 94612 (510) 238-3938
Hazardous Materials Inspection Report**

		UNAUTHORIZED OPERATION	V	C	N	OBSERVATIONS
400	Hazardous Materials Release Response Plans and Inventory (HMRRP/Business Plan)					
401	25507	Failure to report a release/threatened release.		X		
402	25504	Emergency Response Plan inadequate	X			
403	25509	Emergency contacts not provided/current	X			
404	25504	Personnel training program is inadequate	X			
405	25504	Hazardous Materials Chemical Inventory is not attached, is not accurate, or is incomplete	X			
406	25509	Site map is not attached or is not sufficient	X			
408	255339(a)	Acutely Hazardous Materials Registration not filed		X		
408		Material Safety Data Sheets are not located where the Business Emergency plan (BEP) indicates they should be	X			
409		The BEP indicates the facility maintains hazardous materials response equipment, and the equipment listed is not in place and in operable condition	X			
410		Hazardous materials are not located in the designated areas as indicated on the site map	X			
411		Containers are not clearly labeled with the chemical name and hazard class	X			
412		Containers are in poor condition or are leaking		X		
413		Secondary containment is inadequate		X		
414		Emergency procedures are not adequately posted	X			
415		Monitoring records are not complete or are not current	X			

V=Violation C=Compliance N=Not applicable/addressed/Unknown

OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES
 HAZARDOUS MATERIALS UNIT
 505 - 14th Street, Oakland, CA 94612 (510) 238-3938

HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	LEG AUTO REPAIR	1685 24th St	07

Inspection Report

PERMISSION TO INSPECT GRANTED

① OBSERVED ANTI FREEZE IN CAP & IN
 STORM DRAIN - FACILITY IS USING
 AS A DISPOSAL FOR FLUIDS

② GREASE & OILY ENGINES, CASES &
 RUMPLES ARE OUTSIDE & EXPOSED
 TO RAIN & RUNOFF.

① CALL FOR FULL INSPECTION &
 RECORD REVIEW THIS SITE IS
 IN VIOLATION OF STATE & LOCAL
 WASTE CODES & A FULL INSPECTION
 IS NEEDED.

494 - 9851

Facility Contact/ Print Name:	Inspected By:	<input type="checkbox"/> Insp. Griffin	238-7759
LEN PAI HUNG		<input type="checkbox"/> Insp. Johnson	238-3804
Facility Contact/ Signature:		<input checked="" type="checkbox"/> Insp. Craford	238-7758
		<input type="checkbox"/> Insp. Gomez	238-7253
	Date:	12/11/98	

OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES

HAZARDOUS MATERIALS UNIT

505 - 14th Street, Oakland, CA 94612 (510) 238-3938

HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	Lee Auto Repair 1685 Km	1685 24th St	94607

Inspection Report

Activity Auto Repair

1. Appears that antifreeze and AzO/Booohin mixture is being drained sewer.
2. Haz Mat'l Stickers not completely filled out and Faded.
3. Greasy/oily Auto Parts stored off near Sewer drain - i.e.; Storm Water Violation
4. Requested that when we return (i.e., Jan 99) that all environmental waste management records are available for inspection.

Ph: 510 444-9851

11 Dec 98

Facility Contact/ Print Name:

Len Deli

Facility Contact/ Signature:

Inspected By:

- Insp. Griffin 238-7759
- Insp. Johnson 238-3804
- Insp. Craford 238-7758
- Insp. Gomez 238-7253

Date:

**OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES
HAZARDOUS MATERIALS UNIT
505 - 14th Street, Oakland, CA 94612 (510) 238-3938
Hazardous Materials Inspection Report**

		UNAUTHORIZED OPERATION	V	C	N	OBSERVATIONS
400	Hazardous Materials Release Response Plans and Inventory (HMRRP/Business Plan)					
401	25507	Failure to report a release/threatened release.		X		
402	25504	Emergency Response Plan inadequate	↑			
403	25509	Emergency contacts not provided/current				
404	25504	Personnel training program is inadequate				
405	25504	Hazardous Materials Chemical Inventory is not attached, is not accurate, or is incomplete				
406	25509	Site map is not attached or is not sufficient		↓		
408	255339(a)	Acutely Hazardous Materials Registration not filed			X	
408		Material Safety Data Sheets are not located where the Business Emergency plan (BEP) indicates they should be	X			
409		The BEP indicates the facility maintains hazardous materials response equipment, and the equipment listed is not in place and in operable condition			X	
410		Hazardous materials are not located in the designated areas as indicated on the site map		↑		
411		Containers are not clearly labeled with the chemical name and hazard class				
412		Containers are in poor condition or are leaking				
413		Secondary containment is inadequate				
414		Emergency procedures are not adequately posted	X			
415		Monitoring records are not complete or are not current		↓		

V=Violation C=Compliance N=Not applicable/addressed/Unknown

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

FACILITY NAME: LEE AUTO EPA I.D.#: _____

ADDRESS: _____ DATE: 12/11/98

	CODE SECTION	COMPLIANCE				CODE SECTION	COMPLIANCE		
		YES	NO	N/A			YES	NO	N/A

1. IDENTIFICATION NUMBER				6. CONTINGENCY/BUSINESS PLAN			
(a) Obtained EPA I.D. Number	66262.12(a)	X		(a) Contingency Plan Complete	66265.52(a-f)		
(b) Transporter and TSDf Have EPA I.D.#	66265.12(c)	X		(b) Copy of Plan on Site	66265.53		

2. PRE-TRANSPORT REQUIREMENTS				7. PREPAREDNESS AND PREVENTION			
(a) HW Containers Labeled	66262.31		X	(c) Contingency/Business Plan Submitted	66265.53(b)		
(b) HW Label Properly Filled Out	66262.32(14)		X	(d) Plan Amended as Necessary	66265.54		

(c) HW Accumulation of Time Not Exceeded	66262.34 (c)	X		(e) ER Coordinator Familiar w/Plan	66265.55		
(d) Accumulation Date Indicated	66262.34(f)		X	8. EMERGENCY PROCEDURES			

(e) Description of HW Contents	66262.34(f)		X	(a) Internal Commun./Alarm Provided	66265.32(a)		
(f) HW Containers in Good Condition	66265.171	X		(b) A Device to Call Outside Provided	66265.32(b)		

(g) HW Compatible with Containers	66265.172	X		(c) Spill Control Systems Available	66265.32(c)		
(h) HW Containers Closed/Sealed	66265.173	X		(d) Maintain ER Equipment	66265.33		

(i) Incompatible HW in Separate Containers	66265.199		X	(e) Security Measure	66265.14		
(j) Tank & Tank Equip. Inspected Daily	66265.195	X		(f) Maintain Adequate Aisle Space	66265.35		

(k) Proper Management of Used Oil Filters	66266.130	X		(g) Arrangements w/Local Agencies	66235.37		
3. RECORDKEEPING AND REPORTING				9. WASTE STREAMS			

(a) HW Analysis Kept 5 Yrs./Land Disposal	66262.11			(a) Character/Source/Extent of ER Determined	66265.56		
(b) Biennial Report Submitted to State	66262.41			(b) Proper Agencies Notified of Health Hazard	66265.56		

(c) ER Data Submitted to DTSC & LIA	66265.56			(c) Ethylene Glycol/Antifreeze		X	
(d) Uncontrol. Release HW Property Handled	66235.56			(d) Oily Sludges			

4. MANIFEST/RECEIPTS				5. TRAINING			
(a) HW Shipped with Proper Manifest	66262.20			(a) Training Program Provided	66265.16		

(b) Manifests Kept for Last 3 Years	66262.40(a)			(b) Personnel Trained & Supervised	66265.16(b)		
(c) HW Analysis Kept for 3 Years	66262.40(c)			(c) HW Personnel Trained within 6 Months	66265.16(b)		

(d) Manifests Received from TSDf	66262.42			(d) Training Records Kept on Site	66265.16(d)		
5. TRAINING				(e) Training Records Maintained for 3 Years	66265.16(e)		

(a) Training Program Provided	66265.16			(f) Training Records Complete	66265.16(1,2)		
(b) Personnel Trained & Supervised	66265.16(b)			All above code sections refer to the California Code of Reg. Title 22			

(c) HW Personnel Trained within 6 Months	66265.16(b)			Source Reduction Plan Completed	25244.19		
(d) Training Records Kept on Site	66265.16(d)			Pollution Prevention			

REMARKS: Oil + ANTI FREEZE - WELL RETURN

OAKLAND FIRE DEPARTMENT/OFFICE OF EMERGENCY SERVICES

Hazardous Materials Management Program

505-14th Street, 7th Floor, Oakland, CA 94612, (510) 238-3938

(H)

12797?
CR

HAZARDOUS MATERIALS INSPECTION REPORT

STID#: 477	FACILITY NAME: LEE'S AUTO REPAIR	PG. 1	OF 1
------------	----------------------------------	-------	------

ADDRESS: 1685 24th (07)

PERMISSION TO INSPECT GRANTED

1) NO DRAINING OF VEHICLE FLUIDS ONTO GROUND ON EXTERIOR OF BLDG.!

2) DISPOSE OF UNUSED DRUMS - LABEL ALL OTHERS

3) CLEAN EXTERIOR OF OUTSIDE STORAGE AREA

SHOP LOT NEEDS TO BE KEPT CLEAN

4) MOUNT BOTH FIRE EXTINGUISHERS

HMBP - WILL NEED 30 DAYS MATERIAL SAFETY DATA SHEET

MSDS - NEED TO BE MAINTAINED 444. 9851

FACILITY CONTACTS/ SIGNATURE: [Signature]	INSPECTED BY: CRAFORD 238-7758
PRINT NAME: [Signature]	DATE: 3-18-97

APPENDIX A - PAGE TWO

OAKLAND FIRE SERVICES AGENCY

Office of Emergency Services
 Hazardous Materials Management Program
 505 - 14th Street, Suite 702
 Oakland, Ca 94612

OAKLAND FIRE

12/1/97

NOV 26 PM 2 33

Office: 510-238-3938

Fax: 510-238-7761

HAZARDOUS MATERIALS BUSINESS PLAN

1. Number of individuals handling hazardous materials: 02
2. Hazardous materials/waste storage and handling area in square feet: 300 gallons
3. Number of storage tanks on site: Above Ground 00 Under Ground wasting oil
4. All hazardous substance or wastes: yes

OIL ONLY → + FILTERS

	Gallons (Liquid)	Pounds (Solid)	Cubic Feet (Gaseous)	Number of Items
Hazardous Materials	<i>100 gallons Engine</i>	0	0	2
Hazardous Waste	<i>300 gallons</i>	100	0	1
TOTAL	<i>wasting oil</i>	100	0	3

FOR OFFICE USE ONLY

- | | | |
|--|--|---|
| <input type="checkbox"/> No Changes | <input type="checkbox"/> Number of Employees | <input type="checkbox"/> Address |
| <input type="checkbox"/> New Facility | <input type="checkbox"/> UST/AST | <input type="checkbox"/> Billing Adjustment |
| <input type="checkbox"/> Inventory | <input type="checkbox"/> Exempt | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Business Closed | <input type="checkbox"/> Inactive | _____ |

CRAFORD

12.1.97

Appendix J--Emergency Response Plan/Contingency Plan

The following items are elements of a comprehensive emergency response/contingency plan that meets state requirements. If your facility has a written plan, or if you are to prepare one, make sure all the elements listed are covered by your plan. Small facilities with simple operations may complete the boxes below and will be in compliance with the written emergency plan requirement.

I. Facility Information:

Facility Name: <u>LEE'S Auto Repair</u>	Phone: <u>(510) 444-9851</u>
Address: <u>1685-24th St St</u>	
City: <u>OAKLAND, CA</u>	Zip: <u>94607</u>

II. Emergency Coordinators:

Primary Coordinator	Secondary Coordinator
Name: <u>LEN HUGNIT</u>	Name:
Title: <u>OWNER</u>	Title:
Work Ph: <u>(510) 444-9851</u>	Work Ph:
After hours Ph: <u>(510) 783-7452</u>	After hours Ph:
Pager:	Pager:

III. Emergency Telephone Numbers and Arrangements:

The emergency coordinator shall immediately notify the following whenever a release, fire, or explosion threatens human health or the environment.

Agency	Phone
Fire Department	911 or -
State Office of Emergency Services (OES)	1-800-852-7550
<i>Each CUPA to insert name and number: CUPA Contact</i>	
Hospital/Medical Center	
Waste Water Treatment Facility	
Hazardous Waste Contractor	
Other agencies-	

IV. Arrangements: (Please check one box.)

We have no formalized written agreements with any emergency response agency or contractor.

We have formalized written agreements with LEN HUGNIT
 phone: (510) 783-7452 for emergency response.

California Hazardous Material Inventory Reporting Form- Chemical Description Page

1) Add Delete Revise

Page (2) Of (3)

Business Name	(4)	LEE'S AUTO REPAIR		
Chemical Location	(5)			
Map #	(6)		Grid # (7)	

Chemical Name	(8)	Engine oil- 20-50 W -	Trade Secret (11)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Common Name	(9)	Engine wasting oil	EHS (12)	<input type="checkbox"/> Y <input type="checkbox"/> N
CAS #	(10)	(if available) -	*If EHS Box Is "Y" All Amounts must Be in Lbs	

Fire Code Hazard Classes (Check all boxes that apply to this chemical and write in the appropriate Class.)	(13)	Physical Characteristics		Health Characteristics	
		<input type="checkbox"/> Explosives/Blasting Agents <input type="checkbox"/> Class <u>none</u> Flammable Liquid <input type="checkbox"/> Class <u> </u> Combustible Liquid <input type="checkbox"/> Flammable Gas <input type="checkbox"/> Non-Flammable Gas	<input type="checkbox"/> Flammable Solid <input type="checkbox"/> Class <u> </u> Water Reactive <input type="checkbox"/> Class <u> </u> Unstable Reactive <input type="checkbox"/> Class <u> </u> Organic Peroxide <input type="checkbox"/> Class <u> </u> Pyrophoric	<input type="checkbox"/> Toxic <input type="checkbox"/> Highly Toxic <input type="checkbox"/> Corrosive <input type="checkbox"/> Irritant <input type="checkbox"/> Other Health Hazard	<input type="checkbox"/> Sensitizer <input type="checkbox"/> Carcinogen <input type="checkbox"/> Radioactive

Type	(14)	<input type="checkbox"/> Pure <input type="checkbox"/> Mixture <input checked="" type="checkbox"/> Waste	Radioactive (15)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
Physical State	(17)	<input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas	Curies _____	

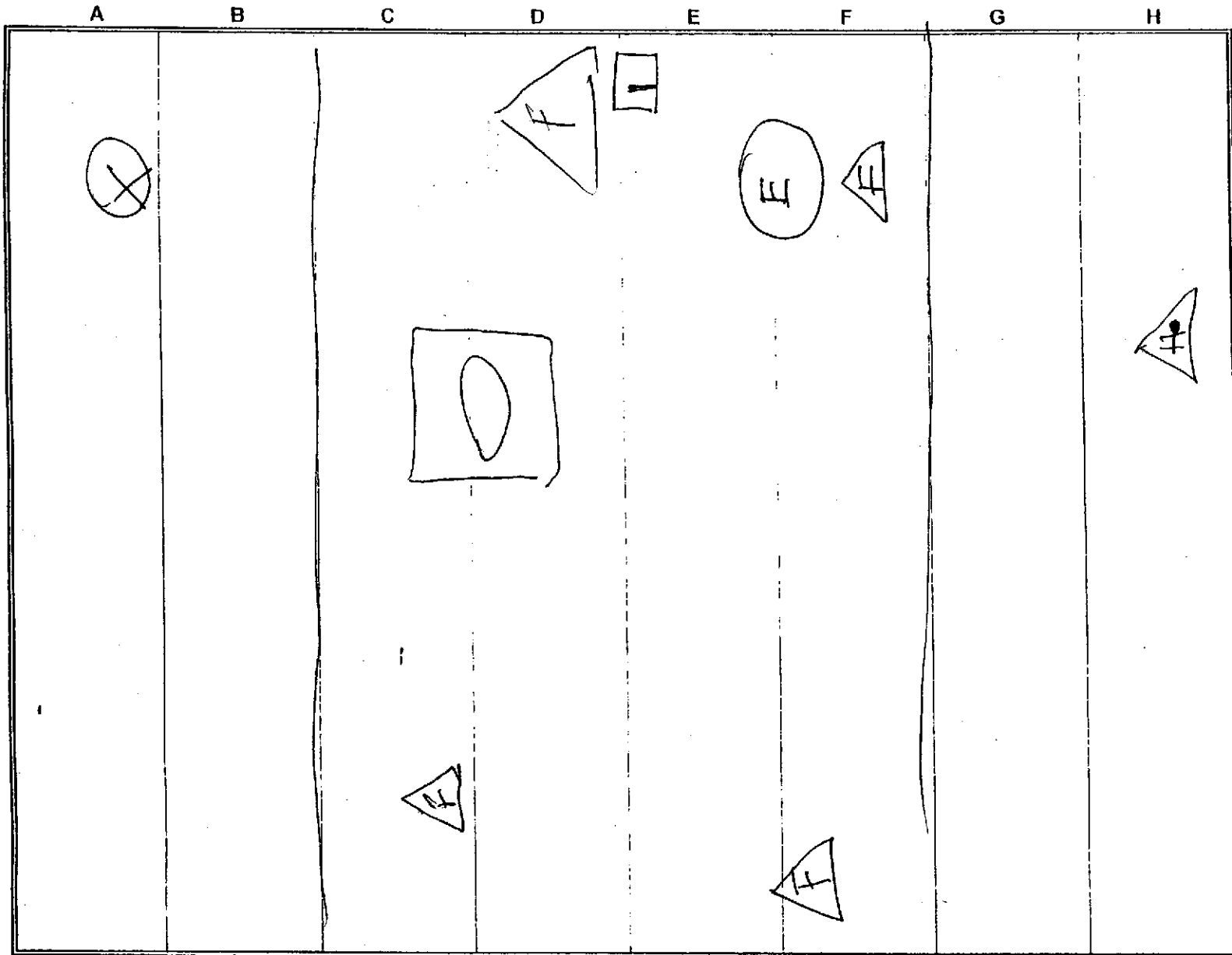
Fed Hazard Categories	(18)	<input type="checkbox"/> Fire <input type="checkbox"/> Reactive <input type="checkbox"/> Pressure Release <input type="checkbox"/> Acute Health <input checked="" type="checkbox"/> Chronic Health		
State Waste Code	(19)	(if available)	Units (22) <input checked="" type="checkbox"/> Gal <input type="checkbox"/> Cu Ft <input type="checkbox"/> Lbs <input type="checkbox"/> Tons	Max Daily Amt (23) <u>300 GAL</u>
Days on Site	(20)	<u>365</u>	*If EHS, amounts must be in lb.	Avg Daily Amt (24) <u>200 GAL</u>
Largest Container	(21)	<u>300</u>		Annual Waste Amt (25) <u>1000 GAL</u>

Storage Container	(26)	<input checked="" type="checkbox"/> Above Ground Tank <input type="checkbox"/> Under Ground Tank <input type="checkbox"/> Tank Inside Building <input type="checkbox"/> Steel Drum <input type="checkbox"/> Plastic/Nonmetallic Drum	<input type="checkbox"/> Can <input type="checkbox"/> Carboy <input type="checkbox"/> Silo <input type="checkbox"/> Fiber Drum <input type="checkbox"/> Bag	<input type="checkbox"/> Box <input type="checkbox"/> Cylinder <input type="checkbox"/> Glass Bottle <input type="checkbox"/> Plastic Bottle <input type="checkbox"/> Tote Bin	<input type="checkbox"/> Tank Wagon <input type="checkbox"/> Rail Car <input type="checkbox"/> _____ <input type="checkbox"/> Other...
-------------------	------	--	---	--	---

Storage Pressure	(27)	<input checked="" type="checkbox"/> Ambient <input type="checkbox"/> Above Ambient <input type="checkbox"/> Below Ambient
------------------	------	---

Storage Temperature	(28)	<input checked="" type="checkbox"/> Ambient <input type="checkbox"/> Above Ambient <input type="checkbox"/> Below Ambient <input type="checkbox"/> Cryogenic
---------------------	------	--

(29) %WT	(30) Hazardous Components	(31) EHS	(32) CAS#
1.		<input type="checkbox"/> Y <input type="checkbox"/> N	
2.		<input type="checkbox"/> Y <input type="checkbox"/> N	
3.		<input type="checkbox"/> Y <input type="checkbox"/> N	
4.		<input type="checkbox"/> Y <input type="checkbox"/> N	
5.		<input type="checkbox"/> Y <input type="checkbox"/> N	



For Facility Site Map

- Scale of Map
- Loading Areas
- Parking Lots
- Internal Roads
- Storm and Sewer Drains
- Adjacent Property Use
- Locations and Names of Adjacent Streets and Alleys
- Access and Egress Points and Roads

For Storage Plan

- Scale of Plan
- Location of Each Storage Area
- Location of Each Hazardous Material Handling Area
- Location of Emergency Response Equipment

Scale:

1" = ____ Ft.

Appendix E

X →

North ↑

3

Dear MR Stephen W CRAFORD

OAKLAND FIRE

O.E.S.

NOV 26 PM 2 32

According HAZARDOUS MATERIALS INSPECTION

Report I have no draining of VEHICLES fluid onto ground on ETERIA BLDG

- 1. DISPOSED of unused Drums
- 2. Cleaned up EXTERIOR OUTSIDE Storage Area. + Shop lot Keep Clean.
- 3. Mounted Bots Fire EXTINGUISHERS on the wall. Where we can Reach

It will sent to you office. The oil DATA sheet about 2 weeks later

LEES Auto owner Report

Owner Leo Hight - 11 20-92

Appendix A

California Hazardous Materials Inventory Reporting Form - California Business & Owner/Operator Identification Page

Calendar Year Beginning (1)	-	Ending (2)	OAKLAND FIRE O.E.S.	(3) Page 1 of	1
Business Name (4)	LEE'S AUTO REPAIR		Business Phone (5)	(510) 444-9851	
Site Address (6)	1685-24th ST				
City (7)	OAKLAND	State (8)	CA	Zip (9)	94601
Dun & Bradstreet (10)	(if available)		SIC Code (4 Digit#) (11)	(if available)	
Operator Name (12)	LEN HUYNH		Operator Phone (13)	783-7152	

Owner Information

Owner Name (14)	LEN HUYNH	Owner Phone (15)	(510) 783-7152		
Owner Mailing Address (16)	2097 BOCA RATON ST				
City (17)	Hayward	State (18)	CA	Zip (19)	94545

Environmental Contact

Contact Name (20)	LEN HUYNH	Contact Phone (21)			
Mailing Address (22)	2097 BOCA RATON ST				
City (23)	209 Hayward	State (24)	CA	Zip (25)	94545

Primary

Emergency Contacts

Secondary

Name: (26)	LEN HUYNH	Name: (31)			
Title: (27)	Owner / mechanic	Title: (32)			
Business Phone: (28)	(510) 444-9851	Business Phone: (33)			
24-hour Phone: (29)	444-9851	24-hour Phone: (34)			
Pager #: (30)		Pager #: (35)			

Acutely Hazardous Materials (AHM)

On Site AHM (36) Yes No If yes, and above Threshold Planning Quantities, attach a sheet of paper with a general description of the process and principal equipment.

Additional Locally Collected Information {Check one box and report FAX #}

37) This Appendix A is accompanied by new or modified Appendix C(s) Business Fax#- ()

This Appendix A is the annual submittal and no Appendix C(s) are attached. {The inventory remains the same as last year and none of the conditions listed in CCR, Title 19, section 2729(d) require an Appendix C.}

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this inventory and believe the information is true, accurate, and complete.

Print Name of Document Preparer (38)	(if not the owner)
Signature of Owner/Operator (39)	Date (40)

OAKLAND FIRE DEPARTMENT/OFFICE OF EMERGENCY SERVICES

Hazardous Materials Management Program

505-14th Street, 7th Floor, Oakland, CA 94612, (510) 238-3938



HAZARDOUS MATERIALS INSPECTION REPORT

STID#: 477	FACILITY NAME: LEE'S AUTO REPAIR	PG. 1	OF 1
------------	----------------------------------	-------	------

ADDRESS: 1685 24th (07)

PERMISSION TO INSPECT GRANTED

1) NO DRAINING OF VEHICLE FLUIDS ONTO GROUND ON EXTERIOR OF BLDG.!

2) DISPOSE OF UNUSED DRUMS - LABEL ALL OTHERS

3) CLEAN EXTERIOR OF OUTSIDE STORAGE AREA

SHOP LOT NEEDS TO BE KEPT CLEAN

4) MOUNT BOTH FIRE EXTINGUISHERS

HMBP - WILL NEED 30 DAYS MATERIAL SAFETY DATA SHEET MSDS - NEED TO BE MAINTAINED 444. 9851

FACILITY CONTACTS/ SIGNATURE: <i>[Signature]</i>	INSPECTED BY: CRAFORD 238-7758
PRINT NAME: <i>[Signature]</i>	DATE: 3-18-97

white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
 Hazardous Materials Inspection Form

80 Swan Way, #200
 Oakland, CA 94621
 (415) 271-4320

II, III

Site ID # 693 Site Name LEE LEE BROTHERS Today's Date 8/23/93

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus. Plan Stats. 25503(b)
- 3. RR Cars > 30 days 25503.7
- 4. Inventory Information 25504(a)
- 5. Inventory Complete 2730
- 6. Emergency Response 25504(b)
- 7. Training 25504(c)
- 8. Deficiency 25505(a)
- 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- 10. Registration Form Filed 25533(a)
- 11. Form Complete 25533(b)
- 12. RMPP Contents 25534(c)
- 13. Implement Sch. Req'd? (Y/N)
- 14. OffSite Conseq. Assess. 25524(c)
- 15. Probable Risk Assessment 25534(d)
- 16. Persons Responsible 25534(e)
- 17. Certification 25534(f)
- 18. Exemption Request? (Y/N) 25536(b)
- 19. Trade Secret Requested? 25538

Site Address 1685-24TH ST

City OAKLAND Zip 94607 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

1) HAZARDOUS MATERIALS
 BUSINESS PLAN (HMBP, PT. II)
 INCOMPLETE
 2) OBTAIN MATERIAL SAFETY
 DATA SHEETS
 3) HAZARDOUS MATERIALS TRAINING
 REQUIRED - NOTIFICATION TO AGENCIES
 MITIGATION, EVACUATION IN THE
 EVENT OF SPILLS OR LEAKS OF
 HAZARDOUS MATERIALS - 30 DAYS

III. UNDERGROUND TANKS (Title 23)

- | | |
|-------------------------------|---|
| General | <input type="checkbox"/> 1. Permit Application 25284 (H&S) |
| | <input type="checkbox"/> 2. Pipeline Leak Detection 25292 (H&S) |
| | <input type="checkbox"/> 3. Records Maintenance 2712 |
| | <input type="checkbox"/> 4. Release Report 2651 |
| | <input type="checkbox"/> 5. Closure Plans 2670 |
| Monitoring for Existing Tanks | 6. Method |
| | 1) Monthly Test |
| | 2) Daily Vadose
Semi-annual groundwater
One time soil |
| | 3) Daily Vadose
One time soil
Annual tank test |
| | 4) Monthly Groundwater
One time soil |
| | 5) Daily Inventory
Annual tank testing
Cont pipe leak det
Vadose/gndwater mon. |
| | 6) Daily Inventory
Annual tank testing
Cont pipe leak det |
| | 7) Weekly Tank Gauge
Annual tank testing |
| | 8) Annual Tank Testing
Daily inventory |
| | 9) Other _____ |
| | <input type="checkbox"/> 7. Precs Tank Test 2643
Date: _____ |
| | <input type="checkbox"/> 8. Inventory Rec. 2644 |
| | <input type="checkbox"/> 9. Sol Testing 2646 |
| | <input type="checkbox"/> 10. Ground Water. 2647 |
| New Tanks | <input type="checkbox"/> 11. Monitor Plan 2632 |
| | <input type="checkbox"/> 12. Access. Secure 2634 |
| | <input type="checkbox"/> 13. Plans Submit 2711
Date: _____ |
| | <input type="checkbox"/> 14. As Built 2635
Date: _____ |

Rev 8/88

Contact: _____

Title: _____

Signature: _____

Inspector: _____

Signature: _____

II, III
 [Signature]
 [Signature]

white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200
 Oakland, CA 94621
 (415) 271-4320

Hazardous Materials Inspection Form

II, III

Site ID # 693 Site Name LEE LEE BROTHERS Today's Date 8/19/92

Site Address 1685-24TH ST

City OAKLAND Zip 94607 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

AUTO REPAIR
TRANSMISSION FLUID - 55 GAL
MOTOR OIL - 55 GAL
1) SUBMIT HMMP, PT. II - 30 DAYS.
2) OBTAIN MATERIAL SAFETY DATA SHEETS FOR HAZARDOUS MATERIALS USED - 30 DAYS.

MANAGER
ACCORDING TO OWNER,
UNDERGROUND TANK WAS REMOVED.

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus. Plan Stds. 25503(b)
- 3. RR Cars > 30 days 25503.7
- 4. Inventory Information 25504(a)
- 5. Inventory Complete 2730
- 6. Emergency Response 25504(b)
- 7. Training 25504(c)
- 8. Deficiency 25505(a)
- 9. Modification 25505(b)

II.B ACUTELY HAZ. MAT'L

- 10. Registration Form Filed 25533(a)
- 11. Form Complete 25533(b)
- 12. RMPP Contents 25534(c)
- 13. Implement Sch. Req'd? (Y/N)
- 14. OffSite Conseq. Assess. 25524(c)
- 15. Probable Risk Assessment 25534(d)
- 16. Persons Responsible 25534(g)
- 17. Certification 25534(i)
- 18. Exemption Request? (Y/N) 25536(b)
- 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- General
- 1. Permit Application 25284 (H&S)
 - 2. Pipeline Leak Detection 25292 (H&S)
 - 3. Records Maintenance 2712
 - 4. Release Report 2651
 - 5. Closure Plans 2670

Monitoring for Existing Tanks

- 6. Method
 - 1) Monthly Test
 - 2) Daily Vadose
 - Semi-annual gndwater
 - One time soil
 - 3) Daily Vadose
 - One time soil
 - Annual tank test
 - 4) Monthly Gndwater
 - One time soil
 - 5) Daily Inventory
 - Annual tank testing
 - Cont pipe leak det
 - Vadose/gndwater mon.
 - 6) Daily Inventory
 - Annual tank testing
 - Cont pipe leak det
 - 7) Weekly Tank Gauge
 - Annual tank testing
 - 8) Annual Tank Testing
 - Daily Inventory
 - 9) Other _____

- 7. Precip Tank Test 2643
 - Date: _____
- 8. Inventory Rec. 2644
- 9. Soil Testing 2646
- 10. Ground Water. 2647

- New Tanks
- 11. Monitor Plan 2632
 - 12. Access. Secure 2634
 - 13. Plans Submit 2711
 - Date: _____
 - 14. As Built 2635
 - Date: _____

Rev 6/88

II, III

Contact: _____

Title: _____

Signature: John McChesney

Inspector: _____

Signature: Don Wang

ALAMEDA COUNTY ENVIRONMENTAL HEALTH / HAZARDOUS MATERIALS DIVISION
 1131 Harbor Bay Pkwy., Rm. 250, Alameda, CA 94502-6577
 (510) 567-6700 Fax (510) 337-9335

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

STID #: **693** FACILITY NAME: **Lee's Auto Repair** EPA I.D. #: **CAD053044053**

ADDRESS, CITY & ZIP CODE: **1685, 24th, Oak, 94607** PHONE: **442-9841**

TYPE OF BUSINESS: Auto Repair	CODE SECTION	COMPLIANCE			TIERED PERMITTING STATUS:				CODE SECTION	COMPLIANCE		
		YES	NO	N/A	CE <input type="checkbox"/>	CA <input type="checkbox"/>	PBR <input type="checkbox"/>	N/A <input type="checkbox"/>		YES	NO	N/A

1. IDENTIFICATION NUMBER				6. CONTINGENCY / BUSINESS PLAN			
(a) Obtained EPA I.D. Number	66262.12(a)	<input checked="" type="checkbox"/>		(a) Contingency Plan Complete	66265.52(a-f)		
(b) Transporter and TSDF Have EPA I.D. #	66262.12(c)	<input checked="" type="checkbox"/>		(b) Copy of Plan on Site	66265.53		

2. PRE-TRANSPORT REQUIREMENTS				(c) Contingency/ Business Plan Submitted				66265.53(b)		
(a) HW Containers Labeled	66262.31	<input checked="" type="checkbox"/>		(d) Plan Amended as Necessary	66265.54					
(b) H W Label Properly Filled Out	66262.32(b)	<input checked="" type="checkbox"/>		(e) ER Co-ordinator Familiar w/ Plan	66265.55					

3. RECORDKEEPING AND REPORTING				7. PREPAREDNESS AND PREVENTION			
(a) HW Analysis Kept 5 Yrs./Land Disposal	66262.11		<input checked="" type="checkbox"/>	(a) Internal Commun./ Alarm Provided	66265.32(a)	<input checked="" type="checkbox"/>	
(b) Biennial Report Submitted to State	66262.41		<input checked="" type="checkbox"/>	(b) A Device to Call Outside Provided	66265.32(b)	<input checked="" type="checkbox"/>	
(c) HW Accumulation Time Not Exceeded	66262.34(c)	<input checked="" type="checkbox"/>		(c) Spill Control Systems Available	66265.32(c)	<input checked="" type="checkbox"/>	
(d) Accumulation Date Indicated	66262.34(f)	<input checked="" type="checkbox"/>		(d) Maintain ER Equipment	66265.33	<input checked="" type="checkbox"/>	
(e) Description of H W Contents	66262.34(f)	<input checked="" type="checkbox"/>		(e) Access to Commun. during HW Handl.	66265.34	<input checked="" type="checkbox"/>	
(f) HW Containers in Good Condition	66265.171	<input checked="" type="checkbox"/>		(f) Maintain Adequate Aisle Space	66265.35	<input checked="" type="checkbox"/>	
(g) HW Compatible with Containers	66265.172	<input checked="" type="checkbox"/>		(g) Arrangements w/ Local Agencies	66265.37	<input checked="" type="checkbox"/>	
(h) HW Containers Closed /Sealed	66265.173	<input checked="" type="checkbox"/>		8. EMERGENCY PROCEDURES			
(i) HW Storage Area Inspected Weekly	66265.174	<input checked="" type="checkbox"/>		(a) Character/Source/Extent of ER Determ'd	66265.56		
(j) Tank & Tank Equip. Inspected Daily	66265.195	<input checked="" type="checkbox"/>		(b) Proper Agencies Notified of Hlth. Hazard	66265.56		
(k) Incompatible HW in Separate Containers	66265.199	<input checked="" type="checkbox"/>		(c) ER Data Submitted to DTSC & LIA	66265.56		
(l) Proper Management of Used Oil Filters	66266.130	<input checked="" type="checkbox"/>		(d) Uncontrol. Release HW Properly Handled	66265.56		

4. MANIFEST / RECEIPTS				9. WASTE STREAMS			
(a) HW Shipped with Proper Manifest	66262.20	<input checked="" type="checkbox"/>		(a) Waste Oil		<input checked="" type="checkbox"/>	
(b) Manifests Kept for last 3 Yrs.	66262.40(a)		<input checked="" type="checkbox"/>	(b) Non-Halogenated Solvents/Parts Cleaner		<input checked="" type="checkbox"/>	
(c) HW Analysis Kept 3 Yrs.	66262.40(c)		<input checked="" type="checkbox"/>	(c) Ethylene Glycol/Antifreeze			
(d) Manifests Received from TSDF	66262.42		<input checked="" type="checkbox"/>	(d) Oily Sludges			

5. TRAINING				(e) Other: used oil filters				<input checked="" type="checkbox"/>	
(a) Training Program Provided	66265.16	<input checked="" type="checkbox"/>		(f) Other: used absorbent		<input checked="" type="checkbox"/>			
(b) Personnel Trained & Supervised	66265.16(b)	<input checked="" type="checkbox"/>		(g) Other: used batteries		<input checked="" type="checkbox"/>			
(c) HW Personnel Trained within 6 Months	66265.16(b)	<input checked="" type="checkbox"/>		(h) Other: used rags		<input checked="" type="checkbox"/>			
(d) Training Records Kept on Site	66265.16(d)		<input checked="" type="checkbox"/>	(i) Other:					
(e) Training Records Maintained for 3 Yrs.	66265.16(e)		<input checked="" type="checkbox"/>	All above code sections refer to the California Code of Reg. Title 22					
(f) Training Records Complete	66265.16(1,2)		<input checked="" type="checkbox"/>						

PERMISSION GIVEN TO INSPECT FACILITY:				Pollution Prevention		Health & Safety Code	
YES <input type="checkbox"/> NO <input type="checkbox"/>				Source Reduction Plan Completed		25744.19	

OTHER COUNTY PROGRAMS: UST HMBP UR

REMARKS: **1) Provide proper labeling of hazardous waste containers with accumulation start date**
2) Provide proper closure of hazardous waste containers including oil filters

PRINT NAME: **Lon Hugnut** TITLE: **owner**
 SIGNATURE: *[Signature]* INSPECTED BY: *[Signature]* DATE: **24AUG95**

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

STID #: 693 FACILITY NAME: Lee's Auto Repair PG. 2 OF 2

SUPPLEMENTAL FORM

- 3) Provide proper cleanup technique for employees handling hazardous waste
- 4) Recommend use of drain pans for ^{under} engines & parts leading to hazardous waste
- 5) Provide proper training records for employees handling hazardous waste
- 6) Provide contingency plan on site & copy to our office

Comply within 60 days

PRINT NAME: JCN Hugard

INSPECTED BY: R. D. [Signature]

SIGNATURE: [Signature]

DATE: 24 AUG 2005

ALAMEDA COUNTY ENVIRONMENTAL HEALTH / HAZARDOUS MATERIALS DIVISION
 1131 Harbor Bay Pkwy., Rm. 250, Alameda, CA 94502-6577
 (510) 567-6700 Fax (510) 337-9335

mm 11/10/94

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

STID # *6093* FACILITY NAME: *Lee Lee Brothers* EPA ID # *CA00059308*

ADDRESS, CITY & ZIP CODE: *1685 24th Street, Oakland 94607* PHONE: *415-985-1*

TYPE OF BUSINESS: *Auto Repair* CODE SECTION COMPLIANCE YES NO N/A TIERED PERMITTING STATUS: CE CA PBR N/A CODE SECTION COMPLIANCE YES NO N/A

1. IDENTIFICATION NUMBER **6. CONTINGENCY / BUSINESS PLAN**

(a) Obtained EPA I.D. Number 66262.12(a) (a) Contingency Plan Complete 66265.52(a-f)
 (b) Transporter and TSDF Have EPA I.D. # 66262.12(c) (b) Copy of Plan on Site 66265.53

2. PRE-TRANSPORT REQUIREMENTS
 (a) HW Containers Labeled 66262.31
 (b) H W Label Properly Filled Out 66262.32(b)
 (c) HW Accumulation Time Not Exceeded 66262.34(c)
 (d) Accumulation Date Indicated 66262.34(f)
 (e) Description of H W Contents 66262.34(f)
 (f) HW Containers in Good Condition 66265.171
 (g) HW Compatible with Containers 66265.172
 (h) HW Containers Closed /Sealed 66265.173
 (i) HW Storage Area Inspected Weekly 66265.174
 (j) Tank & Tank Equip. Inspected Daily 66265.195
 (k) Incompatible HW in Separate Containers 66265.199
 (l) Proper Management of Used Oil Filters 66266.130

7. PREPAREDNESS AND PREVENTION

(a) Internal Commun./Alarm Provided 66265.32(a)
 (b) A Device to Call Outside Provided 66265.32(b)
 (c) Spill Control Systems Available 66265.32(c)
 (d) Maintain ER Equipment 66265.33
 (e) Access to Commun. during HW Handl. 66265.34
 (f) Maintain Adequate Aisle Space 66265.35
 (g) Arrangements w/ Local Agencies 66265.37

8. EMERGENCY PROCEDURES

(a) Character/Source/Extent of ER Determ'd 66265.56
 (b) Proper Agencies Notified of Hlth. Hazard 66265.56
 (c) ER Data Submitted to DTSC & LIA 66265.56
 (d) Uncontrol. Release HW Properly Handled 66265.56

3. RECORDKEEPING AND REPORTING **9. WASTE STREAMS**

(a) HW Analysis Kept 5 Yrs./Land Disposal 66262.11
 (b) Biennial Report Submitted to State 66262.41
 (a) HW Shipped with Proper Manifest 66262.20
 (b) Manifests Kept for last 3 Yrs. 66262.40(a)
 (c) HW Analysis Kept 3 Yrs. 66262.40(c)
 (d) Manifests Received from TSDF 66262.42
 (e) Other: *Waste paper*
 (f) Other: *Waste filter*
 (g) Other: *used absorbents*
 (h) Other:
 (i) Other:

4. MANIFEST / RECEIPTS **5. TRAINING**

(a) Training Program Provided 66265.16
 (b) Personnel Trained & Supervised 66265.16(b)
 (c) HW Personnel Trained within 6 Months 66265.16(b)
 (d) Training Records Kept on Site 66265.16(d)
 (e) Training Records Maintained for 3 Yrs. 66265.16(e)
 (f) Training Records Complete 66265.16(1,2)
 All above code sections refer to the California Code of Reg. Title 22

PERMISSION GIVEN TO INSPECT FACILITY: YES NO
 Pollution Prevention Health & Safety Code

OTHER COUNTY PROGRAMS: UST HMBP UR
 Source Reduction Plan Completed 25744.19

REMARKS: *Hazardous Waste Handlers*
→ Oil - Waste Oil Recovery System 6/28/94
→ Filter - Golden State 10/25/94
→ Parts Clean - Safety Clean - 11/94
→ Page 1 Araker

PRINT NAME: *[Signature]* TITLE:
 SIGNATURE: *[Signature]* INSPECTED BY: *Karl Marezilla* DATE: *11/9/94*

HAZARDOUS WASTE GENERATOR INSPECTION REPORT

STID #: <u>693</u>	FACILITY NAME: <u>Lee Lee Brothers</u>	PG. _____	OF _____
--------------------	--	-----------	----------

SUPPLEMENTAL FORM Required Actions

- (1) Provide approved label for white oil drum, must indicate generator name, address, accumulation date, EPA #, physical properties etc. Sample shown.
- (2) Receipt for latent waste oil pick-up not available last pick-up 6-94. Note: You have only 90 days to store Hazardous waste.
- (3) Provide training to employees who handle hazardous waste. Information provided.
- (4) Develop contingency plan and return a copy to this Department and other local agencies such as the Fire Dept & Police.
- (5) Urban - Run off issues & Graywater issues. May Sink not plumbed to sanitary sewer it is plumbed to storm drain. This is illegal Disconnect.
- (6) Use absorbent to be disposed as Hazardous waste. Note: Hazardous Material Business Plan is now implemented by the City of Oakland Fire Dept

PRINT NAME:	INSPECTED BY: <u>Lee Hupert</u> <u>Raf Meregill</u>
SIGNATURE:	DATE: <u>11/9/94</u>

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200
Oakland, CA 94621
(415) 271-4320

Hazardous Materials Division Inspection Form

Site ID# 693 Site Name LEE LEE BROTHERS Today's Date 6/23/93

Site Address 1685-24TH ST EPA ID# _____

City OAKLAND Zip 94607 Phone _____

MAX Amt. Stored > 500lbs/55g/200cf? Y N
Hazardous Waste generated per month? _____

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

LA GENERATOR (Title 22)

- | | | |
|-------------------|-----------------------------|---------|
| Manifest | 1. Waste ID | 66471 |
| | 2. EPA ID | 66472 |
| | 3. > 90 days | 66508 |
| | 4. Label dates | 66508 |
| | 5. Biennial | 66493 |
| Manifest | 6. Records | 66492 |
| | 7. Correct | 66484 |
| | 8. Copy sent | 66492 |
| | 9. Exception | 66484 |
| | 10. Copies Rec'd | 66492 |
| Misc. | 11. Treatment | 66371 |
| | 12. On-site Disp. (H.S.&C.) | 26189.5 |
| | 13. Ex Haz. Waste | 66570 |
| Prevention | 14. Communications | 67121 |
| | 15. Aisle Space | 67124 |
| | 16. Local Authority | 67126 |
| | 17. Maintenance | 67120 |
| | 18. Training | 67105 |
| Contn. gency | 19. Prepared | 67140 |
| | 20. Name List | 67141 |
| | 21. Copies | 67141 |
| | 22. Emg. Coord. Tmg. | 67144 |
| Containers, Tanks | 23. Condition | 67241 |
| | 24. Compatibility | 67242 |
| | 25. Maintenance | 67243 |
| | 26. Inspection | 67244 |
| | 27. Buffer Zone | 67246 |
| | 28. Tank Inspection | 67259 |
| | 29. Containment | 67245 |
| | 30. Safe Storage | 67261 |
| | 31. Freeboard | 67257 |

Comments: + DRAINED USED OIL FILTERS

1) SPILLS OF OIL - USE PANS TO CATCH SPILLS. IF SPILLED ON TO ASPHALT, ABSORBENT USED.

2) LABEL FOR WASTE OIL TANK ALSO NEEDS TO INCLUDE APPROPRIATE HAZARD WARNING - TOXIC/COMBUSTIBLE - 7 DAYS.

3) OIL/GAS DRAINS TO STORM DRAIN BEHIND BUILDING - ONLY WATER IS ALLOWED TO BE DISCHARGED TO STORM DRAINS. HANDWASH SINK IS NOT PLUMBED TO SEWER BUT INSTEAD DISCHARGES TO STORM DRAIN.

4) HAZARDOUS WASTE TRAINING REQUIRED BECAUSE > 55 GALLONS OF HAZARDOUS WASTE (WASTE OIL) IS STORED. - 30 DAYS, DOCUMENT.

5) ALSO BECAUSE OF QUANTITY OF HAZARDOUS WASTE STORED, PREPAREDNESS + PREVENTION PLAN & CONTINGENCY PLAN, + EMERGENCY PROCEDURES REQUIRED. 30 DAY

LB TRANSPORTER (Title 22)

- | | | |
|----------|---------------------------|-------|
| Manifest | 32. Applic./Insurance | 66428 |
| | 33. Comp. Cert./CHP Insp. | 66448 |
| | 34. Containers | 66465 |
| Manifest | 35. Vehicles | 66465 |
| | 36. EPA ID #s | 66531 |
| | 37. Correct | 66541 |
| | 38. HW Delivery | 66543 |
| | 39. Records | 66544 |
| Cont'n | 40. Name/ Covers | 66545 |
| | 41. Recyclables | 66800 |

Rev 6/88

Contact: _____

Title: _____

Signature: _____

Inspector: Paul Hurst

Signature: Don Awang

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200
Oakland, CA 94621
(415) 271-4320

Hazardous Materials Division Inspection Form

Site ID# 693 Site Name LEE LEE BROTHERS Today's Date 8/19/92

Site Address 1625-24TH ST EPA ID# CA1000059308

City OAKLAND Zip 94607 Phone _____

MAX Amt. Stored > 500lbs/55g/200cr? N
Hazardous Waste generated per month? _____

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

I.A GENERATOR (Title 22)

- | | | |
|-------------------|-----------------------------|---------|
| Manifest | 1. Waste ID | 66471 |
| | 2. EPA ID | 66472 |
| | 3. > 90 days | 66508 |
| | 4. Label dates | 66608 |
| | 5. Biennial | 66493 |
| Manifest | 6. Records | 66492 |
| | 7. Correct | 66484 |
| | 8. Copy sent | 66492 |
| | 9. Exception | 66484 |
| | 10. Copies Rec'd | 66492 |
| Misc. | 11. Treatment | 66571 |
| | 12. On-site Disp. (H.S.&C.) | 26189.5 |
| | 13. Ex Haz. Waste | 66470 |
| Prevention | 14. Communications | 67121 |
| | 15. Aisle Space | 67121 |
| | 16. Local Authority | 67126 |
| | 17. Maintenance | 67120 |
| | 18. Training | 67105 |
| Contn. Agency | 19. Prepared | 67140 |
| | 20. Name List | 67141 |
| | 21. Copies | 67141 |
| | 22. Emg. Coord. Trng. | 67144 |
| Containers, Tanks | 23. Condition | 67241 |
| | 24. Compatibility | 67242 |
| | 25. Maintenance | 67243 |
| | 26. Inspection | 67244 |
| | 27. Buffer Zone | 67246 |
| | 28. Tank Inspection | 67259 |
| | 29. Containment | 67145 |
| | 30. Safe Storage | 67261 |
| | 31. Freeboard | 67257 |

Comments:

AUTO REPAIR
WASTE SOLVENT - 45 GAL - SAFE KLEEN, 8/19/92
WASTE OIL - 300 GAL - WASTE OIL RECOVERY SYST., OAKLAND
1) SPILLAGE OF OIL INCLUDING DIRT AREA IN FRONT OF BUILDING. DISCONTINUE/CLEAN UP.
2) HAZARDOUS WASTE LABEL FOR ABOVEGROUND WASTE OIL TANK ALSO NEEDS TO INCLUDE APPROPRIATE HAZARD WARNING - COMBUSTIBLE/TOXIC - 7 DAYS.

I.B TRANSPORTER (Title 22)

- | | | |
|----------|---------------------------|-------|
| Manifest | 32. Applic./Insurance | 66428 |
| | 33. Comp. Cert./CHP Insp. | 66448 |
| | 34. Containers | 66465 |
| Manifest | 35. Vehicles | 66465 |
| | 36. EPA ID #s | 66531 |
| | 37. Correct | 66541 |
| | 38. HW Delivery | 66543 |
| | 39. Records | 66544 |
| Cont'nz | 40. Name/ Covers | 66545 |
| | 41. Recyclables | 66800 |

Contact: _____
Title: _____
Signature: Lee Lee Inspector: _____
Signature: Don Huang



**City of Oakland
Urban Runoff Clean Water Program**

Bro 8-1-95

Agency Conducting Inspection: Alameda County
Inspector: R. Dorf

Date of inspection: 11/17/95
Date of last inspection: _____
Facility ID #: 693

Standard Industrial and Commercial Business Inspection Report

I. Background Information (as reported by Facility Contact)	
1. Name of Facility: <u>Lee's Auto Repair</u>	ACURID: _____
2. Site Address: <u>1685 - 24th St.</u>	
3. Name of Contact: <u>Lee Huynh</u>	4. Phone No. of Contact: <u>444 - 9857</u>
5. Mailing Address: <u>2097 Bocalaton St. Hayward 94545</u>	
6. Business Type or Activity: <u>Auto Repair</u>	
7. Standard Industrial Classification (SIC): <u>7538</u>	
8. Is property owner different from facility owner? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no If yes, complete the following: Name of Property Owner: <u>Pacific Pipe</u> Phone No.: _____ Mailing Address of Property Owner: <u>2000 Mandela Parkway</u>	
9. Is the facility covered under any other permits? <input type="checkbox"/> none <input type="checkbox"/> air quality <input type="checkbox"/> sanitary sewer <input checked="" type="checkbox"/> ? underground storage tanks	
10. Does the facility have a spill prevention plan? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
11. Have there been any prior complaints or reports of illicit discharge regarding the facility? <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	
II. General Industrial Activity Storm Water NPDES Permit	
1. Describe the facility's status for coverage under a storm water permit: <input checked="" type="checkbox"/> Facility is not covered and does not appear to need coverage. (Go to Section III.) <input type="checkbox"/> Facility is not covered but should be. (Send copy of inspection report to Regional Board staff.) <input type="checkbox"/> Facility is not covered but may require coverage. Additional clarification is required from the Regional Board. <input type="checkbox"/> Facility is covered. Circle one: general or individual	
2. If the facility/mobile operation is covered under the General Industrial Activity Storm Water NPDES permit, answer the following:	
a. Does the facility have a Storm Water Pollution Prevention Plan (SWPPP)? <input type="checkbox"/> yes <input type="checkbox"/> no If yes: Does the SWPPP identify potential pollutants? <input type="checkbox"/> yes <input type="checkbox"/> no Does the SWPPP identify BMPs? <input type="checkbox"/> yes <input type="checkbox"/> no Does the SWPPP certify that there are no illicit discharges? <input type="checkbox"/> yes <input type="checkbox"/> no Is the SWPPP being implemented? <input type="checkbox"/> yes <input type="checkbox"/> no	
b. Describe the facility's status for conducting storm water monitoring. <input type="checkbox"/> Facility has self-certified no exposure. <input type="checkbox"/> Facility has or is in the process of obtaining municipal-certification and is exempt from conducting monitoring. <input type="checkbox"/> Facility is part of a group monitoring plan. <input type="checkbox"/> Facility is implementing a monitoring plan or is waiting for the wet season to conduct sampling. <input type="checkbox"/> Facility is not implementing a monitoring plan.	
3. Comments/Follow-up to the Regional Board:	

O-EM/c-Pe/c-site: 7-13-95, 8A

Facility Name: Lee's Auto Repair
 Date: 11/11/95

Facility ID #: 693

Standard Industrial and Commercial Business Inspection Report

III. Conclusion (to be completed by inspector)

1. For each area of activity, indicate a code to describe 1) the level of potential discharge to the storm drains, 2) the type of potential discharge found and 3) the type of material exposed.

Level of Potential Discharge:

- 0 - not applicable for facility
- 1 - no pollutant exposure
- 2 - little potential for pollutant discharge to storm drains
- 3 - some potential for pollutant discharge to storm drains
- 4 - great potential for pollutant discharge to storm drains
- 5 - pollutant discharge to storm drains imminent

Type of Potential Discharge:

- A - illicit connection
- B - where drain discharges unknown
- C - activity area and/or material exposed to storm water
- D - other (please specify)

Type of Material Exposed:

- i - Raw materials
- ii - Finished materials
- iii - Hazardous materials
- iv - Metals (solids or solutions)
- v - Waste products
- vi - Other

Areas of Activity:

- Outdoor Material/Manufacturing Areas
- Waste Disposal Areas
- Rooftop Equipment
- Vehicle and Heavy Equipment Areas
 - parking areas and access roads
 - repair and maintenance areas
 - wash areas
- Other Areas _____

Level of Potential Discharge	Type of Potential Discharge	Type of Material Exposed
0		
3	C	V
0	C	
3	C	iii
3	C	ii
0		

2. Required Action(s): (To be undertaken by facility owner/operator)

- None (Facility is in compliance with storm water ordinance.)
 - Correct problem(s) outlined on page 3 and attachment A by: 15ACU995
 - Submit Certificate of Correction by: _____
- Include: Photographs documenting correction Other supporting documentation: _____

3. Follow-up Inspection

- Follow-up inspection is necessary. Tentative date for re-inspection: _____
- Follow-up inspection will be scheduled at a later date.
- Follow-up inspection is not necessary.

4. Enforcement Activities

- (1) None (2) Warning Notice
- Referred to the City for enforcement action (describe why): _____
- (3) Informal Violation (4) Formal Violation (5) Legal Action

5. Describe outreach performed by inspector to promote ACURCWP.

- ACURCWP outreach brochure industrial or BMP brochure (describe below)
- Informed facility operator that a storm water permit may be required.
- verbal other, please describe _____

6. Time to perform inspection: 1.5 hrs

7. Comments:

Facility Representative Signature: [Signature]

Date: 7-11-95

Print Facility Rep. Name: LEN HUGGINS

Inspector's Signature: [Signature]

Facility Name: Lee's Auto Repair
 Date: 10/14/15

Facility ID #: 193

Standard Industrial and Commercial Business Inspection Report

DIRECTIONS: Complete the following checklist while surveying the facility. If the answer is "no" or "unknown" to any of the following questions, complete Attachment A.

Inspection Checklist (to be completed by inspector)	Yes	No	Unknown	N/A ¹
1. Are storage containers including drums, waste dumpsters and/or trash compactors: free from cracks/leaks? not exposed to rain water or are their lids or covers kept closed?	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Are storage areas enclosed or covered from the rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Are material processing or handling areas enclosed or covered from the rain?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Are parking areas or access roads free of signs of excessive oil and/or motor fluids, leaks, stains, litter, and sediments?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Are vehicle repair and maintenance areas covered or out of the rain?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Are vehicle and heavy equipment stored outside free of leaks and grime?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Are spills in fuel or vehicle/equipment maintenance areas prevented from entering the storm drain system?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Are dry cleaning methods (for example, sweeping, damp mopping absorbents) used to clean: shop floors? material processing areas? material storage areas? waste disposal areas? access roads? parking lots?	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
9. Are all wash water and/or process waste water discharged to the sanitary sewer or recycled instead of discharged directly or indirectly to the storm drain system?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Are storm drain inlets and catch basins inspected and mechanically cleaned on a regular schedule?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Are waste products from rooftop equipment (for example, oil and grease from exposed motors/pumps or other rooftop equipment) not exposed to storm water runoff?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Other (Describe any other activity, process or material which may potentially come in contact with and/or contaminate storm water runoff):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹N/A: Not Applicable

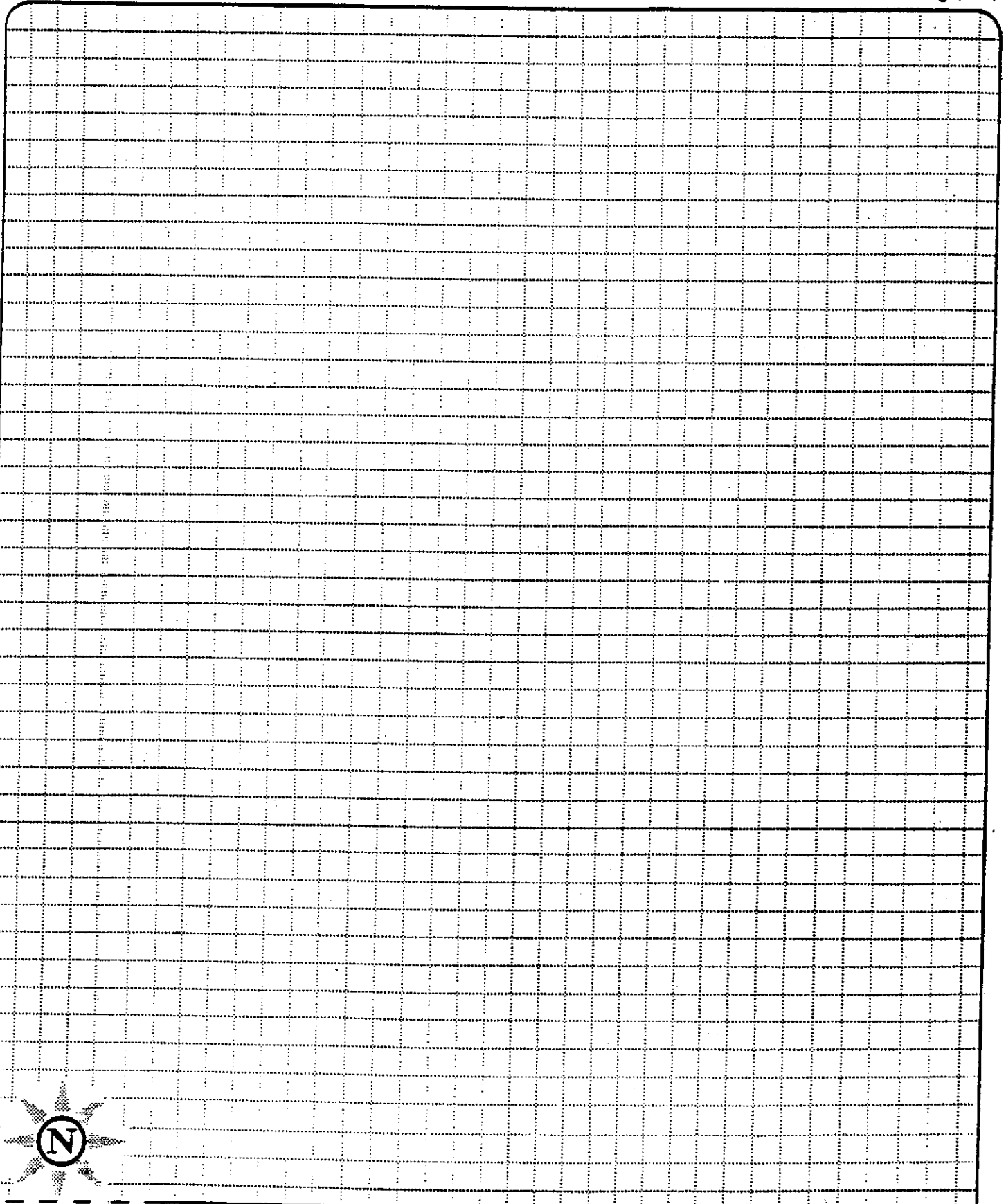


City of Oakland
Urban Runoff Clean Water Program

**FACILITY
MAP**

1 Facility ID #: _____ Facility Name: _____

Date: _____



101393; m1; Storm Facility



Circle appropriate north arrow 2

SCALE: 1" = _____ feet
(= 5 squares)

4 O = Sewer Drains; □ = Storm Drains
5 → = Surface Flow Direction

6 * = Possible Sources of Contamination

Standard Industrial and Commercial Business Inspection Report - Attachment A Page of

¹The suggestions below are to help the facility owner/operator solve the problems identified and comply with the storm water regulations. Sometimes there is more than one solution or Best Management Practice (BMP) that could prevent an illicit discharge to the storm drain system. The method of correction is optional; however, the elimination of the discharge is not. Failure to implement appropriate BMPs or to cease or prevent any non-storm water discharge to the storm drain system is a violation of local, state and federal storm water regulations.

Check List Reference No. <u>1 1/2</u>	Identified Problem: <u>materials & waste stored outdoors</u>	<input type="checkbox"/> Actual illicit discharge observed <input checked="" type="checkbox"/> Potential illicit discharge exists due to current conditions
---	--	--

Suggested Best Management Practices (BMPs):¹

- a). oily parts & waste should be moved indoors or covered
- b). keep lid on dumpster closed

Check List Reference No. <u>4 1/5</u>	Identified Problem: <u>oil stains on ground by parking & vehicle storage area.</u> <u>Some vehicles worked on outdoors</u>	<input type="checkbox"/> Actual illicit discharge observed <input checked="" type="checkbox"/> Potential illicit discharge exists due to current conditions
---	---	--

Suggested Best Management Practices (BMPs):¹

- a) Work on vehicles indoors
- b) store working vehicles under roof

Standard Industrial and Commercial Business Inspection Report - Attachment A Page ___ of ___

The suggestions below are to help the facility owner/operator solve the problems identified and comply with the storm water regulations. Sometimes there is more than one solution or Best Management Practices (BMP) that could prevent an illicit discharge to the storm drain system. The method of correction is optional; however, the elimination of the discharge is not. Failure to implement appropriate BMPs or to cease or prevent any non-storm water discharge to the storm drain system is a violation of local, state and federal storm water regulations.

Check List Reference No. 8	Identified Problem: Washing shop floors + outside surfaces with soap & water; soapy water not contained	<input checked="" type="checkbox"/> Actual illicit discharge observed <input type="checkbox"/> Potential illicit discharge exists due to current conditions
--	---	--

Suggested Best Management Practices (BMPs):¹

- a). use dry cleaning methods only
- b). use vacuum system to catch & contain soapy water
- ~~a~~ - This water cannot go into storm drain

Check List Reference No.	Identified Problem:	<input type="checkbox"/> Actual illicit discharge observed <input type="checkbox"/> Potential illicit discharge exists due to current conditions
---------------------------------	----------------------------	---

Suggested Best Management Practices (BMPs):¹

Facility Name: LEE LEE BROS.

Fac ID#: 693

Date: 12/1/93

Standard Inspection Checklist A

IV. Outdoor Material Storage Areas Not Applicable

1. How are outdoor storage areas cleaned swept wiped absorbent material other: _____

2. How often are outdoor storage areas cleaned? _____

3. Are materials stored in specified areas? yes no

4. Are storage containers (including drums) inspected regularly for cracks and leaks? yes no

5. Are storage containers (including drums) free of cracks/leaks? yes no

6. Are the covers/lids of containers kept closed or are containers not exposed to rainwater? yes no

7. If storage containers are cleaned, describe how wash water and/or the residual material is disposed.

8. Is the surface of the storage area paved and impermeable? yes no

9. Where do surface drains in this area discharge? no drains storm drains sanitary unknown

10. Is the outdoor storage area covered and unexposed to rainwater? yes no

11. Has the potential for storm water runoff or runoff from the storage areas been eliminated? yes no

12. Is the ground surface free of any stains or other signs of pollutants? yes no

13. Describe best management practices (BMPs) used to prevent materials from outdoor storage areas from contacting storm water and discharging to storm drains.

V. Waste Disposal Areas and Practices Not Applicable:

1. Are the lids on any waste dumpsters and/or trash compactors onsite kept closed? yes no

2. Are dumpsters and/or trash compactors inspected regularly for cracks/leaks? yes no

3. Are dumpsters and/or trash compactors free of cracks/leaks? yes no

4. Is the area free of litter? yes no

5. Where do drains discharge? no drains storm drains sanitary unknown

6. Is waste storage area enclosed or covered from rainfall? yes no

7. Has the potential for storm water runoff or runoff from the waste disposal areas been eliminated? yes no

8. Is the floor/ground surface free of any stains or other signs of pollutants on the floor? yes no

9. Describe BMPs used to prevent pollutants from waste disposal areas from contacting storm water and discharging to storm drains.

Facility Name: LEE LEE BROS.

Fac ID# 693

Date: 12/1/93

Standard Inspection Checklist A

VI. Vehicle and Heavy Equipment Storage and Maintenance Areas

Not Applicable

A. Parking Areas and Access Roads

- 1. Are vehicles and/or heavy equipment parked onsite? yes no
- 2. How often are parking areas cleaned? WEEKLY
- 3. Describe method for cleaning parking areas.
ABSORBENT
- 4. Where do drains in parking areas discharge? no drains storm drains sanitary unknown
- 5. Are parking areas covered or enclosed? yes no
- 6. Are parking areas or access roads free of any sign of past spills? yes no
- 7. Are parking areas or access roads free of signs of excessive leaking from oil and/or motor fluids? yes no

B. Vehicle and Heavy Equipment Repair and Maintenance Areas

Not Applicable

- 1. Where do drains in repair and maintenance areas discharge? no drains storm drains sanitary unknown
- 2. Are repair and maintenance activity areas onsite enclosed or covered and unexposed to rainwater? yes no
- 3. Has the potential for storm water runoff or runoff from repair/maintenance areas been eliminated? yes no
- 4. Is the floor/ground surface of repair/maintenance area free of any stains or other signs of pollutants? yes no

C. Vehicle and Heavy Equipment Wash Areas

Not Applicable

- 1. Where do drains in wash areas discharge? no drain recycled storm drains sanitary unknown
- 2. Is wash area covered or enclosed and unexposed to rainwater? yes no
- 3. Has the potential for storm water runoff or runoff from the wash area been eliminated? yes no
- 4. Is the floor of the wash area free of any stains or other signs of pollutants? yes no
- 5. Describe BMP's used to minimize the discharge of pollutants from access roads and vehicle and heavy equipment parking, repair, maintenance, and wash areas to storm water.

VII. Rooftop Equipment

Not Applicable

Describe the potential for pollutants from rooftop equipment to be exposed to storm water runoff (e.g. condensation, exhaust gas, emissions, exposed motors/pumps, etc.).

LITTLE

Facility Name: LEE LEE BROS. Fac ID# 693
 Date: 12/1/93

Standard Inspection Checklist A

VIII. Storm Water Conveyance System and Spill Response/Prevention Practices Not Applicable

1. How often are storm drain inlets (including catch basins) inspected, maintained, and/or cleaned?
2/YR
2. Describe method of cleaning. vacuum flush with water other: SCOOP
3. Describe any testing for illicit connections to the storm drain system conducted by the facility (e.g. visual inspection, dye tests, etc.). _____
4. If there are any other areas onsite that may be exposed to storm water (e.g. process and/or work areas, indoor storage areas, materials handling areas, etc.), fill out appropriate section of Attachment B.
 all areas of the facility have been described see Attachment B for further information
5. Briefly describe BMPs taken to prevent spills from entering the storm drain system and methods for clean-up should a spill occur.

IX. Significant Materials (Materials that may have potential to be released with storm water discharges)

Estimate degree of material exposure to storm water using Code: 0 - None
 1 - Little Potential for exposure to storm water
 2 - Some potential for exposure to storm water
 3 - Great potential for exposure to storm water

	(Code)	Describe Materials if appropriate:
Raw Materials used in processing or production	0	
Finished Materials	0	
Hazardous Substances	0	
Metals (especially copper, lead, zinc) solids (e.g. metal scraps) and solutions	1	AUTO BODY PARTS
Waste Products	2	LEAKS OF AUTOMOTIVE FLUIDS FROM VEHICLES PARKED OUTSIDE
Other		

Standard Inspection Checklist A

X. Conclusions (to be completed by the inspector)

1. For each area of activity, indicate a numerical code to describe the level of potential discharge to the storm drains AND a letter code to describe the type of potential discharge found.

Level of Potential Discharge:

- 0 - not applicable for facility
- 1 - little potential for pollutant discharge to storm drains
- 2 - some potential for pollutant discharge to storm drains
- 3 - great potential for pollutant discharge to storm drains

Type of Potential Discharge:

- A - illicit connection
- B - where drain discharges unknown
- C - activity area and/or material exposed to storm water
- D - other (please specify)

Areas of Activity:

Outdoor Material Storage Areas

0

Waste Disposal Areas

1-C

Rooftop Equipment

1-C

Vehicle and Heavy Equipment Storage and Maintenance Areas

parking areas and access roads

2-C

repair and maintenance areas

1

wash areas

0

Other Areas: _____

2. Is a General Permit required? yes no questionable*
*need clarification from Regional Water Quality Control Board whether permit is required.

3. Does the facility have a Storm Water Pollution Prevention Plan (SWPPP)? yes no

4. Did the inspector use facility's SWPPP during the inspection? yes no

5. Describe outreach performed by inspector to promote the Alameda County Urban Runoff Clean Water Program.

general ACURCWP brochure
verbal

industrial brochure
BMP handouts (describe below)
Other (describe below)

Informed facility that General Permit may be necessary

6. Follow-up Activities: None Warning Notice

Informal Violation Formal Violation

If a violation was identified, indicate date of follow-up inspection if scheduled: _____

no follow-up inspection necessary follow-up inspection to be scheduled at a later date

7. Time to perform inspection: _____ hours

Recommended actions:

REMOVE OIL SPILLS FROM PAVEMENT OUTSIDE,
USE PANS TO CATCH SPILLS

Comments:

Facility Representative Signature: [Signature]

Date: 12/1/93

Print Facility Rep. Name: _____

Inspector's Signature: [Signature]

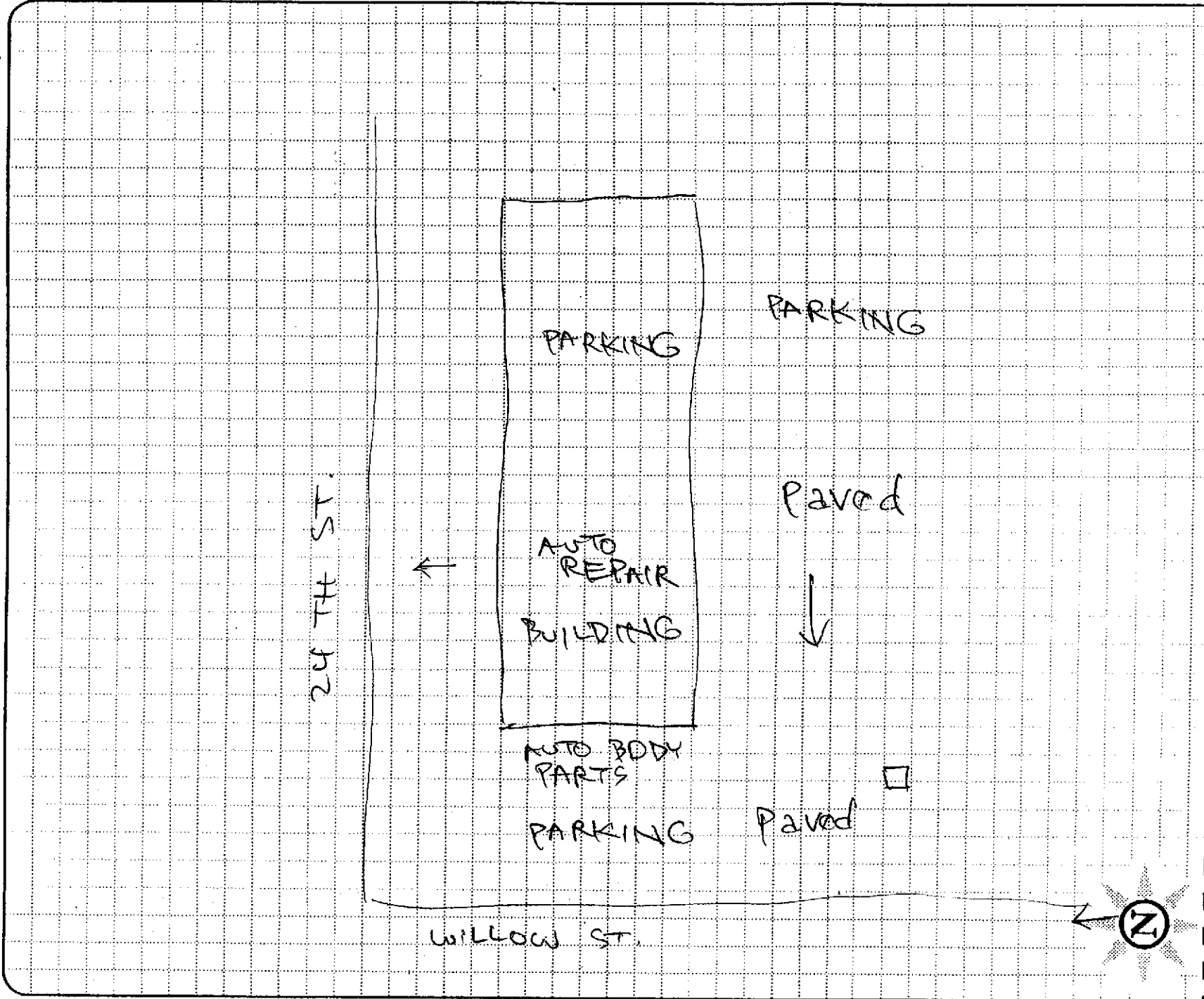


Alameda County Urban Runoff Clean Water Program
A Consortium of Local Agencies:

FACILITY
MAP

Facility ID #: 693 Name: LEE LEE BROS. Date: 12/1/93

Pg 6 of 6



10/13/93, mk; Storm-Backup

Circle appropriate north arrow: 1 2 3

SCALE: 1" = _____ feet
(= 5 squares)

4 = Sewer Drains; 5 = Storm Drains

6 = Possible Sources of Contamination

7 = Surface Flow Direction

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

FACILITY QUESTIONNAIRE
=====

GENERAL INFORMATION

1. Establishment Name: Yellow Cab Garage
2. Site Address: 1685 24th Street
City Oakland Zip 94608
3. Mailing Address (if different): _____
City _____ Zip _____
4. Contact Person: Mylene Davi Phone: _____
5. Owner Name: Hua Han yeh Owner Phone: 444-9851
6. Name of Previous Owner: _____
7. Date you assumed business: 8 months
8. Std. Industrial Classification (SIC) _____ 9. Type of Business: auto servicing
10. Number of Employees: 3 11. EPA ID #: _____

PERMITS Check if you have permits from any of the following:

Local Agencies

12. [] Local Sewer District (industrial waste discharges)
Name of District _____
13. [] City or Local Fire Dept. (Underground tanks, storage)
Name of City or Dept. _____
Type of Permit _____
14. [] Alameda County Dept. of Health (Underground tanks)
15. [] S.F. Regional Water Quality Management District
16. [] Bay Area Air Quality Management District
- CALIFORNIA Department of Health Services:
17. [] Treatment, Storage, Disposal Facility
18. [] Hazardous Waste Hauler

County Use Only

_____ Site ID
[] 1 Entry [] 2

OTHER

Please check if the following applies at your facility:

- 19. [] Acutely hazardous materials are handled (Attachment 1)
- 20. [] More than 500 lbs, 55 gal. or 200 cu. ft. of hazardous materials are handled (per year?) (See attachment 2)
- 21. [] Hazardous materials are contained in underground tanks or sumps.
- 22. [] You have submitted a business plan to the Alameda County Division of Hazardous Materials under California Health & Safety Code, Chapter 6.95.
- 23. Which of the following categories of hazardous materials are handled at your facility:
 [] Toxic [] Corrosive [] Flammable [] Reactive

24. LIST OF CHEMICALS HANDLED

Please list the County Inventory Numbers (CIN) or Chemical Abstract Service (CAS) numbers of any of the hazardous chemicals that you handle. CIN numbers have been assigned to the more commonly used hazardous chemicals. If CAS numbers are used, please precede each number with an asterisk (*).

<u>waste oil</u>	_____	_____	_____	_____	_____	_____
<u>degreasing solvent</u>	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

CERTIFICATION

I hereby certify that the information on this form is, to the best of my knowledge, true and complete.

25. *Mylene Davis*
Signature

Mylene Davis
Typed or Printed Name

26. *Manager*
Title

5/17/90
Date

Please return completed form to: Department of Environmental Health
Hazardous Materials Division

yellow cab, 1685-24th St
94607

8/19/93

70 STs were permitted to be removed on 4/28/87.

Lab reports do not correspond with tanks listed on the application.

application

lab report

1,000

10,000 tank 6 gas

1,000

10,000 tank 7 gas

1,000

8,000

8,000

7,500

7,500

7,500 tank 9 gas

7,500 tank 10 gas

550 tank 8 w.oil

tank 11 unknown not indicated

ALAMEDA COUNTY
HEALTH CARE SERVICES



DAVID KEARS AGENCY
Agency Director

470-27th Street, Third Floor
Oakland, California 94612
(415) 874-7237

SITE ID
NAME Yellow Cab Co.
ADDRESS 1685 24th St.

DATE 01/25/86
PHONE 568-9111
EPA ID
CITY/ZIP Oakland 94607

The marked items represent violations of the Calif. Administrative Code

General

- 1. Waste ID 66471
- 2. EPA ID's 66472
- 3. >90 day Stor 66508
- 4. Labels 66504
- 5. Biennial RPT 66493
- 6. Records 66492

Manifest

- 7. Correct 66480
- 8. Copies sent 66484
- 9. Except RPT 66484
- 10. Copies Rec 66492

Misc

- 11. Treatment 66371
- 12. On-site Disp
H&S 25189.5
- 13. ExHazWaste 66570

Prevention

- 14. Communica 67121
- 15. Aisle space 67124
- 16. Local Emer 67126
- 17. Maintenance 67120
- 18. Training 67105

Contingency

- 19. Prepared 67140
- 20. Name List 67141
- 21. Copies 67141
- 22. EmerCoorTng 67144

Containers, Tanks

- 23. Condition 67241
- 24. Compatibility 67242
- 25. Maintenance 67243
- 26. Inspection 67244
- 27. Buffer zone 67246
- 28. Tank Insp 67259
- 29. Closure 67260
- 30. Safe Store 67261
- 31. Freeboard 67257
- 32. Other

Comments: Clean up solvent in parts cleaner serviced monthly by Safety Kleen. Waste oil, transmission oil in 50 gal underground tank, Receipts of waste disposal must be kept available for 3 years.
Gas tanks underground have not been used for 10 years.

CONTACT PERSON Dominic Adebayo

TITLE Office Manager

SIGN [Signature]

INSPECTOR THOMAS PEACOCK

SIGN [Signature]

11-2-81
Rec'd

8/27/92
? 500 gal
wastage
tank
8/11/93
letter to [unclear]
on [unclear]

November 1, 1989

Alameda County Health Care Services Agency
Department of Environmental Health
Hazardous Materials Program
80 Swan Way, Room 200
Oakland, CA 94621

Attention: Thomas F Peacock,
Senior HMS
Hazardous Materials Division

Regarding: Site at 1685 24th Street
Your letter dated 10/27/89

Dear Mr. Peacock:

There are indeed storage tanks at the 24th Street location as your letter indicates. To my knowledge, there is no use of these tanks. In fact, I do not know how many tanks there are on the property, their previous use or how long they have been out of service.

The property owner, Pacific Pipe, as well as Yellow Cab need to get an understanding of what is required by your agency for unused storage tanks. I believe if we could have a conversation, I can determine the best course of action.

In the meantime, please send any instructions and recommendations to my office relating to a tank closure plan. At the least, I can contact an expert who can assist in our compliance with your violation notice.

Thank you and I look forward to hearing from you.

Sincerely,

Timothy W. Walsh
President
dba Yellow Cab C.

6-28 Rem, has folder
appeared in my box
to [unclear]
look like
may aid of [unclear]
or 6(?)

Winter

CONSTRUCTION, INC.

COMPLETE SERVICING

Licensed Contractors—All Work Guaranteed
Pumps, Hoists & Compressors
Meter Exchange, Hoses, Belts, etc.

RE: Closure Plan

Property Owner Name: Pacific Pipe, Co.

Property Owner Address: 1685 24th. St. Oakland, CA.

Number of tanks to be removed: 7

Number of tanks to be installed: 0

Size of tanks: 3-1000, 2-8000, 2-7500

Contents of tanks: Fuel

Closure Procedures: Inert with 15 lbs. per thousand of dry ice.
Take soil samples from below tanks and have analysed.
Notify inspector of results. Appointment to be
made with inspector before tanks are removed.
Tanks to be taken to Levine Metals, Richmond, CA.

Contractor: Winter Construction Inc.
661 Kings Row
San Jose, CA 95112
408 279 2570

Soil Laboratory: Hull Development Labs, Inc.
1149 Minnesota Ave.
San Jose, CA.
408 287-1777

Sincerely

SAN JOSE
661 Kings Row
(408) 279-2570

Winter

CONSTRUCTION, INC.

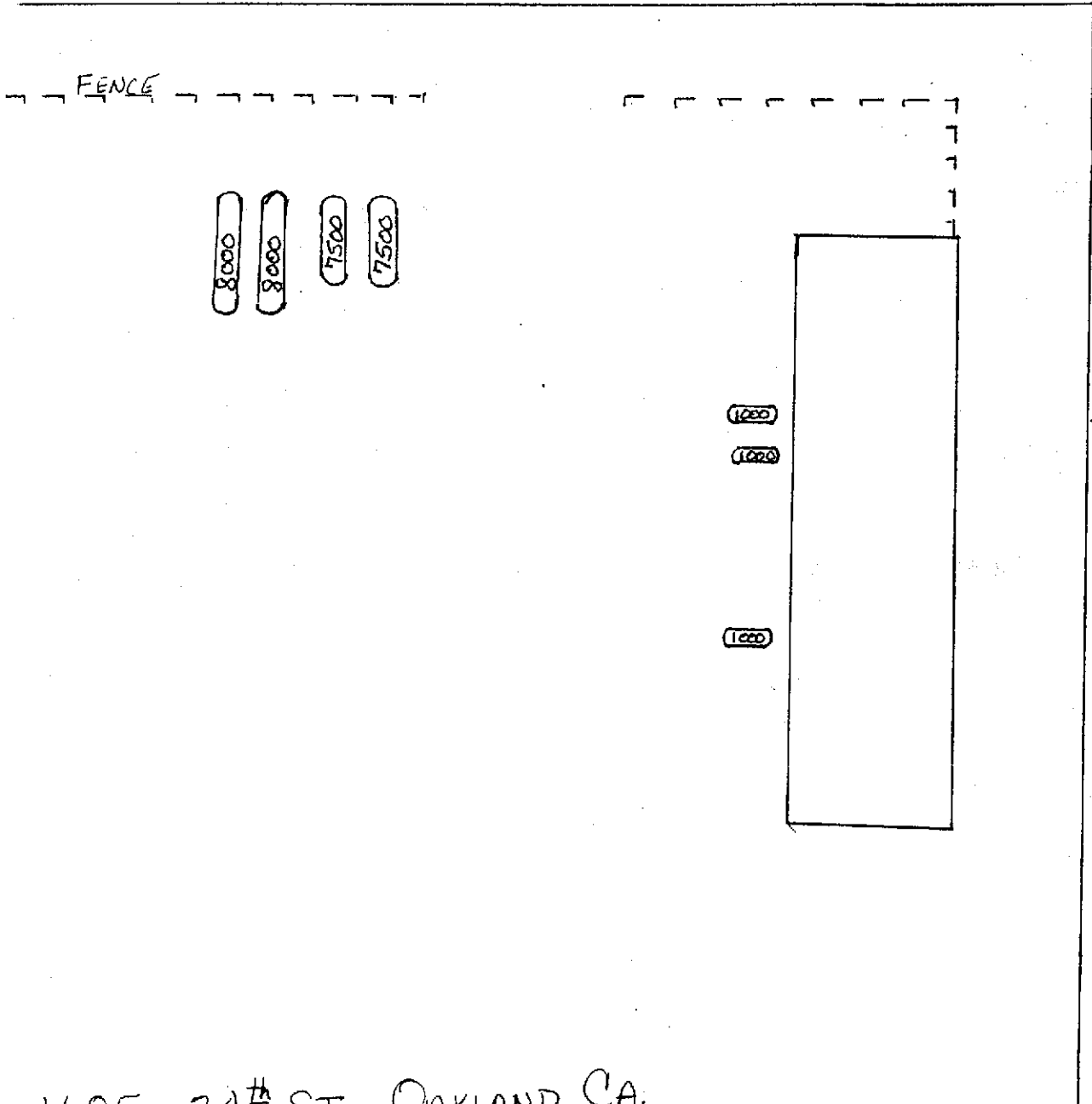
COMPLETE SERVICING

Licensed Contractors—All Work Guaranteed

Pumps, Hoists & Compressors

Meter Exchange, Hoses, Belts, etc.

WILLOW ST.



1685 24th ST. OAKLAND, CA.

SAN JOSE
661 Kings Row
(408) 279-2570

CITY OF OAKLAND
FIRE MARSHAL'S OFFICE
ROOM 201, CITY HALL
OAKLAND, CALIFORNIA 94612
273-3851

*138
1/16
Tanks*

Permit No. _____
Copies to _____
Date Issued _____

APPLICATION for PERMIT to INSTALL, REMOVE or REPAIR TANKS
IN THE CITY OF OAKLAND

Date April 28, 1987

Application is hereby made for permit to remove gasoline tank and excavate, commencing four feet inside the curb line
install fuel oil tank and excavate, commencing inside the property line
repair

on the side of Willow St. St. Corner feet of 24th. St. St.

House No. 1685 24 th. St. OAKLAND Street
and Street 1685 24 th. St. OAKLAND Avenue Present storage Fuel

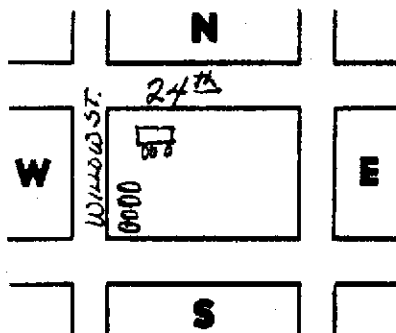
Owner Pacific Pipe Co. Address 2000 Cypress Ave. Phone 452-0122

Applicant Winter Construction, Inc Address 641 B Kings Row San Jose, CA Phone 408 279-2570

Remarks _____

Sidewalk surface to be disturbed X Number of Tanks 7 Capacity 3-1000
2-8000 Gallons each
2-7500

Signature P. Merino

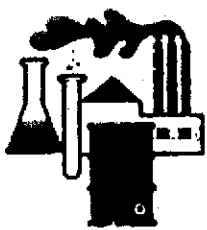


838-67 (8/87) .031

RECEIVED
MAY 5 1987

ENVIRONMENTAL HEALTH
ADMINISTRATION

* Copies of soil reports



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/20/87
DATE RECD: 5/19/87
LAB NO: W 8778-9
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on water.

Sampled at Pacific Pipe, 1685 24th.St., Oakland. 5/15/87

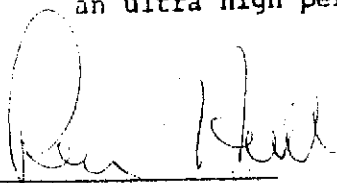
TANK # 7. 10,000 gal Gas. 10.30am.

TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = 3.0 $\mu\text{gm/gm}$ (ppm) by wt $\mu\text{g/g} = \text{ppm}$

TANK # 7. 10,000 gal. Gas. 10.33 am.

TOTAL VOL. HYDROCARBONS WITH BTX. ($C_4 - C_{12}$) = NONE DETECTED (Detection limit = 2.0 $\mu\text{gm/gm}$)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.

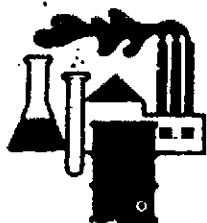




REVIEWED BY

PRAVIN PATEL (Chemist)

1149 MINNESOTA AVENUE • SAN JOSE, CALIFORNIA 95125 • (408) 287-1777



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/20/87
DATE RECD: 5/19/87
LAB NO: S 8774
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on Soil

Sampled at Pacific Pipe, 1685 24th St., Oakland. 5/15/87

TANK # 7. 10,000 gal Gas. Extractor end.

TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = NONE DETECTED (Detection Limit = 2.0 $\mu\text{g}/\text{g}$)

TANK # 7. 10,000 gal. Gas. Fill end.

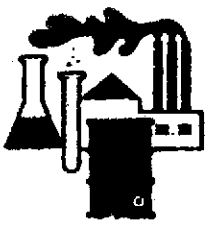
TOTAL VOL. HYDROCARBONS WITH BTX. ($C_4 - C_{12}$) = NONE DETECTED (Detection limit = 2.0 $\mu\text{g}/\text{g}$)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.


REVIEWED BY.


PRAVIN PATEL (Chemist)

1149 MINNESOTA AVENUE • SAN JOSE, CALIFORNIA 95125 • (408) 287-1777



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/20/87
DATE RECD: 5/19/87
LAB NO: S. 8777
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on Soil.

Sampled at Pacific Pipe, 1685 24th. St., Oakland. 5/15/87

TANK # 8. WASTE OIL 550 gal.

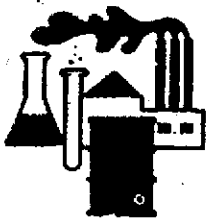
TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_5 - C_{22}$) = NONE DETECTED (Detect. Limit = 2.0 μ g.)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.


REVIEWED BY.


PRAVIN PATEL (Chemist)

1149 MINNESOTA AVENUE • SAN JOSE, CALIFORNIA 95125 • (408) 287-1777



Hull Development Labs, Inc.

*3/8
file 457/ANES*

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/29/87
DATE RECD: 5/27/87
LAB NO: S 8780
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on Soil.

Sampled at Pacific Pipe, 24th /Willow St., Oakland. 5/22/87

TANK # 9. 7,500 gal. Gas.Fill end.

TOTAL VOL.HYDROCARBONS WITH B.T.X.(C₄ - C₁₂) = NONE DETECTED.(Det. Limit = 2.0ugm/gm)

RECEIVED

JUN 16 1987

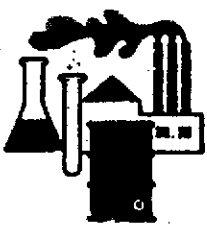
ENVIRONMENTAL HEALTH
ADMINISTRATION

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.

[Signature]

REVIEWED BY.

[Signature]



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/29/87
DATE RECD: 5/27/87
LAB NO: S 8781
P.O. NO: Verb.G.W.

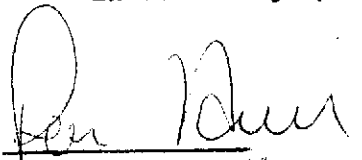
Total Petroleum Fuel Hydrocarbons Analysis on Soil.

Sampled at Pacific Pipe, 24th/Willow st., Oakland. 5/22/87

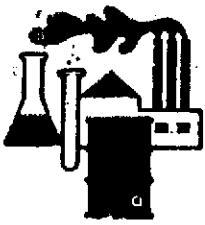
TANK # 10 7.500 gal. GAS.

TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = NONE DETECTED. (Det. Limit = 2.0 ug/m³)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.


REVIEWED BY.


PRAVIN PATEL (Chemist)



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/29/87
DATE RECD: 5/27/87
LAB NO: S 8782
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on Soil.

Sampled at Pacific Pipe, 24th/Willow St., Oakland. 5/22/87.

TANK # 11. OIL. Fill end.

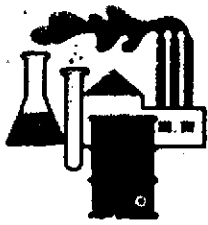
TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = NONE DETECTED (Det. Limit = 2.0ugm/gm)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.


REVIEWED BY:

1149 MINNESOTA AVENUE • SAN JOSE, CALIFORNIA 95128 • (408) 287-1777


ARWIN PATEL (Chemist)



Hull Development Labs, Inc.

WINTER CONSTRUCTION,
661 KINGS ROW,
SAN JOSE.CA.95112.

DATE: 5/20/87
DATE RECD: 5/19/87
LAB NO: S 8773
P.O. NO: Verb.G.W.

Total Petroleum Fuel Hydrocarbons Analysis on Soil.

Sampled at Pacific Pipe, 1685 24th St., Oakland. 5/15/87.

TANK # 6. 10,000 gal. Gas. Extractor end

TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = NONE DETECTED (Detection Limit = 2.0ugm,

Tank # 6. 10,000 gal. Gas. Fill end.

TOTAL VOL. HYDROCARBONS WITH B.T.X. ($C_4 - C_{12}$) = NONE DETECTED (Detection Limit=2.0 ugm/gm)

The determination was done by GC with a FID, using Purge and Trap with an ultra high performance cross-linked methyl silicone capillary column.

REVIEWED BY.

1149 MINNESOTA AVENUE • SAN JOSE, CALIFORNIA 95125 • (408) 287-1777

PRAVIN PATEL (Chemist)

HULL DEV. LAB., INC.

CHAIN OF CUSTODY RECORD

SOIL ANALYSIS

SAMPLERS		REPRESENTING	DATE	
Robert Cox Jim Williams		Winters Const. 641 B Kings Row San Jose	5/22/87	
LOCATION		Pacific Pipe corner of 24 th & Willow Oakland Inspector O.F.D. C.R. Myers #210		
SAMPLE I.D.		CONTAINERS	ANALYSIS NO.	
Soil		3	HydroCarbon	
RELINQ. BY.	REC'D BY	TIME	DATE	
<i>[Signature]</i>	Ren Nell	00:10	5.27.87	
RELINQ. BY.	REC'D BY.			
RELINQ. BY.	REC'D FOR LAB. BY			
Ren Nell		P.M. 00:10	5.27.87	

CHAIN OF CUSTODY RECORD

HULL DEVELOPMENT LABS. INC., 1149 MINNESOTA AVE., SAN JOSE, CA 95125

COMPANY NAME & LOCATION <i>Pacific Pipe</i> <i>Arnell Bryant OFD 209</i> <i>1685 24th St. Oakland</i>			
SAMPLERS <i>Robert Cox</i> <i>James Williams</i>	REPRESENTING <i>Winters Const.</i> <i>641 B Kings Row</i> <i>San Jose Ca. 95132</i>		DATE <i>5/15/87</i>
SAMPLE ID & SOURCE <i>Soil</i> <i>Extractions</i>	PRES. 	CONTAINERS <i>5</i> <i>2</i>	ANALYSIS REQ. <i>Total Hydrocarbons</i>
RELINO BY <i>Robert Cox</i>	REC'D BY <i>G. Williams</i>		DATE TIME <i>5-14 07:30</i>
RELINO BY <i>G. Williams</i>	REC'D BY		
RELINO BY	REC'D FOR LAB. BY <i>P. Pitzer</i>		