

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # 7002 2030 0006 9574 0696
August 20, 2004

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

Notice of Responsibility

Record ID: R00002591
Alameda County Fairgrounds
4501 Pleasanton Ave.
Pleasanton, CA 94566

SITE

Date First Reported: 8/11/03
Substance: Gasoline
Funding (Federal or State): F
Multiple RPs?: Y

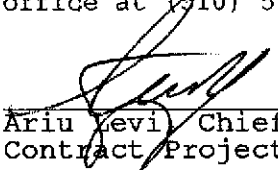
County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

**Responsible Party (RP) #2
(list of all RPs attached)**

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified County of Alameda as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency within 20 calendar days of receipt of this notice that identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5700.

Pursuant to section 25299.37(c) (7) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact Robert Schultz, Hazardous Materials Specialist, at this office at (510) 567-6719 for further information about the site designation process.


Ariu Levi, Chief
Contract Project Director

Date: 8/24/04

Please Circle One Add Delete Change

Reason: new case

c: Jenniffer Jordan, SWRCB
Robert Schultz, Hazardous Materials Specialist

ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL PROTECTION
HAZARDOUS MATERIALS DIVISION

August 20, 2004

LIST OF RESPONSIBLE PARTIES FOR

SITE

Record ID: R00002591
Alameda County Fairgrounds
4501 Pleasanton Ave.
Pleasanton, CA 94566

Date First Reported: 8/11/03
Substance: Gasoline
Petroleum (X) Yes
Source: F

Ed Johnson
Alameda County Fairgrounds
4501 Pleasanton Ave.
Pleasanton, CA 94566

Responsible Party #1
Tank Owner
Tank Operator

County Administrator
County of Alameda
1221 Oak St. #536
Oakland, CA 94612

Responsible Party #2
Property Owner

7002 2030 0006 9574 0696

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OFFICIAL USE

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) **ALCO AAB, CAO & BOS** C. Date of Delivery **AUG 26 2004**

D. Delivery address different from item 1? Yes
if YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

PS Form 3800, June 2002 See Rev

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HAZARDOUS MATERIALS DIVISION

August 20, 2004

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Postage	\$
Certified Fee	
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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent Ed Johnson
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Postmark

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(Transfer from service label)

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 B. Received by (Printed Name) C. Date of Delivery
 D. Is delivery address different from item 1? Yes
 if YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2002 2030 0006 9574 0362