

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, Assistant Agency Director

August 2, 1994

Alameda County
Health Care Services Agency
Dept. Of Environmental Health
1131 Harbor Bay Pkwy 2nd Flr.
Alameda Ca 94502-6577

Mr. Lester Feldman
San Regional Water Quality Control Board
2101 Webster Street
Suite 500
Oakland, CA

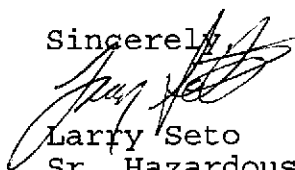
RE: United States Department of Agriculture
800 Buchanan Street, Albany, CA

Dear Mr. Feldman:

The United States Department of Agriculture (USDA) Western Regional Research Center has requested site closure for the above site. In Decemeber 1990, five underground storage tanks were excavated and removed. Soil and/or groundwater contamination was detected under four of the five underground tanks. Up to 1,400 ppb of chloroform was detected in the soil, and 480 ppb of methylene chloride in the groundwater. In September 1992, three two-inch diameter ground water monitoring wells were installed on-site. The wells were monitored on a quarterly basis from September 1992 to September 1993 for Volatile Organic Compounds (VOC) and Halogenated Volatile Organic Compounds (HVOC). Ground water samples from all wells, including the duplicate sample, were reported to be nondetectable for VOCs and HVOCs for all sampling events. The report titled "Summary of Findings for Soil and Ground Water Investigation" dated February 25, 1994 that was prepared by Environmental Science & Engineering summarizes the remediation and monitoring activities at the above site. Please review this report.

If you have any questions, please contact me at (510) 567-6700.

Sincerely,


Larry Seto
Sr. Hazardous Materials Specialist

cc: Gary Fleming, USDA
Sue Wickham, Environmental Science & Engineering, Inc.
Ed Howell, Chief, Hazardous Materials Division
File



Environmental
Science &
Engineering, Inc.

July 14, 1994

Mr. Larry Seto
Senior Hazardous Materials Specialist
Alameda County Health Care Services Agency
1131 Harbor Bay Parkway
Alameda, CA 94502-6577

SUBJECT: USDA 800 BUCHANAN STREET, ALBANY, CA

Dear Mr. Seto:

Environmental Science & Engineering, Inc. (ESE), on behalf of our client, the US Department of Agriculture (USDA), requests that you submit the closure report prepared for your review to the Regional Water Quality Control Board for site closure. The work performed at the site has documented four quarters of nondetectable concentrations of constituents. A separate closure report was prepared, at your request, after the fourth quarter of monitoring. No explanation was provided with your recent request for one additional round of monitoring at the site and it is our and our clients belief that no further monitoring is required.

Please revise your recommendations and submit the site to the Regional Board with closure recommendations. Please call Gary Fleming at the USDA (510) 559-5622 or Sue Wickham at ESE (510) 685-4053 with any questions concerning this request.

Sincerely,

ENVIRONMENTAL SCIENCE & ENGINEERING, INC.

Susan S. Wickham, RG 3851
Senior Geologist

cc: Gary Fleming, USDA

f:\6925405\ltr

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

June 21, 1994

Mr. Gary Fleming
United States Department of Agriculture
800 Buchanan Street
Albany, CA 94710

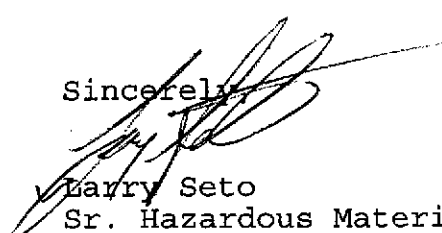
RE: 800 Buchanan Street, Albany, CA

Dear Mr. Fleming:

I have reviewed your Summary of Findings for Soil and Ground Water Investigation dated February 25, 1994 that was prepared by Environmental & Engineering, Inc. It is recommended that MW-1 and MW-2 be sampled one more time before approaching the Regional Board for site closure.

If you have any questions, please contact me at (510) 271-4320.

Sincerely,


Barry Seto
Sr. Hazardous Materials Specialist

cc: Ed Howell, Chief, Hazardous Materials
Sue Wickham, Environmental Science & Engineering, Inc.

U.S.P.A., 800 Buchanan St., Alb.

2/2/94

- 1) Extent of lateral ^{+ vertical} contamination - was it all excavated to AD?
- 2) Groundwater gradient direction? Seasonal variation?
Tidal Influence?
- 3) Groundwater flow? Contamination found at
under U.G.T. # 1 & # 2. The dist. between these
two tanks and MW-1 the closest well is
approx. 80 ft. Has there been sufficient
time for the contaminants to migrate to
MW-1
- 4) Impact of residual hydrocarbons on beneficial uses
- 5) Sent ^{per} copy of closure letter recommendation
Faxed letter of recommendation for
UST Case closure on 2/3/93



United States
Department of
Agriculture

Agricultural
Research
Service

Pacific West Area

800 Buchanan Street
Albany, California
94710

February 24, 1993

Ms. Susan Wickham
Environmental Science and Engineering
4090 Nelson Avenue, Suite J
Concord, CA 94520

Reference: Contract 53-91H2-2-278
Groundwater Monitoring Wells
Albany, California

Dear Ms. Wickham:

In response to your letter dated February 12, 1993, your request to use EPA Method 601 for groundwater samples is approved. However, it is requested that you verify that this method is as stringent as the EPA Method 8240 with respect to detection levels. If you find that it is not, please let us know.

If you should have any questions regarding this matter, contact Gary Fleming or myself.

Sincerely,


RITA ABEYTA
Contracting Officer

cc:

L. Seto, Alameda County Dept. of Health Services
R. Hiett, Regional Water Quality Control Board
A. Betschart, Albany, CA
A. Humphrey, Albany, CA
G. Fleming, Albany, CA



United States
Department of
Agriculture

Agricultural
Research
Service

Pacific West Area

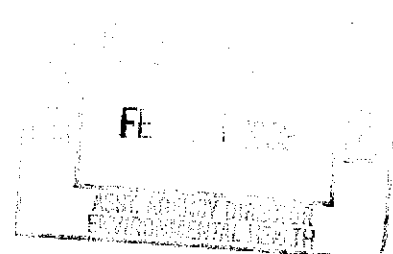
800 Buchanan Street
Albany, California
94710

Larry

*Ed
AC
2/16/93*

February 8, 1993

Subject: Contract 53-91H2-2-278
Groundwater Monitoring Wells
Albany, CA



Environmental Science and Engineering
Attn: Ms. Susan Wickham
4090 Nelson Avenue
Suite J
Concord, CA 94520

Dear Ms. Wickham:

The U.S. Department of Agriculture as well as the Alameda County Department of Health Services and the Regional Water Quality Control Board has reviewed your Draft Report. The report appears to be sufficient. While USDA agrees with your recommendation for immediate closure, the Alameda County Department of Health Services is requiring that the quarterly monitoring be performed. This appears to be the prudent step to take to assure the elimination of any future potential problems by off-site parties. It is requested that you finalize your report and continue to perform the quarterly monitoring as stated in your contract. Please provide me with a schedule showing the projected dates for taking the future samples. We look forward to continuing this project with your company at this time. If you have any questions please contact me at (510) 559-5622.

Sincerely,

Gary Fleming
Gary Fleming
Contracting Officer's Representative

cc:

- A. Betschart, Director, WRRRC
- C. Reder, Area Administrative Officer, FWA
- R. Abeyta, Contracting Officer, FWA
- A. Humphrey, Area Safety, Health and Environmental Manager, FWA
- L. Seto, Alameda County Dept. of Health Services
- R. Hiatt, Regional Water Quality Control Board
- G. Jensen, Senior Deputy District Attorney, Alameda County
- R. Shahid, Director, Environmental Health Department, Alameda Count





United States
Department of
Agriculture

Agricultural
Research
Service

Pacific West Area

800 Buchanan Street
Albany, California
94710

January 27, 1992

52-91H2-92

✓ Mr. Larry Seto, SHMS
Department of Environmental Health
Hazardous Material Program
80 Swan Way, Rm. 200
Oakland, CA 94621

RE: INVESTIGATION OF LUST WRRC ALBANY, CA

Dear Mr. Seto:

The Agricultural Research Service (ARS), Pacific West Area (PWA), is pleased to provide a copy of the Request for Proposal (RFP) No. 52-91H2-92, for performance of investigation of leaking underground storage tanks (LUSTs) at Western Regional Research Center, 800 Buchanan Street, Albany, CA 94701 as requested in your letter of May 7, 1991.

This project is the result of ARS' effort to identify/eliminate potential hazardous waste sites at our Location under authority of the Resource Conservation and Recovery Act (RCRA) and California Safe Drinking Water Act of 1976. It is being undertaken to verify that the LUSTs caused no harm to the environment.

By my earlier letter, I had invited you and the Regional Water Quality Control Board to participate in this project. This RFP is being provided to give you an opportunity to review it and comment, if you choose.

ARS invites you to assume an active role in this project, particularly in reviewing this RFP and the subsequent sampling-and-analysis plan which will be submitted by the successful contractor. Regardless of the role you choose now, your office will be sent a copy of all the documentation regarding this project and the final report for review and concurrence.

If you have any questions or wish additional information, please do not hesitate to contact me. I may be reached at (510) 559-6004.

Sincerely,

ALVIN HUMPHREY
Area Safety and Health Manager

Enclosure

cc:

R. Hydeth, TRWQCB (w/encl)
C. Reder, AAO, PWA
T. Betschart, Director, WRRC
J. Tsukahira, SSS, Albany
G. Fleming, PE, WRRC

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Program
80 Swan Way, Rm. 200
Oakland, CA 94621
(415)

May 7, 1991

Mr. Alvin Humphrey, Area Safety & Health Manager
U.S. Dept. of Agriculture
800 Buchanan St.
Albany, CA 94710-1105

RE: 800 Buchanan St., Albany, CA

Dear Mr. Humphrey:

As per our meeting on March 28, 1991, an environmental consultant should be contacted to develop an investigation and remediation plan for the above site.

If you have any questions, please contact me at 271-4320.

Sincerely,


Larry Seto
Senior Hazardous Materials Specialist

LS:lp

cc: Gary Fleming, USDA
Gil Jensen, Alco. District Attorney, Consumer and
Environmental Protection Agency
RWQCB
Rafat Shahid, Assistant Agency Director, Environmental Health
files

BILLING ADJUSTMENT FORM

Pgm Affected Billing Acct.*

- Generator . H _____
- AB2185 ... L _____
- UGT ... T _____

Date: 3-28-91

HazMat STID* : 3102

Caller: Gary Fleming Phone: 559-5622

Company Name : U.S.O.A.

Site Address : 800 Buchanan St. Albany 94710
City Zip

Requested Changes : 5 U.G.T. were removed in 11/90 there are only 2 U.G.T. presently on-site.

Initials: _____

Inspectors' Conclusion

- Rescind Bill for following reasons:
 - No Hazardous Waste
 - Moved out of County
 - Qty's under 2185 Min.
 - Closed / Out of Business
 - UGTanks removed
 - Other _____

Continue Billing With Following Changes:

	From:	To:
___ Change number of EMPLOYEES	_____	_____
<input checked="" type="checkbox"/> Change number of TANKS	<u>7</u>	<u>2</u>

___ AB2185: Changes attached
___ Reopen Site Address / New Owner

Co. Name _____

Owner _____ Phone _____

___ New Address

Site Address _____
City Zip

Mail Address _____
City Zip

Inspector: [Signature] Date: 3-28-91

HM Chg: _____
 Sent to Billing
on 1/1
Rev 11/89 Mac-BillAdj

Records Organize Go To Exit
SITENAME WESTERN REGIONAL RESEARCH CTR CASENO.# RBFILENO 01-1666
STREETNO 800 STREET BUCHANAN HOW DISCOVERED TC
CITY ALBANY ZIP 94710 DISCVRDATE 03/18/91
COUNTY 01 LOCALAGENCY 01000 MOPNO HOWSTOPPED CT STOPDATE 03/18/91
PRIORITY X: XXXXX Y: XXXXX LAT: XXXXX LON: XXXXX LEAKSOURCE T LEAKCAUSE F

ENTERDATE 10/08/92 REVIEWDATE 08/24/94 CORRDATE 08/15/92 RPTDATE 03/18/91
UPDATE REVSTAT C STAFF KLG FUNDING F NO.WELLS: PILOTPRPGM Y

PRIM SUB 79016 SEC SUB 75092 MAXSOIL 1400 MAXGW 0
MAXBENZENE 0 BENZENE 0 GWDEPTH CASETYPE S STATUS 0

DATE 1 00/00/00 DATE3A 00/00/00 DATE3B 00/00/00 DATE5C 00/00/00
DATE5R 00/00/00 DATE 7 00/00/00 DATE 8 00/00/00 DATE 9 00/00/00

INTERIM Y INTERIMDATE 00/00/00 ABATEMETHOD NT LEADAGENCY L

CASELIST FUEL ENFORCETYPE 0 ENFORCEDATE 00/00/00 RPSEARCH S

COMMENT SENT FILE TO LOP 8/94

Edit CD:\fuels\FUELDB Rec 1871/2127 File NumCaps



United States
Department of
Agriculture

Agricultural
Research
Service

Pacific West Area

800 Buchanan Street
Albany, California
94710

March 15, 1991

Mr. Larry Seto
DHS/HMD
80 Swan Way, Suite 200
Oakland, CA 94621

RE: MEETING TO DISCUSS MONITORING WELL(S) PLACEMENT, WRRRC, ALBANY

Dear Mr. Seto:

The purpose of this letter is to confirm our conversation of March 15, regarding a meeting scheduled for March 28, 1991, at 2:00 p.m. at your office to discuss placement of groundwater monitoring well(s) and the whole spectrum of underground storage tanks (USTS) removal at the USDA, ARS, Western Regional Research Center, 800 Buchanan Street, Albany, CA.


Mr. Richard Hyded of the State Regional Water Quality Control Board has also been invited to attend. Representing the Government will be Mr. Gary Fleming, WRRRC Facility Engineer, and myself.

Sincerely,

ALVIN HUMPHREY
Area Safety and Health Manager

cc:
C. Reder, AAO, PWA
A. Bestchart, Director, WRRRC
G. Fleming, FE, WRRRC
T. Roark, Chief, SHPS
G. Sundstrom, EPS, GSD/SHPS

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.	
REPORT DATE 0 M 2 W 2 D 8 D 9 Y 1 Y		CASE # 91 MAR 18 11:23		SIGNED _____ DATE _____	
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Gary Fleming		PHONE (415) 559-5622		SIGNATURE 
	REPRESENTING <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER _____		COMPANY OR AGENCY NAME Agricultural Research Service Western Regional Research Center, Albany, CA		
	ADDRESS 800 Buchanan St. STREET CITY Albany STATE CA ZIP 94710				
RESPONSIBLE PARTY	NAME <input checked="" type="checkbox"/> UNKNOWN		CONTACT PERSON ()		PHONE ()
	ADDRESS STREET CITY STATE ZIP				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) Western Regional Research Center		OPERATOR (415) 559-5622		PHONE (415) 559-5622
	ADDRESS 800 Buchanan STREET CITY Albany COUNTY Alameda ZIP 94710				
	CROSS STREET Taylor Street				
IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County DDHS		AGENCY NAME CONTACT PERSON Larry Szeto		PHONE (415) 271-4320
	REGIONAL BOARD San Francisco, Regional Water Quality Control		CONTACT PERSON Richard Hyatt		PHONE (415) 464-4359
SUBSTANCES INVOLVED	(1) NAME Chloroform		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
	(2) NAME Methylene Chloride		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN		
DISCOVERY/ABATEMENT	DATE DISCOVERED 1 M 2 W 3 D 0 D 9 Y 0 Y		HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER _____		
	DATE DISCHARGE BEGAN M M D D Y Y <input checked="" type="checkbox"/> UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER _____		
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE M M D D Y Y				
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER _____		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER _____		
	CASE TYPE CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY <input checked="" type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input checked="" type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY				
	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> OTHER (OT) _____				
COMMENTS	_____				

Please print or type. (Form designed for use on electronic pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No. PAC0005R2B0H47ER0R

Manifest Document No. 2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
US Dept - AGRICULTURE
300 DUCHAMEN STREET
ALBANY, CA 94710

A. State Manifest Document Number
89891030

4. Generator's Phone (415) 559-6058

B. State Generator's ID

5. Transporter 1 Company Name ERICKSON TRANSPORT

C. State Transporter's ID 1068211

6. US EPA ID Number PAC0009462392

D. Transporter's Phone (415) 233-7111

7. Transporter 2 Company Name

E. State Transporter's ID

8. US EPA ID Number

F. Transporter's Phone

9. Designated Facility Name and Site Address
ROMING CHEMICAL CO.
2091 BAY RD.
EAST PALO ALTO, CALIF 94503

G. State Facility's ID

10. US EPA ID Number PAC0009462392

H. Facility's Phone (415) 324-1638

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)
a. HAZARDOUS WASTE LIQUID NOS (F002) CRM - E, NA7181

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol I. Waste No. State 741 EPA/Other F002

b. COITTT 14786

c.

d.

J. Additional Descriptions for Materials Listed Above
PRC# 007551

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

15. Special Handling Instructions and Additional Information
Gloves + Goggles

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name Signature Month Day Year
Howard E. ... Signature ... 12/1/91

17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year
Tom Rothstein Signature Tom Rothstein 12/1/90

18. Transporter 2 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.
Printed/Typed Name Signature Month Day Year

89891030

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

GENERATOR

TRANSPORTER

FACILITY

Please print or type. (Form designed for use on all 2-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST

Generator's US EPA ID No. 18000003344 Manifest Document No. 111117

2. Page 1 of 1 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address
UNITED STATES GOVERNMENT
111117

A. State Manifest Document Number
90099497

4. Generator's Phone () 111117

B. State Generator's ID
111117

5. Transporter 1 Company Name UNITED STATES GOVERNMENT

C. State Transporter's ID
111117

6. US EPA ID Number

D. Transporter's Phone
111117

7. Transporter 2 Company Name

E. State Transporter's ID

8. US EPA ID Number

F. Transporter's Phone

9. Designated Facility Name and Site Address
UNITED STATES GOVERNMENT

G. State Facility's ID

10. US EPA ID Number

H. Facility's Phone
2155277100

11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

12. Containers No. Type

13. Total Quantity

14. Unit Wt/Vol

I. Waste No. State EPA/Other

a. 111117

State EPA/Other

b.

State EPA/Other

c.

State EPA/Other

d.

State EPA/Other

J. Additional Descriptions for Materials Listed Above
111117

K. Handling Codes for Wastes Listed Above
a. OR b. OR

c. OR d. OR

15. Special Handling Instructions and Additional Information

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

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Printed/Typed Name Signature Month Day Year

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name Signature Month Day Year

19. Discrepancy Indication Space

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

Printed/Typed Name Signature Month Day Year

Generator's US EPA ID No. Manifest Document No.

Generator's Name and Mailing Address

Generator's Phone ()

Transporter 1 Company Name

Transporter 2 Company Name

Designated Facility Name and Site Address

US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)

90099497

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

GENERATOR

TRANSPORTER

FACILITY

**STATE
COMPENSATION
INSURANCE
FUND**

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

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

OCTOBER 25, 1990

90 OCT 26 AM 10:47

POLICY NUMBER: 0725188 - 89

CERTIFICATE EXPIRES: 11-16-90

COUNTY OF ALAMEDA
ENVIRONMENTAL HEALTH DEPT ATTN: LARRY SETO
80 SWAN WAY ROOM 200
OAKLAND
CA 94621

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

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

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

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


PRESIDENT

EMPLOYER

THOMAS C RAMSEY
THE FUEL OIL POLISHING COMPANY-BAY AREA
19336 SOLANO COURT
SONOMA
CA 95476

**STATE
COMPENSATION
INSURANCE
FUND**

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

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

OCTOBER 25, 1990

90 OCT 26 AM 10:57
POLICY NUMBER: 25188 - 90
CERTIFICATE EXPIRES: 11-16-91

COUNTY OF ALAMEDA
ENVIRONMENTAL HEALTH DEPT ATTN: LARRY SETO
80 SWAN WAY ROOM 200
OAKLAND
CA 94621

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

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


PRESIDENT

EMPLOYER

THOMAS C. RAMSEY
THE FUEL OIL POLISHING COMPANY-BAY AREA
19336 SOLANO COURT
SONOMA
CA 95476

Note: Excavation area must be secured.
C.P. 11-8-90

11/16/90

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND, CA 94621
PHONE NO. 415/271-4320

Project # 12577068
Fee Paid \$1,116.00
Date 10-3-90

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

1. Business Name U.S. Dept. of Agriculture
Business Owner United States Government
2. Site Address 800 Buchanan St.
City Albany Zip 94710 Phone 415-559-6058
3. Mailing Address 800 Buchanan St.
City Albany Zip 94710 Phone 415-559-6058
4. Land Owner Dept. of Agriculture
Address 500 Buchanan St. City, State Albany, Ca zip 94710
5. EPA I.D. No. CA0000523944
6. Contractor Fuel Oil Polishing Co.
Address 19336 Solano Ct
City Sonoma, Ca. Phone 707-935-1700
License Type C61/D-40 ID# 583045
7. Consultant Trans Tech Consultants
Address 3116 Nuttall Ave., Suite 110
City Santa Rosa, Ca. Phone 707-575-8622

8. Contact Person for Investigation

Name Bill Norman - Manager Title Geologist
Pat Lawler

Phone 707-575-8622

9. Total No. of Tanks at facility 5

10. Have permit applications for all tanks been submitted to this office? Yes No []

11. State Registered Hazardous Waste Transporters/Facilities

a) Product/Waste Transporter

Name Waste Oil Recovery EPA I.D. No. CAD00626515

Address 6401 Sierra St

City Oakland State Ca Zip 94615

b) Rinsate Transporter

Name Waste Oil Recovery EPA I.D. No. CAD00626515

Address 6401 Sierra St

City Oakland State Ca Zip 94615

c) Tank Transporter

Name Fuel Oil Polishing Co EPA I.D. No. CAD981371669

Address 19336 Julian Ct.

City San Jose State Ca Zip 95476

d) Tank Disposal Site

Name Lerickson EPA I.D. No. CAD009466392

Address 255 Parr Blvd.

City Richmond State Ca Zip 94801

e) Contaminated Soil Transporter

Name Stanco, Inc EPA I.D. No. CAD063547996

Address 12475-A Filago Ave

City San Martin State Ca Zip 95406

12. Sample Collector

Name Pace Labs - G. Scott
 Company 11 Digital Ave - Pace Labs.
 Address 11 Digital Ave.
 City Novato State Ca zip 94947 Phone 415-883-6100

13. Sampling Information for each tank or area

Tank or Area		Material sampled	Location & Depth
Capacity	Historic Contents (past 5 years)		
1. 550	Gasoline		
2. 200	Solvent		
3. 1000	Solvent		
4. 550	Solvent		
5. 250	Solvent		

14. Have tanks or pipes leaked in the past? Yes [] No []

If yes, describe. _____

15. NFPA methods used for rendering tank inert? Yes [] No []

If yes, describe. Triplic pressure wash - dry ice

An explosion proof combustible gas meter shall be used to verify tank inertness.

16. Laboratories

Name Pace Labs., Inc.
 Address 11 Digital Ave.
 City Novato State Ca zip 94947
 State Certification No. 148

17. Chemical Methods to be used for Analyzing Samples

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Number
TANK #1 - Gasoline	EPA 5030 - DHS 38%	1. 5030/8015 (Mod. Fed 8020)
TANK #2 - Solvent	EPA 5030	2. EPA 8010/8020
TANK #3 - Solvent	EPA 5030	3. EPA 8010/8020
TANK #4 - Solvent	EPA 5030	4. EPA 8010/8020
TANK #5 - Solvent	EPA 5030	5. EPA 8010/8020

Handwritten notes in the table:
 - A bracket groups tanks 2-5 with the note "Methanol or Chloroform".
 - A bracket groups tanks 2-5 with the note "Allyls".

18. Submit Site Safety Plan

19. Workman's Compensation: Yes No

Copy of Certificate enclosed? Yes No

Name of Insurer Calif State Comp.

* Copy sent to County

20. Plot Plan submitted? Yes No

21. Deposit enclosed? Yes No

22. Please forward to this office the following information within 60 days after receipt of sample results.

- a) Chain of Custody Sheets
- b) Original Signed Laboratory Reports
- c) TSD to Generator copies of wastes shipped and received
- d) Attachment A summarizing laboratory results

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true. I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

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

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel and safety.

I will notify the Department of Environmental Health at least two (2) working days (48 hours) after approval of this closure plan in advance to schedule any required inspections. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Signature of Contractor

Name (please type) Tom Ramsey
Signature Tom Ramsey
Date 9-22-90

Signature of Site Owner or Operator

Name (please type) BILL DORMAN
Signature Bill Dorman by Tom Ramsey
Date 9-22-90