



certified mailer #P 367 603 890

February 25, 1992
STID# 3695

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

Notice of Requirement to Reimburse

Dolan Foster Enterprises, Inc.
ATTN: Dan Mundy
25546 Seaboard Lane
Hayward, CA 94545

Responsible Party
Property Owner

Exxon Co., U.S.A.
ATTN: Bill Wang (P.O. Box 4032)
2300 Clayton Rd., Ste. 1250
Concord, CA 94524-2032

Responsible Party
Contact Person

Taco Bell
1900 Webster St.
Alameda, CA 94501

SITE

Date First Reported 01/09/91
Substance: gasoline
Petroleum (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. **YOU ARE HEREBY NOTIFIED** that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

If you have any questions concerning this matter please contact Thomas Peacock, Supervising HMS, at this office.

Edgar B. Howell
Edgar B. Howell, III, Chief
Contract Project Director
cc: Sandra Malos, SWRCB

SWRCB Use :

add: X Reason: New case

P 367 603 890
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

Sent to ATTN: Dan Mundy	
D. Foster Enterprises	
Street and No 25546 Seaboard Lane	
City and ZIP Code Hayward, CA 94545	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	2.29
Postmark or Date 2.28.92 430.4530	

3295

PS Form 3800, June 1985

3695

U.S. POSTAGE

● **SENDER:** Complete items 1 and 2 when additional services are desired and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do so will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Dolan Foster Enterprises, Inc.
 ATTN: Dan Mundy
 25546 Seaboard Lane
 Hayward, CA 94545

4. Article Number
 P367 603 890

- Type of Service:
- Registered
 - Certified
 - Express Mail
 - Insured
 - COD
 - Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Address
 X *[Signature]*

6. Signature - Agent
 X TA

7. Date of Delivery
 8-2-92

8. Addressee's Address (ONLY if requested and fee paid)



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Property Owner

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Concord, CA 94524-2032

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Contact Person

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Alameda, CA 94501

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If you have any questions concerning this matter please contact Thomas Peacock, Supervising HMS, at this office.

Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use : add: X Reason: New case

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.

369 OAKLAND
 I wish to receive the following services (for an extra fee): CALIF. POSTMETER 801404
 U.S. POSTAL SERVICE
 2.29

- Addressee's Address
 - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:
 Exxon Co., U.S.A.
 ATTN: Bill Wang (P.O. Box 4032)
 2300 Clayton Rd., Ste. 1250
 Concord, CA 94524-2032

4a. Article Number
 P 367 603 891

- 4b. Service Type
- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery
 MAR 2 1992

5. Signature (Addressee)

6. Signature (Sender)
Bill Wang

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, November 1990 * U.S. GPO: 1991-287-068 **DOMESTIC RETURN RECEIPT**

P 367 603 891
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

Sent to	ATTN: Bill Wang Exxon Co., U.S.A.
Street and No.	(P.O. Box 4032) 2300 Clayton Rd, #1250
P.O. State and Zip Code	Concord, CA 94524-2-32
Postage	S
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom. Date, and Address of Delivery	
TOTAL Postage and Fees	2.29
Postmark or Date	2 28 92 430 4530

PS Form 3800, June 1985