

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

June 7, 2007

SPK Emeryville Properties LLC
PO Box A-3879
Chicago, IL 60690

George Clever
Hines
101 California Street, Suite 1000
San Francisco, CA 94111-5894

Subject: Fuel Leak Case No. RO0002822, Spieker Properties, 2000 Powell Street, Emeryville, CA

Dear Mr. Clever:

Alameda County Environmental Health (ACEH) staff has reviewed the fuel leak case file for the above-referenced site and the document entitled, "Work Plan for Soil and Groundwater Investigation," dated May 31, 2007 and submitted on your behalf by Geomatrix Consultants Inc. The scope of work in the Work Plan proposes the installation of three soil borings, one soil boring is proposed adjacent to the former UST tank pit and two soil borings are recommended near the former fuel dispenser island. ACEH generally agrees with the proposed scope of work as stated in the Work Plan, provided the following technical comments are addressed prior to the implementation of the Work Plan.

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

TECHNICAL COMMENTS

- 1. Soil Sampling and Soil Boring Locations.** Geomatrix proposes two soil samples be collected from each soil boring; one at three feet bgs and one at the soil water interface provided no staining, odor, or elevated PID readings are observed during soil boring advancement. ACEH requests soil samples be collected from each boring at the capillary fringe, where groundwater is first encountered, at changes in lithology, and at the total depth of the boring. All soil samples collected are to be analyzed for TPHg and TPHd by EPA Method 8015M or 8260, BTEX, EDB, EDC, MiBE, TAME, ETBE, DIPE, TBA and EtOH by EPA Method 8260.

ACEH requests that one additional soil borings be advanced approximately five feet west of the former UST location. In total, four soil boring are to be advanced at the site during the investigation. Please present the results from the investigation in the report requested below.

2. **Groundwater Sampling.** Grab groundwater samples collected during the investigation are to be analyzed for TPHg and TPHd by EPA Method 8015M or 8260, BTEX, EDB, EDC, MtBE, TAME, ETBE, DIPE, TBA and EtOH by EPA Method 8260.

TECHNICAL REPORT REQUEST

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

- **August 15, 2007** – Soil and Groundwater Investigation

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

ELECTRONIC SUBMITTAL OF REPORTS

ACEH's Environmental Cleanup Oversight Programs (LOP and SLIC) now request submission of reports in electronic form. The electronic copy is intended to replace the need for a paper copy and is expected to be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program FTP site are provided on the attached "Electronic Report Upload Instructions." Submission of reports to the Alameda County FTP site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitoring wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all reports is required in Geotracker (in PDF format). Please visit the State Water Resources Control Board for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

PERJURY STATEMENT

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

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering

George Clever
June 6, 2007
Page 3

evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

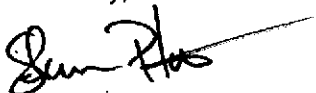
Please be aware that you may be eligible for reimbursement of the costs of investigation from the California Underground Storage Tank Cleanup Fund (Fund). In some cases, a deductible amount may apply. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

AGENCY OVERSIGHT

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

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

Sincerely,



Steven Plunkett
Hazardous Materials Specialist

cc: Susan Gallardo
Geomatrix Consultants Inc.
2101 Webster Street, 12th Floor
Oakland, CA 94612-3066

Paisha Jorgensen
Geomatrix Consultants, Inc.
2101 Webster Street, 12th Floor
Oakland, CA 94612-3066

Donna Drogos, ACEH
Steven Plunkett, ACEH
File

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

March 26, 2007

SPK Emeryville Properties LLC
PO Box A-3879
Chicago, IL 60690

Spieker Properties LP
1255 Treat Blvd. # 150
Walnut Creek, CA 94597-7974

George Clever
Hines
101 California Street, Suite 1000
San Francisco, CA 94111-5894

Subject: Fuel Leak Case No. RO0002822, Spieker Properties, 2000 Powell Street, Emeryville, CA

Dear Mr. Clever:

Alameda County Environmental Health (ACEH) staff has reviewed the case file for the above referenced site and the report entitled, "Removal of Two 10,000 Gallon Underground Storage Tanks (USTs)," dated September 18, 1998, and prepared on your behalf by Golder Associates. The report summarizes the results from removal of two 10,000 gallon USTs. Soil samples were collected from the sidewalls and beneath the former UST, with additional soil samples collected at the former fuel dispenser island. Total petroleum hydrocarbons as gasoline (TPHg) was detected in one soil sample at approximately 2.5 feet bgs., in the vicinity of the former fuel dispensers at concentrations of up to 27,000 milligrams per kilogram (mg/kg). In addition, benzene, toluene, ethylbenzene, and xylenes were detected at concentrations of up to 25 mg/kg, 160 mg/kg, 130 mg/kg and 1,910 mg/kg, respectively. Methyl tert-butyl ether (MTBE) was not included for analysis during soil and groundwater sampling.

During the initial UST removal, grab groundwater samples were collected from the tank pit, with TPHg detected at concentrations of up to 30,000 micrograms/liter ($\mu\text{g/L}$) and benzene detected at up to 1,000 $\mu\text{g/L}$. Based on the results of soil and groundwater sampling, in the vicinity of the former USTs and fuel dispenser island, ACEH has determined that the lateral extent of contamination in both soil and groundwater and impacts to sensitive aquatic habitats are unknown. Therefore, you are requested to submit a work plan to evaluate the extent of soil and groundwater contamination in the vicinity of the former USTs and fuel dispenser island.

Please submit a work plan detailing your proposal to define the extent of soil and groundwater contamination beneath your site by **April 30, 2007**. This report is being requested pursuant to the Regional Water Quality Control Board's (Regional Board) authority under Section 13267 of the California Water Code.

TECHNICAL REPORT REQUEST

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

- **April 30, 2007 – Work Plan**

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

ELECTRONIC SUBMITTAL OF REPORTS

ACEH's Environmental Cleanup Oversight Programs (LOP and SLIC) now request submission of reports in electronic form. The electronic copy is intended to replace the need for a paper copy and is expected to be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program FTP site are provided on the attached "Electronic Report Upload Instructions." Submission of reports to the Alameda County FTP site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitoring wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all reports is required in Geotracker (in PDF format). Please visit the State Water Resources Control Board for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

PERJURY STATEMENT

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

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

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

George Clever
March 22, 2007
Page 3

and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

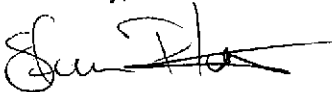
Please be aware that you may be eligible for reimbursement of the costs of investigation from the California Underground Storage Tank Cleanup Fund (Fund). In some cases, a deductible amount may apply. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

AGENCY OVERSIGHT

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

Sincerely,



Steven Plunkett
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Susan Gallardo
Geomatrix Consultants Inc.
2101 Webster Street, 12th Floor
Oakland, CA 94612-3066

Donna Drogos, ACEH
Steven Plunkett, ACEH
File

REF. /
A/C NO. R

COUNTY OF ALAMEDA
OFFICE OF THE AUDITOR-CONTROLLER

DATE: 1/30/98

No 804996

MISCELLANEOUS RECEIPT

\$ 936.00
DOLLARS

nine hundred thirty six

RECEIVED FROM: ICONCO INC, 303 Derby Ave, Oakland 94601

FOR: Spieker Properties
2200 Powell St, Emeryville CA 94608

RECEIVED BY: A. Oregon

DEPT. NO.: 430-4530

CASH PERSONAL/CASHER'S CHECK/M. O. # 4745 OTHER:

110-1 (Rev 10/85) [0134E (08)] 3-Part

Distribution: White - Payor Yellow & Pink - Depart.

ICONCO, INC.
PROJECT CHECKING ACCOUNT
303 DERBY AVE.
OAKLAND, CA 94601
(510) 261-1900

4745

DATE 1/30/98

11-35
1210

PAY TO THE ORDER OF ALACO ENVIRONMENTAL HEALTH

\$ 936.00

Nine hundred thirty six dollars

DOLLARS

Bank of America
East Bay Regional Commercial Banking Office 1472
300 Lakeside Drive
Oakland, CA 94612



FOR

⑈004745⑈ ⑆121000358⑆ 14726⑈00922⑈

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # 4251 Site Name Spirean Properties Today's Date 7/20/98
Site Address 2000 Powell St.
City Berkeley Zip 94608 Phone _____

____ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?
Inspection Categories:
____ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
 II. Hazardous Materials Business Plan, Acutely Hazardous Materials
____ III. Under ground Storage Tanks

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

Comments:

On site visit, petroleum soil still at the site. Some areas of the filter had holes covered with 200gallon. Mr. Rajeev Chivoo - the site physical number removed last week (7/17/98). Called Rajeev Chivoo to repair these soil not fully sealed. Mr. Rajeev - soil will be removed tonight. Work at site house has conducted all night long.

Contact _____
Title _____
Signature _____

Inspector _____
Signature [Signature]

II, III

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # 4051 Site Name Spiller Properties Today's Date 7/10/98

Site Address 2000 Powell St.

City Emeryville Zip 94608 Phone _____

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

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
 II. Hazardous Materials Business Plan, Acutely Hazardous Materials
 III. Under ground Storage Tanks

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

Comments:

On site for the removal of 2-10,000 gal gasoline tanks. The USTs appeared to be made of steel with fiberglass reinforced plastic.

Hazardous Waste Handler = Erickson

George Warner (Fire Dept) present at site.

Tank #1 (10,000 gal) LEL & O₂ LPT. Manifest # 96835890

Tank #2 (10,000 gal) LEL = 8%; O₂ = 9.8.1% Manifest # 96835891

Both tanks appeared to be intact. no apparent holes found in both tanks. Fayed Cherwood from Golden present to collect ~~four~~ four soil samples, (two each) one from each sidewall will be collected; grab water sample collected.

Due to site's constraint, the excavation was allowed to backfill with clean fill.

Asbestos present in site soil. Need to evaluate the extent of asbestos at the site; soil removal will be conducted (soil from the landscape area & stock pile from UST removal) next week.

II, III

Contact _____

Title _____

Signature _____

Inspector _____

Signature Juan Lopez

2 TANKS REMOVED on 7/10/98

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A
COMPLETE THIS FORM FOR EACH FACILITY/SITE



MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input checked="" type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)

DBA OR FACILITY NAME WATER GATE TOWERS		NAME OF OPERATOR SPIEKER PROPERTIES		
ADDRESS 2200 POWELL STREET		NEAREST CROSS STREET		PARCEL # (OPTIONAL)
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 95608	SITE PHONE # WITH AREA CODE 510 594 5200
<input checked="" type="checkbox"/> BOX TO INDICATE <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LOCAL AGENCY DISTRICTS <input type="checkbox"/> COUNTY AGENCY * <input type="checkbox"/> STATE AGENCY * <input type="checkbox"/> FEDERAL AGENCY *				
* If owner of UST is a public agency, complete the following: name of supervisor of division, section or office which operates the UST				
TYPE OF BUSINESS		<input type="checkbox"/> 1 GAS STATION	<input type="checkbox"/> 2 DISTRIBUTOR	<input type="checkbox"/> 3 FARM
		<input type="checkbox"/> 4 PROCESSOR	<input checked="" type="checkbox"/> 5 OTHER	
		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE TWO	E. P. A. I. D. # (optional) CAL 000144905

EMERGENCY CONTACT PERSON (PRIMARY)

EMERGENCY CONTACT PERSON (SECONDARY) - optional

DAYS: NAME (LAST, FIRST) WHITE, JEFF	PHONE # WITH AREA CODE 510 594 5200	DAYS: NAME (LAST, FIRST) WHITE, CHRIS	PHONE # WITH AREA CODE 510 594 5200
NIGHTS: NAME (LAST, FIRST) same	PHONE # WITH AREA CODE	NIGHTS: NAME (LAST, FIRST) same	PHONE # WITH AREA CODE

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME SPIEKER PROPERTIES		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET, SUITE 325		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> STATE AGENCY <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY AGENCY <input type="checkbox"/> FEDERAL AGENCY		
CITY NAME EMERYVILLE,		STATE CA	ZIP CODE 95608	PHONE # WITH AREA CODE 510 594 5200

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER SPIEKER PROPERTIES		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET, SUITE 325		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> STATE AGENCY <input checked="" type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY AGENCY <input type="checkbox"/> FEDERAL AGENCY		
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 95608	PHONE # WITH AREA CODE 510 594 5200

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 322-9669 if questions arise.

TY(TK) HQ 44-000529

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 7 STATE FUND
	<input type="checkbox"/> 8 STATE FUND & CHIEF FINANCIAL OFFICER LETTER	<input type="checkbox"/> 9 STATE FUND & CERTIFICATE OF DEPOSIT	<input type="checkbox"/> 10 LOCAL GOVT. MECHANISM	<input type="checkbox"/> 99 OTHER			

VI. LEGAL NOTIFICATION AND BILLING ADDRESS

Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING: I. II. III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

TANK OWNER'S NAME (PRINTED & SIGNATURE) Spieker Properties Jeff White	TANK OWNER'S TITLE Project Director	DATE MONTH/DAY/YEAR 7/27/98
--	--	--------------------------------

LOCAL AGENCY USE ONLY

COUNTY # [][]	JURISDICTION # [][][]	FACILITY # [][][][][]
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.
OWNER MUST FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

Removed 7/10/98 SA

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM: 1 NEW PERMIT 2 INTERIM PERMIT 3 RENEWAL PERMIT 4 AMENDED PERMIT 5 CHANGE OF INFORMATION 6 TEMPORARY TANK CLOSURE 7 PERMANENTLY CLOSED ON SITE 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: WATERGATE TOWERS, EMERYVILLE, CA

I. TANK DESCRIPTION

COMPLETE ALL ITEMS - SPECIFY IF UNKNOWN

A. OWNER'S TANK I. D. # UNKNOWN B. MANUFACTURED BY: UNKNOWN JOOR
C. DATE INSTALLED (MO/DAY/YEAR) 1984/1985 D. TANK CAPACITY IN GALLONS: 10,000

II. TANK CONTENTS

IF A-1 IS MARKED, COMPLETE ITEM C.

A. 1 MOTOR VEHICLE FUEL 2 PETROLEUM 3 CHEMICAL PRODUCT 4 OIL 80 EMPTY 95 UNKNOWN PRODUCT 2 WASTE
C. 1a REGULAR UNLEADED 1b PREMIUM UNLEADED 1c MIDGRADE UNLEADED 2 LEADED 3 DIESEL 4 GASAHOL 5 JET FUEL 99 OTHER (DESCRIBE IN ITEM D. BELOW)
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED C. A. S. #:

III. TANK CONSTRUCTION

MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM: 1 DOUBLE WALL 2 SINGLE WALL 3 SINGLE WALL WITH EXTERIOR LINER 4 SINGLE WALL IN A VAULT 5 INTERNAL BLADDER SYSTEM 95 UNKNOWN 99 OTHER
B. TANK MATERIAL (Primary Tank): 1 BARE STEEL 5 CONCRETE 9 BRONZE 2 STAINLESS STEEL 6 POLYVINYL CHLORIDE 10 GALVANIZED STEEL 3 FIBERGLASS 7 ALUMINUM 95 UNKNOWN 4 STEEL CLAD W/ FIBERGLASS REINFORCED PLASTIC 8 100% METHANOL COMPATIBLE W/FRP 99 OTHER
C. INTERIOR LINING OR COATING: 1 RUBBER LINED 5 GLASS LINED 2 ALKYD LINING 6 UNLINED 3 EPOXY LINING 95 UNKNOWN 4 PHENOLIC LINING 99 OTHER
IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___
D. EXTERIOR CORROSION PROTECTION: 1 POLYETHYLENE WRAP 5 CATHODIC PROTECTION 2 COATING 91 NONE 3 VINYL WRAP 95 UNKNOWN 4 FIBERGLASS REINFORCED PLASTIC 99 OTHER
E. SPILL AND OVERFILL, etc. SPILL CONTAINMENT INSTALLED (YEAR) OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR)
DROP TUBE YES ___ NO ___ STRIKER PLATE YES ___ NO ___ DISPENSER CONTAINMENT YES ___ NO ___

IV. PIPING INFORMATION

CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE UNKNOWN

A. SYSTEM TYPE: U 1 SUCTION A U 2 PRESSURE A U 3 GRAVITY A U 4 FLEXIBLE PIPING A U 99 OTHER
B. CONSTRUCTION: U 1 SINGLE WALL A U 2 DOUBLE WALL A U 3 LINED TRENCH A U 95 UNKNOWN A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION: A U 1 BARE STEEL A U 5 ALUMINUM A U 9 GALVANIZED STEEL A U 2 STAINLESS STEEL A U 6 CONCRETE A U 10 CATHODIC PROTECTION A U 3 POLYVINYL CHLORIDE (PVC) A U 7 STEEL W/ COATING A U 8 100% METHANOL COMPATIBLE W/FRP A U 99 OTHER
D. LEAK DETECTION: 1 MECHANICAL LINE LEAK DETECTOR 2 LINE TIGHTNESS TESTING 3 CONTINUOUS INTERSTITIAL MONITORING 4 ELECTRONIC LINE LEAK DETECTOR 5 AUTOMATIC PUMP SHUTDOWN 99 OTHER

V. TANK LEAK DETECTION

1 VISUAL CHECK 7 CONTINUOUS INTERSTITIAL MONITORING 2 MANUAL INVENTORY RECONCILIATION 8 SIR 3 VADOZE MONITORING 9 WEEKLY MANUAL TANK GAUGING 4 AUTOMATIC TANK GAUGING 10 MONTHLY TANK TESTING 5 GROUND WATER MONITORING 95 UNKNOWN 6 ANNUAL TANK TESTING 99 OTHER

VI. TANK CLOSURE INFORMATION (PERMANENT CLOSURE IN-PLACE)

1. ESTIMATED DATE LAST USED (MO/DAY/YR) 1/30/98 2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING NONE GALLONS 3. WAS TANK FILLED WITH INERT MATERIAL? YES NO

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

TANK OWNER'S NAME (PRINTED & SIGNATURE) Spieker Properties, Inc. Jeff White DATE 1/27/98

LOCAL AGENCY USE ONLY

THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.# [] COUNTY # [] JURISDICTION # [] FACILITY # [] TANK # []
PERMIT NUMBER [] PERMIT APPROVED BY/DATE [] PERMIT EXPIRATION DATE []

THIS FORM MUST BE ACCOMPANIED BY A PERMIT APPLICATION - FORM A, UNLESS A CURRENT FORM A HAS BEEN FILED. FORM C MUST BE COMPLETED FOR INSTALLATIONS. THIS FORM SHOULD BE ACCOMPANIED BY A PLOT PLAN. FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

Removed 7/10/98 84



STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B

COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: WATERGATE TOWERS, EMERYVILLE, CA

I. TANK DESCRIPTION COMPLETE ALL ITEMS - SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D.#	<u>UNKNOWN</u>	B. MANUFACTURED BY:	<u>UNKNOWN JOOR</u>
C. DATE INSTALLED (MO/DAY/YEAR)	<u>1984/1985</u>	D. TANK CAPACITY IN GALLONS:	<u>10,000</u>

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input checked="" type="checkbox"/> 1 PRODUCT	C. <input checked="" type="checkbox"/> 1a REGULAR UNLEADED	<input type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input checked="" type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 1c MIDGRADE UNLEADED	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 8 M85
			<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)	

D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED _____ C. A. S. #: _____

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM	<input checked="" type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input type="checkbox"/> 5 INTERNAL BLADDER SYSTEM	<input type="checkbox"/> 95 UNKNOWN
	<input type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 4 SINGLE WALL IN A VAULT	<input type="checkbox"/> 99 OTHER	
B. TANK MATERIAL (Primary Tank)	<input checked="" type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS	<input type="checkbox"/> 4 STEEL CLAD W/ FIBERGLASS REINFORCED PLASTIC
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM	<input type="checkbox"/> 8 100% METHANOL COMPATIBLE W/FRP
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
C. INTERIOR LINING OR COATING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING	<input type="checkbox"/> 4 PHENOLIC LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
	IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___			
D. EXTERIOR CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP	<input checked="" type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

E. SPILL AND OVERFILL, etc. SPILL CONTAINMENT INSTALLED (YEAR) _____ OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) 93
 DROP TUBE YES NO ___ STRIKER PLATE YES ___ NO ___ DISPENSER CONTAINMENT YES ___ NO ___

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE UNKNOWN

A. SYSTEM TYPE	A <u>U</u> 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 4 FLEXIBLE PIPING	A U 99 OTHER
B. CONSTRUCTION	A <u>U</u> 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN	A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A <u>U</u> 4 FIBERGLASS PIPE	
	A U 5 ALUMINUM	A U 6 CONCRETE	A U 7 STEEL W/ COATING	A U 8 100% METHANOL COMPATIBLE W/FRP	
	A U 9 GALVANIZED STEEL	A U 10 CATHODIC PROTECTION	A U 95 UNKNOWN	A U 99 OTHER	
D. LEAK DETECTION	<input type="checkbox"/> 1 MECHANICAL LINE LEAK DETECTOR	<input checked="" type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 CONTINUOUS INTERSTITIAL MONITORING	<input type="checkbox"/> 4 ELECTRONIC LINE LEAK DETECTOR	<input type="checkbox"/> 5 AUTOMATIC PUMP SHUTDOWN
					<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 MANUAL INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING	<input type="checkbox"/> 6 ANNUAL TANK TESTING
<input checked="" type="checkbox"/> 7 CONTINUOUS INTERSTITIAL MONITORING	<input type="checkbox"/> 8 SIR	<input type="checkbox"/> 9 WEEKLY MANUAL TANK GAUGING	<input type="checkbox"/> 10 MONTHLY TANK TESTING	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION (PERMANENT CLOSURE IN-PLACE)

1. ESTIMATED DATE LAST USED (MO/DAY/YR) <u>1/30/98</u>	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING <u>NONE</u> GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
---	--	---

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

TANK OWNER'S NAME (PRINTED & SIGNATURE) <u>Speiker Properties, Inc. [Signature]</u>	DATE <u>1/27/98</u>
--	------------------------

LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE	PERMIT EXPIRATION DATE		

THIS FORM MUST BE ACCOMPANIED BY A PERMIT APPLICATION - FORM A, UNLESS A CURRENT FORM A HAS BEEN FILED. FORM C MUST BE COMPLETED FOR INSTALLATIONS. THIS FORM SHOULD BE ACCOMPANIED BY A PLOT PLAN. FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
Alameda CA 94502
510/567-6700

Hazardous Materials Inspection Form

II, III

Site ID # 7057 Site Name SPIEKER PROPERTIES Today's Date 7/9/98
Site Address 2000 Powell St.
City Emeryville Zip 94608 Phone _____

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

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
 II. Hazardous Materials Business Plan, Acutely Hazardous Materials
 III. Under ground Storage Tanks

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

Comments:

On site for the removal of 2-10,000 gal USTs
George Whelan (Emeryville Fire Dept) } at the site
Fajeev Cherwood (Balshe Area) }
Eugene Cook (Alconco) }

LEL of USTs will high \approx 97%
Or \approx 50%

Due to asbestos found in site soil; workers are asbestos certified & air monitoring is conducted. Industrial Hygienist also at the site.

Tanks will be rinsed again this afternoon; will pump out rinse; this will inert tanks to L10% LEL CH_4 .

Tanks rescheduled for removal tomorrow @ 11:30 am. Advised Fajeev Cherwood to cover the stock piled soil with wood chips to secure the tank area.

The 2 tanks appeared to be in good shape

Contact _____
Title _____
Signature _____

Inspector _____
Signature Dwison J. Krige

II, III

ALAMEDA COUNTY/ENVIRONMENTAL HEALTH SERVICES

BILLING INQUIRY FORM

DATE: 7/8/98
TO: ~~Janis Cholemi~~ Ret vector
FROM: BILLING UNIT - CANDYCE KELLY ck 2nd notice
PACKET # CK980708

Please be advised that the Billing Unit has received an inquiry on the account indicated below.

BILLING ACCOUNT #: T42123 MFR #: - CT #: -

SITE/BUSINESS NAME: Watergate Towers III Assoc

SITE/BUSINESS ADDRESS: 2000 Powell St. Emeryville 94608

PROBLEM: Tanks removed? - see attached
please send check & date of removed tanks

Please indicate the appropriate action to be taken. Please complete the following information in order to substantiate or reflect the above problem. In order to complete our billing procedure and to assist the client in a timely manner, it is necessary to request that this complete document be returned to the Billing Unit within ten (10) working days.

Has business closed permanently? * [] yes [] no If yes, when? _____

* Permit application/service form or billing adjustment form is needed

Is there a new owner? * [] yes [] no When did this occur? _____ Who is it? _____

Is there a new or updated mailing address? [] yes [] no If yes, what is it? _____

Has business moved? [] yes [] no If yes, when? _____, what is the new location (if in Alameda County)? _____

Is there a change in the E.U. # (status) or the charge code? * yes If yes, please indicate below :

of employees from: to:
of tanks from: 2 to: 0
E.U. # from: to:
E.U. # from: to:
HMBP volume from: to:
Med. Waste type from: to:

COMMENTS: 2 TANKS REMOVED ON 7/10/98.

Thank you for your prompt attention to this matter.

INSPECTOR SIGNATURE Susan L. Hugg DATE: 7/13/98

COUNTY OF ALAMEDA
HEALTH CARE SERVICES AGENCY
 ENVIRONMENTAL HEALTH BILLING
 DRAWER N. ALAMEDA, CA 94501
 PHONE: (510) 567-6858
 FAX: (510) 337-1139

Resent 6/25/98

MAILING
 ADDR.

*Douglas Parking Co,
 1721 Webster St,
 Oakland, CA 94612*

REMISES
 ADDR.

WATERGATE TOWNS III ASSOC
 ATTN: THOMAS SHEEHAN
 2000 POWELL ST
 EMERYVILLE CA 94608

ACCOUNT NO.	SLS	PURCHASE ORDER	DUE DATE	TERMS	INVOICE DATE	PAGE
42123	1988		04/01/98	NET 30	04/01/98	1

QTY. FEE	QTY. FEE	CHARGE CODE	DESCRIPTION	AMOUNT/EA.	EXT. AMOUNT
1		1022	TANK CONTAINER - TWO	312.00	312.00
<p>THIS IS YOUR 1988 ANNUAL FEE ON YOUR UNDERGROUND STORAGE TANK(S). PUT YOUR ACCOUNT NUMBER ON YOUR PAYMENT TO PREVENT A CREDIT ERROR. ANY CHANGE TO THE ABOVE SITE ADDRESS, CONTACT YOUR INSPECTOR AT (510) 567-6700.</p> <p><i>6/26/98</i> PLEASE NOTE THAT THE GAS TANKS HAVE BEEN REMOVED.</p> <p><i>John Douglas Douglas Parking Company</i></p>					
					98 JUN 29 PM 2:08 ENVIRONMENTAL HEALTH ADMINISTRATION

8% PENALTY-30 DAYS FROM INVOICE DATE
 FOR EXPLANATION OF FEE SEE BACK OF INVOICE

FEE AMOUNT	312.00
	0.00
1997 BAL FWD	74.88
FEE TOTAL	<i>386.88</i>

JAN 30 1998 01:24PM SUIF CERTIFICATES UNRECORDED F.121

**STATE
COMPENSATION
INSURANCE
FUND**

P.O. BOX 420807, SAN FRANCISCO, CA 94142-0807

CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

JANUARY 30, 1998

POLICY NUMBER: GRP#571-UNIT#1746-97
CERTIFICATE EXPIRES: 10-01-98

DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PARKWAY, ROOM 250
ALAMEDA, CA 94502-6577

JOB: UGST AT 2200 POWELL STREET (630-98)

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

This policy is not subject to cancellation by the Fund except upon ³⁰~~10~~ days' advance written notice to the employer.

We will also give you ³⁰~~10~~ 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.

Thomas Hansen
AUTHORIZED REPRESENTATIVE

KE Bollier
PRESIDENT

ENDORSEMENT #2065 ENTITLED CERTIFICATE HOLDERS' NOTICE EFFECTIVE
10-01-97 IS ATTACHED TO AND FORMS A PART OF THIS POLICY.

EMPLOYER'S LIABILITY LIMIT: \$1,000,000 PER OCURRENCE.

EMPLOYER

ICONCO, INC.
303 DERBY AVE.
OAKLAND, CA 94601

DEPARTMENT OF ENVIRONMENTAL AFFAIRS
ENVIRONMENTAL PROTECTION DIVISION
 1131 HARBOR BAY PARKWAY, RM 250
 ALAMEDA, CA 94502-6577
 PHONE # 510/567-6700
 FAX # 510/337-9335

Project Specialist

STP 4057

ACCEPTED

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

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction/destruction.
 One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.
 Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

- Removal of Tank(s) and Piping
 - Sampling
 - Final Inspection
- Issuance of a) permit to operate, b) permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

Contact Specialist:
ROBERT WESTON
 3-11-98

UNDERGROUND TANK CLOSURE PLAN

*** Complete according to attached instructions ***

1. Name of Business SPIEKER PROPERTIES
 Business Owner or Contact Person (PRINT) JEFF WHITE
2. Site Address 2200 POWELL STREET
 City EMERYVILLE, CA zip 94608 Phone 510 594 5600
3. Mailing Address SPIEKER PROPERTIES, 2200 POWELL STREET, SUITE 325
 City EMERYVILLE, CA zip 95608 Phone 510 594 5600
4. Property Owner SPIEKER PROPERTIES
 Business Name (if applicable) _____
 Address _____
 City, State _____ Zip _____
5. Generator name under which tank will be manifested
SPIEKER PROPERTIES
 EPA ID# under which tank will be manifested CA 4000144905

6. Contractor ICONCO, INC.
Address 303 DERBY AVENUE
City OAKLAND Phone 510 261 1900
License Type* A, B, CZ1, ASB, & HAZ ID# 94-2700042

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires pr contractors to also hold Hazardous Waste Certification issued by the State Contract License Board.

7. Consultant (if applicable) GOLDER ASSOCIATES INC.
Address 180 GRAND AVENUE, SUITE 325
City, State OAKLAND, CA 94612 Phone 510 239

8. Main Contact Person for Investigation (if applicable)
Name CHARLES ALMESTAD Title ASSOCIATE
Company GOLDER ASSOCIATES INC.
Phone 510 239 9000

9. Number of underground tanks being closed with this plan TWO
Length of piping being removed under this plan APPOX. 25'-FEET
Total number of underground tanks at this facility (**confirmed w owner or operator) 2

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

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

a) Product/Residual Sludge/Rinsate Transporter

Name ERICKSON EPA I.D. No. CAD009466392
Hauler License No. 0019 License Exp. Date 6/30/98
Address 255 PARR BOULEVARD
City RICHMOND State CA Zip 94801

b) Product/Residual Sludge/Rinsate Disposal Site

Name Romic Environmental Technologies EPA ID# CAD009452657
Address 2081 Bay Road
City East Palo Alto State CA Zip 94303

c) Tank and Piping Transporter

Name ERICKSON EPA I.D. No. CAD009466392

Hauler License No. 0019 License Exp. Date 6/30/98

Address 255 PARR BOULEVARD

City RICHMOND State CA Zip 94801

d) Tank and Piping Disposal Site

Name Erickson EPA I.D. No. CAD009466392

Address 255 Parr Boulevard

City Richmond State CA Zip 94801

11. Sample Collector

Name RAJEEV CHERWOOD

Company GOLDER ASSOCIATES INC.

Address 180 GRAND AVENUE, SUITE 250

City OAKLAND State CA Zip 94612 Phone 510 239 9000

12. Laboratory

Name AMERICAN ENVIRONMENTAL NETWORK

Address 3440 VINCENT ROAD

City PLEASANT HILL State CA Zip 94523

State Certification No. 1172

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

If yes, describe. _____

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

PELLETIZE DRY-ICE

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be permanently plugged.

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

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

	Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
	Capacity	Use History include date last used (estimated)		
1.	TWO - 10,000 GAL	GASOLINE	SOIL SAMPLES	TWO SAMPLES UNDER EACH UST
2.	TWO - DISPENSERS	-	SOIL SAMPLES	ONE UNDER EACH DISPENSER
3.	PIPING	-	SOIL SAMPLE	ONE IN LANDSCAPED AREA ONLY.

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

Excavated/Stockpiled Soil

<p>Stockpiled Soil Volume (estimated)</p> <p>APPROXIMATELY 300 YD³</p>	<p>Sampling Plan</p> <ul style="list-style-type: none"> • ONE 4 POINT COMPOSIT FROM OVERBURDEN • ONE 4 POINT COMPOSIT FROM OVER EXCAVATED SOILS.
--	---

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

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

If yes, explain reasoning _____

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

16. Chemical methods and associated detection limits to be used for analyzing samples:
 The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed.
 See attached Table 2.

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

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
GASOLINE	EPA METHOD 8030	8015M	50 PPB
BENZENE	EPA 8030	8020	1.5 PPB
TOLUENE	EPA 8030	8020	1.25 PPB
ETHYLBENZENE	EPA 8030	8020	0.5 PPB
XYLENES	EPA 8030	8020	1.25 PPB
MTBE			
LEAD			

18. Submit Worker's Compensation Certificate copy

Name of Insurer State Compensation Insurance Fund

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

20. Enclose Deposit (See Instructions)

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

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

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

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

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

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

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

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared or assumed by the County of Alameda.

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

CONTRACTOR INFORMATION

Name of Business ICONCO, Inc.

Name of Individual Rick Gusman

Signature [Signature] Date January 29, 1998

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business Spieker Properties

Name of Individual Jeff White

Signature [Signature] Date 1/27/98