

ALAMEDA COUNTY  
HEALTH CARE SERVICES



7

AGENCY  
DAVID J. KEARS, Agency Director

July 10, 2006

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

Mr. Edmundo Alire  
TDW Construction  
P.O. Box 111  
Livermore, CA 94551

Vivian Gibbons  
15820 South Harlan Road, #113  
Livermore, CA 94550

Subject: SLIC Case RO0002868, TDW Construction, 101 Greenville Road, Livermore, CA

Dear Mr. Alire and Ms. Gibbons:

A Spills, Leaks, Investigations, and Cleanup (SLIC) case is currently open for the above-referenced site. In order for Alameda County Environmental Health (ACEH) to review the case, we require an oversight account. To set up an oversight account, please send a check made payable to Alameda County Environmental Health in the amount of \$6,000. Please send your check to the attention of our Finance Department.

This deposit may or may not be sufficient to provide all necessary regulatory oversight. ACEH will deduct actual costs incurred based upon the hourly rate specified below. If these funds are insufficient, an additional deposit will be requested. Otherwise, any unused monies will be refunded to you or your designee.

The deposit is authorized in Section 6.92.040L of the Alameda County Ordinance Code. Work on this project is being debited at the Ordinance specified rate, currently \$166.00 per hour.

Please write "SLIC" (the type of project), the site address, and the AR# 0314826 on your check.

If you have any questions, please contact Jerry Wickham at (510) 567-6791.

Sincerely,



Ariu Levi  
Division Chief

cc: D. Drogos, J. Jacobs, Jerry Wickham

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Agency Director



7

June 5, 2006

Mr. Edmundo Alire  
TDW Construction  
P.O. Box 111  
Livermore, CA 94551

Benedict and Vivian Gibbons  
C/o NW Cornett Realty Co.  
1499 Chelsea Way  
Livermore, CA 94550-6506

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

Subject: SLIC Case [REDACTED], TDW Construction, 101 Greenville Road, Livermore, CA

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Sincerely,



Ariu Lev  
Division Chief

cc: D. Drogos, J. Jacobs, Jerry Wickham

ALAMEDA COUNTY  
HEALTH CARE SERVICES



7

AGENCY  
DAVID J. KEARS, Agency Director

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

August 17, 2005

Mr. Edmundo Alire  
TDW Construction  
PO Box 111  
Livermore, CA 94551

Dear Mr. Edmundo Alire:

Subject: TOXICS Case RO0002868, TDW Construction, 101 Greenville Rd., Livermore, CA 94550

In order for ACEH to review reports for your site, we would require an oversight account for the above-referenced site. To set up your account, please send a check in the amount of \$6000.00 payable to Alameda County Environmental Health. Please send your check to the attention of our Finance Department.

This initial deposit may or may not be sufficient to provide all necessary regulatory oversight. ACEH will deduct actual costs incurred based upon the hourly rate specified below. If these funds are insufficient, additional deposit will be requested. Otherwise, any unused monies will be refunded to you or your designee.

The deposit is authorized in Section 6.92.040L of the Alameda County Ordinance Code. Work on this project is being debited at the Ordinance specified rate, currently \$166.00 per hour.

Please write "TOXICS" (the type of project) the site address and the AR# 0314826 on your check.

If you have any questions, please contact Jerry Wickham at (510) 567-6791.

Sincerely,

  
for Ariu Levi  
Division Chief

cc: D. Drogos, J. Jacobs, J. Wickham

# UNAUTHORIZED RELEASE FORM WIZARD

--YOUR URF HAS NOT YET BEEN SUBMITTED TO GEOTRACKER--  
 CLICK ON "SUBMIT UNAUTHORIZED RELEASE FORM" TO SUBMIT THE URF.

**THIS WILL BE YOUR URF TRACKING NUMBER: 1819547355**

SLIC RELEASE/CONTAMINATION SITE REPORT

<u>REPORT DATE</u>	<u>HAZARDOUS MATERIAL INCIDENT REPORT FILED WITH OES?</u>
03-02-05	N

**I. REPORTED BY -**  
LOCAL AGENCY - PRIMARY CASEWORKER

<u>CONTACT NAME</u>	<u>INITIALS</u>	<u>ORGANIZATION NAME</u>	<u>EMAIL ADDRESS</u>
LAWRENCE SETO	LS	ALAMEDA COUNTY LOP	
<u>ADDRESS</u>		<u>CONTACT DESCRIPTION</u>	
1131 HARBOR BAY PARKWAY ALAMEDA, CA 94502 UNITED STATES			

**II. RESPONSIBLE PARTY -**  
RESPONSIBLE PARTY CONTACT

<u>CONTACT NAME</u>	<u>INITIALS</u>	<u>ORGANIZATION NAME</u>	<u>EMAIL ADDRESS</u>
EDMUNDO ALIRE	EA	TDW CONSTRUCTION	
<u>ADDRESS</u>		<u>CONTACT DESCRIPTION</u>	
PO BOX 111 LIVERMORE, CA 94551			

**III. SITE LOCATION**

<u>FACILITY NAME</u>	<u>FACILITY ID</u>
TDW CONSTRUCTION	
<u>FACILITY ADDRESS</u>	<u>ORIENTATION OF SITE TO STREET</u>
101 GREENVILLE ROAD LIVERMORE, CA 94550 ALAMEDA COUNTY	<u>CROSS STREET</u>

**V. SUBSTANCES RELEASED**

<u>SUBSTANCE RELEASED</u>	<u>DESCRIPTION</u>	<u>QUANTITY LOST</u>
MOTOR OIL		UNKNOWN

**VI. DISCOVERY/ABATEMENT**

<u>DATE DISCHARGE BEGAN</u>		
UNKNOWN		
<u>DATE DISCOVERED</u>	<u>HOW DISCOVERED</u>	<u>DESCRIPTION</u>
02-17-05	INSP	
<u>DATE STOPPED</u>	<u>STOP METHOD</u>	<u>DESCRIPTION</u>

**VII. SOURCE/CAUSE**

<u>SOURCE OF DISCHARGE</u>	<u>CAUSE OF DISCHARGE</u>
<u>DISCHARGE DESCRIPTION</u>	

**VIII. CASE TYPE**

CASE TYPE  
 SOIL IMPACTED

**IX. REMEDIAL ACTION**

<u>REMEDIAL ACTION</u>	<u>BEGIN DATE</u>	<u>END DATE</u>	<u>DESCRIPTION</u>

**X. GENERAL COMMENTS**

**XI. CERTIFICATION**

I HEREBY CERTIFY THAT THE INFORMATION REPORTED HEREIN  
 IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

XII. REGULATORY USE ONLY

LOCAL AGENCY CASE NUMBER

RO0002868

REGIONAL BOARD CASE NUMBER

LOCAL AGENCY

CONTACT NAME

JERRY WICKHAM

INITIALS

JTW

ORGANIZATION NAME

ALAMEDA COUNTY LOP

EMAIL ADDRESS

jerry.wickham@acgov.org

ADDRESS

1131 HARBOR BAY PARKWAY  
ALAMEDA, CA 94502-6577

CONTACT DESCRIPTION

USA

<u>PHONE TYPE</u>	<u>PHONE NUMBER</u>	<u>EXTENSION</u>
work	(510)-567-6791	

REGIONAL BOARD - LEAD AGENCY

CONTACT NAME

BETTY GRAHAM

INITIALS

BG

ORGANIZATION NAME

SAN FRANCISCO BAY RWQCB (REGION 2)

EMAIL ADDRESS

ADDRESS

1515 CLAY ST, STE 1400  
OAKLAND, CA 94612

CONTACT DESCRIPTION

USA

<u>PHONE TYPE</u>	<u>PHONE NUMBER</u>	<u>EXTENSION</u>
BUSINESS	(510)-622-2358	

LOGGED IN AS ROSEANNA

**Alameda County CUPA Program**  
**Contaminated Site Case Transfer Form**

**Referral To:**

Date	3-2-05
Agency	Alameda County Environmental Health, 1131 Harbor Bay Parkway, Alameda, CA 94502
Attention	Donna L. Drogos, LOP/SLIC Program Manager

**Site Information:**

Site Responsible Party(s)	Edmundo Alire
Site Name	TDW Construction
Site Address	101 Greenville Rd., Livermore
Site Phone	925-449-5249
Site Contractor/Consultant (if available)	
Site DBA	

**Site Conditions:**

<b>UST</b>	
USTs removed? # removed: _____ Date removed: _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Contents (circle): gasoline diesel waste oil heating oil solvents kerosene stoddard solvent other (specify) _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
Observations of system (holes, leaks)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Observed contamination (free product, smell, soil/water discoloration)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination? <input type="checkbox"/> Highest Concentration Detected in Soil Contaminant (specify) _____ Concentration _____ <input type="checkbox"/> Highest Concentration Detected in Water Contaminant (specify) _____ NA _____ Concentration _____ ppb	Yes <input type="checkbox"/> No <input type="checkbox"/>
Unauthorized Release Form filed?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Future intended use if known? Specify _____	Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>NON-UST</b>	
Former industrial use? <i>General Engineering Contractor</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination? <input checked="" type="checkbox"/> Highest Concentration Detected in Soil Contaminant (specify) _____ Concentration <i>Visual</i> ppm <input type="checkbox"/> Highest Concentration Detected in Water Contaminant (specify) _____ Concentration _____ ppb	Yes <input type="checkbox"/> No <input type="checkbox"/>
Future intended use if known? Specify <i>Continue as contractor</i> <i>If available, attach pertinent reports</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Transferred as: LOP  SLIC

Level of Update requested:  distribution list  all meetings  all site visits  closure sign off  all the above

Transfer requested by Inspector: Larry Seto Date: 3/2/05

Transfer accepted by (ACEH): \_\_\_\_\_ Date: \_\_\_\_\_











**Hazardous Waste Generator Inspection Checklist**

Facility Name: TDW Construction PR \_\_\_\_\_ Date of Inspection: 2/17/05  
 Facility Address: 101 Greenville Rd, Livermore Inspector: Carry Seto

CESQG  SOG  LQG  Number of Employees Handling Waste \_\_\_\_\_ EPA ID# \_\_\_\_\_

Requirement	Citation	In Compliance?		
		Yes	No	N/A
<b>1. Identification Number</b>				
(a) Obtained EPA ID Number	66262.12(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Transporter and TSD used have EPA ID #	66262.12(c)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Pre-Transport Requirements</b>				
(a) HW determination done	66262.11(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Containers labeled	66262.31	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Labels properly filled out	66262.32	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Within legal accumulation time	66262.34(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Containers in good condition	66265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Compatible with containers	66265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(g) Containers closed / sealed	66265.173(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(h) Storage area inspected weekly	66265.174	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(i) Tanks equipment inspected daily	66265.195(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(j) Incompatible HWs separated	66265.199	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(k) Proper disposal	25189.5 (a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Recordkeeping / HW Manifests</b>				
(a) LDR waste records kept 5 years	66268.7(a)(7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Biennial Report submitted	66262.41(a)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) HW shipped with manifests/ consolidated manifests	66262.20	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Manifests/consolidated manifests kept 3 years	66262.40(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) HW analyses kept 3 years	66262.40(c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Manifests received from TSD	66262.42	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>HW Personnel Training</b>				
(a) Training provided annually	66265.16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Personnel trained and supervised	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) New hires trained within 6 mos.	66265.16(b)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Training records kept on site	66265.16(d)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Training records kept for 3 yrs.	66265.16(e)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(f) Training records complete	66265.16(1,2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Requirement	Citation	In Compliance?		
		Yes	No	N/A
<b>5. Contingency Plan/Emergency Response Plan/Business Plan</b>				
(a) CP/ERP/HMBP submitted	66264.53(a)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Copy of Plan on site	66264.53	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) Plan complete	66264.53	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Plan amended as necessary	66264.54	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) ER Coordinator familiar w/ Plan	66264.55	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>6. Preparedness and Prevention</b>				
(a) Spill control systems available	66264.32	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) ER equipment operating properly	66264.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(c) ER equipment storage secure	66264.14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(d) Aisle space in HW area adequate	66264.35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(e) Arranged w/ local ER agencies	66234.37	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>Waste Streams</b>				
(a) Used oil		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(b) Non-halogenated solvents / Parts cleaner		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(c) Ethylene glycol / antifreeze / coolant		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(d) Oily sludge		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(e) Used oil filters		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(f) Spent photoprocessing chemicals		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(g) Dry cleaning solvent		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(h) Universal Waste		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(i) Dispenser Fuel filters		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(j) Paint waste		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(k) Others: <u>used batteries soil with gelclean waste</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

All of the citations above refer to Title 22, California Code of Regulations

**Pollution Prevention Program**  
 The Health and Safety Code, Section 25244.19 requires certain hazardous waste generators to prepare and implement a Source Reduction Plan. Has this facility completed a Source Reduction Plan?  
 Yes     No     Not Applicable

Comments: Used oil is stored in an above ground tank. Tank did not have a label with accumulation start date. Used oil is disposed of by Evergreen. Used batteries are stored on the floor in the shop. It should be stored in a pallet or container with a lid if it is leaking. There are numerous 5 gal containers that are open that are spilling waste on to the floor. The containers should be closed and moved to an area under a roof. HW waste can be taken to Humboldt County Hazardous Waste  
for disposal.

Name/Title: C. F. O Date: 2-18-05

**INSPECTION REPORT SUMMARY / SUMMARY OF VIOLATIONS**

Facility Name: T.D.W. Construction  
 Facility Address: 101 Greenville Rd, Livermore  
 Contact Person: \_\_\_\_\_ Telephone: 925-455-5259  
 Type of Business: General Engineering Contractor

UNIFIED PROGRAM SUMMARY		Program	Inspection	COMMENTS
Hazardous Materials Business Plan		✓	2/17/05	
Risk Management Plan / CalARP				
Underground Storage Tank				
Aboveground Petroleum Storage Tank		✓	2/17/05	used to store diesel and gas
Does the facility have an SPCC-Plan?			2/17/05	No plan available during insp.
Hazardous Waste Generator				
Universal Waste				
Tiered Permit: Permit-by-Rule				
Conditionally Authorized				
Conditionally Exempt, Specified Waste Stream				
Conditionally Exempt, Small Quantity Treatment				
Conditionally Exempt, Limited				
Conditionally Exempt, Commercial Laundry				

Pipeline Construction • Equipment Rental  
 Lic. No. 474414

**TDW Construction, Inc.**  
 General Engineering Contractor

Edmundo Allre  
 (925) 455-5259  
 (925) 455-0325 Fax

P.O. Box 111  
 Livermore, CA 94551

**INSPECTION CHECKLISTS COMPLETED**

HMBP Inspection Checklist  
 Hazardous Waste Generator Inspection Checklist  
 Tiered Permit Inspection Checklist  
 Underground Storage Tank Checklist(s)  
 Inspection Notes  
 Inspection Narrative

Did a facility representative grant permission for this inspection?  YES  NO

Submit all required documents, reports and/or plans (including Corrective Action Plan) within 30 days.

All violations noted are to be corrected immediately. Compliance will be verified on or after 30 days.

Failure to comply with requirements established in this inspection report and in all attachments to this report, or in subsequent correspondence may result in the issuance of a Notice of Noncompliance. Noncompliance is punishable by criminal and/or civil penalties under applicable local, state and/or federal laws or regulations.

2/17/05 Date of Inspection  
Carry Seto Inspector  
[Signature] Signature of Facility Representative

ALAMEDA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH  
Certified Unified Program Agency (CUPA)

INSPECTION REPORT SUMMARY / SUMMARY OF VIOLATIONS  
NARRATIVE

Facility Name: TDW Construction  
Facility Address: 101 Greenville Rd, Livermore

This business is a general engineering contractor that does pipeline construction.

A maintenance shop is on site that services company trucks.

There are four above ground storage tanks on-site that store diesel and gasoline. These tanks are stored on top of a concrete pad that is secondarily contained.

Summary of Violations:

- 1) Above ground storage tanks have not been registered with the State Water Resources Control Board - Register your tanks with this agency
- 2) A SPCC Plan has not been developed - A SPCC plan must be developed for this site by a professional engineer
- 3) Hazardous Materials Business Plan is incomplete - Submit the missing parts of your business plan
- 4) Compress gas cylinders not secured to a stationary object - secure all compress gas cylinders
- 5) Open containers (5gal) spilling contents onto ground - clean up spill area and close containers
- 6) Used oil tank not labelled - label used oil container
- 7) Inspect hazardous waste storage area weekly - document this inspection
- 8) Inspect the above ground storage tank area daily - document this inspection
- 9) Used oil filters improperly stored - store in a close container and label
- 10) Used batteries improperly stored - store in one area on a pallet

Date of Inspection 2/17/05

Inspector Larry Seto

Signature of Facility Representative

Edmundson

ALAMEDA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH  
Certified Unified Program Agency (CUPA)

INSPECTION REPORT SUMMARY / SUMMARY OF VIOLATIONS  
NARRATIVE

Facility Name: TDW Construction  
Facility Address: 101 Greenville Rd, Livermore

The following documents were given to the facility:

- 1) Aboveground Storage Tank Daily Inspection Form
- 2) Weekly Hazardous Waste Storage Area Inspection Form
- 3) Used oil and Oil filter management
- 4) Hazardous Waste Generator requirements
- 5) Management of spent Lead-Acid batteries
- 6) Household Hazardous Waste - Small Business Disposal Services
- 7) Hazardous Materials Business Plan Application

Date of Inspection 2/17/05

Inspector Larry Soto

Signature of Facility Representative

Edmondson

**UNIFIED PROGRAM CONSOLIDATED FOR  
ALAMEDA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH  
BUSINESS OWNER/OPERATOR IDENTIFICATION FORM**

**I. IDENTIFICATION**

FACILITY ID#	01000	BEGINNING DATE	100	ENDING DATE	101
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)	T.D.W. CONSTRUCTION, INC.			BUSINESS PHONE	102
				(925) 455-5259	
BUSINESS SITE ADDRESS	101 GREENVILLE ROAD				
CITY	104	CA	ZIP CODE	105	
LIVERMORE			94550		
DUN & BRADSTREET	106	SIC CODE (4 digit #)	107		
		0000			
COUNTY	ALAMEDA				
BUSINESS OPERATOR NAME	109	BUSINESS OPERATOR PHONE	110		
EDMUNDO D. ALIRE		(925) 449-5249			

**II. BUSINESS OWNER**

OWNER NAME	111	OWNER PHONE	112		
EDMUNDO D. ALIRE		(925) 449-5249			
OWNER MAILING ADDRESS	5653 CRESTMONT				
CITY	114	STATE	115	ZIP CODE	116
LIVERMORE		CA		94550	

**III. ENVIRONMENTAL CONTACT**

CONTACT NAME	117	CONTACT PHONE	118		
SAME AS BUSINESS OWNER					
CONTACT MAILING ADDRESS					
CITY	120	STATE	121	ZIP CODE	122

**-PRIMARY-**

**IV. EMERGENCY CONTACTS**

**-SECONDARY-**

NAME	123	NAME	128		
EDMUNDO D. ALIRE		EDMUNDO M. ALIRE			
TITLE	124	TITLE	129		
CFO		PRESIDENT			
BUSINESS PHONE	125	BUSINESS PHONE	130		
(925) 455-5259		(925) 455-5259			
24-HOUR PHONE	126	24-HOUR PHONE	131		
(925) 570-9824		(925) 447-5129			
PAGER #	127	PAGER #	132		

**ADDITIONAL LOCALLY COLLECTED INFORMATION**

- check here if this form is the annual submittal pursuant to Federal EPRCA requirements
- check here if this form is accompanied by new or modified Hazardous Materials Inventory-Chemical Description page(s)
- check here if this form is accompanied by a new or modified Business Activity form

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE	134	NAME OF DOCUMENT PREPARER	135	
<i>Edmundo D. Alire</i>	8/15/03		JOSIE IRISH		
NAME OF SIGNER (print)	136	TITLE OF SIGNER	137		
EDMUNDO D. ALIRE		CFO			