



**CITY OF OAKLAND FIRE DEPARTMENT**  
**Fire Prevention Bureau/ Hazardous Materials Program**  
 250 Frank Ogawa Plaza, Suite 3341 Oakland, CA 94612  
 (510) 238-3927 - (510) 238-6739 Fax

Contaminated Site Case Transfer Form

Date	16-1-11
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)	Hong Gardner DBA Avolon Success, LLC
Site Name	Hong Gardner Lot
Site Address	7660 LLC
Site Phone	510 776-2304 - Avolon Success, LLC
Site Contractor/Consultant (if available)	Golden Gate Tank Removal
Site DBA	NA NA NA NA - vacant lot

**Site Conditions:**

<b>UST</b>			
USTs removed? # removed: <u>yes</u>	Date removed: <u>12-1-2007</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Contents (circle): gasoline diesel waste oil heating oil solvents kerosene stoddard solvent other (specify) <u>Tank filled w/concrete</u>		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Observations of system (holes, leaks)? <u>Holes were present</u>		Yes <input checked="" 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?	<u>4,500 PPM TPHD</u>	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
o Highest Concentration Detected in Soil Contaminant (specify) <u>TPH @ 9'</u> Concentration <u>500</u> ppm			
o Highest Concentration Detected in Water <u>1399</u> Contaminant (specify) <u>Not Sampled</u> Concentration _____ ppb			
Unauthorized Release Form filed? <u>Golden Gate Tank Removal</u>		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Future intended use if known? Specify <u>unknown</u>		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<b>NON-UST</b>			
Former industrial use? <u>Gas Station</u>		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination?		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
o Highest Concentration Detected in Soil Contaminant (specify) _____ Concentration _____ ppm			
o Highest Concentration Detected in Water Contaminant (specify) _____ Concentration _____ ppb			
Future intended use if known? Specify <u>unknown</u>		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<i>If available, attach pertinent reports</i>			

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: Inspector Keith Mathews Date: 16-9-11

Transfer accepted by (ACEH): [Signature] Date: 11/18/11