

COUNTY OF ALAMEDA UNDERGROUND TANK SYSTEM CLOSURE INSPECTION REPORT

For Use By the County of Alameda, Environmental Health

SR0029144

Facility Name: 378 Grand Ave. Contractor's name: Golden Gate Tank Removal
 Address: 378 Grand Ave. City: Oakland Zip: 94610

Project Contact: Tim Hallen Phone No.: 415-512-1555

Tank ID No.	29144-01				
Size	1,500 GALLONS				
Construction Material	steel				
Single/Double Wall	Single-wall				
Backfill Type	native				
Oxygen <10%	20.6	During tank entry			
LEL <10%	0	During tank entry			
Tank Condition	Tiny holes pinpoint observed by tank entry personell all over inside of tank after cleaning.				
Soil/Groundwater Condition	Water encountered while excavating for tank closure but none entered tank pit during sampling.	Soil from east tank pit had slight odor. Soil from west side of tank pit had no odor. Both were green.			
Soil Sample Depth	11.5ft bgs				
Number and Description of Soil/Groundwater Samples (Indicate Sample Locations on Site Plan.)	2 Soil samples one from each end of tank. Tank West @12:15 Tank East @12:20	Analyzed for heating oil constituents: TPH as diesel, BTEX, MTBE, naphthatlene.			

Disposition of Tank Contents: Riverbank Oil Transfer LLC **Piping:** Rinsed/Tested/Capped. **Rinsate:** Shipped on Manifest.
Tank & Piping Transport: Shipped on Manifest; Transporter Name Same as on Application.
Sampling: Evidence Tape; Chain of Custody; Samples Refrigerated; Piping Samples Taken Yes, No (If no, explain why in Comments.)
Soil: Soil Stored on Bermed Plastic & Covered; Soil Returned to Excavation. **Site Plan:** Attached.

Comments/Special Conditions: Bottom of tank at 9.5 ft bgs. Sample collected from 11.5 ft bgs using hand auger. Holes were cut into each end of tank after cleaning to collect soil samples. Piping rinsed and capped prior to shoring. Sheryl Skillern onsite for initial LEL reading prior to my arrival, tank cleaning and cutting.

Inspector: Barbara Jakub Agency: ACDEH Date: 1/26/16 Start Time: 12:00 Stop Time: 12:40

Signature of Contractor/Authorized Agent: _____ Date: _____ Page _____ of _____
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