


UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE.	
REPORT DATE		CASE #		SIGNED _____ DATE _____	
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Yola Bayram		PHONE (510) 671-2088		SIGNATURE 
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> REGIONAL BOARD <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME Applied Water Resources Corporation		
	ADDRESS 2363 Mariner Square Drive Suite 245 Alameda CA 94501 STREET CITY STATE ZIP				
RESPONSIBLE PARTY	NAME The Home of Truth of Alameda, California <input type="checkbox"/> Unkno		CONTACT PERSON Rita Reneaux		PHONE (510) 377-7811
	ADDRESS 1300 Grand Ave Alameda CA 94501 STREET CITY STATE ZIP				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) The Home of Truth		OPERATOR The Home of Truth		PHONE (510) 522-3366
	ADDRESS 1300 Grand Ave Alameda Alameda 94501 STREET CITY COUNTY ZIP				
	CROSS STREET Alameda Ave				
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Environmental Health			PHONE (510) 567-6700	
	REGIONAL BOARD San Francisco Regional Water Quality Control Board			PHONE (510) 622-2300	
SUBSTANCES INVOLVED	(1) NAME Heating Oil (?); TPH range of C12-C22, 41,400 µg/L		QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> Unknown		
	(2)		<input type="checkbox"/> Unknown		
DISCOVERY/ABATEMENT	DATE DISCOVERED 3/1/2017		HOW DISCOVERED <input type="checkbox"/> Tank Test <input type="checkbox"/> Tank Removal <input checked="" type="checkbox"/> Nuisance Conditions <input type="checkbox"/> Inventory Control <input type="checkbox"/> Subsurface Monitoring <input type="checkbox"/> Other		
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> Remove Contents <input type="checkbox"/> Close Tank <input type="checkbox"/> Repair Tank <input type="checkbox"/> Change Procedure <input type="checkbox"/> Replace Tank <input type="checkbox"/> Other <input type="checkbox"/> Repair Piping		
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, DATE				
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input checked="" type="checkbox"/> Tank Leak <input checked="" type="checkbox"/> Piping Leak <input type="checkbox"/> Unknown <input type="checkbox"/> Other		CAUSE(S) <input type="checkbox"/> Overfill <input type="checkbox"/> Corrosion <input type="checkbox"/> Rupture/Failure <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Spill <input type="checkbox"/> Other		
	CHECK ONE ONLY <input type="checkbox"/> Undetermined <input type="checkbox"/> Soil Only <input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Drinking Water – (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY <input checked="" type="checkbox"/> No Action Taken <input type="checkbox"/> Case Closed (Cleanup Completed or Unnecessary) <input type="checkbox"/> Leak Being Confirmed <input type="checkbox"/> Pollution Characterization <input type="checkbox"/> Remediation Plan <input type="checkbox"/> Post Cleanup Monitoring in Progress <input type="checkbox"/> Preliminary Site Assessment Workplan Submitted <input type="checkbox"/> Cleanup Underway <input type="checkbox"/> Preliminary Site Assessment Underway				
	CHECK APPROPRIATE ACTION(S) <input type="checkbox"/> Cap Site (CD) <input type="checkbox"/> Excavate & Treat (ET) <input type="checkbox"/> Treatment At Hookup (HU) <input type="checkbox"/> Other <input type="checkbox"/> Contamination Barrier (CB) <input type="checkbox"/> No Action Required (NA) <input type="checkbox"/> Enhanced Bio Degradation (IT) <input type="checkbox"/> Vacuum Extract (VE) <input type="checkbox"/> Remove Free Product (FP) <input type="checkbox"/> Replace Supply (RS) <input type="checkbox"/> Excavate & Dispose (ED) <input type="checkbox"/> Pump & Treat Groundwater (GT) <input type="checkbox"/> Vent Soil (VS)				
COMMENTS	750 or 1,000 gallon UST is beneath the sidewalk. Product piping leads to basement. Vent pipe on side of building. Ground water rose into basement and contains an oil sheen. See attached map.				