HEALTH CARE SERVICES

AGENCY DAVID J. KEARS, Agency Director



State Water Resources Control Board Division of Clean Water Programs UST Local Oversight Program

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P367 604 109

05/08/92 STID# 656 DEPARTMENT OF ENVIRONMENTAL HEALTH Hazardous Materials Division 80 Swan Way, Rm. 200 Oakland, CA 94621 (510) 271-4320

Notice of Requirement to Reimburse

Jerri Garber 1st Presbyterian Church 2416 Grove Way Castro Valley, C A 94546

Responsible Party #1
Property Owner

Kenneth Kan Chevron U. S. A. P. O. Box 5044 San Ramon, C A 94583-0804

Responsible Party #2 Contact Person Contact Company

Former Chevron Station #9-2960 2416 Grove Way Castro Valley, CA 94546

SITE

Date First Reported 06/19/86

Substance: Gasoline Petroleum: (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been indentified as the party or parties responsible for investigation and cleanup of the above site. YOU ARE HEREBY NOTIFIED that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Scott SEERY, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

P 367 604 109 RECEIPT FOR CERTIFIED MAIL NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(SS) #65See Reverse)	
Sent to Jerri Garber	
Street and No. 2416 Grove Way	
P.O. State and ZIP Code Castro Valley, CA	94546
Postage	s
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S

Put your address in the "RETURN TO" Space on the reverse trom being returned to you. The return receipt fee will to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) requirements. Show to whom delivered, date, and addressee's (Extra charge)	erse side. Failure to do this wife of the person delivered provide you the name of the person delivered ng services are available. Consult postmaster ested. 2. Restricted Delivery (Extra charge)
3. Article Addressed to: (SS) #656	4. Article Number P 367 604 109
Jerri Garber 1st Presbyterian Church 2416 Grove Way Castro Valley, CA 94546	Type of Service: Registered Insured Cortifled COD Express Mall Information Receipt for Merchandise Always obtain signature of addresses or agent and DATE DELIVERED.
6. Signature - Address 8. Signature - Agent 7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

DAVID J. KEARS, Agency Director



State Water Resources Control Board Division of Clean Water Programs UST Local Oversight Program

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail # P 367 604 110

AGENCY

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Edgar B. Howell, III, Chief Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

W. Real

P 3675604 110 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (SS) #656/See Reverse)

Sent to Kenneth Kan Street and No. P.O. Box 50 P.O. State and ZIP Code San Ramon, (
Postage	S
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	<u> </u>
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to who Date, and Address of Delivery	om.
TOTAL Postage and Fees	S
Return Receipt showing to who Date, and Address of Delivery TOTAL Postage and Fees Postmark or Date	

2416 Grove Wy Castro Valley 94546

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4. Article Number P 367 604 110 Type of Service: Registered Insured Cortified COD Express Mail Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865