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ALAMEDA COUNTY **HEALTH CARE SERVICES**

AGENCY

ENVIRONMENTAL HEALTH DEPARTMENT OFFICE OF THE DIRECTOR 1131 HARBOR BAY PARKWAY ALAMEDA, CA 94502-6577 (510) 567-6700 FAX (510) 337-9335

REBECCA GEBHART, Acting Director

Certified Mail #: 7009 2820 0001 4359 6750

June 30, 2016

NOTICE OF RESPONSIBILITY

Site Name & Address:

SALLE'S PAINT & BODY SHOP 1049 9TH AVENUE OAKLAND, CA 94606

Local ID:

RO0000308

Related ID: **RWQCB ID:**

NA 01-2402

Global ID:

T0600102212

Responsible Party:

BERNARD AND MELVA CELLI TRUST C/O RICHARD COCHRAN 499 EMBARCADERO OAKLAND, CA 94606

Date First Reported:

9/6/1994

Substance:

- 8006619 Gasoline-Automotive (motor gasoline and additives), leaded & unleaded
- 12035 Waste Oil/Used Oil

Funding for Oversight: LOPS - LOP State Fund

Multiple RPs?: Yes

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified BERNARD AND MELVA CELLI TRUST as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency, within 20 calendar days of receipt of this notice that identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5752.

Pursuant to section 25296.10(c)(6) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact this office for further information about the designation process.

Please contact your caseworker MARK DETTERMAN at this office at (510) 567-6876 if you have questions regarding your site.

Date: 07-01-2016

RONALD BROWDER, Acting Director

Contract Project Director

Action:

Update

Reason:

ADD