# ÁLAMEDA COUNTY HEALTH CARE SERVICES

AGENCY



## ARNOLD PERKINS, DIRECTOR RAFAT A. SHAHID, DEPUTY DIRECTOR

DAVID J. KEARS, Agency Director

Alameda County Environmental Health Dept. Environmental Protection Divisior 1131 Harbor Bay Parkway, Room 250 Alameda CA 94502-6577

(510)567-6700

fax: (510)337-9335

Certified Mail # 01/29/96 STID# 1672

#### Notice of Requirement to Reimburse

P 366 729 288

Bruce G. Morrison 4856 Wingate Drive Pleasanton, Ca 94566

Responsible Party (RP) #1 Property Owner

Marla Guensler
Exxon Company, U. S. A.
P. O. Box 4032
Concord, Ca 94524-4032

Responsible Party (RP) #3

UST DWNER

Steve's Exxon 2991 Hopyard Rd Pleasanton, CA 94566

SITE

Date First Reported 09/30/89

Substance: Gasoline Petroleum: (X) Yes

Source: f

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 site investigation 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 identified 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 Section 25297.1 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board (SWRCB) not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above referenced underground storage tank site, and the above Responsible Party or Parties (RPs) must make full payment of such costs within 30 days of receipt of a detailed invoice from the SWRCB.

A determination of a secondary RP status may be made if it is shown that one or more of the RP(s) is performing corrective action and it is clear that the party seeking secondary status did not in any way initiate or contribute to the actual discharge. If the primary RP fails to perform corrective action, then the secondary RP will be considered a primary RP. To request designation as a secondary RP, contact this office.

Report: ReImbRPB 9/95

Reimburse Letter 01/29/96 StID# 1672 Page 2

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the SWRCB. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, Please fax your request to Roni Riley at the SWRCB at (916) 227-4349 telephone the SWRCB at (916) 227-4408. Please contact Scott SEERY, Hazardous Materials Specialist at this office if you have any further questions concerning this matter.

Gordon Coleman, Acting Chief Contract Project Director

c: Mike Harper, SWRCB

Please Circle One

Add

Delete Change

Reason:

en case

## ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH HAZARDOUS MATERIALS DIVISION

## LIST OF RESPONSIBLE PARTIES FOR

SITE

StID: 1672 Steve's Exxon 2991 Hopyard Rd Pleasanton, CA 94566

Bruce G. Morrison 4856 Wingate Drive Pleasanton, Ca 94566

Steve Asmann Steve's Exxon 2991 Hopyard Road Pleasanton, Ca 94566 (510) 426-5858

Marla Guensler Exxon Company, U. S. A. P. O. Box 4032 Concord, Ca 94524-4032 (510) 246-8776

Date First Reported 09/30/89 Substance: Gasoline Petroleum (X) Yes

Source: f

Responsible Party #1 Property Owner

Responsible Party #2 Contact Person Contact Company

Responsible Party #3 Contact Person Contact Company

#1672 SUS p 368 729 588

	Receipt for Certified Mail  No Insurance Coverage Provided.  Do not use for International Mail (See reverse)  Sent to Marla Guensler  Exxon Company, USA  Street & Number  Post Office, State, & ZIP Code Concord CA 94524-4032		
	Postage	\$	
	Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee		
1995	Return Receipt Showing to Whom & Date Delivered		
April	Return Receipt Showing to Whom, Date, & Addressee's Address		!
8	TOTAL Postage & Fees	\$	
PS Form <b>3800</b> , April 1995	Postmark or Date		

EENDER:  Complete items 1 and/or 2 for additional services.  Complete items 3, 4a, and 4b.  Print your name and address on the reverse of this form so that we card to you.  Attach this form to the front of the mailpiece, or on the back if space permit.  Write "Return Receipt Requested" on the mailpiece below the article.  The Return Receipt will show to whom the article was delivered and delivered.	I also wish to receive the following services (for an extra fee):  Addressee's Address  2. Restricted Delivery  Consult postmaster for fee.		
Marla Guensler Exxon Company USA P.O. Box 4032 Concord CA 94524-4032	4b. Service The Registers	729 288  Type  ad	you for using Return Receipt Service.
5. Received By: (Print Name)  6. Signature: (Addressed or Agent)  X	8. Addressee's Address (Only if requested and fee is paid)		
S Form <b>3811.</b> December 1994		Domestic Return Receipt	

## ALAMEDA COUNTY **HEALTH CARE SERVICES**

AGENCY

DAVID J. KEARS, Agency Director



#### ARNOLD PERKINS, DIRECTOR RAFAT A. SHAHID, DEPUTY DIRECTOR

P 368 729 287 Certified Mail # 01/29/96 STID# 1672

Alameda County Environmental Health Dept Environmental Protection Divisio 1131 Harbor Bay Parkway, Room 25 Alameda CA 94502-657 fax: (510)337-933

(510)567-6700

#### Notice of Requirement to Reimburse

Bruce G. Morrison 4856 Wingate Drive Pleasanton, Ca 94566

Steve Asmann Steve's Exxon 2991 Hopyard Road Pleasanton, Ca 94566

Steve's Exxon 2991 Hopyard Rd Pleasanton, CA 94566 Responsible Party (RP) #1 Property Owner

Responsible Party (RP) #2

BUSINESS OWNER

SITE

Date First Reported 09/30/89

Substance: Gasoline Petroleum: (X) Yes

Source: f

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Report: ReImbRPB 9/95

Reimburse Letter 01/29/96 StID# 1672 Page 2

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

Gordon Coleman, Acting Chief Contract Project Director

c: Mike Harper, SWRCB

Please Circle One

Add Delete Change

Reason: New case

### LIST OF RESPONSIBLE PARTIES FOR

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StID: 1672 2991 Hopyard Rd Steve's Exxon Pleasanton, CA 94566

your RETURN ADDRESS completed on the reverse side?

Bruce G. Morrison 4856 Wingate Drive Pleasanton, Ca 94566

Steve Asmann Steve's Exxon 2991 Hopyard Road Pleasanton, Ca 94566 (510) 426-5858

Marla Guensler Exxon Company, U. S. A. P. O. Box 4032 Concord, Ca 94524-4032 (510) 246-8776

Date First Reported 09/30/89 Substance: Gasoline Petroleum (X) Yes

Source: f

Responsible Party #1 Property Owner

Responsible Party #2 Contact Person Contact Company

Responsible Party #3 Contact Person Contact Company

#1672 SOS P 368 729 287

**US Postal Service** 

**Receipt for Certified Mail** 

	No Insurance Coverage Provided. Do not use for International Mail (See reverse)			
	Sentio Steve Asmann Steve's Exxon			
	Street & Number 2991 Hopyard Rd.			
	Post Office, State, & ZIP Code Pleasanton CA 94566			
	Postage	\$		
	Certified Fee			
	Special Delivery Fee			
ıΩ	Restricted Delivery Fee			
199	Return Receipt Showing to Whom & Date Delivered			
Form 3800, April 1995	Return Receipt Showing to Whom, Date, & Addressee's Address			
800	TOTAL Postage & Fees	4		
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SENDER:  ■Complete items 1 and/or 2 for additional services.  ■Complete items 3, 4a, and 4b.  ■Print your name and address on the reverse of this form so that card to you.  ■Attach this form to the front of the mailpiece, or on the back if spermit.  ■Write "Return Receipt Requested" on the mailpiece below the art  ■The Return Receipt will show to whom the article was delivered delivered.	ace does not  1.  Addressee's Address itiele number.  2.  Restricted Delivery	3
3. Article Addressed to: #1672 S. Seery	4a. Article Number P 368 729 287	
Steve Asmann Steve's Exxon 2991 Hopyard Rd Pleasanton CA 94566	4b. Service Type  Registered Express Mail Return Receipt for Merchandlse  COD  7. Date of Delivery	- 1
5. Received By: (Print Name)  6. Signature: (Addressee or Agent)  X	Addressee's Address (Only if requested and fee is paid)	
PS Folim <b>3811</b> , December 1994	Domestic Return Recei	pt

## ALAMEDA COUNTY **HEALTH CARE SERVICES**

01/29/96

STID# 1672

AGENCY

DAVID J. KEARS, Agency Director

Certified Mail # P 368 729 286



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Gordon Coleman, Acting Chief Contract Project Director

c: Mike Harper, SWRCB

Please Circle	One Add	Delete	Change	
Reason:	New	case		

368 729 286

Receipt for Certified Mail

US Postal Service

SU

į	No Insurance Coverage F Do not use for Internation	Provided. ai Mail <i>(See reverse)</i>		
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:	Postage	\$		
	Certified Fee			
	Special Delivery Fee			
ın	Restricted Delivery Fee			
PS Form <b>3800</b> , April 1995	Return Receipt Showing to Whom & Date Delivered			
	Return Receipt Showing to Whom, Date, & Addressee's Address			
800,	TOTAL Postage & Fees	\$		
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	■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b, ■ Print your name and address on the reverse of this form so that we card to you. ■ Attach this form to the front of the malipiece, or on the back if space permit. ■ Write "Return Receipt Requested" on the mailpiece below the article.  The Return Receipt will show to whom the article was delivered and delivered.	e does not e number.	I also wish to recifollowing services extra fee):  1.  Addresse 2.  Restricte Consult postmas	s (for an ee's Address S d Delivery &
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