DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, Assistant Agency Director

Certified Mail #

P 367 604 001

03/27/92 STID# 3826 DEPARTMENT OF ENVIRONMENTAL HEALTH Hazardous Materials Division 80 Swan Way, Rm. 200 Oakland, CA 94621 (510) 271-4320

### Notice of Requirement to Reimburse

Larry Halsey Pacific Coast Bldg. Products Po Box 160488 Sacramento C Ad 95816

Responsible Party #1 Property Owner

Pacific Supply 1735-24th St. Oakland C A 94607 Responsible Party #2 Contact Person Contact Company

Pacific Supply 1735 - 24th St. Oakland, CA 94607

SITE

Date First Reported 01/25/88

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 Tom PEACOCK, Supervising Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief Contract Project Director

Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

## A P 367 604 001

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

34-555	Street and No. 1735-24th St. P.O. State and ZIP Code CA 94607		
⊘U.S.G.P.O. 1989-234-555			
3.G.P.O			
» U.s	Postage	\$	
Ì	Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee		
	Return Receipt showing to whom and Date Delivered		
PS Form 3800, June 1985	Return Receipt showing to whom, Date, and Address of Delivery		
June	TOTAL Postage and Fees	s	
3800,	Postmark or Date		
era.			
PS F			

Put your address is the "NETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.  1. Show to whom delivered, date, and addressee's address.  2. Restricted Delivery (Extra charge)				
3. Article Addressed to: 3826	4. Article Number			
Pacific Supply 1735-24th St. Oakland CA 94607	Type of Service:  Registered Insured Certified COD Express Mail Return Receipt for Merchandise			
	Always obtain signature of addressee or agent and DATE DELIVERED.			
5. Signature — Address  X Sulley House for Signature — Agent  X	8. Addressee's Address (ONLY if requested and fee paid)			
7. Date of Delivery 4-1-92  P6 Page 3811, Mar. 1988 * U.S.G.P.O. 1988-212	-865 DOMESTIC STREET			

# ALAMEDA COUNTY 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 # P 367 604 000

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Pacific Coast Bldg. Products
Po Box 160488
Sacramento C Ad 95816

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Edgar B. Howell, III, Chief Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

### P 367 604 000 RECEIPT FOR CERTIFIED MAIL NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Réverse)

4-555	Sent to Larry Halsey	,	
∵U.S.G.P.O. 1989-234-555	Street and No. PO Box 16048		
.G.P.O.	P.O., State and ZIP Code Sacramento	CA 95816	5
⊹ U.S	Postage	S	
	Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee		
PS Form 3800, June 1985	Return Receipt showing to whom and Date Delivered		authorst.
	Return Receipt showing to whom Date, and Address of Delivery	1100	
	TOTAL Postage and Fees		
800	Postmark or Date		
Form 3		Odi	94601
S			<del></del>

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.  1. Show to whom delivered, date, and addressee's address.  (Extra charge)  2. Restricted Delivery (Extra charge)				
3. Article Addressed to: 3826	4. Article Number			
Larry Halsey Pacific Coast Bldg. Products PORBOX 16048838 Sacramento CA 95816	Type of Service:  Registered Insured Cortified COD Express Mail Return Receipt for Marchandise  Always obtain signature of addressee or agent and DATE OELIVERED.			
5. Signature — Address  X 6. Signature — Agent  X 7. Date of Delivery	Addresses's Address (ONLY if requested and fee paid)			
	Put your address in the "RETURN TO" Space on the revencerd from being returned to you. The return receipt fee will properly to and the date of delivery. For additional service(s) request 1. Show to whom delivered, date, and addressed's addressed to:  3. Article Addressed to:  Larry Halsey Pacific Coast Bldg. Products PO-Box-16048838 Sacramento CA 95816  5. Signature — Address X  6. Signature — Address X  7. Date of Delivery			