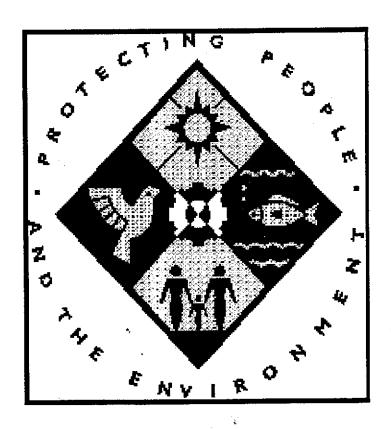
CHEVRON PRODUCTS COMPANY INC.

P.O. BOX 6004 SAN RAMON, CA 94583 (925) 842-9002

CALIFORNIA Certified Unified Program Agency HAZARDOUS MATERIALS BUSINESS PLAN HMBP 2001

Chevron Station #208029 9755 Edes Ave, Oakland CA 94612 510-568-6021



OES Form 2731

FACILITY INFORMATION

BUSINESS OWNER/OPERATOR IDENTIFICATION

					Page 1 of 5
I. IDENTIFIC				7	
FACILITY ID# 0 0 0 0 0 0 0 0 0 0 0 0		GINNING 1 /01/01		ENDING DATE 12/31/01	101
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)			3 BUSINE	SS PHONE	102
Chevron Station #208029			510-56	8-6021	
BUSINESS SITE ADDRESS		****			103
9755 Edes Ave					
CITY	104		ZIP CODE		105
Oakland		CA	94612		
DUN & BRADSTREET		106	SIC CODE (4	ligit #)	107
00-914-0559			5541/5411		
COUNTY	-,		.,,		108
Alameda					
BUSINESS OPERATOR NAME		109	BUSINESS OP	ERATOR PHONE	110
Chevron Stations Inc			510-568-602	:1	
II. BUSINESS	OWNE	R	1_212 300 301		
OWNER NAME	O 1717E	111	OWNER PHO	NE	112
Chevron Products Company, Attn: Permit Desk			925-842-900		
OWNER MAILING ADDRESS			1 723 642-700		113
P.O. Box 6004					
CITY	114	STATE	115	ZIP CODE	116
		CA		94583	
San Ramon III. ENVIRONMEN	TAL CO			1 74365	
CONTACT NAME	IALCC	117	CONTACT PH	IONE	118
			925-842-900		
Chevron Products Company, Attn: Permit Desk CONTACT MAILING ADDRESS			923-642-900	14	119
P.O. Box 6004	120	STATE	[21	ZIP CODE	122
		CA		94583	
San Ramon		_	·		
-PRIMARY- IV. EMERGI			TS	-SECONDAR	Y-
NAME 123	NAN				125
Chevron Emergency Information Center			rgency Inforn	nation Center	
TITLE 124	TITI				129
Chevron Emergency Information Center (CEIC)				nation Center (CEIC)	
BUSINESS PHONE 125		INESS PHO			130
800-231-0623		-231-0623			
24-HOUR PHONE 126	*	OUR PHO			131
Chevron Emergency Information Center 800-231-0623			ergency Inforn	nation Center 800-231	
PAGER # 127		ER#			132
Chevron Emergency Information Center 800-231-0623	Che	vron Eme	ergency Inform	nation Center 800-231	1-0623
ADDITIONAL LOCALLY COLLECTED INFORMATION:					
			·		
Certification: Based on my inquiry of those individuals responsible for obtaining the am familiar with the information submitted and believe the information is true, accurately	informatio	n, I certify t	under penalty of l	aw that I have personally e	xamined and
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE	134	NAME OF DO	CUMENT PREPARER	135
1 1 thing	02/01/0)1	Chevron l	Products Company	
NAME OF SIGNER (pr/h) 136		SIGNER	CHOTION	15daeto Company	137
1 17	!	ESH Spec	ialist		
John Cattolico \	NCIAH I	Lari Spec	iaiisi		

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

□ADD			DEL	ETE		•	[⊠R	EVISE				200	<u> </u>		F	age 2 of 5
	***			I.	FA	CIL	IT	Y	INF	O	RMA	\T	TION				
BUSINESS NAME (Sa	ime as FACIL	ITY NA	ME (or DBA	- Doin	g Busi	ness A	As)									3
Chevron Station #												. 1				(CLOCKING A.	202
CHEMICAL LOCATI	ON										20	,	CHEMICAL LOCA EPCRA	ATIO	N CON	IFIDENTIAL	202
South east side of	lot												YES NO)			
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FACILITY ID # 0	0	0 0	U	1,50			<u> </u>	بَـــا			1 of				<u>C7</u>		
II. CHEMICAL INFORMATION																	
CHEMICAL NAME											20:	5	TRADE SECRET		1	⊠ Yes □ No	206
Petroleum Hydroc	arbons											_	lf Subj	ect to	EPCRA, r	refer to instructions	
COMMON NAME 207 EHS* Yes No									208 Io								
Regular Unleaded	Gasoline (8	37 Octa	ne)								20	_					
CAS#											20	"	*If EHS is "Yes",	all an	nounts i	below must be in lb	s.
8006-61-9 FIRE CODE HAZAR	D CI ASSES	Complete if		and by CII	(PA)								<u></u>				210
Flammable Liquid		Complete n	ıequi	ied by CO	TA)												
HAZARDOUS MATERI													we Ov Ma		212	CURIES	213
TYPE (Check one item o		a. PURE	×	o. MIXT	URE	🔲 c. Y	VASTI	E	21	1	RADIO	ACT	TVE ☐ Yes ☒ No		212	CURIES	
PHYSICAL STATE	· 🗆	a. SOLID	 1521	h LIOI	IID	c.	GAS		21	4	LARGE	ST (CONTAINER 20,0	000			215
(Check one item only) FED HAZARD CATEGORIA		a. Journ		b. Live		_ ·	0710										216
(Check all that apply)		a. FIRE		. REAC	CTIVE	☐ c. l	PRESS	URE	E RELE	EASE	⊠d	. A	CUTE HEALTH 🛛	e. C	HRONIC	CHEALTH	
AVERAGE DAILY AM	DUNT	217	N	AXIMU	M DAIL	Y AM	TNUC	-	2	18	ANNUA	AL V	VASTE AMOUNT	2	9 ST	ATE WASTE CODE	220
10,000			2	0,000													
UNITS* (Check one item only)	<u> </u>	a. GALLO	SNC				_		POUNE unds.	s I	□ d. TO	NS		221	DAY: 365	S ON SITE:	222
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1	UNDERGROU			☐ f. C		ANON.	VIG I A	1661	C DRO		j. BA		n. PLAS	TIC B	OTTLE	r. OTHER	
□ c.	TANK INSIDE	BUILDIN	ŧG	☐ g. 0	CARBOY	,				i	🔲 k. B0	XC	O. TOTE	BIN			
□ d.	STEEL DRUM	1		□ h. S	SILO						□ L C	YLI	NDER 🔲 p. TANK	WA	GON		223
STORAGE PRESSURE	⊠ a	. AMBIE	NT	ı	🗅 ъ. А	BOVE	AMBI	IENT	Γ		c. BELC)W A	AMBIENT				224
STORAGE TEMPERAT	URE 🛭 a.	AMBIE!	NT] b. AE	OVE A	MBIE	ENT			c. BELC)W	AMBIENT d.	CRY	OGENIC	2	225
%WT	HAZAR	DOUS (CON	IPONE	ENT (F	or mi	xture	or	waste	onl	y)		EHS			CAS#	
1 < 15% 226	Methyl Te	rt Buty	ΛE	ther						;	227		Yes No 228	16	53404	4	229
2 < 1% 230	Toluene									:	231		Yes No 232	1()8883		233
3 < 1% 234	Xylene										235		Yes No 236	13	330-20)-7	237
4 238					·····			· ·			239		Yes No 240			.,	241
5 · 242	<u> </u>	·		··	, -						243		Yes				245
If more hazardous compon	ents are present at	greater th	an 1%	by weigh	nt if non-c	ırçinoge	nic, or	0.1%	by weig	ght if	сатсіводет	nic, a	ttach additional sheets of	paper	capturing	the required information	м,
ADDITIONAL LOC																	246
ADDITIONAL LOC	LLDI CONLI	~1.66	1 C			~ # I(
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-																If EPCRA, Please	oign ricic

(one page per material per building or area)

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

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						I. F	AC	IL	ITY I	NF	OF	RM.	TION				
BUSINESS NA	ME (S	ıme a	s FACILITY	/ NA	ME :	or DBA - D	oing	Busin	ess As)								3
Chevron Stat)29													A PARTY OF A PARTY A PARTY OF A P	202
CHEMICAL LO	CAT!	ON										20:	CHEMICAL EPCRA	LOCAT	TON CO	NFIDENTIAL	202
South east si	de of	lot												Ø NO			
		T						_	0 0	10	[]	MA	# (optional)	203	GRID#	(optional)	204
FACILITY ID	# O	0	0	0	0		0	0			<u> </u>	1of			C7	<u>, , , , , , , , , , , , , , , , , , , </u>	
II. CHEMICAL INFORMATION										1							
CHEMICAL N.	AME										·	20:		CRET		Yes No	206
Petroleum H	vdroc	arbo	ons											If Subject	t to EPCRA,	refer to instructions	
COMMON NA								•				20	EHS*			☐ Yes ⊠ No	208
Supreme Un	leade	i Ga	soline (92	Oc	ane)											
CAS#												20		Yes", all	l amounts	below must be in lbs.	
8006-61-9	1710	D 01	A GGPC										<u> </u>				210
FIRE CODE H				ipiete i	requi	red by CUPA)											
Flammable I			iass 5								Т						213
TYPE (Check one			🔲 a. P	URE	×.	b. MIXTURE] c. W	ASTE	211	1	RADIO	CTIVE Yes	⊠ No	212	CURIES	
PHYSICAL STA	TE									214		LABOR	T CONTAINED	15.00	<u> </u>		215
(Check one item of			☐ a. S	OLIE		b. LIQUID] c. C	AS	214		LAKGE	ST CONTAINER	15,00			216
FED HAZARD ((Check all that ap		ORIES	S ⊠ a.	FIRE		b. REACTIV	E [c. P	RESSURE	RELE	ASE	⊠d	ACUTE HEALT	Н ⊠ е.	. CHRONI	C HEALTH	216
AVERAGE DAII	LY AM	DUNT	T	21	, N	AXIMUM I	AILY	AMC	UNT	21	8	ANNUA	L WASTE AMOU	NT	219 5	TATE WASTE CODE	220
7,500					1	5,000					1						
UNITS*	only)		⊠ a. (GALL		☐ b. CU			C. Po		; [☐ d. TO	NS	23	21 DAY 365	'S ON SITE:	222
(Check one item only) * If EHS, amount must be in pounds. STORAGE CONTAINER																	
CONTAINER	_		VE GROUNI ERGROUND			f. CAN	SHC	NONIV	4E I ALLIC	. DROP		j. BA		PLASTI	C BOTTLE	T. OTHER	
			K INSIDE BL			☐ g. CAR	BOY					k. B0	x 🗓 o.	TOTE B	in		
	□₄	STE	EL DRUM			☐ h. SILC	ļ				Ε	□ 1. C	/LINDER Dp.	TANK V	WAGON		223
STORAGE PRE	SSURE		⊠ a. /	AMBI	ENT	O i	, AB	OVE A	AMBIENT		□ ¢	BELC	W AMBIENT		,		224
STORAGE TEM	PERAT	URE	🖾 a. A	MBIE	NT	□ b	ABC	VE A	MBIENT		٥	. BELC	W AMBIENT	□ d. C	RYOGENI	C	225
%WT		H	HAZARDO	ous	CON	APONENT	(Fo	r mix	ture or v	waste	only	()	EHS			CAS#	
1 <15%	226	Мє	ethyl Tert	But	yl E	ther					2:	27	Yes 🛭 No	228	163404	4	229
2 <1%	230	То	luene								2	31	☐ Yes ⊠ No	232	108883		233
3 < 1%	234	Ху	lene					•			2	35	Yes No	236	1330-2	0-7	237
4	238			***			,	-			2	39	Yes No	240			241
5	242					<u></u>					2	243	Yes No	244			245
If more hazardous	соттрог	ents ar	e present at gre	ater th	an 19	by weight if t	оп-саг	cjnogen	sic, or 0.1%	by weig	ht if c	arcinoger	ic, attach additional s	heets of pa	per capturin	g the required information.	
ADDITIONAL													-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	246
ADDITIONAL	LUC	اسلملت	. COLLEC			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11 -									
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																If EPCRA, Please Sig	n Here

HAZARDOUS MATERIALS

HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION

□ADD	[]I	DELETE		REVISE			200		Page	4 of 5
		I. F	ACILITY	Y INFO	RMA	TION				
BUSINESS NAME (Same as FACILITY NAM	ME or DBA - D	oing Business A	s)						3
Chevron Station									*****	
CHEMICAL LOCA	NOL				201		LOCAT	ON CON	NFIDENTIAL	202
Inside Store						EPCRA YES	⊠ NO			
FACILITY ID#	0 0 0 0	0 0	0 0 0	0 0	l l	# (optional)	203	Ī	(optional)	204
TACIBITI ID #					2 of :			H4		
		II. CI	HEMICA	L INF	ORM	ATION				
CHEMICAL NAME					205	TRADE SE	CRET		☐ Yes 🏻 No	206
Carbon Dioxide					•		ff Subject	io EPCRA, i	refer to instructions	
COMMON NAME					207	EHS*			☐ Yes ☒ No	208
Carbon Dioxide	(CO2)				209					
CAS#					209	1	'Yes", ali	amounts	below must be in lbs.	
124-38-9 FIRE CODE HAZA	RD CLASSES (Complete if	required by CUPA)								210
Compressed Gas										
HAZARDOUS MATER	tial.	☐ b. MIXTURE	C. WASTE	211	RADIOA	CTIVE Yes	⊠ No	212	CURIES	213
PHYSICAL STATE				214	LARGES	T CONTAINER	350		<u> </u>	215
(Check one item only) FED HAZARD CATE		☐ b. LIQUID	⊠ c. GAS							216
(Check all that apply)		□ b. REACTIVI	E 🛭 c. PRESSU	RE RELEASE	≅ ⊠ d.	ACUTE HEALTH	d. □ e.			
AVERAGE DAILY AN	OUNT 217	MAXIMUM D	AILY AMOUNT	218	ANNUAI	L WASTE AMOU	NT	219 ST	ATE WASTE CODE	220
175		350			<u> </u>					222
UNITS* (Check one item only)	🖾 a. GALLO		IC FEET c	c. POUNDS	☐ d. TON	īS	221	365	S ON SITE:	222
STORAGE	. ABOVE GROUND TAN					ER DRUM □ m	GI ASS B	OTTLE	q. RAIL CAR	
l	. UNDERGROUND TANK		HOMONMETAL	LIC DROM	j. BAC				r. OTHER	
	. TANK ÎNSIDE BÜILDIN	G 🔲 g. CARE	ЮY		☐ k. BO	X 🔲 0.	TOTE BI	N		
	i. STEEL DRUM	□ h. SīLO			□ 1. CY	LINDER 🔲 p.	TANK W	AGON		223
STORAGE PRESSUR	E 🔲 a. AMBIEN	vт ⊠ь.	ABOVE AMBIEN	1.L 🗀	c. BELOV	V AMBIENT				224
STORAGE TEMPERA	TURE 🛛 a. AMBIEN	т 🗆 ь.	ABOVE AMBIEN	vr 🗆	c. BELOV	V AMBIENT	🗖 d. CR	YOGENIC	2	225
%WT	HAZARDOUS C	COMPONENT	(For mixture	or waste on	ily)	EHS			CAS #	
1 100% 226	Carbon Dioxide	•			227	Yes 🛭 No	228	124-38-	9	229
2 230			*****		231	Yes No	232	···		233
3 234		· · · · · ·			235	Yes No	236			237
4 238					239	Yes No	240			241
5 242						Yes No	244			245
If more hazardous compo	nents are present at greater than	n 1% by weight if no	n-carcinogenic, or 0.	.1% by weight if	f carcinogenia	, attach additional s	heets of pape	r capturing	the required information.	
ADDITIONAL LO	CALLY COLLECTED IN	PORMATION	DOT#1013							246
									If EPCRA, Please Sign	Here
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(one page per material per building or area)

UNIFIED PROGRAM CONSOLIDATED FORM HAZARDOUS MATERIALS HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION

HAZARDOUS MATERIALS INVENTORY – CHEMICAL DESCRIPTION (one page per material per building or area)

∏ADD				DEL	ЕТЕ			Ø	RE	VISE					200		Page	5 of 5
I. FACILITY INFORMATION																		
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) 3											3							
Chevron Station		29										201	C	TEMICA	LIOCA	TION CON	IFIDENTIAL	202
CHEMICAL LOCA												201	,	TEMICA CRA	L LUCA	HON CON	FIDENTIAL	
Building Storage	Room	1						····				 .			⊠ NO			204
FACILITY ID#	0 0	A A A A A A A A A A A A A A A A A A A										204						
					<u>и. с</u>	HIB	MI	<u>CA</u>	L.	INJ	·O							206
CHEMICAL NAME	3											205	TI	RADE SE		- FRON	Yes No	200
New Motor Oil		•										207			іт зиоје	CI TO EPCKA,	refer to instructions	208
COMMON NAME														HS*			☐ Yes ⊠ No	
New Motor Oil CAS#												209					to the comment of the like	
64741884													*[f EHS is	"Yes", a	II amounts	below must be in lbs.	
64 / 41884 FIRE CODE HAZARD CLASSES (Complete if required by CUPA)											210							
Flammable Liqu	ids Cl	ass 1									_							213
HAZARDOUS MATE TYPE (Check one item		☐ a. P	URE	⊠ t	. MIXTURI	E [] c. ₩	ASTE		211	R	ADIOA	CTIVE	Yes	⊠ No	212	CURIES	
PHYSICAL STATE (Check one item only)		Паѕ	OL ID	1 21:	b. LIQUID	Г] c. G	ias		214	L	ARGES	T CON	TAINER	1			215
FED HAZARD CATE	GORIES				· · · · · · · · · · · · · · · · · · ·													216
(Check all that apply)		🖾 a. 1	FIRE		. REACTI	Æ [] c. P.	RESSU	RE F	RELEA							C HEALTH	
AVERAGE DAILY A	MOUNT		217	M	AXIMUM	DAIL	Y AMC	UNT		21	8 4	NNUA	L WAS	TE AMOI	JNT	219 ST	ATE WASTE CODE	220
30				6	0													202
UNITS* (Check one item only)		⊠ a. C	GALL	ONS	□ b. CU			_		UNDS		d. TON	₹S		2	²²¹ DAY 365	S ON SITE:	222
STORAGE					c. PLA						. m	: EIDI	ED DD	им П.	22410	ROTTI F	g. RAIL CAR	
_		/E GROUND ERGROUND			f. CAN		NUNN	BEIAL	LIC.	DKUN		j. BAC		ow ⊠ 1	n. PLAST	IC BOTTLE	r. OTHER	
_		K INSIDE BU			g. CAI							k. BO	x		o. TOTE	BIN		
	d. STEE	EL DRUM			h. SILO)					Ę] 1. CY	LINDI	er 🗆 j	. TANK	WAGON		223
STORAGE PRESSU	RE	⊠ a. A	MBIE	NT	□ъ	. ABC	OVE A	MBIEN	T	(] c.	BELO\	W AMI	BIENT				224
STORAGE TEMPERA	ATURE	⊠a. Al	MBIE	NT	□ b	, ABO	A SVC	MBIEN	ΙŢ	-	c.	BELO	W AMI	BIENT	□ d. ¢	CRYOGENI	C	225
%WT	H	IAZARDO	US (CON	(PONEN	Γ(Fo	or mix	ture o	or w	aste (only))		EHS			CAS#	
1 85% 226	Lul	bricating l	Base	Oil	l						22	7 [Yes	s 🛛 No	228	647418	84	229
2 2% 230	Zir	nc Alkyl I	Dithi	oph	osphate						23	1 [Yes	s 🛭 No	232	686494	23	233
3 234											23:	5 [Ye	s 🗌 No	236			237
4 238	3										23	9 [Ye	s 🔲 No	240			241
5 242	,										24	3 {		s 🔲 No	244			245
		nrecent of s-	aler th	20 102	hy weight if	non-ce	rcinosen	úc, or A	1% h	y weigt		ŀ				aper capturing	the required information.	
										,B.			,				-	246
ADDITIONAL LO	CALLY	COLLECT	ED l	NFC	KMATIOI	א א	J1#1	<i>41</i> 0										
																	If EPCRA, Please Sig	n Here

EMERGENCY RESPONSE PROCEDURES GASOLINE and CARBON DIOXIDE

FIRE OR EXPLOSION DATA

Carbon dioxide is not flammable. CAUTION: Compressed Gas Cylinder may explode in heat of fire. HEALTH HAZARD CAUTION:

- Vapors may cause dizziness or suffocation.
- 2. Contact with liquid carbon dioxide may cause frostbite.

In the event of a fire, spill, leak, or suspected leak in the tanks, piping, or cylinder, or natural disasters such as an earthquake or flood, the following steps are to be taken as applicable:

- 1. TURN OFF PUMPS using the Emergency Pump Shut-Off Switch.
- 2. **EVACUATION:** If there is any immediate danger, **ANNOUNCE** to all persons on the site: "There is an emergency. Please turn off your engines and leave the station on foot immediately."
- 3. CALL FOR HELP in case of an emergency by dialing 9-1-1 and giving the following information:

"THERE IS A FIRE / GASOLINE SPILL at the station at (9755 Edes Ave, Oakland)." If anyone is trapped or needs medical attention, tell the answering dispatcher. Stay on the phone and be prepared to answer any questions concerning the situation.

- 4. <u>LOOK AROUND</u> to assure that all others have left the station if necessary, particularly those in vehicles who may need assistance or may not have heard the emergency announcement. Assist, or direct assistance to, anyone having difficulty leaving the station area, and anyone who may be injured.
- 5. ATTEMPT TO EXTINGUISH any small or incipient fire if you can do so safely. Have the fire extinguisher ready to use in the event of any spill. Try to contain any large spill, or use absorbent on smaller spills.
- 6. REPORT to arriving emergency response personnel to provide them with any information or assistance they might need.
- 7. CONTACT the station Operator if s/he is not already at the station. Use the list below for emergency contacts: Name/Title/Home #:

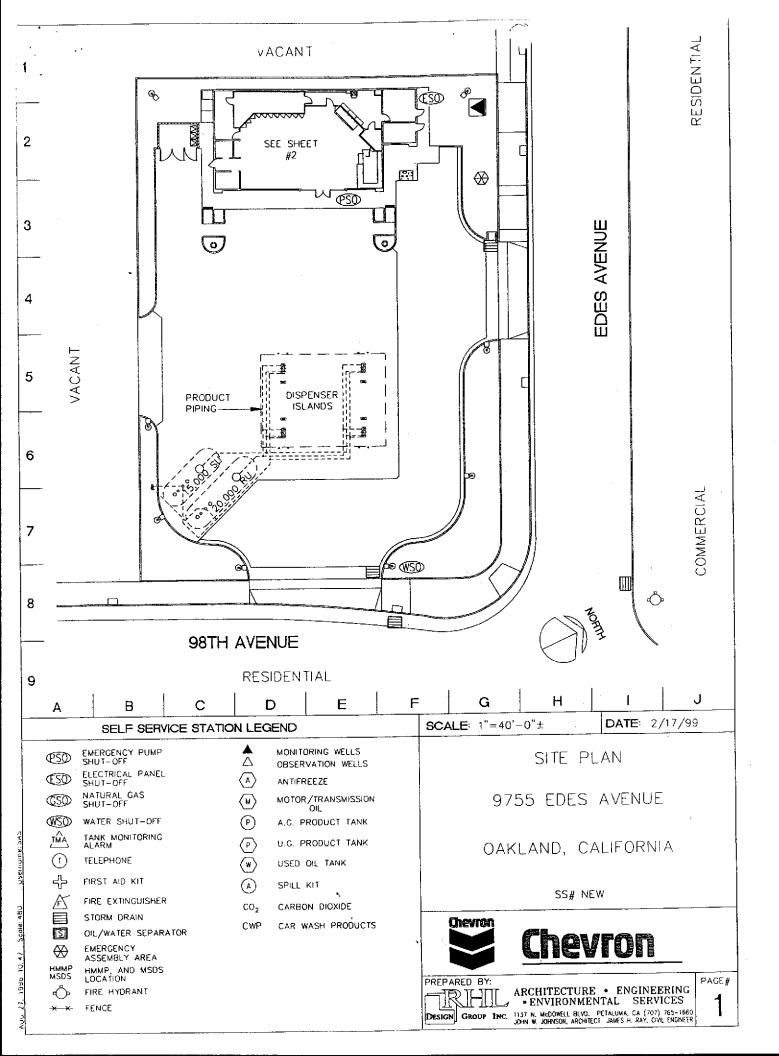
	Station Manager	Home Phone

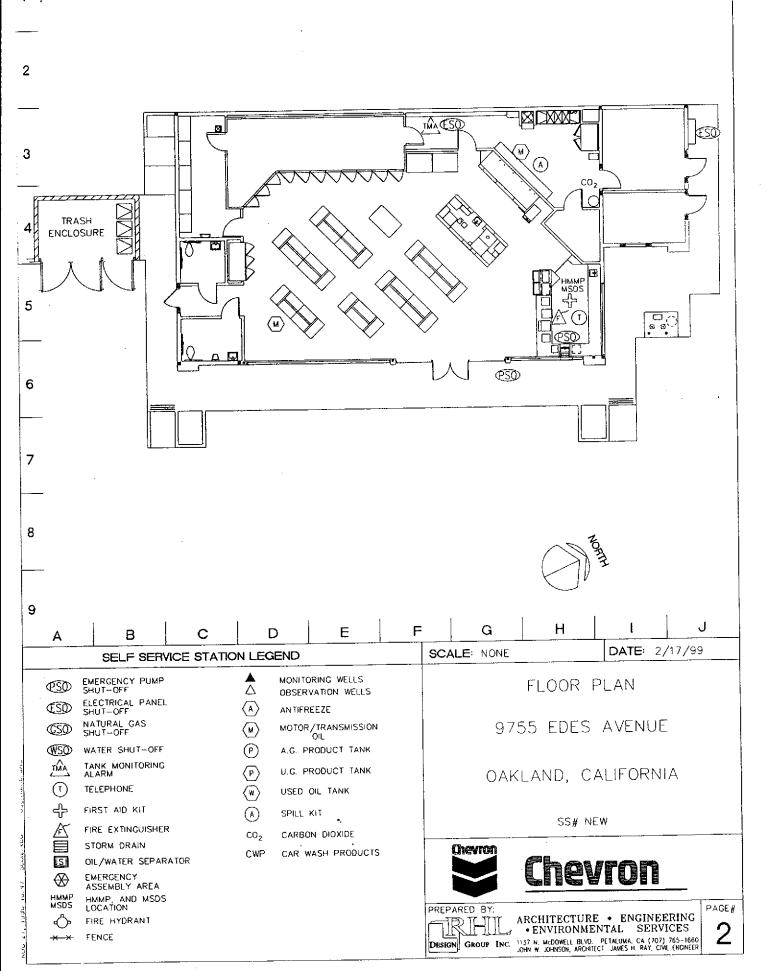
8. NOTIFY Chevron Maintenance by phone WITHIN 24 HOURS 1-800-423-3528

Chevron incident desk will notify the appropriate State and Local agencies <u>unless the situation requires</u> urgent immediate response by the agencies, in which case the <u>OPERATOR</u> should notify these agencies:

- 1. LOCAL AGENCY: CITY OF OAKLAND FIRE DEPARTMENT 510-238-3938
- 2. CALIFORNIA OFFICE OF EMERGENCY SERVICES (24 Hours), 800-852-7550
- 3. NATIONAL RESPONSE CENTER (24 Hours), 800-424-8802
- 9. Operator should attempt to isolate leak location by inspection.
- 10. Chevron will coordinate whatever corrective actions need to be taken beyond the Operator's capabilities. Chevron will file whatever reports need to be filed with local and state agencies, and send a copy to the station for the Operator's files.
- 11. **EVACUATION:** In the event evacuation is necessary, the attendant will announce for all customers and personnel to evacuate the building using the nearest exit door. All persons should go to the emergency assembly area as designated on the site map.
- 12. RE-ENTRY: If evacuation has occurred and emergency responders have been called, re-entering this facility should take place with extreme caution and only under the direction of the senior emergency responder on site and Chevron personnel.

THESE EMERGENCY RESPONSE PROCEDURES MUST BE FILLED OUT AND POSTED CONSPICUOUSLY ON SITE ALONG WITH THE ATTACHED SITE PLAN





SITE SPECIFIC EMERGENCY RESPONSE TRAINING PLAN

Employees must be given this training before starting work, and refresher courses must be provided annually. Records must be kept to show when each station employee has been given his/her safety training. Use the following outline and make copies as needed. Have employee date and sign this document upon completion of training. Retain these records for a minimum of three years.

- I. FIRST THINGS TO KNOW:
- A. EMERGENCY PUMP SHUT-OFF: This turns off the turbine pumps that provide flow to the dispensers from the underground tanks. In case of a leak, shutting off the pumps will help to prevent spills. LOCATION: 1-CASHIER AREA, 1-OUTSIDE BUILDING
- B. ELECTRICAL PANEL: The panel allows you to selectively cut off power to lights, signs, pumps, etc. The main switch kills all power at the site.

LOCATION: BACKROOM OF STORE

- C. WATER SHUT-OFF: The water shut-off may be necessary in some cases. LOCATION: LANDSCAPE AREA ON CORNER of 98th AVE & EDES AVE
- D. NATURAL GAS SHUT-OFF: If your station has natural gas, it may be necessary to shut-off the natural gas flow in an emergency. LOCATION: NONE

E. FIRST AID KIT:

LOCATION: BACKROOM OF STORE

F. FIRE EXTINGUISHER: Use only on small fires that you can handle. Do not attempt to extinguish large fires on your own; call 9-1-1 for help.

LOCATION: 1-AT CASHIER AREA 1- BACKROOM OF STORE

- G. ABSORBENT: In the form of crystals or cloth, absorbent can soak up small spills of gasoline, diesel fuel, or other petroleum products. Absorbent should be used rather that washing spills down a drain. In case of large spill, merely try to contain it; a vacuum truck should be used to clean up any large spill. LOCATION: BACKROOM OF STORE
- H. EMERGENCY EVACUATION AND ASSEMBLY AREA:

LOCATION: DRIVEWAY ON EDES AVE

NEAREST MEDICAL FACILITY & TRAUMA CENTER: Employees should know what facilities are available in case customers or other employees need medical attention.

> SUMMIT MEDICAL CENTER 350 HAWTHORNE STREET OAKLAND, CA. 94609 510-655-4000

- II. All employees should review the Service Station Monitoring Plan, of which this training plan is a part. Specifically, each employee should understand the procedures to be used in responding to various kinds of emergencies, and know how to monitor for leaks of hazardous materials. As a supplement to this package, employees should also review the Emergency Response Plan filed by your business to the appropriate local agency. Thirdly, employees should review and have access to the Materials Safety Data Sheets you have on file for each of the hazardous materials stored at the station and must be drilled in all emergency response procedures contained herein.
- III. FIRST AID PROCEDURES for EXPOSURE TO GASOLINE AND DIESEL FUEL
- A. EYE CONTACT: Flush with water for 15 minutes while holding eyelids open. Get medical attention.
- B. <u>SKIN CONTACT</u>: Flush with water while removing contaminated clothing and shoes. Follow by washing with soap and water. Do not reuse clothing or shoes until cleaned. If irritation persists, get medical attention.
- C. <u>INHALATION (Breathing)</u>: Remove victim to fresh air and provide oxygen if breathing is difficult. If not breathing, give artificial respiration. Get medical attention.
- D. INGESTION (Swallowing):

 DO NOT INDUCE VOMITING BECAUSE GASOLINE CAN ENTER LUNGS AND CAUSE SEVERE LUNG

 DAMAGE! If vomiting occurs spontaneously keep head below hips to prevent aspiration of liquid into lungs. Get medical attention.
- E. NOTE TO PHYSICIAN: If more than 2.0 ml per kg has be ingested and vomiting has not occurred, emesis should be induced with medical supervision. Keep victim's head below hips to prevent aspiration. If symptoms such as loss of gag reflex, convulsions or unconsciousness occur before emesis, gastric lavage using a cuffed endotracheal tube should be considered.
- F. For further information, consult the Materials Safety Data Sheets for these products and for other hazardous materials.

FIRST AID FOR EXPOSURE TO OTHER MATERIALS: Consult the warning advice on container labels or refer to the MSDS for that product.

Document prepared by: CHEVRON PRODUCTS COMPANY, RETAIL ESH

(LAST UPDATED: February 1, 2001)

Hazardous Materials Business Plan/Emergency Response Employee Training Log

BUSINESS NAME: Chevron Station #208029

ADDRESS: 9755 Edes Ave, Oakland, CA 94612

Employees must sign this form to prove they received their INITIAL and/or ANNUAL Emergency Response Training

EMPLOYEE NAME	EMPLOYEE SIGNATURE	DATE OF TRAINING	TYPE OF TRAINING Initial or Annual Refresher
·			

(Last Updated February 1, 2001)

FACILITY INFORMATION

BUSINESS ACTIVITIES

Page 1 of 1

FACILITY ID # 0 0 0 0 0 0 0 0 0 0	ENHIELG 0 0	Agrioi():		EPA ID # (Hazardous Waste Only) CAL000202714
BUSINESS NAME (Same as Facility Name of DBA-Doing Business As)	1	L		3
Chevron Station #208029, 9755 Edes Ave, Oakland CA 94606	,			
The second secon	A 11/03/2020 SECTION A 11/03/2	vavr(e)N		
NOTE: If you check YE NOTE: If you check YE see to please submit the Business Owner/Oper	Sideni aloride	v parti Militea	onii Ioi	nstlist? page (CES Form 2730). complete these pages of the UPCF
A. HAZARDOUS MATERIALS				
Have on site (for any purpose) hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (include liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?	⊠ YES	□ NO	4	HAZARDOUS MATERIALS INVENTORY CHEMICAL DESCRIPTION (OES 2731)
B. UNDERGROUND STORAGE TANKS (USTs)			•	UST FACILITY (Formerly SWRCB Form A)
Own or operate underground storage tanks?	⊠ YES	□ио	5	UST TANK (one page per tank) (Formerly Form B)
Intend to upgrade existing or install new USTs?	YES	⊠ NO	6	UST FACILITY
				UST TANK (one per tank) UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C)
3. Need to report closing a UST?	☐ YES	⊠ NO	7	UST TANK (closure portion –one page per tank)
C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs) Own or operate ASTs above these thresholds:any tank capacity is greater than 660 gallons, orthe total capacity for the facility is greater than 1,320	☐ YES	⊠ NO	8	NO FORM REQUIRED TO CUPAs
gallons? D. HAZARDOUS WASTE	<u> </u>			
Generate hazardous waste?	⊠ YES	□ №	9	EPA ID NUMBER – provide at the top of this page
Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC 25143.2)?	☐ YES	⊠ NO	10	RECYCLABLE MATERIALS REPORT (one per recycler)
3. Treat hazardous waste on site?	☐ YES	⊠ NO	11	ONSITE HAZARDOUS WASTE TREATMENT – FACILITY (Formerly DTSC Forms 1772) ONSITE HAZARDOUS WASTE
				TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772 A,B,C,D and L)
4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?	☐ YES	⊠ NO	12	CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1232) TEACHTE WASTE (CONTROL DATION)
Consolidate hazardous waste generated at a remote site?	☐ YES	⊠ ио	13	REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)
Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?	☐ YES	⊠ NO	14	HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)
E. LOCAL REQUIREMENTS				15
(You may also be required to provide addition	nal informati	on by your	CUPA	or local agency.)