ALAMEDA COUNTY HEALTH CARE SERVICES **AGENCY**

DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

Certified Mail #

10/27/93 STID# 4598 DEPARTMENT OF ENVIRONMENTAL HEALTH State Water Resources Control Board Division of Clean Water Programs UST Local Oversight Program 80 Swan Way, Rm 200 Oakland, CA 94621 (510) 271-4530

Notice of Requirement to Reimburse

Attn. Jeff Belden American Savings Bank 400 E. Main St Stockton, C A 95201

American Savings Bank 1429 College Ave Livermore , CA 94550

Responsible Party Property Owner

Date First Reported 10/22/93

Substance: Gasoline SITE 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 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 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 Eva CHU, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

III, Chief Howell. Contract Project Director

Mike Harper, SWRCB

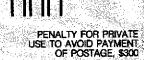
SWRCB Use:

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: X Reason: New case

R01022

Official Business





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Print your name, address and ZIP Code here

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISON
80 SWAN WAY, SUITE 200
OAKLAND, CA 94621

~ [[.]...[.].]]..[[...[].**..(3**[]-]4530

I also wish to receive the the thems 1 and/or 2 for additional services. Complete terms 3, and 4a & b.
Print your name and address on the reverse of this form so that we can following services (for an extre fee): return this card to you. 1. Addressee's Address Attach this form to the front of the mailpiece, or on the back if space does not permit. Write "Return Receipt Requested" on the mailpiece below the article number 2.

Restricted Delivery The Return Receipt will show to whom the article was delivered and the date Consult postmaster for fee. 4a. Article Number 3. Article Addressed to: Return RO 1022 P 422 218 052 Attn: Jeff Belden 4b. Service Type American Savings Bank ☐ Insured Registered 400 E. Main Street ☐ COD ☐ Certified Stockton, CA 95201 Return Receipt for Merchandise ■ Express Mail STID# 4598 7. Date of Delivery NOV -4 1993 8. Addressee's Address (Only if requested 5. Signature (Addressee) and fee is paid) 6. Signature (Agent) DOMESTIC RETURN RECENT m 3311, December 1991 & U.S.G.P.O.: 1992-307-530