

1176 Boulevard Way  
Walnut Creek, CA 94595  
Telephone (925) 947-5700  
Facsimile (925) 935-8488



San Diego, CA  
Santa Barbara, CA  
Walnut Creek, CA  
Washington, DC

## PALADIN LAW GROUP® LLP

Generating Professional:  
Walnut Creek Office  
JTill@PaladinLaw.com

February 28, 2018

**Via email ([dilan.roe@acgov.org](mailto:dilan.roe@acgov.org))**

Dilan Roe  
Alameda County Department of Environmental Health  
1131 Harbor Bay Parkway  
Alameda, CA 94502-6577

**Re: Response to Request for Site History Information  
6251–6255 College Avenue and 305-307 63<sup>rd</sup> Street, Oakland, California**

Dear Ms. Roe:

This responds to Alameda County Department of Environmental Health's ("County") "Request for Site History Information" dated December 20, 2017 addressed to Vasilios D. and Eleni V. Bouzos, Trustees of the Bouzos Family Living Trust ("Bouzos"); and follows-up on the County's further requests made during our meeting on January 29, 2018.<sup>1</sup> At this meeting, the County extended the time to respond to the information request until February 28, 2018.

As we discussed, the Bouzos property is a non-case property and is not regulated by the County. This non-case status represents a property at which no unauthorized release or discharge to the environment has been recorded. The Bouzos property owners have not been named in any litigation or regulatory action as a potential responsible party. In fact, Bouzos never operated a dry cleaning business nor released PCE at their property. There is no existing information that indicates otherwise.

Please note that during our meeting on January 29, 2018, the County requested additional information and other related data from Bouzos which was not included in the Request for Site History Information. The County never sent Bouzos the agreed upon amendment to the information demand. In this Response Bouzos attempt to address the two main issues raised by the County during the January 29, 2018 meeting: **1)** information related to earthquake retrofit construction work at the property; and **2)** request for sampling related to the last phase of this planned and necessary earthquake retrofit construction process; including collection of other data to assist the County to issue a no further action letter for the Bouzos property. With this goal in mind, Bouzos submit, based on information and belief, the following responses:

### **1) Earthquake Retrofitting Work:**

With regard to voluntary seismic strengthening that has already taken place at 6251, 6253, and 6255 College Ave., all of the work has been completed as specified on the plans and has been inspected by City of Oakland inspectors.<sup>2</sup> At this point approximately  $\frac{3}{4}$  of the work has been completed. The remaining  $\frac{1}{4}$

<sup>1</sup> This response does not respond for the dry cleaning operators listed in the information demand, including Brian J. Gordon, David B. Gordon, Ila Gordon, or Todd Borst as trustee.

<sup>2</sup> Please see **Exhibit A**.



includes the 307-63<sup>rd</sup> location and the two residential units directly above, which is scheduled to begin on March 5, 2018.<sup>3</sup>

The work completed included the removal of the existing concrete slabs, limited excavation of soil at the new footing and under the slab area in order to allow for the placement of gravel, a plastic moisture barrier, sand, and the new concrete slab.

In addition, the entire under slab sewer system in the completed retrofit work area was replaced; including the 4-inch cast iron main line. To date, all of the sewer has been replaced with the exception of the remaining (original) sewer under the 307-63<sup>rd</sup> street location and out to the main sewer in the street. The replacement of this remaining original sewer section will occur as part of the final phase of the earthquake retrofit of 307-63<sup>rd</sup> street location. The work in this unit will be the final phase of seismic strengthening construction.

The work starting on March 5, 2018 will include the interior demolition of the 307-63<sup>rd</sup> space and the removal of the façade of this space in preparation for the slab removal and sampling. It is anticipated that the slab removal and sampling set forth will commence on or about March 12<sup>th</sup>. During the following week of March 19<sup>th</sup>, it is anticipated that the remaining original sewer section will be removed and replaced. Once the results of the sampling for the 307-63<sup>rd</sup> soil have been received back it is anticipated that approximately 12 inches of soil will be removed from the 307-63<sup>rd</sup> space of approximately 300 sq. ft. plus the necessary footing work will be completed. This is a tentative schedule that is based on availability of equipment and subcontractors. Please see the City Approved plans and inspection card attached as **Exhibit A**.

- 2) **Sampling and Workplan.** Per our discussion with the County, please find attached as **Exhibit C** the Workplan related to sampling that will be undertaken to respond to the County's requests.
- 3) **Site History Report:** As you are aware, Bouzos did not own or operate the dry cleaning facility at the 6251-6255 College Avenue (APN 48A-7069-7).<sup>4</sup> Thus, the information provided here regarding the dry cleaning operations is based on information and belief and the preliminary and limited involvement of Bouzos and the County. At this time, Bouzos has not independently verified any of this information or contact information concerning the dry cleaning operations.
- 4) **Description of:**
  - a) The period of time that cleaner facility operated at the property.
    - (1) **Response.** Based on review of the information provided by the County, it appears the dry cleaning operations operated from approximately 1938 until the end of 1986 at the Bouzos Properties. From approximately 1973, until the end of 1986, the dry cleaning operation was owned and operated by the Gordons. Before that time it appears the dry cleaners was owned and operated by the Roths. It is unclear who operated the dry cleaner prior to the Roths. Given the historical time period of the dry cleaning operations, more than 30 years ago, the Bouzos do not appear to have any old records related to dry cleaning tenants.
  - ii) The operators' names and current mailing address.

<sup>3</sup> We have also included information regarding construction work undertaken in approximately 1987 at the Bouzos property. Please see **Exhibit B**.

<sup>4</sup> It should also be noted that the APN map within the information demand has the wrong addresses for (APN 48A-7069-9-1). See page 2.





- (1) **Response.** Bouzos does not have any additional information to add regarding the names of the businesses that operated the dry cleaning operations, nor do they have any additional contact information other than what the County already has.
- iii) A contact person and their current phone number.
  - (1) **Response.** Bouzos does not have any additional information to add regarding the names of the businesses that operated the dry cleaning operations, nor do they have any additional contact information other than what the County already has.
- iv) The nature of cleaner facility business at the property.
  - (1) **Response.** Bouzos are unclear about what information the County seeks from this request. However, Bouzos understand that there was a dry cleaning facility that operated at their property. It is not established at this time, whether the operations at the property used PERC = or if other chemicals and equipment might have been used. The County's Attachment 3 to the Information Request does not demonstrate that PERC was used during the dry cleaning operations at the Bouzos property. It should be noted that the location of the barrels referenced in Attachment 3 were located in the immediate area of MW-1 at the back of the alley. It is unclear how the inspector for the County understood that the material within the barrels contained PERC related materials. The approximate location of the dry cleaning equipment is shown on the attached Workplan figure.
- b) A complete "dry cleaning operations" questionnaire (see Attachment 6), to the extent that this information is known or reasonably available.
  - i) **Response:** It is the understanding of Bouzos that the dry cleaning operators will be providing this information to the extent that it is available. Bouzos did not operate the dry cleaner business.
- c) Description of the dry cleaning operations.
  - i) **Response:** Since approximately the end of 1986/beginning of 1987 the dry cleaning operations have not been located on the Bouzos property. Most if not all of the records related to the tenants were discarded at least 15 to 20 years ago. Bouzos does not appear to have any leases or other communications with the tenants from 1938 until 1986. Please note that the County's Attachment 3 does not demonstrate any release or threatened release of dry cleaning chemicals.
- d) Description of the source of information.
  - i) **Response:** Bouzos made various public record requests to various agencies. These agencies are listed on **Exhibit D**. Based on communications with the County, it appears that the CUPA files only relate to 6235-6239 College Ave. and do not relate to the Bouzos property. Most of the information reviewed has been provided by the County or is part of the County's public records. The County's file has not been reviewed in full and the information within the County file has not been independently verified. As set forth above, Bouzos discarded records related to the dry cleaning tenants at least 15 to 20 years ago. Other than the Screening Subslab Vapor Survey report dated June 5, 2017 and submitted to the County on the same date, Bouzos has not conducted any other environmental investigation or generated any other environmental reports regarding contamination at the Bouzos property.

Bouzos' have made a good faith effort to conduct an investigation and document review related to the dry cleaning operations at the Bouzos property, but it has begun only recently and Bouzos anticipates that additional investigation and factual history might still be available. Bouzos does not represent, adopt, or



Dilan Roe  
February 28, 2018  
Page 4 of 4

confirm the information or data available or contained within the County records, public records, or other reports/documents as full, true, or correct. However, based on currently available and reviewed information related to Bouzos' Response to the County's Site History Information Request, the undersigned states, based on information and belief, the information contained within this Response is full, true, and correct under penalty of perjury.

  
\_\_\_\_\_  
Attested by Dan Bouzos

Very truly yours,

By:   
John R. Till  
PALADIN LAW GROUP® LLP

Enclosures: Exhibits A-D

# EXHIBIT A



# Yellow Guard®

## 15 MIL VAPOR BARRIER

Husky® Yellow Guard® premium vapor barriers are waterproofing membranes manufactured using top-quality polyethylene (polyolefin) resins. Husky® Yellow Guard® vapor barriers are manufactured to be used in contact with soil and granular fill under concrete slabs, beams, and footings, and provide exceptionally low water vapor permeance. Husky® Yellow Guard® vapor barriers are manufactured by Poly-America, an industry leader in the manufacture of polyethylene films. Poly-America utilizes state-of-the-art processing equipment.



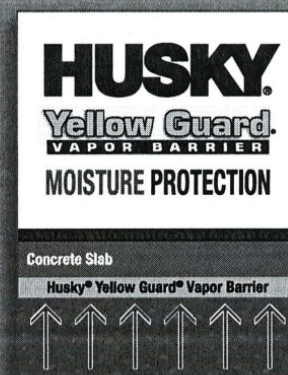
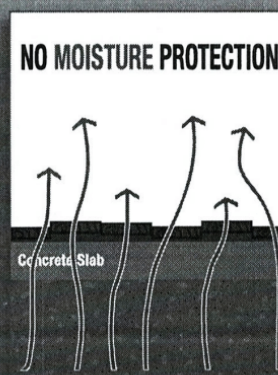
### VAPOR BARRIER HIGHLIGHTS

- Developed for use as a durable vapor barrier.
- Multi-layer product formulated from top-quality polyethylene (polyolefin) resins.
- Exceeds industry-standard ASTM E 1745 Class A, Class B, and Class C specifications.
- Restricts migration of soil gases such as radon and methane.
- Exceptionally low water vapor permeance, ten times lower than industry-standard ASTM E 1745 Class A requirement.
- Manufactured by Poly-America on state-of-the-art manufacturing equipment with full-time on-line quality monitoring and routine laboratory testing.
- Maintains low water vapor permeance even after exposure to severe field conditions.
- Outstanding tensile properties and puncture resistance.
- Excellent resistance to low-temperature brittleness.
- Available nationwide.

### Manufacturing Quality Control & Quality Assurance

All resins, additives, and concentrates for use in Husky® Yellow Guard® vapor barrier must meet Poly-America's stringent raw material specifications. Husky® Yellow Guard® vapor barrier is manufactured with continuous process-control monitoring and is routinely tested in Poly-America's state-of-the-art laboratory during and after production.

In addition, Husky® Yellow Guard® vapor barrier has been tested by accredited, independent laboratories to ensure that it meets ASTM E 1745 Class A, Class B, and Class C specifications.





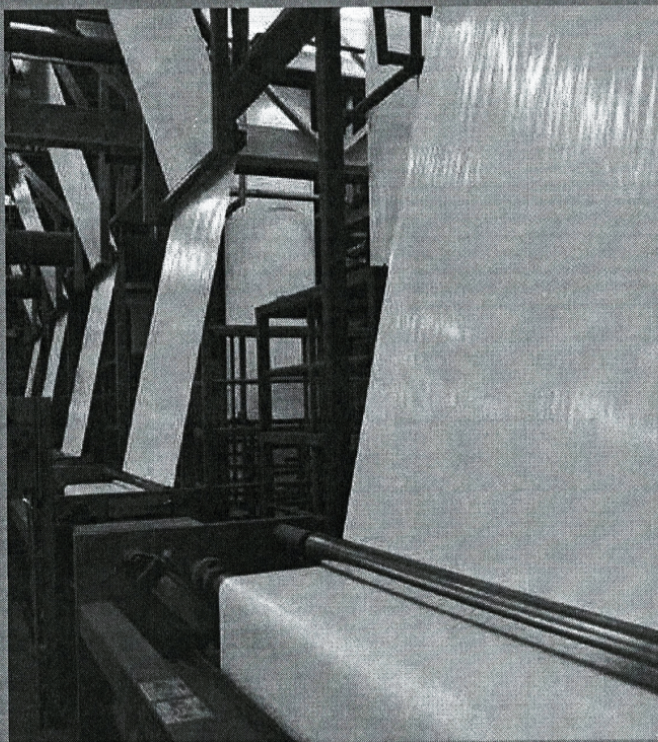
## PROPERTIES OF 15 MIL HUSKY® YELLOW GUARD® VAPOR BARRIER

Properties	Test Method	ASTM E 1745 Class A Requirements	Yellow Guard® Vapor Barrier Test Result*	Measures
Permeance	ASTM F 1249	0.1 perms	0.0082 perms/*0.0037 WVTR	Resistance to water vapor
Puncture Resistance	ASTM D 1709 Method B	2200 g	2300 g	Impact energy required to cause failure
Puncture Resistance	ASTM D 4833		183 N	Force required to puncture film
Tensile Strength	ASTM D 882	45.0 lbf/in	79.3 lbf/in	Force required to break/rupture film
Permeance After Conditioning (ASTM F 1249)	ASTM E 154			Resistance to water vapor after:
	Section 8	0.1 perms	0.0087 perms	-wetting, drying, and soaking
	Section 11	0.1 perms	0.0090 perms	-heat conditioning
	Section 12	0.1 perms	0.0087 perms	-low-temperature conditioning
	Section 13	0.1 perms	0.0093 perms	-soil organism exposure
Methane Transmission Rate	ASTM D 1434		182.91 mL(STP)/(m <sup>2</sup> · day)	Transmission through a membrane
Radon Permeability Coefficient			$6.7 \times 10^{-14}$ m <sup>2</sup> /sec	
Thickness			15 mils	
Roll Dimensions			14 ft x 140 ft	
Roll Weight			142.4 lbs	

\*All values are typical values and may vary within industry tolerances.

\*\*WVTR (Water Vapor Transmission Rate) in g/(100 in<sup>2</sup> · day)

Perm = grains/(ft<sup>2</sup> · hr · inHg)



### Installation

Installation of Husky® Yellow Guard® vapor barrier, including placement, lap joints, pipe penetrations, protection, repair, and suggested field check list, shall be in accordance with ASTM E 1643 standard practice and the project plans and specifications.

### Availability

Husky® Yellow Guard® 15 mil vapor barriers are available nationwide. Visit [www.yellowguard.com](http://www.yellowguard.com) for more information.

### Limited Replacement Warranty

Poly-America provides a limited replacement warranty on Husky® Yellow Guard® vapor barrier representing that the vapor barrier is free from material defects for a period of 1 year from the date of sale. The specific details of Poly-America's limited replacement warranty are available at <http://www.yellowguard.com/limitedwarranty.pdf>.

## Poly-America

2000 W. Marshall Dr. • Grand Prairie, TX 75051

800-527-3322 • 972-337-7654 • Fax 972-337-7016 • [www.yellowguard.com](http://www.yellowguard.com) • [yellowguard@poly-america.com](mailto:yellowguard@poly-america.com)

The information provided herein has been compiled by Poly-America, L.P. and to the best of our knowledge accurately represents Poly-America's Yellow Guard® vapor barriers at the time of publication. This publication is offered "as is," for preliminary planning purposes only, without any warranties of any kind. Final determination of suitability of this information or these products for the use contemplated and its manner of use is the sole responsibility of the end user. Poly-America, L.P. assumes no liability in connection with the use of this information and these products. This information is subject to change without notice.

57-023-0086A Rev 2/16

BOUZOS0000030



<b>CITY OF OAKLAND</b> Department of Planning and Building <b>BUILDING SERVICES</b> 250 Ogawa Plaza · 2nd Floor · Oakland, CA 94612 telephone (510) 238-3444 · facsimile (510) 238- 7287 · www.oaklandnet.com			
<b>PERMIT INSPECTION RECORD</b> <b>Commercial and Multiple-Unit Residential</b> California Building, Electrical, Plumbing, Mechanical, Energy, and Green Building Codes Oakland Building, Planning, Sustainability, Fire, and Municipal Codes			
Address:	305 63RD ST, Oakland, CA 94618	ST Suite:	APN: 048A706900700
Description:	Voluntary Seismic Strengthening		
Owner:	Bouzos Vasilios D & Eleni V Trs		Issued: 10/04/2016
Contractor:	BOUZOS CONSTRUCTION INC		Type: Non-Residential Building - Alteration
Construction:	Sprinklers: No		
Spec Insp:	Concrete Construction Steel Construction Seismic Force Resisting System Construction And Demolition Tracking		
Permits:	B1604455	P1602825	M1601880 E1603685
Pre-paid Inspections	12	6	5 6
<b>General Notes</b>			
1a	This Inspection Record Card and the Approved Plans and Approved Construction Management Plan must be readily available at the job site for all inspections. Protect all documents from the weather.		
1b	All construction must remain readily visible for inspection until the "OK TO COVER" box on this Inspection Record Card has been signed and dated by the City inspector.		
1c	Noise levels and Hours of Construction shall conform with the Zoning Conditions of Approval and Oakland Municipal Code regulations.		
1d	Follow all hazardous material testing, worker protection, remediation, and disposal regulations (lead-based paint, asbestos, etc.).		
1e	Toilet facilities must be provided on-site for construction workers.		
<b>Permit Expiration &amp; Refunds</b>			
2a	A permit may be extended (fee required) for a total of one year from the date of issuance only if no inspections have been performed.		
2b	Each permit will expire separately unless each of the Major Inspections (Foundation, First Floor, Frame, Final) is approved by the City Inspector every 6 months (or sooner). An expired permit cannot be reinstated if an inspection has been performed.		
2c	A Refund Request must be filed for all refunds. Up to 80% of inspection fees may be refunded if no inspections have been performed. No fees may be refunded more than 180 days after a permit has expired.		
<b>Site Maintenance</b>			
3a	"Best Management Practices" must be used daily for dust control and to protect storm water drainage systems (C6).		
3b	Jobsite must be cleaned daily of trash and debris and maintained free of graffiti. Construction materials must be neatly stock piled on-site. Vehicles and equipment must be parked on-site (see 5a below).		
<b>Inspections</b>			
4a	To avoid being charged for an inspection, a cancellation must be called-in before 10:00 am on the morning of the scheduled inspection.		
4b	For Building (B), Electrical (E), Plumbing (P), Mechanical (M), Grading (GR), Solar (SE, SP), Zoning, and Infrastructure (PX, PZ) inspections, call (510) 238-3444 week days 8:00 am to 4:00 pm, Wednesdays 9:30 am to 4:00 pm well in advance. Each permit must be scheduled separately.		
4c	For Fire inspections, call (510) 238-3851. For Public Works inspections, call (510) 238-3651. For EBMUD sewer lateral certification inspections, call (510) XXX-XXXX.		
4d	When a permit is Greenpoint or LEED energy rated, third-party inspections by a pre-Certified Rater must be also be completed. City inspections are not a substitute for the Certified Rater's inspections and approvals.		
<b>Additional Permits</b>			
5a	Separate permits (OB) are required to reserve curbside parking or to obstruct the sidewalk or street in any way (scaffolding, pedestrian canopy, construction fencing, material stock piles, debris dumpsters, traffic lane closure, etc.).		
5b	Separate Fire Prevention Bureau permits are required for fire sprinkler and fire alarm systems.		
5c	Separate permits (X, SL, CGS) are required for excavation and repair work in the Public Right-of-Way (sidewalk, curb, gutter, driveway approach, sewer lateral, water and gas piping, storm drain, etc.).		

BOUZOS0000031



INSPECTOR NOTES ONLY	
date sign	PLUMBING
	12.22.16 U/G DWV FOR SPACE #1 REPAIRS OK
	12/29/16 - in Ground DWV on MAIL side FOR LAUNDRY (existing) OK TO COVER LAUNDRY PIPING IN GROUND. W/X
	2/1/17 - DWV UNDERPASS AND IN-WALL FOR 2ND & 3RD FLOOR APARTMENTS #3 AND #7 - DWV ONLY - H2O TO COME. SHOWN FOR TESTS TO COME
	DWV OK PENDING FIRE STOP AT FLOOR. W/X
	2/7/17 - in wall H2O TESTED FOR 2ND & 3RD FLOOR LIVING UNIT #3 AND #7 - GAS & H2O IN KITCHENS TO COME W/TEST. WALLS OK AT BATHROOMS & AREAS LESS KITCHEN. W/X
	1ST FLOOR SPACE & UNIT #3 AND #7 OK TO COVER W/X.
date sign	MECHANICAL 5/1/17 - need protection for H2O AT CHAIRS / GAS TEST OK'D W/X.
	2/7/17 - Rough mechanical Bath exhaust good for #3 AND #7
	2ND & 3RD FLOOR - Kitchen exhaust to come. COVER AT BATHROOMS OK PENDING BLDG W/X
	2/22/17 - 1ST FLOOR SPACE, UNIT #3 AND #7 OK TO COVER W/X
	5/1/17 - Final mech ok w/x
date sign	INFRA STRUCTURE
date sign	RIGHT-OF-WAY
date sign	GRADING
date sign	C6 & EROSION CNTRL/ BLIGHT & DUST/ CONSTRUCTION HOURS & NOISE/ PARKING & TRAFFIC CNTRL/ CREEK & TREE PROTECT'N
date sign	ZONING

→ 18 Apr 17 mapsize drawn, W/X, since future piping thru future OK KM  
4.58

BOUZOS0000032

INSPECTOR NOTES ONLY	
date	BUILDING
sign	
12-22-16	OK TO POOR FORM/GRADE BOUNDS, MOMENT FRAME & COLUMN SPREAD FOOTING INCLUDING BOLTS AT B LINES 2 TO 5 LINES
1-4-17	OK TO POOR AT TENANT SPACE #1 (AND LINES BETWEEN 2 & 5 LINES)
1-18-17	Level One tenant space 1, Level 2 units 2 & 3 Special Inspection OK, AB, #Ds, 1.1.1 collector OK
1-19-17	TIC string wall & collector @ front wall LINE A 1/4-5 ROCK WOOL OK TO COVER WMB
1-27-17	2nd floor apartment 2-3 INSULATION IN SHORE WALLS OK TO COLUMN (SHORE INSULATION), FRAME AND TRANSFER AT WALL ON 2 LINE. ATOR IS OK TO SHORE WALL
2-1-17	INSULATION TAIL A 1/2-4.1 GIA IN UNITS TO 2 & 3 WMB
2-6-17	RC IN UNIT #2 ABOVE DE
2-7-17	SHORE ROCK UNIT 2 OK. FRAMED UNIT 3-7 OK TO INSULATE & PLO.
2-15-17	Units 3 & 7 RC & insul OK to LOW 12-10
2-17-17	SHORE ROCK AND SHORE WALLS AT UNITS 3 AND 7 OK SUBJECT TO PAINT TESTS.
2-27-17	FRAME SHORE AT TENANT SPACE #1 OK TO SHORE ROCK THE WALLS & MET. CEILING AND INSULATION & PLO. B TO E (WMB) CEILING
3-6-17	INSULATION SET AT STORE "A" OK TO SHORE ROCK SHORE WALL AT 1/4-5 (E) OK TO SHORE WALL
3-6-17	BR. Unit 4
2-19-17	WOMB. 107 SHORE WALL FOOTINGS AND CEILING FRAME & BLOCKING/TRANSFER OK TO POOR AND COLUMN (ISOLATE)
4-18-17	FOOTING 52.4 204 line B & C OK to paint
5-1-17	NEED PLUMB & ELECT FINALS, SIGN POSTCOMES AND ENTRY FOR BLDG. PLUMB AND PSL, CDSR & FINITE LECTIC OF SPEC. INSR
date	ELECTRICAL 12-28-16
sign	
12-28-16	Underground boxes and 1 stub up OK. PM photo 1 PM
1-26-17	ROUGH OF UNIT 2. SHORE WALLS OF UNIT 3 GATE
2-7-17	Units 3 & 7 Rough OK. EM
5-1-17	FOR FINAL: AFCT FOR RECEPTACLES & LIGHTS. <del>SALEM</del> FOR UNITS 2, 3, & 7. STORE FINAL OK SALEM

BOUZOS0000033



INSPECTOR NOTES ONLY	
date sign	PLUMBING
	12.22.16 U/G DWV FOR SPACE #1 PARTITION OK
	12/29/16 - In Ground DWV on MAIL side FOR LAUNDRY (EXISTING) OK TO COVER LAUNDRY PIPES IN GROUND. Wxm.
	2/1/17 - DWV UNDERPASS AND IN-WALL FOR 2ND & 3RD FLOOR APARTMENTS #3 AND #7 - DWV ONLY - H2O TO COME, SHOW FOR TESTS TO COME
	DWV OK PENDING FIRE STOP AT RISER. Wxm.
	2/7/17 - In wall H2O TESTED FOR 2ND & 3RD FLOOR LIVING UNIT #3 AND #7 - GAS & H2O IN KITCHENS TO COME W/TEST. WALLS OK AT BATHROOMS & AREAS LESS KITCHEN. Wxm.
	1ST FLOOR SPACE & UNIT #3 AND #7 OK TO COVER Wxm.
date sign	MECHANICAL
	5/1/17 - need protection for H2O AT CHAIRS / GAS TEST OK'd Wxm.
	2/7/17 - Rough mechanical Bath exhaust Good FOR #3 AND #7 2ND & 3RD FLOOR - Kitchen exhaust to come. COVER AT BATHROOMS OK PENDING BLDG Wxm.
	2/22/17 - 1ST FLOOR SPACE, unit #3 AND #7 OK TO COVER Wxm.
	5/1/17 - Final mech ok Wxm.
date sign	INFRA STRUCTURE
date sign	RIGHT-OF-WAY
date sign	GRADING
date sign	C6 & EROSION CNTRL/ BLIGHT & DUST/ CONSTRUCTION HOURS & NOISE/ PARKING & TRAFFIC CNTRL/ CREEK & TREE PROTECT'N
date sign	ZONING

→ 18 Apr 17 maxsimc drain, vent, sink future piping thru building OK KM  
4.18

BOUZOS0000034



1	FOUNDATION Major Inspection	2	FIRST FLOOR Major Inspection	3	FRAME Major Inspection	4	FINAL Major Inspection	5	SITE
ELECTRICAL		ELECTRICAL		ELECTRICAL		ELECTRICAL		PRE-CONSTRUCTION	
E 10	CONSTRUCTION POWER	E 20	UNDERFLOOR	E 30	SUBPANEL/FEEDER	E 40	SMOKE&CO ALARMS	S 50A	PRE-CON MEETING
E 11	UNDERFLOOR	E 21	CABLE PROTECTION	E 31	WALLS	E 41	EQUIPMENT/DEVICES	S 50B	OBSTRUCT/ENCROACH
E 12	UNDERGROUND/CONDUIT/CABLE	E 22	EXTERIOR WRNG	E 32	BOX MAKE-UP	E 42	UTILITY RELEASE/TRANSFORMER	S 50C	SURVEY/ELEVATION
E 13	SINGLE SERVICE			E 33	SUSPENDED CELNG	E 43	ENERGY/CAL GREEN	S 50D	GRADING
E 14	SERVICE RACEWAY			E 34	FRAME	E 44	FINAL ELECTRICAL	S 50E	CREEK PROTECTION
PLUMBING		PLUMBING		PLUMBING		PLUMBING		S 50F	TREE PROTECTION
P 10	UNDERGROUND	P 20	UNDERFLOOR	P 30	DWV	P 40	ROOF DRAINS	S 50G	VEGETATION CLEARING
P 11	BACKWATER VALVE	P 21	DRAINS (FRE/CONDEN/MISC)	P 31	PAS	P 41	GAS TEST	S 50H	DUST & EROSION CONTROL
P 12	INTERCEPTOR (SO)	P 22	FLOOR RECEPTORS	P 32	WATER PPG/	P 42	UTILITY RELEASE	S 50J	C&RAN WATER RUNOFF
P 13	INTERCEPTOR (GREASE)			P 33	TUB/	P 43A	ENERGY CODE/CAL GREEN	S 50K	EXCAVATION SHORNG
				P 34	BACKFLOW DEVICES	P 44	CHLORINATION/SIREPORTS	S 50L	TRAFFIC CONTROL & PARKING
				P 35	FRAME	P 45	SIREPORTS	S 50M	BLIGHT/NOSE/TOILET
MECHANICAL		MECHANICAL		MECHANICAL		MECHANICAL		INFRASTRUCTURE	
M 10	UNDERGROUND	M 20	UNDERFLOOR DUCTS	M 30	SUSPEND CELNG/VAV/COLS	M 40	REGISTERS/EQUIPMENT	PZ 50	SEWER/BACKWATER
M 11	RADIANT/COLS	M 21	RADIANT/COLS	M 31	DAMPEN (FRE, CELNG, SMOKE)	M 41	ROOF ACCESS/GUARDS	PZ 51	STORM DRAIN
				M 32	MUAR/OUTDOOR AR	M 42	ENERGY COMPLY FORMS	PZ 52	DRAINAGE
				M 33	DUCT (TYPE HOOD)	M 43	CAL GREEN	PZ 53	HARDSCAPE
				M 34	DETECTORS (DUCT, CO)	M 44	SIREPORTS (EQ, BALANCE)	PZ 54	FRE ACCESS
				M 35	EXHAUST DUCTS	M 45	FINAL MECHANICAL	PZ 55	C3 FACILITY
				M 36	FRAME	M 46	FINAL MECHANICAL	PZ 56	FINAL INFRASTR
BUILDING		BUILDING		BUILDING		BUILDING		GRADING	
B 10	SURVEY/STAKNG	B 20	GARAGE PAD ELEVATION	B 30	ROOF FRAMNG ANALNG	B 40	DECK/RETAN WALL	GR 50	SUBGRADE
B 11	SETBACKS	B 21	FRST FLOOR ELEVATION	B 31	ZONNG ROUGH	B 41	ZONNG CONDITIONS	GR 51	PAD
B 12	SPNSPECT REPORT	B 22	SPNSPECT REPORT	B 32	SPNSPECT REPORT	B 42	SPNSPECT REPORT	GR 52	SPNSPECT REPORT
B 13	PERS	B 23	ACCESSBLTY	B 33	FRERATED ASSEMBLY	B 43	SIGNAGE	GR 56	FINAL GRADING
B 14	FOOTNG/ GRADE BEAM			B 34	SHAFT CONSTRUCTION	B 44	ACCESSBLTY	RIGHT OF WAY	
B 15	EMBEDMENTS			B 35	SHEAR WALL BRACNG	B 45	ENERGY/HERS (FORMS, REPORT)	PX 50	SDEWALK/ DRIVEWAY
				B 36	SUSPENDED CELNG	B 46	GPR COMPLANCE	PX 51	EBM UD LATERAL CERTIFICATION
B 16	SLAB FLOOR/ VAPOR BARRER	B 24	FLOOR FRAMNG	B 37	FLOOR & WALL FRAMNG	B 47	SMOKE & CO ALARMS	PX 56	FINAL ROW
B 17	WPPROTECTION & DRAINAGE	B 25	INSULATION	B 38	INSULATION	B 48	RECYCLNG CDSR	6	FIRE MARSHALL
B 18	MASONRY WALLS			B 39	LATH/EXTERIOR COVERNG			FM 50	FRES PRNKLER
				B 40	WP MEMBRANE			FM 56	FINAL FIRE (510) 235-305
				B 41	EGRESS/ SAFETY GLAZNG			7	PLANNING
				B 42	OK TO COVER	B 43	OK TO COVER	ZC 58	ROUGH
				B 43	TUB/ SHOWER WALL			ZC 59A	LANDSCAPE/ HARDSCAPE
				B 44	GYPSUM WALLBOARD			ZC 59B	SITE IMPROVEMENTS
				B 45	FRESAFNG	B 46	FINAL BLDG	ZC 59C	FINAL ZONING
1	FOUNDATION APPVD	2	FIRST FLOOR APPVD	3	FRAME APPVD	4	FINAL CRAFTS	9	PROJECT FINAL

BOUZOS0000035



Oakland, California 94612  
 (510) 238-3444 Inspections  
 (510) 238-2263 fax

Electrical, Plumbing, Mechanical Permit #'s: P1602825

(510) 238-3444 Inspections

Permits expire unless major inspections are approved by the City every 6 months.

Date of building permit application determines applicable standards.

Documentation needed for inspection:

- ☐ H2o Chlorination/Testing
- ☐ Backflow Device Test/Certifications
- ☐ Backwater Valve Verifications
- ☐ ASSE 1070 Valve Requirement

**DESCRIPTION OF INSPECTIONS COMPLETED:**

3/28/17 - Partial underground DWV FOR RESTROOM TOILET (1); LAV, and some DWV sleeves thru Footings - OK Given to pour Footings - Bill DWV ROUGH TO COME. NOTE # OK Given to install Hydromechanical Interceptor (No place for Gravity interceptor) was



DATE	PARTIAL INSPECTIONS PERFORMED AT	PERMIT #
	30563 <sup>rd</sup> ST	B104455
5/8/17	SOX AT SPACES B & C OK TO POUR	(S)
5/17/17	FRAME, TRANSFER CLIPS / SCREWS; FLOCKING AT UNIT #1 SIDE (G3RD ST) INCLUDING INSULATION IS OK TO SHEAR. R.R. ENGINEERS REVISION FOR PERFORATED SHEAR WALL. (S)	(S)
5/18/17	SHEAR AND STRAPS UNIT #1 OK TO COVER / SHEET ROCK SHEET ROCK INSP IS NOT REQUIRED FOR UNIT #1 (S) (S)	(S) (S)
6-2	ply w/o nailing / seismic elements for "B & C" (GR-FLOOR) (S) (S) S.I letter T/C ILEP	(S) (S)

BOUZOS0000037





TEST, SPECIAL INSPECTIONS AND OBSERVATIONS:

1. TESTS, INSPECTIONS AND OBSERVATIONS SHALL BE PROVIDED FOR ALL ITEMS AS REQUIRED BY THE CONTRACTING BIDDING CODE AND AS NOTED BELOW. CONSTRUCTION INSPECTIONS LISTED ARE IN ADDITION TO THE INSPECTIONS REQUIRED BY THE BIDDING CODE. SPECIAL INSPECTION IS NOT A SUBSTITUTE FOR INSPECTION BY THE BIDDING OFFICIAL. SPECIAL INSPECTED WORK THAT IS REJECTED OR CORRECTED ABOUT THE APPROVAL OF THE BIDDING OFFICIAL AND THE SPECIAL INSPECTOR IS SUBJECT TO REMOVAL OF FINISHING.
2. REPAIRS:
  - a. THE OWNER SHALL BE RESPONSIBLE FOR RETAINING AN INDEPENDENT TESTING AND INSPECTION LABORATORY TO PERFORM ALL REQUIRED TESTING AND INSPECTIONS.
  - b. THE CONTRACTOR SHALL BE RESPONSIBLE FOR PROVIDING THE TESTING AND INSPECTION LABORATORY WITH CONSTRUCTION SCHEDULES TO ENSURE PROPER COORDINATION OF WORK.
  - c. INSPECTIONS: THE CONTRACTOR SHALL NOTIFY THE STRUCTURAL ENGINEER OR INSPECTOR A MINIMUM OF 48 HOURS (EXCLUDING WEEKEND DAYS) PRIOR TO THE TIME OF A REQUIRED INSPECTION.
3. SPECIAL INSPECTION/TEST/INSPECTION REQUIREMENTS:
  - a. INSPECTIONS PERFORMED BY THE INSPECTOR AND ORDERED BY A CUSTOMER REGISTERED CIVIL ENGINEER (LIMITED TO THE BIDDING OFFICIAL AND THE ARCHITECT) OR UNDERWRITERS SHALL BE SUBJECT TO THE IMMEDIATE ATTENTION OF THE CONTRACTOR FOR CORRECTION, THEN, IF NOT CORRECTED, TO THE BIDDING OFFICIAL AND THE ARCHITECT.
  - b. THE SPECIAL INSPECTION IS TO BE (CONTINUOUS/PERIODIC) DURING THE PERFORMANCE OF THE WORK (ONCE/EVERYONE SPECIFIED).
  - c. CORRECTIONS INSPECTED MUST BE CERTIFIED BY THE BIDDING OFFICIAL TO PERFORM THE TYPES OF INSPECTIONS SPECIFIED.
4. THE FOLLOWING SPECIFIED TIME SHALL BE OBSERVED BY AN APPROVED TESTING AND INSPECTION LABORATORY:
  - a. TESTING OF CONCRETE (IN PLACE) AND JOINTS
  - b. MAKING BOLTS, HOODING AND OTHER FASTENING OF COMPONENTS WITHIN THE FORMS:
    - i. WOOD SHEAR WALLS
    - ii. TIEBARS
    - iii. COLLECTORS
    - iv. HOLDINGS

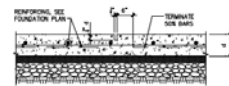
END SAFETY NOTES

1. MAINTAIN EXISTING EXITS DURING AND AFTER THE CONSTRUCTION.
2. MAINTAIN FIRE RATING IN AREAS OF WORK.
3. CLOSE ALL ENCLOSURES.
4. MAINTAIN EXISTING SPRINKLER SYSTEM, IF ANY.

[illegible]

1. STRUCTURAL PM OR USE OF BRACING SHALL BE AFTER STRUCTURE 1.
2. DO NOT LOCATE PLWOOD JOINTS ON THE SAME STUD PLWOOD OCCURS ON BOTH SIDES.
3. PROVIDE 2 ROWS OF PLWOOD JOINTS NAILING END FULL HEIGHT OF ALL PORTS WITH HOLDING.
4. NAILING AT PLWOOD PANEL, JENTS AND AT SL, PLWOOD BE STAGGERED.
5. USE 2x6 SILL PILES AT ALL BEAM WALLS AND EXTERIOR WALLS.
6. STAGGER SILL PILE STUDS, PROVIDE AS NECESSARY TO AVOID ROW SPLITTING.
7. USE CIRCLED ANCHORS WITH 1" MINIMUM EXTENSION OF 4" FROM STUDS AND JOINTS.
8. ALL FASTENERS AND HARDWARE IN CONTACT WITH SL, PL, SILL OR SHALL BE HOT GALVANIZED. USE CORROSION AND NAILING NOTES ON SHEET 5.
9. ANCHOR BOLTS SHALL HAVE A MINIMUM 3"x7.5"x12" SIZES UNDER NOTES.

**PLYWOOD SHEAR WALL SCHEDULE**



NOTES:

1. CONTINUOUS SAREBIT CONTROL JOINT-OUT SLAB IMMEDIATELY AFTER INITIAL CONCRETE SET AND BEFORE FINAL CURING.
2. CONTINUOUS SAREBIT JOINT WITH PROTRUSION STOP IN FRESH CONCRETE.
3. FILL GROOVE W/ JOINT FILLER PLASTIC.
4. PROTRUSION SHALL BE MADE SLAB IS UNDER PERMANENT TEMPERATURE CONTROL, WHEN POSSIBLE.
5. PLACE @ 304 CM MAX OR AS SHOWN ON FOUNDATION PLAN.

CONTROL JOINT (C) CONC (18) 18  
SLAB ON GRADE. NTS 51/2

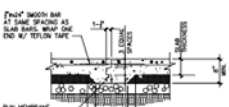
2x or 3x CRIPPLE @ DOOR OR WINDOW OPENING - COUNTING HOLDING BOLT HEAD OR NUT AS REQUIRED

FLOOR LEVEL

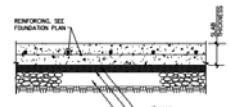
SOLID BLOOMING

1.5'

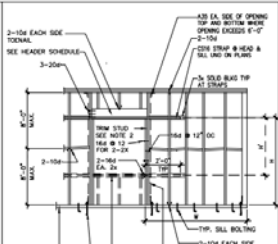
1.5'



CONSTRUCTION JOINT (CJ) 19



SLAB UNDERLAYMENT



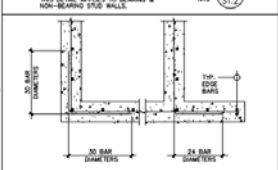
2-2x WINDOW SILL

NOTES:

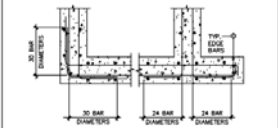
1. KEEP H/W RATIO TO 2 MAXIMUM. REPORT TO ENGINEER OTHERWISE.
2. USE 2-2x TRIM STUDS WHERE SPAN EXCEEDS 4'-0" AND 4x WHERE SPAN EXCEEDS 8'-0".

HEADER SCHEDULE				
SPAN	3'-0" MAX.	4'-0" MAX.	6'-0" MAX.	OVER 6'-0"
2x4 STUDS	2-2x4 OR 4x4	2-2x8 OR 4x8	4x8	SEE SPECIFIC DETAILS ON DRAWINGS
2x6 STUDS	3-2x6 OR 4x6 FLAT	3-2x6 OR 6x8	3-2x8 OR 6x8	

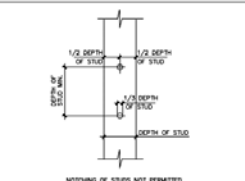
TYP STUD WALL FRAMING



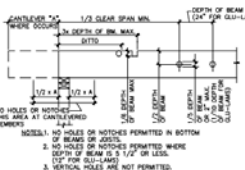
SINGLE CURTAIN  
TYP REINFORCEMENT AT WALL (11)



DOUBLE CURTAIN  
TYP REINFORCEMENT AT (12)



HOLES IN STUDS



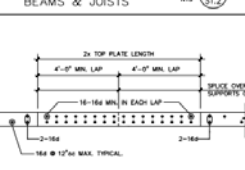
4. APPLY PRESERVATIVE TO HOLES IN PRESSURE TREATED WOOD.

5. THIS DETAIL APPLIES TO SOLID SAWN & GLU-LAM WOOD MEMBERS ONLY. FOR OTHER MANUFACTURED WOOD PRODUCTS, NOTCH & DRILL PER MANUFACTURER'S PUBLISHED INSTRUCTIONS & LIMITATIONS.

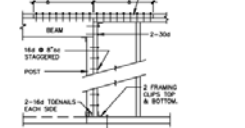
**HOLES & NOTCHES IN**

BEAM & JOIST

NIS 04 5

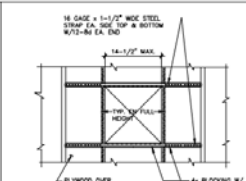


### PLAN

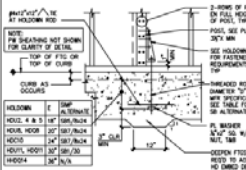


ELEVATION  
WHERE BEAM IS WITHIN WALL

POST & BEAM CONNECTIONS (8)



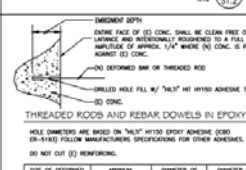
TYP MECH'L & ELECT'L PANEL (1)  
ODIC IN DIM SCHED WALLS (S1.2)



NOTES: 1. WIDEN THE FTG TO 24" AT THE ROD HOLDOWN LOCATION.  
2. WHEN USING SIMPSON SB BOLTS, THE ROD CAN BE ENTIRELY WITHIN 8" OF STEINWALL WHERE AT LEAST 2'-0" OF STEM EXTENDS ON OTHER SIDE OF

TYPICAL HOLDOWN DETAIL

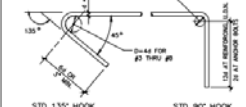
REV. 2 OF 3



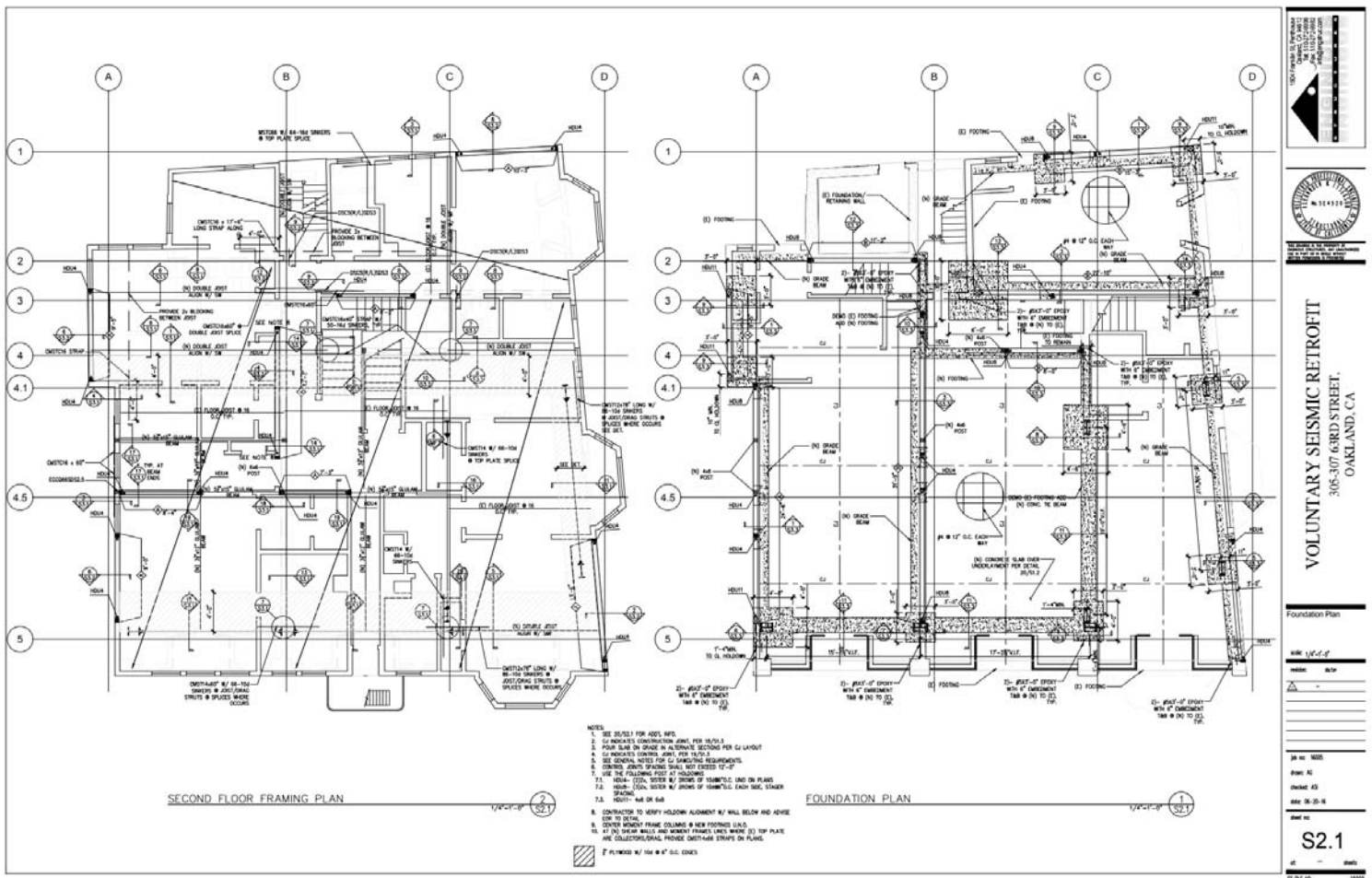
SIZE OF DEFORMED BAR OR THREADED ROD	MINIMUM EMBEDMENT DEPTH - U.S.A.	DIAMETER OF DRILLED HOLE FOR RODS	DIAMETER DRILLED H FOR REB
1/2" OR #4	4-1/2"	5/16"	5/8"
3/8" OR #5	5-5/8"	11/16"	3/4"
1/2" OR #6	7-1/2"	13/16"	1"

REBAR DOWELS OR THREADED ROD IN (E) CONC.	3 \$1.2
--	------------

D=64 FOR #3 THRU #8  
(FOR STIRRUPS & COLUMN  
TIES, D=48 WITH EXTENSION  
OF 64 ON 3" MIN.)

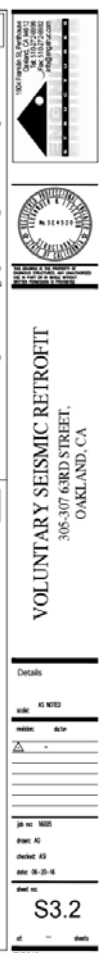


TYP REINFORCING BAR AND (4)

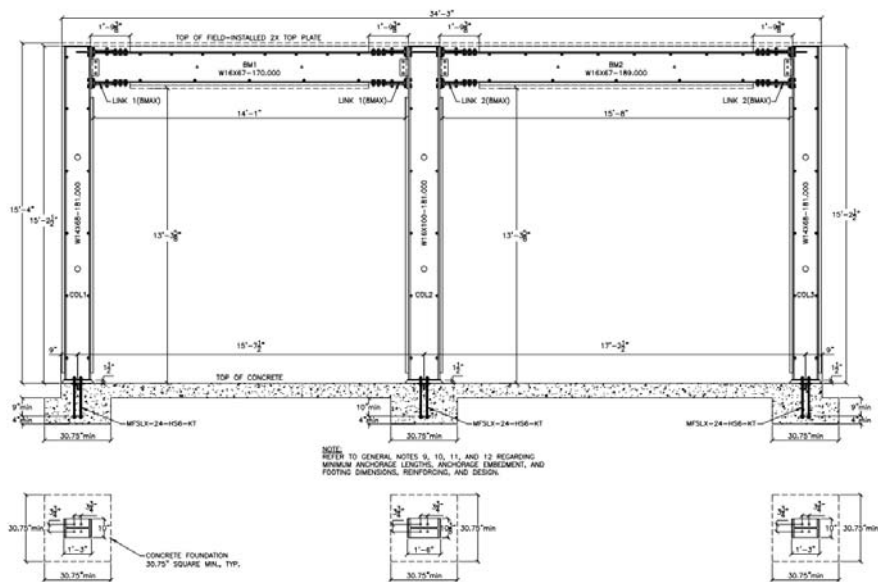




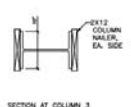
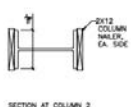
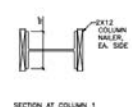




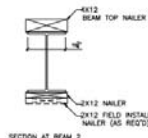
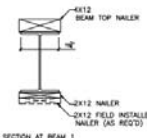




FRAME ELEVATION  
SCALE: 1/2" = 1'-0"



COLUMN SECTION  
SCALE: 1" = 1'-0"



BEAM SECTION  
SCALE: 1" = 1'-0"

1. SIMPSON STRONG-TIE® STRONG FRAME® and the YIELD-LINK™ STRUCTURAL FUSE are PROTECTED UNDER US PATENT NUMBER 8,001,734 B2 AND MUST BE SUPPLIED OR LICENSED THROUGH SIMPSON STRONG-TIE.
  2. STRONG FRAME® SPECIAL MOMENT FRAME IS MANUFACTURED AND TRADEMARKED BY SIMPSON STRONG-TIE COMPANY INC., HOME OFFICE: 3926 W. LAF PISTON BLVD., PLEASANTON, CA 94588 TEL: (925) 999-5099, FAX: (925) 947-1587, SIMPSON STRONG-TIE COMPANY INC. IS AN ISO 9001 REGISTERED COMPANY.
  3. DESIGN FOR STRONG FRAME MOMENT FRAMES ARE IN ACCORDANCE WITH THE FOLLOWING:
    - 2012 AND 2009 INTERNATIONAL BUILDING CODE
    - AISC SPECIFICATION FOR STRUCTURAL STEEL BUILDINGS (AISC 360-10, 360-10)
    - AISC DESIGN PROVISIONS (AISC 341-10, 341-10)
    - AISC SPECIFICATION FOR STRUCTURAL JOINTS USING ASTM A572 OR A572M BOLTS
    - BUILDING CODE REQUIREMENTS FOR STRUCTURAL CONCRETE (ACI 318-11)
  4. USE OF THIS PRODUCT IS SUBJECT TO THE APPROVAL OF THE LOCAL BUILDING DEPARTMENT.
  5. THIS PRODUCT IS PART OF THE GENERAL LATERAL FORCE RESISTING SYSTEM OF THE STRUCTURE. DESIGN OF THE BUILDING'S LATERAL FORCE RESISTING SYSTEM, INCLUDING THE LOAD PATH TO TRANSFER LATERAL FORCES FROM THE STRUCTURE TO THE GROUND, IS THE RESPONSIBILITY OF THE DESIGNER.
  6. THE DESIGNER MUST SPECIFY THE REQUIRED COMPONENTS OF THE COMPLETE LOAD TRANSFER PATH INCLUDING DIAPHRAGMS, SHEAR TRANSFER, CHORDS AND CONNECTIONS AND FOUNDATIONS.
  7. ALL CONNECTED MEMBERS AND RELATED ELEMENTS MUST BE DESIGNED BY THE DESIGNER.
  8. DESIGNER IS PERMITTED TO MODIFY DETAILS FOR SPECIFIC CONDITIONS. SEE SIMPSON NOTES ON SHEET SMF-1.
  9. ANCHORAGE LENGTHS PROVIDED ARE SHOWN FOR MINIMUM EMBEDMENT INTO FOOTING BASED ON TENSION ANCHORAGE DESIGN ONLY. ACTUAL LENGTH OF ANCHORAGE SHALL BE PER DESIGNER'S SPECIFICATIONS AND PRELIMINARY SPECIFICATIONS.
  10. PRE-ASSEMBLED ANCHORAGE KITS PROVIDED BY SIMPSON (WFL OR WFL-1) SHALL BE SPECIFIED BY DESIGNER AND SHOULD INCLUDE ANCHORAGE, TYPE, ROD SIZE, AND LENGTH OF ASSEMBLY. REFER TO DETAIL 2 FOR AVAILABLE LENGTHS OF FULLY ASSEMBLED ANCHORAGE ASSEMBLIES. EXTENSION KITS IN 30" LENGTHS ARE AVAILABLE FOR USE IN STEMMALLS OR APPLICATIONS WHERE DEEPER EMBEDMENT IS REQUIRED.
  11. FOOTING DIMENSIONS SHOWN ARE THE MINIMUM REQUIRED FOR CONCRETE ANCHORAGE REQUIREMENTS ONLY. THE DESIGNER MUST DETERMINE REQUIRED FOOTING SIZE AND REINFORCE FOR OTHER DESIGN LIMITS, SUCH AS FOUNDATION SLOAR AND RETAINING, SOIL BEARING SHEAR TRANSFER, AND FRAME STABILITY / OVERTURNING.
  12. DESIGNER MUST DETAIL ACTUAL FOOTING / GRADE BEAM SIZE AND REINFORCING.
  13. HOLES IN BASE PLATES ARE OVER-SIZED FOR EJECTION TOLERANCE. DESIGNER MUST EVALUATE EFFECTS OF OVER-SIZED HOLES AND PROVIDE PLATE REINFORCE WITH STRONG-TIE HOLES WELDED TO BASE PLATE OR REQUEST BASE PLATES WITH STANDARD SIZE HOLES (WHERE REQUIRED).
  14. THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS, CONDITIONS, ELEVATIONS, ETC. PRIOR TO INSTALLATION OF ANY COMPONENTS FOR THE STEEL STRONG FRAME SYSTEM. IF ANY DISCREPANCIES ARE FOUND, THEY SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGNER FOR CLARIFICATION PRIOR TO CONSTRUCTION.
  15. INSTALLATION OF PRODUCT SHALL BE DONE IN CONFORMANCE WITH THESE DRAWINGS AND ICC ESR-2802. THE PERFORMANCE OF WELDED PRODUCTS OR ALTERED INSTALLATION PROCEDURES ARE THE SOLE RESPONSIBILITY OF THE DESIGNER.
  16. SIMPSON STRONG-TIE® COMPANY, INC. RESERVES THE RIGHT TO CHANGE SPECIFICATIONS, DESIGN, AND MODELS WITHOUT NOTICE OR LIABILITY FOR SUCH CHANGES.
  17. ALL MATERIAL CALLED OUT IS SIMPSON STRONG-TIE®.
- MATERIALS:**
1. BASE PLATES: ASTM A36 OR 50, OR ASTM A572 OR 50, OR ASTM A1011 1045 US, OR 50
  2. W-SECTIONS: (NOT ROLLED SECTIONS) ASTM A992
  3. LINK TO COLUMN FLANGE HIGH STRENGTH BOLTS: ASTM A325, TYPE 1 (BORG-TIGHT)
  4. BWP TO BEAM FLANGE AND SHEAR PLATE TO BEAM WEB HIGH STRENGTH BOLTS: ASTM A325, TYPE 1 (BORG-TIGHT)
  5. LINK TO BEAM FLANGE HIGH STRENGTH BOLTS: ASTM A325, TYPE 1 (BORG-TIGHT) OR TYPE 1 (BORG-TIGHT) (SHEAR-TIGHT)
  6. BEAM TOP FLANGE WOOD NAILER: ASTM A507 OR A 4
  7. CARBON STEEL: ASTM A507 OR A 4
  8. ANCHOR RODS: ASTM A193 OR 50 OR A36 (WFL AND WFL-1) OR A507 (WFL-1)
  9. GROUT: ASTM C1107, MINIMUM 4,000 PSI COMPRESSIVE STRENGTH
- INSTALLATION AND FIELD MODIFICATIONS:**
- THESE GENERAL INSTRUCTIONS FOR THE INSTALLER ARE PROVIDED TO ENSURE PROPER SELECTION AND INSTALLATION OF SIMPSON STRONG-TIE COMPANY INC. PRODUCTS AND MUST BE FOLLOWED CAREFULLY. THESE GENERAL INSTRUCTIONS ARE IN ADDITION TO THE SPECIFIC INSTALLATION INSTRUCTIONS AND NOTES PROVIDED FOR EACH PARTICULAR PRODUCT, ALL OF WHICH SHOULD BE CONSULTED PRIOR TO AND DURING INSTALLATION OF SIMPSON STRONG-TIE COMPANY INC. PRODUCTS.
1. PROPER PRODUCT INSTALLATION REQUIRES CAREFUL ATTENTION TO ALL NOTES AND INSTRUCTIONS. IN ADDITION TO THE NOTES, WARNINGS, AND INSTRUCTIONS PROVIDED IN THE CATALOG, INSTALLERS, DESIGNERS, ENGINEERS AND CONSUMERS SHOULD CONSULT THE SIMPSON STRONG-TIE COMPANY INC. WEBSITE AT WWW.SIMPSONSTRONGTIE.COM TO OBTAIN ADDITIONAL INFORMATION FOR INSTALLATION, SPECIFICATIONS, CODE REPORTS, TECHNICAL FLUERS AND BULLETINS, FAQs, AND OTHER PERTINENT INFORMATION.
  2. PROVIDE TEMPORARY BRACING OF STRONG FRAME AS REQUIRED UNTIL FRAME IS TIED INTO THE FLOOR OR ROOF FRAMING ABOVE.
  3. USE PROPER SAFETY AND INSTALLATION EQUIPMENT DURING INSTALLATION OF STRONG FRAME.
  4. ALL SPECIFIED FASTENERS MUST BE INSTALLED ACCORDING TO THE INSTRUCTIONS PROVIDED IN THE CATALOG, CODE REPORTS, AND INSTALLATION DETAILS. INCORRECT FASTENER QUANTITY, SIZE, PLACEMENT, TYPE, MATERIAL, OR FINISH MAY CAUSE THE CONNECTION TO FAIL.
  5. FULL ALL FASTENERS SHOULD BE INSTALLED IN ACCORDANCE WITH THE SPECIFIED PRODUCT. INSTALL ALL FASTENERS BEFORE LOADING THE FRAME. SOME PRE-INSTALLED ITEMS MAY NOT USE ALL HOLES.
  6. NUTS SHALL BE INSTALLED SUCH THAT THE END OF THE THREADED ROD OR BOLT IS AT LEAST FLUSH WITH THE TOP OF THE NUT.
  7. REFER TO DETAIL 12/2013 FOR ALLOWABLE HOLE OPENINGS IN BEAM AND COLUMNS.
  8. WELDING SHALL BE IN ACCORDANCE WITH AWS D1.1 AND AWS D1.8 (AS APPLICABLE FOR SECTIONS). WELDS SHALL BE SPECIFIED BY THE DESIGNER. PROVIDE WELDING SPECIAL INSPECTION AS REQUIRED BY THE LOCAL BUILDING DEPARTMENT.
- NOTES:**
1. WELDING OF FRAME MEMBERS AND APPLICABLE WELDING SPECIAL INSPECTIONS REQUIRED BY IRC SECTION 1707 ARE PERFORMED ON THE PREMISES OF A FABRICATOR REGISTERED AND APPROVED IN ACCORDANCE WITH THE REQUIREMENTS OF IRC SECTION 1704.2.2 FOR FABRICATOR APPROVAL.
  2. PRE-INSTALLATION VERIFICATION TESTING IS PERFORMED ON HIGH-STRENGTH FASTENER ASSEMBLIES.
  3. INSPECTION REQUIREMENTS OUTSIDE THE SHOP MANUFACTURING AND ASSEMBLY PROCESS SHALL BE IN ACCORDANCE WITH THE LOCAL CODE, BASED ON BUILDING OCCUPANCY, CONCRETE STRENGTH, REQUIREMENTS OF THE LOCAL BUILDING OFFICIAL, AND OTHER CONSIDERATIONS AND SHALL BE SPECIFIED BY THE DESIGNER.
  4. GROUTING UNDER COLUMN BASE PLATE MAY REQUIRE SPECIAL INSPECTION. CONTACT THE LOCAL BUILDING DEPARTMENT FOR COMPLIANCE REQUIREMENTS.
  5. CONTACT SIMPSON STRONG-TIE® AT 800-999-5099 TO REQUEST PRE-INSTALLATION TESTING, WELDING REPORTS, MILL CERTS, ETC. WHEN REQUIRED.

GENERAL NOTES

MODEL NO.	ROD SIZE & NUMBER	LENGTH (in)	L <sub>d</sub> (in)	BEARING PLATE (in)
<b>ALL SMF COLUMNS</b>				
WFL-14-HS-KT	4 - 1/2"	14	48	1/2" x 16" x 16"
WFL-14-HS-KT	4 - 1/2"	14	48	1/2" x 16" x 16"
WFL-18-HS-KT	4 - 1/2"	18	126	1/2" x 20" x 20"
WFL-18-HS-KT	4 - 1/2"	18	126	1/2" x 20" x 20"
WFL-24-HS-KT	4 - 1/2"	24	186	1/2" x 24" x 24"
WFL-24-HS-KT	4 - 1/2"	24	186	1/2" x 24" x 24"
WFL-30-HS-KT	4 - 1/2"	30	246	1/2" x 30" x 30"
WFL-30-HS-KT	4 - 1/2"	30	246	1/2" x 30" x 30"
WFL-36-HS-KT	4 - 1/2"	36	306	1/2" x 36" x 36"
WFL-36-HS-KT	4 - 1/2"	36	306	1/2" x 36" x 36"

THE WFL ANCHOR ASSEMBLIES HAVE BEEN ENGINEERED TO PROVIDE A COMPLETE ANCHORAGE SOLUTION MEETING THE 2009 AND 2012 INTERNATIONAL BUILDING CODE REQUIREMENTS FOR BOTH TENSION AND SHEAR.

ANCHOR RODS AND THE WFL-1/2" TEMPLATE ARE INCLUDED PRE-ATTACHED WITH THE ASSEMBLY.

INSPECTION IS EASY. THE HEAD IS STAMPED WITH A "NO EQUAL" SYMBOL FOR IDENTIFICATION, BOLT LENGTH, BOLT DIAMETER, AND OPTIONAL "YES" FOR HIGH STRENGTH IF SPECIFIED.

WFLX ANCHORAGE ASSEMBLIES

**SIMPSON STRONG-TIE COMPANY**  
3926 W. LAF PISTON BLVD.  
PLEASANTON, CA 94588  
TEL: (925) 999-5099  
FAX: (925) 947-1587  
WWW.SIMPSONSTRONGTIE.COM

**STRONG-FRAME®**  
FRAME ELEVATION DRAWING  
ENGINEERED DESIGN  
303 03RD STREET - MF-1

NAME: B.W.  
DATE: 05/27/2016  
SCALE: N.T.S.  
SHEET: **MF-1**

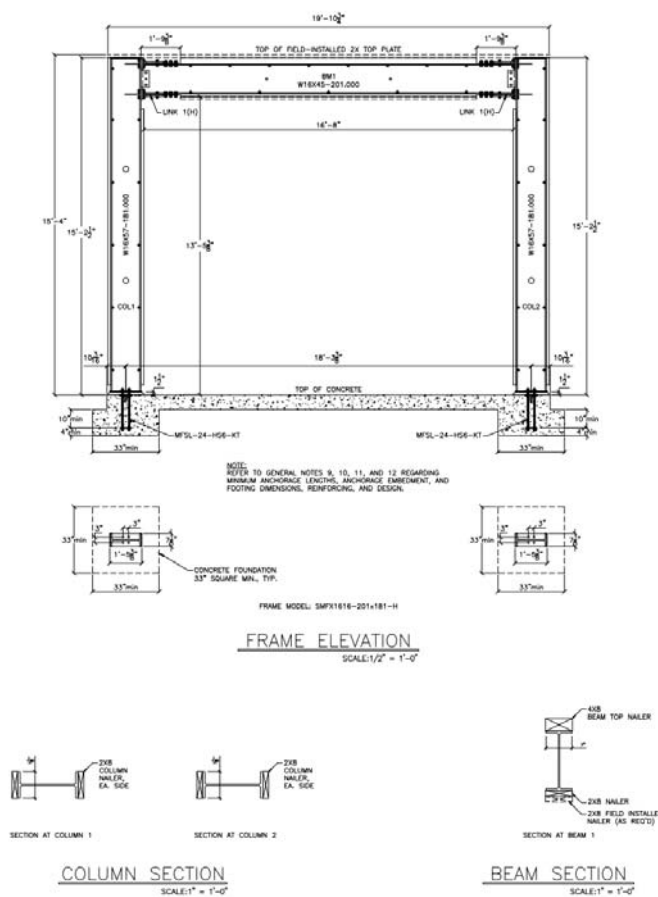
FOR HIGH STRENGTH (YES) ASTM A449

FOR HIGH STRENGTH (YES) ASTM A449

FOR HIGH STRENGTH (YES) ASTM A449



[illegible]



Simpson Strong-Tie® Strong Frame® and the Yield-Link™ structural fuse are protected under US patent number 8,001,734 B2 and must be supplied or licensed through Simpson Strong-Tie.

- GENERAL NOTES**
1. SIMPSON STRONG-TIE® STRONG FRAME® AND THE YIELD-LINK™ STRUCTURAL FUSE ARE PROTECTED UNDER US PATENT NUMBER 8,001,734 B2 AND MUST BE SUPPLIED OR LICENSED THROUGH SIMPSON STRONG-TIE.
  2. STRONG FRAME® SPECIAL MOMENT FRAME IS MANUFACTURED AND TRADENAMED BY "SIMPSON STRONG-TIE COMPANY INC." HOME OFFICE: 5556 W. LAS POSITAS BLVD., PLEASANTON, CA 94588 TEL: (800) 999-5099, FAX: (925) 847-1587. SIMPSON STRONG-TIE COMPANY INC. IS AN ISO 9001 REGISTERED COMPANY.
  3. DESIGN FOR STRONG FRAME® MOMENT FRAMES ARE IN ACCORDANCE WITH THE FOLLOWING:
    - AISC SPECIFICATION FOR STRUCTURAL STEEL BUILDINGS (AISC 360-10, 360-15, 360-16)
    - AISC DESIGN GUIDE (AISC 341-10, 341-11)
    - AISC SPECIFICATION FOR STRUCTURAL JOINTS USING ASTM A325 OR A308 BOLTS
    - BUILDING CODE REQUIREMENTS FOR STRUCTURAL CONCRETE (ACI 318-14, ACI 318-11)
  4. USE OF THIS PRODUCT IS SUBJECT TO THE APPROVAL OF THE LOCAL BUILDING DEPARTMENT.
  5. THIS PRODUCT IS PART OF THE OVERALL LATERAL FORCE RESISTING SYSTEM OF THE STRUCTURE. DESIGN OF THE BUILDING'S LATERAL FORCE RESISTING SYSTEM, INCLUDING THE LOAD PATH TO TRANSFER LATERAL FORCES FROM THE STRUCTURE TO THE GROUND, IS THE RESPONSIBILITY OF THE DESIGNER.
  6. THE DESIGNER MUST SPECIFY THE REQUIRED COMPONENTS OF THE COMPLETE LOAD TRANSFER PATH INCLUDING DIAPHRAGMS, SHEAR TRANSFER, CHORDS AND COLLECTORS AND FOUNDATIONS.
  7. ALL CONNECTED MEMBERS AND RELATED ELEMENTS SHALL BE DESIGNED BY THE DESIGNER.
  8. DESIGNER IS PERMITTED TO MODIFY DETAILS FOR SPECIFIC CONDITIONS. SEE LIMITATIONS NOTED ON SHEET 54P1.
  9. ANCHORAGE LENGTHS PROVIDED ARE FOR MINIMUM EMBEDMENT AND FOOTING BASED ON TENSION ANCHORAGE DESIGN ONLY. ACTUAL LENGTH OF ANCHORAGE SHALL BE FOR DESIGNER'S SPECIFICATIONS AND PROJECT SPECIFIC INSTALLATION REQUIREMENTS.
  10. PRE-ASSEMBLED ANCHORAGE UNITS PROVIDED BY SIMPSON (MFL OR MFL-1) SHALL BE SPECIFIED BY DESIGNER AND SHOULD INCLUDE ANCHORAGE TYPE, ROD GRADE, AND LENGTH OF ASSEMBLY. REFER TO DETAIL 2 FOR AVAILABLE LENGTHS OF FULLY ASSEMBLED ANCHORAGE ASSEMBLIES. EXTENSION AND 30" LENGTH ARE AVAILABLE FOR USE IN STEMMELS ON APPLICATIONS WHERE DEEPER EMBEDMENT IS REQUIRED.
  11. FOOTING DIMENSIONS SHOWN ARE THE MINIMUM REQUIRED FOR CONCRETE ANCHORAGE REQUIREMENTS ONLY. THE DESIGNER MUST DETERMINE REQUIRED FOOTING SIZE AND REINFORCING FOR OTHER DESIGN LIMITS, SUCH AS FOUNDATION SHEAR AND BENDING, SOIL BEARING SHEAR TRANSFER, AND FRAME STABILITY / OVERTURNING.
  12. DESIGNER MUST DETAIL ACTUAL FOOTING / GRADE BEAM SIZE AND REINFORCING.
  13. HOLES IN BASE PLATES ARE 20% OVER-SIZED FOR EJECTION TOLERANCES. DESIGNER MUST EVALUATE EFFECTS OF OVER-SIZED HOLES AND PROVIDE PLATE WAGERS WITH STANDARD-SIZE HOLES WELDED TO BASE PLATE OR REDUCED BASE PLATES WITH STANDARD SIZE HOLES WHERE REQUIRED.
  14. THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS, CONDITIONS, ELEVATIONS, ETC. PRIOR TO INSTALLATION. IF ANY DISCREPANCIES ARE FOUND, THEY SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGNER FOR CLARIFICATION PRIOR TO CONSTRUCTION.
  15. INSTALLATION OF PRODUCT SHALL BE DONE IN CONFORMANCE WITH THESE DRAWINGS AND ICC ESR-2002. THE PERFORMANCE OF MODIFIED PRODUCTS OR ALTERED INSTALLATION PROCEDURES ARE THE SOLE RESPONSIBILITY OF THE DESIGNER.
  16. SIMPSON STRONG-TIE® COMPANY, INC. RESERVES THE RIGHT TO CHANGE SPECIFICATIONS, DESIGNS, AND MODELS WITHOUT NOTICE OR LIABILITY FOR SUCH CHANGES.
  17. ALL HARDWARE CALLED OUT IS SIMPSON STRONG-TIE®.

- MATERIALS**
1. MFL-1 PLATES: ASTM A36 OR 50, ASTM A572 GR. 50, OR ASTM A1011 HS45 GR. 50
  2. W-SECTIONS (HOT ROLLED SECTIONS): ASTM A992
  3. LINE TO COLUMN FLANGE HIGH STRENGTH BOLTS: ASTM A325, TYPE 1 (SMAU-TIGHT)
  4. BWP TO BEAM FLANGE AND SHEAR PLATE TO BEAM WEB HIGH STRENGTH BOLTS: ASTM A325, TYPE 1 (SMAU-TIGHT)
  5. LINE TO BEAM FLANGE HIGH STRENGTH BOLTS: ASTM A325 OR A308 (EQUIVALENT) (PRETENSIONED)
  6. BEAM TOP FLANGE WOOD NAILER BOLTS: ASTM A307 OR A.
  7. CHARGE BOLTS: ASTM A307 OR A.
  8. ANCHOR RODS: ASTM F1554 OR 36 OR A36 (MFL, MFL-1, AND MFL-1000-LS)  
ASTM A449 (MFL-HS, MFL-HS, AND MFL-1000-HS)
  9. GROUT: ASTM C1107, MINIMUM 4,000 PSI COMPRESSIVE STRENGTH.
- INSTALLATION AND FIELD MODIFICATIONS**
- THESE GENERAL INSTRUCTIONS FOR THE INSTALLER ARE PROVIDED TO ENSURE PROPER SELECTION AND INSTALLATION OF SIMPSON STRONG-TIE COMPANY INC. PRODUCTS AND MUST BE FOLLOWED EXACTLY. THESE GENERAL INSTRUCTIONS ARE IN ADDITION TO THE SPECIFIC INSTALLATION INSTRUCTIONS AND NOTES PROVIDED FOR EACH PARTICULAR PRODUCT, ALL OF WHICH SHOULD BE CONSULTED PRIOR TO AND DURING INSTALLATION OF SIMPSON STRONG-TIE COMPANY INC. PRODUCTS.
1. PROVIDE PROPER INSTALLATION REQUIREMENTS. ATTENTION TO ALL NOTES AND INSTRUCTIONS. IN ADDITION TO THE NOTES, WARNINGS, AND INSTRUCTIONS PROVIDED IN THE CATALOG, INSTALLER, DESIGNER, ENGINEER AND CONSULTANTS SHOULD CONSULT THE SIMPSON STRONG-TIE COMPANY INC. WEBSITE AT WWW.SIMPSONSTRONGTIE.COM TO OBTAIN ADDITIONAL INFORMATION FOR INSTALLATION, SPECIFICATIONS, CODE REPORTS, TECHNICAL PLANS AND BULLETINS, FACTS AND OTHER PERTINENT INFORMATION.
  2. PROVIDE TEMPORARY DIAGONAL BRACING OF STRONG FRAME® AS REQUIRED UNTIL FRAME IS TIED INTO THE FLOOR OR ROOF FRAMING ABOVE.
  3. USE PROPER SAFETY AND INSTALLATION EQUIPMENT DURING INSTALLATION OF STRONG FRAME®.
  4. USE SPECIFIED FASTENERS MUST BE INSTALLED ACCORDING TO THE INSTRUCTIONS PROVIDED IN THE CATALOG, CODE REPORTS, AND INSTALLATION DETAILS. INCORRECT FASTENER QUANTITY, SIZE, PLACEMENT, TYPE, MATERIAL, OR FINISH MAY CAUSE THE CONNECTION TO FAIL.
  5. FILL ALL FASTENER HOLES AS SPECIFIED IN THE INSTALLATION INSTRUCTIONS FOR THE SPECIFIED PRODUCT. INSTALL ALL FASTENERS BEFORE LOADING THE FRAME. LOW PRE-INSTALLED HOLE PRE-INSTALLED HOLE PRE-INSTALLED HOLE PRE-INSTALLED HOLE PRE-INSTALLED HOLE PRE-INSTALLED HOLE.
  6. NUTS SHALL BE INSTALLED SUCH THAT THE END OF THE THREADED ROD OR BOLT IS AT LEAST FLUSH WITH THE TOP OF THE NUT.
  7. REFER TO DETAIL 12/20P3 FOR ALLOWED HOLE OPENINGS IN BEAM AND COLUMN.
  8. REFER TO DETAIL 11/20P3 FOR CONNECTION PROTECTED ZONE.
  9. WELDING SHALL BE IN ACCORDANCE WITH AWS D1.1 AND AWS D1.8 (AS APPLICABLE FOR SEISMIC) WELDS SHALL BE SPECIFIED BY THE DESIGNER. PROVIDE WELDING SPECIAL INSPECTION AS REQUIRED BY THE LOCAL BUILDING DEPARTMENT.

- NOTES**
1. WELDING OF FRAME MEMBERS AND APPLICABLE WELDING SPECIAL INSPECTIONS REQUIRED BY IRC SECTION 1707 ARE PERFORMED ON THE PREMISES OF A FABRICATOR REGISTERED AND APPROVED IN ACCORDANCE WITH THE REQUIREMENTS OF IRC SECTION 1704.2.2 FOR FABRICATOR APPROVAL.
  2. PRE-INSTALLATION INSPECTION TESTING IS PERFORMED ON HIGH-STRENGTH FASTENER ASSEMBLIES.
  3. INSPECTION REQUIREMENTS OUTSIDE THE SHOP MANUFACTURING AND ASSEMBLY PROCESS SHALL BE IN ACCORDANCE WITH THE LOCAL CODE, BASED ON BUILDING OCCUPANCY, CONCRETE STRENGTH REQUIREMENTS OF THE LOCAL BUILDING OFFICIAL, AND OTHER CONSIDERATIONS AND SHALL BE SPECIFIED BY THE DESIGNER.
  4. SHIELDING UNDER COLUMN JOINT PLATE MAY REQUIRE SPECIAL INSPECTION, CONTACT THE LOCAL BUILDING DEPARTMENT FOR COMPLIANCE REQUIREMENTS.
  5. CONTACT SIMPSON STRONG-TIE® AT 800-999-5099 TO REQUEST PRE-INSTALLATION TESTING, WELDING REPORTS, MILL CERTS, ETC. WHEN REQUIRED.

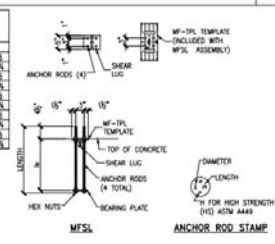
# GENERAL NOTES

MODEL NO.	ROD SIZE & NUMBER	LENGTH (in)	$l_d$ (in)	BEARING PLATE (in)
ALL MFL COLUMNS				
MFL-14-4-AT	4 - 1/2	14	48	1/2 x 18 x 18
MFL-14-1056-AT	4 - 1/2	14	48	1/2 x 18 x 18
MFL-18-4-AT	4 - 1/2	18	48	1/2 x 18 x 18
MFL-18-1056-AT	4 - 1/2	18	48	1/2 x 18 x 18
MFL-24-4-AT	4 - 1/2	24	48	1/2 x 18 x 18
MFL-24-1056-AT	4 - 1/2	24	48	1/2 x 18 x 18
MFL-30-4-AT	4 - 1/2	30	48	1/2 x 18 x 18
MFL-30-1056-AT	4 - 1/2	30	48	1/2 x 18 x 18
MFL-36-4-AT	4 - 1/2	36	48	1/2 x 18 x 18
MFL-36-1056-AT	4 - 1/2	36	48	1/2 x 18 x 18

THE MFL ANCHOR ASSEMBLIES HAVE BEEN ENGINEERED TO PROVIDE A COMPLETE ANCHORAGE SOLUTION MEETING THE 2009 AND 2012 INTERNATIONAL BUILDING CODE REQUIREMENTS FOR BOTH TENSION AND SHEAR.

ANCHOR RODS AND THE MFL-1056 TEMPLATE ARE INCLUDED PRE-ATTACHED WITH THE ASSEMBLY.

INSPECTION IS EASY. THE HEAD IS STAMPED WITH A "NO EQUAL" SYMBOL FOR IDENTIFICATION. BOLT LENGTH, BOLT DIAMETER, AND OPTIONAL "YES" FOR HIGH STRENGTH IF SPECIFIED.

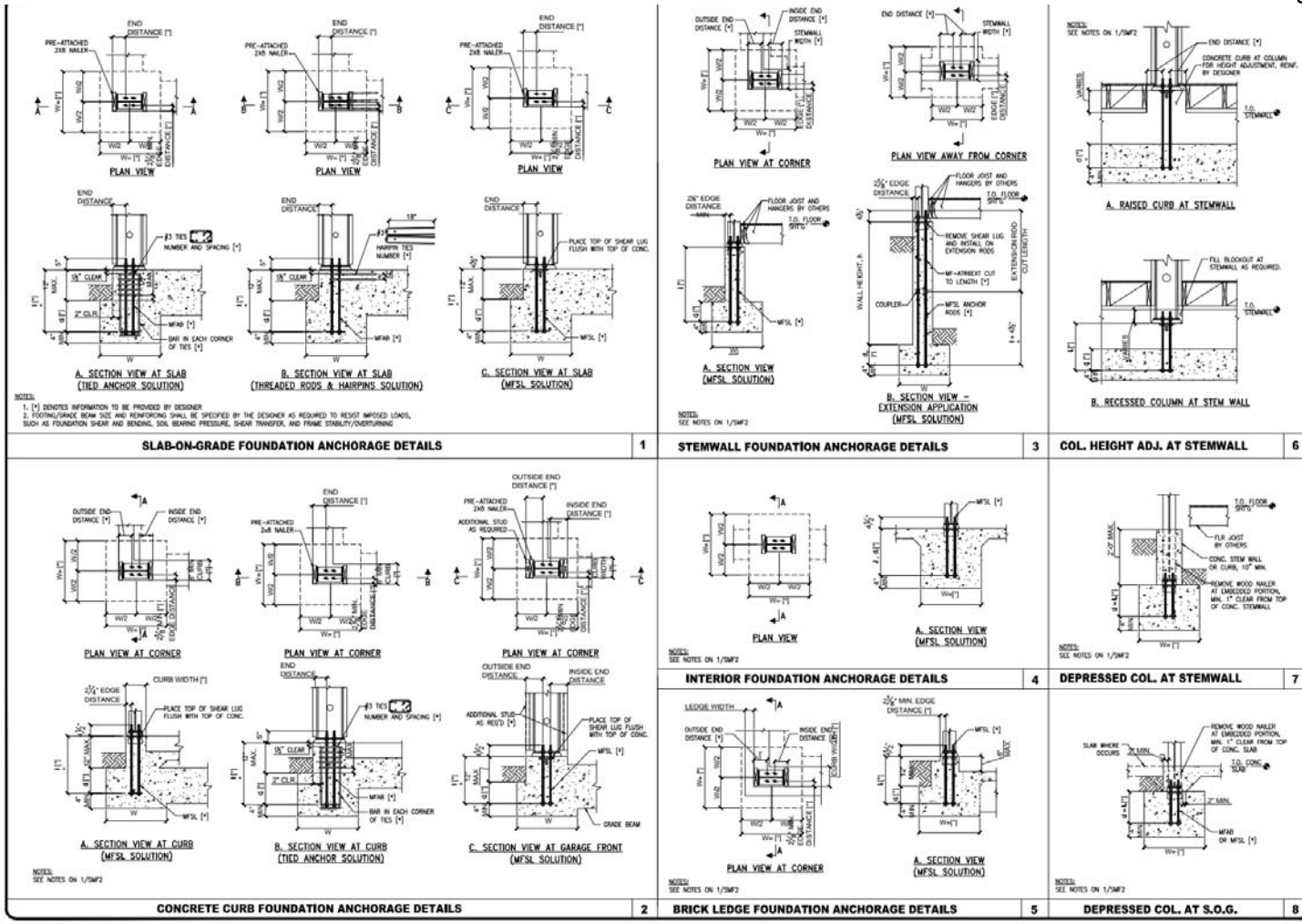


# MFL ANCHORAGE ASSEMBLIES

**SIMPSON STRONG-TIE CO. INC.**  
5556 W. LAS POSITAS BLVD.  
PLEASANTON, CA 94588  
TEL: (800) 999-5099 FAX: (925) 847-1587  
WWW.SIMPSONSTRONGTIE.COM

**STRONG-FRAME®**  
FRAME ELEVATION DRAWING  
ENGINEERED DESIGN  
303 6388 STREET - MF-3

NAME: B.W.  
DATE: 05/27/2016  
SCALE: N.T.S.  
SHEET: **MF-3**  
JOB NO. CS-160816  
0002000000047





<p><b>HOLDOWN POST TO SMF BEAM</b></p> <p>1. SEE 12/SMF3 FOR ALLOWABLE PENETRATION IN STEEL BEAM AND COLUMN. 2. DESIGNER TO VERIFY TOTAL BEAM LOADING INCLUDING REACTION "Y" DOES NOT EXCEED "Ymax" VALUE PER CATALOG.</p>	<p><b>TOP OF FRAME ADJUSTMENT</b></p> <p>1. FASTENER SPACING BETWEEN STRONG FRAME® SPECIAL MOMENT FRAME BEAM DOUBLE 2X NAUHLER AND PLATE/SHIM/PLATE PER DESIGNER. 2. TOP OF CONCRETE TO TOP OF FIELD INSTALLED TOP PLATE HEIGHT (H1) CAN ALSO BE ADJUSTED BY THE USE OF THICKER NON-SHIM GROUT (2" MAX), OR USE NOTED MINIMUM HEIGHT MODEL AND LOWER THE STEEL WALL OR TOSING (SEE SMF2 FOR DETAILS).</p>	<p><b>WOOD BM TO SMF COL. CONN.</b></p> <p>1. BEAM REACTIONS SHALL NOT EXCEED SIZE OF "Ymax" LOAD AS NOTED ON CATALOG. DESIGNER TO VERIFY TOTAL GRAVITY LOAD IMPOSED ON STRONG FRAME SPECIAL MOMENT FRAME BEAM DOES NOT EXCEED "Ymax" AS NOTED IN CATALOG. 2. SUMMATION OF BEAM REACTIONS (FRAMING INTO STEEL COLUMN) SHALL NOT EXCEED SIZE OF "Ymax" LOADS NOTED IN CATALOG.</p>	<p><b>BEAM</b></p> <p><b>AL WEB PENETRATION</b></p> <p>1. PENETRATIONS PERMITTED: 2. LOCATED MAXIMUM BY 6" HOLES AT 18" O.C. ARE PERMITTED. 3. LOCATED MINIMUM BY 6" HOLES AT 18" O.C. ARE PERMITTED. 4. PENETRATION PERMITTED UNDER PL MAXIMUM FACTORED POINT LOAD REGION ONLY IF ALLOWED GRAVITY LOAD "Ymax" IS REDUCED BY 75%. 5. SEE SMF3 FOR MAXIMUM COLUMN REACTIONS. 6. HOLES MAY BE BORED THROUGH WOOD NAUHLER AT LOCATIONS CORRESPONDING TO MAXIMUM HOLES IN THE FLANGE.</p> <p><b>COLUMN</b></p> <p><b>B: FLANGE PENETRATION</b></p> <p>1. PENETRATIONS PERMITTED: 2. LOCATED MAXIMUM BY 6" HOLES AT 18" O.C. ARE PERMITTED. 3. LOCATED MINIMUM BY 6" HOLES AT 18" O.C. ARE PERMITTED. 4. PENETRATION PERMITTED UNDER PL MAXIMUM FACTORED POINT LOAD REGION ONLY IF ALLOWED GRAVITY LOAD "Ymax" IS REDUCED BY 75%. 5. SEE SMF3 FOR MAXIMUM COLUMN REACTIONS. 6. HOLES MAY BE BORED THROUGH WOOD NAUHLER AT LOCATIONS CORRESPONDING TO MAXIMUM HOLES IN THE FLANGE.</p>
<p><b>6x HOLDOWN POST TO SMF BEAM</b></p> <p>1. SEE 12/SMF3 FOR ALLOWABLE PENETRATION IN STEEL BEAM AND COLUMN. 2. DESIGNER TO VERIFY TOTAL BEAM LOADING INCLUDING REACTION "Y" DOES NOT EXCEED "Ymax" VALUE PER CATALOG. 3. SEE 1/SMF3 FOR INFO NOT NOTED.</p>	<p><b>TOP PLATE SPLICE DETAIL</b></p> <p>1. IF POSSIBLE DO NOT SPLICE FIELD INSTALLED TOP PLATE WITHIN MOMENT FRAME. 2. WHEN TOP PLATE SPLICE ARE REQUIRED WITHIN MOMENT FRAME, DESIGNER TO DESIGN/SPECIFY NO NAILING WITHIN PROTECTED ZONE.</p>	<p><b>STEEL BEAM TO SMF BEAM/COL.</b></p> <p>1. BEAM REACTIONS SHALL NOT EXCEED SIZE OF "Ymax" LOAD AS NOTED ON CATALOG. DESIGNER TO VERIFY TOTAL GRAVITY LOAD IMPOSED ON STRONG FRAME SPECIAL MOMENT FRAME BEAM DOES NOT EXCEED "Ymax" AS NOTED IN CATALOG. 2. SUMMATION OF BEAM REACTIONS (FRAMING INTO STEEL COLUMN) SHALL NOT EXCEED SIZE OF "Ymax" LOADS NOTED IN CATALOG.</p>	<p><b>ALLOWABLE BEAM AND COLUMN PENETRATIONS</b></p> <p>1. PROTECTED ZONE INCLUDED THE FOLLOWING ELEMENTS: A. LINK FLANGE AND LINK STEM B. SHIP PLATES C. BEAM FLANGE AREAS CONNECTED TO THE LINK STEM D. COLUMN FLANGE AREAS CONNECTED TO THE LINK FLANGE E. SHEAR TAB AND BEAM WEB AT SHEAR TAB F. NO ATTACHMENT SHALL BE MADE TO THE PROTECTED ZONE.</p>
<p><b>HOLDOWN POST TO SMF COL.</b></p> <p>1. SEE 12/SMF3 FOR ALLOWABLE PENETRATION IN STEEL BEAM AND COLUMN. 2. DESIGNER TO VERIFY TOTAL BEAM LOADING INCLUDING REACTION "Y" DOES NOT EXCEED "Ymax" VALUE PER CATALOG. 3. SEE 1/SMF3 FOR INFO NOT NOTED.</p>	<p><b>B: CONNECT STEEL BEAM TO STEEL COLUMN</b></p> <p>1. IF POSSIBLE DO NOT SPLICE FIELD INSTALLED TOP PLATE WITHIN MOMENT FRAME. 2. WHEN TOP PLATE SPLICE ARE REQUIRED WITHIN MOMENT FRAME, DESIGNER TO DESIGN/SPECIFY NO NAILING WITHIN PROTECTED ZONE.</p>	<p><b>RAKE WALL DETAILS</b></p> <p>1. BEAM REACTIONS SHALL NOT EXCEED SIZE OF "Ymax" LOAD AS NOTED ON CATALOG. DESIGNER TO VERIFY TOTAL GRAVITY LOAD IMPOSED ON STRONG FRAME SPECIAL MOMENT FRAME BEAM DOES NOT EXCEED "Ymax" AS NOTED IN CATALOG. 2. SUMMATION OF BEAM REACTIONS (FRAMING INTO STEEL COLUMN) SHALL NOT EXCEED SIZE OF "Ymax" LOADS NOTED IN CATALOG.</p>	<p><b>WOOD INFILLS</b></p> <p>1. SEE WOOD CONNECTOR CATALOG FOR TR SIZES AND C-545-2012 FOR FORTH FACTORS. 2. SEE DETAIL 11 FOR PROTECTED ZONE REQUIREMENTS.</p>
<p><b>HOLDOWN POST TO SMF COL.</b></p> <p>1. SEE 12/SMF3 FOR ALLOWABLE PENETRATION IN STEEL BEAM AND COLUMN. 2. DESIGNER TO VERIFY TOTAL BEAM LOADING INCLUDING REACTION "Y" DOES NOT EXCEED "Ymax" VALUE PER CATALOG. 3. SEE 1/SMF3 FOR INFO NOT NOTED.</p>	<p><b>COLLECTOR DETAILS</b></p> <p>1. BEAM REACTIONS SHALL NOT EXCEED SIZE OF "Ymax" LOAD AS NOTED ON CATALOG. DESIGNER TO VERIFY TOTAL GRAVITY LOAD IMPOSED ON STRONG FRAME SPECIAL MOMENT FRAME BEAM DOES NOT EXCEED "Ymax" AS NOTED IN CATALOG. 2. SUMMATION OF BEAM REACTIONS (FRAMING INTO STEEL COLUMN) SHALL NOT EXCEED SIZE OF "Ymax" LOADS NOTED IN CATALOG.</p>	<p><b>NAILER BOLT ALLOWABLE LOADS</b></p> <p>1. WOOD NAUHLER ARE DOUGLAS-FIR LARCH NO. 2 GRADE. 2. ALLOWABLE LOADS LISTED ARE FOR ONE BOLT.</p>	<p><b>BEAM-TO-COLUMN CONNECTION</b></p> <p>1. RETAIL BOLTS AND TIGHTEN IN ACCORDANCE WITH INSTALLATION INSTRUCTIONS PROVIDED WITH EACH FRAME. 2. THE TYPE OF JOINT (TIGHT OR PRETIGHTENED) MUST BE DETERMINED BY THE DESIGNER AND SHOWN ON THE PLANS. 3. DRAW PLATES TOGETHER UNTIL THEY ARE IN FIRM CONTACT BY TIGHTENING BOLTS, GAPS AWAY FROM THE BOLT HEADS ARE PERMITTED. 4. CONNECTION PLATES CAN NOT BE DRAWN TOGETHER SUFFICIENTLY, SHIMS ARE REQUIRED. TOTAL THICKNESS OF SHIMS UNDER A BOLT HEAD MUST NOT EXCEED 1/4".</p>

REVISIONS

NO.	DATE	DESCRIPTION

**STRONG-FRAME®**  
SMF INSTALLATION DETAILS  
ENGINEERED DESIGN  
PAUL GLENN APARTMENTS

NAME: B.M.  
DATE: 05/27/2016  
SCALE: N.T.S.  
SHEET: **SMF3**

JOB NO: 675-180109  
800205000049





Dan Bouzos  
Post office box 11238  
Oakland, CA 94611

February 23, 2018

To Whom It may Concern:

With regard to construction at the 6251-6255 College Ave that took place after Red Hanger Cleaners vacated the premises on or about June 1987, it was limited to the store front areas and to the division of the space into three different stores.

There was some minor excavation that took place at the glass store front area as new footings needed to be installed in order to set the glass. No slab areas were removed or excavated.

Please contact me if you have any further questions.

Very Truly Yours,

Dan Bouzos  
510.772.2435

BOUZOS0000051

# EXHIBIT B



## PERMITTEE

OFFICIAL RECEIPT:  
MUST BE PRESENTED  
FOR REFUND.

City of Oakland  
OFFICE OF PUBLIC WORKS

## STREET AND SIDEWALK OBSTRUCTION PERMIT

2478

Expires: 8/3/87

Name BOUZOS PROPERTIES  
Address 6017 Chaboklyn Terr. Phone 654-1876  
City Oakland State CA Zip Code: 94618

Effective: 7/3/87  
Date 7/3/87 Not valid after 12 months  
Deposit \$ 300.00 metered a rate.

is hereby granted permission to obstruct a portion of the street at

Job Site #305-63rd ST  
fronting any continuous 50 ft within projected property  
ft. on the lines on sidewalk & in parking lane in front of  
side of of for the period of one month  
for the purpose of #305-63rd ST as shown on sketch D/Bouzos-7/3/87.

**IMPORTANT**  
NOTIFY SIDEWALK INSPECTION  
SECTION WHEN OBSTRUCTION  
IS CLEARED (273-3651).

FEES CONTINUE  
UNTIL CLEARED

RESPONSIBILITY FOR ACCIDENTS. The permittee shall be responsible for all claims and liabilities arising out of work performed under the permit or arising out of permittee's failure to perform the obligations with respect to street maintenance warning devices or the use and occupancy of any sidewalk, street or sidewalk place by virtue of the permit. The permittee shall, and by acceptance of the permit agrees to, defend, indemnify, save and hold harmless the City, its officers and employees, from and against any and all suits, claims or actions brought by any person for or on account of any bodily injuries, disease or illness or damage to persons and/or property sustained or arising in the construction of the work performed under the permit or in consequence of permittee's failure to perform the obligations with respect to street maintenance, warning devices or the use of an occupancy of any sidewalk, street or sidewalk place by virtue of the permit. (Oakland Municipal Code Section 6-2.611).

This permit issued pursuant to provisions of Chapter 6, Article 2 of the Oakland Municipal Code.

## DIRECTOR OF PUBLIC WORKS

By H. R. Pfeiffer 7/3/87

## INSPECTOR CLEARANCE:

DATE OBSTRUCTION CLEARED \_\_\_\_\_

INSPECTOR SIGNATURE \_\_\_\_\_



METERED



UNMETERED

BOUZOS0000001



**City of Oakland**  
OFFICE OF PUBLIC WORKS  
**SIDEWALK - DRIVEWAY - CURB - GUTTER PERMIT**

No. 1296  
K8701239

Date July 1987

Permittee Broderick Concrete

Location 6251-55 College Ave.

☐ Permits on unimproved streets for asphaltic concrete driveway or access bridges are temporary. Upon construction of standard improvements or upon notice by the Director of Public Works these temporary facilities must be removed from the public street area.

**BEFORE STARTING WORK CALL INSPECTORS AT 273-3651**  
**WORK TO BE DONE IN COMPLIANCE WITH ALL EXISTING ORDINANCES**

Job to be Started	Permit Fee	\$7.00
Date		
Job Completed	Sidewalk	Sq. Ft. 500 100 -
Date	Driveway	Sq. Ft.
Inspector	Curb	Lin. Ft.
Final Inspection	Driveway Approach	WIDTH
Date		
Inspector	Total Fees	\$67.80

Contractor's License # \_\_\_\_\_ Oakland Business License # \_\_\_\_\_

**DIRECTOR OF PUBLIC WORKS**

LAIRD'S STATIONERY, OAKLAND, CALIF. 433258-9  
10-50.3 By JP

YOUR RECEIPT  
CITY OF OAKLAND  
INSPECTIONAL  
SERVICES  
DEPARTMENT  
#2183 08/11/87

APPL 111 25.00  
SIGN 111 20.00  
CHKG 111 13.00  
MICR 111 .40  
SUBTOTAL 58.40

CHECK TL 58.40

NO REFUND W/O RECEIPT  
#35005 C001 R01 T13:48

2114  
SIDEWALK  
YOUR RECEIPT  
CITY OF OAKLAND  
INSPECTIONAL  
SERVICES  
DEPARTMENT  
07/06/87

S.WK 132 107.80  
SUBTOTAL 107.80  
CHECK TL 107.80

NO REFUND W/O RECEIPT  
#32046 C001 R01 T08:25

BOUZOS0000002

CITY OF OAKLAND  
**SIGN PERMIT**

**BUILDING PERMIT** SF700133

JAMES W. BARTHMAN By CZ  
CHIEF BUILDING INSPECTOR

**ELECTRICAL PERMIT**

H. J. CALVERT By \_\_\_\_\_  
SUPERVISING ELECTRICAL INSPECTOR

Date 8-11-82

Projection TYPE OF SIGN  
6251 College LOCATION  
V. Bouzos OWNER  
V. Bouzos BUILDER

**INSPECTIONS**

Erection 7/14/87 CS

Electrical \_\_\_\_\_

Remarks

**KEEP THIS CARD ON THE PREMISES  
 ACCESSIBLE TO THE INSPECTORS**

539-49 (REV. 9-77)



BOUZOS0000003



**CITY OF OAKLAND**  
INSPECTIONAL SERVICES DEPARTMENT  
ONE CITY HALL PLAZA, ROOM 203  
OAKLAND, CALIF. 94612



### BUILDING PERMIT APPLICATION

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED & FEES PAID.

OWNER	BUILDING ADDRESS <u>10251, 10253, 10255 COLLEGE AVE</u>	
	TRACT	BLOCK PAGE LOT PARCEL
OWNER	NAME <u>VALERIE BOUZOS</u>	
	ADDRESS <u>6017 CHAROLYN TRAIL</u>	
	CITY <u>OAKLAND</u>	ST. <u>CA</u> ZIP <u>94613</u>
	TENANT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE)	
ARCH. ENGR.	NAME <u>HAROLD HOBBS</u> LICENSE # <u>19591</u>	
	ADDRESS <u>5505 COLLEGE AVE</u> PHONE <u>654-2200</u>	
	CITY <u>OAKLAND</u>	ST. <u>CA</u> ZIP <u>94613</u>
CONTRACTOR	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.	
	LICENSE# AND CLASS	CITY BUSINESS TAX#
	CONTRACTOR NAME ADDRESS	
	CITY ST. ZIP PHONE	SIGNATURE DATE
OWNER/BUILDER	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):	
	<input checked="" type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale).	
	<input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or appurtenances thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code)	
	<input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).	
WORKER'S COMPENSATION	<input type="checkbox"/> I am exempt under Sec. <u>B&amp;P.C.</u> for this reason <u>2015 (last B&amp;P.C.)</u> <u>1 MAY 15 10 17</u>	
	Signature of Owner or Authorized Agent Date	
	I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.).	
	Policy # <u>SI 1000</u> Company <u>SI 1000</u>	
LENDER	<input type="checkbox"/> Certified copy is hereby furnished.	
	<input type="checkbox"/> Certified copy is filed with the city building inspection department.	
	Signature Date	
	(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)	
APPLICANT	I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.	
	Signature Date	
	NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked	
	I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).	
APPLICANT	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THIS INSPECTION.	
	I hereby agree to save, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses which may accrue against the City in consequence of the granting of this permit or from the use or occupancy of any sidewalk, street or subsidedeek, or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted.	
	<input type="checkbox"/> Contractor	
	<input checked="" type="checkbox"/> Owner	
Signature of Contractor or Owner or Agent Date <u>3/27/17</u>		
X <u>CHRISTOPHER BOUZOS</u> Also PRINT NAME		
X Authorized Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner		
Address of Agent <u>CONTRACT DESIGN ASSOCIATES</u> CITY <u>OAKLAND</u> STATE <u>CA</u> ZIP <u>94613</u> TELEPHONE <u>654-2200</u>		

Permit No.

Call for Inspection 273-3444

DATE ISSUED

DATE FILED 3/21/17

☐ NEW

☐ REPAIR

☐ ADDITION

☐ MOVE

☒ ALTERATION

☒ DEMOLITION

☐ OTHER

DESCRIBE BRIEFLY ALL PROPOSED CONSTRUCTION WORK.

REPLACEMENT OF 1<sup>ST</sup> LEVEL COMMERCIAL  
FRONT NEW GLASS, DOOR, PARTIAL  
RECONSTRUCTION OF EXTERIOR

Plan Filed 9296 Survey filed 3

Size of Bldg. 9296 No. of Stories 3

Number of Units 50 Height at Highest Point 50'

Proposed Use of Bldg. COMMERCIAL / RESIDENTIAL

Present Use of Bldg. COMMERCIAL / RESIDENTIAL

Number of Bldgs. on lot 1 Use of each 50'

Lot Size 50'

TYPE OF BUILDING I II III IV V F.R. H.T. 1 hr. N

OCCUPANCY GROUP A B E H I R L M

FIRE SPRINKLERS SPECIAL INSPECTION REQUIRED

ZONING R C 31 M S

Roof Covering TAR & ASPHALT / FLUOROPOLYMER

Exterior Wall STUCCO OVER WOOD

Valuation of Proposed Work \$ 30,000

Include all labor and materials, all lighting, heating, ventilation, water supply, plumbing, electrical, fire sprinklers, elevator equipment therein and thereon.

#### OFFICIAL USE ONLY

VALUE: Appl. Fee \$ 20.00

Checking Fee \$ 147.50

B.R. Tax \$ 172.50

Pl. Pl. Rev. \$ 172.50

TOTAL \$ 172.50

General Fee \$ 17.00

Checking Fee \$ 34.00

State Regs \$ 4.00

Mic. Sur. \$ 3.00

SMIP \$ 3.00

Address Fee \$ 3.00

TOTAL \$ 34.00

DATE 3/27/17

Add'l Fee \$ 0.00

Add'l Ch Fee \$ 0.00

Add'l State Regs. \$ 0.00

Add'l Sur. \$ 0.00

Add'l SMIP \$ 0.00

TOTAL \$ 0.00

DATE 3/27/17

LICENSE/OWNER VERIFICATION

ZONING & PLANNING NO. 6-771

FIRE MARSHAL 3268

HEALTH DEPT.

PORT OF OAKLAND

HOUSING CONSERVATION

MOVING PERMIT NO.

SPECIAL ACTIVITY NO.

BE&A ITEM NO.

HA&AB RES. NO.

HANDICAP APPEALS

OTHER- 0-771

APPL REC'D

APPL FIELD CHKD BY

PLAN CHECKED BY

DATE 3/27/17

PLANS PROCESSED

PERMIT ISSUED BY

DATE 3/27/17

FINAL INSPECTION

PERMIT NO. 201701537

DISTRICT NO. 5

ADDRESS 10251, 10253, 10255 COLLEGE AVE

DATE FILED 3/27/17

BOUZOS0000004

SPECIAL INSPECTION REQUIRED FOR:

APPROVAL REQUIRED BY ENGINEERING SERVICES DIVISION

There are no PROPOSED STREET OPENINGS, PUBLIC EASEMENTS OF RECORD

or \_\_\_\_\_

in this Office which are in conflict with this application.

REMARKS: \_\_\_\_\_

ENGINEERING SERVICES

By \_\_\_\_\_ DATE \_\_\_\_\_

FORMS OK

FIREPLACE

WIRE (EXT.) OK

LATH (INT.) OK

GYPSUM BD. OK  
PLASTER OK

ROUGH OK

FINAL OK

BOUZOS0000005

YOUR RECEIPT  
CITY OF OAKLAND  
INSPECTIONAL  
SERVICES  
DEPARTMENT

2001

05/15/87

BLDG 111	227.00
CHKG 111	34.05
MICR 111	4.54
SMIP 913	2.45
SUBTOTAL	268.04
CHECK TL	268.04

NO REFUND W/O RECEIPT  
#28116 C001 R01 T12:58

BOUZOS0000006



**STATE  
COMPENSATION  
INSURANCE  
FUND**

P.O. BOX 807, SAN FRANCISCO, CALIFORNIA 94101-0807

**CERTIFICATE OF WORKERS' COMPENSATION INSURANCE**

MAY 5, 1987

 POLICY NUMBER: 1007466-87  
 CERTIFICATE EXPIRES: 5-1-88

 CITY OF OAKLAND  
 ATTN: BUILDING INSPECTION DEPT  
 #1 CITY HALL PLAZA  
 OAKLAND CA 94612

This is to certify that we have issued a valid Workers' Compensation insurance policy in a form approved by the California Insurance Commissioner to the employer named below for the policy period indicated.

This policy is not subject to cancellation by the Fund except upon ten days' advance written notice to the employer.

We will also give you TEN days' advance notice should this policy be cancelled prior to its normal expiration.

This certificate of insurance does not amend, extend or alter the coverage afforded by the policies listed herein. Notwithstanding any policy, contract or other document with respect to which this certificate of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

PRESIDENT

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company shall mail 10 days written notice to the below named certificate holder.

EMPLOYER

 VASILOS & ELENA BOUZOS  
 P O BOX 11238  
 OAKLAND CA 94611

SCIF 10262 (REV. 10-86)

ci

COPY FOR INSURED'S FILE

OLD 2

BOUZOS0000007

**CITY OF OAKLAND**  
INSPECTIONAL SERVICES DEPARTMENT  
ONE CITY HALL PLAZA, ROOM 203  
OAKLAND, CALIF. 94612



### SIGN PERMIT APPLICATION

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED, FEES PAID & PLANS APPROVED.

OWNER	SITE ADDRESS <u>6251-6255 College Ave</u>			
	TRACT		BLOCK PAGE	LOT PARCEL
	NAME <u>BOUZOS</u>			
	ADDRESS <u>6017 Chabot Ave</u> PHONE <u>654 1840</u>			
CONTRACTOR	CITY <u>Oakland</u> ST. <u>Chabot</u> ZIP <u>94612</u>		TENANT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE)	
	NAME		LICENSE #	
	ADDRESS		PHONE	
	CITY		ST. ZIP	
OWNER/BUILDER	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.			
	LICENSE # AND CLASS		CITY BUSINESS TAX #	
	CONTRACTOR NAME		ADDRESS	
	CITY		ST. ZIP PHONE	
WORKER'S COMPENSATION	SIGNATURE DATE			
	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):			
	<input checked="" type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale). <input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or appurtenances thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code). <input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the contractor's License Law). <input type="checkbox"/> I am exempt under Sec. _____, B&P.C. for this reason _____ Signature of Owner or Authorized Agent _____ Date <u>8-11-87</u>			
	Policy _____ Company Name _____ <input type="checkbox"/> Certified copy is hereby furnished. <input type="checkbox"/> Certified copy is filed with the city building inspection department. Signature _____ Date _____ (This section need not be completed if the permit is for one hundred dollars (\$100) or less). I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation Laws of California. Signature <u>D. Bouzos</u> Date <u>8-11-87</u> NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.			
LENDER	I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).			
	LENDERS NAME			
	LENDERS ADDRESS			
	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THIS INSPECTION.			
APPLICANT	I hereby agree to save, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses incurred by the City in consequence of the granting of this permit or from the use or occurrence of any sidewalk, street or subsidewalk, or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted.			
	<input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Owner Signature of Contractor or Owner or Agent _____ Date <u>8-11-87</u> X _____ Also PRINT NAME _____ <input type="checkbox"/> Authorized Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner Address of Agent _____ CITY _____ STATE _____ ZIP _____ TELEPHONE _____			

APPL 111 25.00  
SIGN 111 20.00  
CHKE 111 13.00  
MCCR 111 .40  
SUBTOTAL 58.40  
CHECK TL 58.40  
#35005 C001 R01 T13:48  
08/11/87

Permit No. \_\_\_\_\_  
Call for Inspection 273-3444  
DATE ISSUED 8-11-87 DATE FILED 8-11-87

Zone \_\_\_\_\_ Elec. Per No. \_\_\_\_\_

Write in Ink — File All Copies — Circle Type of Sign

☐ NEW ☐ ALTERATION ☐ REPAIR  
☐ ELECTRIC ☒ NON-ELECTRIC ☐ TEMPORARY

Ground Sign ☐ Wall Sign ☐ Roof Sign ☐  
 Combination Sign ☐ Marquee Sign ☐ Sign Tower ☐  
 Pole Sign ☐ Fin Sign ☐  
 Projecting Sign ☒ Other (Describe) \_\_\_\_\_

PLANS ARE REQUIRED

Transformers, Number and V.A. \_\_\_\_\_ Weight \_\_\_\_\_  
 Special Inspection Required? Yes (see back) ☐ No ☒  
 This is a new sign bearing the U.L. Seal of Inspection.  
 Yes ☐ No ☒  
 This is an existing sign and will require an inspection and seal of approval by Oakland Electrical Inspection Division before being erected.  
 Yes ☐ No ☒  
 This sign is viewable from the freeway or Bay Area Rapid Transit System.  
 Yes ☐ No ☒  
 This sign is not being erected to be viewed primarily from a freeway, or Bay Area Rapid Transit System.  
D. Bouzos (Signature)  
 OFFICIAL USE ONLY

VALUE:

Appl. Fee \$ 25.00  
 Checking Fee \$ \_\_\_\_\_  
 TOTAL \$ \_\_\_\_\_  
 Sign Permit Fee \$ 20.00  
 Checking Fee \$ 13.00  
 Mic. Sur. \$ 40

ADDITIONAL COST:

Address Fee \$ \_\_\_\_\_  
 TOTAL \$ 58.40  
 Date \_\_\_\_\_ Add'l Fee \$ \_\_\_\_\_  
 Add'l Ch Fee \$ \_\_\_\_\_

TOTAL VALUE: Add'l Sur. \$ \_\_\_\_\_  
 \$ \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

INITIAL	LICENSE / OWNER VERIFICATION	DATE
<u>W-1</u>	ZONING & PLANNING NO.	<u>8-11-87</u>
	FIRE MARSHAL	
	FREEWAY REVIEW	
	PORT OF OAKLAND	
	ELECTRICAL INSPECTION DIV.	
	BE & A ITEM NO.	
	OTHER- <u>157 10</u>	
APPL REC'D BY <u>CZ</u>	APPL FIELD CHKD BY _____	PLAN CHECKED BY <u>CZ</u>
DATE _____	DATE <u>8-11-87</u>	DATE _____
PLANS PROCESSED BY _____	PERMIT ISSUED BY <u>CZ</u>	
DATE _____		
FINAL INSPECTION		

PERMIT NO. 87700133 DISTRICT NO. 3 ADDRESS 6251/55 College DATE FILED 8-11-87

BOUZOS0000008



**CITY OF OAKLAND**  
INSPECTIONAL SERVICES DEPARTMENT  
ONE CITY HALL PLAZA, ROOM 203  
OAKLAND, CALIF. 94612



# **BUILDING PERMIT APPLICATION**

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED & FEES PAID.

OWNER	BUILDING ADDRESS 651-6253-6255 Collier Ave.		TRACT	BLOCK PAGE	LOT PARCEL
	NAME VASILIOS BOUZOS				
OWNER	ADDRESS 6017 Chaboulin Terr		PHONE 651-4476		
	CITY OAKLAND	ST. CA.	ZIP 94618		
TENANT'S NAME AND TELEPHONE NUMBER (IF APPLICABLE)					
ARCH. ENGR.	NAME		LICENSE #		
	ADDRESS		PHONE		
CONTRACTOR	CITY		ST.	ZIP	
	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.				
CONTRACTOR	LICENSE# AND CLASS		CITY BUSINESS TAX#		
	CONTRACTOR NAME				
CONTRACTOR	ADDRESS		CITY		
	CITY		ST.	ZIP	PHONE
CONTRACTOR	SIGNATURE		DATE		
	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):				
OWNER/BUILDER	<input checked="" type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale). <input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or outbuildings thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code). <input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law). <input type="checkbox"/> I am exempt under Sec. _____, B&P.C. for this reason _____ Signature of Owner or Authorized Agent _____ Date _____				
	I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.). Policy # _____ Company Name _____ <input type="checkbox"/> Certified copy is hereby furnished. <input type="checkbox"/> Certified copy is filed with the city building inspection department. Signature _____ Date _____ (This section need not be completed if the permit is for one hundred dollars (\$100) or less.) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California. Signature _____ Date _____				
WORKER'S COMPENSATION	NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked. I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.). LENDERS NAME _____ ADDRESS _____ LENDERS NAME _____ ADDRESS _____				
	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THIS INSPECTION. I hereby agree to save, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses which may accrue against the City in consequence of the granting of this permit or from the use or occupancy of any sidewalk, street or subsidedwalk, or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted. <input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Owner Signature of Contractor or Owner or Agent _____ Date _____ x VASILIOS BOUZOS Also PRINT NAME _____ <input type="checkbox"/> Authorized Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner Address of Agent _____ CITY _____ STATE _____ ZIP _____ TELEPHONE _____				

Permit No.		Call for Inspection 273-3444	
DATE ISSUED	DATE FILED		
<input type="checkbox"/> NEW <input type="checkbox"/> REPAIR <input type="checkbox"/> ADDITION <input type="checkbox"/> MOVE <input checked="" type="checkbox"/> ALTERATION <input type="checkbox"/> DEMOLITION <input type="checkbox"/> OTHER			
DESCRIBE BRIEFLY ALL PROPOSED CONSTRUCTION WORK.			
Install 2 partition walls between spaces A-B-C. Replace all 1st floor walls with new drywall covering.			
Plan Filed	Survey filed		
Size of Bldg.	No. of Stories	5	
Number of Units	Height at Highest Point		
Proposed Use of Bldg.	Present Use of Bldg.	Retail Dry-Cleaners	
Number of Bldgs. on lot	Use of each		
Lot Size			
TYPE OF BUILDING		I II III IV V F.R. H.T. 1 hr. N	
OCCUPANCY GROUP		A B E H I R M	
FIRE SPRINKLERS		SPECIAL INSPECTION REQUIRED	
ZONING		R C3 M S	
Roof Covering			
Exterior Wall			
Valuation of Proposed Work \$		5,000	
Include all labor and materials, all lighting, heating, ventilation, water supply, plumbing, electrical, fire sprinklers, elevator equipment therein and thereon.			
OFFICIAL USE ONLY			
VALUE:	Appl. Fee	\$ 25.00	
	Checking Fee	\$ 36.40	
	B.R. Tax	\$	
	Pl. Pl. Rev.	\$	
	TOTAL	\$ 61.40	
	General Fee	\$ 112.00	
	Checking Fee	\$	
	State Regs	\$	
	Mic. Sur.	\$	
	SMIP	\$	
	Address Fee	\$	
	TOTAL	\$ 183.40	
	Add'l Fee	\$	
	Add'l Ch Fee	\$	
	Add'l State Regs.	\$	
	Add'l Sur.	\$	
	Add'l SMIP	\$	
	TOTAL	\$	
ADDITIONAL COST:			
\$	TOTAL	\$	
Date	Add'l Fee	\$	
	Add'l Ch Fee	\$	
	Add'l State Regs.	\$	
	Add'l Sur.	\$	
	Add'l SMIP	\$	
	TOTAL	\$	
INITIAL	LICENSE/OWNER VERIFICATION	DATE	
	ZONING & PLANNING NO.	1-28-87	
	FIRE MARSHAL	1-28-87	
	HEALTH DEPT.		
	PORT OF OAKLAND		
	HOUSING CONSERVATION		
	MOVING PERMIT NO.		
	SPECIAL ACTIVITY NO.		
	BE&A ITEM NO.		
	HA&AB RES. NO.		
	HANDICAP APPEALS		
	OTHER-		
APPL REC'D	APPL FIELD CHKD BY	PLAN CHECKED BY	
BY	DATE	DATE	
PLANS PROCESSED	PERMIT ISSUED BY		
BY	DATE		
FINAL INSPECTION			

PERMIT NO. 8700570  
DISTRICT NO. 3  
ADDRESS 6251-53-55 Collier Ave.  
DATE FILED 1-28-87

BOUZOS0000009



SPECIAL INSPECTION REQUIRED FOR:

APPROVAL REQUIRED BY ENGINEERING SERVICES DIVISION

There are no PROPOSED STREET OPENINGS, PUBLIC EASEMENTS OF RECORD

or \_\_\_\_\_

in this Office which are in conflict with this application.

REMARKS: \_\_\_\_\_

ENGINEERING SERVICES

By \_\_\_\_\_ DATE \_\_\_\_\_

FORMS OK

FIREPLACE

WIRE (EXT.) OK

LATH (INT.) OK

GYPSUM BD. OK  
PLASTER OK

FINAL OK

ROUGH OK

BOUZOS0000010

**CITY OF OAKLAND**  
 INSPECTIONAL SERVICES DEPARTMENT  
 ONE CITY HALL PLAZA  
 OAKLAND, CALIF. 94612  
 PHONE (415) 273-3443

# PLUMBING PERMIT APPLICATION

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED,  
 VALIDATED & FEES PAID.

OWNER	BUILDING ADDRESS	6701 - 67th College Ave. Oakland, CA		
	TRACT	BLOCK PAGE	LOT PARCEL	
	NAME	Vasilios Bouzos 415-273-4443		
OWNER	ADDRESS	6017 Chaboulin Terr		
	CITY	ST.	ZIP	94618
	NAME	L. Bouzos		
ARCH. ENGR.	ADDRESS	PHONE		
	CITY	ST.	ZIP	
	I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.			
CONTRACTOR	LICENSE #	CITY BUSINESS TAX #		
	CONTRACTOR NAME	ADDRESS		
	CITY	ST.	ZIP	PHONE
OWNER/BUILDER	SIGNATURE	DATE		
	I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500):			
	<input checked="" type="checkbox"/> I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale). <input type="checkbox"/> I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence of appurtenances thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period. (Sec. 7044, Business and Professions Code). <input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law). <input checked="" type="checkbox"/> I am exempt under Sec. 7031.5 B & P.C. for this reason: <u>VIOLATION</u> Signature: <u>V. Bouzos</u> Date: <u>3/20/18</u>			
WORKER'S COMPENSATION	I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).			
	Policy #	Company Name		
	<input type="checkbox"/> Certified copy is hereby furnished. <input type="checkbox"/> Certified copy is filed with city building inspection department. Signature: _____ Date: _____ (This section need not be completed if the permit is for one hundred dollars (\$100) or less.) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California. Signature: <u>V. Bouzos</u> Date: <u>3/20/18</u>			
LENDER	NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.			
	I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).			
	LENDERS NAME: _____ ADDRESS: _____			
APPLICANT	I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE! THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE OF THIS INSPECTION.			
	I hereby agree to save, indemnify and keep harmless the City of Oakland and its officers, employees and agents against all liabilities, judgments, costs and expenses which may accrue against the City in consequence of the granting of this permit or from the use or occupancy of any sidewalk, street or subwalk, or otherwise by virtue thereof, and with all things strictly comply with the conditions under which this permit is granted.			
	<input type="checkbox"/> Contractor <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Agent for <input type="checkbox"/> Contractor <input type="checkbox"/> Owner Address of Agent: _____ CITY: _____ ST: _____ ZIP: _____ TELEPHONE: _____			

Call for inspection 273-3444

DATE ISSUED 3/20/18 APPROVED BY [Signature]  
☐ NEW ☐ REPAIR ☐ ADDITION  
☐ MOVE ☐ ALTERATION ☐ OTHER

BUILDING PERMIT NUMBER: 10701103

REMARKS:

PLUMBING	NO	FEES	POST DATES
TOILETS			
BATHS			
BASINS			
SINKS			
SHOWERS			
LAUNDRY TRAYS			
FLOOR DRAINS			
URINALS			
DRINKING FOUNTAIN			
AUTO CLOTHES WASHER			
AUTO DISH WASHER			
GARBAGE DISPOSAL			
INTERIOR LEADERS			
AREA DRAINS			
STORM LINES TO CURB			
GREASE TRAP			
WATER ALTERATION	<u>3</u>	<u>300</u>	
WATER SERVICE			
GAS OUTLETS			
GAS METERS (TEST)			
DRYERS			
RANGES			
WATER HEATERS			
CIRCULATING HEATERS			
FRYERS - STEAMERS			
COOKERS - BARBECUES			
LOG LIGHTERS			
GAS LIGHT - GAS TORCH			
BUNSEN BURNERS			
MISC. BURNERS (SMALL)			
FLUES			
VENTS (KIT - BATH)			
SP EX - INSPECTION			
INDIRECT WASTES			
EJECTORS - SUMPS			
PRIVIES			
POOLS - SPAS - HOT TUBS			
ROMAN TUB BAPTISTRIES			
FIRE LINE CONNECTIONS			
PRESSURE REDUCING VALVE			
LAWN SPRINKLER ZONES			
Basic Fee		\$25.00	PRIVY
SUB TOTAL		<u>5</u>	PLOT PLAN
MICR SURCHARGE	1%	<u>55</u>	GAS APPL.
TOTAL		<u>55</u>	
DATE	INSPECTION	INSPECTOR	
	UNDERGROUND		
	ROUGH		
	GAS TEST		
	GAS OK BLD-PGE.		
	FINAL		

PERMIT NO.

10701103 DISTRICT NO.

1A

ADDRESS

6701 - 67th College Ave

BOUZOS0000011



**CITY OF OAKLAND**  
 INSPECTIONAL SERVICES DEPARTMENT  
 ONE CITY HALL PLAZA  
 OAKLAND, CA 94612  
 PHONE 273-3443



### ELECTRICAL PERMIT APPLICATION

THIS IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED  
 & FEES PAID.

**OWNER**  
 BUILDING ADDRESS: 6351-6355 College Ave  
 TRACT: 6351 BLOCK PAGE LOT PARCEL  
 NAME: VASILIOS BOUZOS  
 ADDRESS: 6017 Chabola Terr. PHONE: 654-1876  
 CITY: Oakland ST. CA ZIP: 94618  
 NAME: LICENSE #  
 ADDRESS: PHONE  
 CITY: ST. ZIP

**CONTRACTOR**  
 I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.  
 LICENSE # AND CLASS: 388678 C-10 CITY BUSINESS TAX # 11371922  
 CONTRACTOR NAME: KORBES ELECTRIC  
 ADDRESS: 328 Casanova Dr  
 CITY: San Mateo ST. CA ZIP: 94403 PHONE: 345-2241  
 SIGNATURE: DATE: 1-28-87

**OWNER/BUILDER**  
 I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law Chapter 9 (commencing with Sec. 7000) of Division 3 of the Business and Professions Code, or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than \$500).  
☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale; if, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale).  
☐ I, as owner of the property, am exempt from the sale requirements of the above due to: (1) I am improving my principal place of residence or appurtenances thereto, (2) the work will be performed prior to sale, (3) I have resided in the residence for the 12 months prior to completion of the work, and (4) I have not claimed exemption in this subdivision on more than two structures more than once during any three-year period (Sec. 7044, Business and Professions Code).  
☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law).  
☐ I am exempt under Sec. \_\_\_\_\_, B&P.C. for this reason \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WORKERS' COMPENSATION**  
 I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).  
 Policy # \_\_\_\_\_ Company Name: \_\_\_\_\_  
☐ Certified copy is hereby furnished.  
☐ Certified copy is filed with the city building inspection department.  
 Signature: \_\_\_\_\_ Date: 1-28-87  
 (This section need not be completed if the permit is for one hundred dollars (\$100) or less.)  
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.  
 Signature: \_\_\_\_\_ Date: 2-6-87  
 NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

**LENDER**  
 I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).  
 LENDERS  
 NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_

**APPLICANT**  
 I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND I MAKE THIS STATEMENT UNDER PENALTY OF LAW. I HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. NOTICE: THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 90 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 90 DAYS. DO NOT CONCEAL OR COVER ANY CONSTRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE BACK OF THE JOB COPY OF THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED ONE DAY IN ADVANCE OF THE INSPECTION.  
☒ Contractor  
☐ Owner  
 Signature of Contractor Owner or Agent: \_\_\_\_\_ Date: 1-28-87  
☐ Agent for ☐ Contractor ☐ Owner  
 Address of Agent: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

B8700510

ELEC 112 87.00

APPL 111 25.00

MISC 111 1.12

SUBTOTAL 113.12

CHECK TL 113.12

#20173 COWI R01 111118

02/06/87

Call for Inspection 273-3444

DATE ISSUED 2/6/87 APPROVED BY RK

☐ NEW ☐ REPAIR ☐ ADDITION

☐ MOVE ☐ ALTERATION ☐ DEMOLITION

☐ OTHER Will provide PG&E letter etc.

Description of Work: Replace existing

corroded main and service

panels with new. Add sixteen

outlets. Upgrade service to

400 amps single phase.

15 SERVICE WIRE VOLTS SYSTEM

2-W METERS 3-W METERS 4-W METERS

REF. DESCRIPTION NO. EACH FEES

15 SERVICE 400AMP 16 - 112 -

16 METERS (EXTRA) 13 2 26 -

17 CIRCUITS 37 1 37 -

2 APARTMENTS

18 OUTLETS (ROUGH) 16 25 4 -

21 FIXTURES

22 SWITCHES

23 RECEPTACLES 116 25 4 -

3 RANGE

4 DRYER

4 RANGE TOP

4 OVEN

5 FAN (EXHAUST)

6 DISPOSAL

6 DISHWASHER

7 AIR CONDITIONER

24 HEATERS (AIR)

24 HEATERS (WATER)

29 FURNACE

14 SWIMMING POOL

8 BEVERAGE CASE

8 FREEZER CASE

12 VEGETABLE CASE

9 DENTAL UNIT

11 STERILIZER

10 GASOLINE DISP.

13 MOTION PICTURE MACH.

26 SIGN (NEW)

27 SIGN (EXISTING)

28 OUTLINE LIGHTING

30 MOVED BLDG.

31 SERVICE (TEMPORARY)

32 MISC. APPARATUS

32 MOTORS

PENALTY

1 APPLICATION FEE \$25 -

SUB TOTAL 112 -

34 MINIMUM FEE

33 SURCHARGE 1% 113

GRAND TOTAL 113.12

DATE INSPECTION INSPECTOR

UNDERGROUND

ROUGH

UTILITY NOTIFIED

FINAL

PERMIT NO.

E6700399

DISTRICT NO.

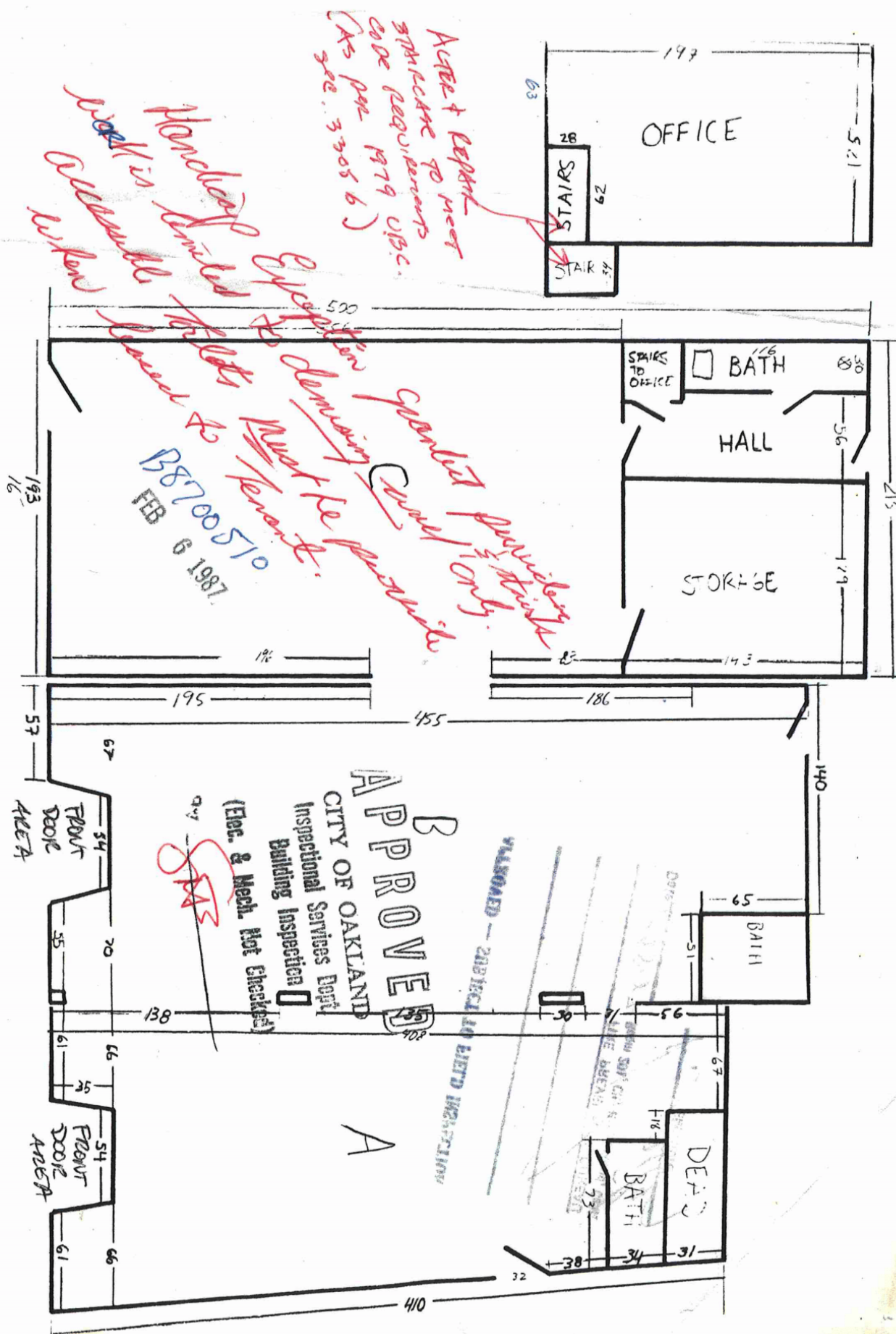
2

ADDRESS

6351 College Ave.

BOUZOS0000012





APPROVED — SUBJECT TO FIELD INSPECTION

\_\_\_\_\_  
\_\_\_\_\_  
FIRE PREVENTION BUREAU  
Room 201, City Hall, Oakland, Calif.  
Date 1-28-87  
Signature [Signature]

BOUZOS0000014



KEEP THIS CARD ON THE PREMISES ACCESSIBLE TO ALL INSPECTORS

—DO NOT FOLD CARD—

TELEPHONE 273-3444 BETWEEN 8:00-4:00 ONE DAY IN ADVANCE FOR REQUIRED INSPECTION

3441 VIKI

ALL INSPECTIONS TO BE SIGNED AND DATED

City of Oakland

INSPECTIONAL SERVICES DEPARTMENT

ALL PARTIAL APPROVALS REQUIRED  
BEFORE PARTIAL LATHING OR COVERINGSEPARATE PLUMBING MECHANICAL &  
ELECTRICAL PERMITS ARE REQUIRED

Partial Rough Plumbing

BUILDING PERMIT 38701553  
6251, 6253, 6255 College  
 LOCATION  
1451 405 Bouzoz  
 OWNER  
N/A  
 BUILDER  
Demolition, Alteration  
 TYPE OF JOB

Total Living Units in Building \_\_\_\_\_

Date \_\_\_\_\_

JAMES W. BARTHMAN

Building Official By Hastings

Inspections

\*CALL FOR INSPECTIONS IN SEQUENCE

FORMS  
REQUIRED BEFORE POURING CONCRETE

\*Rough Plumbing \_\_\_\_\_

\*Rough Mechanical \_\_\_\_\_

\*Rough Electric \_\_\_\_\_

\*Frame Work  
ABOVE APPROVALS REQUIRED BEFORE LATHING OR COVERINGInterior Lath  
REQUIRED BEFORE PLASTERING INSIDEExterior Lath 6/23/87 US  
REQUIRED BEFORE STUCCOGypsum Wallboard  
REQUIRED BEFORE TAPINGFINAL INSPECTION REQUIRED BEFORE OCCUPANCY  
FINAL INSPECTION NEED NOT BE CALLED  
FOR IN SEQUENCE

Final Plumbing \_\_\_\_\_

Final Mechanical \_\_\_\_\_

Final Electric \_\_\_\_\_

Final Building 9/19/87 US

BOUZOS0000015

Partial Rough Mechanical

Partial Rough Electric

Partial Building

5/18/87 Sealings need verified  
revisions to plan changed US.  
5/22/87 1 footing forms OK US  
5/27/87 corner footing OK US  
6/15/87 needs Rebar & plying. US.



**CITY OF OAKLAND  
INSPECTIONAL SERVICES DEPARTMENT**

**IMPORTANT INFORMATION**

An inspection record card is issued with each building permit.

The following basic procedure will assist you in obtaining the necessary inspectional services:

1. Post card "unfolded" in a conspicuous place on the premises at all times.
2. Call for plumbing/mechanical inspection before electrical, and call for electrical inspection before building for rough inspection.
3. Call for frame inspection only after all other rough inspections have been made and signed.
4. On some jobs, it may be necessary to request inspections for a portion of the work.
  - (a) Call for partial frame inspection only after all partial rough inspections have been made and signed.
  - (b) The partial inspections will be recorded on the lined left side.
  - (c) It will show what has been approved and that it is only a partial inspection.
5. You must give your permit number when calling for inspection.

**Inspectors may be reached between 8:00 - 9:00 AM**

Permit No.

Plumbing Inspectors .....	273-3291	_____
Mechanical Inspectors .....	273-3291	_____
Electrical Inspectors .....	273-3341	_____
Building Inspectors .....	273-3441	_____

**AT NO TIME MAY ANY WORK BE COVERED OR CONCEALED IN ANY MANNER UNTIL ALL OF THE INSPECTIONS FOR WHICH PERMITS ARE REQUIRED HAVE BEEN MADE AND THE WORK APPROVED.**

The person to whom the permit is issued shall call for the final inspection when all of the permit work has been completed.

**JAMES W. BARTHMAN  
Building Official**

BOUZOS0000016



KEEP THIS CARD ON THE PREMISES ACCESSIBLE TO ALL INSPECTORS

—DO NOT FOLD CARD—

TELEPHONE 273-3444 BETWEEN 8:00-4:00 ONE DAY IN ADVANCE FOR REQUIRED INSPECTION

ALL INSPECTIONS TO BE SIGNED AND DATED

ALL PARTIAL APPROVALS REQUIRED  
BEFORE PARTIAL LATHING OR COVERING

City of Oakland

INSPECTIONAL SERVICES DEPARTMENT

SEPARATE PLUMBING MECHANICAL &  
ELECTRICAL PERMITS ARE REQUIRED

Partial Rough Plumbing

BUILDING PERMIT PB 763052

6255 COLLEGE AVE.

LOCATION

Box 205

OWNER

ALME AWNING CO.

BUILDER

AWNING

TYPE OF JOB

Total Living Units in Building 1

Date 6/17/87  
JAMES W. BARTHMAN

Building Official By Gym

Inspections

\*CALL FOR INSPECTIONS IN SEQUENCE

FORMS

REQUIRED BEFORE POURING CONCRETE

\*Rough Plumbing

\*Rough Mechanical

\*Rough Electric

\*Frame Work

ABOVE APPROVALS REQUIRED BEFORE LATHING OR COVERING

Interior Lath

REQUIRED BEFORE PLASTERING INSIDE

Exterior Lath

REQUIRED BEFORE STUCCO

Gypsum Wallboard

REQUIRED BEFORE TAPING

Partial Rough Electric

Partial Building

FINAL INSPECTION REQUIRED BEFORE OCCUPANCY  
FINAL INSPECTION NEED NOT BE CALLED  
FOR IN SEQUENCE

Final Plumbing

Final Mechanical

Final Electric

Final Building 9/14/87

BOUZOS0000017



**CITY OF OAKLAND  
INSPECTIONAL SERVICES DEPARTMENT**

**IMPORTANT INFORMATION**

An inspection record card is issued with each building permit.

The following basic procedure will assist you in obtaining the necessary inspectional services:

1. Post card "unfolded" in a conspicuous place on the premises at all times.
2. Call for plumbing/mechanical inspection before electrical, and call for electrical inspection before building for rough inspection.
3. Call for frame inspection only after all other rough inspections have been made and signed.
4. On some jobs, it may be necessary to request inspections for a portion of the work.
  - (a) Call for partial frame inspection only after all partial rough inspections have been made and signed.
  - (b) The partial inspections will be recorded on the lined left side.
  - (c) It will show what has been approved and that it is only a partial inspection.
5. You must give your permit number when calling for inspection.

**Inspectors may be reached between 8:00 - 9:00 AM**

	<u>Permit No.</u>
Plumbing Inspectors .....	273-3291 _____
Mechanical Inspectors .....	273-3291 _____
Electrical Inspectors .....	273-3341 _____
Building Inspectors .....	273-3441 _____

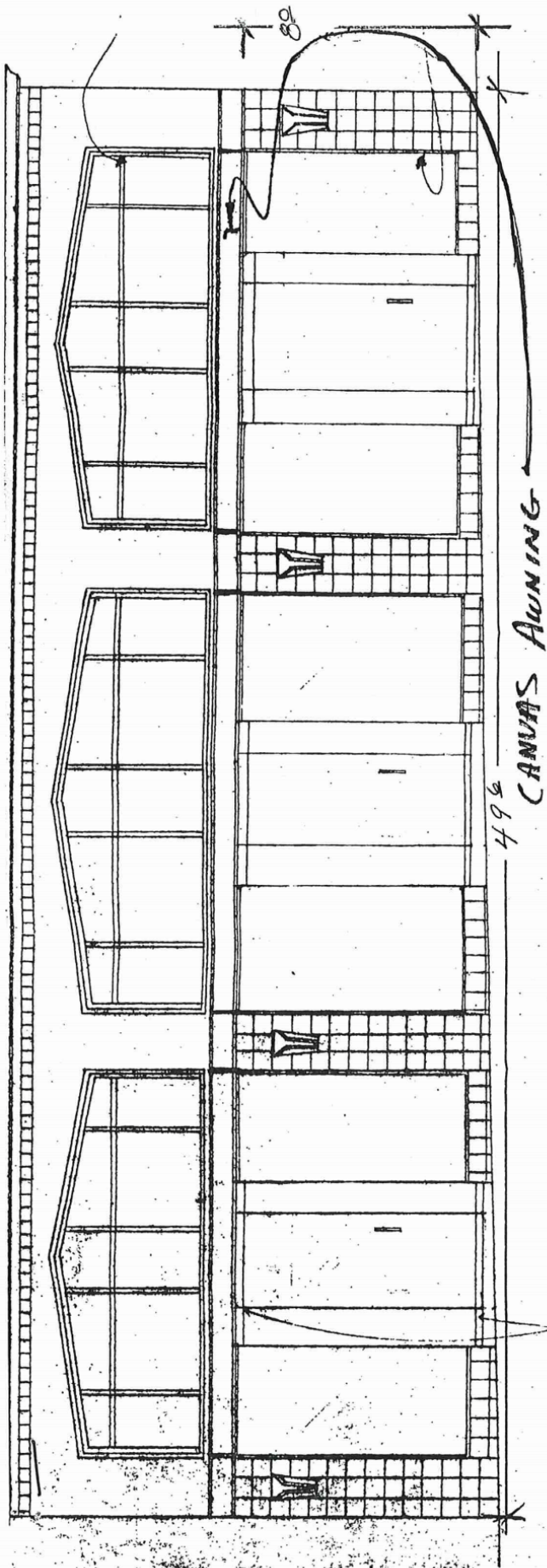
**AT NO TIME MAY ANY WORK BE COVERED OR CONCEALED IN ANY MANNER UNTIL ALL OF THE INSPECTIONS FOR WHICH PERMITS ARE REQUIRED HAVE BEEN MADE AND THE WORK APPROVED.**

The person to whom the permit is issued shall call for the final inspection when all of the permit work has been completed.

**JAMES W. BARTHMAN  
Building Official**

BOUZOS0000018

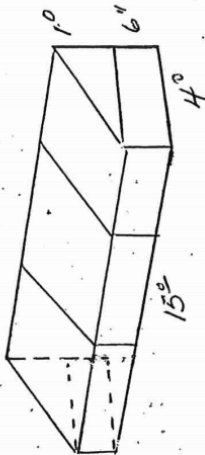




6255 COLLEGE AVE  
OAKLAND

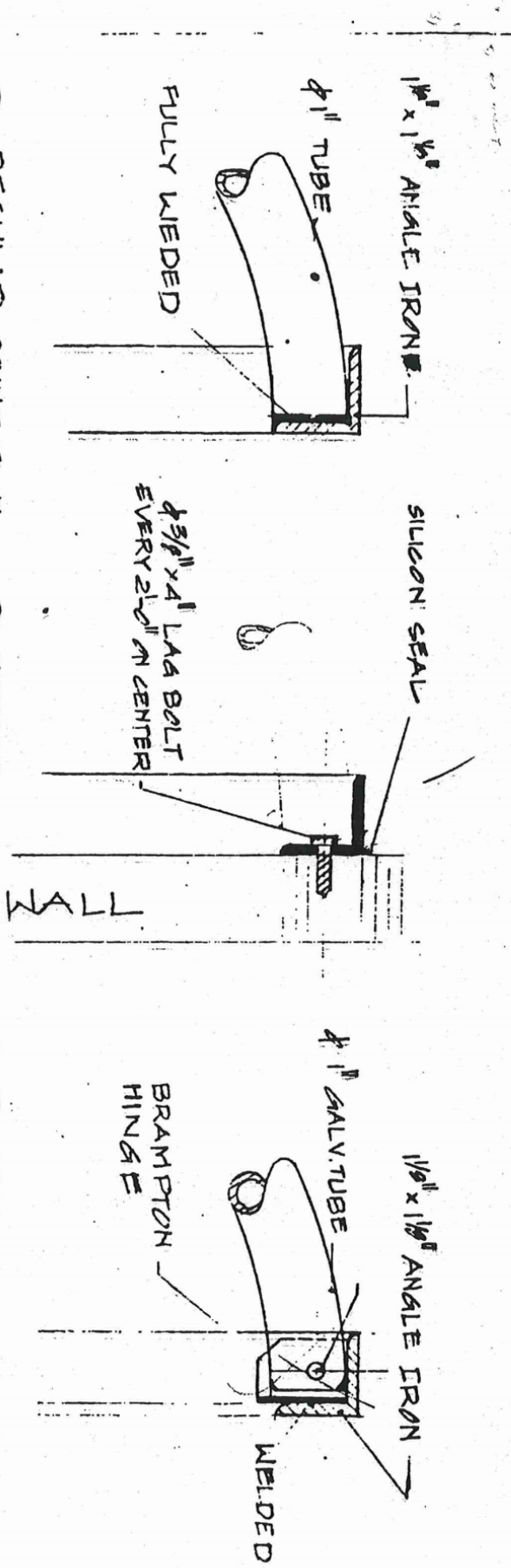
**APPROVED**  
CITY OF OAKLAND  
Inspectional Services Dept.  
Building Inspection  
(Elec. & Mech. Not Checked)  
BY *CW*

FABRIC - SALMON SUNBRELLA  
ARTWORK - NONE  
FRAME - 1 1/2" ANGLE ON WALL  
1 1/2" .065 GALVANIZED STEEL  
TUBING PERMITTED  
1" .065 GALVANIZED STEEL  
TUBING RAFTERS

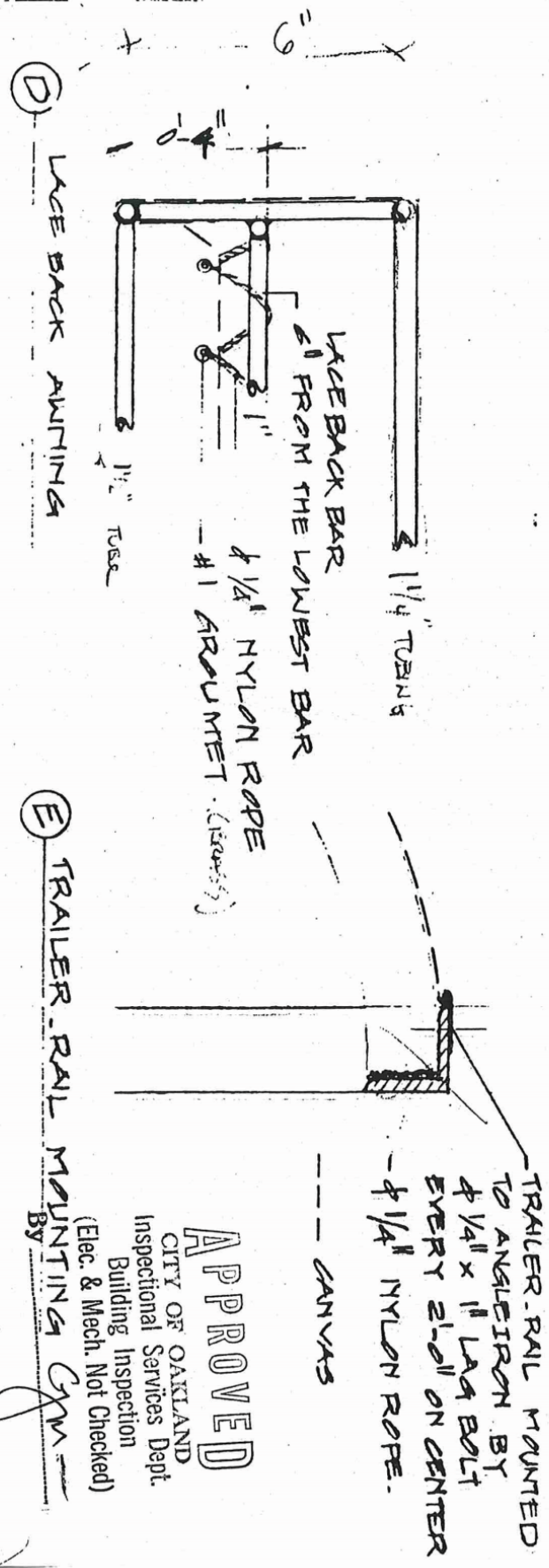


3/8" X 4" CAG-BOLT w/ EXPAND  
ING SHIELD AT  
2" O.C.

BOUZOS0000019



BOUZOS0000020



**APPROVED**  
CITY OF OAKLAND  
Inspectional Services Dept.  
Building Inspection  
(Elec. & Mech. Not Checked)  
BY Gym

SCALE 1/2" = 1"



KEEP THIS CARD ON THE PREMISES ACCESSIBLE TO ALL INSPECTORS

—DO NOT FOLD CARD—

TELEPHONE 273-3444 BETWEEN 8:00-4:00 ONE DAY IN ADVANCE FOR REQUIRED INSPECTION

ALL INSPECTIONS TO BE SIGNED AND DATED

ALL PARTIAL APPROVALS REQUIRED  
BEFORE PARTIAL LATHING OR COVERING

City of Oakland

INSPECTIONAL SERVICES DEPARTMENT

SEPARATE PLUMBING MECHANICAL &  
ELECTRICAL PERMITS ARE REQUIRED

Partial Rough Plumbing

Partial Rough Mechanical

Partial Rough Electric

Rok exc fnt 5'4-10-87 J

Partial Building

4/14/87 R OK US  
 6/25/87 stairs framing in 1st OK CS  
 6/29/87 SK OK CS  
 9/14/87 6251 College noca  
 has rails (signed at both ends  
 & not more than 6" spacing on  
 stair rail 1B - 6253 & 6255  
 final OK 1B

BUILDING PERMIT B8700510

6251-53-55 COLLEGE AVE

LOCATION

VASILIOS BOUZOS

OWNER

OWNER

BUILDER

ALTERATION

TYPE OF JOB

Total Living Units in Building

Date FEB 6 1987

JAMES W. BARTHMAN

Building Official By GJM

Inspections

\*CALL FOR INSPECTIONS IN SEQUENCE

FORMS

REQUIRED BEFORE POURING CONCRETE

\*Rough Plumbing

\*Rough Mechanical

\*Rough Electric 8-15-87 J

\*Frame Work 6/15/87 J

ABOVE APPROVALS REQUIRED BEFORE LATHING OR COVERING

Interior Lath

REQUIRED BEFORE PLASTERING INSIDE

Exterior Lath

REQUIRED BEFORE STUCCO

Gypsum Wallboard

REQUIRED BEFORE TAPING

FINAL INSPECTION REQUIRED BEFORE OCCUPANCY  
 FINAL INSPECTION NEED NOT BE CALLED  
 FOR IN SEQUENCE

Final Plumbing

Final Mechanical

Final Electric

Final Building

BOUZOS0000021



*Backley Court 3200*  
*DAVIS 2841*

**CITY OF OAKLAND**  
**INSPECTIONAL SERVICES DEPARTMENT**

**IMPORTANT INFORMATION**

*4282952*

An inspection record card is issued with each building permit.

The following basic procedure will assist you in obtaining the necessary inspectional services:

1. Post card "unfolded" in a conspicuous place on the premises at all times.
2. Call for plumbing/mechanical inspection before electrical, and call for electrical inspection before building for rough inspection.
3. Call for frame inspection only after all other rough inspections have been made and signed.
4. On some jobs, it may be necessary to request inspections for a portion of the work.
  - (a) Call for partial frame inspection only after all partial rough inspections have been made and signed.
  - (b) The partial inspections will be recorded on the lined left side.
  - (c) It will show what has been approved and that it is only a partial inspection.

*ALWAYS*  
*6356385*  
*JARVIS*  
*234 HL*

5. You must give your permit number when calling for inspection.

**Inspectors may be reached between 8:00 - 9:00 AM**

Permit No.

Plumbing Inspectors .....	273-3291	_____
Mechanical Inspectors .....	273-3291	_____
Electrical Inspectors .....	273-3341	_____
Building Inspectors .....	273-3441	_____

**AT NO TIME MAY ANY WORK BE COVERED OR CONCEALED IN ANY MANNER UNTIL ALL OF THE INSPECTIONS FOR WHICH PERMITS ARE REQUIRED HAVE BEEN MADE AND THE WORK APPROVED.**

The person to whom the permit is issued shall call for the final inspection when all of the permit work has been completed.

**JAMES W. BARTHMAN**  
 Building Official

BOUZOS0000022



## CITY OF OAKLAND



## INSPECTIONAL SERVICES DEPARTMENT

One City Hall Plaza, Room 203  
Oakland, California 94612

CORRECTION NOTICEName Vasilios BouzosAddress 6017 Chabolya JernCity-State Oakland 94618Job Location 6751 CollegePermit Number E8700399Date 9/18/87

An inspection of the subject premises on the above date revealed the following corrections and/or fees are necessary, as they do not comply with the requirements of the Oakland Code.

Section \_\_\_\_\_

6 extra visits 15 70

27 off 182  
\$9,00

Green tag & PG&E will be notified upon payment

☐ These corrections are required to be made within ten (10) days after receipt of this notice.

If there are any questions, please contact:

Name R. Kard

Title \_\_\_\_\_

PHONE: 273-3441-Building Inspection  
273-3341-Electrical Inspection  
273-3291-Plumbing Inspection  
273-3291-Mechanical Inspection



YOUR RECEIPT  
CITY OF OAKLAND  
INSPECTIONAL  
SERVICES  
DEPARTMENT

09/18/87

ELEC 112	90.00
MICR 111	1.80
SUBTOTAL	91.80
CHECK TL	91.80

NO REFUND W/O RECEIPT  
#37957 C001 R01 T15-18

BOUZOS0000024



## CITY OF OAKLAND



## INSPECTIONAL SERVICES DEPARTMENT

One City Hall Plaza, Room 203  
Oakland, California 94612

CORRECTION NOTICEName Korbes Elect.

Job Location

Address 3920 Castanova Dr.City-State San Mateo, Calif. 94403

Permit Number

Date

An inspection of the subject premises on the above date revealed the following corrections and/or fees are necessary, as they do not comply with the requirements of the Oakland Code.

Section

① Bud all plugs.

② Install ceiling fixtures.

③ Apt. #5 - ceiling fixture

④ Support fourplex J-box (6253 College)

④ Strap Service above last coupling.

☒ These corrections are required to be made within ten (10) days after receipt of this notice.

If there are any questions, please contact:

Name

Title

PHONE: 273-3441-Building Inspection  
273-3341-Electrical Inspection  
273-3291-Plumbing Inspection  
273-3291-Mechanical Inspection



AD NAME 5256054

ANN DUNLAP 8934760

W

CONNECTED TO THE  
 SYSTEM ON 11/11/11  
 BY 11/11/11 11:11:11  
 11/11/11 11:11:11



BOUZOS0000026

## CITY OF OAKLAND



CITY HALL • ONE CITY HALL PLAZA • OAKLAND, CALIFORNIA 94612

Planning Department

TTY 839-6451

March 24, 1987

Vasilias Bouzos  
6017 Chaboklyn Terrace  
Oakland, CA. 94618

RE: Case File D87-40

Dear Mr. Bouzos:

Your application for Design Review to renovate the building facade at 6251-55 College Avenue has been approved subject to the following conditions:

1. That the project be constructed according to the plans submitted on February 2, 1987 showing modification of the fire escape.
2. That street trees be provided to the satisfaction of the Director of Parks and Recreation.
3. That no signs be installed without the approval of the Director of City Planning.
4. That this approval shall terminate in one (1) year unless actual construction under valid permits commences; and that this date may be extended upon application filed at any time prior to the expiration date.

This decision becomes effective in ten (10) days unless appealed to the City Planning Commission. The appeal fee is \$45.00.

If there are any questions please contact Willie Yee, Zoning Division, 273-3911.

Very truly yours,

Alvin James, Director of  
City Planning Department

by Thomas H. Doctor, Senior Planner  
for Zoning Administration

THD:slj

cc: V. Hap Smith, Parks and Recreation  
Paul Bailey, Fire Marshal  
Chris Sudanaikis

BOUZOS0000027



## CITY OF OAKLAND



MUNICIPAL SERVICE CENTER · 7101 EDGEWATER DRIVE · OAKLAND, CALIFORNIA 94621

Office of Park & Recreation

TTY 839-6451

April 7, 1987

Mr. Vasiliias Bouzos  
6017 Chabolyn Terrace  
Oakland, California  
94618

Re: 6251/55 College Avenue  
Case File #D87-40

Dear Mr. Bouzos:

According to City Planning documents, your application for the above property has been approved, subject to the condition that street trees be provided. Based upon a recent inspection of the property, the following determinations have been made:

- That there is insufficient room for street trees because of the existing Callistemon citrinus (Bottlebrush) trees; therefore, the Street Tree Requirement shall be considered fulfilled.

If you have any further questions regarding this matter, please call me at 273-3151, 7:00 a.m. to 3:30 p.m., Monday through Friday.

Sincerely,

A handwritten signature in cursive script that reads "James P. Ryugo".

James P. Ryugo  
Arboricultural Inspector

JPR/mr

cc: W. Yee, City Planning  
C. Soudanaikis, C.D.A.

BOUZOS0000028

# EXHIBIT C



February 28, 2018

Dilan Roe, P.E.  
Alameda County Department of  
Environmental Health  
1131 Harbor Bay Parkway  
Alameda, CA 94502

Keith Nowell, P.G. C.H.G.  
Alameda County Department of  
Environmental Health  
1131 Harbor Bay Parkway  
Alameda, CA 94502

Re: ACDEH Responsive Environmental Investigation Workplan  
Red Hanger Kleaners (T10000000416)  
6235-6239 College Avenue, Oakland, CA 94618

Dear Ms. Roe and Mr. Nowell:

EnviroAssets, Inc. ("EnviroAssets") is pleased to present this workplan for the above referenced Site to respond to the requests for new soil, soil vapor, and groundwater data communicated by Ms. Roe of the Alameda County Department of Environmental Health ("ACDEH") during a January 29, 2018, meeting. During that meeting, Ms. Roe expressed that additional sampling is needed to address the ACDEH concern that former dry cleaning operations at the Property may have released the dry cleaning solvent tetrachloroethene ("PCE") to the environment.

#### **SCOPE OF WORK**

The scope of work for this investigation that is responsive to the ACDEH request for data includes:

- Scope I: Collecting samples of soil, soil gas, and groundwater samples from two locations and multiple depths within the 307 63<sup>rd</sup> Street tenant space during seismic retrofit activities (Figure 1).
- Scope II: Collecting a shallow soil gas sample within the small limited access area between 6251 College Avenue and 6241 College Avenue.
- Scope III: Subslab vapor samples will be collected from three existing vapor pins installed beneath 6251, 6253, and 6255 College Avenue.

Soil, soil gas, and groundwater will be analyzed for the family of chlorinated volatile organic compounds associated with historical dry cleaning operations - PCE, trichloroethylene (TCE), dichloroethylenes (cis- and trans-1,2-DCE), and vinyl chloride (VC), or collectively, "CVOCs" – by EPA methods applicable to the specific sample media, as detailed below.



## SCOPE I: MULTIPLE SAMPLES WITHIN 307 63<sup>RD</sup> STREET

Samples of soil, soil gas, and groundwater samples are proposed for collection from two locations within the 307 63rd Street tenant space during seismic retrofit activities (Figure 1). The following information was used to identify targeted sample depths for the investigation:

- First encountered groundwater was reported at “17 to 24 feet [below ground surface] bgs” with stabilized groundwater was reported at “16.15 to 17.8 feet bgs” in the *Supplemental Remedial Investigation Report* (LRM, September 27, 2017).
- During the sewer replacement work in the tenant space adjoining 307 63<sup>rd</sup> Street, the Property sewer lateral is expected to be at approximately five to six feet below grade.

Prior to sampling, a sewer video and location survey will be conducted to confirm the location and depth of the sanitary sewer serving the Property including any identifiable sewer lateral connections. Additionally, the utility survey will include identifiable utilities in the alleyway between the Property and 309 63<sup>rd</sup> Street, per request of the ACDEH. The following depths are anticipated for soil, soil vapor, and groundwater samples:

- Soil samples from the first native soil encountered beneath the concrete slab and base materials, anticipated for approximately 0.5-1-foot bgs. These samples will be used to support characterization of excavation soils during seismic retrofit activities that are anticipated to involve removal of approximately 12-inches of soil across the approximately 310 sf footprint of 307 63<sup>rd</sup> Street – or approximately 12 cubic yards of soil;
- Soil samples from beneath the sanitary sewer invert at approximately 7-feet bgs;
- Soil vapor samples from 7 and 15-feet bgs; and
- Grab groundwater samples at first groundwater at approximately 17-feet bgs.

Samples will be roughly co-located and completed with limited access direct push methods and submitted for chlorinated volatile organic compounds by an offsite analytical laboratory. Soil borings will be continuously cored and lithologically logged for soil type and characteristics including USCS descriptions. Soil will be collected with EnCore® or Terra Core™ samplers per EPA Method 5035A and analyzed for CVOCs in accordance with SW-846 method 8260B. Groundwater samples will be analyzed for CVOCs in accordance with SW-846 method 8260. A groundwater trip blank will be provided for analysis. Soil vapor samples will be collected using post-run tubing (“PRT”) methodology (Figure 2) in accordance with the *Advisory Active Soil Gas Investigations* (“Advisory”, DTSC, July 2015) and analyzed for CVOCs with EPA Method TO-15. As discussed in the Advisory, the PRT methodology allows soil vapor sampling within two hours of probe installation, and subsequent removal of the temporary probe. Helium will be used for leak check compound.





## **SCOPE II: SHALLOW SOIL GAS SAMPLE BETWEEN 6251 COLLEGE AVENUE AND 6241 COLLEGE AVENUE**

A small limited access space exists between 6251 College Avenue and 6241 College Avenue, accessible by ladder and side-roof traverse (Figure 1). Due to the very limited access, a single shallow soil vapor sample is proposed for this location. The soil vapor sample will be collected using PRT equipment with a targeted depth from 6.5-7 feet bgs in accordance with the *Advisory Active Soil Gas Investigations* and analyzed for CVOCs with EPA Method TO-15. Helium will be used for leak check compound.

## **SCOPE III: SUB-SLAB VAPOR SAMPLING**

Subslab vapor samples are proposed to be collected from three existing vapor pins installed beneath 6251, 6253, and 6255 College Avenue. The vapor pin currently installed in the slab at 307 63<sup>rd</sup> Street will be removed when the slab is demolished for the planned seismic retrofit and is not proposed for sampling. Samples will be collected for analysis in accordance with the *Advisory Active Soil Gas Investigations* and analyzed for CVOCs with EPA Method TO-15.

## **REPORTING**

Analytical, hydrogeological, and survey data obtained during the investigation will be summarized and provided to the ACDEH, in a format that integrates newly derived data with historical data and will provide a comprehensive evaluation of site conditions.

## **SCHEDULE**

Sampling within 307 63<sup>rd</sup> Street will be coordinated with removal of the slab and façade; anticipated during the week of March 12<sup>th</sup>, subject to contractor and permit availability. Sub-slab and shallow soil gas sample between 6251 college avenue and 6241 college avenue will be conducted as soon as reasonably achievable in association with 307 63<sup>rd</sup> Street work. The ACDEH will be provided 48-hour notice prior to the start of fieldwork.

## **LIMITATIONS**

This work plan is presented in accordance with generally accepted professional environmental practices, based on reasonably ascertainable data, and within the scope of the project. There is no other warranty, either express or implied.



Respectfully submitted,

A handwritten signature in black ink, appearing to read 'MH', written over a horizontal line.

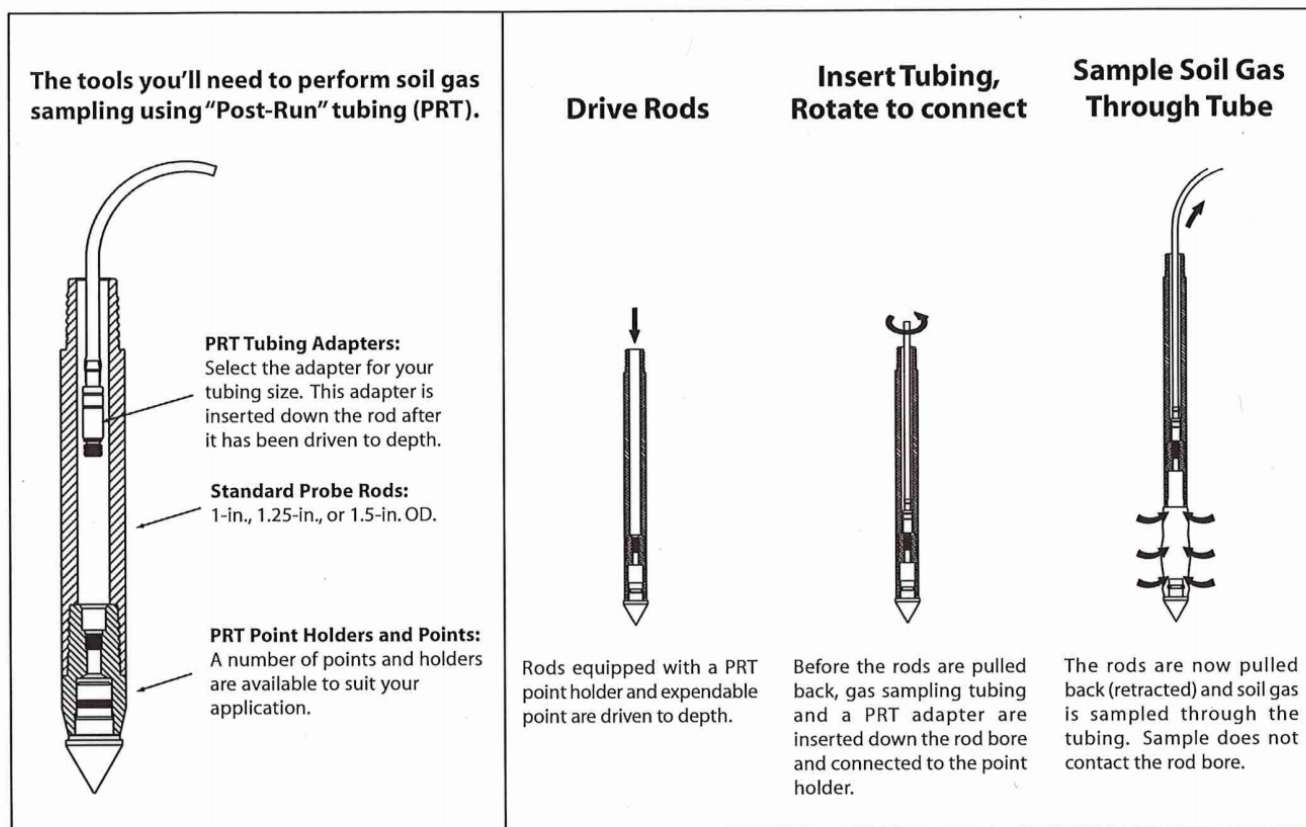
Michael Harrison, P.E.  
Principal Engineer



Attachments







**Figure 2: PRT sampling system.**



# EXHIBIT D

Bouzos  
Public Records Requests

	Records Requested From:	Date Sent	Responses	Notes
1	City of Oakland -- Public Works - Permits	2/12/2018	2/16/2018	No information provided prior to 1987. OaklandDPW001-49
2	City of Oakland - -- Public Works - Department of Planning and Building	2/12/2018	2/16/2018	No information provided prior to 1987. OaklandDPW001-49
3	City of Oakland -- Fire	2/12/2018		Pending
4	Bay Area Air Quality Management District	2/22/2018		Pending
5	Alameda County Environmental Health Dept.		5/9/2017	Documents on line and on geotracker. Documents already in county control. Not all records and files have been reviewed.
5	CUPA Records		2/23/2018	Cupa Records. No documents appear to be available for Bouzos Property. All records available related to 6235-6239 College Ave. ACDEH001-141



## Permit/Complaint History ≈ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
6239	COLLEGE	AVE	1703553	No Violation Found	8/13/2017	8/16/2017	There is a large silver metal liquid nitrogen tank behind the building along with two smaller but still large blue compression tanks that emit frightening sounds all the time. Yesterday there arrived a dozen black metal barrels. Several workers were working on these various compression tanks when one began making such alarming noises they all ran, backing away. Just wondering what kind of danger they were worried about since my son lives next door.
6239	COLLEGE	AVE	OB1701018	Expired	7/20/2017	7/31/2017	Reserve 3 NON-METERED on 63rd St 7/25/17-7/28/17 parking space(s) in front of parcel only for well drilling on private property. Post No-parking signs 72 hours prior in residential areas. No impact on traffic lane or sidewalk allowed. Comply with all terms, conditions and restrictions stated in the Traffic Control Plan. Any/all changes need prior written approval. Provide original Traffic Control Plan at each renewal. No-parking signs picked up by applicant after payment, 4TH FLOOR. To Have Illegally Parked Vehicle Ticketed Call 510-777-3333. Applicant arranges towing. Comply with terms set forth in CVC Section 22651 (m). For Towed Vehicle: Call 510-238-3021. Call Oakland Police Department and Fire Department for road closure. Contact: [REDACTED]
6239	COLLEGE	AVE	OB1701019	Expired	7/20/2017	7/31/2017	Reserve 3 METERED on 62nd St 7/26/17-7/28/17 parking space(s) in front of parcel only for well drilling on private property. Post No-parking signs 72 hours prior in residential areas. No impact on traffic lane or sidewalk allowed. Comply with all terms, conditions and restrictions stated in the Traffic Control Plan. Any/all changes need prior written approval. Provide original Traffic Control Plan at each renewal. No-parking signs picked up by applicant after payment, 4TH FLOOR. To Have Illegally Parked Vehicle Ticketed Call 510-777-3333. Applicant arranges towing. Comply with terms set forth in CVC Section 22651 (m). For Towed Vehicle: Call 510-238-3021. Call Oakland Police Department and Fire Department for road closure. Contact: [REDACTED]

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000001

## Permit/Complaint History ≈ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
6239	COLLEGE	AVE	P1602774	Final	9/29/2016	1/5/2017	PLUMBING / TI/ Float Spa and Cryo-therapy business. Renovate space to include spa treatment rooms, laundry, reception area and storage - no massage.
6239	COLLEGE	AVE	M1601851	Final	9/29/2016	1/5/2017	MECHANICAL / TI/ Float Spa and Cryo-therapy business. Renovate space to include spa treatment rooms, laundry, reception area and storage - no massage.
6239	COLLEGE	AVE	E1603621	Final	9/29/2016	1/10/2017	ELECTRICAL / TI/ Float Spa and Cryo-therapy business. Renovate space to include spa treatment rooms, laundry, reception area and storage - no massage.
6239	COLLEGE	AVE	B1603214	Final	7/8/2016	1/11/2017	TI/ Float Spa and Cryo-therapy business. Renovate space to include spa treatment rooms, laundry, reception area and storage - no massage.
6239	COLLEGE	AVE	E1601718	Final	5/13/2016	7/1/2016	INSTALL 2 - 20A 120 CIRCUITS. PERMIT BY FAX
6239	COLLEGE	AVE	ZC161049	Approved	4/28/2016	4/28/2016	Zoning clearance for a consumer service activity for a Float Spa and Cryo-therapy business. Space is on the ground floor of s street fronting building, floor are is approximately 2,400 sq.ft. activity meets provisions set forth in 17.33.01 & (L6)(L10). Sign and tenant improvements under a separate permits and approvals.
6239	COLLEGE	AVE	ZC152507	Approved	11/12/2015	11/12/2015	Zoning clearance for psychotherapy, upstairs
6239	COLLEGE	AVE	1502868	Abated	8/12/2015	1/21/2016	VACANT STOREFRONT WITH GRAFFITI ACROSS THE FRONT WINDOW & DOOR
6239	COLLEGE	AVE	OB1500745	Final	7/30/2015	8/14/2015	Reserve 4 parking spaces and divert 75' traffic per approved TCP on 63rd St. Related: Excavate bore pits on 63rd Street at College Ave per site plan. Permit valid 90 days. Separate Obstruction permit required to reserve/block parking lane. Set up PWA PRE-CON prior to start work: 510-238-3651.
6239	COLLEGE	AVE	X1501667	Expired	7/30/2015	1/28/2016	Excavate bore pits on 63rd Street at College Ave per site plan. Permit valid 90 days. Separate Obstruction permit required to reserve/block parking lane. Set up PWA PRE-CON prior to start work: 510-238-3651.

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000002



## Permit/Complaint History ≈ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
6239	COLLEGE	AVE	X1501601	Expired	7/20/2015	1/18/2016	Install new vault and bore new conduit
6239	COLLEGE	AVE	ZC151603	Approved	7/9/2015	7/9/2015	Zoning clearance for a psychotherapy business. This medical services activity is permitted per section 17.33.030. The office is on the 3rd floor.
6239	COLLEGE	AVE	ZC141115	Approved	4/30/2014	4/30/2014	Chiropractic office (Medical Service Commercial Activity) located on second floor.
6239	COLLEGE	AVE	1304040	Abated	7/25/2013	9/25/2013	UNLAWFUL PUBLIC RIGHT OF WAY ENCROACHMENT (SIGN "ALIGN CHIROPRACTIC")
6239	COLLEGE	AVE	303 ZC111642	Approved	7/11/2011	7/11/2011	Zoning Clearance for Medical Service Commercial Activity (psychotherapy - individual, couple, & family)
6239	COLLEGE	AVE	ZC111091	Approved	4/27/2011	4/27/2011	Psychotherapy office - medical service commercial - located above the ground floor is permitted in the CN-1 Zone.
6239	COLLEGE	AVE	301 ZC102525	Approved	11/18/2010	11/18/2010	Administrative Commercial Activity - Administrative office and consultancy for home based study program where clients come once or twice a week to drop off and pick up (con't) assignments. No classes or personal instruction occur on site. General office purposes include accounting, data analysis, client orientation. Office is located on 3rd floor of existing commercial building.
6239	COLLEGE	AVE	301 ZP100072	Void	11/18/2010	11/18/2010	Administrative Commercial Activity - Administrative office and consultancy for home based study program where clients come once or twice a week to drop off and pick up (con't) assignments. No classes or personal instruction occur on site. General office purposes include accounting, data analysis, client orientation.
6239	COLLEGE	AVE	303 ZC101160	Approved	5/11/2010	5/11/2010	Proposal for a psychotherapy office - medical service commercial - located above the ground floor is permitted in the C- 31 zone.
6239	COLLEGE	AVE	303 ZC081961	Approved	8/8/2008	8/8/2008	medical services above the ground floor
6239	COLLEGE	AVE	708848	Abated	12/7/2007	1/22/2009	SANDWICH BOARD SIGN (JESSICA HEBERT) LOCATED IN PUBLIC RIGHT OF WAY AND IS AN OBSTRUCTION TO PEDESTRIAN TRAFFIC.
6239	COLLEGE	AVE	201 ZC072606	Approved	10/30/2007	10/30/2007	chiropractic office (medical service).
6239	COLLEGE	AVE	P0702805	Expired	10/5/2007	10/2/2008	Plumbing for T.I., CHIROPRACTIC OFFICE, INTERIOR REMODEL
6239	COLLEGE	AVE	E0703369	Expired	10/5/2007	10/2/2008	Electrical for T.I., CHIROPRACTIC OFFICE, INTERIOR REMODEL

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000003

## Permit/Complaint History ≈ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
6239	COLLEGE	AVE	M0701812	Final	10/5/2007	11/30/2007	Mechanical for T.I., CHIROPRACTIC OFFICE, INTERIOR REMODEL
6239	COLLEGE	AVE	#201 B0703976	Final	8/24/2007	12/3/2007	T.I., CHIROPRACTIC OFFICE, INTERIOR REMODEL
6239	COLLEGE	AVE	303 ZC071586	Approved	6/26/2007	6/26/2007	Zoning clearance for a psychotherapy office on the third floor. Floor area approx. 200sqft.
6239	COLLEGE	AVE	301 ZC071268	Approved	5/15/2007	5/15/2007	Insurance and financial services. (consultative and financial services)
6239	COLLEGE	AVE	303 ZC063348	Approved	12/29/2006	12/29/2006	Counseling office - medical service above the ground floor is permitted in the C-31 Zone.
6239	COLLEGE	AVE	ZC062072	Approved	8/3/2006	8/3/2006	Zoning Clearance for business license for continuation of existing Consumer Laundry Commercial Activity (dry cleaners with on-site cleaning)
6239	COLLEGE	AVE	ZC053007	Approved	10/19/2005	10/19/2005	establish a CPA firm on the second floor
6239	COLLEGE	AVE	X9600347	Permit Issued	4/29/1996	4/29/1996	boring one hole for soil exploration
6239	COLLEGE	AVE	#201 E9100789	Expired	3/4/1991	6/23/1992	INSTALL 100AMP SERVICE AND (3) CTS - 110V AS NEEDED
6239	COLLEGE	AVE	S8900031	Expired	3/30/1989	3/14/1990	ELECTRIC WALL SIGN
6239	COLLEGE	AVE	E8900916	Final	3/30/1989	12/16/1989	NEW ELECT. SIGN
6239	COLLEGE	AVE	B8703413	Expired	7/8/1987	4/15/1992	DEVIDING OF OFFICE SUITE
6239	COLLEGE	AVE	B8702988	Expired	6/15/1987	4/15/1992	TENANT IMPROVEMENT
6239	COLLEGE	AVE	B8702989	Expired	6/15/1987	4/15/1992	TENANT IMPROVEMENT
6239	COLLEGE	AVE	E8701994	Expired	6/15/1987	4/4/1988	TENANT IMPROVEMENTS
6239	COLLEGE	AVE	E8701995	Expired	6/15/1987	4/4/1988	TENANT IMPROVEMENT #302
6255	College	AVE	ZC170395	Approved	2/15/2017	2/15/2017	to continue an existing coffee shop use
6251	COLLEGE	AVE	ZC112362	Approved	10/26/2011	10/26/2011	Zoning clearance a nail salon (convenience sales and service commercial activity) CHANGE OF OWNERSHIP
6253	COLLEGE	AVE	ZC063254	Approved	12/18/2006	12/18/2006	Hair Salon - Convenience sales and service permitted on the ground floor in the C-31 Zone.
6251	COLLEGE	AVE	ZC062959	Approved	11/14/2006	11/14/2006	Zoning clearance to establish a nail salon (convenience sales and service commercial activity)
6253	COLLEGE	AVE	ZC053330	Approved	11/29/2005	11/29/2005	Change in ownership of pre-existing hair salon - convenience sales and service commercial activity.
6251	COLLEGE	AVE	ZC051382	Approved	4/29/2005	4/29/2005	change of ownership of existing gift shop
6251	COLLEGE	AVE	ZC010167	Approved	1/26/2001	1/26/2001	General Retail (stationary, gifts, etc.)
6255	COLLEGE	AVE	E9702805	Final	9/26/1997	10/16/1997	Install 2 circuits, 21 lights. 1 switch

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000004



## Permit/Complaint History ~ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
6255	COLLEGE	AVE	B9701700	Expired	5/2/1997	5/7/1998	Add awning to (e) building
6255	COLLEGE	AVE	M9601484	Final	11/4/1996	3/5/1997	Bath fan
6255	COLLEGE	AVE	P9601632	Final	9/19/1996	3/5/1997	Plumbing for new cafe.
6255	COLLEGE	AVE	E9602625	Final	8/29/1996	3/10/1997	Electrical for T.I. to create Cafe'
6255	COLLEGE	AVE	B9602860	Final	8/1/1996	3/24/1997	Renovation of vacant existing commercial space into a general food sales cafe with sidewalk cafe.
6255	COLLEGE	AVE	CMD96068	Under Review	4/16/1996	4/16/1996	MAJOR CONDITIONAL USE PERMIT TO ALLOW A GENERAL FOOD SALES COMMERCIAL ACTIVITY WITH A SIDEWALK CAFE AND DESIGN REVIEW TO ALTER THE EXTERIOR AND INSTALL NEW SIGNS AT 6255 COLLEGE AVENUE IN THE C-31 SPECIAL RETAIL COMMERCIAL ZONE. (ENVIRONMENTAL DETERMINATION: EXEMPT; SECTION 15301, STATE CEQA GUIDELINES; MINOR ALTERATIONS TO AN EXISTING FACILITY.)
6253	COLLEGE	AVE	E8702820	Final	8/14/1987	2/16/1988	WATER HEATER
6253	COLLEGE	AVE	P8702724	Final	8/14/1987	1/19/1988	
6253	COLLEGE	AVE	B8704063	Final	8/14/1987	8/31/1987	TWO BATH WALL'S
6255	COLLEGE	AVE	B8703052	Final	6/17/1987	3/14/1988	INSTALL CANVAS AWNING
6251	COLLEGE	AVE	P8701103	Final	3/20/1987	1/19/1988	B8700510; LAWN SPRINKLER
305	63RD	ST	P1700919	Final	3/28/2017	8/16/2017	PLUMBING 25% COMBO FOR COFFEE HOUSE / 2 toilets, 3 lav basins, 6 sinks, 4 floor sinks, 3 floor drains, 1 water alteration, water heater, gas test medium, dishwasher com, grease trap, waste/vent alt com.
305	63RD	ST	M1700654	Permit Expired	3/28/2017	2/13/2018	MECHANICAL 25% COMBO FOR COFFEE HOUSE / 1 FAU, 1 fan blower to 10k cfm.
305	63RD	ST	E1701099	Final	3/28/2017	8/16/2017	ELECTRICAL 25% COMBO FOR COFFEE HOUSE / Sub panel 21 circuit/feeder, 12 incandes/LED fixtures, 10 switches, 25 receptacles, 2 fan (exhaust), 1 furnace.
305	63RD	ST	AMR1700085	AMR Approved	3/8/2017	3/14/2017	Grant For Modification for omitting required Urinal from Plumbing Fixture Count (per 2016 CPC, table 422.1, exception foot note #3 ) for a T. I. to enlarge space including remodel existing restroom for HC access and construct new HC accessible restroom. Both restrooms are Gender Neutral Facility

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000005

## Permit/Complaint History ~ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
305	63RD	ST	ZC170395	Approved	2/15/2017	2/15/2017	to continue an existing coffee shop use
305	63RD	ST	B1700393	Final	1/26/2017	9/5/2017	T. I enlarge space by opening demising wall between 6253 and 6255 college avenue, 2 new ADA Unisex bathrooms, new kitchen area. Fully Accessible shown on plans. AMR1700089, for omission of Urinal approved with conditions
305	63RD	ST	OB1601156	Expired	10/4/2016	10/23/2016	Reserve 1 METERED parking space(s) in front of parcel only for dumpster, construction vehicle, moving van or storage pod. Park at least 20 ft away from all driveways. No impact on traffic lane or sidewalk allowed. No-parking signs picked up by applicant after payment, 4TH FLOOR. To Have Illegally Parked Vehicle Ticketed Call 510-777-3333. Applicant arranges towing. Comply with terms set forth in CVC Section 22651 (m). For Towed Vehicle: Call 510-238-3021. Contact: B1604455 10/04/16
305	63RD	ST	M1601880	Permit Expired	10/4/2016	10/31/2017	MECHANICAL / Voluntary Seismic Strengthening
305	63RD	ST	P1602825	Permit Expired	10/4/2016	10/18/2017	PLUMBING / Voluntary Seismic Strengthening
305	63RD	ST	E1603685	Permit Expired	10/4/2016	10/31/2017	ELECTRICAL / Voluntary Seismic Strengthening
305	63RD	ST	B1604455	Permit Expired	9/15/2016	12/7/2017	Voluntary Seismic Strengthening
305	63RD	ST	#1 P1301260	Final	5/31/2013	8/30/2013	Plumbing for Remodel kitchen and bathroom
305	63RD	ST	#1 E1301594	Permit Issued	5/31/2013	5/31/2013	Electrical for Remodel kitchen and bathroom
305	63RD	ST	#1 B1302033	Final	5/31/2013	8/30/2013	Remodel kitchen and bathroom (non-structural)
305	63RD	ST	OB110660	Permit Issued	9/2/2011	9/2/2011	Install sidewalk canopy for pedestrian access. Canopy to comply with Standard Details M-4 & M-5 Public Works Construction. Call 510-238-7734 or 510-238-3235.
305	63RD	ST	OB110658	Permit Issued	9/2/2011	9/2/2011	Reserve metered space(s) related to Building Permit. No impact on traffic lane or sidewalk allowed. NON-CONSECUTIVE DAYS
305	63RD	ST	706898	Open	8/30/2007		DISCAHRGE COMING FROM BUILDING TO SIDE ALLEY AND UNKNOWN LIQUID WITHAN ODOR AND SUDS.
305	63RD	ST	706864	No Violation Found	8/29/2007		PIPE IS DISCHARGING WASH WATER. PIPE LOCATED BETWEEN 305 63RD AND6247 COLLEGE AVENUE
305	63RD	ST	ZC063254	Approved	12/18/2006	12/18/2006	Hair Salon - Convenience sales and service permitted on the ground floor in the C-31 Zone.
307	63RD	ST	ZC052212	Approved	7/26/2005	7/26/2005	Change in ownership of existing coffee shop

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000006

## Permit/Complaint History ≈ 1987 - Current

Address			Record #	Status	Filed Date	Status Date	Description
307	63RD	ST	OB970338	Final	7/10/1997	7/28/1997	one day (6hrs) sidewalk obstruction. customer must allow at least 5 ft. for pedestrian walkway. approved by city manager office, Larry Carsell for Kofi S. Bonner
305	63RD	ST	CGS960381	Permit Issued	10/18/1996	10/18/1996	repair sidewalk
305	63RD	ST	P9601800	Final	10/18/1996	10/23/1996	Two new water services to meters.
305	63RD	ST	P8803109	Expired	8/18/1988	10/6/1989	REPLACE EXISTING WATER MAINS WITH NEW COPPER

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

OAKLANDPW0000007



City of Oakland  
**Public Works Agency Call Center**

Service Request **5612**  
Assigned To **GOMEZ, OSVALDO**

**Service Request Information**

Request Number:	5612
Description:	Misc - Literature Request
Problem Address:	305 63RD ST
Category:	RECYCLING
Date / Time Reported:	8/13/2003 11:27:12 AM
Service Priority:	3 - Medium
Submitted To:	GOMEZ, OSVALDO
Initiated By:	GOMEZ, OSVALDO
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					8/13/2003 11:27:12 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

Opened By: Osvaldo Gomez -- Assigned To: Osvaldo Gomez -- Closed By: Osvaldo Gomez ---- Description: apt doorhangers and junk reducer -- Resolution: sent them ---- Service Day: FRIDAY -- Backyard: N -- Building Type: Business -- Schedule: Unknown ----

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **116820**Assigned To **WATSON JR., ARTHUR****Service Request Information**

Request Number:	116820
Description:	<b>Graffiti on light poles</b>
Problem Address:	<b>6251 COLLEGE AV</b>
Category:	
Date / Time Reported:	10/27/2005 9:12:51 AM
Service Priority:	3 - Medium
Submitted To:	WATSON JR., ARTHUR
Initiated By:	CLAGASCA
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					10/27/2005 9:12:51 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

Graffiti on street light pole. Resolution: completed by J.D. in 7/19/05. Initiated By: Christian Lagasca Submitted To: Arthur Watson Closed By: Christian Lagasca
---

**Public Works Agency Call Center** | (510) 615-5566
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **318663**Assigned To **LUSTER, GAY****Service Request Information**

Request Number:	318663
Description:	<b>Tree - Limb Down</b>
Problem Address:	<b>307 63RD ST</b>
Category:	TREES
Date / Time Reported:	10/14/2009 3:47:16 PM
Service Priority:	2 - High
Submitted To:	LUSTER, GAY
Initiated By:	SEBHATU, HABEN
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					10/14/2009 3:45:48 PM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>315518</b>	TREES	Trees - Limb Removal		Closed

**Q&A & Comments:**

By SEBHATU, HABEN: 10/14/2009 3:47:16 PM A LARGE LIMB DOWN AT 307 63RD STREET
--

**Public Works Agency Call Center** | (510) 615-5566[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



City of Oakland

**Public Works Agency Call Center**Service Request **351518**Assigned To **ZAHN, ROBERT C****Service Request Information**

Request Number:	351518
Description:	<b>Tree - Broken/Hanging Limb</b>
Problem Address:	<b>6239 COLLEGE AV</b>
Category:	TREES
Date / Time Reported:	10/28/2010 3:44:28 PM
Service Priority:	1 - Emergency
Submitted To:	ZAHN, ROBERT C
Initiated By:	FLEWELLEN, SARAH J
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
[REDACTED]	[REDACTED]				10/28/2010 3:43:30 PM	[REDACTED]

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>358510</b>	TREES	Trees - Limb Removal	FLORES, HERBERT E	Closed

**Q&A & Comments:**

<p>Caller: [REDACTED]</p> <p>Q: Please describe the precise location of the tree.</p> <p>A: ACROSS THE STREET FROM 6239 COLLEGE AVENUE</p> <p>Q: Is the limb blocking the street, sidewalk, or the driveway or entrance to the building?</p> <p>A: Street</p> <p>By FLEWELLEN, SARAH J: 10/28/2010 3:44:28 PM</p> <p>BROKEN HANGING LIMB ACROSS THE STREET FROM 6239 COLLEGE AVENUE. (BOTTLE BRUSH TREE)</p> <p>By FLEWELLEN, SARAH J: 10/28/2010 3:57:07 PM</p> <p>REPORTED TO ROBERT ZAHN &amp; EMAILED REQUEST TO HIM PER HIS REQUEST.</p>
---

Public Works Agency Call Center | (510) 615-5566

[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **361461**Assigned To **VAN ECK, JEFFREY A****Service Request Information**

Request Number:	361461
Description:	<b>Litter - Street Litter Container</b>
Problem Address:	<b>305 63RD ST</b>
Category:	ILLDUMP
Date / Time Reported:	2/18/2011 1:42:57 PM
Service Priority:	3 - Medium
Submitted To:	VAN ECK, JEFFREY A
Initiated By:	WONG, JASON
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
[REDACTED]	[REDACTED]				2/18/2011 1:40:43 PM	[REDACTED]

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
374528	ILLDUMP	KOCB Illegal Dumping - Illegal Dumping Removal	164-KOCB ILL DUMP-LITT-B-LM,	Closed

**Q&A & Comments:**

By WONG, JASON: 2/18/2011 1:42:57 PM  
CITIZEN REPORTING A MISSING HINGE, ON A LITTER CONTAINER, AT 305 63RD ST., AT THE CORNER OF 63RD ST. AND COLLEGE AVE., IN FRONT OF COLE'S COFFEE.

**Public Works Agency Call Center** | (510) 615-5566

[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **369800**Assigned To **WATSON JR., ARTHUR J****Service Request Information**

Request Number:	369800
Description:	<b>Graffiti on Street, Street Light, Traffic Signal,</b>
Problem Address:	<b>6253 COLLEGE AV</b>
Category:	GRAFFITI
Date / Time Reported:	5/11/2011 11:38:14 AM
Service Priority:	2 - High
Submitted To:	WATSON JR., ARTHUR J
Initiated By:	WONG, JASON
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
[REDACTED]	[REDACTED]				5/11/2011 11:37:22 AM	[REDACTED]

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>390278</b>	GRAFFITI	Graffiti - Abatement City Property	CASILLAS, JUAN M	Closed

**Q&A & Comments:**

Caller: [REDACTED] Q: Is there offensive language used in the graffiti? A: Don't Know / No Answer By WONG, JASON: 5/11/2011 11:38:14 AM CITIZEN REQUESTING REMOVAL OF GRAFFITI ON THE SIDEWALK, AT 6253 COLLEGE AVE. CITIZEN REQUESTING THE GRAFFITI BE POWER WASHED.
---

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



City of Oakland  
**Public Works Agency Call Center**

Service Request **476421**  
Assigned To **VAN ECK, JEFFREY A**

**Service Request Information**

Request Number:	476421
Description:	<b>Illegal Dumping - debris, appliances, etc.</b>
Problem Address:	<b>6253 COLLEGE AV</b>
Category:	ILLDUMP
Date / Time Reported:	8/20/2013 11:41:50 AM
Service Priority:	3 - Medium
Submitted To:	VAN ECK, JEFFREY A
Initiated By:	FLEWELLEN, SARAH J
Status:	CANCEL
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					8/20/2013 11:37:05 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

By FLEWELLEN, SARAH J: 8/20/2013 11:41:51 AM ILLEGAL DUMPING REMOVAL: CITIZEN STATES AN ABANDONED BIKE LOCKED TO A BIKE RACK WITH A UHAUL LOCK @ 6253 COLLEGE AVENUE. Caller: : Q: Are the dumped materials located on public or private property? A: Public Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane? A: NO Q: What are the contents of the illegally dumped materials? A: Bicycle By OTTEN, RUSSELL D: 8/20/2013 2:44:37 PM NOT CITY RESPONSIBILITY,NOT ILLEGALLY DUMPED
---

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **478233**Assigned To **ENGLISH, DEXTER****Service Request Information**

Request Number:	478233
Description:	<b>Illegal Dumping - debris, appliances, etc.</b>
Problem Address:	<b>6253 COLLEGE AV</b>
Category:	ILLDUMP
Date / Time Reported:	8/30/2013 2:35:37 PM
Service Priority:	3 - Medium
Submitted To:	ENGLISH, DEXTER
Initiated By:	CAI, ZHEN
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					8/30/2013 2:33:40 PM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>549101</b>	ILLDUMP	KOCB Illegal Dumping - Illegal Dumping Removal	156-KOCB ILL DUMP-COMPL-E-LM,	Closed

**Q&A & Comments:**

By CAI, ZHEN: 8/30/2013 2:35:38 PM  
 CITIZEN IS REQUESTING THE REMOVAL OF AN ABANDONED BIKE, AT 6253 COLLEGE AVENUE.  
 Caller:   
 Q: Are the dumped materials located on public or private property?  
 A: Public  
 Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane?  
 A: Don't Know / No Answer  
 Q: What are the contents of the illegally dumped materials?  
 A: Misc Debris  
 By CAI, ZHEN: 8/30/2013 2:36:15 PM  
 GIS IS DOWN.

**Public Works Agency Call Center** | (510) 615-5566
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **488493**Assigned To **MOORE SR., LELAND S****Service Request Information**

Request Number:	488493
Description:	<b>Illegal Dumping (report from SeeClickFix)</b>
Problem Address:	<b>307 63RD ST</b>
Category:	ILLDUMP
Date / Time Reported:	10/31/2013 3:01:01 PM
Service Priority:	3 - Medium
Submitted To:	MOORE SR., LELAND S
Initiated By:	SeeClickFix, Request
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
██████████					10/31/2013 3:01:01 PM	██████████

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>561771</b>	ILLDUMP	KOCB Illegal Dumping - Illegal Dumping Removal	113-KOCB ILL DUMP- PACKER-LM-B,	Closed

**Q&A & Comments:**

Reported by SeeClickFix user ██████████ on 10/31/2013 SeeClickFix Link: ██████████
Summary: Illegal Dumping
Description: Large couch illegally dumped on the sidewalk across the street from Cole Coffee -----
SeeClickFix user ██████████ commented on 10/31/2013
Correct address is across the street from 307 63rd Street
By CAI, ZHEN: 11/1/2013 11:46:05 AM
CITIZEN IS REPORTING A COUCH, ON THE SIDEWALK ACROSS FROM 307 63RD STREET.

**Public Works Agency Call Center** | (510) 615-5566[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



City of Oakland  
**Public Works Agency Call Center**

Service Request **497198**  
Assigned To **MOORE SR., LELAND S**

**Service Request Information**

Request Number:	497198
Description:	<b>Illegal Dumping - debris, appliances, etc.</b>
Problem Address:	<b>307 63RD ST</b>
Category:	ILLDUMP
Date / Time Reported:	1/5/2014 6:50:22 PM
Service Priority:	3 - Medium
Submitted To:	MOORE SR., LELAND S
Initiated By:	SeeClickFix, Request
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
██████████					1/6/2014 3:10:04 PM	██████████

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>573309</b>	ILLDUMP	KOCB Illegal Dumping - Illegal Dumping Removal	156-KOCB ILL DUMP-COMPL-E-LM,	Closed

**Q&A & Comments:**

<p>Reported by SeeClickFix user ██████████ on 01/05/2014 SeeClickFix Link: ██████████</p> <p>Summary: Illegal Dumping</p> <p>Description: Abandoned office chair discarded across the street from Cole Coffee. It is partially blocking the sidewalk in an area frequented heavily by pedestrians.</p> <p>Caller: DIANA,</p> <p>Q: Are the dumped materials located on public or private property?</p> <p>A: Public</p> <p>Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane?</p> <p>A: Don't Know / No Answer</p> <p>Q: What are the contents of the illegally dumped materials?</p> <p>A: Furniture</p> <p>By OLORTEGUI, ARTURO: 1/6/2014 3:11:26 PM</p> <p>CITIZEN IS REQUESTING THE REMOVAL OF AN OFFICE CHAIR ACROSS FROM 307 63RD STREET.</p>
---

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **497391**Assigned To **RICE, CLARENCE P****Service Request Information**

Request Number:	497391
Description:	<b>Graffiti on OTHER</b>
Problem Address:	<b>6239 COLLEGE AV</b>
Category:	OTHER
Date / Time Reported:	1/6/2014 2:51:30 PM
Service Priority:	3 - Medium
Submitted To:	RICE, CLARENCE P
Initiated By:	ORTEGA, MICHELLE
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					1/6/2014 2:48:10 PM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>575203</b>	GRAFFITI	Graffiti - Abatement Private Property	COATH, JOHN E	Closed

**Q&A & Comments:**

By ORTEGA, MICHELLE: 1/6/2014 2:51:32 PM  
 GRAFFITI ON CURB WELL OF BANK OF AMERICA PARKING LOT LOCATED AT 6239 COLLEGE AVENUE.  
 Caller: :  
 Q: What is the graffiti on?  
 A: NONE OF THESE  
 Q: Is there offensive language used in the graffiti?  
 A: Don't Know / No Answer

Public Works Agency Call Center | (510) 615-5566

[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **556026**Assigned To **THOMAS, DWAYNE A****Service Request Information**

Request Number:	556026
Description:	<b>Streets - Potholes/Depression</b>
Problem Address:	<b>305 63RD ST</b>
Category:	STREETSW
Date / Time Reported:	12/15/2014 3:02:57 PM
Service Priority:	3 - Medium
Submitted To:	THOMAS, DWAYNE A
Initiated By:	SeeClickFix, Request
Status:	Open
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
[REDACTED]					12/16/2014 1:09:37 PM	[REDACTED]
SRFirstName					12/15/2014 3:02:59 PM	[REDACTED]
SRLastName					12/16/2014 9:12:08 PM	[REDACTED]
SRFirstName	5107722435				3/12/2016 1:47:20 PM	
SRLastName						

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

Reported by SeeClickFix user [REDACTED] on 12/13/2014 SeeClickFix Link: [REDACTED]
Summary: Pothole [REDACTED]
Description: 305 63rd StreetBy OLORTEGUI, ARTURO 12/16/2014 1:10:36 PM: CITIZEN IS REPORTING POTHOLES AT 303 AND 305 63RD STREET.
Caller: [REDACTED]
Q: Is there any water coming out of it?
A: NO
Q: Is there an odor coming out of it?
A: Don't Know / No Answer
Q: Is there loose asphalt around it or is it more like smooth dip?
A: There is loose asphalt around it
Q: How large is the hole?
A: 2FT X 2FT OR LARGER
Q: Is the pothole located on a freeway on ramp or off ramp?
A: NO
Q: What were you doing when you encountered the pothole/depression?
A: Don't Know / No Answer
Q: If signage, a barricade, cone or other device covers the pothole whose name appears on it? (e.g., EBMUD)
A: NONE
OLORTEGUI, ARTURO: Combined with requests 556027COOLEY, DETRA: Combined with requests 556028,640767

Public Works Agency Call Center | (510) 615-5566

[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



City of Oakland

**Public Works Agency Call Center**Service Request **556027**Assigned To **SEECCLICKFIX, REQUEST****Service Request Information**

Request Number:	556027
Description:	<b>Pothole (report from SeeClickFix)</b>
Problem Address:	<b>307 63RD STREET</b>
Category:	STREETSW
Date / Time Reported:	12/15/2014 3:02:59 PM
Service Priority:	3 - Medium
Submitted To:	SEECCLICKFIX, REQUEST
Initiated By:	SeeClickFix, Request
Status:	CANCEL
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
------	------------	------------	-------------	------------	---------------------	----------------

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

Reported by SeeClickFix user [REDACTED] on 12/13/2014 SeeClickFix Link: [REDACTED]
Summary: Pothole [REDACTED]
Description: Also in front of 303. 63rd streetCombined to request - 556028

**Public Works Agency Call Center** | (510) 615-5566[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland  
**Public Works Agency Call Center**

Service Request **556028**  
Assigned To **FRANKLIN, LEROY J**

**Service Request Information**

Request Number:	556028
Description:	<b>Streets - Potholes/Depression</b>
Problem Address:	<b>305 63RD ST</b>
Category:	STREETSW
Date / Time Reported:	12/15/2014 3:03:00 PM
Service Priority:	3 - Medium
Submitted To:	FRANKLIN, LEROY J
Initiated By:	SeeClickFix, Request
Status:	CANCEL
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
------	------------	------------	-------------	------------	---------------------	----------------

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

<p>Reported by SeeClickFix user [REDACTED] on 12/13/2014 SeeClickFix Link: [REDACTED]</p> <p>Summary: Pothole [REDACTED]</p> <p>Description: Also at 305. 63rd streetBy OLORTEGUI, ARTURO 12/16/2014 9:13:23 PM: CITIZEN IS REPORTING A POTHOLE AT 305 63RD STREET.</p> <p>Caller: [REDACTED]</p> <p>Q: Is there any water coming out of it?  A: NO</p> <p>Q: Is there an odor coming out of it?  A: Don't Know / No Answer</p> <p>Q: Is there loose asphalt around it or is it more like smooth dip?  A: There is loose asphalt around it</p> <p>Q: How large is the hole?  A: 3FT X 2FT</p> <p>Q: Is the pothole located on a freeway on ramp or off ramp?  A: NO</p> <p>Q: What were you doing when you encountered the pothole/depression?  A: Don't Know / No Answer</p> <p>Q: If signage, a barricade, cone or other device covers the pothole whose name appears on it? (e.g., EBMUD)  A: DO NOT KNOW</p> <p>Combined to request - 556026</p>
--

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland  
**Public Works Agency Call Center**

Service Request **614420**  
Assigned To **PERSONS SR., RICKEY G**

**Service Request Information**

Request Number:	614420
Description:	<b>Parking - Meter Maintenance</b>
Problem Address:	<b>307 63RD STREET</b>
Category:	METER_REPAIR
Date / Time Reported:	11/2/2015 9:40:23 AM
Service Priority:	3 - Medium
Submitted To:	PERSONS SR., RICKEY G
Initiated By:	SeeClickFix, Request
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					11/2/2015 9:40:23 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>884187</b>	METER_REPAIR	Parking Meter -- Meter Repair/Replace	MO, KENT Y	Closed

**Q&A & Comments:**

Reported by SeeClickFix user [REDACTED] on 11/02/2015 SeeClickFix Link: [REDACTED]
Summary: Meter 6256
Description: Ince again the oakland scam.....meters take money but dont register time.....have to use a credit card so oakland can collect the fee. What a scam By CRIDDLE, DEON: 11/3/2015 2:34:26 PM CITIZEN IS REPORTING A BROKEN METER, LOCATED AT 307 63RD STREET.
Caller: [REDACTED]
Q: What is the meter ID number?
A: C6246
Q: Is the meter a multispace box or a single space pole?
A: single space pole
Q: What is the problem with the single space pole meter?
A: Meter took my money
Q: Does the problem with the meter post a safety risk?
A: NO

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



City of Oakland  
**Public Works Agency Call Center**

Service Request **624769**  
Assigned To **MOORE SR., LELAND S**

**Service Request Information**

Request Number:	624769
Description:	<b>Illegal Dumping - debris, appliances, etc.</b>
Problem Address:	<b>6239 COLLEGE AV</b>
Category:	ILLDUMP
Date / Time Reported:	12/28/2015 11:37:30 AM
Service Priority:	3 - Medium
Submitted To:	MOORE SR., LELAND S
Initiated By:	WONG, JASON
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
					12/28/2015 11:35:55 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>730997</b>	ILLDUMP	KOCB Illegal Dumping - Illegal Dumping Removal	113-KOCB ILL DUMP- PACKER-LM-B,	Closed

**Q&A & Comments:**

By WONG, JASON: 12/28/2015 11:37:30 AM  
CITIZEN REQUESTING REMOVAL OF AN OFFICE CHAIR, IN A TREE WELL, AT 6239 COLLEGE AVE.  
Caller:   
Q: Are the dumped materials located on public or private property?  
A: Public  
Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane?  
A: NO  
Q: What are the contents of the illegally dumped materials?  
A: Furniture

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland  
**Public Works Agency Call Center**

Service Request **640767**  
Assigned To **FRANKLIN, LEROY J**

**Service Request Information**

Request Number:	640767
Description:	<b>Streets - Potholes/Depression</b>
Problem Address:	<b>305 63RD ST</b>
Category:	STREETSW
Date / Time Reported:	3/12/2016 1:58:42 PM
Service Priority:	3 - Medium
Submitted To:	FRANKLIN, LEROY J
Initiated By:	FLEWELLEN, SARAH J
Status:	CANCEL
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
------	------------	------------	-------------	------------	---------------------	----------------

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
---------------	----------	-------------	-----------	-----------

**Q&A & Comments:**

<p>By FLEWELLEN, SARAH J: 3/12/2016 1:59:03 PM  CITIZEN STATES TWO VERY LARGE POTHOLES NEAR THE FRONT OF 305 63RD STREET. DANGEROUS AND HAZARDOUS IF A MOTORCYCLE HITS THE POTHOLES.  Caller: [REDACTED]  Q: Is there any water coming out of it?  A: Don't Know / No Answer  Q: Is there an odor coming out of it?  A: Don't Know / No Answer  Q: Is there loose asphalt around it or is it more like smooth dip?  A: Don't Know / No Answer  Q: How large is the hole?  A: DONT KNOW  Q: Is the pothole located on a freeway on ramp or off ramp?  A: NO  Q: What were you doing when you encountered the pothole/depression?  A: Don't Know / No Answer  Q: If signage, a barricade, cone or other device covers the pothole whose name appears on it? (e.g., EBMUD)  A: NO  By FLEWELLEN, SARAH J: 3/12/2016 1:59:40 PM  THIS IS A BIKEWAY. PRIORITY 2, SUBJECT TO CHANGE BY SUPERVISOR.  Combined to request - 556026</p>
--

**Public Works Agency Call Center** | (510) 615-5566  
[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.

City of Oakland

**Public Works Agency Call Center**Service Request **703759**Assigned To **PERSONS SR., RICKEY G****Service Request Information**

Request Number:	703759
Description:	<b>Parking - Meter Maintenance</b>
Problem Address:	<b>6239 COLLEGE AV</b>
Category:	METER_REPAIR
Date / Time Reported:	1/12/2017 8:15:37 AM
Service Priority:	2 - High
Submitted To:	PERSONS SR., RICKEY G
Initiated By:	UDO-OKON, DONNISHA
Status:	Closed
Associated Cityworks Project:	
Council District:	CCD1

**Caller Information:**

Name	Home Phone	Work Phone	Other Phone	Cell Phone	Date & Time Of Call	Customer Email
██████████					1/12/2017 8:11:24 AM	

**Related Work Orders:**

Work Order Id	Category	Description	Submit To	WO Status
<b>892887</b>	METER_REPAIR	Parking Meter -- Meter Repair/Replace	COUCH, PETER J	Closed

**Q&A & Comments:**

<p>By UDO-OKON, DONNISHA: 1/12/2017 8:15:37 AM  CITIZEN IS REPORTING PARKING KIOSK #CO6200-1 DID NOT GIVE A RECEIPT LOCATED AT 6239 COLLEGE AVENUE. PER CITIZEN, THE CONCRETE AROUND THE PARKING KIOSK IS CRUMBLING AND IT CAN BE TIPPED OVER.  Caller: ██████████ :  Q: What is the meter ID number?  A: CO6200-1  Q: Is the meter a multispace box or a single space pole?  A: multispace box  Q: What is the problem with the multispace box meter?  A: Meter did not give a receipt  Q: Does the problem with the meter post a safety risk?  A: YES</p>
---

**Public Works Agency Call Center** | (510) 615-5566[www.oaklandpw.com](http://www.oaklandpw.com) | [pwacallcenter@oaklandnet.com](mailto:pwacallcenter@oaklandnet.com) | Mobile app: [SeeClickFix](#)

The City of Oakland Public Works Agency is an American Public Works Association Accredited Agency.



**Work Order 315518**

<b>Work Order ID #</b>	<b>315518</b>
<b>Work Order Category</b>	<b>TREES</b>
<b>Work Order Description</b>	<b>Trees - Limb Removal</b>
<b>Work Order Address</b>	<b>307 63RD ST</b>
<b>Submit To</b>	
From Request 318663: Code: LIMB_DOWN Description: Tree - Limb Down Details: Comments: By SEBHATU, HABEN: 10/14/2009 3:47:16 PM A LARGE LIMB DOWN AT 307 63RD STREET	
<b>Priority</b>	<b>2 - High</b>
<b>Supervisor</b>	
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	POHIVA, KAPELIELI
<b>Initiated Date</b>	12/18/2009 9:12:17 AM
<b>Actual Start Date</b>	10/13/2009 9:12:23 AM
<b>Actual Finish Date</b>	10/14/2009 9:12:23 AM
<b>Police Beat</b>	12Y
<b>Service Delivery District</b>	2
<b>City Council District</b>	CCD1
<b>Total Entities (GIS Assets) on Work Order</b>	1
<b>Units Accomplished</b>	0
<b>Units Accomplished Description</b>	
<b>Total Work Order Cost</b>	\$153.01
<b>Total Of Work Order Labor Costs</b>	\$77.36
<b>Total Of Work Order Material Costs</b>	\$0.00
<b>Total Of Work Order Equipment Costs</b>	\$75.65

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$25.38	ADAME, JAVIER G	0.50	10/13/2009 9:12:57 AM	10/14/2009 9:12:57 AM
\$32.60	DOCKTER, GLENN	0.50	10/13/2009 9:12:57 AM	10/14/2009 9:12:57 AM
\$19.38	JONES JR., ROBERT L	0.50	10/13/2009 9:12:57 AM	10/14/2009 9:12:57 AM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E L
\$11.25	4008 - KNUCKLE BOOM TRUCK WITH CHIPPER BODY	4008	0.50	10/13/2009 9:13:37 AM	10/14/2009 9:13:37 AM	\$
\$5.90	4079 - AERIAL 55FT WITH CHIPPER BODY	4079	0.50	10/13/2009 9:13:37 AM	10/14/2009 9:13:37 AM	\$
\$15.50		4849	0.50			\$

	4849 - FLATBED DUMP WITH CHIPPER BODY			10/13/2009 9:13:37 AM	10/14/2009 9:13:37 AM	
\$43.00	7530 - 07-BANDIT 250XP TRIALER MOUNTED CHIPPER	7530	0.50	10/13/2009 9:13:37 AM	10/14/2009 9:13:37 AM	\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	------------------	-------------------

**Entities**

Entity UID	Entity Type
0	TREES_CITYWIDE

**Custom Fields**

Custom Field Names	Custom Field Value
PRUNING REASONS	
PRUNING TYPES	
TREE DESIGNATION	
PERMIT TYPE	
PERMIT NUMBER	
CUSTOM PRIORITY	
CAUSE OF DAMAGE	NormWT
PRUNING REASONS 2	
PRIVATE PROPERTY?	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
318663	Tree - Limb Down	2 - High	307 63RD ST	10/14/2009 3:47:16 PM	LUSTER, GAY	1

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phc
██████	██████			██████		

**Work Order 358510**

<b>Work Order ID #</b>	<b>358510</b>
<b>Work Order Category</b>	<b>TREES</b>
<b>Work Order Description</b>	<b>Trees - Limb Removal</b>
<b>Work Order Address</b>	<b>6239 COLLEGE AV</b>
<b>Submit To</b>	<b>FLORES, HERBERT E</b>
From Request 351518: Code: LIMB_BROKEN_HANGING Description: Tree - Broken/Hanging Limb Details: Comments: Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> Q: Please describe the precise location of the tree. A: ACROSS THE STREET FROM 6239 COLLEGE AVENUE Q: Is the limb blocking the street, sidewalk, or the driveway or entrance to the building? A: Street By FLEWELLEN, SARAH J: 10/28/2010 3:44:28 PM BROKEN HANGING LIMB ACROSS THE STREET FROM 6239 COLLEGE AVENUE. (BOTTLE BRUSH TREE)  By FLEWELLEN, SARAH J: 10/28/2010 3:57:07 PM REPORTED TO ROBERT ZAHN & EMAILED REQUEST TO HIM PER HIS REQUEST.  By LIZARRAGA, GEORGE: 11/1/2010 11:33:54 AM (M) Bottlebrush - removed a BHL over the street.	
<b>Priority</b>	<b>1 - Emergency</b>
<b>Supervisor</b>	<b>ZAHN, ROBERT C</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>LIZARRAGA, GEORGE</b>
<b>Initiated Date</b>	<b>11/1/2010 8:41:19 AM</b>
<b>Actual Start Date</b>	<b>10/29/2010 7:00:00 AM</b>
<b>Actual Finish Date</b>	<b>10/29/2010 7:45:00 AM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>1</b>
<b>Units Accomplished Description</b>	<b>Units (Trees)</b>
<b>Total Work Order Cost</b>	<b>\$185.05</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$94.82</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$90.23</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$47.41	ADAME, JAVIER G	0.75	10/29/2010 11:38:24 AM	10/29/2010 11:38:24 AM
\$47.41	KAUTZER, PAUL T	0.75	10/29/2010 11:38:24 AM	10/29/2010 11:38:24 AM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E L



\$16.88	4008 - KNUCKLE BOOM TRUCK WITH CHIPPER BODY	4008	0.75	10/29/2010 11:39:00 AM	10/29/2010 11:39:00 AM	\$
\$8.85	4079 - AERIAL 55FT WITH CHIPPER BODY	4079	0.75	10/29/2010 11:39:00 AM	10/29/2010 11:39:00 AM	\$
\$64.50	7532 - 07-BANDIT 250XP TRIALER MOUNTED CHIPPER	7532	0.75	10/29/2010 11:39:00 AM	10/29/2010 11:39:00 AM	\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	---------------	----------------

**Entities**

Entity UID	Entity Type
0	TREES_CITYWIDE

**Custom Fields**

Custom Field Names	Custom Field Value
PRUNING REASONS	
PRUNING TYPES	
TREE DESIGNATION	
PERMIT TYPE	
PERMIT NUMBER	
CUSTOM PRIORITY	
CAUSE OF DAMAGE	NormWT
PRUNING REASONS 2	
PRIVATE PROPERTY?	
BIRDS NESTING AT TIME OF WORK?	No

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To
351518	Tree - Broken/Hanging Limb	1 - Emergency	6239 COLLEGE AV	10/28/2010 3:44:28 PM	ZAHN, ROBERT C

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone

**Work Order 374528**

<b>Work Order ID #</b>	<b>374528</b>
<b>Work Order Category</b>	<b>ILLDUMP</b>
<b>Work Order Description</b>	<b>KOCB Illegal Dumping - Illegal Dumping Removal</b>
<b>Work Order Address</b>	<b>305 63RD ST</b>
<b>Submit To</b>	<b>164-KOCB ILL DUMP-LITT-B-LM,</b>
From: Request ID: 361461, 2/18/2011 2:02:03 PM LIT_CONTAINER Litter - Street Litter Container Problem Details: Problem Comments: By WONG, JASON: 2/18/2011 1:42:57 PM CITIZEN REPORTING A MISSING HINGE, ON A LITTER CONTAINER, AT 305 63RD ST., AT THE CORNER OF 63RD ST. AND COLLEGE AVE., IN FRONT OF COLE'S COFFEE.	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>VAN ECK, JEFFREY A</b>
<b>Initiated Date</b>	<b>2/18/2011 2:02:08 PM</b>
<b>Actual Start Date</b>	<b>2/23/2011 12:00:00 AM</b>
<b>Actual Finish Date</b>	<b>2/23/2011 12:00:00 AM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>1</b>
<b>Units Accomplished Description</b>	
<b>Total Work Order Cost</b>	<b>\$54.17</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$27.67</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$26.50</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$27.67	TATOM, TERRY J	0.50	2/23/2011 1:17:45 PM	2/23/2011 1:17:45 PM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E
\$26.50	4826 - PICKUP DUMP 4X2 3/4T	4826	0.50	2/23/2011 1:19:45 PM	2/23/2011 1:19:45 PM	\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	---------------	----------------

**Entities**

Entity UID	Entity Type
10862	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
(LEO) EVIDENCE COLLECTED?	
(CREW) # OF APPLIANCES	
(CREW) # OF TIRES	
(CREW) # OF E-WASTE	
(CREW) # OF MATTRESSES/BOXSPR	
(CREW) CY CONSTRUCTION DEBRIS	
(CREW) CY OF OTHER DEBRIS	
CAUSE OF DAMAGE	NormWT
(CREW) CY FURNITURE	
(LEO) CASE #	
(CREW) CY HOUSEHOLD WASTE	
(LEO) SIGNATURE / DATE	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
361461	Litter - Street Litter Container	3 - Medium	305 63RD ST	2/18/2011 1:42:57 PM	VAN ECK, JEFFREY A	II

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone



**Work Order 390278**

<b>Work Order ID #</b>	<b>390278</b>
<b>Work Order Category</b>	<b>GRAFFITI</b>
<b>Work Order Description</b>	<b>Graffiti - Abatement City Property</b>
<b>Work Order Address</b>	<b>6253 COLLEGE AV</b>
<b>Submit To</b>	<b>CASILLAS, JUAN M</b>
From: Request ID: 369800, 5/11/2011 9:15:42 PM GR_ROW Graffiti on Street, Street Light, Traffic Signal, Problem Details: Problem Comments: Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> Q: Is there offensive language used in the graffiti? A: Don't Know / No Answer By WONG, JASON: 5/11/2011 11:38:14 AM CITIZEN REQUESTING REMOVAL OF GRAFFITI ON THE SIDEWALK, AT 6253 COLLEGE AVE. CITIZEN REQUESTING THE GRAFFITI BE POWER WASHED.  By CASILLAS, JUAN M: 6/22/2011 2:38:49 PM We use waterbllaastre 8840 W/20/Gall /Water /App.	
<b>Priority</b>	<b>2 - High</b>
<b>Supervisor</b>	<b>WATSON JR., ARTHUR J</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>FOSTER, FRANK D</b>
<b>Initiated Date</b>	<b>5/11/2011 9:15:55 PM</b>
<b>Actual Start Date</b>	<b>6/22/2011 12:00:00 AM</b>
<b>Actual Finish Date</b>	<b>6/22/2011 2:37:00 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>145</b>
<b>Units Accomplished Description</b>	<b>Square Feet</b>
<b>Total Work Order Cost</b>	<b>\$201.99</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$130.13</b>
<b>Total Of Work Order Material Costs</b>	<b>\$11.48</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$60.38</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$61.64	CASILLAS, JUAN M	0.75	6/22/2011 2:31:53 PM	6/22/2011 2:31:53 PM
\$68.49	BLAKE, HAYWARD H	0.75	6/22/2011 2:32:46 PM	6/22/2011 2:32:46 PM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E L
\$39.75	4821 - PICKUP DUMP 4X2 3/4T	4821	0.75	6/22/2011 2:34:31 PM	6/22/2011 2:34:31 PM	\$
\$20.63	8811 - PRESSURE WASHER 600GAL	8811	0.75	6/22/2011 2:35:22 PM	6/22/2011 2:35:22 PM	\$

**Material**

--	--	--	--	--	--	--

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
\$11.48	Mason Master	MASON MASTER	\$22.96	0.50

**Entities**

Entity UID	Entity Type
7269	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
# OF ITEMS	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
369800	Graffiti on Street, Street Light, Traffic Signal,	2 - High	6253 COLLEGE AV	5/11/2011 11:38:14 AM	WATSON JR., ARTHUR J	C

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone

**Work Order 549101**

<b>Work Order ID #</b>	<b>549101</b>
<b>Work Order Category</b>	<b>ILLDUMP</b>
<b>Work Order Description</b>	<b>KOCB Illegal Dumping - Illegal Dumping Removal</b>
<b>Work Order Address</b>	<b>6253 COLLEGE AV</b>
<b>Submit To</b>	<b>156-KOCB ILL DUMP-COMPL-E-LM,</b>
From Request 478233: Code: LIT_ILL_DUMP Description: Illegal Dumping - debris, appliances, etc. Details: Comments: By CAI, ZHEN: 8/30/2013 2:35:38 PM CITIZEN IS REQUESTING THE REMOVAL OF AN ABANDONED BIKE, AT 6253 COLLEGE AVENUE. Caller: [REDACTED]: Q: Are the dumped materials located on public or private property? A: Public Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane? A: Don't Know / No Answer Q: What are the contents of the illegally dumped materials? A: Misc Debris By CAI, ZHEN: 8/30/2013 2:36:15 PM GIS IS DOWN.	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>VAN ECK, JEFFREY A</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>OTTEN, RUSSELL D</b>
<b>Initiated Date</b>	<b>8/30/2013 2:56:49 PM</b>
<b>Actual Start Date</b>	<b>8/31/2013 3:44:04 PM</b>
<b>Actual Finish Date</b>	<b>8/31/2013 3:44:08 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>3</b>
<b>Units Accomplished Description</b>	<b>Cubic Yards</b>
<b>Total Work Order Cost</b>	<b>\$81.25</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$41.50</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$39.75</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$41.50	SON, LEATHOL C	0.75	8/31/2013 3:42:12 PM	8/31/2013 3:42:15 PM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E L
\$39.75	4828 - PICKUP DUMP 4X2 3/4T	4828	0.75	8/31/2013 3:42:12 PM	8/31/2013 3:42:15 PM	\$



**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	---------------	----------------

**Entities**

Entity UID	Entity Type
7269	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
(LEO) EVIDENCE COLLECTED?	
(CREW) # OF APPLIANCES	
(CREW) # OF TIRES	
(CREW) # OF E-WASTE	
(CREW) # OF MATTRESSES/BOXSPR	
(CREW) CY CONSTRUCTION DEBRIS	
(CREW) CY OF OTHER DEBRIS	
CAUSE OF DAMAGE	Normal Wear and Tear
(CREW) CY FURNITURE	
(LEO) CASE #	
(CREW) CY HOUSEHOLD WASTE	
(LEO) SIGNATURE / DATE	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
478233	Illegal Dumping - debris, appliances, etc.	3 - Medium	6253 COLLEGE AV	8/30/2013 2:35:37 PM	ENGLISH, DEXTER	I

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone

**Work Order 561771**

<b>Work Order ID #</b>	<b>561771</b>
<b>Work Order Category</b>	<b>ILLDUMP</b>
<b>Work Order Description</b>	<b>KOCB Illegal Dumping - Illegal Dumping Removal</b>
<b>Work Order Address</b>	<b>307 63RD ST</b>
<b>Submit To</b>	<b>113-KOCB ILL DUMP-PACKER-LM-B,</b>
From Request 488493: Code: ILLDUMP_SCF Description: Illegal Dumping (report from SeeClickFix) Details: Illegal Dumping Comments: Reported by SeeClickFix user [REDACTED] a on 10/31/2013 SeeClickFix Link: [REDACTED] Summary: Illegal Dumping Description: Large couch illegally dumped on the sidewalk across the street from Cole Coffee ----- SeeClickFix user [REDACTED] commented on 10/31/2013 Correct address is across the street from 307 63rd Street By CAI, ZHEN: 11/1/2013 11:46:05 AM CITIZEN IS REPORTING A COUCH, ON THE SIDEWALK ACROSS FROM 307 63RD STREET.  By ZEINO, PASCAL: 11/2/2013 3:26:02 PM nothing found	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>MOORE SR., LELAND S</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>BROWN, LORENZO</b>
<b>Initiated Date</b>	<b>11/1/2013 12:06:37 PM</b>
<b>Actual Start Date</b>	<b>11/2/2013 3:25:45 PM</b>
<b>Actual Finish Date</b>	<b>11/2/2013 3:25:47 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>3</b>
<b>Units Accomplished Description</b>	<b>Cubic Yards</b>
<b>Total Work Order Cost</b>	<b>\$86.75</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$83.00</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$3.75</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$41.50	ZEINO, PASCAL	0.75	11/2/2013 3:24:38 PM	11/2/2013 3:24:40 PM
\$41.50	ALMGALEH, BASSAM	0.75	11/2/2013 3:24:38 PM	11/2/2013 3:24:40 PM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E
\$3.75	4693 - REFUSE PACKER 25YD	4693	0.75	11/2/2013 3:24:38 PM	11/2/2013 3:24:40 PM	\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	---------------	----------------

**Entities**

Entity UID	Entity Type
0	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
(LEO) EVIDENCE COLLECTED?	
(CREW) # OF APPLIANCES	
(CREW) # OF TIRES	
(CREW) # OF E-WASTE	
(CREW) # OF MATTRESSES/BOXSPR	
(CREW) CY CONSTRUCTION DEBRIS	
(CREW) CY OF OTHER DEBRIS	
CAUSE OF DAMAGE	Normal Wear and Tear
(CREW) CY FURNITURE	
(LEO) CASE #	
(CREW) CY HOUSEHOLD WASTE	
(LEO) SIGNATURE / DATE	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
488493	Illegal Dumping (report from SeeClickFix)	3 - Medium	307 63RD ST	10/31/2013 3:01:01 PM	MOORE SR., LELAND S	II

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other I



**Work Order 571848**

<b>Work Order ID #</b>	<b>571848</b>
<b>Work Order Category</b>	<b>GRAFFITI</b>
<b>Work Order Description</b>	<b>Graffiti - Abatement City Property</b>
<b>Work Order Address</b>	<b>6253 COLLEGE AV</b>
<b>Submit To</b>	<b>ROBINSON, CHRIS B</b>
From Request 496136: Code: GR_ROW Description: Graffiti on Street, Street Light, Traffic Signal, Details: Comments: By WONG, JASON: 12/26/2013 12:42:36 PM CITIZEN REQUESTING REMOVAL OF GRAFFITI, ON THE SIDEWALK, AND A SIDEWALK BENCH, AT 6253 COLLEGE AVE. Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> : Q: Is there offensive language used in the graffiti? A: Don't Know / No Answer	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>RICE, CLARENCE P</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>RICE, CLARENCE P</b>
<b>Initiated Date</b>	<b>12/26/2013 2:42:50 PM</b>
<b>Actual Start Date</b>	<b>12/30/2013 1:59:39 PM</b>
<b>Actual Finish Date</b>	<b>12/30/2013 2:00:06 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>500</b>
<b>Units Accomplished Description</b>	<b>Square Feet</b>
<b>Total Work Order Cost</b>	<b>\$151.52</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$82.18</b>
<b>Total Of Work Order Material Costs</b>	<b>\$5.34</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$64.00</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$82.18	ROBINSON, CHRIS B	1.00		

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E C
\$53.00	4821 - PICKUP DUMP 4X2 3/4T	4821	1.00			\$
\$11.00	8837 - Water Trailer	8837	1.00			\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
\$4.59	Mason Master	MASON MASTER	\$22.95	0.20
\$0.75	WATER	WATER	\$0.01	75.00

**Entities**

Entity UID	Entity Type
7269	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
# OF ITEMS	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
496136	Graffiti on Street, Street Light, Traffic Signal,	2 - High	6253 COLLEGE AV	12/26/2013 12:42:36 PM	RICE, CLARENCE P	C

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Oth Phc

**Work Order 573309**

<b>Work Order ID #</b>	<b>573309</b>
<b>Work Order Category</b>	<b>ILLDUMP</b>
<b>Work Order Description</b>	<b>KOCB Illegal Dumping - Illegal Dumping Removal</b>
<b>Work Order Address</b>	<b>307 63RD ST</b>
<b>Submit To</b>	<b>156-KOCB ILL DUMP-COMPL-E-LM,</b>
<p>From Request 497198:  Code: LIT_ILL_DUMP  Description: Illegal Dumping - debris, appliances, etc.  Details: Illegal Dumping  Comments: Reported by SeeClickFix user [REDACTED] on 01/05/2014 SeeClickFix Link:  [REDACTED]  Summary: Illegal Dumping  Description: Abandoned office chair discarded across the street from Cole Coffee. It is partially blocking the sidewalk in an area frequented heavily by pedestrians.  Caller: [REDACTED]  Q: Are the dumped materials located on public or private property?  A: Public  Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane?  A: Don't Know / No Answer  Q: What are the contents of the illegally dumped materials?  A: Furniture</p> <p>By OLORTEGUI, ARTURO: 1/6/2014 3:11:26 PM  CITIZEN IS REQUESTING THE REMOVAL OF AN OFFICE CHAIR ACROSS FROM 307 63RD STREET.</p>	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>MOORE SR., LELAND S</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>BROWN, LORENZO</b>
<b>Initiated Date</b>	<b>1/6/2014 3:32:42 PM</b>
<b>Actual Start Date</b>	<b>1/9/2014 11:27:26 AM</b>
<b>Actual Finish Date</b>	<b>1/9/2014 11:27:29 AM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>1</b>
<b>Units Accomplished Description</b>	<b>Cubic Yards</b>
<b>Total Work Order Cost</b>	<b>\$81.25</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$41.50</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$39.75</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$41.50	DEVERS, FRIZZELL IV	0.75	1/9/2014 12:00:00 AM	1/9/2014 12:00:00 AM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E C
----------------	-------------	----------	-------	------------	-------------	-----



\$39.75	4819 - PICKUP DUMP 4X2 3/4T	4819	0.75	1/9/2014 12:00:00 AM	1/9/2014 12:00:00 AM	\$
---------	--------------------------------	------	------	-------------------------	-------------------------	----

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	---------------	----------------

**Entities**

Entity UID	Entity Type
10862	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
(LEO) EVIDENCE COLLECTED?	
(CREW) # OF APPLIANCES	
(CREW) # OF TIRES	
(CREW) # OF E-WASTE	
(CREW) # OF MATTRESSES/BOXSPR	
(CREW) CY CONSTRUCTION DEBRIS	
(CREW) CY OF OTHER DEBRIS	
CAUSE OF DAMAGE	Normal Wear and Tear
(CREW) CY FURNITURE	
(LEO) CASE #	
(CREW) CY HOUSEHOLD WASTE	
(LEO) SIGNATURE / DATE	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
497198	Illegal Dumping - debris, appliances, etc.	3 - Medium	307 63RD ST	1/5/2014 6:50:22 PM	MOORE SR., LELAND S	II

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other

**Work Order 575203**

<b>Work Order ID #</b>	<b>575203</b>
<b>Work Order Category</b>	<b>GRAFFITI</b>
<b>Work Order Description</b>	<b>Graffiti - Abatement Private Property</b>
<b>Work Order Address</b>	<b>6239 COLLEGE AV</b>
<b>Submit To</b>	<b>COATH, JOHN E</b>
From Request 497391: Code: GR_GENERAL Description: Graffiti on OTHER Details: Comments: By ORTEGA, MICHELLE: 1/6/2014 2:51:32 PM GRAFFITI ON CURB WELL OF BANK OF AMERICA PARKING LOT LOCATED AT 6239 COLLEGE AVENUE. Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> Q: What is the graffiti on? A: NONE OF THESE Q: Is there offensive language used in the graffiti? A: Don't Know / No Answer	
<b>Priority</b>	<b>2 - High</b>
<b>Supervisor</b>	<b>RICE, CLARENCE P</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>RICE, CLARENCE P</b>
<b>Initiated Date</b>	<b>1/15/2014 12:44:41 PM</b>
<b>Actual Start Date</b>	<b>1/16/2014 2:25:26 PM</b>
<b>Actual Finish Date</b>	<b>1/16/2014 2:25:27 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>40</b>
<b>Units Accomplished Description</b>	<b>Square Feet</b>
<b>Total Work Order Cost</b>	<b>\$315.23</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$182.64</b>
<b>Total Of Work Order Material Costs</b>	<b>\$4.59</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$128.00</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$182.64	COATH, JOHN E	2.00	1/16/2014 12:00:00 AM	1/16/2014 12:00:00 AM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E C
\$106.00	4821 - PICKUP DUMP 4X2 3/4T	4821	2.00	1/16/2014 12:00:00 AM	1/16/2014 12:00:00 AM	\$
\$22.00	8840 - Water Trailer	8840	2.00	1/16/2014 12:00:00 AM	1/16/2014 12:00:00 AM	\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required

\$4.59	Mason Master	MASON MASTER	\$22.95	0.20
--------	--------------	--------------	---------	------

**Entities**

Entity UID	Entity Type
048A706900901	AC_PARCELS_ASSESSOR

**Custom Fields**

Custom Field Names	Custom Field Value
# OF ITEMS	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	
497391	Graffiti on OTHER	3 - Medium	6239 COLLEGE AV	1/6/2014 2:51:30 PM	RICE, CLARENCE P	

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone



**Work Order 730997**

<b>Work Order ID #</b>	<b>730997</b>
<b>Work Order Category</b>	<b>ILLDUMP</b>
<b>Work Order Description</b>	<b>KOCB Illegal Dumping - Illegal Dumping Removal</b>
<b>Work Order Address</b>	<b>6239 COLLEGE AV</b>
<b>Submit To</b>	<b>113-KOCB ILL DUMP-PACKER-LM-B,</b>
From Request 624769: Code: LIT_ILL_DUMP Description: Illegal Dumping - debris, appliances, etc. Details: Comments: By WONG, JASON: 12/28/2015 11:37:30 AM CITIZEN REQUESTING REMOVAL OF AN OFFICE CHAIR, IN A TREE WELL, AT 6239 COLLEGE AVE. Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> Q: Are the dumped materials located on public or private property? A: Public Q: Are the dumped materials in the middle of the roadway BLOCKING through traffic in a traffic lane? A: NO Q: What are the contents of the illegally dumped materials? A: Furniture  By LEAL, ANDRES: 12/30/2015 1:30:01 PM nothing found	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>MOORE SR., LELAND S</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>ENGLISH, DEXTER</b>
<b>Initiated Date</b>	<b>12/28/2015 4:45:03 PM</b>
<b>Actual Start Date</b>	<b>12/30/2015 1:24:25 PM</b>
<b>Actual Finish Date</b>	<b>12/30/2015 1:24:28 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>0.1</b>
<b>Units Accomplished Description</b>	<b>Cubic Yards</b>
<b>Total Work Order Cost</b>	<b>\$81.05</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$77.30</b>
<b>Total Of Work Order Material Costs</b>	<b>\$0.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$3.75</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$35.80	LEAL, ANDRES	0.75	12/30/2015 12:00:00 AM	12/30/2015 12:00:00 AM
\$41.50	CONTI, DAVID	0.75	12/30/2015 12:00:00 AM	12/30/2015 12:00:00 AM

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E
						L

\$3.75	4693 - REFUSE PACKER 25YD	4693	0.75	12/30/2015 12:00:00 AM	12/30/2015 12:00:00 AM	\$
--------	------------------------------	------	------	---------------------------	---------------------------	----

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
---------------	-------------	--------------	------------------	-------------------

**Entities**

Entity UID	Entity Type
11302	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
(LEO) EVIDENCE COLLECTED?	
(CREW) # OF APPLIANCES	
(CREW) # OF TIRES	
(CREW) # OF E-WASTE	
(CREW) # OF MATTRESSES/BOXSPR	
(CREW) CY CONSTRUCTION DEBRIS	
(CREW) CY OF OTHER DEBRIS	
CAUSE OF DAMAGE	Normal Wear and Tear
(CREW) CY FURNITURE	
(LEO) CASE #	
(CREW) CY HOUSEHOLD WASTE	
(LEO) SIGNATURE / DATE	

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
624769	Illegal Dumping - debris, appliances, etc.	3 - Medium	6239 COLLEGE AV	12/28/2015 11:37:30 AM	MOORE SR., I LELAND S	I

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Oth Phc

**Work Order 884187**

<b>Work Order ID #</b>	<b>884187</b>
<b>Work Order Category</b>	<b>METER_REPAIR</b>
<b>Work Order Description</b>	<b>Parking Meter – Meter Repair/Replace</b>
<b>Work Order Address</b>	<b>307 63RD ST</b>
<b>Submit To</b>	<b>MO, KENT Y</b>

From Request 614420:

Code: P\_METER\_REPAIR

Description: Parking - Meter Maintenance

Details: Meter 6256

Comments: Reported by SeeClickFix user [REDACTED] on 11/02/2015 SeeClickFix Link:

Summary: Meter 6256

Description: Ince again the oakland scam....meters take money but dont register time.....have to use a credit card so oakland can collect the fee. What a scam

By CRIDDLE, DEON: 11/3/2015 2:34:26 PM

CITIZEN IS REPORTING A BROKEN METER, LOCATED AT 307 63RD STREET.

Caller: [REDACTED]

Q: What is the meter ID number?

A: C6246

Q: Is the meter a multispace box or a single space pole?

A: single space pole

Q: What is the problem with the single space pole meter?

A: Meter took my money

Q: Does the problem with the meter post a safety risk?

A: NO

By PERSONS SR., RICKEY G: 11/6/2017 9:49:07 AM

WORK ORDER COMPLETE

Priority	3 - Medium
Supervisor	PERSONS SR., RICKEY G
Cityworks Project Name	
Initiated By	PERSONS SR., RICKEY G
Initiated Date	11/6/2017 9:48:38 AM
Actual Start Date	11/2/2015 9:48:52 AM
Actual Finish Date	11/4/2015 9:48:56 AM
Police Beat	12Y
Service Delivery District	2
City Council District	CCD1
Total Entities (GIS Assets) on Work Order	1
Units Accomplished	1
Units Accomplished Description	Units
Total Work Order Cost	\$72.68
Total Of Work Order Labor Costs	\$48.98
Total Of Work Order Material Costs	\$10.00
Total Of Work Order Equipment Costs	\$13.70

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$48.98	MO, KENT Y	1.00		



**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E C
\$13.70	4561 - FORD TRANSIT 150 (MID ROOF)	4561	1.00			\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
\$10.00	MR, \$1 Increments	MR-Misc	\$1.00	10.00

**Entities**

Entity UID	Entity Type
7269	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
--------------------	--------------------

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	C
614420	Parking - Meter Maintenance	3 - Medium	307 63RD STREET	11/2/2015 9:40:23 AM	PERSONS SR., RICKEY G	MI

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Othe

**Work Order 892887**

<b>Work Order ID #</b>	<b>892887</b>
<b>Work Order Category</b>	<b>METER_REPAIR</b>
<b>Work Order Description</b>	<b>Parking Meter – Meter Repair/Replace</b>
<b>Work Order Address</b>	<b>6239 COLLEGE AV</b>
<b>Submit To</b>	<b>COUCH, PETER J</b>
From Request 703759: Code: P_METER_REPAIR Description: Parking - Meter Maintenance Details: Comments: By UDO-OKON, DONNISHA: 1/12/2017 8:15:37 AM CITIZEN IS REPORTING PARKING KIOSK #CO6200-1 DID NOT GIVE A RECEIPT LOCATED AT 6239 COLLEGE AVENUE. PER CITIZEN, THE CONCRETE AROUND THE PARKING KIOSK IS CRUMBLING AND IT CAN BE TIPPED OVER. Caller: <span style="background-color: black; color: black;">XXXXXXXXXX</span> Q: What is the meter ID number? A: CO6200-1 Q: Is the meter a multispace box or a single space pole? A: multispace box Q: What is the problem with the multispace box meter? A: Meter did not give a receipt Q: Does the problem with the meter post a safety risk? A: YES  By PERSONS SR., RICKEY G: 12/18/2017 12:19:55 PM work order complete	
<b>Priority</b>	<b>3 - Medium</b>
<b>Supervisor</b>	<b>PERSONS SR., RICKEY G</b>
<b>Cityworks Project Name</b>	
<b>Initiated By</b>	<b>PERSONS SR., RICKEY G</b>
<b>Initiated Date</b>	<b>12/18/2017 12:19:09 PM</b>
<b>Actual Start Date</b>	<b>1/12/2017 12:19:24 PM</b>
<b>Actual Finish Date</b>	<b>1/13/2017 12:19:37 PM</b>
<b>Police Beat</b>	<b>12Y</b>
<b>Service Delivery District</b>	<b>2</b>
<b>City Council District</b>	<b>CCD1</b>
<b>Total Entities (GIS Assets) on Work Order</b>	<b>1</b>
<b>Units Accomplished</b>	<b>1</b>
<b>Units Accomplished Description</b>	<b>Units</b>
<b>Total Work Order Cost</b>	<b>\$102.68</b>
<b>Total Of Work Order Labor Costs</b>	<b>\$48.98</b>
<b>Total Of Work Order Material Costs</b>	<b>\$40.00</b>
<b>Total Of Work Order Equipment Costs</b>	<b>\$13.70</b>

**Labor**

Labor Cost	Labor Name	Hours	Start Date	Finish Date
\$48.98	COUCH, PETER J	1.00		

**Equipment**

Equipment Cost	Description	Equip ID	Hours	Start Date	Finish Date	E C
\$13.70	4560 - FORD TRANSIT 150 (MID ROOF)	4560	1.00			\$

**Material**

Material Cost	Description	Material UID	Mat Unit Cost	Units Required
\$40.00	MR, \$1 Increments	MR-Misc	\$1.00	40.00

**Entities**

Entity UID	Entity Type
7269	OAKLANDSTREETS

**Custom Fields**

Custom Field Names	Custom Field Value
--------------------	--------------------

**Associated Service Request**

Request ID	Request Description	Request Priority	Incident Address	Date & Time Initiated	Submit To	Cc
703759	Parking - Meter Maintenance	2 - High	6239 COLLEGE AV	1/12/2017 8:15:37 AM	PERSONS SR., RICKEY G	MI

**Calls on Service Request**

First Name	Last Name	Customer Email	Cell Phone	Home Phone	Work Phone	Other Phone

05/23/2007 14:55 15108649465

WASHWORLD

PAGE 02

VJ  
7/9/07

<b>UNIFIED PROGRAM CONSOLIDATED FORM</b> <b>FACILITY INFORMATION</b> <b>BUSINESS ACTIVITIES</b>		
Page 1 of ____		
<b>I. FACILITY IDENTIFICATION</b>		
FACILITY ID # <small>(Agency Use Only)</small>	1. EPA ID # (Hazardous Waste Only) <b>CAL00000 6261</b>	2.
BUSINESS NAME (Same as Facility Name) <b>Red Hanger Cleaners</b>		
<b>II. ACTIVITIES DECLARATION</b>		
<b>NOTE: If you check YES to any part of this list,</b> <b>please submit the Business Owner/Operator Identification page (OES Form 2730).</b>		
Does your facility...	If Yes, please complete these pages of the UPCF...	
<b>A. HAZARDOUS MATERIALS</b> 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?		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 4.	HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION (OES 2731)	
<b>B. UNDERGROUND STORAGE TANKS (USTs)</b> 1. Own or operate underground storage tanks? 2. Intend to upgrade existing or install new USTs? 3. Need to report closing a UST?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 5. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 6. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 7.	UST FACILITY (Formerly SWRCB Form A) UST TANK (one page per tank) (Formerly Form B) UST FACILITY UST TANK (one per tank) UST INSTALLATION - CERTIFICATE OF COMPLIANCE (one page per tank) (Formerly Form C) UST TANK (closure portion - one page per tank)	
<b>C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)</b> Own or operate ASTs above these thresholds: --any tank capacity is greater than 660 gallons, or --the total capacity for the facility is greater than 1,320 gallons?		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 8.	NO FORM REQUIRED TO CUPAs	
<b>D. HAZARDOUS WASTE</b> 1. Generate hazardous waste? 2. Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)? 3. Treat hazardous waste on site? 4. Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)? 5. Consolidate hazardous waste generated at a remote site? 6. Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?		
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 9. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 10. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 11. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 12. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 13. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO 14.	EPA ID NUMBER - provide at the top of this page RECYCLABLE MATERIALS REPORT (one per recycler) ONSITE HAZARDOUS WASTE TREATMENT - FACILITY (Formerly DTSC Form 1777) ONSITE HAZARDOUS WASTE TREATMENT - UNIT (one page per unit) (Formerly DTSC Form 1772 A, B, C, D, and E) CERTIFICATION OF FINANCIAL ASSURANCE (Formerly DTSC Form 1732) REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1156) HAZARDOUS WASTE TANK CLOSURE CERTIFICATION (Formerly DTSC Form 1249)	
<b>E. LOCAL REQUIREMENTS</b> <small>(You may also be required to provide additional information by your CUPA or local agency.)</small>		

UPL 07/07 3/17

www.unifiedprogram.com

UPL 07/07 3/17

ACDEH0000001



**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS ACTIVITIES**

Page 1 of \_\_\_\_

**I. FACILITY IDENTIFICATION**

FACILITY ID # (Agency Use Only)	1.	EPA ID # (Hazardous Waste Only)	2.
		CAL000000 6261	

BUSINESS NAME (Same as Facility Name)

Red Hanger Cleaners

**II. ACTIVITIES DECLARATION**

**NOTE: If you check YES to any part of this list,  
please submit the Business Owner/Operator Identification page (OES Form 2730).**

Does your facility...

If Yes, please 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)**

- Own or operate underground storage tanks?
- Intend to upgrade existing or install new USTs?

☐ YES ☒ NO 5.☐ YES ☒ NO 6.

UST FACILITY (Formerly SWRCB Form A)  
UST TANK (one page per tank) (Formerly Form B)  
UST FACILITY  
UST TANK (one per tank)  
UST INSTALLATION - CERTIFICATE OF  
COMPLIANCE (one page per tank) (Formerly Form C)  
UST TANK (closure portion - one page per tank)

- Need to report closing a UST?

☐ YES ☒ NO 7.**C. ABOVE GROUND PETROLEUM STORAGE TANKS (ASTs)**

Own or operate ASTs above these thresholds:  
—any tank capacity is greater than 660 gallons, or  
—the total capacity for the facility is greater than 1,320 gallons?

☐ YES ☒ NO 8.

NO FORM REQUIRED TO CUPAs

**D. HAZARDOUS WASTE**

- Generate hazardous waste?
- Recycle more than 100 kg/month of excluded or exempted recyclable materials (per HSC §25143.2)?
- Treat hazardous waste on site?
- Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?
- Consolidate hazardous waste generated at a remote site?
- Need to report the closure/removal of a tank that was classified as hazardous waste and cleaned onsite?

☒ YES ☐ NO 9.☐ YES ☒ NO 10.☐ YES ☒ NO 11.☐ YES ☒ NO 12.☐ YES ☒ NO 13.☐ YES ☒ NO 14.

EPA ID NUMBER - provide at the top of this page  
RECYCLABLE MATERIALS REPORT (one per recycler)  
ONSITE HAZARDOUS WASTE  
TREATMENT - FACILITY (Formerly DTSC Form 1772)  
ONSITE HAZARDOUS WASTE  
TREATMENT - UNIT (one page per unit) (Formerly DTSC Forms 1772 A, B, C, D, and L)  
CERTIFICATION OF FINANCIAL  
ASSURANCE (Formerly DTSC Form 1232)  
REMOTE WASTE / CONSOLIDATION  
SITE ANNUAL NOTIFICATION (Formerly DTSC Form 1196)  
HAZARDOUS WASTE TANK CLOSURE  
CERTIFICATION (Formerly DTSC Form 1249)

**E. LOCAL REQUIREMENTS**

(You may also be required to provide additional information by your CUPA or local agency.)

Called 5/8/07 9:40 left (M) to correct &amp; submit p1 &amp; inventories

ACDEH0000002

**UNIFIED PROGRAM CONSOLIDATED FORM  
FACILITY INFORMATION  
BUSINESS OWNER/OPERATOR IDENTIFICATION**

Page 2 of

I. IDENTIFICATION										
FACILITY ID # (Agency Use Only)					1. BEGINNING DATE		100. ENDING DATE			
BUSINESS NAME (Same as FACILITY NAME)							3. BUSINESS PHONE			
Red Hanger Kleans							(510) 654-1740			
BUSINESS SITE ADDRESS										
6239 College Ave										
CITY					104. CA		ZIP CODE			
Oakland							94612			
DUN & BRADSTREET					106.		SIC CODE (4 digit #)			
COUNTY										
BUSINESS OPERATOR NAME					109.		BUSINESS OPERATOR PHONE			
							( ) ext.			
II. BUSINESS OWNER										
OWNER NAME					111.		OWNER PHONE			
George Kong III							(510) 813-7550 ext.			
OWNER MAILING ADDRESS										
160 Sweet Rd										
CITY					114.		STATE		115. ZIP CODE	
Alameda							Ca		94502	
III. ENVIRONMENTAL CONTACT										
CONTACT NAME					117.		CONTACT PHONE			
							( ) ext.			
CONTACT MAILING ADDRESS										
CITY					120.		STATE		121. ZIP CODE	
IV. EMERGENCY CONTACTS										
-PRIMARY-					-SECONDARY-					
NAME					NAME					
Nancy Kong										
TITLE					TITLE					
Vice President										
BUSINESS PHONE					BUSINESS PHONE					
( ) ext.					( ) ext.					
24-HOUR PHONE*					24-HOUR PHONE*					
(510) 865-8682 ext.					( ) ext.					
PAGER #					PAGER #					
ADDITIONAL LOCALLY COLLECTED INFORMATION:										
Billing Address:										
Property Owner: Ellwood Commercial Realty					Phone No.: (510) 838-9111					
Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.										
SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE					DATE		NAME OF DOCUMENT PREPARER			
George Kong III					2-28-07		George Kong III			
NAME OF SIGNER (print)					TITLE OF SIGNER					
George Kong III					President					

\* See Instructions on next page.

VIN 070 E117

www.unified.org

Rev. 07/24/06

ACDEH0000003

Date: 2-28-07

# Hazardous Waste Inventory Statement For use by Unidocs Member Agencies or where approved by your Local Jurisdiction

Business Name: Red Hanger Kleenors				Type of Report on This Page: <input type="checkbox"/> Add, <input type="checkbox"/> Delete, <input type="checkbox"/> Revise				Page ____ of ____			
Chemical Location: (Include Storage Area)				EPCRA Confidential Location? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No		Facility ID # (Agency Use Only)					
Trade Secret Information? <input type="checkbox"/> Yes, <input checked="" type="checkbox"/> No											
1. Haz. Class	2. Map and Grid or Location Code	3. Waste Stream Name	4. Hazardous Components	5. Type and Physical State	6. Quantities			7. Annual Waste Amount	8. Units	9. Storage Codes	10. Hazard Category
			Chemical Name, % Wt., EHS, CAS No.		Max. Daily	Average Daily	Largest Cont.				
		Perchloroethylene		<input checked="" type="checkbox"/> waste	NA	NA	50 GAL	150 GAL			
		Management Method:		<input type="checkbox"/> solid							
		<input type="checkbox"/> Shipped Off-site		<input type="checkbox"/> liquid							
		<input type="checkbox"/> Recycled On-site		<input type="checkbox"/> gas							
		<input type="checkbox"/> Treated On-site									
		Management Method:		<input checked="" type="checkbox"/> waste							
		<input type="checkbox"/> Shipped Off-site		<input type="checkbox"/> solid							
		<input type="checkbox"/> Recycled On-site		<input type="checkbox"/> liquid							
		<input type="checkbox"/> Treated On-site		<input type="checkbox"/> gas							
		Management Method:		<input checked="" type="checkbox"/> waste							
		<input type="checkbox"/> Shipped Off-site		<input type="checkbox"/> solid							
		<input type="checkbox"/> Recycled On-site		<input type="checkbox"/> liquid							
		<input type="checkbox"/> Treated On-site		<input type="checkbox"/> gas							
		Management Method:		<input checked="" type="checkbox"/> waste							
		<input type="checkbox"/> Shipped Off-site		<input type="checkbox"/> solid							
		<input type="checkbox"/> Recycled On-site		<input type="checkbox"/> liquid							
		<input type="checkbox"/> Treated On-site		<input type="checkbox"/> gas							
		Management Method:		<input checked="" type="checkbox"/> waste							
		<input type="checkbox"/> Shipped Off-site		<input type="checkbox"/> solid							
		<input type="checkbox"/> Recycled On-site		<input type="checkbox"/> liquid							
		<input type="checkbox"/> Treated On-site		<input type="checkbox"/> gas							

UN-010-917

www.unidocs.org

Rev. 07/04/06

ACDEH0000004

05/23/2007 15:28

15108649655

WASHDC.D

PAGE 03

Date: 2-28-07

# Non-Waste Hazardous Materials Inventory Statement For use by Unidocs Member Agencies or where approved by your Local Jurisdiction

Business Name: (Please list facility name) <u>Red Hanger Kleaners</u>				Type of Report on This Page: <input type="checkbox"/> Add; <input type="checkbox"/> Delete; <input type="checkbox"/> Revise				Page <u>    </u> of <u>    </u>						
Chemical Location: (Building/Storage Area)				EPCRA Confidential Location? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Facility ID # (Agency Use Only)						
Trade Secret Information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No														
1.	2.	3.	4. Hazardous Components (For mixtures only)				5. Type and Physical State		6. Quantities		7. Storage Codes		8.	
Haz. Class	Map and Grid or Location Code	Common Name	Chemical Name	%	Wt	EHS	CAS No.	Max. Daily	Average Daily	Largest Cont.	Units	Storage Pressure	Storage Temp.	Hazard Category
		<u>Perchloroethylene</u>								<u>75 GAL.</u>				
		<u>Pyratex</u>								<u>2 GAL.</u>				
		<u>Picrin</u>								<u>2 GAL.</u>				
		<u>Stearic acid</u>								<u>1 GAL.</u>				
		<u>Super Tan</u>								<u>2 GAL.</u>				
		<u>Blood screen</u>								<u>2 GAL.</u>				
		<u>Rust-go</u>								<u>1 GAL.</u>				

UN-020 - 7/17

www.unidocs.org

Rev. 07/24/06

ACDEH0000005

05/23/2007 15:28

15108649465

WASHINGTON

PAGE 02



## Emergency Response/Contingency Plan

(Hazardous Materials Business Plan Module)

Authority Cited: HSC§ 25504(b); 19 CCR §2731; 22 CCR §66262.34(a)(4)

Page \_\_\_\_ of \_\_\_\_

All facilities that handle hazardous materials in HMBP quantities must have a written emergency response plan. In addition, facilities that generate 1,000 kilograms or more of hazardous waste (or more than 1 kilogram of acutely hazardous waste or 100 kilograms of debris resulting from the spill of an acutely hazardous waste) per month, or accumulate more than 6,000 kilograms of hazardous waste on-site at any one time, must prepare a hazardous waste contingency plan. Because the requirements are similar, they have been combined in a single document, provided below, for your convenience. This plan is a required module of the Hazardous Materials Business Plan (HMBP). If you already have a plan that meets these requirements, you should not complete the blank plan, below, but you must include a copy of your existing plan as part of your HMBP.

This site-specific Emergency Response/Contingency Plan is the facility's plan for dealing with emergencies and shall be implemented immediately whenever there is a fire, explosion, or release of hazardous materials that could threaten human health and/or the environment. At least one copy of the plan shall be maintained at the facility for use in the event of an emergency and for inspection by the local agency. A copy of the plan and any revisions must be provided to any contractor, hospital, or agency with whom special (i.e., contractual) emergency services arrangements have been made (see section 3, below).

### 1. Evacuation Plan:

- a. The following alarm signal(s) will be used to begin evacuation of the facility (check all that apply):

☐ Bells; ☐ Horns/Sirens; ☒ Verbal (i.e., shouting); ☐ Other (specify \_\_\_\_\_)

- b. ☒ Evacuation map is prominently displayed throughout the facility.

*Note: A properly completed HMBP Site Plan satisfies contingency plan map requirements. This drawing (or any other drawing that shows primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas) must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.*

### 2. a. Emergency Contacts\*:

Fire/Police/Ambulance \_\_\_\_\_ Phone No.: **911**

State Office of Emergency Services \_\_\_\_\_ Phone No.: **(800) 852-7550**

### b. Post-Incident Contacts\*:

Certified Unified Program Agency (CUPA) \_\_\_\_\_ Phone No.: ( )

Fire Department Hazardous Materials Program \_\_\_\_\_ Phone No.: ( )

California EPA Department of Toxic Substances Control \_\_\_\_\_ Phone No.: **(800) 618-6942**

Cal-OSHA Division of Occupational Safety and Health \_\_\_\_\_ Phone No.: ( )

Air Quality Management District \_\_\_\_\_ Phone No.: **(415) 749-4677**

Regional Water Quality Control Board \_\_\_\_\_ Phone No.: ( )

\* Phone numbers for agencies in Unidocs' Member Agency geographic jurisdictions are available at [www.unidocs.org](http://www.unidocs.org).

### c. Emergency Resources:

Poison Control Center\* \_\_\_\_\_ Phone No.: ( )

Nearest Hospital: Name: \_\_\_\_\_ Phone No.: ( )

Address: \_\_\_\_\_ City: \_\_\_\_\_

If you have made special (i.e., contractual) arrangements with any police department, fire department, hospital, contractor, or State or local emergency response team to coordinate emergency services, describe those arrangements below:

---

---

---

---

---

---

---

---

**Emergency Response/Contingency Plan (Hazardous Materials Business Plan Module)**

Page \_\_\_\_ of \_\_\_\_

**4. Emergency Procedures:****Emergency Coordinator Responsibilities:**

- a. Whenever there is an imminent or actual emergency situation such as a explosion, fire, or release, the emergency coordinator (or his/her designee when the emergency coordinator is on call) shall:
  - i. Identify the character, exact source, amount, and areal extent of any released hazardous materials.
  - ii. Assess possible hazards to human health or the environment that may result from the explosion, fire, or release. This assessment must consider both direct and indirect effects (e.g., the effects of any toxic, irritating, or asphyxiating gases that are generated, the effects of any hazardous surface water run-off from water or chemical agents used to control fire, etc.).
  - iii. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
  - iv. Notify appropriate local authorities (i.e., call 911).
  - v. Notify the State Office of Emergency Services at 1-800-852-7550.
  - vi. Monitor for leaks, pressure build-up, gas generation, or ruptures in valves, pipes, or other equipment shut down in response to the incident.
  - vii. Take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous materials at the facility.
- b. Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall:
  - i. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from a explosion, fire, or release at the facility.
  - ii. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.
  - iii. Ensure that all emergency equipment is cleaned, fit for its intended use, and available for use.
  - iv. Notify the California Environmental Protection Agency's Department of Toxic Substances Control, the local CUPA, and the local fire department's hazardous materials program that the facility is in compliance with requirements b-i and b-ii, above.

**Responsibilities of Other Personnel:**

On a separate page, list any emergency response functions not covered in the "Emergency Coordinator Responsibilities" section, above. Next to each function, list the job title or name of each person responsible for performing the function. Number the page(s) appropriately.

**5. Post-Incident Reporting/Recording:**

The time, date, and details of any hazardous materials incident that requires implementation of this plan shall be noted in the facility's operating record.

Within 15 days of any hazardous materials emergency incident or threatened hazardous materials emergency incident that triggers implementation of this plan, a written Emergency Incident Report, including, but not limited to a description of the incident and the facility's response to the incident, must be submitted to the California Environmental Protection Agency's Department of Toxic Substances Control, the local CUPA, and the local fire department's hazardous materials program. The report shall include:

- a. Name, address, and telephone number of the facility's owner/operator;
- b. Name, address, and telephone number of the facility;
- c. Date, time, and type of incident (e.g., fire, explosion, etc.);
- d. Name and quantity of material(s) involved;
- e. The extent of injuries, if any;
- f. An assessment of actual or potential hazards to human health or the environment, where this is applicable;
- g. Estimated quantity and disposition of recovered material that resulted from the incident;
- h. Cause(es) of the incident;
- i. Actions taken in response to the incident;
- j. Administrative or engineering controls designed to prevent such incidents in the future.

**6. Earthquake Vulnerability: (19 CCR §2731(e))**

As an attachment to this plan, you must identify any areas of the facility and mechanical or other systems that require immediate inspection or isolation because of their vulnerability to earthquake-related ground motion.

**7. Hazard Mitigation/Prevention/Abatement (19 CCR §2731(e))**

As an attachment to this plan, you must include procedures that provide for mitigation, prevention, or abatement of hazards to persons, property, or the environment. These procedures must be scaled appropriately for the size and nature of the business, the nature of the damage potential of the hazardous materials handled, and the proximity of the business to residential areas and other populations.

## Emergency Response/Contingency Plan (Hazardous Materials Business Plan Module)

Page \_\_\_\_ of \_\_\_\_

## 8. Emergency Equipment:

22 CCR §66265.52(e) [as referenced by 22 CCR §66262.34(a)(4)] requires that emergency equipment at the facility be listed. Completion of the following Emergency Equipment Inventory Table meets this requirement.

**EMERGENCY EQUIPMENT INVENTORY TABLE**

1. Equipment Category	2. Equipment Type	3. Locations *	4. Description**
<b>Personal Protective Equipment, Safety Equipment, and First Aid Equipment</b>	<input type="checkbox"/> Cartridge Respirators		
	<input type="checkbox"/> Chemical Monitoring Equipment (describe)		
	<input type="checkbox"/> Chemical Protective Aprons/Coats		
	<input type="checkbox"/> Chemical Protective Boots		
	<input type="checkbox"/> Chemical Protective Gloves		
	<input type="checkbox"/> Chemical Protective Suits (describe)		
	<input type="checkbox"/> Face Shields		
	<input type="checkbox"/> First Aid Kits/Stations (describe)		
	<input type="checkbox"/> Hard Hats		
	<input type="checkbox"/> Plumbed Eye Wash Stations		
	<input type="checkbox"/> Portable Eye Wash Kits (i.e., bottle type)		
	<input type="checkbox"/> Respirator Cartridges (describe)		
	<input type="checkbox"/> Safety Glasses/Splash Goggles		
	<input type="checkbox"/> Safety Showers		
	<input type="checkbox"/> Self-Contained Breathing Apparatuses (SCBA)		
<input type="checkbox"/> Other (describe)			
<b>Fire Extinguishing Systems</b>	<input type="checkbox"/> Automatic Fire Sprinkler Systems		
	<input type="checkbox"/> Fire Alarm Boxes/Stations		
	<input type="checkbox"/> Fire Extinguisher Systems (describe)		
	<input checked="" type="checkbox"/> Fire Extinguishers (describe)	Front + Rear of building	
	<input type="checkbox"/> Other (describe)		
<b>Spill Control Equipment and Decontamination Equipment</b>	<input type="checkbox"/> Absorbents (describe)		
	<input type="checkbox"/> Berms/Dikes (describe)		
	<input type="checkbox"/> Decontamination Equipment (describe)		
	<input type="checkbox"/> Emergency Tanks (describe)		
	<input type="checkbox"/> Exhaust Hoods		
	<input type="checkbox"/> Gas Cylinder Leak Repair Kits (describe)		
	<input type="checkbox"/> Neutralizers (describe)		
	<input type="checkbox"/> Overpack Drums		
	<input type="checkbox"/> Sumps (describe)		
	<input type="checkbox"/> Other (describe)		
<b>Communications and Alarm Systems</b>	<input type="checkbox"/> Chemical Alarms (describe)		
	<input type="checkbox"/> Intercoms/ PA Systems		
	<input type="checkbox"/> Portable Radios		
	<input checked="" type="checkbox"/> Telephones	Front + Rear of building	
	<input type="checkbox"/> Tank Leak Detection Systems		
<b>Additional Equipment (Use Additional Pages if Needed.)</b>	<input type="checkbox"/> Other (describe)		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/>		

\* Use the map and grid numbers from the Storage Map prepared earlier for your HMBP.

\*\* Describe the equipment and its capabilities. If applicable, specify any testing/maintenance procedures/intervals. Attach additional pages, numbered appropriately, if needed.

EIN 030 1247

www.mhfr.com

Date: 07/24/06

ACDEH0000008

## Employee Training Plan

(Hazardous Materials Business Plan Module)

Authority Cited: HSC, Section 25504(c); 22 CCR §66262.34(a)(4)

Page \_\_\_\_ of \_\_\_\_

All facilities that handle hazardous materials in HMBP quantities must have a written employee training plan. This plan is a required module of the Hazardous Materials Business Plan (HMBP). A blank plan has been provided below for you to complete and submit if you do not already have such a plan. **If you already have a brief written description of your training program that addresses all subjects covered below, you are not required to complete the blank plan, below, but you must include a copy of your existing document as part of your HMBP.**

Check all boxes that apply. [Note: Items marked with an asterisk (\*) are required.]:

### 1. Personnel are trained in the following procedures:

<input checked="" type="checkbox"/> Internal alarm/notification *
<input checked="" type="checkbox"/> Evacuation/re-entry procedures & assembly point locations*
<input type="checkbox"/> Emergency incident reporting
<input type="checkbox"/> External emergency response organization notification
<input type="checkbox"/> Location(s) and contents of Emergency Response/Contingency Plan
<input type="checkbox"/> Facility evacuation drills, that are conducted at least (specify): <span style="float: right;">(e.g., "Quarterly", etc.)</span>

### 2. Chemical Handlers are additionally trained in the following:

<input checked="" type="checkbox"/> Safe methods for handling and storage of hazardous materials *
<input type="checkbox"/> Location(s) and proper use of fire and spill control equipment
<input type="checkbox"/> Spill procedures/emergency procedures
<input checked="" type="checkbox"/> Proper use of personal protective equipment *
<input checked="" type="checkbox"/> Specific hazard(s) of each chemical to which they may be exposed, including routes of exposure (i.e., inhalation, ingestion, absorption) *
<input checked="" type="checkbox"/> Hazardous Waste Handlers/Managers are trained in all aspects of hazardous waste management specific to their job duties (e.g., container accumulation time requirements, labeling requirements, storage area inspection requirements, manifesting requirements, etc.) *

### 3. Emergency Response Team Members are capable of and engaged in the following:

Complete this section only if you have an in-house emergency response team

<input type="checkbox"/> Personnel rescue procedures
<input type="checkbox"/> Shutdown of operations
<input type="checkbox"/> Liaison with responding agencies
<input type="checkbox"/> Use, maintenance, and replacement of emergency response equipment
<input checked="" type="checkbox"/> Refresher training, which is provided at least annually *
<input type="checkbox"/> Emergency response drills, which are conducted at least (specify): <span style="float: right;">(e.g., "Quarterly", etc.)</span>



## Record Keeping

(Hazardous Materials Business Plan Module)

Page \_\_\_\_ of \_\_\_\_

All facilities that handle hazardous materials must maintain records associated with their management. A summary of your record keeping procedures is a required module of the Unidocs Hazardous Materials Business Plan (HMBP). A blank summary has been provided below for you to complete and submit if you do not already have such a document. **If you already have a brief written description of your hazardous materials record keeping systems that addresses all subjects covered below, you are not required to complete this page, but you must include a copy of your existing document as part of your HMBP.**

Check all boxes that apply. The following records are maintained at the facility. *[Note: Items marked with an asterisk (\*) are required.]*:

<input checked="" type="checkbox"/>	Current employees' training records <i>(to be retained until closure of the facility)</i> *
<input checked="" type="checkbox"/>	Former employees' training records <i>(to be retained at least three years after termination of employment)</i> *
<input checked="" type="checkbox"/>	Training Program(s) <i>(i.e., written description of introductory and continuing training)</i> *
<input checked="" type="checkbox"/>	Current copy of this Emergency Response/Contingency Plan *
<input checked="" type="checkbox"/>	Record of recordable/reportable hazardous material/waste releases *
<input checked="" type="checkbox"/>	Record of hazardous material/waste storage area inspections *
<input type="checkbox"/>	Record of hazardous waste tank daily inspections *
<input type="checkbox"/>	Description and documentation of facility emergency response drills

*Note: The above list of records does not necessarily identify every type of record required to be maintained by the facility.*

***Note: The following section applies where local agencies require facility owners/operators to perform and document routine facility self-inspections:***

A copy of the Inspection Check Sheet(s) or Log(s) used in conjunction with required routine self-inspections of your facility must be submitted with your HMBP. *[Exception: Unidocs provides a Hazardous Materials/Waste Storage Area Inspection Form that you may use if you do not already have your own form. If you use the Unidocs form (available at [www.unidocs.org](http://www.unidocs.org)), you do not need to attach a copy.]*

Check the appropriate box:

<input type="checkbox"/>	We will use the Unidocs "Hazardous Materials/Waste Storage Area Inspection Form" to document inspections.
<input type="checkbox"/>	We will use our own documents to record inspections. <i>(A blank copy of each document used must be attached to this HMBP.)</i>

# Facility Site Plan/Storage Map

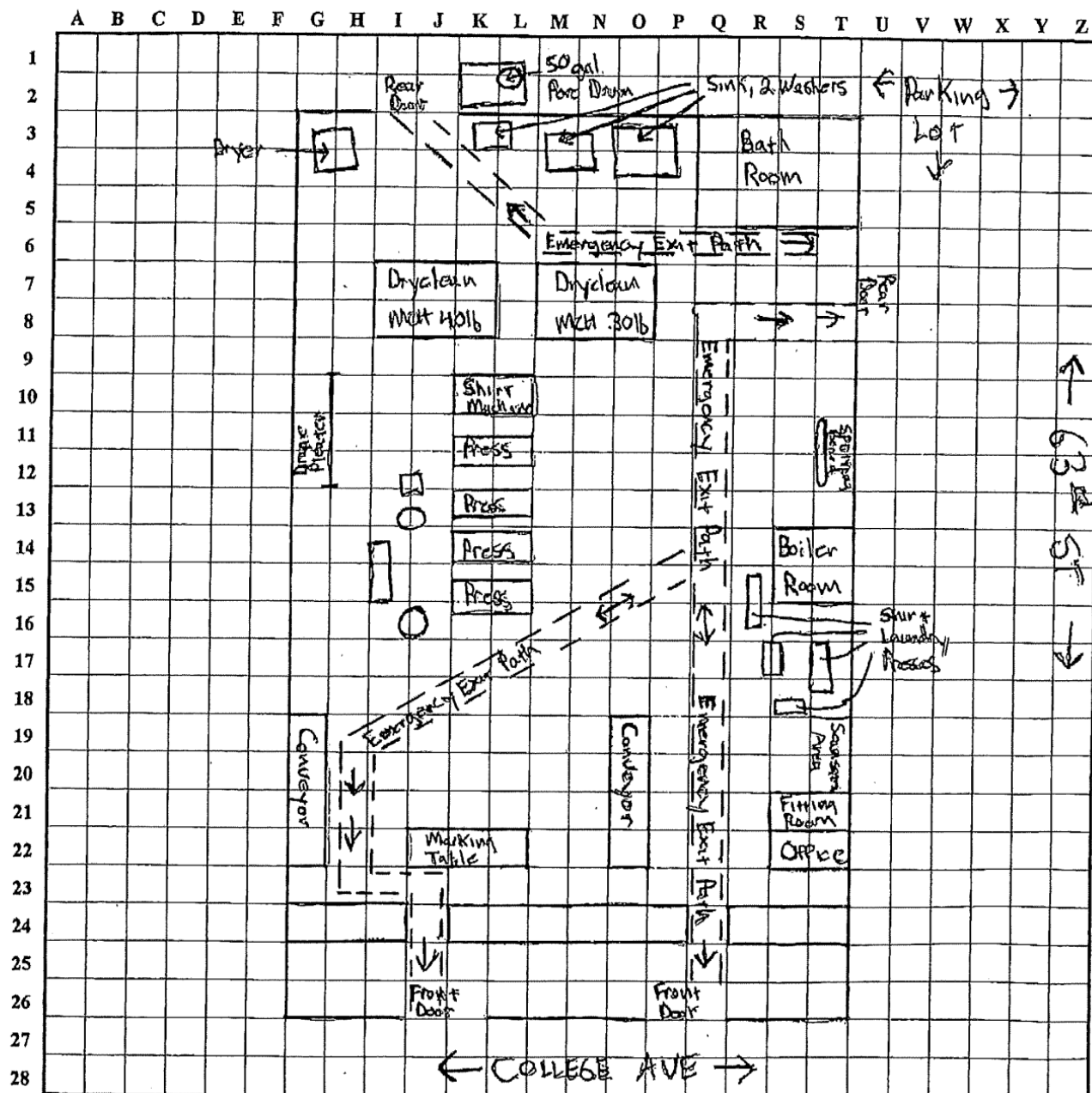
(Hazardous Materials Business Plan Module)

Site Address: 6239 College Ave

Date Map Drawn: 2-28-07

Map Scale: \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_



Instructions are printed on the following page.

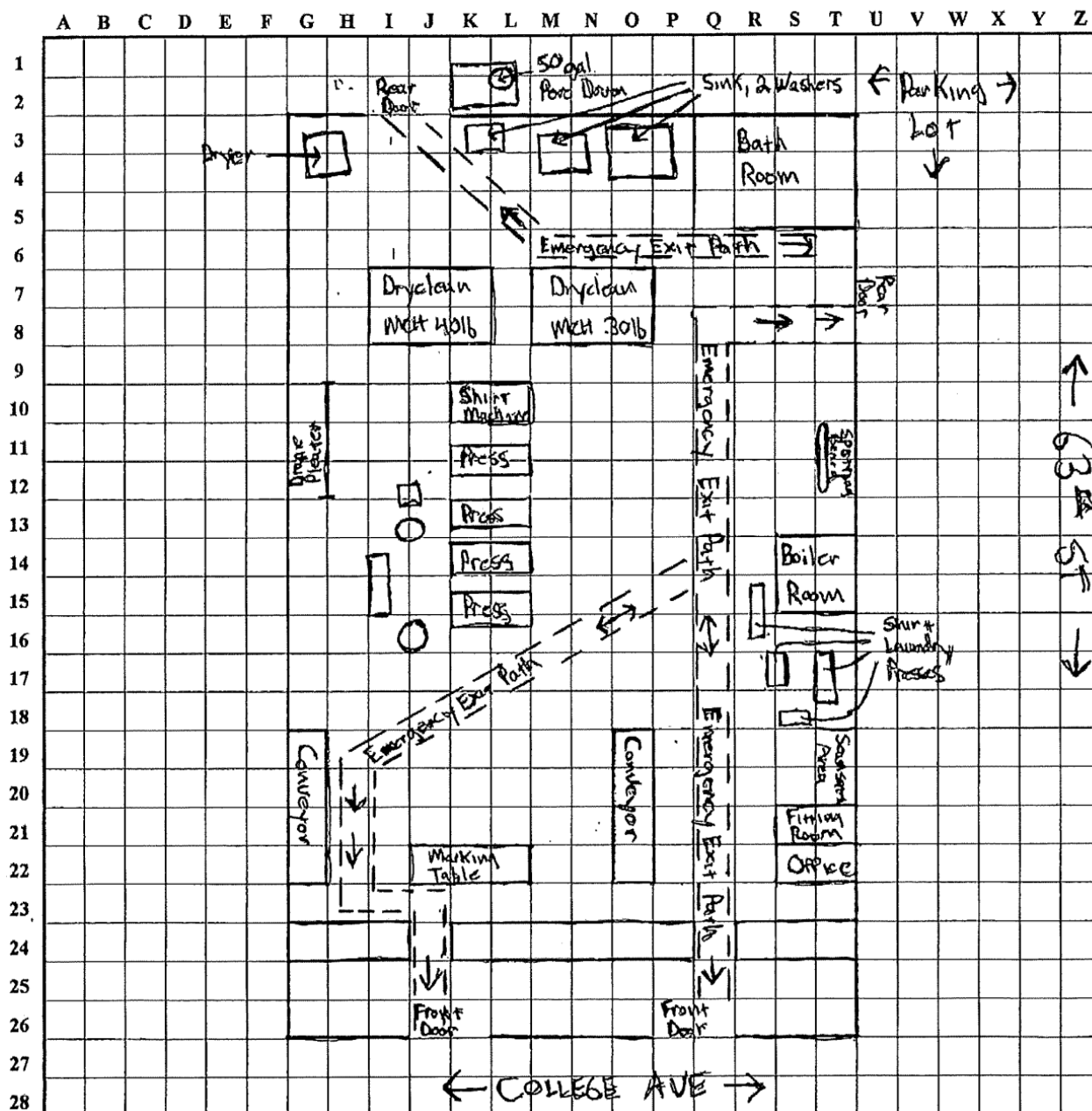
# **Facility Site Plan/Storage Map** (Hazardous Materials Business Plan Module)

Site Address: 6239 College Ave / RED HAWK Kleaners

Date Map Drawn: 2-28-07

Map Scale: \_\_\_\_\_

Page \_\_\_\_ of \_\_\_\_



Instructions are printed on the following page.

VIN 030 16197

www.molden.com

Rev. 07/04/06

ACDEH0000012

H R F Sp  
200 0

OAKLAND FIRE DEPARTMENT  
Office of Emergency Services  
Hazardous Materials Management Program  
One City Hall Plaza, Oakland, CA 94612, (510) 238-3938

## HAZARDOUS MATERIALS BUSINESS PLAN - PART I

1. Business Name: Red Hanger Facility I.D. #: 891  
 Site Address: 6239 College Ave  
 City: OAKLAND CA Zip: 94618  
 Mailing Address: PO Box 1131  
 City: Emeryville CA Zip: 94549
2. Contact: David & Brian Bus. #: 510 Home #: 4546000  
GORDON 654-1740 735 6022
3. No. of Individuals Handling Hazardous Materials: 2
4. Hazardous Materials/Waste Storage and Handling Area in Square Feet: 250
5. Number of Storage Tanks On-Site. Aboveground: 0 Underground: 0
6. All hazardous substances or wastes.

	Gallons (liquid)	Pounds (solid)	Cubic Feet (gaseous)	Number of Items
Hazardous Materials	140	0	0	1
Hazardous Waste	0	25	0	1
TOTAL	140	25	0	2

Printed Name: David GordonOwner or operator's signature: [Signature]Date: 3/12/97

## BILLING INFORMATION

- ☐ No Changes      ☐ # of Employees      ☐ Address  
☐ New Facility      ☐ UST/AST      ☐ Billing Adjustment required  
☐ Inventory      ☐ Exempt/Inactive      ☐ Other \_\_\_\_\_

Inspector: CRAFORODate: 2-27-97

ACDEH0000013



OAKLAND FIRE DEPARTMENT  
Office of Emergency Services  
Hazardous Materials Management Program  
One City Hall Plaza, Oakland, CA 94612, (510) 238-3938  
HAZARDOUS MATERIALS BUSINESS PLAN (HMBP)

Part II  
GENERAL INFORMATION

- 1) Facility Name Red Hanger Cleaners
- 2) Facility Address 6239 College City OAK Zip 94618
- 3) Principle Business Activity Dry Cleaners 4) SIC Code "
- 5) EPA ID # "
- 6) Mailing Address P.O. Box 1131 City Colony Hill Zip 94545
- 6 a) Billing Address " City " Zip "
- 7) No. of Employees 12 No. of Employees " No. of Employees "  
Shift 1 Start 7-AM Shift 2 Start " Shift 3 Start "  
Shift 1 End 6 PM Shift 2 End " Shift 3 End "

**Facility Emergency Contacts**

- 8) Primary Contact DAVID GORDON Work # 654 1740  
Title MGR Home # 735 6022
- 9) Secondary Contact BREAN GORDON Work # 654 1740  
Title MGR Home # 937 7878
- 10) Business Owner SIRILA Work # 736 3633  
Mailing Address " Home # "  
City " Zip "
- 11) HMBP Contact D. GORDON Work # 510 654 1740  
Title " Home # "
- 12) Property Owner SIRILA Work # 736 3633  
13) Mailing Address " Home # "  
City " Zip "

**Emergency Planning**

- 14) There are school(s), hospital(s), nursing homes, extended care or child care facilities, within 1,000 ft. (straight line distance) of my facility.

Yes / ☒ No

ACDEH0000014

**HAZARDOUS MATERIALS BUSINESS PLAN  
OAKLAND FIRE DEPARTMENT  
Office of Emergency Services  
Hazardous Materials Management Program**

**INVENTORY INFORMATION**

Facility Name RED HANGER CLEANERS Facility ID. \_\_\_\_\_  
Facility Address \_\_\_\_\_

Please copy this page for each Hazardous Material.

**Product Information**    Add / Delete / Revise    Date: \_\_\_\_\_

- 15) Composition: Pure / Mixture / Waste  
16) State Waste Code: \_\_\_\_\_  
17) Product Name: PERC  
18) Manufacturer: \_\_\_\_\_ Phone #: \_\_\_\_\_  
  
21) Constituent 1 Name: PERCHLOR ETHYLENE  
19) CAS # \_\_\_\_\_ 20) Percent by wt. \_\_\_\_\_  
Constituent 2 Name: \_\_\_\_\_  
CAS # \_\_\_\_\_ Percent by wt. \_\_\_\_\_  
Constituent 3 Name: \_\_\_\_\_  
CAS # \_\_\_\_\_ Percent by wt. \_\_\_\_\_  
  
22) Generic Name: DRY CLEANING SOLVENT  
23) DOT Hazard Class: \_\_\_\_\_  
24) Trade Secret? Yes / No  
25) Extremely (Acutely) Hazardous? Yes / No  
26) Physical State: Solid / Gas / Liquid  
27) Health Hazard: 0 1 2 3 4  
28) Reactivity: 0 1 2 3 4  
29) Flammability: 0 1 2 3 4  
30) Special Hazard: 0 1 2 3 4  
34) Pressure: 0 / 2 / 3  
35) Temperature: 0 / 2 / 3 / 4

**STORAGE DETAILS**

Map	Location	Cont. Type	Max. Amt.	Avg. Amt.	Max. Vessel	Waste (per year)
31)	32)	33)	36)	37)	38)	39)
	<u>A</u>	<u>R</u>	<u>140 gal</u>	<u>140</u>	<u>80 gal</u>	

ACDEH0000015

**EMERGENCY RESPONSE EQUIPMENT**

- 41) Equipment Location: \_\_\_\_\_  
 42) Equipment Inspector: \_\_\_\_\_  
 43) Inspection Frequency: \_\_\_\_\_

**44) Personal Protective Equipment**

- ☒ Aprons  
☐ Boots  
☐ Chemical resistant suit  
☒ Face shield  
☒ Gloves  
☐ Goggles  
☐ Helmet  
☒ Respiratory protection  
☐ Other \_\_\_\_\_  
 \_\_\_\_\_

**45) Spill Control Equipment**

- ☐ Absorbent, loose  
☐ Absorbent, booms  
☐ Brooms  
☐ Neutralizers  
☐ Pumps/Vacuums  
☐ Shovels  
☒ Spill cart  
☐ Vapor Scrubber  
☐ Other \_\_\_\_\_  
 \_\_\_\_\_

**46) Communications Devices**

- ☐ P.A. System  
☒ Pagers  
☐ Portable Radios  
☒ Telephones  
☒ Voice Communication  
☐ Other \_\_\_\_\_  
 \_\_\_\_\_

ACDEH0000016

**EMERGENCY RESPONSE**

All employees are trained in the following procedures:

- 47) ☒ Internal emergency alarm notification.
- 48) ☒ Immediate notification to the Oakland Fire Department and the State Office of Emergency Services.
- 49) ☒ Review of the emergency response plan.
- 50) ☒ Evacuation procedures.
- 51) ☒ Procedures for the mitigation of a release or threatened release.

**Hazardous Material/Waste Handlers:**

- 52) ☒ Safe method for handling and storage of hazardous materials.
- 53) ☒ Proper use of personal protection equipment.
- 54) ☒ Locations and proper use of fire and spill control equipment.
- 55) ☒ Identify specific hazards of each chemical including pathways of exposure (i.e. skin absorption, inhalation, ingestion).

**Emergency Response Team**

- 56) ☐ Personnel rescue procedures.
- 57) ☐ Shutdown of operations.
- 58) ☐ Use, maintenance and replacement of emergency response equipment.
- 59) ☐ Emergency response drills.
- 60) ☐ Refresher training is provided annually

**Emergency Response Documents**

NA

- 61) ☐ Verification of date that training was completed.
- 62) ☐ Description of introductory and continuing training.
- 63) ☐ Employee's training records are retained at least three years.
- 64) ☐ Description and documentation of facility emergency response drills.

**Other**

- 65) ☐ Procedures to be used in event of spill from an underground tank.

ACDEH0000017



**EMERGENCY RESPONSE EQUIPMENT****66) Evacuation Notification**

- ☒ Verbal (i.e. shouting)  
☐ Horns  
☒ Alarms

**67) Evacuation Procedures**

- ☒ Defined evacuation routes and procedures.  
☒ Preplanned assembly areas.  
☒ Evacuation route maps prominently displayed throughout facility.  
☒ Re-entry procedures.

**EMERGENCY NOTIFICATIONS: for spills of Hazardous Materials/Waste.****68) Fire/Police/Ambulance 911**

or

Oakland Fire Department: (510) 444-1616

Hazardous Materials Management Program: (510) 239-3938 weekdays only

**69) CA State Office of Emergency Services (800) 852-7550 or (916) 262-1621****70) Other Agencies: \_\_\_\_\_**

**71) Medical Facility** Kaiser  
**Address** OPK  
**City** \_\_\_\_\_ **State** CA **Zip Code** \_\_\_\_\_  
**Phone** \_\_\_\_\_

**Certification**

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Business Plan is true and correct. I understand that I may be required to show proof of compliance during any facility inspection conducted by local, County, State or Federal authorities.

Print Name:

David Gordon

Title:

Mgr.

Authorized Signature:

[Signature]

Date:

3/12/97

ACDEH0000018

ALL Employees Below  
have been furnished  
with a copy of this  
EVACUATION PLAN AS  
OF 5/13/88, 1-28-93

John Griqsbay \* J.G.  
Silvia Molina \* S.M.  
Alice Tinkalanberg \* A.T.  
Martha Fuentes \* M.F.  
Barbara Wright \* B.W.  
Rica Buchner \* R.B.  
Mary Strickland \* M.S.  
Kathleen Duncan \* K.D.  
Gwen Tate \* G.T.

May 13, 1988  
Jan 28, 1993

Joann Encinas \* J.E.  
Beth Tackley \* B.T.  
Jan 28-93

Rolando Manabets \* R.M.

ROLANDO

Julius Jingf

Sammy Lopez

Michael Lopez

Angela Lopez

Paula Lopez

Arnoldo Hernandez

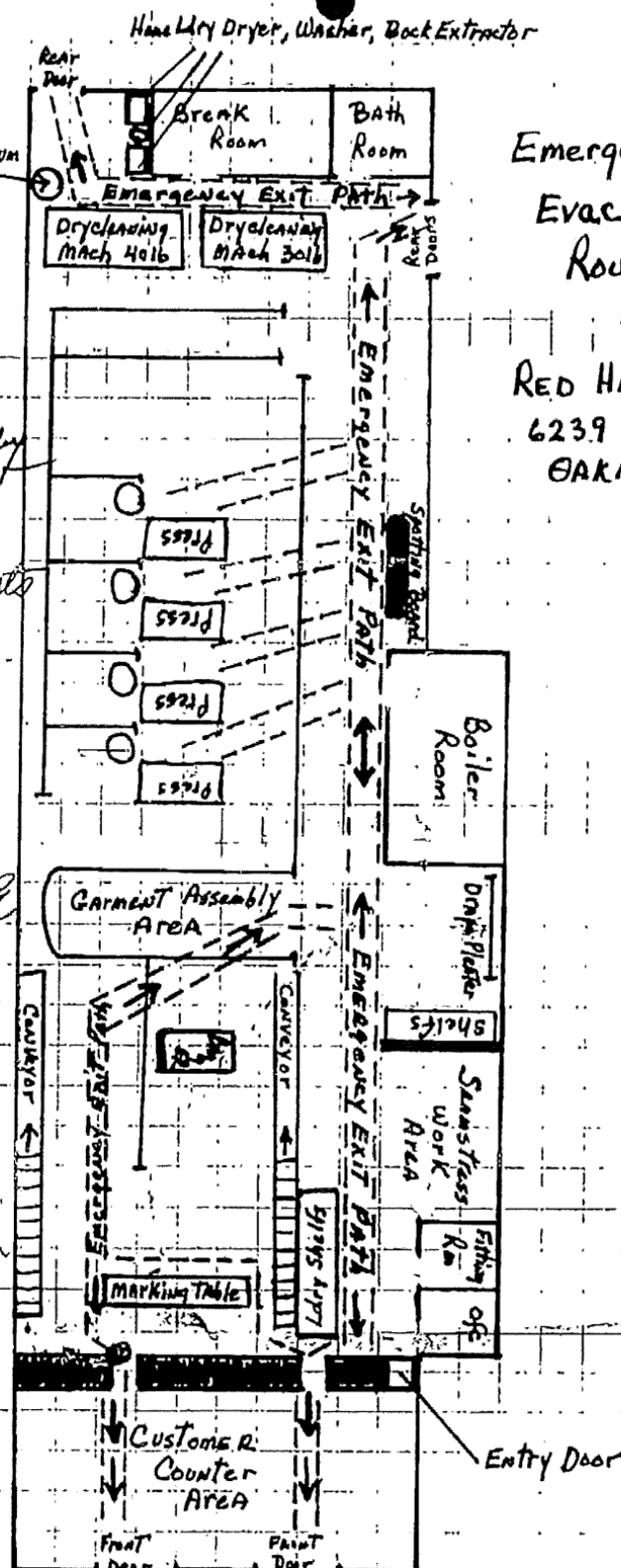
Assembly

Andy Wald

Sepe

Xunchuan Ding

Percy Karavay



# Emergency Evacuation Route Plan for

RED HANGER Klen  
6239 College Ave  
OAKLAND, CA.

Entry Door

College Ave

ACDEH0000019

Alameda County Department of Environmental Health  
Hazardous Materials Division  
80 Swan Way, Room 200  
Oakland, CA 94621

**Hazardous Materials Management Plan**

(Part II)

RED HANGER CLEANERS

(Facility Name and ID)

6239 College Ave.

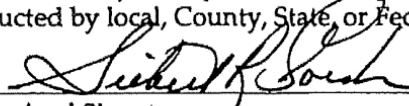
(Facility Address)

OAKLAND, CA 9461K

(Facility City)

**Certification**

I hereby certify, under penalty of perjury, that the information contained in this Hazardous Materials Management Plan is, to the best of my knowledge, true and correct. I understand that I may be required to show proof of compliance during any facility inspection conducted by local, County, State, or Federal authorities.

  
Authorized Signature

S.R. Bert Gordon  
Print Name

4-10-91  
Date

CEO  
Title

rev 92790

ACDEH0000020

## Alameda County Department of Environmental Health

## HAZARDOUS MATERIALS MANAGEMENT PLAN

## Facility Information

General Information

1) Facility Name RED HANGER KLEANERS 2) Facility ID:   
 3) Street Address 6239 College Ave. City OAKLAND Zip 94618  
 4) Principle Business Activity RETAIL 5) SIC Code 7216  
 7) EPA ID #                      8) Uniform Building Code Class                       
 9) Mailing Address P.O. Box 1131 City Lafayette, CA. Zip 94549  
 10) Billing Address P.O. Box 1131 City Lafayette, CA. Zip 94549  
 11) # of Shifts                      12) # Empl 7 # Employees                      # Empl                       
     Shift 1 Start                      Shift 2 Start                      Shift 3 Start                       
     Shift 1 End                      Shift 2 End                      Shift 3 End                       
 13a) Area of Facility 2500 13b) Hazardous Materials Storage Area 20 SF

Facility Contacts

14) Primary Contact Siebert R. Gordon Work Phone # 736-3633  
     Title CEO Home Phone # 736-3635  
 15) Secondary Contact DAVID Gordon Work Phone # 654-1740  
     Title Gen. Mgr. V.P. Home Phone #                       
 16) Executive Contact Siebert R. Gordon Work Phone # 736-3633  
     Title CEO Home Phone # 736-3635  
 17) HMMP Contact                      Work Phone #                       
     Title                      Home Phone #                       
 18) Property Owner SIRILA LIVING TRUST Work Phone # 736-3633  
 19) Mailing Address P.O. Box 1131 Home Phone #                       
     City Lafayette, Zip 94549

Land Use Information

19a) Direction 20) Adjacent Business Name Contact Phone  
North Bldg Owner SIRILA S.R. Gordon 736-3635  
South Bank of America Branch Mgr.                       
                                                                                     
                                                                                     
 Direction 21) Special Land Uses Contact Phone  
South                                                                 
                                                                                     
                                                                                     
                                                                                     
~~X~~ Flood Zone                      ~~X~~ Earthquake                       
~~X~~ Water Table                      Faults                     

ACDEH0000021





## Alameda County Department of Environmental Health

HAZARDOUS MATERIALS MANAGEMENT PLAN  
Emergency Response Plan

## Emergency Response Equipment

- 56) Equipment Location Shelf Near Drycleaning Machine
- 57) Responsible Inspector David Gordon & McShan Depew, Plant Managers.
- 58) Inspection Frequency Weekly
- 59) Personal Protective Equipment

☒ Gloves  
☐ Chemical resistant suit  
☐ Face Shield  
☐ Helmet  
☐ Boots  
☒ Respiratory protection  
☐ Other \_\_\_\_\_

## 60) Spill Control Equipment

☒ Absorbent  
☐ Spill cart  
☐ Pumps/Vacuums  
☐ Neutralizers  
☐ Vapor Scrubber  
☐ Other \_\_\_\_\_

## 61) Communication Devices

☐ Portable Devices  
☒ Telephones  
☐ Pagers  
☐ Other \_\_\_\_\_

Please make copies of this page as needed.

ACDEH0000023

## Alameda County Department of Environmental Health

## HAZARDOUS MATERIALS MANAGEMENT PLAN

## Emergency Response Plan

Facility Name RED HANGER KLEANERS Facility ID \_\_\_\_\_Emergency Response Training

## All Personnel

All employees are trained in the following procedures:

- 62) ☒ Internal/alarm notification.  
 63) ☐ External emergency response organization notification.  
 64) ☒ Locations and content of emergency response plan.  
 65) ☒ Evacuation procedures.  
 66) ☒ Spill procedures.

## Chemical Handlers

Chemical handlers are additionally trained in the following:

- 67) ☒ Safe method for handling and storage of hazardous materials.  
 68) ☒ Proper use of personal protection equipment.  
 69) ☒ Locations and proper use of fire and spill control equipment.  
 70) ☒ Specific hazards of each chemical to which they may be exposed, including the pathways of exposure (i.e. skin absorption, inhalation, ingestion).

## Emergency Response Team

Emergency response team members are additionally trained in the following procedures and will act as liaison to the Fire Department:

- 71) ☒ Personnel rescue procedures.  
 72) ☒ Shutdown of operations.  
 73) ☒ Use, maintenance, and replacement of emergency response equipment.  
 74) ☐ Emergency response drills.  
 75) ☒ Refresher training is provided at least annually.

## Emergency Response Documents

The following training records are maintained for each employee:

- 76) ☒ Verification of date that training was completed.  
 77) ☒ Description of introductory and continuing training.  
 78) ☒ Employee's training records are retained at least three years.  
 79) N/A Description and documentation of facility emergency response drills.

## Other

- 79A) N/A Procedure to be used in event of spill from an underground tank N/A.

Your emergency response training plan and training records must be on site and available for review by Alameda County Department of Health

ACDEH0000024

## Alameda County Department of Environmental Health

## HAZARDOUS MATERIALS MANAGEMENT PLAN

## Emergency Response Plan

Facility Name RED HANGER KLEANNERS Facility ID \_\_\_\_\_Evacuation Information

## 80) Evacuation Notification

- ☒ Verbal (i.e. shouting)  
☐ Horns  
☐ Alarms

## 81) Evacuation Procedures

The evacuation plan and routes must be submitted with the HMMP and shall include:

- ☒ Defined evacuation routes and procedures.  
☒ Preplanned assembly areas.  
☒ Evacuation route maps prominently displayed throughout facility.  
☒ Re-entry procedures.

## 82) Other Evacuation Planning Information

NoneEmergency Contacts82a) Priority contact phone # 415-736-3635

Fire/Police/Ambulance 911

83) CA State Office of Emergency Services 1-800-852-7550

84) Other Dept Name

85) Nearest Medical Facility Kaiser OAKLANDAddress 13 Broadway & MacArthurCity OAKLAND, CA

ACDEH0000025



Alameda County Department of Environmental Health  
HAZARDOUS MATERIALS MANAGEMENT PLAN  
Facility Map - Site Plan

Facility Name RED HANGER KLEANERS Facility ID \_\_\_\_\_

*See Attached  
Map of site Plan*

N

Scale \_\_\_\_\_ feet/inch

Map # \_\_\_\_\_

Map Name \_\_\_\_\_

Today's Date \_\_\_\_\_

Loc  
A-  
B-  
C-  
D-  
E-  
F-

ACDEH0000026

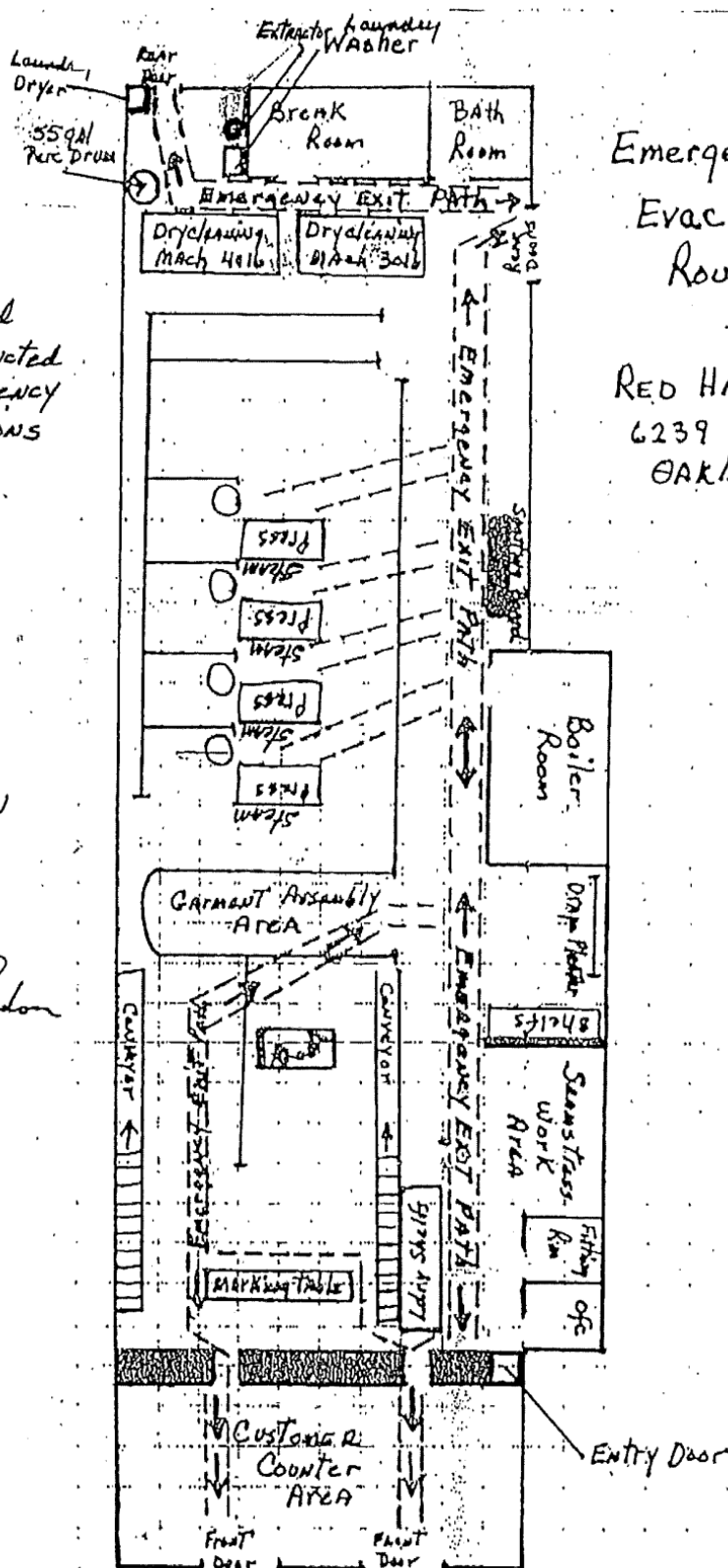
ALL Employee's Listed  
Below have been instructed  
AND FURNISHED EMERGENCY  
EVACUATION INSTRUCTIONS  
Effective 3/28/91

SILVIA MOLINA  
ALICE TINKELBERG  
BARBARA WRIGHT  
KATHLEEN DUNCAN  
MARY STRICKLAND  
BETH TACKLEY  
DEBORAH COLSTON  
McSHAN DEPAW  
DAVID GORDON  
BRIAN GORDON

SGordon  
CEO

# Emergency Evacuation Route Plan for

RED HANGER KLEANNERS  
6239 College Ave  
OAKLAND, CA.



College Ave  
RED HANGER KLEANNERS

ACDEH0000027

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY  
DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES  
ENVIRONMENTAL PROTECTION  
1131 Harbor Bay Parkway, Suite 250  
Alameda, CA 94502-6577  
(510) 567-6700  
FAX (510) 337-9335

July 24, 2009

Mr. Ronald Elvidge  
William Kochenderfer, Esq.  
12210 Herdal SR #11  
Auburn, CA 94603

College Claremont Venture Co. Ila Gordon  
1345 Grand Ave. Ila Gordon Trust  
Piedmont, CA 94610 Unknown Address

Subject: Fuel Leak Case No. RO0002981 and Geotracker Global ID T10000000416, Red Hanger Cleaners, 6335-6339 College Ave., Oakland, CA 94618

Dear Mr. Elvidge and Mrs. Gordon:

The purpose of this correspondence is to inform you of changes to groundwater monitoring requirements for all fuel leak cases in California. The California State Water Resources Control Board (State Water Board) has approved Resolution No. 2009-0042 (*Actions to Improve Administration of the UST Cleanup Fund and UST Cleanup Program*). Resolution No. 2009-0042 states that, "*Regional Water Board and LOP agencies shall reduce quarterly groundwater monitoring requirements to semiannual or less frequent monitoring at all sites unless site-specific needs warrant otherwise and shall notify all responsible parties of the new requirements no later than August 1, 2009. If more than semiannual monitoring is required for a case, the responsible party and State Water board shall be notified of the rationale and the notice shall be posted on Geotracker.*"

If your site does not have monitoring wells, the new groundwater monitoring requirements in State Water Board Resolution No. 2009-0042 do not affect you at this time. These new groundwater monitoring requirements potentially may apply if monitoring wells are installed at your site in the future.

If you have any questions, please call me at (510) 639-1279 or send me an electronic mail message at [barbara.jakub@acgov.org](mailto:barbara.jakub@acgov.org).

Sincerely,

Barbara J. Jakub, P.G.  
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Jill A Quillan, Environmental Resources Management, 1777 Botelho Drive, Suite 260, Walnut Creek, CA 94596  
Leroy Griffin, Oakland Fire Department, 250 Frank H. Ogawa Plaza, Ste. 3341, Oakland, CA 94612-2032  
(Sent via E-mail to: [lgriffin@oaklandnet.com](mailto:lgriffin@oaklandnet.com))  
Donna Drogos, ACEH (Sent via E-mail to: [donna.drogos@acgov.org](mailto:donna.drogos@acgov.org))  
Barbara Jakub, ACEH (Sent via E-mail to: [barbara.jakub@acgov.org](mailto:barbara.jakub@acgov.org))  
Geotracker, File

ACDEH0000028

RESPONSIBLE PARTY OF RECORD AS OF 07/22/2009

RO0002981, RED HANGER CLEANERS, 6335-6339 COLLEGE AVE , OAKLAND, CA, 94618

Alameda County Environmental Health (ACEH) has the following information on record regarding the Responsible Party(ies) for the above referenced site. Please update the following information for our records. Should you have contact information regarding additional Responsible Parties, please correct the information accordingly. Also, please check the "e-mail preferred" box to receive all future correspondences and notifications by e-mail.

☐ E-mail Preferred☐ Hardcopy Preferred

ACEH is requesting your e-mail address so that we can correspond with you quickly and efficiently regarding your case. Please note that ACEH respects your privacy. Your e-mail address will remain confidential and will not be provided to any third party.

Current Information

RONALD ELVIDGE  
C/O WILLIAM KOCHENDERFER ESQ  
12210 HERDAL SR #11  
AUBURN CA 95603  
wkochenderfer@cs.com  
5308871456

ILA GORDON  
GORDON ILA L TRUST  
UNK  
UNK CA 00000

Corrections or Additions

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_  
Office Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Home Phone: (\_\_\_\_) \_\_\_\_\_  
Office Phone: (\_\_\_\_) \_\_\_\_\_  
Cell Phone: (\_\_\_\_) \_\_\_\_\_

RO0002981, 6335-6339 COLLEGE AVE , OAKLAND

ACDEH0000029



ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



74618  
JAN 26 '09 PM 3:39

ENVIRONMENTAL HEALTH SERVICES  
ENVIRONMENTAL PROTECTION  
1131 Harbor Bay Parkway, Suite 250  
Alameda, CA 94502-6577  
(510) 567-6700  
FAX (510) 337-9335

January 15, 2009

Mr. Ronald Elvidge  
William Kochenderfer, Esq.  
12210 Herdal SR #11  
Auburn, CA 94603

College Claremont Venture Co. Ila Gordon  
1345 Grand Ave.  
Piedmont, CA 94610

Ila Gordon Trust  
PO Box 1131  
Lafayette, CA 94549-1131

Subject: Fuel Leak Case No. RO0002981 and Geotracker Global ID T10000000416, Red Hanger Cleaners, 6335-6339 College Ave., Oakland, CA 94618

Dear Mr. Elvidge and Mrs. Gordon:

Alameda County Environmental Health (ACEH) staff has reviewed the case file for the above-referenced site including the May 17, 2005 *Phase II Subsurface Investigation Report* that was prepared by AEI Consultants and the June 2, 2005 Request for No Further Action – Red Hanger Cleaners submitted by EFI Global. The reports indicate that tetrachloroethene (PCE) was detected in both soil and groundwater. Soil samples collected from either the 3 or 4 feet below ground surface in soil borings SB-1 through SB-4 contained a maximum concentration of 0.26 milligrams per kilogram (mg/kg) which is below the environmental screening level for PCE. However, no soil samples were collected at depth. A groundwater sample collected from SB-1 contained maximum concentrations of 48 micrograms per liter (µg/L) PCE. The extent of the PCE contamination in soil and groundwater has not been defined.

ACEH requests that you address the following technical comments, perform the requested work, and send us the work plan requested below.

**TECHNICAL COMMENTS**

1. **Dissolved Groundwater Plume Characterization.** Grab groundwater samples collected downgradient of the dry cleaning machines detected a maximum concentration of 48 µg/L PCE. In addition, another sample collected in a subsequent sampling event contained 15 µg/L PCE. Both of these concentrations are above the 5 µg/L RWQCB ESL for PCE. Therefore groundwater is undefined horizontally to the southwest of these two borings. Also, the vertical extent of the PCE contamination has not been assessed since deeper groundwater samples have not been collected. Please submit your plan to assess the horizontal and vertical extent of contamination at the site.
2. **Soil Characterization.** Four soil samples were collected around the locations of the dry cleaning machines. These soil samples were collected from three of four feet bgs

ACDEH0000030

Mr. Elvidge and Mrs. Gordon  
RO0002981  
January 15, 2009, Page 2

depending on the boring. No deeper samples were obtained from the borings near the dry cleaning machines leaving the vertical extent of soil contamination undefined. Please submit your plan to assess the vertical extent of soil contamination at the site.

3. **UST Characterization.** One soil sample was collected from 11.5 feet below ground surface from the middle of the suspected 1,000-gallon underground storage tank (UST) pit. No hydrocarbons or oxygenates were detected in this soil sample. However, groundwater is present at the site at a greater depth and has not been sampled for these constituents. Please submit a work plan to determine if groundwater has been impacted in this area by the date requested below.
4. **Preferential Pathway Study.** The purpose of the preferential pathway study is to locate potential migration pathways and conduits and determine the probability of the NAPL and/or plume encountering preferential pathways and conduits that could spread contamination. We request that you perform a preferential pathway study that details the potential migration pathways and potential conduits (wells, utilities, pipelines, etc.) for vertical and lateral migration that may be present in the vicinity of the site.

Discuss your analysis and interpretation of the results of the preferential pathway study (including the well survey and utility survey requested below) and report your results in the report requested below. The results of your study shall contain all information required by California Code of Regulations, Title 23, Division 3, Chapter 16, §2654(b).

a. Utility Survey

An evaluation of all utility lines and trenches (including sewers, storm drains, pipelines, trench backfill, etc.) within and near the site and plume area(s) is required as part of your study. Please include maps and cross-sections illustrating the location and depth of all utility lines and trenches within and near the site and plume areas(s) as part of your study.

b. Well Survey

The preferential pathway study shall include a well survey of all wells (monitoring and production wells: active, inactive, standby, decommissioned (sealed with concrete), abandoned (improperly decommissioned or lost); and dewatering, drainage, and cathodic protection wells) within a ¼-mile radius of the subject site. As part of your detailed well survey, please perform a background study of the historical land uses of the site and properties in the vicinity of the site. Use the results of your background study to determine the existence of unrecorded/unknown (abandoned) wells, which can act as contaminant migration pathways at or from your site. Please review and submit copies of historical maps, such as Sanborn maps, aerial photographs, etc., when conducting the background study.

**REQUEST FOR INFORMATION**

ACEH's case file for the subject site contains only the electronic reports listed on our website (<http://www.acov.org/aceh/lop/ust.htm>). You are requested to submit copies of all other reports

ACDEH0000031

Mr. Elvidge and Mrs. Gordon  
RO0002981  
January 15, 2009, Page 3

related to environmental investigations for this property (including Phase 1 reports) by **March 16, 2009**.

#### **TECHNICAL REPORT REQUEST**

Please submit technical reports to Alameda County Environmental Health (Attention: Barbara Jakub), according to the following schedule:

- **April 15, 2009** –Work Plan including well survey.

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

#### **ELECTRONIC SUBMITTAL OF REPORTS**

ACEH's Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of reports in electronic form. The electronic copy replaces paper copies and is expected to be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program FTP site are provided on the attached "Electronic Report Upload Instructions." Submission of reports to the Alameda County FTP site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for all groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitoring wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, these same reporting requirements were added to Spills, Leaks, Investigations, and Cleanup (SLIC) sites. Beginning July 1, 2005, electronic submittal of a complete copy of all reports for all sites is required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements ([http://www.swrcb.ca.gov/ust/electronic\\_submittal/report\\_rqmts.shtml](http://www.swrcb.ca.gov/ust/electronic_submittal/report_rqmts.shtml)).

#### **PERJURY STATEMENT**

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

ACDEH0000032

Mr. Elvidge and Mrs. Gordon  
RO0002981  
January 15, 2009, Page 4

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

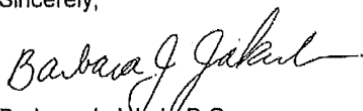
Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 639-1287 or send me an electronic mail message at [barbara.jakub@acgov.org](mailto:barbara.jakub@acgov.org).

Sincerely,



Barbara J. Jakub, P.G.  
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Robert Flory, AEI Consultants, 2500 Camino Diablo, Walnut Creek, CA 94597  
Leroy Griffin, Oakland Fire Department, 250 Frank H. Ogawa Plaza, Ste. 3341, Oakland, CA 94612-2032  
Donna Drogos, ACEH  
Barbara Jakub, ACEH  
File

ACDEH0000033



<b>Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC)</b>	ISSUE DATE: July 5, 2005
	REVISION DATE: December 16, 2005
	PREVIOUS REVISIONS: October 31, 2005
SECTION: Miscellaneous Administrative Topics & Procedures	SUBJECT: Electronic Report Upload (ftp) Instructions

Effective January 31, 2006, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities.

#### REQUIREMENTS

- Entire report including cover letter must be submitted to the ftp site as a single portable document format (PDF) with no password protection. (Please do not submit reports as attachments to electronic mail.)
- It is preferable that reports be converted to PDF format from their original format, (e.g., Microsoft Word) rather than scanned.
- Signature pages and perjury statements must be included and have either original or electronic signature.
- Do not password protect the document. Once indexed and inserted into the correct electronic case file, the document will be secured in compliance with the County's current security standards and a password. Documents with password protection will not be accepted.
- Each page in the PDF document should be rotated in the direction that will make it easiest to read on a computer monitor.
- Reports must be named and saved using the following naming convention:  
RO#\_Report Name\_Year-Month-Day (e.g., RO#5555\_WorkPlan\_2005-06-14)

#### Additional Recommendations

- A separate copy of the tables in the document should be submitted by e-mail to your Caseworker in Excel format. These are for use by assigned Caseworker only.

#### Submission Instructions

- 1) Obtain User Name and Password:
  - a) Contact the Alameda County Environmental Health Department to obtain a User Name and Password to upload files to the ftp site.
    - i) Send an e-mail to [dehloptoxic@acgov.org](mailto:dehloptoxic@acgov.org)
    - or
    - ii) Send a fax on company letterhead to (510) 337-9335, to the attention of Alicia Lam-Finneke.
  - b) In the subject line of your request, be sure to include "ftp PASSWORD REQUEST" and in the body of your request, include the Contact Information, Site Addresses, and the Case Number's (RO# available in Geotracker) you will be posting for.
- 2) Upload Files to the ftp Site
  - a) Using Internet Explorer (IE4+), go to <ftp://alcoftp1.acgov.org>
    - (i) Note: Netscape and Firefox browsers will not open the FTP site.
  - b) Click on File, then on Login As.
  - c) Enter your User Name and Password. (Note: Both are Case Sensitive.)
  - d) Open "My Computer" on your computer and navigate to the file(s) you wish to upload to the ftp site.
  - e) With both "My Computer" and the ftp site open in separate windows, drag and drop the file(s) from "My Computer" to the ftp window.
- 3) Send E-mail Notifications to the Environmental Cleanup Oversight Programs
  - a) Send email to [dehloptoxic@acgov.org](mailto:dehloptoxic@acgov.org) notify us that you have placed a report on our ftp site.
  - b) Copy your Caseworker on the e-mail. Your Caseworker's e-mail address is the entire first name then a period and entire last name at acgov.org. (e.g., [firstname.lastname@acgov.org](mailto:firstname.lastname@acgov.org))
  - c) The subject line of the e-mail must start with the RO# followed by Report Upload. (e.g., Subject: RO1234 Report Upload)

ACDEH0000034

# OAKLAND FIRE DEPARTMENT/FIRE PREVENTION BUREAU HAZARDOUS MATERIALS UNIT

250 FRANK OGAWA PLAZA, SUITE 3341, OAKLAND, CA 94612-2032 • (510) 238-3927

## HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	Ree Hanger	6239 College Ave	18
<b>Inspection Report</b>			
5th Pathway <input checked="" type="checkbox"/> PERMISSION TO INSPECT GRANTED Renovation of Laundry/Dry cleaning, HWY Facility manifests are onsite  1 x 55 gal drum out back under awning on 2nd contain pallet w/ Label tetrahydroethylene 2/5/07 accm  Extinction cord disconnected w/ electrically, notal perm wiring  HMBP not yet complete  Submit HMBP w/ cert Compliance w/ 1 week  Get receipt or annual tag on extinguisher & a sign showing where it is			

Facility Contact/Print Name:  Facility Contact/Signature: 	Inspected By: <div style="display: flex; flex-direction: column; align-items: flex-start;"> <div><input type="checkbox"/> Insp. Griffin 238-7759</div> <div><input checked="" type="checkbox"/> Insp. Kupers 238-7054</div> <div><input type="checkbox"/> Insp. Matthews 238-2396</div> <div><input type="checkbox"/> Insp. Gomez 238-7253</div> </div> <div style="margin-top: 10px;">            238-3927         </div> <div style="text-align: right; margin-top: 10px;">           Date: 3/15/07         </div>
---	--

538-156 (05/05)

ACDEH0000035

## HAZARDOUS WASTE GENERATOR INSPECTION REPORT

FACILITY NAME: <u>Red Hanger</u>				EPA I.D.#: <u>020 006261</u>					
ADDRESS: <u>10239 College</u>				DATE: <u>3/15/07</u>					
CODE SECTION		COMPLIANCE		CODE SECTION		COMPLIANCE			
		YES	NO	N/A			YES	NO	N/A
<b>1. IDENTIFICATION NUMBER</b>				<b>6. CONTINGENCY/BUSINESS PLAN</b>					
(a) Obtained EPA I.D. Number		66262.12(a)	<input checked="" type="checkbox"/>		(a) Contingency Plan Complete		66265.52(a-f)	<input checked="" type="checkbox"/>	
(b) Transporter and TSDF Have EPA I.D.#		66265.12(c)	<input checked="" type="checkbox"/>		(b) Copy of Plan on Site		66265.53	<input checked="" type="checkbox"/>	
<b>2. PRE-TRANSPORT REQUIREMENTS</b>				(c) Contingency/Business Plan Submitted		66265.53(b)	<input checked="" type="checkbox"/>		
(a) HW Containers Labeled		66262.31	<input checked="" type="checkbox"/>		(d) Plan Amended as Necessary		66265.54		
(b) HW Label Properly Filled Out		66262.32(14)	<input checked="" type="checkbox"/>		(e) ER Coordinator Familiar w/Plan		66265.55		
(c) HW Accumulation of Time Not Exceeded		66262.34 (c)	<input checked="" type="checkbox"/>		<b>7. PREPAREDNESS AND PREVENTION</b>				
(d) Accumulation Date Indicated		66262.34(f)	<input checked="" type="checkbox"/>		(a) Internal Comm./Alarm Provided		66265.32(a)	<input checked="" type="checkbox"/>	
(e) Description of HW Contents		66262.34(f)	<input checked="" type="checkbox"/>		(b) A Device to Call Outside Provided		66265.32(b)	<input checked="" type="checkbox"/>	
(f) HW Containers in Good Condition		66265.171	<input checked="" type="checkbox"/>		(c) Spill Control Systems Available		66265.32(c)	<input checked="" type="checkbox"/>	
(g) HW Compatible with Containers		66265.172	<input checked="" type="checkbox"/>		(d) Maintain ER Equipment		66265.33	<input checked="" type="checkbox"/>	
(h) HW Containers Closed/Sealed		66265.173	<input checked="" type="checkbox"/>		(e) Security Measure		66265.14	<input checked="" type="checkbox"/>	
(i) HW Storage Area Inspected Weekly		66265.174			(f) Maintain Adequate Aisle Space		66265.35	<input checked="" type="checkbox"/>	
(j) Tank & Tank Equip. Inspected Daily		66265.195			(g) Arrangements w/Local Agencies		66235.37	<input checked="" type="checkbox"/>	
(k) Incompatible HW in Separate Containers		66265.199			<b>8. EMERGENCY PROCEDURES</b>				
(l) Proper Management of Used Oil Filters		66266.130			(a) Character/Source/Extent of ER Determined		66265.56		
<b>3. RECORDKEEPING AND REPORTING</b>				(b) Proper Agencies Notified of Health Hazard		66265.56			
(a) HW Analysis Kept 5 Yrs./Land Disposal		66262.11			(c) ER Data Submitted to DTSC & LIA		66265.56		
(b) Biennial Report Submitted to State		66262.41			(d) Uncontrol. Release HW Property Handled		66235.56		
<b>4. MANIFEST/RECEIPTS</b>				<b>9. WASTE STREAMS</b>					
(a) HW Shipped with Proper Manifest		66262.20	<input checked="" type="checkbox"/>		(a) Waste Oil				
(b) Manifests Kept for Last 3 Years		66262.40(a)	<input checked="" type="checkbox"/>		(b) Non-Halogenated Solvents/Parts Cleaner				
(c) HW Analysis Kept for 3 Years		66262.40(c)			(c) Ethylene Glycol/Antifreeze				
(d) Manifests Received from TSDF		66262.42			(d) Oily Sludges				
<b>5. TRAINING</b>				(e) Other: <u>Rec.</u>			<input checked="" type="checkbox"/>		
(a) Training Program Provided		66265.16	<input checked="" type="checkbox"/>		(f) Other:				
(b) Personnel Trained & Supervised		66265.16(b)	<input checked="" type="checkbox"/>		(g) Other:				
(c) HW Personnel Trained within 6 Months		66265.16(b)	<input checked="" type="checkbox"/>		(h) Other:				
(d) Training Records Kept on Site		66265.16(d)	<input checked="" type="checkbox"/>						
(e) Training Records Maintained for 3 Years		66265.16(e)	<input checked="" type="checkbox"/>						
(f) Training Records Complete		66265.16(1,2)	<input checked="" type="checkbox"/>						
Source Reduction Plan Completed				25244.19	Pollution Prevention		Health & Safety Code		
REMARKS:									
<u>Technician 2/24/07 3x 55g</u>									
<u>2/5/07 55g Tetra chloroethylene</u>									
<u>Previous 9/26/06</u>									

ACDEH0000036

**OAKLAND FIRE DEPARTMENT**  
**250 Frank H. Ogawa Plaza, #3341, Oakland, CA 94612**  
**HAZARDOUS MATERIALS MANAGEMENT PROGRAM**  
Phone: (510) 238-3927

Date: February 5, 2007

Permit Number: 20-0891

Mailing Address

RED HANGER KLEANERS, INC.  
P O BOX 1131  
LAFAYETTE CA 94549

Facility Operator, Name, and Address

Red Hanger Cleaners  
6239 College Ave.  
Oakland, CA 94618

## Notice of Violation

The following are results of inspections made of your facility on the date(s) indicated. The violations are to be corrected and reinspected by the due date shown. Please call this agency to schedule a reinspection.

**HMBP Inspection**

Violation	Inspector	Inspect Date	Due Date
1 413 Secondary containment is inadequate Haz waste liquids need to be on the secondary containment pallet.	Jesse Kupers	01/31/2007	03/02/2007
2 CA H&SC Section 25503.5(a) requires any business handling a hazardous material and which has a quantity at any one time equal to or greater than, 500 pounds, 30 gallons, or 200 cubic feet of compressed gas, shall establish and implement a business plan. Submit new HMBP (www.unidocs.org, form un-020).	Jesse Kupers	01/31/2007	03/02/2007

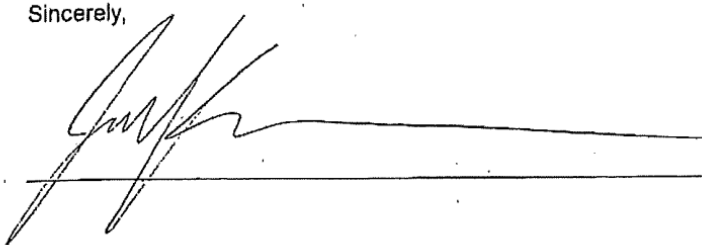
**Uniform Fire Code/Oakland Municipal Code Inspection**

Violation	Inspector	Inspect Date	Due Date
1 UFC - Other Do not use extension cord for permanent machine. Install compliant hard wiring.	Jesse Kupers	1/31/2007	3/2/2007
2 UFC - Other Have extinguishers maintained annually, last on 06/01.	Jesse Kupers	1/31/2007	3/2/2007

**Hazardous Waste Generator Inspection**

Violation	Inspector	Inspect Date	Due Date
1 66262.40a Manifest for last 3 years not kept	Jesse Kupers	01/31/2007	03/02/2007
2 CCR 66261.7 Managing Empty Containers Proper manage empties. Get rid of old/unnecessary ones.	Jesse Kupers	01/31/2007	03/02/2007
3 66262.34c HW accumulation of time exceeded Properly dispose of all haz waste that has been onsite past proper accumulation times.	Jesse Kupers	01/31/2007	03/02/2007
4 66262.32(14) HW labels not properly filled out	Jesse Kupers	01/31/2007	03/02/2007

Sincerely,



Page 1 of 2

ACDEH0000037



Jesse Kupers



# OAKLAND FIRE DEPARTMENT/FIRE PREVENTION BUREAU HAZARDOUS MATERIALS UNIT

250 FRANK OGAWA PLAZA, SUITE 3341, OAKLAND, CA 94612-2032 • (510) 238-3927

## HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	Red Hanger Cleaners	6239 College	18
<b>Inspection Report</b>			
<input checked="" type="checkbox"/> PERMISSION TO INSPECT GRANTED			
Seth Patka, Cleaner		654-1740	
<p>FIRE Extinguishers need service - last 06/01</p> <p>IN Bunk Room overhang</p> <p>9 55g drums + 2 25g</p> <p>1x 55 has filters</p> <p>1x 55 g Perc w/label, accum date 19 empty</p> <p>Rest of drums in poor condition, rusty</p> <p>1x 5 g oil</p> <p>Get rid of empties &amp; old waste</p> <p>Keep 1 drum for Perc on 2nd contain - proper label</p> <p>Extension cord to Soap dispenser must be hardwired</p> <p>Submit new HMBP - <a href="http://www.unidoes.org">www.unidoes.org</a> Form UNO2</p> <p>Have manifests onsite for 3yrs</p> <p>Don't store 55g drums under swap codes - must be enclosed/covered</p> <p>Comply w/ 30 days</p>			

Facility Contact/Print Name: SETH PATKA Facility Contact/Signature: 	Inspected By: <div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <input type="checkbox"/> Insp. Griffin  <input checked="" type="checkbox"/> Insp. Kupers  <input type="checkbox"/> Insp. Matthews  <input type="checkbox"/> Insp. Gomez         </div> <div style="margin-right: 10px;">           238/3927  </div> <div style="margin-right: 10px;">           238-7759            238-7054            238-2396            238-7253         </div> </div> <div style="margin-top: 10px;">           Date: 1/31/07         </div>
---	---

538-156 (05/05)

ACDEH0000040





**OAKLAND FIRE DEPARTMENT**  
**250 Frank H. Ogawa Plaza, #3341, Oakland, CA 94612**  
**HAZARDOUS MATERIALS MANAGEMENT PROGRAM**  
**Phone: (510) 238-3927**

**Date: February 5, 2007**

**Permit Number: 20-0891**

Mailing Address

RED HANGER KLEANERS, INC.  
 PO BOX 1131  
 LAFAYETTE CA 94549

Facility Operator, Name, and Address

Red Hanger Cleaners  
 6239 College Ave.  
 Oakland, CA 94618

## Notice of Violation

The following are results of inspections made of your facility on the date(s) indicated. The violations are to be corrected and reinspected by the due date shown. Please call this agency to schedule a reinspection.

### HMBP Inspection

Violation	Inspector	Inspect Date	Due Date
1 413 Secondary containment is inadequate Haz waste liquids need to be on the secondary containment pallet.	Jesse Kupers	01/31/2007	03/02/2007
2 CA H&SC Section 25503.5(a) requires any business handling a hazardous material and which has a quantity at any one time equal to or greater than, 500 pounds, 30 gallons, or 200 cubic feet of compressed gas, shall establish and implement a business plan. Submit new HMBP (www.unidocs.org, form un-020).	Jesse Kupers	01/31/2007	03/02/2007

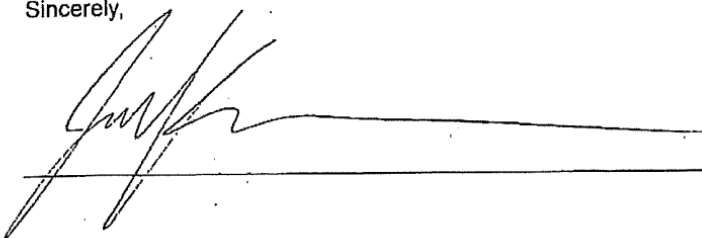
### Uniform Fire Code/Oakland Municipal Code Inspection

Violation	Inspector	Inspect Date	Due Date
1 UFC - Other Do not use extension cord for permanent machine. Install compliant hard wiring.	Jesse Kupers	1/31/2007	3/2/2007
2 UFC - Other Have extinguishers maintained annually, last on 06/01.	Jesse Kupers	1/31/2007	3/2/2007

### Hazardous Waste Generator Inspection

Violation	Inspector	Inspect Date	Due Date
1 66262.40a Manifest for last 3 years not kept	Jesse Kupers	01/31/2007	03/02/2007
2 CCR 66261.7 Managing Empty Containers Proper manage empties. Get rid of old/unnecessary ones.	Jesse Kupers	01/31/2007	03/02/2007
3 66262.34c HW accumulation of time exceeded Properly dispose of all haz waste that has been onsite past proper accumulation times.	Jesse Kupers	01/31/2007	03/02/2007
4 66262.32(14) HW labels not properly filled out	Jesse Kupers	01/31/2007	03/02/2007

Sincerely,



Page 1 of 2

ACDEH0000042

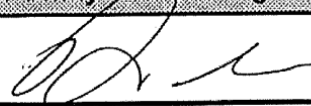
Jesse Kupers

(A)

**OAKLAND FIRE SERVICES AGENCY/OFFICE OF EMERGENCY SERVICES**  
**HAZARDOUS MATERIALS UNIT**  
 505 - 14th Street, Oakland, CA 94612 (510) 238-3938

**HAZARDOUS MATERIALS INSPECTION REPORT**

Site Number	Facility Name	Facility Address	Zip Code
891	RED HANGERS CLEANERS	6239 COLLEGE AVE	18
<b>Inspection Report</b>			
PERMISSION TO INSPECT GRANTED			
DRY CLEANING w/ SMALL H <sub>2</sub> O WASHING -			
NO VIOLATIONS NOTED			
ALL EXTINGUISHERS TO BE MAINTAINED			
2 MACHINES - 60x1 ~ 80x1			
PERC TOTAL ON HAND 140 gallons -			
MSDS - ON SITE & up to DATE			
HMBP - 30 DAYS			

Facility Contact/ Print Name: David Gordon S.M. Facility Contact/ Signature: 	Inspected By: <div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Insp. Griffin 238-7759</div> <div><input type="checkbox"/> Insp. Johnson 238-3804</div> <div><input checked="" type="checkbox"/> Insp. Craford 238-7758</div> <div><input type="checkbox"/> Insp. Gomez 238-7253</div> </div> <div style="margin-top: 10px;">           Date: 2-32-97         </div>
---	---

ACDEH0000044

## CITY OF OAKLAND



250 FRANK OGAWA PLAZA, SUITE 3341

• OAKLAND, CALIFORNIA 94612

Fire Department  
 Fire Prevention Bureau  
 Hazardous Materials Management Program

(510) 238-3927  
 FAX: (510) 238-6739  
 TTY/TDD: (510) 238-6884

MAR 23 '07 AM 9:38

**CERTIFICATION OF RETURN TO COMPLIANCE****For Stormwater and/or CUPA Violations**In the matter of the Violation(s) cited on: 1/31/07

As Identified in the Inspection Report dated \_\_\_\_\_

Conducted by: J. Kuyers

I certify under penalty of law that:

1. Respondent has corrected the violations specified in the notice of violation cited above.
2. I have personally examined any documentation attached to the certification to establish that the violations have been corrected.
3. Based on my examination of the attached documentation and inquiry of the individuals who prepared or obtained it, I believe that the information is true, accurate, and complete.
4. I am authorized to file this certification on behalf of the Respondent.
5. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

George Kong III President  
 Name (Print or Type) Title

[Signature] 3-20-07  
 Signature Date Signed

Red Hanger 6239 College  
 Company Name Address

ACDEH0000045



# OAKLAND FIRE DEPARTMENT/FIRE PREVENTION BUREAU HAZARDOUS MATERIALS UNIT

250 FRANK OGAWA PLAZA, SUITE 3341, OAKLAND, CA 94612-2032 • (510) 238-3927

## HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	Red Hanger	16739 Colfax Ave	94607
<b>Inspection Report</b>			
<input checked="" type="checkbox"/> <b>PERMISSION TO INSPECT GRANTED</b>			
<p>Inspected by: [Signature] Date: 11/14/07</p> <p>Facility Contact: [Signature]</p> <p>1. [Handwritten notes]</p> <p>2. [Handwritten notes]</p> <p>3. [Handwritten notes]</p> <p>4. [Handwritten notes]</p> <p>5. [Handwritten notes]</p> <p>6. [Handwritten notes]</p> <p>7. [Handwritten notes]</p> <p>8. [Handwritten notes]</p> <p>9. [Handwritten notes]</p> <p>10. [Handwritten notes]</p> <p>11. [Handwritten notes]</p> <p>12. [Handwritten notes]</p> <p>13. [Handwritten notes]</p> <p>14. [Handwritten notes]</p> <p>15. [Handwritten notes]</p> <p>16. [Handwritten notes]</p> <p>17. [Handwritten notes]</p> <p>18. [Handwritten notes]</p> <p>19. [Handwritten notes]</p> <p>20. [Handwritten notes]</p>			

Facility Contact/Print Name:	Inspected By: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Insp. Griffin 238-7759  <input checked="" type="checkbox"/> Insp. Kupers 238-7054  <input type="checkbox"/> Insp. Matthews 238-2396  <input type="checkbox"/> Insp. Gomez 238-7253         </div> <div>           Date: 11/14/07         </div> </div>
Facility Contact/Signature:	
<div style="text-align: center;"> </div>	

538-156 (05/05)

ACDEH0000046





Alameda Countywide  
Clean Water Program  
Standard Stormwater Facility Inspection Report Form

Municipality: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_  
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☐ Routine Inspection ☐ Response to Complaint ☐ Follow-up Follow-up Inspection Due:

NAME OF FACILITY	SITE ADDRESS
------------------	--------------

CONTACT NAME	PHONE	BUSINESS TYPE/ACTIVITY	SIC
--------------	-------	------------------------	-----

Is the property owner different than the facility owner? ☐ yes ☐ no If yes, complete the following: ☐ High Priority Facility

NAME	PHONE
------	-------

MAILING ADDRESS \_\_\_\_\_

Is the facility covered under any other programs or permits? (Check all that apply.) ☐ None ☐ Sanitary sewer

☐ Air quality      ☐ Hazmat business plan      ☐ Underground storage tanks      ☐ Aboveground storage tanks☐ Fire department(hazmat storage)      ☐ Hazmat waste generator      ☐ Retail food facility      ☐ Other \_\_\_\_\_

Is the facility covered under a storm water permit? ☐ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)

☐ Individual                      ☐ General: Does the facility have a SWPPP?    ☐ yes    ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

NSW = Non-Stormwater Discharge

AREAS OF ACTIVITY	N/A	Potential	Effect-iveness	Actual Discharge	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
		PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas	<input checked="" type="checkbox"/>				<input type="checkbox"/>
B. Outdoor Material Storage Areas	<input checked="" type="checkbox"/>	1	1		<input type="checkbox"/>
C. Outdoor Waste Storage/Disposal Areas	<input checked="" type="checkbox"/>	1	1		<input type="checkbox"/>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas	<input checked="" type="checkbox"/>	1	1		<input type="checkbox"/>
E. Outdoor Parking Areas and Access Roads	<input checked="" type="checkbox"/>	1	1		<input type="checkbox"/>
F. Outdoor Wash Areas	<input checked="" type="checkbox"/>				<input type="checkbox"/>
G. Rooftop Equipment	<input checked="" type="checkbox"/>	1			<input type="checkbox"/>
H. Outdoor Drainage from Indoor Areas	<input checked="" type="checkbox"/>	1			<input type="checkbox"/>
I. Other (describe):	<input checked="" type="checkbox"/>				<input type="checkbox"/>

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☐ Maintenance required in storm drain system ☐ yes ☐ no

\_\_\_\_\_

\_\_\_\_\_

---

.....

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1000

\_\_\_\_\_

Number of BMP brochures distributed? ☐ Describe: ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1; First ☐ 2; Second ☐ 3; Third ☐ Referred to: Details:

ENFORCEMENT: ☐ None ☐ Verbal Notice ☐ Administrative ☐ Administrative Action w/ ☐ Legal Action

<input type="checkbox"/> Warning Notice	Action	Penalty &/or Cost Recovery
---	--------	----------------------------

F:\A14x\A149.03\Database Revision\InspForm final 9-22-05.doc

Facility Representative: Sub. P. 100 Inspector: Sub. P. 100

ACDEH0000048

# INSTRUCTIONS Standard Stormwater Facility Inspection Form

Instructions are shown in italicized text.

Municipality: *Write city's name or county; unincorporated area where facility is located.*  
 Date: *Write date of inspection - month/date/year* Time: *Time of inspection*  
☐ Facility has closed *Check box if true.* ☐ Facility information has changed *Check box if any information has changed on and between lines below: "NAME OF FACILITY" to "Is the facility covered under a storm water permit?"*

Reason for Inspection: <input type="checkbox"/> First Inspection <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Response to Complaint <input type="checkbox"/> Follow-up <i>Check first box if this is the first stormwater inspection or second box if it is a routine inspection (don't check both boxes). Also, check third box if you are responding to complaint and/or check fourth box if you are following up on a previous inspection.</i>				Follow-up Inspection Due: <i>If a follow up inspection is needed, estimate date of completion - month/date/year.</i>	
NAME OF FACILITY <i>Write name of facility.</i>				SITE ADDRESS <i>Write site address.</i>	
CONTACT NAME <i>Write contact name.</i>		PHONE <i>Write phone no.</i>		BUSINESS TYPE/ACTIVITY <i>Describe business type.</i>	
SIC <i>Write Standard Industrial Code.</i>					
Is the property owner different than the facility owner? <input type="checkbox"/> yes <input type="checkbox"/> no <i>Determine if true or not and check appropriate box.</i>				<input type="checkbox"/> High Priority Facility <i>Check box if true.</i>	
NAME		PHONE		MAILING ADDRESS	
Is the facility covered under any other programs or permits? <i>(Check all that apply.)</i>				<input type="checkbox"/> None <input type="checkbox"/> Sanitary sewer	
<input type="checkbox"/> Air quality		<input type="checkbox"/> Hazmat business plan		<input type="checkbox"/> Underground storage tanks	
<input type="checkbox"/> Fire department(hazmat storage)		<input type="checkbox"/> Hazmat waste generator		<input type="checkbox"/> Aboveground storage tanks	
				<input type="checkbox"/> Retail food facility <input type="checkbox"/> Other	
Is the facility covered under a storm water permit? <input type="checkbox"/> Does not need Coverage				<input type="checkbox"/> No, but may need to be <i>(Refer to Water Board staff)</i>	
<i>Check which one of the first four boxes is applicable</i>				<input type="checkbox"/> General: <i>Check box if facility has coverage</i> Does the facility have a SWPPP? <input type="checkbox"/> yes <input type="checkbox"/> no	
<input type="checkbox"/> Individual <i>Check box if facility has a stormwater NPDES permit with its own name on it.</i>				<input type="checkbox"/> If facility is covered under the Industrial General Permit, determine whether it has a Stormwater Pollution Prevention Plan, which is required by this permit.	
N/A = Not Applicable; Check cell for each activity area that does not exist. POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential; For each existing activity area judge potential for pollutant exposure to rainfall/runoff considering degree of reliance on operational vs. structural BMPs & seasonal BMPs. BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented; Judge effectiveness of BMPs. NSW = Non-Stormwater Discharge; Mark this cell if you observe a non-stormwater discharge, disallowed by ACCWP's permit, flowing to storm drain.					
AREAS OF ACTIVITY		Poten- tial	Effect- iveness	Actual Dis- charge	REMARKS: <i>Describe recommendations, requirements, and time to implement below. Check box if remark is a requirement for facility to implement. Try to prioritize remarks to help the facility operator. Remarks do not have to be in same row as the activity area if it is clear what they refer to.</i>
A. Outdoor Process/Manufacturing Areas		N/A	PTNL	BMP	NSW
B. Outdoor Material Storage Areas					<input type="checkbox"/>
C. Outdoor Waste Storage/Disposal Areas					<input type="checkbox"/>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					<input type="checkbox"/>
E. Outdoor Parking Areas and Access Roads					<input type="checkbox"/>
F. Outdoor Wash Areas					<input type="checkbox"/>
G. Rooftop Equipment					<input type="checkbox"/>
H. Outdoor Drainage from Indoor Areas					<input type="checkbox"/>
I. Other (describe):					<input type="checkbox"/>
COMMENTS/REMARKS/REQUIREMENTS <input type="checkbox"/> Structural Control present <input type="checkbox"/> Maintenance required in storm drain system <input type="checkbox"/> yes <input type="checkbox"/> no <i>Check yes box if storm drain system needs trash or litter removed, erosion controls applied, and/or attention to any other condition to correct pollution threat or nuisance.</i>				<i>Check box if facility has stormwater treatment control BMPs present, such as a vegetated swale or a subsurface stormwater treatment system.</i>	
<i>Use this section to continue any remarks from the above "REMARKS" section.</i>					
Number of BMP brochures distributed? <input type="checkbox"/> Describe: <i>Write the number and describe any educational BMP brochures/flyers given to facility representative.</i>				<input type="checkbox"/> See attached for more comments. <i>Check box if additional comments are attached.</i>	
PRIORITY FOR RE-INSPECTION: <input type="checkbox"/> 1; First <input type="checkbox"/> 2; Second <input type="checkbox"/> 3; Third <i>Checkboxes are used as local planning tool; consult your municipality for instructions.</i>				<input type="checkbox"/> Referred to; Details: <i>Check box &amp; describe if any follow up activities were referred to another department, agency, and/or Water Board staff.</i>	
ENFORCEMENT: <i>Check appropriate box. Terms are defined in Handbook for Inspectors.</i>				<input type="checkbox"/> Administrative Action w/Penalty &/or <input type="checkbox"/> Legal Action <input type="checkbox"/> Cost Recovery	

F:\AI4x\AI49.03\Database Revision\Instructions\InspForm final 9-22-05.doc

Facility Representative: \_\_\_\_\_  
*Print name and obtain signature of facility representative who receives copy of this form.*

Inspector: \_\_\_\_\_  
*Sign your name.*

ACDEH0000049



**OAKLAND FIRE DEPARTMENT**  
**250 Frank H. Ogawa Plaza, #3341, Oakland, CA 94612**  
**HAZARDOUS MATERIALS MANAGEMENT PROGRAM**  
**Phone: (510) 238-3927**

**Date: February 5, 2007**

**Permit Number: 20-0891**

Mailing Address

RED HANGER KLEANERS, INC.  
 PO BOX 1131  
 LAFAYETTE CA 94549

Facility Operator, Name, and Address

Red Hanger Cleaners  
 6239 College Ave.  
 Oakland, CA 94618

## Notice of Violation

The following are results of inspections made of your facility on the date(s) indicated. The violations are to be corrected and reinspected by the due date shown. Please call this agency to schedule a reinspection.

### HMBP Inspection

Violation	Inspector	Inspect Date	Due Date
1 413 Secondary containment is inadequate Haz waste liquids need to be on the secondary containment pallet.	Jesse Kupers	01/31/2007	03/02/2007
2 CA H&SC Section 25503.5(a) requires any business handling a hazardous material and which has a quantity at any one time equal to or greater than, 500 pounds, 30 gallons, or 200 cubic feet of compressed gas, shall establish and implement a business plan. Submit new HMBP ( <a href="http://www.unidocs.org">www.unidocs.org</a> , form un-020).	Jesse Kupers	01/31/2007	03/02/2007

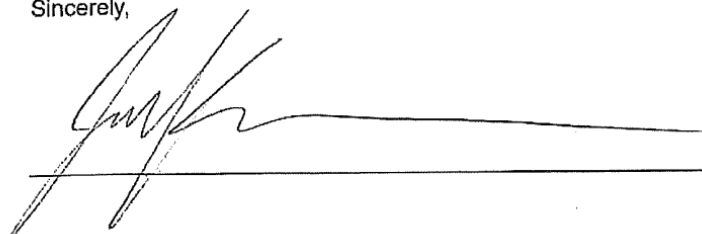
### Uniform Fire Code/Oakland Municipal Code Inspection

Violation	Inspector	Inspect Date	Due Date
1 UFC - Other Do not use extension cord for permanent machine. Install compliant hard wiring.	Jesse Kupers	1/31/2007	3/2/2007
2 UFC - Other Have extinguishers maintained annually, last on 06/01.	Jesse Kupers	1/31/2007	3/2/2007

### Hazardous Waste Generator Inspection

Violation	Inspector	Inspect Date	Due Date
1 66262.40a Manifest for last 3 years not kept	Jesse Kupers	01/31/2007	03/02/2007
2 CCR 66261.7 Managing Empty Containers Proper manage empties. Get rid of old/unnecessary ones.	Jesse Kupers	01/31/2007	03/02/2007
3 66262.34c HW accumulation of time exceeded Properly dispose of all haz waste that has been onsite past proper accumulation times.	Jesse Kupers	01/31/2007	03/02/2007
4 66262.32(14) HW labels not properly filled out	Jesse Kupers	01/31/2007	03/02/2007

Sincerely,



Page 1 of 2

ACDEH0000050

Jesse Kupers

7005 0390 0000 0140 5433

U.S. Postal Service™

**CERTIFIED MAIL™ RECEIPT***(Domestic Mail Only; No Insurance Coverage Provided)*For delivery information visit our website at [www.usps.com](http://www.usps.com)®**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark  
Here*Sent To**Street, Apt. No.;  
or PO Box No.**City, State, ZIP+4*

PS Form 3800, June 2002

See Reverse for Instructions

**ACDEH0000052**

**Certified Mail Provides:**

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

PS Form 3800, June 2002 (Reverse)

**Important Reminders:**

- Certified Mail may **ONLY** be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

**IMPORTANT: Save this receipt and present it when making an inquiry.**  
**Internet access to delivery information is not available on mail**  
**addressed to APOs and FPOs.**


ACDEH0000053

# OAKLAND FIRE DEPARTMENT/FIRE PREVENTION BUREAU HAZARDOUS MATERIALS UNIT

250 FRANK OGAWA PLAZA, SUITE 3341, OAKLAND, CA 94612-2032 • (510) 238-3927

## HAZARDOUS MATERIALS INSPECTION REPORT

Site Number	Facility Name	Facility Address	Zip Code
	Red Hammer Cleaners	6239 College	18
<b>Inspection Report</b>			
<input checked="" type="checkbox"/> PERMISSION TO INSPECT GRANTED			
Seth Patten, Owner 654-1740			
FIRE Extinguishers need service - last 06/01			
INS. 6 Under overhang			
9 x 55 drums + 20 25 g			
1 x 55 has 5 lbs			
1 x 55 7 lbs collected around date 19/01			
2nd of drums in poor condition, 1 x 55			
1 x 55 out			
Get rid of drums to old waste			
1 drum 100 lbs on 22 container - per label			
Regulation 101 to 100 lbs drums - 1 x 55			
Submit new HMBP - www.vandenberg.com soon upon			
Have manifests made for 3 yrs			
Don't stop see drums under ramp color - must be			
Comply w/ 30 days			

Facility Contact/Print Name: Seth Patten	Inspected By: <input type="checkbox"/> Insp. Griffin 238-7759 <input checked="" type="checkbox"/> Insp. Kupers 238-7054 <input type="checkbox"/> Insp. Matthews 238-2396 <input type="checkbox"/> Insp. Gomez 238-7253
Facility Contact/Signature: 	Date: 1/31/07

538-156 (05/05)

ACDEH0000054







Alameda Countywide  
Clean Water Program  
Standard Stormwater Facility Inspection Report Form

Municipality: \_\_\_\_\_  
Date: \_\_\_\_\_ Time: \_\_\_\_\_  
☐ Facility has closed ☐ Facility information has changed

Reason for Inspection: ☐ First Inspection ☐ Routine Inspection ☐ Response to Complaint ☐ Follow-up Follow-up Inspection Due: \_\_\_\_\_

NAME OF FACILITY \_\_\_\_\_ SITE ADDRESS \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ PHONE \_\_\_\_\_ BUSINESS TYPE/ACTIVITY \_\_\_\_\_ SIC \_\_\_\_\_

Is the property owner different than the facility owner? ☐ yes ☐ no If yes, complete the following: ☐ High Priority Facility

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

Is the facility covered under any other programs or permits? (Check all that apply.) ☐ None ☐ Sanitary sewer  
☐ Air quality ☐ Hazmat business plan ☐ Underground storage tanks ☐ Aboveground storage tanks  
☐ Fire department(hazmat storage) ☐ Hazmat waste generator ☐ Retail food facility ☐ Other \_\_\_\_\_

Is the facility covered under a storm water permit? ☐ Does not need Coverage ☐ No, but may need to be (Refer to Water Board)  
☐ Individual ☐ General: Does the facility have a SWPPP? ☐ yes ☐ no

N/A = Not Applicable; PTNL = POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential

BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented

NSW = Non-Stormwater Discharge

		Potential	Effect- iveness	Actual Discharge	REMARKS: Describe recommendations, requirements, and time to implement. Check box if remark is a requirement
AREAS OF ACTIVITY	N/A	PTNL	BMP	NSW	
A. Outdoor Process/Manufacturing Areas					<input type="checkbox"/>
B. Outdoor Material Storage Areas					<input type="checkbox"/>
C. Outdoor Waste Storage/Disposal Areas					<input type="checkbox"/>
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas					<input type="checkbox"/>
E. Outdoor Parking Areas and Access Roads					<input type="checkbox"/>
F. Outdoor Wash Areas					<input type="checkbox"/>
G. Rooftop Equipment					<input type="checkbox"/>
H. Outdoor Drainage from Indoor Areas					<input type="checkbox"/>
I. Other (describe):					<input type="checkbox"/>

COMMENTS/REMARKS/REQUIREMENTS Structural Control present ☐ Maintenance required in storm drain system ☐ yes ☐ no

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of BMP brochures distributed? ☐ Describe: \_\_\_\_\_ ☐ See attached for more comments.

PRIORITY FOR RE-INSPECTION: ☐ 1: First ☐ 2: Second ☐ 3: Third ☐ Referred to: Details: \_\_\_\_\_

ENFORCEMENT: ☐ None ☐ Verbal Notice ☐ Administrative ☐ Administrative Action w/ ☐ Legal Action  
☐ Warning Notice ☐ Action ☐ Penalty &/or Cost Recovery

F:\AI4x\AI49.03\Database Revision\InspForm final 9-22-05.doc

Facility Representative: \_\_\_\_\_ Inspector: \_\_\_\_\_

ACDEH0000056

## INSTRUCTIONS Standard Stormwater Facility Inspection Form

Instructions are shown in italicized text.

Municipality: *Write city's name or county unincorporated area where facility is located.*Date: *Write date of inspection - month/date/year* Time: *Time of inspection*
☐ Facility has closed Check box if true. ☐ Facility information has changed Check box if any information has changed on and between lines below: "NAME OF FACILITY" to "Is the facility covered under a storm water permit?"

Reason for Inspection: <input type="checkbox"/> First Inspection <input type="checkbox"/> Routine Inspection <input type="checkbox"/> Response to Complaint <input type="checkbox"/> Follow-up		Follow-up Inspection Due: <i>If a follow up inspection is needed, estimate date of completion - month/date/year.</i>	
Check first box if this is the first stormwater inspection or second box if it is a routine inspection (don't check both boxes). Also, check third box if you are responding to complaint and/or check fourth box if you are following up on a previous inspection.			
NAME OF FACILITY <i>Write name of facility.</i>		SITE ADDRESS <i>Write site address.</i>	
CONTACT NAME <i>Write contact name.</i>	PHONE <i>Write phone no.</i>	BUSINESS TYPE/ACTIVITY <i>Describe business type.</i>	SIC <i>Write Standard Industrial Code.</i>
Is the property owner different than the facility owner? <input type="checkbox"/> yes <input type="checkbox"/> no Determine if true or not and check appropriate box.		<input type="checkbox"/> High Priority Facility Check box if true.	
NAME		PHONE	MAILING ADDRESS
Is the facility covered under any other programs or permits? (Check all that apply.)			
<input type="checkbox"/> Air quality	<input type="checkbox"/> Hazmat business plan	<input type="checkbox"/> None	<input type="checkbox"/> Sanitary sewer
<input type="checkbox"/> Fire department(hazmat storage)	<input type="checkbox"/> Hazmat waste generator	<input type="checkbox"/> Underground storage tanks	<input type="checkbox"/> Aboveground storage tanks
		<input type="checkbox"/> Retail food facility	<input type="checkbox"/> Other
Is the facility covered under a storm water permit? <input type="checkbox"/> Does not need Coverage <input type="checkbox"/> No, but may need to be (Refer to Water Board staff)			
Check which one of the first four boxes is applicable		<input type="checkbox"/> Individual Check box if facility has a stormwater NPDES permit with its own name on it.	<input type="checkbox"/> General: Check box if facility has coverage under the Industrial General Permit. Determine whether it has a Stormwater Pollution Prevention Plan, which is required by this permit.
Does the facility have a SWPPP? <input type="checkbox"/> yes <input type="checkbox"/> no			
N/A = Not Applicable; Check cell for each activity area that does not exist. POTENTIAL for Pollutant Discharge: 1 = low potential, 2 = medium potential, 3 = high potential; For each existing activity area judge potential for pollutant exposure to rainfall/runoff considering degree of reliance on operational vs. structural BMPs & seasonal BMPs. BMP effectiveness: 0 = BMPs are effective, 1 = BMPs are fairly/almost effective, 2 = BMPs are not effective, 3 = No BMPs are implemented; Judge effectiveness of BMPs. NSW = Non-Stormwater Discharge; Mark this cell if you observe a non-stormwater discharge, disallowed by ACCWP's permit, flowing to storm drain.			
AREAS OF ACTIVITY	Poten- tial	Effect- iveness	Actual Dis- charge
	N/A	PTNL	BMP
A. Outdoor Process/Manufacturing Areas			
B. Outdoor Material Storage Areas			
C. Outdoor Waste Storage/Disposal Areas			
D. Outdoor Vehicle and Heavy Equipment Storage, Maintenance Areas			
E. Outdoor Parking Areas and Access Roads			
F. Outdoor Wash Areas			
G. Rooftop Equipment			
H. Outdoor Drainage from Indoor Areas			
I. Other (describe):			
REMARKS: Describe recommendations, requirements, and time to implement below. Check box if remark is a requirement for facility to implement. Try to prioritize remarks to help the facility operator. Remarks do not have to be in same row as the activity area if it is clear what they refer to.			
COMMENTS/REMARKS/REQUIREMENTS Structural Control present <input type="checkbox"/> Maintenance required in storm drain system <input type="checkbox"/> yes <input type="checkbox"/> no Check yes box if storm drain system needs trash or litter removed, erosion controls applied, and/or attention to any other condition to correct pollution threat or nuisance.			
Check box if facility has stormwater treatment control BMPs present, such as a vegetated swale or a subsurface stormwater treatment system.			
Use this section to continue any remarks from the above "REMARKS" section.			
Number of BMP brochures distributed? <input type="checkbox"/> Describe: <i>Write the number and describe any educational BMP brochures/flyers given to facility representative.</i> <input type="checkbox"/> See attached for more comments. Check box if additional comments are attached.			
PRIORITY FOR RE-INSPECTION: <input type="checkbox"/> 1; First <input type="checkbox"/> 2; Second <input type="checkbox"/> 3; Third		<input type="checkbox"/> Referred to; Details: Check box & describe if any follow up activities were referred to another department, agency, and/or Water Board staff.	
Checkboxes are used as local planning tool; consult your municipality for instructions.			
ENFORCEMENT: Check <input type="checkbox"/> None <input type="checkbox"/> Verbal Notice <input type="checkbox"/> Administrative Action		<input type="checkbox"/> Administrative Action w/Penalty &/or Cost Recovery <input type="checkbox"/> Legal Action	
appropriate box. Terms are defined in Handbook for Inspectors.			

F:\A14x\A149.03\Database Revision\Instructions\InspForm final 9-22-05.doc

Facility Representative: \_\_\_\_\_  
Print name and obtain signature of facility representative who receives copy of this form.Inspector: \_\_\_\_\_  
Sign your name.

ACDEH0000057





## Alameda County Urban Runoff Clean Water Program

A Consortium of Local Agencies

Municipality: OaklandAgency Conducting Inspection: Alameda County (HM)Inspector: Rael M. Regalado / Brad SeaDate of inspection: 3-17-94

Date of last inspection:

Facility ID #: 1529

## Standard Industrial and Commercial Business Inspection Checklist A

Page 1 of 6

<b>I. Background Information</b> (as reported by Facility Contact)	
1. Name of Facility: <u>Red Hanger Cleaners</u>	2. ACURID#:
3. Starting Date of Business:	4. Business Owner: <u>Blebert Gordon</u>
5. Facility Contact (include title): <u>David Gordon</u>	6. Phone No. of Contact: <u>854-1740</u>
7. Site Address: <u>6239 College Ave, Oakland 94618</u>	
8. Mailing Address: <u>P.O. Box 1131, Lafayette, CA 94549-1131</u>	
9. Property Owner (if different from Business Owner): <u>SRILA Living Trust</u>	10. Phone No. of Property Owner: <u>736-3633</u>
11. Mailing Address for Property Owner: <u>P.O. Box 1131, Lafayette 94545</u>	
12. Business Type: <u>Dry Cleaner</u>	13. Standard Industrial Classification Codes: <u>7216</u>
14. Does facility have Spill Prevention Plans?: yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
15. Is facility covered under a NPDES permit to discharge storm water? general <input type="checkbox"/> individual <input type="checkbox"/> none <input checked="" type="checkbox"/>	
16. Is facility covered under any other permits? none <input type="checkbox"/> air quality <input checked="" type="checkbox"/> sanitary sewer <input type="checkbox"/> underground storage tanks <input type="checkbox"/>	
17. Operating Schedule: Continues throughout year <input checked="" type="checkbox"/> Seasonal <input type="checkbox"/> (circle the months that the facility is in operation) Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec	
<b>II. Monitoring</b> (as reported by Facility Contact)	
Is storm water sampled? yes <input type="checkbox"/> no <input checked="" type="checkbox"/> If yes, indicate sampling locations on facility layout.	
Sampling method: grab <input type="checkbox"/> composite <input type="checkbox"/> other <input type="checkbox"/>	Sample monitoring: last sampling date <input type="text"/> frequency of sampling <input type="text"/>
Parameters tested for: pH <input type="checkbox"/> TSS <input type="checkbox"/> oil & grease <input type="checkbox"/> bioassay <input type="checkbox"/> conductivity <input type="checkbox"/> other <input type="text"/> TOC <input type="checkbox"/>	
<b>III. Facility Layout</b>	
Attach map(s) that identify and describe locations of storm drains/inlets, outdoor/indoor (storm and sewer) drains, storm water conveyance structures, storage areas, unit process areas, vehicle and heavy equipment wash and maintenance areas, and storm water sampling locations. If facility operator cannot provide an existing map, include a sketch on page 6.	
See Attachment A for sample facility map.	

ACDEH0000059



Facility Name: Red Hanger Cleaners Fac ID#: 1539  
 Date: 3/7/94

## Standard Inspection Checklist A

Page 2 of 6

IV. Outdoor Material Storage Areas <u>Waste Perc.</u>		Not Applicable <input type="checkbox"/>
1. How are outdoor storage areas cleaned	swept <input type="checkbox"/> wiped <input type="checkbox"/> absorbent material <input type="checkbox"/> other: _____	
2. How often are outdoor storage areas cleaned?	<u>once per week</u>	
3. Are materials stored in specified areas?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
4. Are storage containers (including drums) inspected regularly for cracks and leaks?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
5. Are storage containers (including drums) free of cracks/leaks?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
6. Are the covers/lids of containers kept closed or are containers not exposed to rainwater?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
7. If storage containers are cleaned, describe how wash water and/or the residual material is disposed.		
_____		
_____		
8. Is the surface of the storage area paved and impermeable?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
9. Where do surface drains in this area discharge?	no drains <input type="checkbox"/> storm drains <input checked="" type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	
10. Is the outdoor storage area covered and unexposed to rainwater?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
11. Has the potential for storm water runoff or runoff from the storage areas been eliminated?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
12. Is the ground surface free of any stains or other signs of pollutants?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
13. Describe best management practices (BMPs) used to prevent materials from outdoor storage areas from contacting storm water and discharging to storm drains.		
_____		
_____		
V. Waste Disposal Areas and Practices <u>Dumpster</u>		Not Applicable <input type="checkbox"/>
1. Are the lids on any waste dumpsters and/or trash compactors onsite kept closed?	yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	
2. Are dumpsters and/or trash compactors inspected regularly for cracks/leaks?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
3. Are dumpsters and/or trash compactors free of cracks/leaks?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
4. Is the area free of litter?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
5. Where do drains discharge?	no drains <input type="checkbox"/> storm drains <input checked="" type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	
6. Is waste storage area enclosed or covered from rainfall?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
7. Has the potential for storm water runoff or runoff from the waste disposal areas been eliminated?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
8. Is the floor/ground surface free of any stains or other signs of pollutants on the floor?	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	
9. Describe BMPs used to prevent pollutants from waste disposal areas from contacting storm water and discharging to storm drains.		
<u>Garbage other than cardboard are in plastic</u>		
<u>lines prior to dumping into dumpster</u>		

ACDEH0000060

Facility Name:

Red Hanger Cleaners

Fac ID#

1539

Date:

3-17-94

## Standard Inspection Checklist A

Page 3 of 6

<b>VI. Vehicle and Heavy Equipment Storage and Maintenance Areas</b>		Not Applicable <input type="checkbox"/>
<b>A. Parking Areas and Access Roads</b> <u>Parking Area</u>		
1. Are vehicles and/or heavy equipment parked onsite?	yes <input checked="" type="checkbox"/>	no <input type="checkbox"/>
2. How often are parking areas cleaned?	<u>Once per week</u>	
3. Describe method for cleaning parking areas.	<u>Sweep area</u>	
4. Where do drains in parking areas discharge?	no drains <input type="checkbox"/>	storm drains <input checked="" type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>
5. Are parking areas covered or enclosed?	yes <input checked="" type="checkbox"/>	no <input checked="" type="checkbox"/>
6. Are parking areas or access roads free of any sign of past spills?	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>
7. Are parking areas or access roads free of signs of excessive leaking from oil and/or motor fluids?	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>
<b>B. Vehicle and Heavy Equipment Repair and Maintenance Areas</b> <u>N/A</u>		Not Applicable <input checked="" type="checkbox"/>
1. Where do drains in repair and maintenance areas discharge?	no drains <input type="checkbox"/> storm drains <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	
2. Are repair and maintenance activity areas onsite enclosed or covered and unexposed to rainwater?	yes <input type="checkbox"/>	no <input type="checkbox"/>
3. Has the potential for storm water runoff or runoff from repair/maintenance areas been eliminated?	yes <input type="checkbox"/>	no <input type="checkbox"/>
4. Is the floor/ground surface of repair/maintenance area free of any stains or other signs of pollutants?	yes <input type="checkbox"/>	no <input type="checkbox"/>
<b>C. Vehicle and Heavy Equipment Wash Areas</b> <u>N/A</u>		Not Applicable <input checked="" type="checkbox"/>
1. Where do drains in wash areas discharge?	no drain <input type="checkbox"/> recycled <input type="checkbox"/> storm drains <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	
2. Is wash area covered or enclosed and unexposed to rainwater?	yes <input type="checkbox"/>	no <input type="checkbox"/>
3. Has the potential for storm water runoff or runoff from the wash area been eliminated?	yes <input type="checkbox"/>	no <input type="checkbox"/>
4. Is the floor of the wash area free of any stains or other signs of pollutants?	yes <input type="checkbox"/>	no <input type="checkbox"/>
5. Describe BMP's used to minimize the discharge of pollutants from access roads and vehicle and heavy equipment parking, repair, maintenance, and wash areas to storm water. _____ _____		
<b>VII. Rooftop Equipment</b> <u>Cooling tower (not exposed)</u>		Not Applicable <input checked="" type="checkbox"/>
Describe the potential for pollutants from rooftop equipment to be exposed to storm water runoff (e.g. condensation, exhaust gas, emissions, exposed motors/pumps, etc.). _____ _____		

ACDEH0000061

Facility Name: Red Hanger Cleaner Fac ID# 1539  
 Date: 3-17-94

## Standard Inspection Checklist A

Page 4 of 6

VIII. Storm Water Conveyance System and Spill Response/Prevention Practices Not Applicable ☐

1. How often are storm drain inlets (including catch basins) inspected, maintained, and/or cleaned?  
When required / Inspected 3x weekly
2. Describe method of cleaning. vacuum ☐ flush with water ☒ other: Shovel
3. Describe any testing for illicit connections to the storm drain system conducted by the facility (e.g. visual inspection, dye tests, etc.).  
None
4. If there are any other areas onsite that may be exposed to storm water (e.g. process and/or work areas, indoor storage areas, materials handling areas, etc.), fill out appropriate section of Attachment B.  
 all areas of the facility have been described ☐ see Attachment B for further information ☐
5. Briefly describe BMPs taken to prevent spills from entering the storm drain system and methods for clean-up should a spill occur.  
None / Absorbent used

## IX. Significant Materials (Materials that may have potential to be released with storm water discharges)

Estimate degree of material exposure to storm water using Code: 0 - None

- 1 - Little Potential for exposure to storm water  
 2 - Some potential for exposure to storm water  
 3 - Great potential for exposure to storm water

Raw Materials used in processing or production

Finished Materials

Hazardous Substances

Metals (especially copper, lead, zinc) solids (e.g. metal scraps) and solutions

Waste Products

Other

(Code)	Describe Materials if appropriate:
<u>0</u>	<u>None</u>
<u>2C</u>	<u>oil drippings / spilled waste prod.</u>
<u>1C</u>	<u>Litter from dumpster / Cardboards</u>
<u>0</u>	

ACDEH0000062

Facility Name: Red Hanger Cleaners File ID#: 1539  
 Date: 3-17-94

## Standard Inspection Checklist A

Page 5 of 6

## X. Conclusions (to be completed by the Inspector)

1. For each area of activity, indicate a numerical code to describe the level of potential discharge to the storm drains AND a letter code to describe the type of potential discharge found.

Level of Potential Discharge:

- 0 - not applicable for facility  
 1 - little potential for pollutant discharge to storm drains  
 2 - some potential for pollutant discharge to storm drains  
 3 - great potential for pollutant discharge to storm drains

Type of Potential Discharge:

- A - illicit connection  
 B - where drain discharges unknown  
 C - activity area and/or material exposed to storm water  
 D - other (please specify)

Areas of Activity:Outdoor Material Storage Areas 2CWaste Disposal Areas 1CRooftop Equipment 0

Vehicle and Heavy Equipment Storage and Maintenance Areas

parking areas and access roads 0repair and maintenance areas 2Cwash areas 0Other Areas: 0

2. Is a General Permit required? yes ☐ no ☒ questionable\* ☐  
 \*need clarification from Regional Water Quality Control Board whether permit is required.
3. Does the facility have a Storm Water Pollution Prevention Plan (SWPPP)? yes ☐ no ☒
4. Did the inspector use facility's SWPPP during the inspection? yes ☐ no ☒
5. Describe outreach performed by inspector to promote the Alameda County Urban Runoff Clean Water Program.

general ACURCWP brochure ☒  
 verbal ☒

industrial brochure ☐  
 BMP handouts (describe below) ☒ industrial  
 Other (describe below) ☐

Informed facility that General Permit may be necessary ☐

6. Follow-up Activities: None ☒ Warning Notice ☐  
 Informal Violation ☐ Formal Violation ☐

If a violation was identified, indicate date of follow-up inspection if scheduled: \_\_\_\_\_

no follow-up inspection necessary ☐ follow-up inspection to be scheduled at a later date ☐

7. Time to perform inspection: 2 hours

## Recommended actions:

- (1) Clean up dumpster area.  
 (2) Provide cap/plug for dumpster, stop leaks  
 (3) Clean debris (plant material around Hazardous waste area.

## Comments:

- (4) Provide berm around Hazardous waste container or other method as to contain leakage.  
 (5) Oil dripping to be cleaned up quickly as to prevent seepage to concrete. Do not water wash -

Facility Representative Signature: [Signature]Date: 3-17-94

Print Facility Rep. Name: \_\_\_\_\_

Inspector's Signature: Paul H. [Signature]

ACDEH0000063

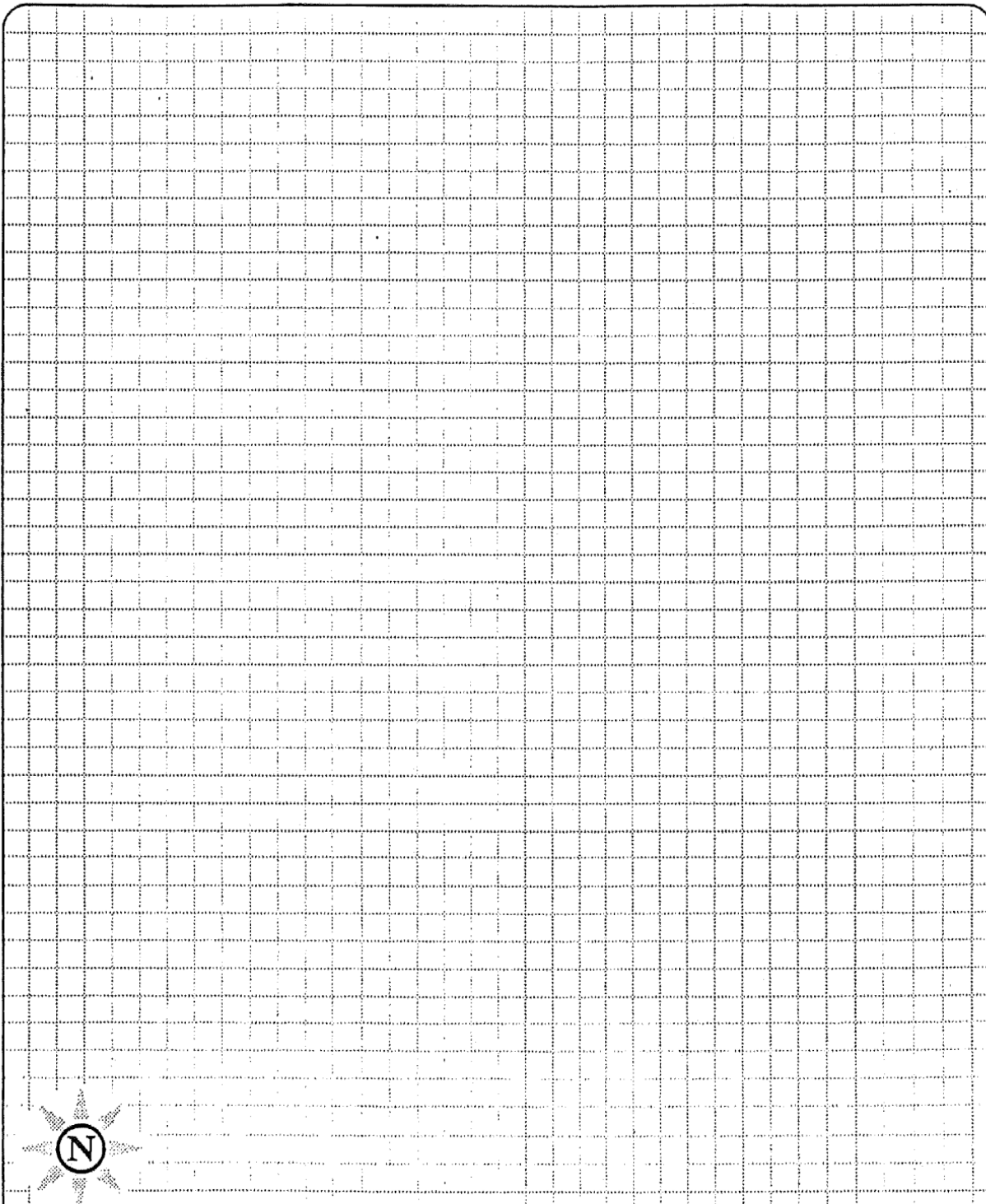


**Alameda County Urban Runoff Clean Water Program**  
**A Consortium of Local Agencies:**

**FACILITY  
MAP**

1 Facility ID #: \_\_\_\_\_ Facility Name: \_\_\_\_\_ Date: \_\_\_\_\_

Pg 6 of 6



10/15/93; mk; Storm-FacMap

Circle appropriate north arrow 2 SCALE: 1" = \_\_\_\_\_ feet 3 (= 5 squares) 4 O = Sewer Drains; □ = Storm Drains 5 → = Surface Flow Direction 6 \* = Possible Sources of Contamination

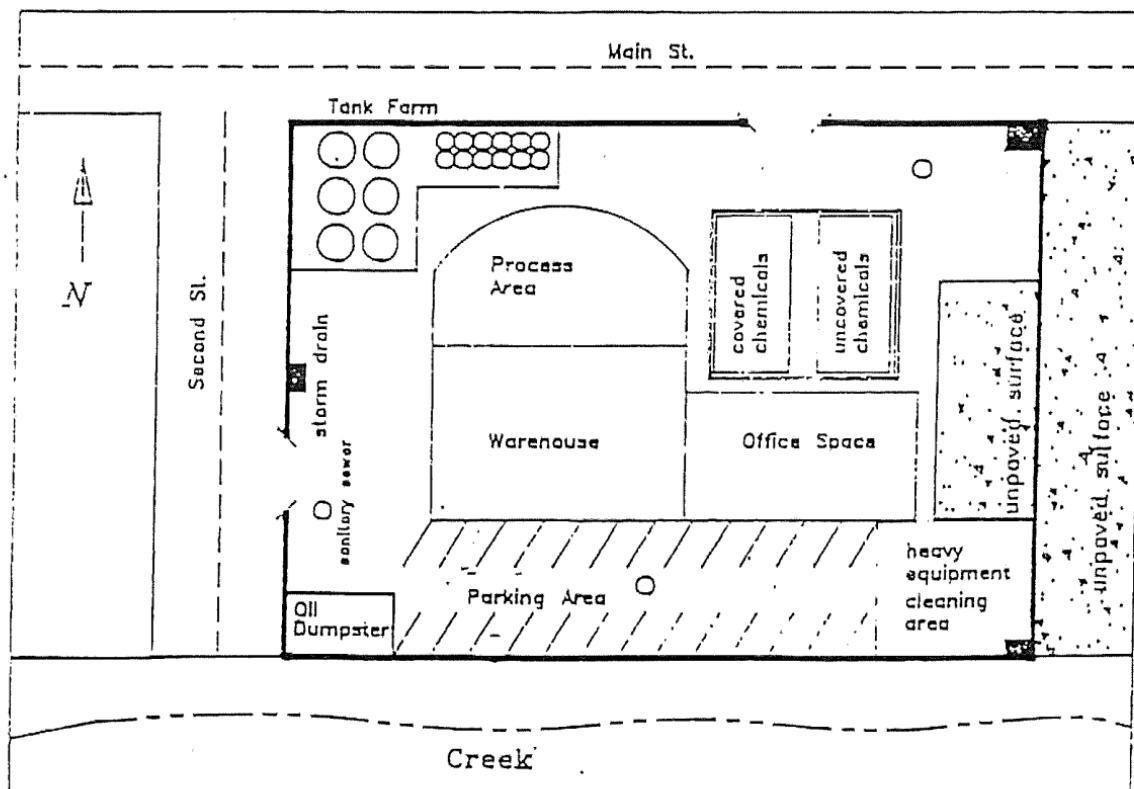
ACDEH0000064



### ATTACHMENT A: SAMPLE FACILITY MAP

The following items listed should be included in the facility map, but not limited to just the items stated.

1. Indicate North orientation.
2. Highlight property boundaries.
3. Label all adjacent streets.
4. Locate storm drains/inlets and sanitary sewer drains.
5. Indicate whether adjacent borders are paved or unpaved.
6. Illustrate parking areas.
7. Display any onsite monitoring wells and storm water monitoring locations.
8. Outline building placement and orientation.
9. Illustrate any above- and below ground tanks.
10. Locate outdoor storage areas. Differentiate if area is covered/uncovered.
11. Display all process/manufacturing rooms.
12. Illustrate any visible "discharge points" to the creek.



ACDEH0000065

Facility Name: \_\_\_\_\_ Fac ID#: \_\_\_\_\_  
 Date: \_\_\_\_\_

### Standard Inspection Checklist A

ATTACHMENT B

	A. Process and/or Work Area	B. Indoor Storage Area
1. Describe the area.		
2. Describe the activities performed and materials stored in this area.		
3. Describe BMPs used to prevent non-storm water discharges to storm drains or to minimize the discharge of pollutants in storm water.		
4. Where do drains discharge?	storm drains <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	storm drain <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>
5. Is area enclosed or covered?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
6. Is there potential for storm water to run-onto or run-off from this area?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
7. Are there any stains or other signs of pollutants on the floor or ground surface?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
	C. Materials Handling Area	D. Other _____
1. Describe the area.		
2. Describe the activities performed and materials stored in this area.		
3. Describe BMPs used to prevent non-storm water discharges to storm drains or to minimize the discharge of pollutants into storm water.		
4. Where do drains discharge?	storm drains <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>	storm drains <input type="checkbox"/> sanitary <input type="checkbox"/> unknown <input type="checkbox"/>
5. Is area enclosed or covered?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
6. Is there potential for storm water to run-onto or run-off from this area?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>
7. Are there any stains or other signs of pollutants on the floor or ground surface?	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>

REVISED 104, OCT 07, 1993

CITY OF OAKLAND

ACDEH0000066



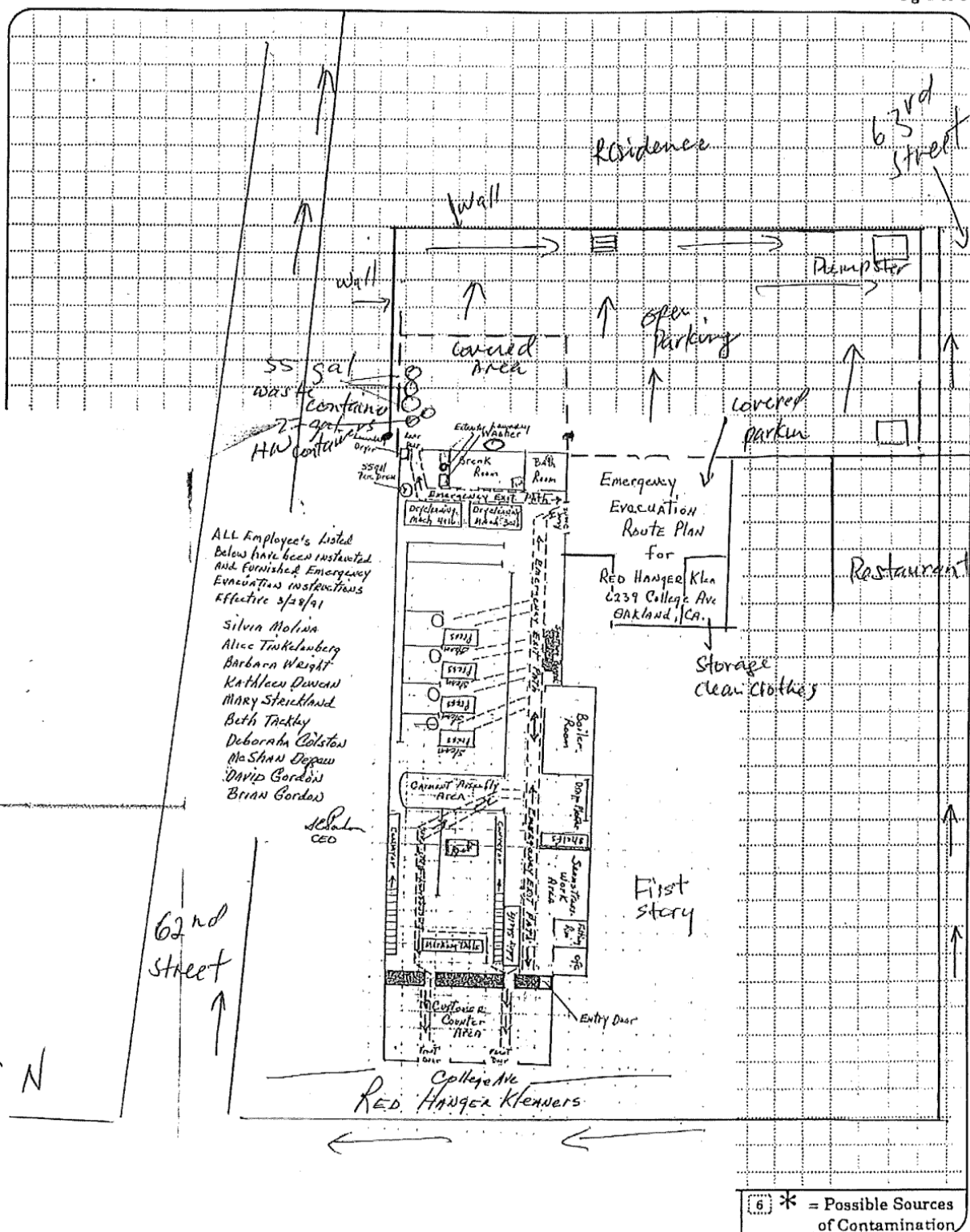
Alameda County Urban Runoff Clean Water Program  
A Consortium of Local Agencies:

FACILITY  
MAP

1 Facility ID #: 1539 Facility Name: Red Cleaner <sup>hanger</sup>

Date: 7-17-94

Pg 6 of 6



ACDEH0000067

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
Oakland, CA 94621  
(415) 271-4320

## Hazardous Materials Division Inspection Form

Site ID# 1539 Site Name Red Hangers Cleaners Today's Date 5/28/93  
Site Address 6239 College Ave. EPA ID# \_\_\_\_\_  
City Oakland Zip 94618 Phone (510) 1740

MAX Amt. Stored > 500lbs/55g/200cf? ☒ Y ☐ N  
Hazardous Waste generated per month? \_\_\_\_\_

### Inspection Categories:

- ☒ I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
☒ II. Business Plans, Acute Hazardous Materials  
☐ III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A. GENERATOR (Title 22)

	1. Waste ID	* 66471
	2. EPA ID	66472
	3. > 90 days	66508
	4. Label dates	66508
	5. Biennial	66493
Manifest	6. Records	66492
	7. Correct	66484
	8. Copy sent	66492
	9. Exception	66484
	10. Copies Rec'd	66492
Misc.	11. Treatment	66371
	12. On-site Disp. (H.S.&C.)	26189.5
	13. Ex Haz. Waste	66570
Prevention	14. Communications	67121
	15. Aisle Space	67124
	16. Local Authority	67126
	17. Maintenance	67120
	18. Training	67105
Confine- gency	19. Prepared	67140
	20. Name List	67141
	21. Copies	67141
	22. Emg. Coord. Trng.	67144
Containers, Tanks	23. Condition	67241
	24. Compatibility	67242
	25. Maintenance	67243
	26. Inspection	67244
	27. Buffer Zone	67246
	28. Tank Inspection	67259
	29. Containment	67245
	30. Safe Storage	67261
	31. Freeboard	67257

### Comments:

"Per" waste (silt) are stored in 2-55 gal.  
drums. "Per" sludge is stored in 2-15 gal  
containers.

Last disposal was on 4-19-93 by  
Technic Per.

### I.B. TRANSPORTER (Title 22)

	32. Applic./Insurance	66428
	33. Comp. Cert./CHP Insp.	66448
	34. Containers	66465
Manifest	35. Vehicles	66465
	36. EPA ID #s	66531
	37. Correct	66541
	38. HW Delivery	66543
	39. Records	66544
Cert's	40. Name/ Covers	66545
	41. Recyclables	66800

Rev 6/88

Contact: David Gordon  
Title: Mgr  
Signature: [Signature]

Inspector: Cary Soto  
Signature: [Signature]

ACDEH0000068

white -env.health  
yellow -facility  
pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
Oakland, CA 94621  
(415) 271-4320

## Hazardous Materials Division Inspection Form

Site ID# 1539 Site Name Red Hanger Cleaners Today's Date 6/28/91  
Site Address 6239 College Ave. EPA ID# \_\_\_\_\_  
City Oakland 94618 Zip 94 Phone 654-1740

MAX Amt. Stored > 500lbs/55g/200cf? ☒ Y ☐ N  
Hazardous Waste generated per month? \_\_\_\_\_

### Inspection Categories:

- ☒ I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
☐ II. Business Plans, Acute Hazardous Materials  
☐ III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A. GENERATOR (Title 22)

	1. Waste ID	66471
	2. EPA ID	66472
	3. > 90 days	66508
	4. Label dates	66508
	5. Biennial	66493
Manifest	6. Records	66492
	7. Correct	66484
	8. Copy sent	66492
	9. Exception	66484
	10. Copies Rec'd	66492
Misc.	11. Treatment	66371
	12. On-site Disp. (H.S.&C.)	26189.5
	13. Ex Haz. Waste	66570
Prevention	14. Communications	67121
	15. Aisle Space	67124
	16. Local Authority	67126
	17. Maintenance	67120
	18. Training	67105
Contin. gency	19. Prepared	67140
	20. Name List	67141
	21. Copies	67141
	22. Emg. Coord. Tmg.	67144
Containers, Tanks	23. Condition	67241
	24. Compatibility	67242
	25. Maintenance	67243
	26. Inspection	67244
	27. Buffer Zone	67246
	28. Tank Inspection	67259
	29. Containment	67245
	30. Safe Storage	67261
	31. Freeboard	67257

### Comments:

A follow-up on a complaint of leaking drums containing "flue" waste ~~was~~ was done. The drums are not leaking, and are labeled properly.

### I.B. TRANSPORTER (Title 22)

	32. Applic./Insurance	66428
	33. Comp. Cert./CHP Insp.	66448
	34. Containers	66465
Manifest	35. Vehicles	66465
	36. EPA ID #s	66531
	37. Correct	66541
	38. HW Delivery	66543
	39. Records	66544
Cont's	40. Name/ Covers	66545
	41. Recyclables	66800

Rev 6/88

Contact: Debra M. Shi

Title: Manager

Signature: Debra M. Shi

Inspector: Carry Seto

Signature: [Signature]

ACDEH0000069



# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
Oakland, CA 94621  
(415) 271-4320

## Hazardous Materials Division Inspection Form

Site ID# 1539 Site Name Red Hanger Cleaners, Inc. Today's Date 10/25/91  
Site Address 6239 College Ave. EPA ID# \_\_\_\_\_  
City Oakland Zip 94618 Phone 654-1740

MAX Amt. Stored > 500lbs/55g/200cf? Y N  
Hazardous Waste generated per month?

### Inspection Categories:

- ☒ I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
☐ II. Business Plans, Acute Hazardous Materials  
☐ III. Underground Tanks

736-3633

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A. GENERATOR (Title 22)

- \_\_\_ 1. Waste ID 66471  
\_\_\_ 2. EPA ID 66472  
\_\_\_ 3. > 90 days 66508  
\_\_\_ 4. Label dates 66508  
\_\_\_ 5. Biennial 66493

- Manifest \_\_\_ 6. Records 66492  
\_\_\_ 7. Correct 66484  
\_\_\_ 8. Copy sent 66492  
\_\_\_ 9. Exception 66484  
\_\_\_ 10. Copies Rec'd 66492

- Misc. \_\_\_ 11. Treatment 66371  
\_\_\_ 12. On-site Disp. (H.S.&C.) 26189.5  
\_\_\_ 13. Ex Haz. Waste 66570

- Prevention \_\_\_ 14. Communications 67121  
\_\_\_ 15. Aisle Space 67124  
\_\_\_ 16. Local Authority 67126  
\_\_\_ 17. Maintenance 67120  
\_\_\_ 18. Training 67105

- Confin- gency \_\_\_ 19. Prepared 67140  
\_\_\_ 20. Name List 67141  
\_\_\_ 21. Copies 67141  
\_\_\_ 22. Emg. Coord. Trng. 67144

- Containers, Tanks \_\_\_ 23. Condition 67241  
\_\_\_ 24. Compatibility 67242  
\_\_\_ 25. Maintenance 67243  
\_\_\_ 26. Inspection 67244  
\_\_\_ 27. Buffer Zone 67246  
\_\_\_ 28. Tank Inspection 67259  
\_\_\_ 29. Containment 67245  
\_\_\_ 30. Safe Storage 67261  
\_\_\_ 31. Freeboard 67257

### I.B. TRANSPORTER (Title 22)

- \_\_\_ 32. Applic./Insurance 66428  
\_\_\_ 33. Comp. Cert./CHP Insp. 66448  
\_\_\_ 34. Containers 66465

- Manifest \_\_\_ 35. Vehicles 66465  
\_\_\_ 36. EPA ID #s 66531  
\_\_\_ 37. Correct 66541  
\_\_\_ 38. HW Delivery 66543  
\_\_\_ 39. Records 66544

- Cont's \_\_\_ 40. Name/ Covers 66545  
\_\_\_ 41. Recyclables 66800

### Comments:

Waste "Buc" are stored in 55 gal and 20 gal drums in a secured area in back of the facility. The containers are labeled properly. The last disposal date of waste "Buc" was on 10-7-91, 7-30-91 and 6-7-91.

*[Signature]*

Rev 6/88

Contact: J.R. Gordon

Title: CEO

Signature: *[Signature]*

Inspector: Carry Sals

Signature: *[Signature]*

ACDEH0000070

white -env.health  
yellow -facility  
pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
Oakland, CA 94621  
(415) 271-4320

## Hazardous Materials Division Inspection Form

Site ID# \_\_\_\_\_ Site Name Red Hanger Kleaners Today's Date 3/22/91  
Site Address 6239 College Ave EPA ID# \_\_\_\_\_  
City Oakland Zip 94618 Phone 654-1740

MAX Amt. Stored > 500lbs/55g/200cf? ☒ Y ☐ N  
Hazardous Waste generated per month? \_\_\_\_\_

### Inspection Categories:

- ☒ I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
☒ II. Business Plans, Acute Hazardous Materials  
☐ III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A GENERATOR (Title 22)

1. Waste ID 66471  
2. EPA ID 66472  
3. > 90 days 66508  
4. Label dates 66508  
5. Biennial 66493

6. Records 66492  
7. Correct 66484  
8. Copy sent 66492  
9. Exception 66484  
10. Copies Rec'd 66492

11. Treatment 66371  
12. On-site Disp. (H.S.&C.) 26189.5  
13. Ex Haz. Waste 66570

14. Communications 67121  
15. Aisle Space 67124  
16. Local Authority 67126  
17. Maintenance 67120  
18. Training 67105

19. Prepared 67140  
20. Name List 67141  
21. Copies 67141  
22. Emg. Coord. Trng. 67144

23. Condition 67241  
24. Compatibility 67242  
25. Maintenance 67243  
26. Inspection 67244  
27. Buffer Zone 67246  
28. Tank Inspection 67259  
29. Containment 67245  
30. Safe Storage 67261  
31. Freeboard 67257

### I.B TRANSPORTER (Title 22)

32. Applic./Insurance 66428  
33. Comp. Cert./CHP Insp. 66448  
34. Containers 66465

35. Vehicles 66465  
36. EPA ID #s 66531  
37. Correct 66541  
38. HW Delivery 66543  
39. Records 66544

40. Name/ Covers 66545  
41. Recyclables 66800

### Comments:

Waste "perc" and sludge are stored in 55 gal containers. Waste was last disposed of on 2-3-91 by Technichem. Drums are all properly labeled and in a secured area.

Please complete the Hazardous Materials Management Plan that was given to you today, and submit it back to my office within 30 days.

Rev 6/88

Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: Super M. Sh

Inspector: \_\_\_\_\_

Signature: Larry Seib

ACDEH0000071

white -env.health  
yellow -facility  
pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
Oakland, CA 94621  
(415) 271-4320

## Hazardous Materials Division Inspection Form

Site ID# \_\_\_\_\_ Site Name Red Hanger Hauling Today's Date 6/22/91  
Site Address 6239 College Ave EPA ID# \_\_\_\_\_  
City Oakland Zip 94618 Phone (510) 574-1746

MAX Amt. Stored > 500lbs/55g/200cf? ☒ Y ☐ N  
Hazardous Waste generated per month? \_\_\_\_\_

### Inspection Categories:

- ☒ I. Haz. Mat/Waste GENERATOR/TRANSPORTER  
☒ II. Business Plans, Acute Hazardous Materials  
☐ III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A. GENERATOR (Title 22)

- |                   |                             |         |
|-------------------|-----------------------------|---------|
|                   | 1. Waste ID                 | 66471   |
|                   | 2. EPA ID                   | 66472   |
|                   | 3. > 90 days                | 66508   |
|                   | 4. Label dates              | 66508   |
|                   | 5. Biennial                 | 66493   |
| Manifest          | 6. Records                  | 66492   |
|                   | 7. Correct                  | 66484   |
|                   | 8. Copy sent                | 66492   |
|                   | 9. Exception                | 66484   |
|                   | 10. Copies Rec'd            | 66492   |
| Misc.             | 11. Treatment               | 66371   |
|                   | 12. On-site Disp. (H.S.&C.) | 26189.5 |
|                   | 13. Ex Haz. Waste           | 66570   |
| Prevention        | 14. Communications          | 67121   |
|                   | 15. Aisle Space             | 67124   |
|                   | 16. Local Authority         | 67126   |
|                   | 17. Maintenance             | 67120   |
|                   | 18. Training                | 67105   |
| Cont'n. gency     | 19. Prepared                | 67140   |
|                   | 20. Name List               | 67141   |
|                   | 21. Copies                  | 67141   |
|                   | 22. Emg. Coord. Trng.       | 67144   |
| Containers, Tanks | 23. Condition               | 67241   |
|                   | 24. Compatibility           | 67242   |
|                   | 25. Maintenance             | 67243   |
|                   | 26. Inspection              | 67244   |
|                   | 27. Buffer Zone             | 67246   |
|                   | 28. Tank Inspection         | 67259   |
|                   | 29. Containment             | 67245   |
|                   | 30. Safe Storage            | 67261   |
|                   | 31. Freeboard               | 67257   |

### Comments:

10 55 gal containers. 10 to 100  
last disposed of on 2-2-91 by  
Tech. Hauling. 1000 lbs. of waste  
1000 lbs. of waste

These containers have been checked  
and found to be in good condition.  
You may receive within 30 days.

### I.B. TRANSPORTER (Title 22)

- |          |                           |       |
|----------|---------------------------|-------|
|          | 32. Applic./Insurance     | 66428 |
|          | 33. Comp. Cert./CHP Insp. | 66448 |
|          | 34. Containers            | 66465 |
| Manifest | 35. Vehicles              | 66465 |
|          | 36. EPA ID #s             | 66531 |
|          | 37. Correct               | 66541 |
|          | 38. HW Delivery           | 66543 |
|          | 39. Records               | 66544 |
| Cont'n   | 40. Name/ Covers          | 66545 |
|          | 41. Recyclables           | 66800 |

Rev 6/88

Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: Depe W. L.

Inspector: Larry Gels

Signature: by L.G.

ACDEH0000072

RECEIPT OF THE BUSINESS PLAN FORM  
UNDER H & SC, CHAPTER 6.95

I hereby acknowledge receipt of a business plan form which is to be completed by the below named business or facility. I understand that this plan is to be submitted to the Alameda County Department of Health within 30 days of the receipt of this plan.

Name of Business: Red Hanger Kleaners  
Site Address: 6239 College Ave.  
Street Oakland 94618  
City, Zip Code \_\_\_\_\_

Person receiving this plan:

Printed Name: Depew M<sup>rs</sup> SHAN  
Title: Manager  
Signature: Depew M<sup>rs</sup> SHAN  
Date: 3-22-91

1539

Alameda County - Department of Environmental Health - Hazardous Materials Division  
80 Swan Way, PO Oakland, CA 94621 (415) 431-4320

## BILLING ADJUSTMENT FORM

Date: 4-10-91  
HazMat StID# : 1539

Pgm Affected Billing Acct. #

☒ Generator .H 41084  
☐ AB2185 . . . L \_\_\_\_\_  
☐ UGT . . . . . T \_\_\_\_\_

Caller: \_\_\_\_\_ Phone: \_\_\_\_\_

Company Name : Red Hanger Cleaners

Site Address : 6239 College Ave Oakland 94618  
City Zip

Requested Changes : Correct spelling on name and change  
in billing address

Initials: \_\_\_\_\_

### Inspectors' Conclusion

☐ Rescind Bill for following reasons:

- ☐ No Hazardous Waste    ☐ Moved out of County  
☐ Qty's under 2185 Min.    ☐ Closed / Out of Business  
☐ UGTanks removed  
☐ Other \_\_\_\_\_

☒ Continue Billing With Following Changes:

From: \_\_\_\_\_ To: \_\_\_\_\_

\_\_\_ Change number of EMPLOYEES \_\_\_\_\_

\_\_\_ Change number of TANKS \_\_\_\_\_

\_\_\_ AB2185: Changes attached \_\_\_\_\_

\_\_\_ Reopen Site Address / New Owner \_\_\_\_\_

Co. Name Red ~~Hanger~~ Hanger Kleaners

Owner \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_ New Address \_\_\_\_\_

Site Address 6239 College Ave Oakland 94618  
City Zip

Mail Address P.O. Box 1131 ~~Las Vegas~~ 94549  
City Zip

Inspector: [Signature] Date: 4-10-91

HM Chg: 4/10/91  
☐ Sent to Billing  
on 4/10/91  
Rev 11/89 Mac-BillAdj

ACDEH0000074



FROM: DHS-TSCP-SEB-REGION

TO: 415 568 3706

30, 1991 3:44PM #641 P.05

State of California—Health and Welfare Agency

Department of Health Services

# COMPLAINT REPORT FORM (Use ball-point pen.)

File

Matt McCarran

Is this an emergency? Yes ☐ No ☒ If yes, call the Office of Emergency Services (OES): 800-852-7550Log Number: 0204005 Date Complaint Received: 9/25/91 Time: 1020 Received By: Matt McCarranAllegations made (Yes/No) Prop. 65 \_\_\_\_\_ Local agency \_\_\_\_\_ Who? 540-3739

INFORMANT	ALLEGED RESPONSIBLE PARTY
Name: <u>Elaine Kelly</u>	Name: <u>Dust Gordon</u>
Address: _____	Firm: <u>Red Range Cleaners</u>
City: _____	Address: <u>6239 College</u>
Phone: <u>(510) 551-1041</u>	City: <u>OAKLAND</u> Zip: <u>94618</u>
<input checked="" type="checkbox"/> Confidential <input type="checkbox"/> Anonymous (Check one)	County Code: <u>1</u> Phone: <u>(510) 654-1743</u>

## COMPLAINT DATA

Date of Incident: 9/25/91 Allegation Code: B Quantity: 4 drumsType/Condition of Contaminant: (2) 55 gallon (2) smaller drumsSource of Complaint Code: D If Code A, Specify: \_\_\_\_\_Response Code: B Regional Agency Referred To: Alameda County Health

Other Comments: Drums stored for at least 2 years, possibly PCB in packing list in backside of building. There are hazardous waste labels on the drums. The informant wishes to remain anonymous but is willing to answer any other questions. She works up there from the Dry Broom for the past 2 years, and has asked the drums since she was there.

10-25-91 Inspection of site was performed. Their records on the site reveals they dispose of their waste approx. every 6 weeks. They use Techniken

Response Date: 10-25-91 Investigator: Carry Selo Date Assigned: \_\_\_\_\_

Note: Information to be transferred to complaint log is highlighted in bold italic print. Attach an addendum if necessary.

\* See code on reverse side

Original—Regional Office

Duplicate—Log

Triplicate—Investigations

DHS 0231 (3/90)

SEP 30 '91 15:39

DHS-TSCP-SEB-REGION PAGE.005

ACDEH0000075

ALAMEDA COUNTY  
HEALTH CARE SERVICES



AGENCY  
DAVID J. KEARS, Agency Director

DEPARTMENT OF ENVIRONMENTAL HEALTH  
Hazardous Materials Program  
80 Swan Way, Rm. 200  
Oakland, CA 94621  
(415)

October 28, 1991

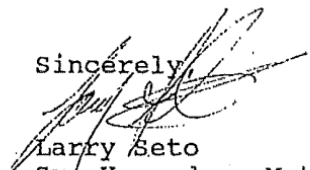
Mr. S. R. Gordon, CEO  
Red Hanger Kleaners, Inc.  
6239 College Ave.  
Oakland, CA 94618

Dear Mr. Gordon:

As per your request, the contact person at the Department of Toxic Substance Control who received the complaint of your facility at the above address is Mr. Matt McCarron at 540-3739.

If you have any questions, please contact me at 271-4320.

Sincerely,



Larry Seto

Sr. Hazardous Materials Specialist

cc: Matt McCarron, Dept. of Toxic Substances  
Files

ACDEH0000076

Alameda Co. Health Services Agency  
Division of Environmental Health  
Hazardous Materials Unit

874-7237

BILLING ADJUSTMENT

NAME OF ESTABLISHMENT Red Hanger Cleaners  
ADDRESS ~~6239~~ 6251 college  
CITY, ZIP Oakland 94618

The following actions should be taken regarding the billing for this establishment:

☐ Rescind the bill for the following reasons:

☒ \* Moved to:

Address

City, Zip

6239 college

Oakland

94618

☐ No Hazardous Materials

☐ Out of business

☐ Make adjustment to billing - change number of employees to \_\_\_\_\_

☐ Continue billing without change

☐ Continue billing with following changes:

☐ New Name \_\_\_\_\_

☐ New Owner \_\_\_\_\_

VERIFIED BY: Reverell Miller

DATE

1/6/87

\* For Haz/Mat uses only

654-1740

LJM/12-86

call before inspection  
drums of material left by this establishment  
at old address. owner of bldg  
Vasilios Bouzos. During inspection  
verify that drums have been removed  
Inspected old address to verify it "clean" at  
request of owner

ACDEH0000077

ALAMEDA COUNTY  
HEALTH CARE SERVICES

DAVID KEARS

AGENCY  
Agency Director

GENERATOR

SITE ID ~~1539~~ 1539  
NAME Red Hemmer Cleaners  
ADDRESS 6239 College Ave.

DATE 2-2-87  
PHONE 654-1740  
EPA ID  
CITY/ZIP Oakland 94618

470-27th Street, Third Floor  
Oakland, California 94612  
(415) 874-7237

The marked items represent violations of the Calif. Administrative Code:  
General

- 1. [ ] Waste ID 66471
- 2. [ ] EPA ID's 66472
- 3. [ ] >90 day Stor 66508
- 4. [ ] Labels 66504
- 5. [ ] Biennial RPT 66493
- 6. [ ] Records 66492

## Manifest

- 7. [ ] Correct 66480
- 8. [ ] Copies sent 66484
- 9. [ ] Except RPT 66484
- 10. [ ] Copies Rec 66492

## Misc

- 11. [ ] Treatment 66371
- 12. [ ] On-site Disp  
H&S 25189.5
- 13. [ ] ExHazzWaste 66570

## Prevention

- 14. [ ] Communica 67121
- 15. [ ] Aisle space 67124
- 16. [ ] Local Emer 67126
- 17. [ ] Maintenance 67120
- 18. [ ] Training 67105

## Contingency

- 19. [ ] Prepared 67140
- 20. [ ] Name List 67141
- 21. [ ] Copies 67141
- 22. [ ] EmerCoorTng 67144

## Containers, Tanks

- 23. [ ] Condition 67241
- 24. [ ] Compatibility 67242
- 25. [ ] Maintenance 67243
- 26. [ ] Inspection 67244
- 27. [ ] Buffer zone 67246
- 28. [ ] Tank Insp 67259
- 29. [ ] Closure 67260
- 30. [ ] Safe Store 67261
- 31. [ ] Freeboard 67257
- 32. [ ] Other

Comments: Moved from 6251

College Ave.

Waste Park to be picked up  
by Technician of Emeryville

Drums do not have establishment  
address but instead an ID

number from Technician. ~~As~~

pick up from the year 5/11

residue, cartridges,

Rhoel receipt 4/89/4 5-22-86

Last receipt would be

Technician 1 wk ago.

Receipts must be kept

available for 3 years.

Pick up Technician 1-16-87

CONTACT PERSON

Bert Gordon

TITLE

President

SIGN

B. Gordon

INSPECTOR

THOMAS PEACOCK

SIGN

Thomas Peacock

ACDEH0000078

State of California—Health and Welfare Agency

Department of Health Services

# COMPLAINT REPORT FORM (Use ball-point pen.)

*Store File*
Is this an emergency? Yes ☐ No ☒ If yes, call the Office of Emergency Services (OES): 800-852-7550Log Number: 020910051 Date Complaint Received: 9/25/91 Time: 1020 Received By: Matt McCannan

Notifications made (Yes/No) Prop. 65 \_\_\_\_\_ Local agency \_\_\_\_\_ Who? \_\_\_\_\_

INFORMANT	ALLEGED RESPONSIBLE PARTY
Name: <u>Elaine Kelly</u>	Name: <u>Burt Gordon</u>
Address: _____	Firm: <u>Red Hange Cleaners</u>
City: _____ Zip: _____	Address: <u>6239 College</u>
Phone: <u>( ) 530-9311 (T-TR) only</u>	City: <u>OAKLAND</u> Zip: <u>94618</u>
<input checked="" type="checkbox"/> Confidential OR <input checked="" type="checkbox"/> Anonymous: (Check one.)	County Code*: <u>1</u> Phone: <u>(510) 654-1740</u>

## COMPLAINT DATA

Date of Incident: on going Allegation Code\*: FL Quantity: 4 DrumsType/Condition of Containers Visible: (2) 55 gallon (2) smaller drumsSource of Complaint/Code\*: D If Code A, Specify: \_\_\_\_\_Response Code\*: R Region/Agency Referred To: Alameda Co Env. Health

Other Comments: Drums stored for at least 2 years, possibly PCB  
in parking lot in backside of building. There are hazardous  
waste labels on the drums. The informant wishes to  
remain anonymous but is willing to answer any other questions.  
She works up stairs from the dry cleaners for the past 2 years, and  
has noticed the drums since she was there.

Response Date: \_\_\_\_\_ Investigator: \_\_\_\_\_ Date Assigned: \_\_\_\_\_

Note: Information to be transferred to complaint log is highlighted in bold italic print. Attach an addendum if necessary.

\* See code on reverse side

Original—Regional Office

Duplicate—Log

Triplicate—Investigations

DHS 8231 (3/90)

ACDEH0000079



## CALIFORNIA COUNTY CODE NUMBERS\*

Code Number	County	TSCD Section	Code Number	County	TSCD Section
1	Alameda	Region 2	30	Orange	Region 4
2	Alpine	Region 1	31	Placer	Region 1
3	Amador	Region 1	32	Plumas	Region 1
4	Butte	Region 1	33	Riverside	Region 4
5	Calaveras	Region 1	34	Sacramento	Region 1
6	Colusa	Region 1	35	San Benito	Region 2
7	Contra Costa	Region 2	36	San Bernardino	Region 4
8	Del Norte	Region 2	37	San Diego	Region 4
9	El Dorado	Region 1	38	San Francisco	Region 2
10	Fresno	Region 1-F	39	San Joaquin	Region 1
11	Glenn	Region 1	40	San Luis Obispo	Region 1-F
12	Humboldt	Region 2	41	San Mateo	Region 2
13	Imperial	Region 4	42	Santa Barbara	Region 3
14	Inyo	Region 1-F	43	Santa Clara	Region 2
15	Kern	Region 1-F	44	Santa Cruz	Region 2
16	Kings	Region 1-F	45	Shasta	Region 1
17	Lake	Region 1	46	Sierra	Region 1
18	Lassen	Region 1	47	Siskiyou	Region 1
19	Los Angeles	Region 3/Region 4	48	Solano	Region 2
20	Madera	Region 1-F	49	Sonoma	Region 2
21	Marin	Region 2	50	Stanislaus	Region 1
22	Mariposa	Region 1-F	51	Sutter	Region 1
23	Mendocino	Region 2	52	Tehama	Region 1
24	Merced	Region 1-F	53	Trinity	Region 1
25	Modoc	Region 1	54	Tulare	Region 1-F
26	Mono	Region 1	55	Tuolumne	Region 1
27	Monterey	Region 2	56	Ventura	Region 3
28	Napa	Region 2	57	Yolo	Region 1
29	Nevada	Region 1	58	Yuba	Region 1

## LEGEND

## ALLEGATION CODES

A	Disposal to a sanitary sewer system
B	Disposal during transportation
C	Disposal to a surface water, including storm drains
D	Disposal onto ground
E	Illegal storage
F	Unpermitted treatment
G	Illegal transportation
H	Buried hazardous waste
I	Leaking underground tanks (Refer to local Environmental Health Department.)
J	Abandoned hazardous waste
K	Air emissions (Refer to local Air Pollution Control District.)
L	Other

## SOURCE OF COMPLAINT CODES

H	Hotline call
D	Direct public contact (phone, walk-in, mail)
A	Referred from another agency
Q	Referred from Headquarters or other TSCD region

## RESPONSE CODES

I	Investigated
L	Letter sent
R	Referred

## TSCD SECTION CODES

Region 1	Sacramento Regional Office
Region 1-F	Fresno District Office
Region 2	Emeryville Regional Office
Region 3	Burbank Regional Office
Region 4	Long Beach Regional Office

\* County code designations by the California Department of Motor Vehicles

Alameda Co. Health Services Agency  
Division of Environmental Health  
Hazardous Materials Unit

874-7237

BILLING ADJUSTMENT

NAME OF ESTABLISHMENT Red Hanger Cleaners  
ADDRESS ~~6239~~ 6251 College  
CITY, ZIP Oakland 94618

The following actions should be taken regarding the billing for this establishment:

☐ Rescind the bill for the following reasons:

☒ Moved to:

Address 6239 College - 5710 1539

City, Zip Oakland 94618

☐ No Hazardous Materials

☐ Out of business

☐ Make adjustment to billing - change number of employees to \_\_\_\_\_

☐ Continue billing without change

☐ Continue billing with following changes:

☐ New Name \_\_\_\_\_

☐ New Owner \_\_\_\_\_

VERIFIED BY: Lawell Mills

DATE 1/6/87

\* For Haz/Mat uses only

LJM/12-86

Call before inspection  
per  
drums of material left by this establishment  
at old address. owner of bldg  
Vasilios Bouzos. During inspection  
verify that drums have been removed  
Inspected old address to verify it "clean" at  
request of owner.

ACDEH0000081

B 11/85

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

CARL N. LESTER, Agency Director

DIVISION OF ENVIRONMENTAL HEALTH  
HAZARDOUS MATERIALS MANAGEMENT UNITSECTION A  
MASTER FILE RECORD ST ID 513470-27th Street, Third Floor  
Oakland, California 94612  
(415) 874-7237

A1. ESTABLISHMENT NAME  
KILIEA WIEB, INC. 36

A2. MAILING ADDRESS  
STREET NUMBER: 6251 44  
STREET DIRECTION (N,S,E,W,ETC.): 45 46  
STREET NAME OR P.O. BOX NUMBER: 1014 LIEGIE AVE 66  
CITY: OAKLAND 67  
STATE: CA 82 83  
ZIP CODE: 94611 84 88  
BLOG/PLANT NO: 93 96

A3. ESTABLISHMENT PHONE: 651 9112 97 103

A4. CONTACT PERSON: DIONA GRUBB 104 123

A5. ESTABLISHMENT ADDRESS (IF DIFFERENT FROM MAILING ADDRESS)  
STREET NUMBER: P.O. BOX 7 14  
STREET DIRECTION (N,S,E,W,ETC.): 15 16  
STREET NAME: 1113 17 36  
CITY: LAHAYETTE 37  
STATE: CA 52 53  
ZIP CODE: 94549 54 58  
BLOG/PLANT NO: 63 66

A6. OWNER NAME: SIEGERT  
BIEB 67 86

A7. OWNER PHONE: 87 96

A8. NAME OF PREVIOUS OWNER: 97 116

A9. DATE YOU STARTED OR ASSUMED BUSINESS  
MO: 11 117 DAY: 7 122 YR: 80 ?

A10. SIC 1: 7211 92 93

A11. TOTAL NUMBER OF EMPLOYEES: 8 11

## A12. DO YOU HAVE PERMITS FOR ANY OF THE FOLLOWING:

AIR POLLUTION CONTROL DISTRICT	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	HAZARDOUS WASTE HAULER REGISTRATION	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
SEWER DISTRICT (FOR INDUSTRIAL WASTES)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	REGIONAL WATER QUALITY CONTROL BOARD	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N
HAZARDOUS WASTE FACILITY	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N		

## SECTION B

## UNDERGROUND TANKS CONTAINING HAZARDOUS SUBSTANCES

Identify the type, number and total volume of underground tanks in your firm.

B1. Type	B2. No. of Tanks	B3. Total Volume/Gals.
1. Tank	<input type="text"/>	<input type="text"/>
2. Sump	<input type="text"/>	<input type="text"/>
3. Lagoon, pit or pond	<input type="text"/>	<input type="text"/>
4. Other	<input type="text"/>	<input type="text"/>

None

ACDEH0000082

SECTION C  
IOUS SUBSTANCES

H

C1. Please check if any of the following categories of hazardous substances is used or handled by your firm:

TOXIC



CORROSIVE

□

FLAMMABLE OR IGNITABLE

☐

REACTIVE

☐

C2. Please check the attached list for any of the chemical substances you receive, store, mix, treat, formulate, generate, manufacture, transport or dispose of, and enter each by the number identified on the list in the spaces below:

Sample:

[illegible]

### CERTIFICATION

I hereby certify that the information on this form is to the best of my knowledge, true and complete

Signature \_\_\_\_\_

Title

Typed or Printed Name

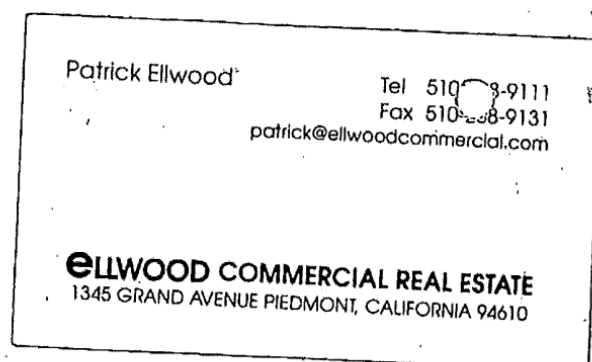
Date \_\_\_\_\_

Please return completed form to:

Alameda County Division of Environmental Health  
470-27th Street, Room 322  
Oakland, CA 94612  
(415) 874-7237

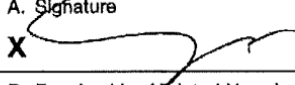
-2-

ACDEH0000083



ACDEH0000084



SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
		B. Received by (Printed Name)	C. Date of Delivery 2-6
1. Article Addressed to:  Red Hanger 6239 College Ave Oakland CA 94618		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service)		1 11111 7005 10390 0000 1014 1433	

PS Form 3811, Feb. 2004

Domestic Return Receipt

102595-02-M-1540

ACDEH0000085

UNITED STATES POSTAL SERVICE  
DENVILLE, CA 94555

06 FEB 2007 PM 5:11

First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. C-10

• Sender: Please print your name, address, and ZIP+4 in this box •

City of Oakland – Fire Prevention  
Inspector Jesse Kupers  
250 Frank Ogawa Plaza Ste 3341  
Oakland, CA 94612

ACDEH0000086

Jul-16-05 05:47pm From: FIRE PREVENTION

+15102386739

T-821 P.01/01 F-911

## CITY OF OAKLAND



250 FRANK OGAWA PLAZA, SUITE 3341

• OAKLAND, CALIFORNIA 94612

Fire Department  
Fire Prevention Bureau  
Hazardous Materials Management Program

(510) 238-3927  
FAX: (510) 238-6739  
TTY/TDD: (510) 238-8884

July 15, 2005

Ms. Ila Gordon  
6239 College Ave.  
Oakland, CA 946

RE: SOIL SAMPLING AND LABORATORY REPORT FOR SITE RED HANGER CLEANERS  
LOCATED AT 6235 COLLEGE AVENUE, OAKLAND CA.

Dear Ms. Gordon:

Oakland Fire Department has reviewed the soil sampling and laboratory report prepared and submitted on your behalf by EFI Global dated June 2, 2005 EFI PN:98380-00-051. It should be noted that Volatile Organic Compounds (PCE) in low concentrations were found in soil at a depth of 3 to 4 feet bgs.

While the levels indicated in the report are below California Regional Water Quality Control Board, Environmental Screening Levels for commercial/industrial properties it is a recommendation that additional site characterization be accomplished should the use of the property changes.

Therefore, based on the information provided in the above reference report and with the provision that the information provided to this agency was accurate and representative of site conditions, no further action is required by this agency. In addition, this site will be entered into the City of Oakland, Permit Tracking System for monitoring.

Sincerely,

  
LeROY GRIFFIN  
Assistant Fire Marshal  
Hazardous Materials Program Manager

cc: Mr. Mark Williams

ACDEH0000087

06/03/2005 10:30 FAX

06/02/006



**EFI Global**  
Complex Issues • Solid Solutions

111 Deerwood Road  
Suite 195  
San Ramon, CA 94583  
Tf: 800-506-0844  
Tel: 925-820-9580  
Fax: 925-820-8587  
www.efiglobal.com

June 2, 2005

Leroy Griffin  
Oakland City Fire Department  
1605 Martin Luther King Jr. Way  
Oakland, California 94612

Re: Request for No Further Action – Red Hanger Cleaners, 6235 College Avenue, Oakland, California  
EFI PN: 98360-00-051

Dear Mr. Griffin:

On behalf of the Red Hanger Cleaners Site, EFI Global (EFI) is requesting that the City of Oakland Fire Department (COFD) review the findings summarized in this letter and provide written confirmation that "no further action" is needed to address the low concentrations of tetrachloroethene (PCE) at the above-mentioned property. The Site location is shown on Figure 1, and the Site Layout is shown on Figure 2.

#### Background

As part of a property transaction, AEI Consultants, conducted a Phase I Environmental Site Assessment (Phase I ESA) of the Subject Property in March 2005. The findings of their site assessment are summarized below:

- The Subject Property is located on the west side of College Avenue in a mixed commercial and residential area of Oakland. The Subject Property is identified by Alameda County Tax Assessor's Parcel Number (APN) 48A-7069-9-1 and is approximately 0.17 acres. The mailing address for the Subject Property is 6239 College Avenue, Oakland, California.
- The Subject Property is developed with a three-story building that was developed in 1986 and is currently occupied by the Red Hanger Cleaners on the first floor with offices on the second and third floors.
- Historical information gathered during AEI's assessment revealed that the Subject Property was occupied by an automobile garage and store in at least 1929, by Berkeley Fuel and Supply in at least 1941, and by a restaurant, plumbing and pipe threading store, and automobile garage in at least 1951. In 1985 plans for site improvements including grading permits and permits to remove a reported former gasoline underground storage tank (UST) were filed (see below). From 1986 to 1987 the current three-story office building was constructed.

\\EFI\My Project\Oakland\CapitalChurn\00000001.doc

ACDEH0000088

06/03/2005 10:30 FAX

003/008

-- Leroy Griffin  
June 2, 2005  
Page 2 of 5

- According the City of Oakland Building and Planning Department (OBPD), a building plan record for the Subject Property indicated that a 1,000-gallon gasoline UST might have been present on the northwest corner of the Subject Property. The location of the UST was noted as "un-determined"; however, a fill pipe was noted in the plans reviewed. Permits to remove the reported UST were filed in 1986; however, no supporting information was noted in the files that documented any removal activities associated with the permits. It was also noted that no records of a UST were on file at the City of Oakland Fire Department or in the regulatory databases summarized in the Environmental Data Resources Inc. (EDR) radius report requested by AEI.
- The dry cleaning operations currently at the property consist of two closed-looped dry cleaning machines containing approximately 20 gallons of PCE in each. No floor drains are located adjacent to the machines, and no obvious signs of leakage, stains, or releases were noted during the field inspection conducted by AEI.
- AEI concluded in their report that a subsurface investigation be conducted in association with the reported former UST and dry cleaning operations.

In response to the environmental issues reported in the Phase I ESA, AEI conducted a geophysical survey and soil and groundwater sampling investigation on May 3, 2005. The information from their phase II investigation is summarized below:

- AEI conducted a geophysical survey using both electro-magnetic survey and ground penetrating radar equipment in the northwest corner area of the property to evaluate the presence of a suspected UST. The survey identified an anomaly that appeared to be a backfilled excavation approximately 8 feet deep.
- The subsurface scope of work included drilling five locations (SB-1 through SB-5) to depths of 26 feet below ground surface (bgs) for SB-1 and 12 feet bgs for SB-2 through SB-5. SB-1, SB-2, and SB-3 were located on the assumed down-gradient side of the dry cleaning machines, SB-4 was located on the upgradient side of the machines, and SB-5 was located in the center of the backfilled excavation area of the former UST.
- Soil boring logs are included in Attachment 1 for reference. The soils at Subject Property consisted of primarily silty clays to a depth of 10 to 12 feet, clayey silt to clayey gravel from 14 feet bgs to approximately 24 feet bgs, and sandy gravelly silt to gravelly silty sand from approximately 24 to 26 feet bgs.
- Groundwater was first encountered in SB-1 at a depth of approximately 24 feet bgs in the sandy gravelly silt to gravelly silty sand zone. According to the soil boring log, after approximately 5 minutes the static level was observed at 18 feet bgs. According to groundwater information obtained in AEI's Phase I ESA for nearby offsite properties, the groundwater flow direction in the vicinity of the Subject Property has been reported to flow to the southwest at 15 to 20 feet bgs.

© 2005 by AEI Global, Inc. All Rights Reserved. No part of this document may be reproduced without written permission from AEI Global, Inc.

EFI Global, Inc.

ACDEH0000089



06/03/2005 10:31 FAX

004/006

-- Leroy Griffin  
June 2, 2005  
Page 3 of 5

- Samples submitted for analysis included soil collected at depths of 3 feet bgs from SB-1, SB-2, and SB-3 (upgradient side). A soil sample collected at a depth of 4 feet was submitted from SB-4 (downgradient side) and 11.5 feet bgs in SB-6 (former UST area). The UST sample was analyzed by EPA Method 8015m/8020 for total petroleum hydrocarbons as gasoline, diesel, and motor oil and benzene, toluene, ethylbenzene, and xylenes (collectively, BTEX). The other soil samples collected from boreholes SB-1 through SB-4 and the grab groundwater sample collected from SB-1 were evaluated using EPA Method 8010 for halogenated volatile organic compounds (HVOCs).
- The results of the investigation reported that no petroleum hydrocarbons were detected in the soil sample collected below the base of the UST excavation. PCE was detected at low concentrations in the soil samples at 3.0 and 4.0 feet bgs as follows: SB-1 at 3.0 feet at 0.17 parts per million (ppm), SB-2 at 3.0 feet at 0.08 ppm, SB-3 at 3.0 feet at 0.19 ppm, and SB-4 at 4 feet at 0.26 ppm. The concentration of PCE detected in the groundwater sample was reported at 48 parts per billion (ppb). Chloroform was also detected in the groundwater sample at 0.83 ppb.

Based on the preliminary results of the shallow soil samples, soil samples that were placed on-hold at the laboratory were evaluated for the presence of PCE using EPA method 8010 for borings SB-1 through SB-4. The information from this additional analysis is presented below:

- Samples selected for additional analysis included the following: a soil sample in SB-1 (downgradient) at a depth of 11.5 feet bgs, and soil samples from a depth of 9.5 feet bgs from boreholes SB-2 through SB-4.
- No HVOCs were detected in the soil samples collected at 9.5 to 11.5 feet bgs.

#### Discussion

Based on the information obtained during AEI's Phase I ESA, two potential issues were noted: the reported former UST and the presence of the dry cleaning machines.

Based on the Phase II geophysical survey in the vicinity of the suspected former UST, it is concluded that if there was a UST historically located in the northwest corner of the property, it is no longer there. Additionally, soil samples collected during the Phase II subsurface investigation conducted in May 2005 at this location (SB-5) did not show the presence of soil adversely affected with petroleum hydrocarbons in either field observations or analytical data. Therefore the possible former UST does not represent an environmental concern at this time.

Information prepared for the client is confidential and not to be distributed outside the client's organization.

EFI Global, Inc.

ACDEH0000090

06/03/2006 10:31 FAX

005/006

Leroy Griffin  
June 2, 2006  
Page 4 of 5

The Subject Property has been developed with the dry cleaner Red Hanger Cleaners since 1986-1987. According to data collected from shallow soil samples, PCE was detected in low concentrations at depths of 3 to 4 feet bgs at concentrations ranging from 0.08 ppm to 0.26 ppm. No PCE was detected in unsaturated soil at depths of 9.5 and 11.5 feet bgs. A grab groundwater sample collected from borehole SB-1 contained a PCE concentration of 48 ppb. Based on the soil data collected it appears that the shallow soil contains low levels of PCE, but this compound is not present in the deeper unsaturated zone. Therefore, it is possible that the low concentration of PCE detected in the groundwater is not attributed to PCE in shallow soil at the Site.

The analytical data for soil at the Site was compared to the California Regional Water Quality Control Board July 2003 Environmental Screening Levels (ESLs). For industrial/commercial properties, the most "conservative" ESL for PCE in shallow soil (i.e., less than three meters) is 0.25 ppm. This value is based on the potential for indoor air impacts (i.e., volatilization into the workplace). The ESL for direct exposure is 1.30 ppm, and the "maximum" ESL is 370 ppm based on aesthetics such as odor. PCE concentrations from four of five locations were below the most conservative ESL value of 0.25 ppm. Only location SB-4 at 4.0 feet bgs (0.26 ppm) was slightly above this guidance ESL for potential indoor air impacts as a result of volatilization from soil.

The ESL concentration for potential leaching of PCE from soil to groundwater is 0.70 ppm. The referenced PCE concentrations detected in the soil at the property were below this ESL.

The source(s) of the PCE detected in the groundwater at location SB-1 is not known at this time; however during the site reconnaissance by AEI, it was noted that there are two nearby and one historic dry cleaners as follows: Rockridge Royal Cleaner located at 5445 College Avenue and downgradient to crossgradient; Garden Cleaners located at 5808 College Avenue and downgradient to crossgradient; and historically adjacent Kay's Cleaner located at 6251 College Avenue and directly upgradient to the Subject Property.

Based on the results of the soil sampling and historical assessment, the source(s) of PCE in the groundwater does not appear to have originated from the Subject Property. Residual concentrations of PCE are present in the shallow soils that may have resulted from the use of PCE at the site since 1986-87; however, the absence of PCE in deeper unsaturated zone soils suggests that a significant release has not occurred.

From the data and historical review, EFI does not recommend any further assessment of the PCE in the soil and groundwater at the Subject Property.

The implication of any further investigation may have a significant material affect on any future property transaction. EFI respectfully requests that the COFD review this case in light of the data presented above and provide a written determination of no further action.

Excluded Product All Wetland Cleanup/Clean-up/Remediation

EFI Global, Inc.

ACDEH0000091

06/03/2005 10:31 FAX


006/006

Leroy Griffin  
June 2, 2005  
Page 5 of 5

If you have any questions regarding this letter, please contact the undersigned at 925-820-9580.

Sincerely,

EFI GLOBAL, INC.

EFI GLOBAL, INC.  
  
Mark B. Williams  
Senior Project Manager

Chris R. Maxwell, R.G.  
District Manager

Attachments: Figure 1 -  
Figure 2 -  
Attachment A

Site Location (AEI)  
Site Layout and Sampling Locations (AEI)  
Analytical Data Reports and Soil Boring Logs (AEI)

1.20m 8 kg. Anytrial 11/11/2006 Capital City University, etc

**EFI Global, Inc.**

ACDEH0000092



Leroy Griffin  
Oakland City Fire Department  
1605 Martin Luther King Jr. Way  
Oakland, California 94612

Dear Mr. Griffin:

EFI is pleased to submit this report documenting the findings of the confirmation sampling investigation conducted on June 28, 2005. On behalf of the Red Hanger Cleaners Site and at your request, EFI Global (EFI) collected one grab groundwater sample (SB-6) directly down gradient of the dry cleaning units at the Subject Property.

We hope that these findings will be in support of our previous "no further action" request for the Subject Property regarding the residual concentrations of tetrachloroethene (PCE) detected in the shallow soil and groundwater samples collected from the property in May 2005 by AEI Consultants. The Site location is shown on Figure 1, and the Site Layout is shown on Figure 2.

## Field and Laboratory Methodology

The following sections discuss activities that were conducted as part of the subsurface investigation conducted on June 28, 2005.

### Pre-field Activities

The purpose of the pre-field activities was to appropriately plan the work and to ensure that onsite personnel were prepared for potential safety hazards at the property. The pre-field activities included the following:

- EFI prepared a site specific Health and Safety Plan (HASP) for the work proposed in accordance with the requirements of the State of California General Industry Safety Order (GISO) 5192 and Title 29 Code of Federal Regulations, Section 1910.120 (29 CFR 1910.120). The HASP detailed the work to be performed, safety precautions, emergency response procedures, nearest hospital information, and onsite personnel responsible for managing emergency situations. Prior to starting work, a "tailgate" safety meeting including discussion of the safety hazards and precautions relevant to the particular job was held with

Leroy Griffin  
June 28, 2005  
Page 2 of 3

all personnel working on the job. A copy of the HASP was kept onsite during field activities.

- The borehole locations were marked with temporary white marking paint. Underground Service Alert (USA) was notified at least 48 hours prior to performing drilling as required by law.
- In addition, EFI utilized California Utility Surveys (CU Surveys) to locate utility lines in the vicinity of the proposed borings prior to drilling.
- EFI obtained the appropriate soil boring permits (Permit No. W2005-0662) from the Alameda County Public Works Agency.

#### **Field Investigation**

On June 28, 2005, Ecology Control Associates (C-57 Lic. #695970), under the supervision of EFI, advanced one (1) borehole (SB-6) at the subject property as depicted on Figure 2. The exterior borehole was installed using a truck-mounted Geoprobe. One grab water samples collected the borehole using a dedicated Teflon bailer.

The borehole was inspected for physical characteristics indicative of adverse impacts, such as unusual odors, colors/hues, and chemical sheens. The borehole was continuously cored to a depth of 20 feet bgs. A hand held photo-ionization detector (PID) was used to screen the soil. No VOCs were noted in the soil cores collected in the field. The soils consisted of brown silty clays to 8 feet bgs, clays from 8 to 12 feet bgs, and clayey silts from 12 to 20 feet bgs. Groundwater was encountered at a depth of approximately 20 feet bgs and stabilized at a static level of approximately 16 feet bgs. No odors were noted in the groundwater sample collected.

The groundwater samples were placed in HCL preserved 40-ml glass laboratory supplied VOAs, labeled, and placed into a cooler maintained at 4 degree Celsius or lower.

#### **Analytical Methodology**

Samples collected during the investigation were analyzed using United States Environmental Protection Agency (USEPA)-approved methods:

- USEPA Method 8260 for volatile organic compounds (VOCs)

Laboratory analytical data sheets and chain of custody record are included in as an Attachment.

#### **Findings**

From the field observations, both visually and field screening with the PID unit, no adverse odors or presence of PCE was noted. Results from the laboratory indicated that PCE was detected in the groundwater sample at a concentration of 15 ppb, and chloroform at a concentration of 0.83 ppb.

J:\Water\Projects\Falmer\Geoprobe\report.doc

EFI Global, Inc.

ACDEH0000094



Leroy Griffin  
June 28, 2005  
Page 3 of 3

### Conclusions

The purpose of collecting the groundwater samples from SB-6 was to confirm the presence of PCE previously detected in a grab groundwater sample collected in SB-1 (48 ppb).

Based on the soil data previously collected it appears that the shallow soil contains low levels of PCE, but this compound is not present in the deeper unsaturated zone. Therefore, it is possible that the low concentration of PCE detected in the groundwater is not attributed to PCE in shallow soil at the Site.

The source(s) of the PCE detected in the groundwater below the Subject Property are still not known at this time; however based on the results of the groundwater samples collected at SB-1 and SB-6, the concentrations of PCE appear to be low and not of significant concern at this time.

### Conclusions

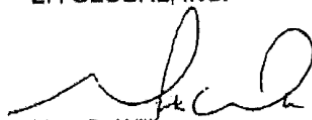
From the data and historical review, EFI does not recommend any further assessment of the PCE in the soil and groundwater at the Subject Property.

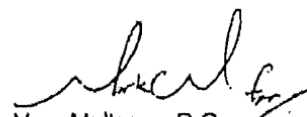
The implication of any further investigation may have a significant material affect on any future property transaction. EFI respectfully requests that the City of Oakland Fire Department review this additional data presented above in response to the previous request for "no further action".

If you have any questions regarding this letter, please contact the undersigned at 925-820-9580.

Sincerely,

EFI GLOBAL, INC.

  
Mark B. Williams  
Senior Project Manager

  
Marc Mullaney, R.G.  
Staff Scientist

Attachments: Figure 1 -  
Figure 2 -

Site Location (AEI)  
Site Layout and Sampling Locations (AEI)

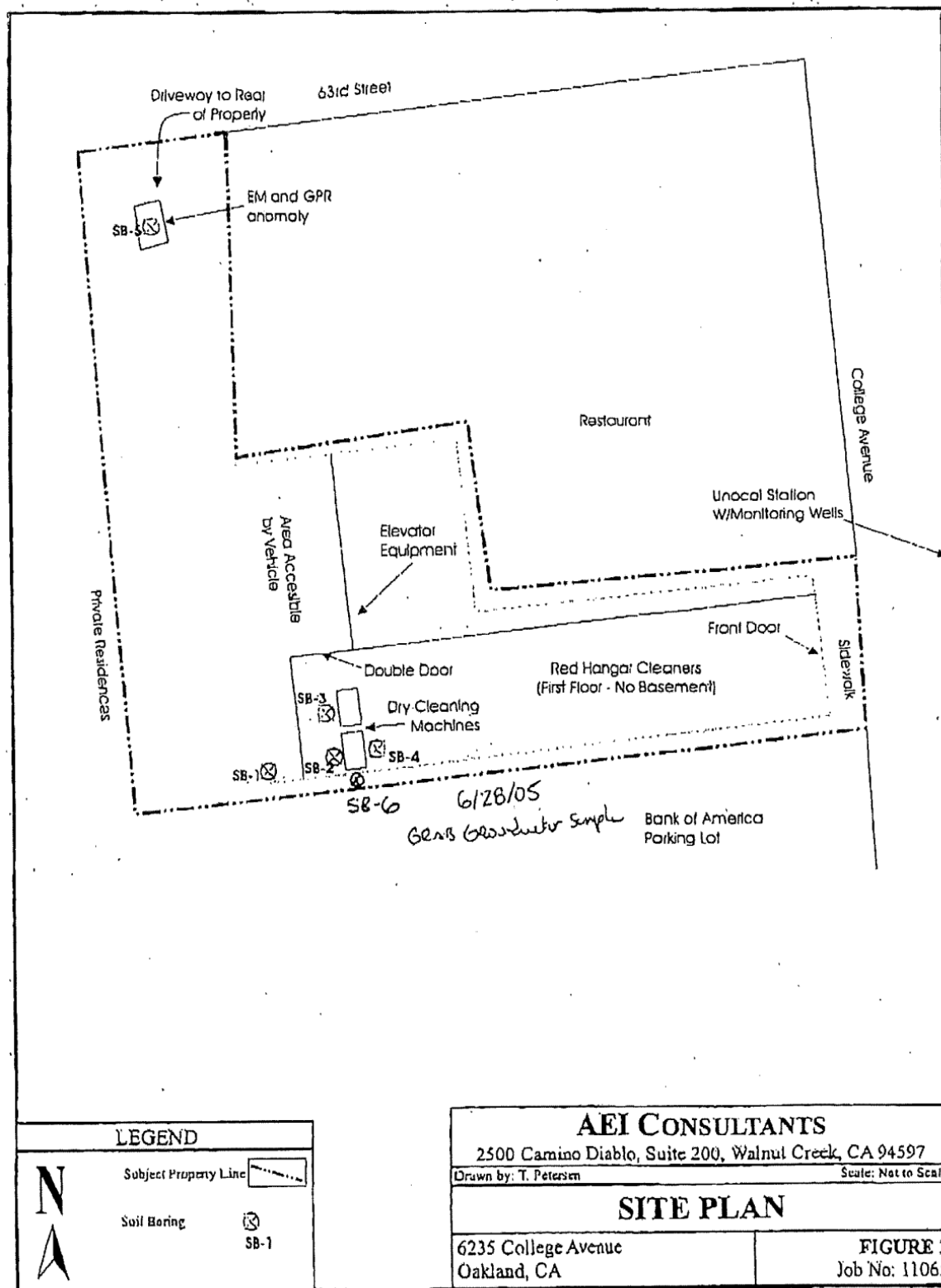
EFI Global, Inc. is a registered provider of continuing education for geotechnical engineers.

EFI Global, Inc.

ACDEH0000095

**ATTACHMENT A**  
**FIGURE**

ACDEH0000096



ACDEH0000097

---

**ATTACHMENT B**  
**Analytical Data Sheets and Chain of Custody Record**

ACDEH0000098

Alameda County Public Works Agency - Water Resources Well Permit



399 Elmhurst Street  
Hayward, CA 94544-1395  
Telephone: (510)670-6633 Fax: (510)782-1939

Application Approved on: 06/21/2005 By Jamesy  
Permits Issued: W2005-0662

Permits Valid from 06/27/2005 to 06/27/2005

Application Id: 1119396205657  
Site Location: 6235 College Ave  
Project Start Date: 06/27/2005

City of Project Site: Oakland

Completion Date: 06/27/2005

Applicant: EFI Global - Mark Williams  
111 Deerwood Rd, San Ramon, CA 94588  
Property Owner: Valliance Capital  
1899 E. Roseville Pkwy, Roseville, CA 95661  
Client: \*\* same as Property Owner \*\*

Phone: 925-820-9580

Phone: -

Total Due: \$200.00  
Total Amount Paid: \$200.00  
Paid By: CHECK PAID IN FULL

**Works Requesting Permits:**

Borehole(s) for Investigation-Contamination Study - 1 Boreholes  
Driller: ECA - Lic #: 695970 - Method: other

Work Total: \$200.00

**Specifications**

Permit Number	Issued Dt	Expire Dt	# Boreholes	Hole Diam	Max Depth
W2005-0662	06/21/2005	09/25/2005	1	2.00 in.	20.00 ft

**Specific Work Permit Conditions**

1. Backfill bore hole by tremie with cement grout or cement grout/sand mixture. Upper two-three feet replaced in kind or with compacted cuttings.

2. Boreholes shall not be left open for a period of more than 24 hours. All boreholes left open more than 24 hours will need approval from Alameda County Public Works Agency, Water Resources Section. All boreholes shall be backfilled according to permit destruction requirements and all concrete material and asphalt material shall be to Caltrans Spec or County/City Codes. No borehole(s) shall be left in a manner to act as a conduit at any time.

3. Permit is valid only for the purpose specified herein. No changes in construction procedures, as described on this permit application. Boreholes shall not be converted to monitoring wells, without a permit application process.

4. Applicant shall contact Johnson Tang for a inspection time at 510-670-6450 at least five (5) working days prior to starting, once the permit has been approved. Confirm the scheduled date(s) at least 24 hours prior to drilling.

ACDEH0000099



JUN 28 2005 3:47PM

McCAMPBELL ANALYTICAL

9257984612

p. 1



McCAMPBELL ANALYTICAL INC.

110 2nd Ave South, #D7, Pucheco, CA 94553-5560

Telephone: 925-798-1620 Fax: 925-798-1622

<http://www.mccampbell.com> E-mail: [nwin@mccampbell.com](mailto:nwin@mccampbell.com)

DATE: 06/28/05

ATTN: Mack Williams

Message:

Some day rush results for Valliance Cap

FROM:

Suzanne

Number of pages faxed including this one: 5

**CAUTION: CONFIDENTIAL**

THE DOCUMENT BEING TELECOPIED TO YOU MAY CONTAIN INFORMATION PROTECTED BY THE SENDER AND/OR CLIENT. It is intended only for the use of the person to whom it is addressed. If you are not the intended recipient or an authorized representative, then this is notice to you that dissemination, distribution or copying of this document is prohibited. If this was received in error, please call us at once and destroy the document.

ACDEH0000100

<div style="display: flex; justify-content: space-between;"> <div> <b>McCAMPBELL ANALYTICAL, INC.</b>  110 3<sup>RD</sup> AVENUE SOUTH, SUITE 100  PACIFIC, CA 94353-5560  Website: <a href="http://www.mccampbell.com">www.mccampbell.com</a> Email: <a href="mailto:info@mccampbell.com">info@mccampbell.com</a>  Telephone: (925) 798-1628 Fax: (925) 798-1622 </div> <div> <b>CHAIN OF CUSTODY</b>  TURN AROUND TIME  EDF Required? Coelt (Normal) No Write On (DW) No </div> <div> <b>RUSH</b>  RUSH 24 HR 48 HR 72 HR 5 DAY </div> </div>																
Report To: <u>Mark Williams</u> BU To: <u>Sen</u> Company: <u>EFL Global</u> <u>111 Occidental St Suite 185</u> <u>San Ramon, CA 94583</u> Tel: <u>(925) 457-7304</u> E-Mail: <u>Mark.Williams@eflglobal.com</u> Project #: _____      Fax: <u>(925) 820-9580</u> Project Location: <u>Oakridge, IA</u> Project Name: <u>Vollum Cap</u> Sampler Signature: _____																
SAMPLE ID (Field Point Name)	LOCATION	SAMPLING		# Containers	Type Containers	MATRIX					METHOD PRESERVED		Analysis Request	Other	Comments	
		Date	Time			Water	Soil	Air	Sludge	Other	ICE	HCL				RNO
SB-6		6/28	8:20	4	Wp	X										
<div style="display: flex; justify-content: space-between;"> <div> Relinquished By: _____  Relinquished By: _____  Relinquished By: _____ </div> <div> Date: <u>6/28/04</u>  Date: _____  Date: _____ </div> <div> Time: <u>8:46</u>  Time: _____  Time: _____ </div> <div> Received By: _____  Received By: _____  Received By: _____ </div> <div> ICOP: _____  GOOD CONDITION  HEAD SPACE ABSENT  DECHLORINATED IN LAB  APPROPRIATE CONTAINERS  PRESERVED IN LAB  PRESERVATION: <u>YUAS</u>      <u>D&amp;G</u>      METALS: <u>plc</u>      OTHER: _____ </div> <div> COMMENTS:  <u>Results today?</u> </div> </div>																

ACDEH0000101

**McC Campbell Analytical, Inc.**

110 Second Avenue South, #D7  
Pacheco, CA 94553-3560  
(925) 718-1610

**CHAIN-OF-CUSTODY RECORD**

Page 1 of 1

WorkOrder: 0506508

ClientID: EFI

## Report to:

Mark Williams

EFI

111 Deerwood Rd, Suite 195

San Ramon, CA 94583

TEL:

FAX: 925-820-9587

Project: Valiance Cap

PO:

## Bill to:

Accounts Payable

EFI

111 Deerwood Rd, Suite 195

San Ramon, CA 94583

Requested TAT:

1 day

Date Received: 06/28/2005

Date Printed: 06/28/2005

Sample ID	Client/SampID	Matrix	Collection Date	Hold	Requested Tests (See legend below)														
					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
0506508-001	SB G	Water	6/28/05 8:20:00 AM	<input type="checkbox"/>	A														

## Test Legend:

1	8010RMS W	2		3		4		5	
6		7		8		9		10	
11		12		13		14		15	

Prepared by: Maria Veuegas

Comments: Same Day Rush

NOTE: Samples are discarded 60 days after results are reported unless other arrangements are made. Hazardous samples will be returned to client or disposed of at client expense.

Jun 28 2005 3:47PM

MCCAMPBELL ANALYTICAL

9257984612

P.3


ACDEH0000102

Jun 28 2005 3:47PM

McCAMPBELL ANALYTICAL

9257984612

P. 4

 <b>McC Campbell Analytical, Inc.</b>		110 2nd Avenue South, #137, Pacheco, CA 94553-3560 Telephone: 925-798-1620 Fax: 925-798-1622 Website: www.mcccampbell.com E-mail: info@mcccampbell.com	
<b>ERI</b>  111 Deerwood Rd, Suite 195  San Ramon, CA 94583	Client Project ID: Valliance Cap		Date Sampled: 06/28/05
			Date Received: 06/28/05
	Client Contact: Mark Williams		Date Extracted: 06/28/05
	Client P.O.:		Date Analyzed: 06/28/05
<b>Halogenated Volatile Organics by P&amp;T and GC-MS (8010 Basic Target List)*</b> Extraction Method: SW8260B Analytical Method: SW8260B Work Order: 0506506			
Lab ID	0506506-001A		Reporting Limit for DF = 1
Client ID	SB-6		
Matrix	W		
DF	1		
<b>Compound</b>	<b>Concentration</b>	<b>µg/kg</b>	<b>µg/L</b>
Bromodichloromethane	ND	NA	0.5
Bromoform	ND	NA	0.5
Bromomethane	ND	NA	0.5
Carbon Tetrachloride	ND	NA	0.5
Chlorobenzene	ND	NA	0.5
Chloroethane	ND	NA	0.5
2-Chloroethyl Vinyl Ether	ND	NA	1.0
Chloroform	0.83	NA	0.5
Chloromethane	ND	NA	0.5
Dibromochloromethane	ND	NA	0.5
1,2-Dichlorobenzene	ND	NA	0.5
1,3-Dichlorobenzene	ND	NA	0.5
1,4-Dichlorobenzene	ND	NA	0.5
Dichlorodifluoromethane	ND	NA	0.5
1,1-Dichloroethane	ND	NA	0.5
1,2-Dichloroethane (1,2-DCA)	ND	NA	0.5
1,1-Dichloroethene	ND	NA	0.5
cis-1,2-Dichloroethene	ND	NA	0.5
trans-1,2-Dichloroethene	ND	NA	0.5
1,2-Dichloropropane	ND	NA	0.5
cis-1,3-Dichloropropene	ND	NA	0.5
trans-1,3-Dichloropropene	ND	NA	0.5
Methylene chloride	ND	NA	0.5
1,1,2,2-Tetrachloroethane	ND	NA	0.5
Tetrachloroethene	15	NA	0.5
1,1,1-Trichloroethane	ND	NA	0.5
1,1,2-Trichloroethane	ND	NA	0.5
Trichloroethene	ND	NA	0.5
Trichlorofluoromethane	ND	NA	0.5
Vinyl Chloride	ND	NA	0.5
<b>Surrogate Recoveries (%)</b>			
%SS1:	101		
%SS2:	98		
%SS3:	95		
Comments:	i		
* water and vapor samples are reported in µg/L, soil/sediment/solid samples in mg/kg, product/oil/non-aqueous liquid samples and all TCLP & SPLP extracts are reported in mg/L, wipe samples in µg/wipe. ND means not detected above the reporting limit; N/A means analyte not applicable to this analysis. # surrogate diluted out of range or surrogate coelutes with another peak. h) lighter than water immiscible stream/product is present; i) liquid sample that contains greater than ~1 vol. % sediment; j) sample diluted due to high organic content/matrix interference; k) reporting limit near, but not identical to our standard reporting limit due to variable Zencore sample weight; m) reporting limit raised due to insufficient sample amount; n) results are reported on a dry weight basis; o) see attached narrative.			

DHS Certification No. 1644

Angela Rydelius, Lab Manager

ACDEH0000103


**EFI Global**

Complex Issues • Solid Solutions

 111 Deerwood Road  
 Suite 195  
 San Ramon, CA 94583  
 Tl: 800-506-0844  
 Tel: 925-820-9580  
 Fax: 925-820-9587  
 www.efiglobal.com

June 2, 2005

 Leroy Griffin  
 Oakland City Fire Department  
 1605 Martin Luther King Jr. Way  
 Oakland, California 94612

 Re: Request for No Further Action – Red Hanger Cleaners, 6235 College Avenue, Oakland, California (18)  
 EFI PN: 98360-00-051

Dear Mr. Griffin:

On behalf of the Red Hanger Cleaners Site, EFI Global (EFI) is requesting that the City of Oakland Fire Department (COFD) review the findings summarized in this letter and provide written confirmation that "no further action" is needed to address the low concentrations of tetrachloroethene (PCE) at the above-mentioned property. The Site location is shown on Figure 1, and the Site Layout is shown on Figure 2.

### Background

As part of a property transaction, AEI Consultants, conducted a Phase I Environmental Site Assessment (Phase I ESA) of the Subject Property in March 2005. The findings of their site assessment are summarized below:

- The Subject Property is located on the west side of College Avenue in a mixed commercial and residential area of Oakland. The Subject Property is identified by Alameda County Tax Assessor's Parcel Number (APN) 48A-7069-9-1 and is approximately 0.17 acres. The mailing address for the Subject Property is 6239 College Avenue, Oakland, California.
- The Subject Property is developed with a three-story building that was developed in 1986 and is currently occupied by the Red Hanger Cleaners on the first floor with offices on the second and third floors.
- Historical information gathered during AEI's assessment revealed that the Subject Property was occupied by an automobile garage and store in at least 1929, by Berkeley Fuel and Supply in at least 1941, and by a restaurant, plumbing and pipe threading store, and automobile garage in at least 1951. In 1985 plans for site improvements including grading permits and permits to remove a reported former gasoline underground storage tank (UST) were filed (see below). From 1986 to 1987 the current three-story office building was constructed.

I:\Existing Projects\Valiance Capital\Closure request.doc

ACDEH0000104



Leroy Griffin  
June 2, 2005  
Page 2 of 5

- According the City of Oakland Building and Planning Department (OBPD), a building plan record for the Subject Property indicated that a 1,000-gallon gasoline UST might have been present on the northwest corner of the Subject Property. The location of the UST was noted as "un-determined"; however, a fill pipe was noted in the plans reviewed. Permits to remove the reported UST were filed in 1986; however, no supporting information was noted in the files that documented any removal activities associated with the permits. It was also noted that no records of a UST were on file at the City of Oakland Fire Department or in the regulatory databases summarized in the Environmental Data Resources Inc. (EDR) radius report requested by AEI.
- The dry cleaning operations currently at the property consist of two closed-looped dry cleaning machines containing approximately 20 gallons of PCE in each. No floor drains are located adjacent to the machines, and no obvious signs of leakage, stains, or releases were noted during the field inspection conducted by AEI.
- AEI concluded in their report that a subsurface investigation be conducted in association with the reported former UST and dry cleaning operations.

In response to the environmental issues reported in the Phase I ESA, AEI conducted a geophysical survey and soil and groundwater sampling investigation on May 3, 2005. The information from their phase II investigation is summarized below:

- AEI conducted a geophysical survey using both electro-magnetic survey and ground penetrating radar equipment in the northwest corner area of the property to evaluate the presence of a suspected UST. The survey identified an anomaly that appeared to be a backfilled excavation approximately 8 feet deep.
- The subsurface scope of work included drilling five locations (SB-1 through SB-5) to depths of 26 feet below ground surface (bgs) for SB-1 and 12 feet bgs for SB-2 through SB-5. SB-1, SB-2, and SB-3 were located on the assumed down-gradient side of the dry cleaning machines, SB-4 was located on the upgradient side of the machines, and SB-5 was located in the center of the backfilled excavation area of the former UST.
- Soil boring logs are included in Attachment 1 for reference. The soils at Subject Property consisted of primarily silty clays to a depth of 10 to 12 feet, clayey silt to clayey gravel from 14 feet bgs to approximately 24 feet bgs, and sandy gravelly silt to gravelly silty sand from approximately 24 to 26 feet bgs.
- Groundwater was first encountered in SB-1 at a depth of approximately 24 feet bgs in the sandy gravelly silt to gravelly silty sand zone. According to the soil boring log, after approximately 5 minutes the static level was observed at 16 feet bgs. According to groundwater information obtained in AEI's Phase I ESA for nearby offsite properties, the groundwater flow direction in the vicinity of the Subject Property has been reported to flow to the southwest at 15 to 20 feet bgs.

Leroy Griffin  
June 2, 2005  
Page 3 of 5

- Samples submitted for analysis included soil collected at depths of 3 feet bgs from SB-1, SB-2, and SB-3 (upgradient sides). A soil sample collected at a depth of 4 feet was submitted from SB-4 (downgradient side) and 11.5 feet bgs in SB-5 (former UST area). The UST sample was analyzed by EPA Method 8015m/8020 for total petroleum hydrocarbons as gasoline, diesel, and motor oil and benzene, toluene, ethylbenzene, and xylenes (collectively, BTEX). The other soil samples collected from boreholes SB-1 through SB-4 and the grab groundwater sample collected from SB-1 were evaluated using EPA Method 8010 for halogenated volatile organic compounds (HVOCs).
- The results of the investigation reported that no petroleum hydrocarbons were detected in the soil sample collected below the base of the UST excavation. PCE was detected at low concentrations in the soil samples at 3.0 and 4.0 feet bgs as follows: SB-1 at 3.0 feet at 0.17 parts per million (ppm), SB-2 at 3.0 feet at 0.08 ppm, SB-3 at 3.0 feet at 0.19 ppm, and SB-4 at 4 feet at 0.26 ppm. The concentration of PCE detected in the groundwater sample was reported at 48 parts per billion (ppb). Chloroform was also detected in the groundwater sample at 0.83 ppb.

Based on the preliminary results of the shallow soil samples, soil samples that were placed on-hold at the laboratory were evaluated for the presence of PCE using EPA method 8010 for borings SB-1 through SB-4. The information from this additional analysis is presented below:

- Samples selected for additional analysis included the following: a soil sample in SB-1 (downgradient) at a depth of 11.5 feet bgs, and soil samples from a depth of 9.5 feet bgs from boreholes SB-2 through SB-4.
- No HVOCs were detected in the soil samples collected at 9.5 to 11.5 feet bgs.

### Discussion

Based on the information obtained during AEI's Phase I ESA, two potential issues were noted: the reported former UST and the presence of the dry cleaning machines.

Based on the Phase II geophysical survey in the vicinity of the suspected former UST, it is concluded that if there was a UST historically located in the northwest corner of the property, it is no longer there. Additionally, soil samples collected during the Phase II subsurface investigation conducted in May 2005 at this location (SB-5) did not show the presence of soil adversely affected with petroleum hydrocarbons in either field observations or analytical data. Therefore the possible former UST does not represent an environmental concern at this time.

Leroy Griffin  
June 2, 2005  
Page 4 of 5

The Subject Property has been developed with the dry cleaner Red Hanger Cleaners since 1986-1987. According to data collected from shallow soil samples, PCE was detected in low concentrations at depths of 3 to 4 feet bgs at concentrations ranging from 0.08 ppm to 0.26 ppm. No PCE was detected in unsaturated soil at depths of 9.5 and 11.5 feet bgs. A grab groundwater sample collected from borehole SB-1 contained a PCE concentration of 48 ppb. Based on the soil data collected it appears that the shallow soil contains low levels of PCE, but this compound is not present in the deeper unsaturated zone. Therefore, it is possible that the low concentration of PCE detected in the groundwater is not attributed to PCE in shallow soil at the Site.

The analytical data for soil at the Site was compared to the California Regional Water Quality Control Board July 2003 Environmental Screening Levels (ESLs). For industrial/commercial properties, the most "conservative" ESL for PCE in shallow soil (i.e., less than three meters) is 0.25 ppm. This value is based on the potential for indoor air impacts (i.e., volatilization into the workplace). The ESL for direct exposure is 1.30 ppm, and the "maximum" ESL is 370 ppm based on aesthetics such as odor. PCE concentrations from four of five locations were below the most conservative ESL value of 0.25 ppm. Only location SB-4 at 4.0 feet bgs (0.26 ppm) was slightly above this guidance ESL for potential indoor air impacts as a result of volatilization from soil.

The ESL concentration for potential leaching of PCE from soil to groundwater is 0.70 ppm. The referenced PCE concentrations detected in the soil at the property were below this ESL.

The source(s) of the PCE detected in the groundwater at location SB-1 is not known at this time; however during the site reconnaissance by AEI, it was noted that there are two nearby and one historic dry cleaners as follows: Rockridge Royal Cleaner located at 5445 College Avenue and downgradient to crossgradient; Garden Cleaners located at 5808 College Avenue and downgradient to crossgradient; and historically adjacent Kay's Cleaner located at 6251 College Avenue and directly upgradient to the Subject Property.

Based on the results of the soil sampling and historical assessment, the source(s) of PCE in the groundwater does not appear to have originated from the Subject Property. Residual concentrations of PCE are present in the shallow soils that may have resulted from the use of PCE at the site since 1986-87; however, the absence of PCE in deeper unsaturated zone soils suggests that a significant release has not occurred.

From the data and historical review, EFI does not recommend any further assessment of the PCE in the soil and groundwater at the Subject Property.

The implication of any further investigation may have a significant material affect on any future property transaction. EFI respectfully requests that the COFD review this case in light of the data presented above and provide a written determination of no further action.

Leroy Griffin  
June 2, 2005  
Page 5 of 5

If you have any questions regarding this letter, please contact the undersigned at 925-820-9580.

Sincerely,

EFI GLOBAL, INC.



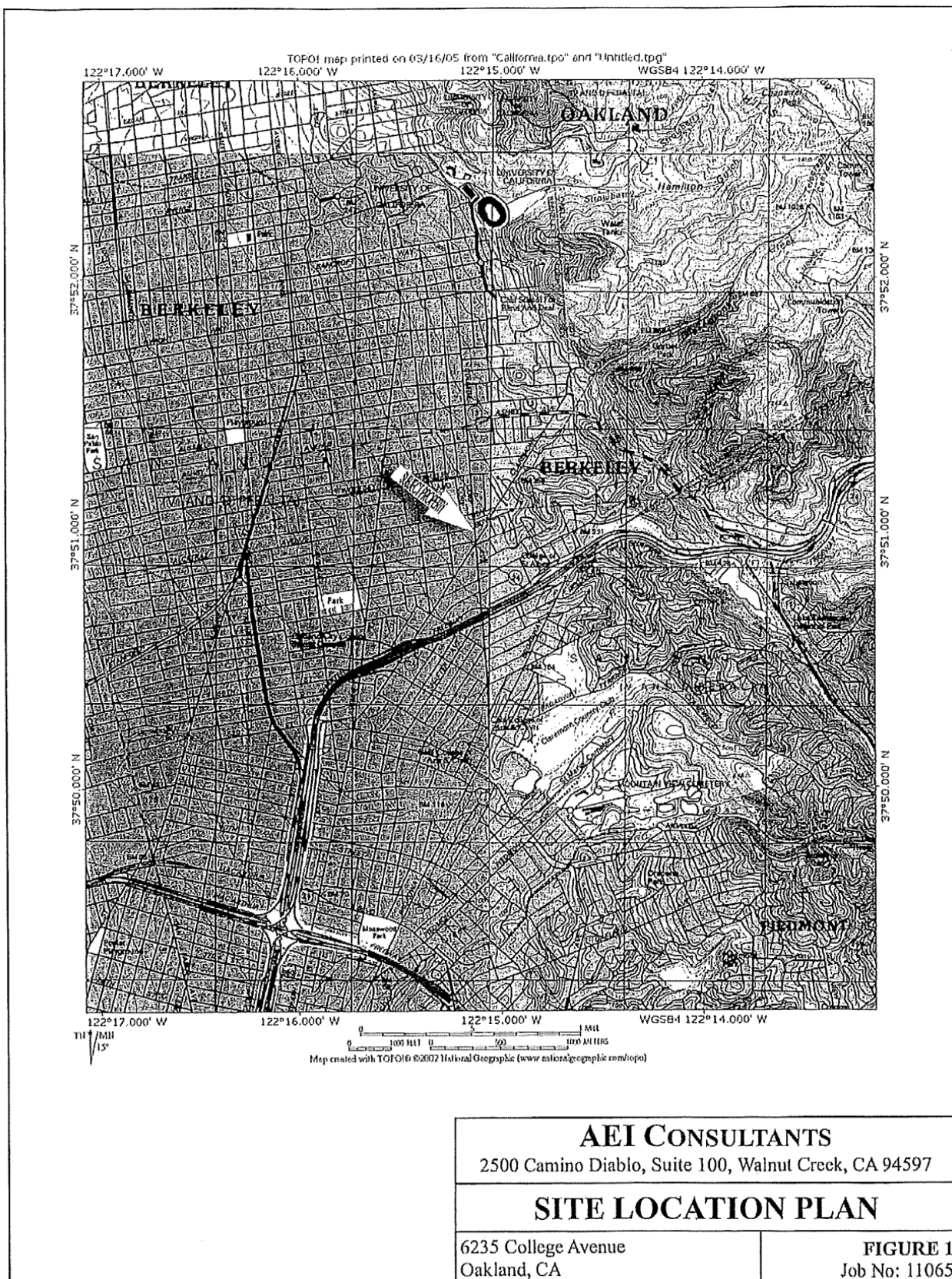
Mark B. Williams  
Senior Project Manager



Chris R. Maxwell, R.G.  
District Manager

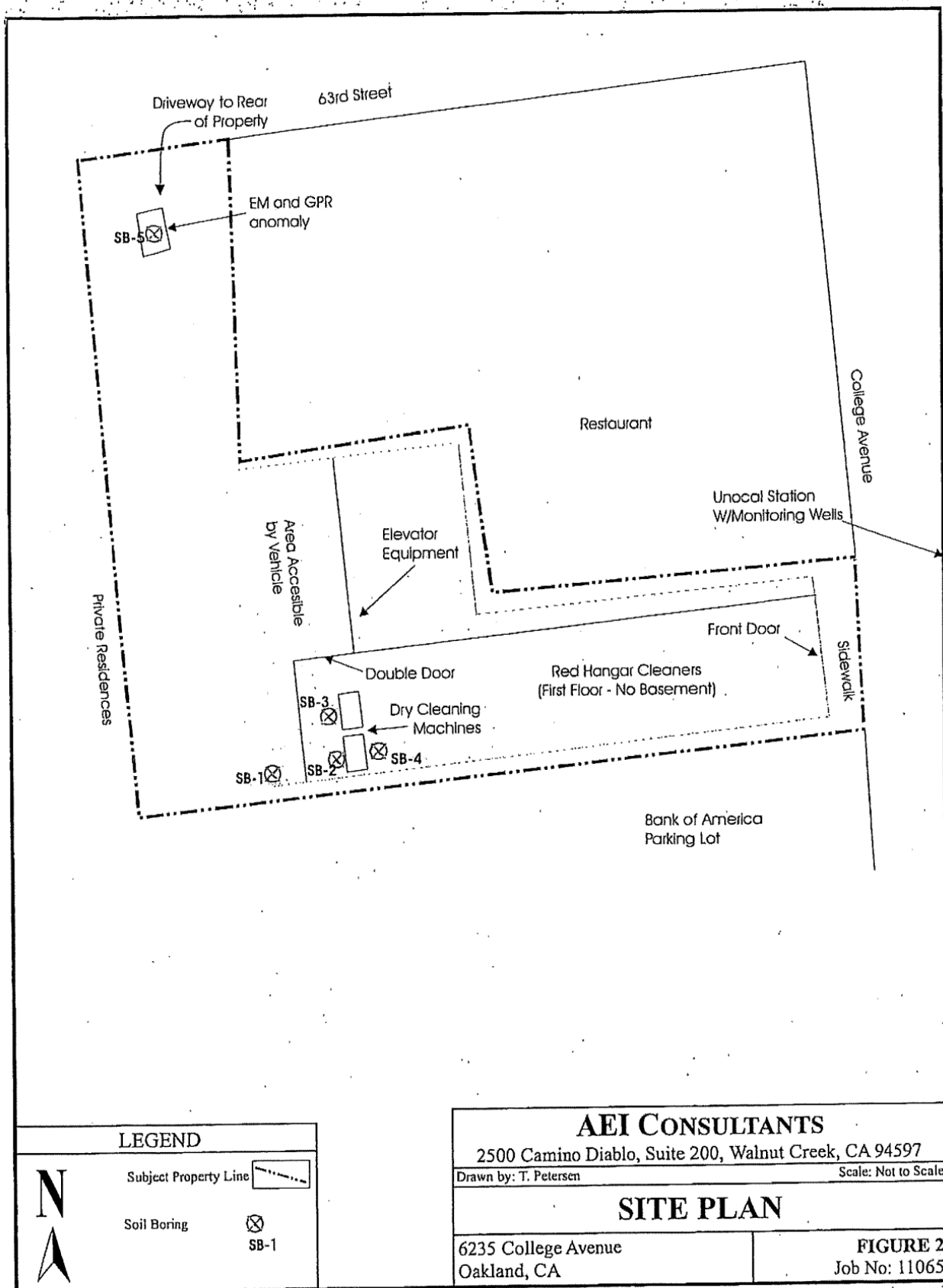
Attachments: Figure 1 -  
Figure 2 -  
Attachment A

Site Location (AEI)  
Site Layout and Sampling Locations (AEI)  
Analytical Data Reports and Soil Boring Logs (AEI)



ACDEH0000109

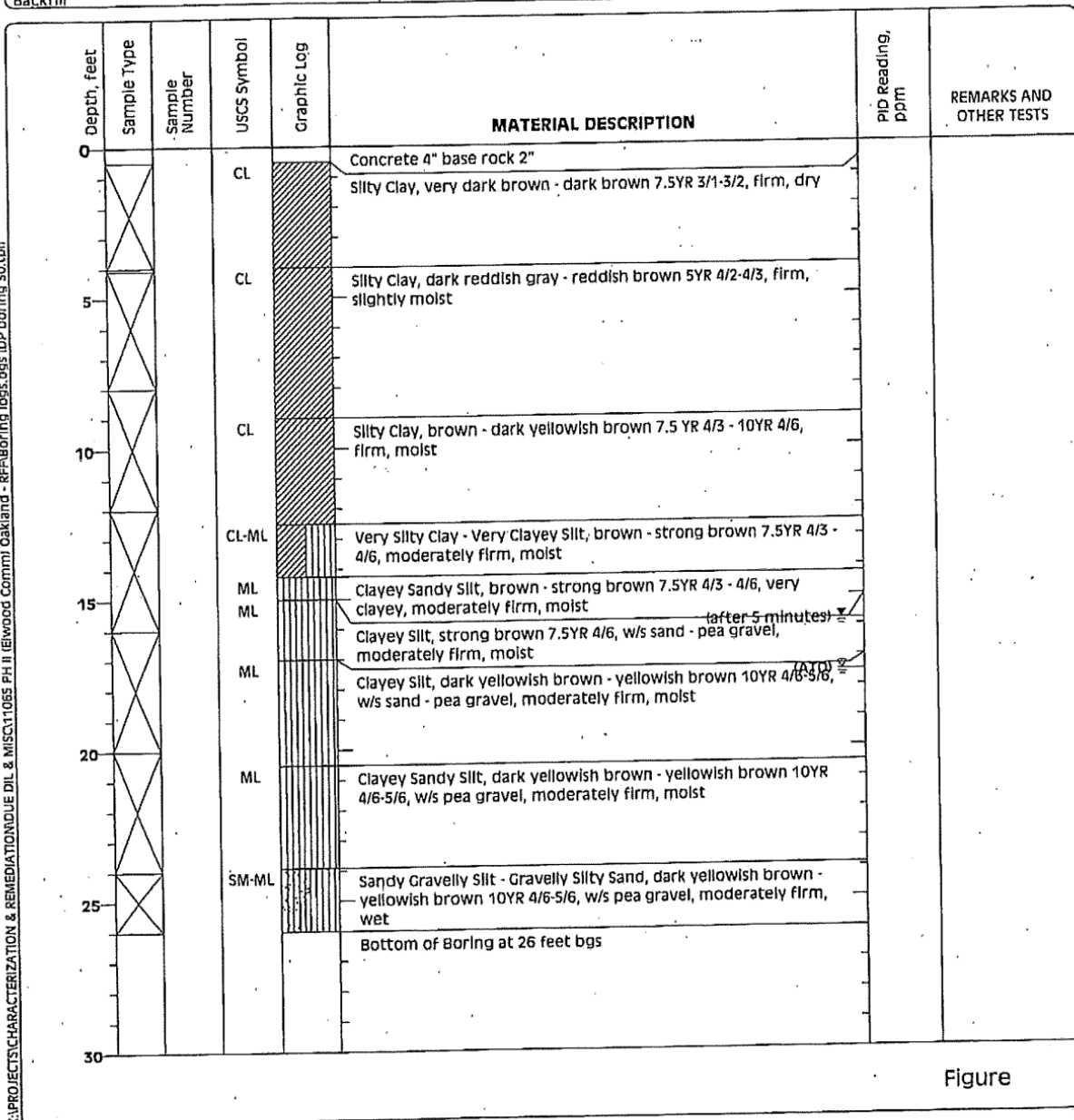




ACDEH0000110

<b>Project: Ellwood</b> <b>Project Location: 6293 College Place, Oakland, CA</b> <b>Project Number: 11065</b>	<b>Log of Boring SB -1</b> Sheet 1 of 1
---	--

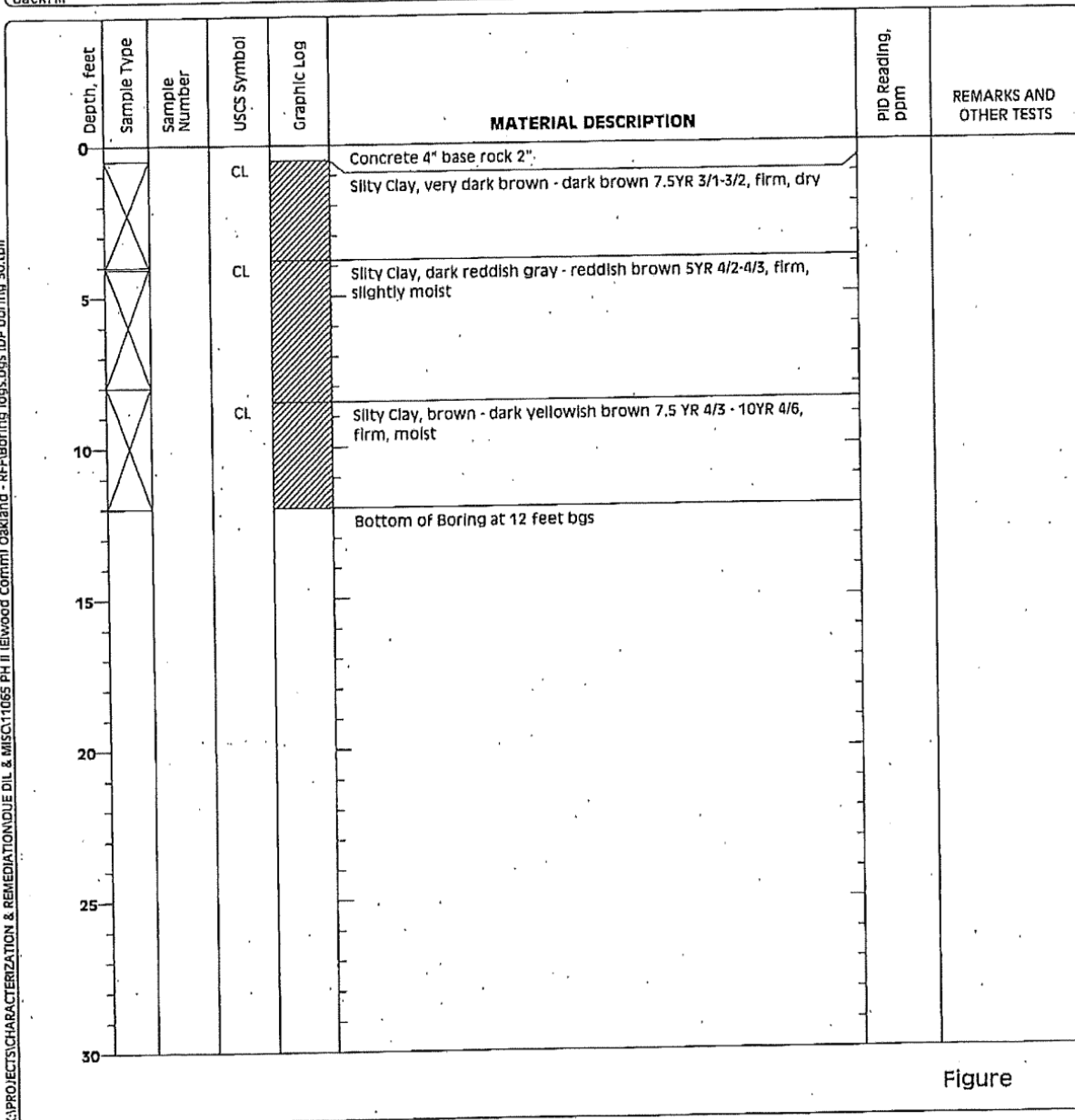
Date(s) Drilled <b>May 3, 2005</b>	Logged By <b>Robert F. Flory</b>	Checked By <b>Jeff Rosenberg</b>
Drilling Method <b>Direct push</b>	Drill Bit Size/Type <b>2 inch</b>	Total Depth of Borehole <b>26 feet bgs</b>
Drill Rig Type <b>Geoprobe 5410</b>	Drilling Contractor	Approximate Surface Elevation
Groundwater Level <b>17.5 feet ATD, 15.8 feet after 5 minutes</b>	Sampling Method(s) <b>Tube</b>	Permit No.: <b>ACPWA # W05-0464</b>
Borehole Backfill <b>Cement Slurry</b>	Location	



ACDEH0000111

<b>Project: Ellwood</b> <b>Project Location: 6293 College Place, Oakland, CA</b> <b>Project Number: 11065</b>	<b>Log of Boring SB-2</b> Sheet 1 of 1
---	---

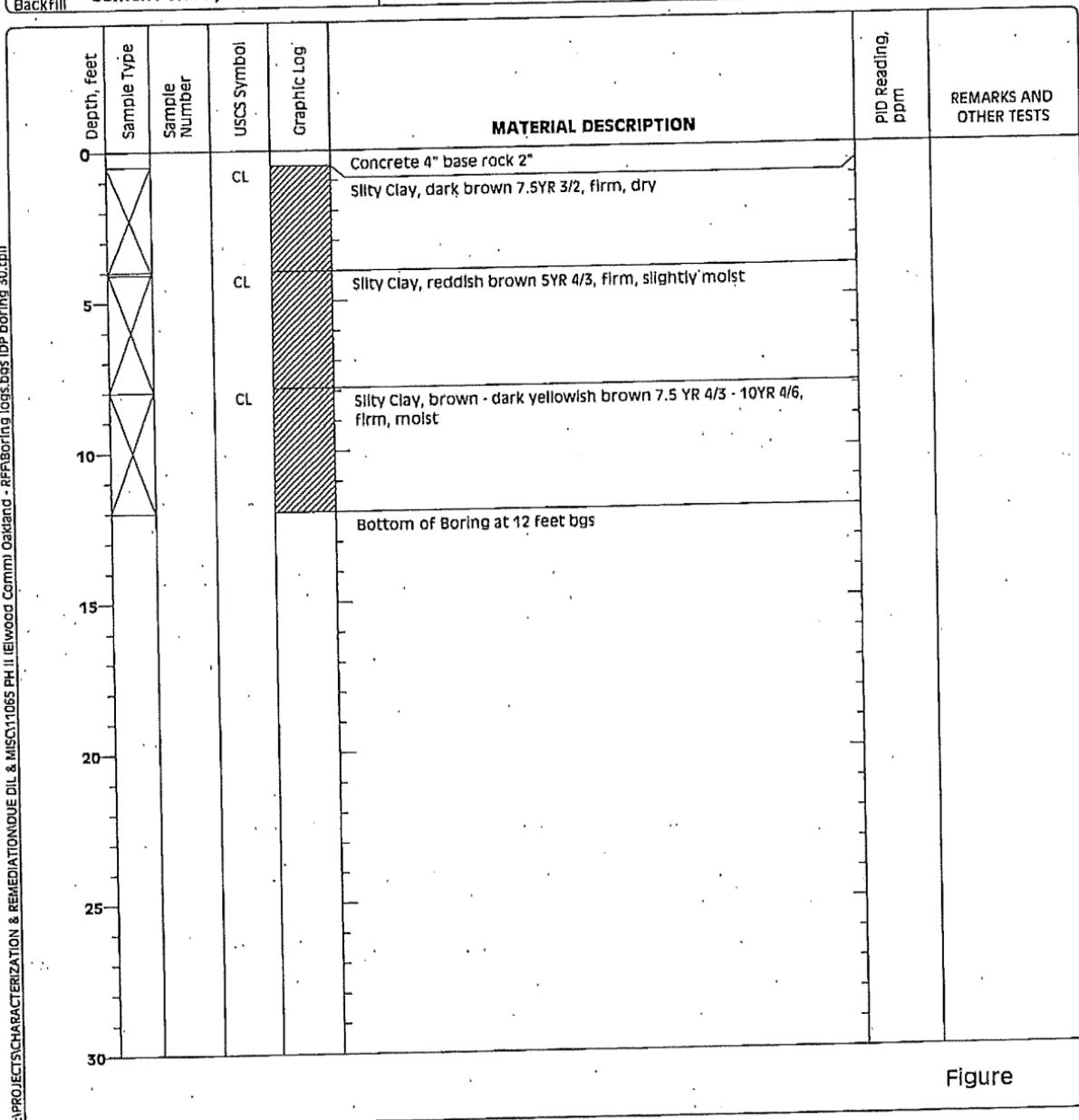
Date(s) Drilled <b>May 3, 2005</b>	Logged By <b>Robert F. Flory</b>	Checked By <b>Jeff Rosenberg</b>
Drilling Method <b>Direct push</b>	Drill Bit Size/Type <b>2 inch</b>	Total Depth of Borehole <b>12 feet bgs</b>
Drill Rig Type <b>Geoprobe 5410</b>	Drilling Contractor	Approximate Surface Elevation
Groundwater Level and Date Measured <b>Not Encountered ATD</b>	Sampling Method(s) <b>Tube</b>	Permit No.: <b>ACPWA # W05-0464</b>
Borehole Backfill <b>Cement Slurry</b>	Location	



ACDEH0000112

<b>Project:</b> Ellwood <b>Project Location:</b> 6293 College Place, Oakland, CA <b>Project Number:</b> 11065	<b>Log of Boring SB-3</b> Sheet 1 of 1
---	---

Date(s) Drilled <b>May 3, 2005</b>	Logged By <b>Robert F. Flory</b>	Checked By <b>Jeff Rosenberg</b>
Drilling Method <b>Direct push</b>	Drill Bit Size/Type <b>2 inch</b>	Total Depth of Borehole <b>12 feet bgs</b>
Drill Rig Type <b>Geoprobe 5410</b>	Drilling Contractor	Approximate Surface Elevation
Groundwater Level <b>Not Encountered</b> and Date Measured <b>ATD</b>	Sampling Method(s) <b>Tube</b>	Permit No.: <b>ACPWA # W05-0464</b>
Borehole Backfill <b>Cement Slurry</b>	Location	



ACDEH0000113

**Project: Ellwood**  
**Project Location: 6293 College Place, Oakland, CA**  
**Project Number: 11065**

**Log of Boring SB-4**  
 Sheet 1 of 1

Date(s) Drilled <b>May 3, 2005</b>	Logged By <b>Robert F. Flory</b>	Checked By <b>Jeff Rosenberg</b>
Drilling Method <b>Direct push</b>	Drill Bit Size/Type <b>2 inch</b>	Total Depth of Borehole <b>12 feet bgs</b>
Drill Rig Type <b>Geoprobe 5410</b>	Drilling Contractor	Approximate Surface Elevation
Groundwater Level <b>Not Encountered</b> and Date Measured <b>ATD</b>	Sampling Method(s) <b>Tube</b>	Permit No.: <b>ACPWA # W05-0464</b>
Borehole Backfill <b>Cement slurry</b>	Location	

Depth, feet	Sample Type	Sample Number	USCS Symbol	Graphic Log	MATERIAL DESCRIPTION	PID Reading, ppm	REMARKS AND OTHER TESTS
0			CL		Concrete 4" base rock 2"		
			CL		Silty Clay, very dark grayish brown - very dark brown 10YR 3/2-2/2, firm, dry		
5			CL		Silty Clay, dark reddish gray - reddish brown 5YR 4/2-4/3, firm, slightly moist		
10			CL		Silty Clay, brown - dark yellowish brown 7.5 YR 4/3 - 10YR 4/6, firm, moist		
15					Bottom of Boring at 12 feet bgs		
20							
25							
30							

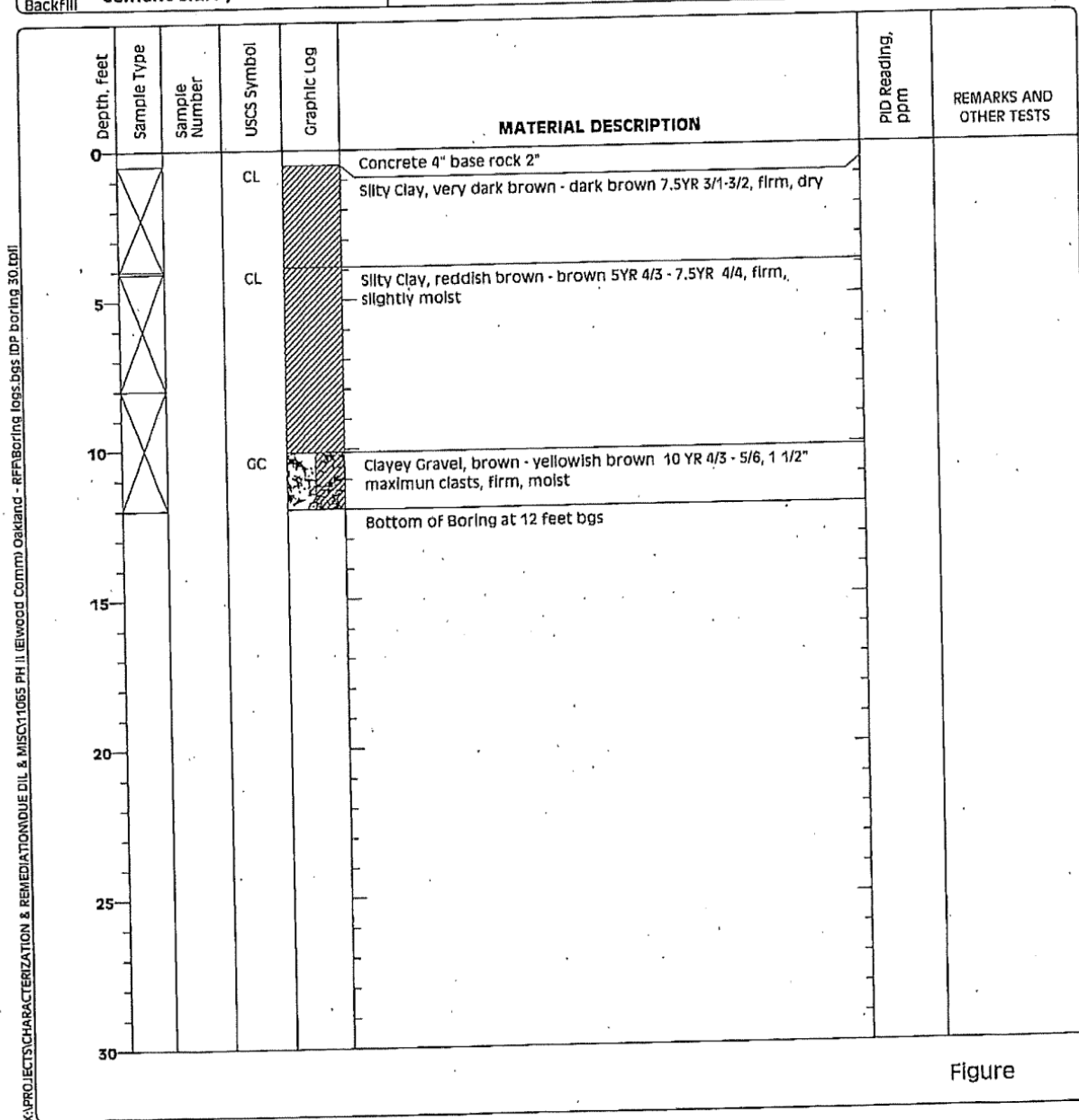
Figure

ACDEH0000114



<b>Project: Ellwood</b> <b>Project Location: 6293 College Place, Oakland, CA</b> <b>Project Number: 11065</b>	<b>Log of Boring SB-5</b> Sheet 1 of 1
---	---


Date(s) Drilled <b>May 3, 2005</b>	Logged By <b>Robert F. Flory</b>	Checked By <b>Jeff Rosenberg</b>
Drilling Method <b>Direct push</b>	Drill Bit Size/Type <b>2 inch</b>	Total Depth of Borehole <b>12 feet bgs</b>
Drill Rig Type <b>Geoprobe 5410</b>	Drilling Contractor	Approximate Surface Elevation
Groundwater Level and Date Measured <b>Not Encountered ATD</b>	Sampling Method(s) <b>Tube</b>	Permit No.: <b>ACPWA # W05-0464</b>
Borehole Backfill <b>Cement slurry</b>	Location	



ACDEH0000115

**APPENDIX C**  
**Laboratory Analyses**  
**With**  
**Chain of Custody Documentation**

ACDEH0000116

 <b>McC Campbell Analytical, Inc.</b>	110 2nd Avenue South, #D7, Pacheco, CA 94553-5560 Telephone : 925-798-1620 Fax : 925-798-1622 Website: www.mcccampbell.com E-mail: main@mcccampbell.com
--	---

AEI Consultants  2500 Camino Diablo, Ste. #200  Walnut Creek, CA 94597	Client Project ID: #11065; Ellwood	Date Sampled: 05/03/05
		Date Received: 05/03/05
	Client Contact: Robert Flory	Date Reported: 05/09/05
	Client P.O.:	Date Completed: 05/09/05

WorkOrder: 0505047

May 09, 2005

Dear Robert:

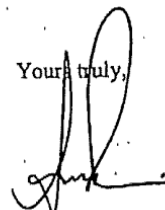
Enclosed are:

- 1). the results of 6 analyzed samples from your #11065; Ellwood project,
- 2). a QC report for the above samples
- 3). a copy of the chain of custody, and
- 4). a bill for analytical services.

All analyses were completed satisfactorily and all QC samples were found to be within our control limits.

If you have any questions please contact me. McC Campbell Analytical Laboratories strives for excellence in quality, service and cost. Thank you for your business and I look forward to working with you again.

Yours truly,




Angela Rydelius, Lab Manager

ACDEH0000117








 <b>McC Campbell Analytical, Inc.</b>		110 3rd Ave. Ste. #D7, Pacifico, CA 94553-5580 Telephone: 925-798-1620 Fax: 925-798-1622 Website: www.mcccampbell.com E-mail: main@mcccampbell.com				
AEI Consultants  2500 Camino Diablo, Ste. #200  Walnut Creek, CA 94597	Client Project ID: #11065; Ellwood		Date Sampled: 05/03/05			
			Date Received: 05/03/05			
	Client Contact: Robert Flory		Date Extracted: 05/03/05			
	Client P.O.:		Date Analyzed: 05/05/05			
<b>Halogenated Volatile Organics by P&amp;T and GC-MS (8010 Basic Target List)*</b> Extraction Method: SW5030B Analytical Method: SW8260B Work Order: 0505047						
Lab ID	0505047-001A	0505047-007A	0505047-010A	0505047-013A	Reporting Limit for DF=1	
Client ID	SB1-3.0	SB2-3.0	SB3-3.0	SB4-4		
Matrix	S	S	S	S		
DF	1	1	1	2		
Compound	Concentration				mg/kg	µg/L
Bromodichloromethane	ND	ND	ND	ND<0.010	0.005	NA
Bromoform	ND	ND	ND	ND<0.010	0.005	NA
Bromomethane	ND	ND	ND	ND<0.010	0.005	NA
Carbon Tetrachloride	ND	ND	ND	ND<0.010	0.005	NA
Chlorobenzene	ND	ND	ND	ND<0.010	0.005	NA
Chloroethane	ND	ND	ND	ND<0.010	0.005	NA
2-Chloroethyl Vinyl Ether	ND	ND	ND	ND<0.010	0.005	NA
Chloroform	ND	ND	ND	ND<0.010	0.005	NA
Chloromethane	ND	ND	ND	ND<0.010	0.005	NA
Dibromochloromethane	ND	ND	ND	ND<0.010	0.005	NA
1,2-Dichlorobenzene	ND	ND	ND	ND<0.010	0.005	NA
1,3-Dichlorobenzene	ND	ND	ND	ND<0.010	0.005	NA
1,4-Dichlorobenzene	ND	ND	ND	ND<0.010	0.005	NA
Dichlorodifluoromethane	ND	ND	ND	ND<0.010	0.005	NA
1,1-Dichloroethane	ND	ND	ND	ND<0.010	0.005	NA
1,2-Dichloroethane (1,2-DCA)	ND	ND	ND	ND<0.010	0.005	NA
1,1-Dichloroethene	ND	ND	ND	ND<0.010	0.005	NA
cis-1,2-Dichloroethene	ND	ND	ND	ND<0.010	0.005	NA
trans-1,2-Dichloroethene	ND	ND	ND	ND<0.010	0.005	NA
1,2-Dichloropropane	ND	ND	ND	ND<0.010	0.005	NA
cis-1,3-Dichloropropene	ND	ND	ND	ND<0.010	0.005	NA
trans-1,3-Dichloropropene	ND	ND	ND	ND<0.010	0.005	NA
Methylene chloride	ND	ND	ND	ND<0.010	0.005	NA
1,1,2,2-Tetrachloroethane	0.17	0.080	0.19	0.26	0.005	NA
Tetrachloroethene	ND	ND	ND	ND<0.010	0.005	NA
1,1,1-Trichloroethane	ND	ND	ND	ND<0.010	0.005	NA
1,1,2-Trichloroethane	ND	ND	ND	ND<0.010	0.005	NA
Trichloroethene	ND	ND	ND	ND<0.010	0.005	NA
Trichlorofluoromethane	ND	ND	ND	ND<0.010	0.005	NA
Vinyl Chloride	ND	ND	ND	ND<0.010	0.005	NA
<b>Surrogate Recoveries (%)</b>						
%SS1:	80	82	81	92		
%SS2:	99	101	100	101		
%SS3:	92	91	90	96		
<b>Comments</b>						
* water and vapor samples are reported in µg/L, soil/sludge/solid samples in mg/kg, product/oil/non-aqueous liquid samples and all TCLP & SPLP extracts are reported in mg/L, wipe samples in µg/wipe.  ND means not detected above the reporting limit; N/A means analyte not applicable to this analysis.  # surrogate diluted out of range or surrogate coelutes with another peak.  h) lighter than water immiscible sheen/product is present; i) liquid sample that contains greater than ~1 vol. % sediment; j) sample diluted due to high organic content/matrix interference; k) reporting limit near, but not identical to our standard reporting limit due to variable Encore sample weight; m) reporting limit raised due to insufficient sample amount; n) results are reported on a dry weight basis; o) see attached narrative.						


DHS Certification No. 1644

Angela Rydelius, Lab Manager


ACDEH0000120

 <b>McC Campbell Analytical, Inc.</b>		110 2nd Avenue Telephone: 925-938-1620 Website: www.mcccampbell.com		P.O. Box 5560 Fax: 925-938-1622 E-mail: main@mcccampbell.com	
AEI Consultants  2500 Camino Diablo, Ste. #200  Walnut Creek, CA 94597		Client Project ID: #11065; Ellwood		Date Sampled: 05/03/05	
				Date Received: 05/03/05	
		Client Contact: Robert Flory		Date Extracted: 05/06/05	
		Client P.O.:		Date Analyzed: 05/06/05	
<b>Halogenated Volatile Organics by P&amp;T and GC-MS (8010 Basic Target List)*</b> Extraction Method: SW5030B      Analytical Method: SW8260B      Work Order: 0505047					
Lab ID		0505047-019A		Reporting Limit for DF=1	
Client ID		SBI-W			
Matrix		W			
DF		1		S	W
Compound	Concentration			µg/kg	µg/L
Bromodichloromethane	ND			NA	0.5
Bromoform	ND			NA	0.5
Bromomethane	ND			NA	0.5
Carbon Tetrachloride	ND			NA	0.5
Chlorobenzene	ND			NA	0.5
Chloroethane	ND			NA	1.0
2-Chloroethyl Vinyl Ether	ND			NA	0.5
Chloroform	0.83			NA	0.5
Chloromethane	ND			NA	0.5
Dibromochloromethane	ND			NA	0.5
1,2-Dichlorobenzene	ND			NA	0.5
1,3-Dichlorobenzene	ND			NA	0.5
1,4-Dichlorobenzene	ND			NA	0.5
Dichlorodifluoromethane	ND			NA	0.5
1,1-Dichloroethane	ND			NA	0.5
1,2-Dichloroethane (1,2-DCA)	ND			NA	0.5
1,1-Dichloroethene	ND			NA	0.5
cis-1,2-Dichloroethene	ND			NA	0.5
trans-1,2-Dichloroethene	ND			NA	0.5
1,2-Dichloropropane	ND			NA	0.5
cis-1,3-Dichloropropene	ND			NA	0.5
trans-1,3-Dichloropropene	ND			NA	0.5
Methylene chloride	ND			NA	0.5
1,1,2,2-Tetrachloroethane	ND			NA	0.5
Tetrachloroethene	48			NA	0.5
1,1,1-Trichloroethane	ND			NA	0.5
1,1,2-Trichloroethane	ND			NA	0.5
Trichloroethene	ND			NA	0.5
Trichlorofluoromethane	ND			NA	0.5
Vinyl Chloride	ND			NA	0.5
<b>Surrogate Recoveries (%)</b>					
%SS1:	95				
%SS2:	103				
%SS3:	107				
Comments					
* water and vapor samples are reported in µg/L, soil/sludge/solid samples in mg/kg, product/oil/non-aqueous liquid samples and all TCLP & SPLP extracts are reported in mg/L, wipe samples in µg/wipe.  ND means not detected above the reporting limit; N/A means analyte not applicable to this analysis.  # surrogate diluted out of range or surrogate coelutes with another peak.  h) lighter than water immiscible sheen/product is present; i) liquid sample that contains greater than ~1 vol. % sediment; j) sample diluted due to high organic content/matrix interference; k) reporting limit near, but not identical to our standard reporting limit due to variable Encore sample weight; m) reporting limit raised due to insufficient sample amount; n) results are reported on a dry weight basis; p) see attached narrative.					

DHS Certification No. 1644


 Angela Rydelius, Lab Manager

ACDEH0000121

 <b>McC Campbell Analytical, Inc.</b>	110 2nd Avenue South, Pacheco, CA 94553-5560 Telephone: 925-798-1620 Fax: 925-798-1622 Website: www.mccampbell.com E-mail: main@mccampbell.com	

### QC SUMMARY REPORT FOR SW8021B/8015Cm

W.O. Sample Matrix: Soil

QC Matrix: Soil

WorkOrder: 0505047

W.O. Sample Matrix: Soil

45 Method: SW-846

EPA Method: SW8021B/8015Cm			Extraction: SW5030B			BatchID: 16101		Spiked Sample ID: 0505032-048A		
Analyte	Sample	Spiked	MS	MSD	MS-MSD	LCS	LCSD	LCS-LCSD	Acceptance Criteria (%)	
	mg/Kg	mg/Kg	% Rec.	% Rec.	% RPD	% Rec.	% Rec.	% RPD	MS / MSD	LCS / LCSD
TPH(btex) <sup>E</sup>	ND	0.60	104	100	3.82	102	99.9	1.77	70 - 130	70 - 130
MTBE	ND	0.10	92.1	91.5	0.642	87.8	88.7	1.02	70 - 130	70 - 130
Benzene	ND	0.10	104	102	1.73	95.4	94.2	1.22	70 - 130	70 - 130
Toluene	ND	0.10	88.2	87.2	1.12	86.3	83.9	2.80	70 - 130	70 - 130
Ethylbenzene	ND	0.10	114	113	0.594	114	112	1.82	70 - 130	70 - 130
Xylenes	ND	0.30	100	100	0	100	96.7	3.39	70 - 130	70 - 130
%SS:	99	0.10	98	116	16.5	107	114	6.33	70 - 130	70 - 130
All target compounds in the Method Blank of this extraction batch were ND less than the method RL with the following exceptions:										
NONE										

#### BATCH 16101 SUMMARY

Sample ID	Date Sampled	Date Extracted	Date Analyzed	Sample ID	Date Sampled	Date Extracted	Date Analyzed
0505047-018A	5/03/05 1:08 PM	5/03/05	5/04/05 7:47 AM				

MS = Matrix Spike; MSD = Matrix Spike Duplicate; LCS = Laboratory Control Sample; LCSD = Laboratory Control Sample Duplicate; RPD = Relative Percent Deviation.

% Recovery =  $100 * (MS - Sample) / (Amount Spiked)$ ;  $RPD = 100 * (MS - MSD) / ((MS + MSD) / 2)$ .

MS / MSD spike recoveries and / or %RPD may fall outside of laboratory acceptance criteria due to one or more of the following reasons: a) the sample is inhomogenous AND contains significant concentrations of analyte relative to the amount spiked, or b) the spiked sample's matrix interferes with the spike recovery.


<sup>E</sup> TPH(btex) = sum of BTEX areas from the FID.

# cluttered chromatogram; sample peak coelutes with surrogate peak.


N/A = not enough sample to perform matrix spike and matrix spike duplicate.

NR = analyte concentration in sample exceeds spike amount for soil matrix or exceeds 2x spike amount for water matrix or sample diluted due to high matrix or analyte content.

DHS Certification No. 1644

 QA/QC Officer

ACDEH0000122

 <b>McC Campbell Analytical, Inc.</b>	110 2nd Avenue Solano, Pacheco, CA 94553-3560
	Telephone : 925-798-1620 Fax : 925-798-1622 Website: www.mcccampbell.com E-mail: main@mcccampbell.com

### QC SUMMARY REPORT FOR SW8015C

W.O. Sample Matrix: Soil

QC Matrix: Soil

WorkOrder: 0505047

EPA Method: SW8015C		Extraction: SW3550C			BatchID: 16103			Spiked Sample ID: 0505032-048A		
Analyte	Sample	Spiked	MS	MSD	MS-MSD	LCS	LCSD	LCS-LCSD	Acceptance Criteria (%)	
	mg/Kg	mg/Kg	% Rec.	% Rec.	% RPD	% Rec.	% Rec.	% RPD	MS / MSD	LCS / LCSD
TPH(d)	ND	20	105	105	0	102	106	4.29	70 - 130	70 - 130
%SS:	92	50	92	92	0	100	104	3.85	70 - 130	70 - 130
All target compounds in the Method Blank of this extraction batch were ND less than the method RL with the following exceptions:										
NONE										

#### BATCH 16103 SUMMARY

Sample ID	Date Sampled	Date Extracted	Date Analyzed	Sample ID	Date Sampled	Date Extracted	Date Analyzed
0505047-018A	5/03/05 1:08 PM	5/03/05	5/05/05 8:04 AM				

MS = Matrix Spike; MSD = Matrix Spike Duplicate; LCS = Laboratory Control Sample; LCSD = Laboratory Control Sample Duplicate; RPD = Relative Percent Deviation.

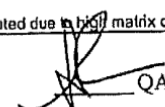
% Recovery =  $100 \cdot (\text{MS} - \text{Sample}) / (\text{Amount Spiked})$ ;  $\text{RPD} = 100 \cdot (\text{MS} - \text{MSD}) / ((\text{MS} + \text{MSD}) / 2)$ .

MS / MSD spike recoveries and / or %RPD may fall outside of laboratory acceptance criteria due to one or more of the following reasons: a) the sample is inhomogenous AND contains significant concentrations of analyte relative to the amount spiked, or b) the spiked sample's matrix interferes with the spike recovery.


N/A = not enough sample to perform matrix spike and matrix spike duplicate.

NR = analyte concentration in sample exceeds spike amount for soil matrix or exceeds 2x spike amount for water matrix or sample diluted due to high matrix or analyte content.

DHS Certification No. 1644


 QA/QC Officer

ACDEH0000123

 <b>McC Campbell Analytical, Inc.</b>	110 2nd Avenue Suite 307, Pacheco, CA 94553-5560 Telephone : 925-798-1620 Fax : 925-798-1622 Website: www.mcccampbell.com E-mail: main@mcccampbell.com

### QC SUMMARY REPORT FOR SW8260B

W.O. Sample Matrix: Soil

QC Matrix: Soil

WorkOrder: 0505047

EPA Method: SW8260B		Extraction: SW5030B			BatchID: 16117			Spiked Sample ID: 0505047-010A		
Analyte	Sample	Spiked	MS	MSD	MS-MSD	LCS	LCSD	LCS-LCSD	Acceptance Criteria (%)	
	mg/kg	mg/kg	% Rec.	% Rec.	% RPD	% Rec.	% Rec.	% RPD	MS / MSD	LCS / LCSD
Chlorobenzene	ND	0.050	119	119	0	114	114	0	70 - 130	70 - 130
1,2-Dichloroethane (1,2-DCA)	ND	0.050	118	120	2.13	113	111	1.56	70 - 130	70 - 130
1,1-Dichloroethene	ND	0.050	92.4	88.4	4.37	85.6	84.9	0.791	70 - 130	70 - 130
Trichloroethene	ND	0.050	90.5	90.7	0.223	87.2	86.7	0.672	70 - 130	70 - 130
%SS1:	81	0.050	102	101	1.39	100	99	1.52	70 - 130	70 - 130
%SS2:	100	0.050	97	97	0	99	99	0	70 - 130	70 - 130
%SS3:	90	0.050	118	119	1.33	109	115	5.26	70 - 130	70 - 130
All target compounds in the Method Blank of this extraction batch were ND less than the method RL with the following exceptions:										
NONE										

#### BATCH 16117 SUMMARY

Sample ID	Date Sampled	Date Extracted	Date Analyzed	Sample ID	Date Sampled	Date Extracted	Date Analyzed
0505047-001A	5/03/05 8:15 AM	5/03/05	5/05/05 4:57 AM	0505047-007A	5/03/05 9:45 AM	5/03/05	5/05/05 5:40 AM
0505047-010A	5/03/05 10:20 AM	5/03/05	5/05/05 6:22 AM	0505047-013A	5/03/05 11:25 AM	5/03/05	5/05/05 7:27 PM

MS = Matrix Spike; MSD = Matrix Spike Duplicate; LCS = Laboratory Control Sample; LCSD = Laboratory Control Sample Duplicate; RPD = Relative Percent Deviation.

$\% \text{ Recovery} = 100 * (\text{MS} - \text{Sample}) / (\text{Amount Spiked})$ ;  $\text{RPD} = 100 * (\text{MS} - \text{MSD}) / ((\text{MS} + \text{MSD}) / 2)$ .


MS / MSD spike recoveries and / or %RPD may fall outside of laboratory acceptance criteria due to one or more of the following reasons: a) the sample is inhomogenous AND contains significant concentrations of analyte relative to the amount spiked, or b) the spiked sample's matrix interferes with the spike recovery.

N/A = not enough sample to perform matrix spike and matrix spike duplicate.

NR = analyte concentration in sample exceeds spike amount for soil matrix or exceeds 2x spike amount for water matrix or sample diluted due to high matrix or analyte content.


Laboratory extraction solvents such as methylene chloride and freon 113 may occasionally appear in the method blank at low levels.

DHS Certification No. 1644

 QA/QC Officer

ACDEH0000124



 <b>McC Campbell Analytical, Inc.</b>	110 2nd Avenue South, #D7, Pacheco, CA 94553-5560
	Telephone : 925-798-1620 Fax : 925-798-1622 Website: www.mccampbell.com E-mail: main@mccampbell.com

### QC SUMMARY REPORT FOR SW8260B

W.O. Sample Matrix: Water

QC Matrix: Water

WorkOrder: 0505047

EPA Method: SW8260B		Extraction: SW5030B			BatchID: 16114			Spiked Sample ID: 0505049-001B		
Analyte	Sample	Spiked	MS	MSD	MS-MSD	LCS	LCSD	LCS-LCSD	Acceptance Criteria (%)	
	µg/L	µg/L	% Rec.	% Rec.	% RPD	% Rec.	% Rec.	% RPD	MS / MSD	LCS / LCSD
Chlorobenzene	ND	10	119	118	0.242	119	119	0	70 - 130	70 - 130
1,2-Dichloroethane (1,2-DCA)	ND	10	117	116	0.639	117	119	1.31	70 - 130	70 - 130
1,1-Dichloroethene	ND	10	87.4	86.8	0.706	88.1	90.2	2.31	70 - 130	70 - 130
Trichloroethene	ND	10	91.5	89.1	2.71	89.9	92.3	2.63	70 - 130	70 - 130
%SS1:	101	10	100	100	0	100	101	1.41	70 - 130	70 - 130
%SS2:	95	10	96	96	0	97	95	1.65	70 - 130	70 - 130
%SS3:	105	10	116	117	1.35	119	119	0	70 - 130	70 - 130
All target compounds in the Method Blank of this extraction batch were ND less than the method RL with the following exceptions:										
NONE										

#### BATCH 16114 SUMMARY

Sample ID	Date Sampled	Date Extracted	Date Analyzed	Sample ID	Date Sampled	Date Extracted	Date Analyzed
0505047-019A	5/03/05 9:30 AM	5/06/05	5/06/05 9:19 AM				

MS = Matrix Spike; MSD = Matrix Spike Duplicate; LCS = Laboratory Control Sample; LCSD = Laboratory Control Sample Duplicate; RPD = Relative Percent Deviation.

% Recovery =  $100 \cdot (\text{MS-Sample}) / (\text{Amount Spiked})$ ;  $\text{RPD} = 100 \cdot (\text{MS} - \text{MSD}) / ((\text{MS} + \text{MSD}) / 2)$ .


MS / MSD spike recoveries and / or %RPD may fall outside of laboratory acceptance criteria due to one or more of the following reasons: a) the sample is inhomogenous AND contains significant concentrations of analyte relative to the amount spiked, or b) the spiked sample's matrix interferes with the spike recovery.

N/A = not enough sample to perform matrix spike and matrix spike duplicate.

NR = analyte concentration in sample exceeds spike amount for soil matrix or exceeds 2x spike amount for water matrix or sample diluted due to high matrix or analyte content.

Laboratory extraction solvents such as methylene chloride and freon 113 may occasionally appear in the method blank at low levels.

DHS Certification No. 1644

 QA/QC Officer

ACDEH0000125





## McC Campbell Analytical, Inc.



110 Second Avenue South, #D7  
Pacheco, CA 94553-5560  
(925) 798-1620

## CHAIN-OF-CUSTODY RECORD

Page 1 of 1

WorkOrder: 0505047

ClientID: AEL

## Report to:

Robert Flory  
AEI Consultants  
2500 Camino Diablo, Ste. #200  
Walnut Creek, CA 94597

TEL: (925) 283-6000  
FAX: (925) 283-6121  
ProjectNo: #11065; Elkwood  
PO:

## Bill to:

Diano  
All Environmental, Inc.  
2500 Camino Diablo, Ste. #200  
Walnut Creek, CA 94597

Requested TAT: 5 days

Date Received: 05/03/2005

Date Printed: 05/03/2005

Sample ID	ClientSampleID	Matrix	Collection Date	Hold	Requested Tests (See legend below)														
					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
0505047-001	SB1-3.0	Soil	05/03/2005	<input type="checkbox"/>	A														
0505047-007	SB2-3.0	Soil	05/03/2005	<input type="checkbox"/>	A														
0505047-010	SB3-3.0	Soil	05/03/2005	<input type="checkbox"/>	A														
0505047-013	SB4-4	Soil	05/03/2005	<input type="checkbox"/>	A														
0505047-018	SB5-11.5	Soil	05/03/2005	<input type="checkbox"/>			A	A											
0505047-019	SB1-W	Water	05/03/2005	<input type="checkbox"/>		A													

## Test Legend:

1	8010BMS_S	2	8010BMS_W	3	G-MBTX_S	4	TPH(DMO)_S	5	
6		7		8		9		10	
11		12		13		14		15	

Prepared by: Rosa Venegas

## Comments:

NOTE: Samples are discarded 60 days after results are reported unless other arrangements are made. Hazardous samples will be returned to client or disposed of at client expense.

ACDEH0000128



## FACSIMILE TRANSMITTAL SHEET

**EFI**  
**111 Deerwood Road, Suite 195**  
**San Ramon, California 94583**  
**Phone: (925) 820-9580**  
**Fax: (925) 820-9587**

**To:** Leroy Griffin  
 Oakland City Fire Department  
 1605 Martin Luther King Jr. Way  
 Oakland, California 94612

**FROM:** Mark Williams

**DATE:**

**FAX NUMBER:** 510-238-6739

**TELEPHONE:**

**TELEPHONE:** 510-238-3927

**FAX NUMBER:**

**PAGES (INCLUDING COVER):**

**HARD COPY TO FOLLOW:** Yes ☐ No ☐

**SUBJECT:**

**CC:** Red Hanger Cleaners, 6235 College Avenue, Oakland, California (18)

**COMMENTS:**

*Find the letter Report*

Enclosed, please find the laboratory data sheets and map for the confirmation sample. A letter report detailing all the sampling efforts and analytical data will follow.

Sincerely,

Mark Williams *[Signature]*

*ISSUES NO FURTHER ACTION*

**CONFIDENTIALITY NOTICE:** This message is intended only for the use of the individual or entity to which it is addressed, and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the above address via the U.S. Postal Service. Thank you.

If transmission is not received in good order, please call 925-820-9580.

ACDEH0000129


**EFI Global**

Complex Issues • Solid Solutions

 111 Deerwood Road  
 Suite 195  
 San Ramon, CA 94583  
 Tel: 800-506-0844  
 Tel: 925-820-9580  
 Fax: 925-820-8587  
 www.efiglobal.com

June 28, 2005

 Leroy Griffin  
 Oakland City Fire Department  
 1605 Martin Luther King Jr. Way  
 Oakland, California 94612

 Re: **Confirmation Sample Results – Red Hanger Cleaners, 6235 College Avenue, Oakland, California**  
**EFI PN: 98360-00-051**

Dear Mr. Griffin:

EFI is pleased to submit this report documenting the findings of the confirmation sampling investigation conducted on June 28, 2005. On behalf of the Red Hanger Cleaners Site and at your request, EFI Global (EFI) collected one grab groundwater sample (SB-6) directly down gradient of the dry cleaning units at the Subject Property.

We hope that these findings will be in support of our previous "no further action" request for the Subject Property regarding the residual concentrations of tetrachloroethene (PCE) detected in the shallow soil and groundwater samples collected from the property in May 2005 by AEI Consultants. The Site location is shown on Figure 1, and the Site Layout is shown on Figure 2.

### **Field and Laboratory Methodology**

The following sections discuss activities that were conducted as part of the subsurface investigation conducted on June 28, 2005.

#### ***Pre-field Activities***

The purpose of the pre-field activities was to appropriately plan the work and to ensure that onsite personnel were prepared for potential safety hazards at the property. The pre-field activities included the following:

- EFI prepared a site specific Health and Safety Plan (HASP) for the work proposed in accordance with the requirements of the State of California General Industry Safety Order (GISO) 5192 and Title 29 Code of Federal Regulations, Section 1910.120 (29 CFR 1910.120). The HASP detailed the work to be performed, safety precautions, emergency response procedures, nearest hospital information, and onsite personnel responsible for managing emergency situations. Prior to starting work, a "tailgate" safety meeting including discussion of the safety hazards and precautions relevant to the particular job was held with

I:\Existing Projects\Valencia\Capitol\Amendment.doc

ACDEH0000130



Leroy Griffin  
June 28, 2005  
Page 2 of 3

all personnel working on the job. A copy of the HASP was kept onsite during field activities.

- The borehole locations were marked with temporary white marking paint. Underground Service Alert (USA) was notified at least 48 hours prior to performing drilling as required by law.
- In addition, EFI utilized California Utility Surveys (CU Surveys) to locate utility lines in the vicinity of the proposed borings prior to drilling.
- EFI obtained the appropriate soil boring permits (Permit No. W2005-0662) from the Alameda County Public Works Agency.

### Field Investigation

On June 28, 2005, Ecology Control Associates (C-57 Lic. #695970), under the supervision of EFI, advanced one (1) borehole (SB-6) at the subject property as depicted on Figure 2. The exterior borehole was installed using a truck-mounted Geoprobe. One grab water samples collected the borehole using a dedicated Teflon bailer.

The borehole was inspected for physical characteristics indicative of adverse impacts, such as unusual odors, colors/hues, and chemical sheens. The borehole was continuously cored to a depth of 20 feet bgs. A hand held photo-ionization detector (PID) was used to screen the soil. No VOCs were noted in the soil cores collected in the field. The soils consisted of brown silty clays to 8 feet bgs, clays from 8 to 12 feet bgs, and clayey silts from 12 to 20 feet bgs. Groundwater was encountered at a depth of approximately 20 feet bgs and stabilized at a static level of approximately 16 feet bgs. No odors were noted in the groundwater sample collected.

The groundwater samples were placed in HCL preserved 40-ml glass laboratory supplied VOAs, labeled, and placed into a cooler maintained at 4 degree Celsius or lower.

### Analytical Methodology

Samples collected during the investigation were analyzed using United States Environmental Protection Agency (USEPA)-approved methods:

- USEPA Method 8260 for volatile organic compounds (VOCs)

Laboratory analytical data sheets and chain of custody record are included in as an Attachment.

## **Findings**

From the field observations, both visually and field screening with the PID unit, no adverse odors or presence of PCE was noted. Results from the laboratory indicated that PCE was detected in the groundwater sample at a concentration of 15 ppb, and chloroform at a concentration of 0.83 ppb.

Leroy Griffin  
June 28, 2005  
Page 3 of 3

### Conclusions

The purpose of collecting the groundwater samples from SB-6 was to confirm the presence of PCE previously detected in a grab groundwater sample collected in SB-1 (48 ppb).

Based on the soil data previously collected it appears that the shallow soil contains low levels of PCE, but this compound is not present in the deeper unsaturated zone. Therefore, it is possible that the low concentration of PCE detected in the groundwater is not attributed to PCE in shallow soil at the Site.

The source(s) of the PCE detected in the groundwater below the Subject Property are still not known at this time; however based on the results of the groundwater samples collected at SB-1 and SB-6, the concentrations of PCE appear to be low and not of significant concern at this time.

### Conclusions

From the data and historical review, EFI does not recommend any further assessment of the PCE in the soil and groundwater at the Subject Property.

The implication of any further investigation may have a significant material affect on any future property transaction. EFI respectfully requests that the City of Oakland Fire Department review this additional data presented above in response to the previous request for "no further action".

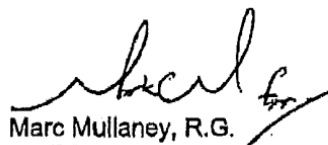
If you have any questions regarding this letter, please contact the undersigned at 925-820-9580.

Sincerely,

**EFI GLOBAL, INC.**



Mark B. Williams  
Senior Project Manager



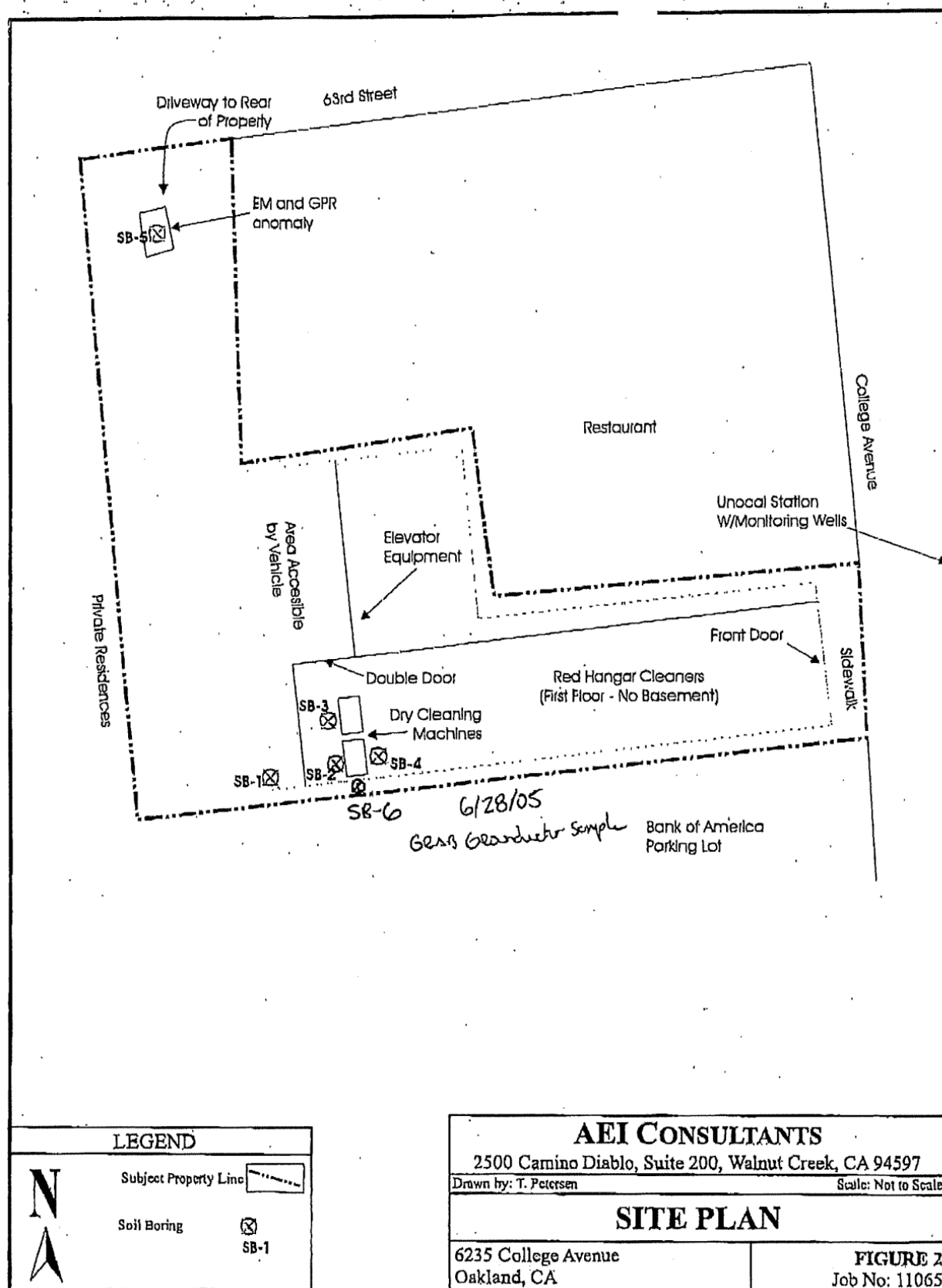
Marc Mullaney, R.G.  
Staff Scientist

Attachments: Figure 1 -  
Figure 2 -

Site Location (AEI)  
Site Layout and Sampling Locations (AEI)

**ATTACHMENT A**  
**FIGURE**

ACDEH0000133



ACDEH0000134

**ATTACHMENT B**  
**Analytical Data Sheets and Chain of Custody Record**

ACDEH0000135

Valliance Capital 98360-W-057

## Alameda County Public Works Agency - Water Resources Well Permit



399 Elmhurst Street  
Hayward, CA 94544-1395  
Telephone: (510)670-6633 Fax:(510)782-1939

Application Approved on: 06/21/2005 By Jamesy  
Permits Issued: W2005-0862

Permits Valid from 06/27/2005 to 06/27/2005

Application Id: 1119396205657  
Site Location: 6235 College Ave  
Project Start Date: 06/27/2005

City of Project Site: Oakland

Completion Date: 06/27/2005

Applicant: EFI Global - Mark Williams  
111 Deerwood Rd, San Ramon, CA 94588  
Property Owner: Valliance Capital  
1899 E. Roseville Pkwy, Roseville, CA 95661  
Client: \*\* same as Property Owner \*\*

Phone: 925-820-9580

Phone: --

Total Due: \$200.00  
Total Amount Paid: \$200.00  
Paid By: CHECK PAID IN FULL

## Works Requesting Permits:

Borehole(s) for Investigation-Contamination Study - 1 Boreholes  
Driller: ECA - Lic #: 695970 - Method: other

Work Total: \$200.00

## Specifications

Permit Number	Issued Dt	Expires Dt	# Boreholes	Hole Diam	Max Depth
W2005-0862	06/21/2005	09/25/2005	1	2.00 in.	20.00 ft

## Specific Work Permit Conditions

1. Backfill bore hole by tremie with cement grout or cement grout/sand mixture. Upper two-three feet replaced in kind or with compacted cuttings.

2. Boreholes shall not be left open for a period of more than 24 hours. All boreholes left open more than 24 hours will need approval from Alameda County Public Works Agency, Water Resources Section. All boreholes shall be backfilled according to permit destruction requirements and all concrete material and asphalt material shall be to Caltrans Spec or County/City Codes. No borehole(s) shall be left in a manner to act as a conduit at any time.

3. Permit is valid only for the purpose specified herein. No changes in construction procedures, as described on this permit application. Boreholes shall not be converted to monitoring wells, without a permit application process.

4. Applicant shall contact Johnson Tang for a inspection time at 510-670-6450 at least five (5) working days prior to starting, once the permit has been approved. Confirm the scheduled date(s) at least 24 hours prior to drilling.

ACDEH0000136



JUN 28 2005 3:47PM MCCAMPBELL ANALYTICAL

9257984612

p.1



MCCAMPBELL ANALYTICAL INC.

110 2nd Ave South, #D7, Pacheco, CA 94553-5560  
Telephone: 925-798-1620 Fax: 925-798-1622  
<http://www.mccampbell.com> E-mail: [main@mccampbell.com](mailto:main@mccampbell.com)

Date: 06/28/05

ATTN:

Mark Williams

Message:

Same day rush results for Valliance Cap

FROM:

SygniaNumber of pages faxed including this one: 5**CAUTION: CONFIDENTIAL**

THE DOCUMENT BEING TELECOPIED TO YOU MAY CONTAIN INFORMATION PROTECTED BY THE SENDER AND/OR CLIENT. It is intended only for the use of the person to whom it is addressed. If you are not the intended recipient or an authorized representative, then this is notice to you that dissemination, distribution or copying of this document is prohibited. If this was received in error, please call us at once and destroy the document.

ACDEH0000137

0506508

**RUSH**

<b>McCAMPBELL ANALYTICAL, INC.</b> 110 1 <sup>st</sup> AVENUE SOUTH, #D7 PALHECO, CA 94553-5500 Website: <a href="http://www.mccampbell.com">www.mccampbell.com</a> Email: <a href="mailto:main@mccampbell.com">main@mccampbell.com</a> Telephone: (925) 798-1678 Fax: (925) 798-1622				<b>CHAIN OF CUSTODY</b> TURN AROUND TIME <input checked="" type="checkbox"/> RUSH <input type="checkbox"/> 24 HR <input type="checkbox"/> 48 HR <input type="checkbox"/> 72 HR <input type="checkbox"/> 5 DAY EDT Required? Cost (Normal) No Write On (DW) No													
Report To: <u>Mark Williams</u> BDI To: <u>Sam</u> Company: <u>EFL Global</u> <u>1110222nd St Suite 185</u> <u>San Ramon, CA 94583</u> E-Mail: <u>Mark.Williams@eflglobal.com</u> Tele: <u>(925) 457-7384</u> Fax: <u>(925) 820-9580</u> Project #: _____ Project Name: <u>Vallente Cpp</u> Project Location: <u>Oakridge St</u> Sampler Signature: <u>[Signature]</u>				Analysis Request _____ Other _____ Comments _____ Filter Samples for Metals analysis: Yes / No													
SAMPLE ID (Field Point Name)	LOCATION	SAMPLING		# Containers	Type Containers	MATRIX								METHOD PRESERVED	STEX & TTX in Gas (GAS/STEX) STEX only (GFA 602/602G) TTX in Diesel (6015) Total Petroleum Oil & Grease (ASTM D4000) Total Petroleum Hydrocarbons (TPH) EPA 801/8010/8011 (Biomonitoring) EPA 408 / 8081 (CI Pesticides) EPA 408 / 8082 PCBs ONLY EPA 8140 / 8141 (Pesticides) EPA 8150 / 8151 (Aldic Herbicides) EPA 821 / 823 / 825 VAPOR ICDAS 8012 / 825 / 825 VAPOR PAHs / EPA 825 / 825 VAPOR CAMEL Metals (6010 / 6020) LIFT 5 Metals (6010 / 6020) Lead (6010 / 6010)	Other	Comments
		Date	Time			Water	Soil	Air	Sediment	Other	ICE	HCL	HNO <sub>3</sub>				
5B-6		6/28	8:20	4	Wb	X											
Relinquished By: <u>[Signature]</u>		Date: <u>6/28/05</u>	Time: <u>6:46</u>	Received By: <u>[Signature]</u>	ICE? <input checked="" type="checkbox"/> GOOD CONDITION HEAD SPACE ABSENT <input checked="" type="checkbox"/> DECONTAMINATED IN LAB <input checked="" type="checkbox"/> APPROPRIATE CONTAINERS <input checked="" type="checkbox"/> PRESERVED IN LAB <input checked="" type="checkbox"/> COMMENTS: <u>Results today?</u>												
Relinquished By: _____		Date: _____	Time: _____	Received By: _____	PRESERVATION: <input checked="" type="checkbox"/> VOAS <input checked="" type="checkbox"/> D&G <input checked="" type="checkbox"/> METALS <input checked="" type="checkbox"/> OTHER <input checked="" type="checkbox"/> pH<2												
Relinquished By: _____		Date: _____	Time: _____	Received By: _____													

Jun 28 2005 3:47PM MCCAMPBELL ANALYTICAL

9257984612

P.2

ACDEH0000138

**McC Campbell Analytical, Inc.**

110 Second Avenue South, RD7  
 Pacheco, CA 94551-5560  
 (925) 798-1620

**CHAIN-OF-CUSTODY RECORD**

Page 1 of 1

WorkOrder: 0506508

ClientID: EFI

**Report to:**

Mark Williams  
 EFI  
 111 Deerwood Rd, Suite 195  
 San Ramon, CA 94583

TEL:  
 FAX: 925-820-9587  
 ProjectNo: Vallance Cap  
 PO:

**Bill to:**

Accounts Payable  
 EFI  
 111 Deerwood Rd, Suite 195  
 San Ramon, CA 94583

Requested TAT: 1 day

Date Received: 06/28/2005

Date Printed: 06/28/2005

Sample ID	ClientSampleID	Matrix	Collection Date	Hold	Requested Tests (See legend below)														
					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
0508508-001	SB-6	Water	6/28/06 8:20:00 AM	<input type="checkbox"/>	A														

**Test Legend:**

1	8016BMS W	2		3		4		5	
6		7		8		9		10	
11		12		13		14		15	

Prepared by: Maria Venegas

Comments: Same Day Rush

NOTE: Samples are discarded 60 days after results are reported unless other arrangements are made. Hazardous samples will be returned to client or disposed of at client expense.

ACDEH0000139

Jun 28 2005 3:47PM

MCCAMPBELL ANALYTICAL


5257984612

P.3


Jun 28 2005 3:47PM McCAMPBELL ANALYTICAL

9257784612

p.4

 <b>McC Campbell Analytical, Inc.</b>		110 2nd Avenue South, #D7, Pacheco, CA 94553-3560 Telephone: 925-798-1620 Fax: 925-798-1622 Website: www.mccampbell.com E-mail: info@mccampbell.com	
<b>BFI</b>  111 Deerwood Rd, Suite 195  San Ramon, CA 94583	Client Project ID: Valliance Cap		Date Sampled: 06/28/05
			Date Received: 06/28/05
	Client Contact: Mark Williams		Date Extracted: 06/28/05
	Client P.O.:		Date Analyzed: 06/28/05
<b>Halogenated Volatile Organics by P&amp;T and GC-MS (8010 Basic Target List)*</b> Extraction Method: SW8030B Analytical Method: SW8260B Work Order: 0506508			
Lab ID	0506508-001A		Reporting Limit for DF=1
Client ID	98-6		
Matrix	W		
DF	1		
<b>Compound</b>	<b>Concentration</b>	<b>µg/kg</b>	<b>µg/L</b>
Bromodichloromethane	ND	NA	0.5
Bromoform	ND	NA	0.5
Bromomethane	ND	NA	0.5
Carbon Tetrachloride	ND	NA	0.5
Chlorobenzene	ND	NA	0.5
Chloroethane	ND	NA	0.5
2-Chloroethyl Vinyl Ether	ND	NA	1.0
Chloroform	0.83	NA	0.5
Chloromethane	ND	NA	0.5
Dibromochloromethane	ND	NA	0.5
1,2-Dichlorobenzene	ND	NA	0.5
1,3-Dichlorobenzene	ND	NA	0.5
1,4-Dichlorobenzene	ND	NA	0.5
Dichlorodifluoromethane	ND	NA	0.5
1,1-Dichloroethene	ND	NA	0.5
1,2-Dichloroethane (1,2-DCA)	ND	NA	0.5
1,1-Dichloroethene	ND	NA	0.5
cis-1,2-Dichloroethene	ND	NA	0.5
trans-1,2-Dichloroethene	ND	NA	0.5
1,2-Dichloropropane	ND	NA	0.5
cis-1,3-Dichloropropene	ND	NA	0.5
trans-1,3-Dichloropropene	ND	NA	0.5
Methylene chloride	ND	NA	0.5
1,1,2,2-Tetrachloroethane	ND	NA	0.5
Tetrachloroethene	15	NA	0.5
1,1,1-Trichloroethane	ND	NA	0.5
1,1,2-Trichloroethane	ND	NA	0.5
Trichloroethene	ND	NA	0.5
Trichlorofluoromethane	ND	NA	0.5
Vinyl Chloride	ND	NA	0.5
<b>Surrogate Recoveries (%)</b>			
%SS1:	101		
%SS2:	98		
%SS3:	95		
Comments	i		
* water and vapor samples are reported in µg/L, soil/sludge/solid samples in mg/kg, product/oil/non-aqueous liquid samples and all TCLP & SPLP extracts are reported in mg/L, wipe samples in µg/wipe. ND means not detected above the reporting limit; N/A means analyte not applicable to this analysis. # surrogate diluted out of range or surrogate coelutes with another peak. h) lighter than water immiscible solvent/product is present; i) liquid sample that contains greater than ~1 vol. % sediment; j) sample diluted due to high organic content/matrix interference; k) reporting limit near, but not identical to our standard reporting limit due to variable Eoscore sample weight; m) reporting limit raised due to insufficient sample amount; n) results are reported on a dry weight basis; p) see attached narrative.			

DHS Certification No. 1644


 Angela Rydelius, Lab Manager

ACDEH0000140

7527

ACDEH0000141