

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

DEPARTMENT OF ENVIRONMENTAL HEALTH LOCAL OVERSIGHT PROGRAM (LOP) For Hazardous Materials Releases 1131 Harbor Bay Parkway Alameda, CA 94502-6577

CERTIFIED MAIL.



7011 3500 0003 1934 8917



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Labatt Ronald L PO Box 462 Kamiah, ID 83536

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ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY COLLEEN CHAWLA, Director



DEPARTMENT OF ENVIRONMENTAL HEALTH

OFFICE OF THE DIRECTOR

1131 HARBOR BAY PARKWAY

ALAMEDA, CA 94502

Certified Mail #: 7011 3500 0003 1934 8917

September 11, 2018

NOTICE OF RESPONSIBILITY

Site Name & Address

610 Market St 610 Market St Oakland, CA 94607

Responsible Party:

Labatt Ronald L PO BOX 462 Kamiah, ID 83536 Local ID: RO0003318
Related ID: NA
RWQCB ID: NA

Global ID: T10000011794

Date First Reported: 12/17/2015

Substance:

 8006619-Gasoline-Automotive (motor gasoline and additives), leaded & unleaded,

Funding for Oversight: LOPs LOP State Fund Multiple RPs? Yes

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified **Labatt Ronald L** as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency, within 20 calendar days of receipt of this notice that identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5752.

Pursuant to section 25296.10(c)(6) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact this office for further information about the designation process.

Please contact your caseworker Jonathan Sanders at this office at 510-567-6791 if you have any questions regarding your site.

Date:

Sbroader 09-142018

Action: Add

Reason: New

RONALD BROWDER, Director Contract Project Director