

ALAMEDA COUNTY **HEALTH CARE SERVICES AGENCY**

DEPARTMENT OF ENVIRONMENTAL HEALTH 1131 Harbor Bay Parkway, Suite 250 Alameda, CA 94502-6577



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MAILED FROM ZIP CODE 94502

GRIFFIN CAPITAL (SHELLMOUND)

INVESTORS LLC. ET AL

ATTN: NIXIE

0008/27/15

6601 - 6 **EMERY**

RETURN TO SENDER NOT DELIVERABLE AS ADDRESSED UNABLE TO FORWARD

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ALAMEDA COUNTY **HEALTH CARE SERVICES**

AGENCY

ALEX BRISCOE, Agency Director



ENVIRONMENTAL HEALTH DEPARTMENT OFFICE OF THE DIRECTOR 1131 HARBOR BAY PARKWAY ALAMEDA, CA 94502-6577 (510) 567-6700 FAX (510) 337-9335

Certified Mail #: 7009 2820 0001 4359 8761

August 4, 2015

NOTICE OF RESPONSIBILITY

Site Name & Address:

MUSSALLEM / SYBASE 6601 BAY (SHELLMOUND) STREET **EMERYVILLE, CA 94608**

Local ID:

RO0000042

Related ID: **RWQCB ID:** NA NA

Global ID:

T0600100825

Responsible Party:

GRIFFIN CAPITAL (SHELLMOUND) INVESTORS LLC. ET AL ATTEN: JULIE TREINEN 6601 - 6603 BAY STREET EMERYVILLE, CA 94608

Date First Reported:

10/10/1989

Substance:

- 8006619 Gasoline-Automotive (motor gasoline
- and additives), leaded & unleaded 12034 Diesel fuel oil & additives (Nos. 1-D,

2-D, 2-4)

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 GRIFFEN CAPITAL (SHELLMOUND) INVESTORS LLC, ET AL 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 MARK DETTERMAN at this office at (510) 567-6876 if you have questions regarding your site.

RONALD BROWDER, Acting Director

Contract Project Director

Action:

ADD Reason:

ADD

Attachment A: Responsible Parties Data Sheet

cc: Cindy Davis, SWRCB (email: cindy.davis@waterboards.ca.gov) | Dilan Roe (email: dilan.roe@acgov.org), File

Date: 090415