**AGENCY** 

DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

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

June 9, 1999

Mr. Ignacio Dayrit City of Emeryville Redevelopment Agency 2200 Powell Street, 12<sup>th</sup> Floor Emeryville, California 94608

RE: Emeryville Old Town Hall (STID # 3638)

1333 Park Avenue, Emeryville, California 94608

## LANDOWNER NOTIFICATION AND PARTICIPATION REQUIREMENTS

Dear Mr. Dayrit:

This letter is to inform you of new legislative requirements pertaining to cleanup and closure of sites where an unauthorized release of hazardous substance, including petroleum, has occurred from an underground storage tank (UST). Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code requires the primary or active responsible party to notify all current record owners of fee title to the site of: 1) a site cleanup proposal, 2) a site closure proposal, 3) a local agency intention to make a determination that no further action is required, and 4) a local agency intention to issue a closure letter. Section 25297.15(b) requires the local agency to take all reasonable steps to accommodate responsible landowners' participation in the cleanup or site closure process and to consider their input and recommendations.

For purposes of implementing these sections, you have been identified as the primary or active responsible party. Please provide to this agency, within twenty (20) calendar days of receipt of this notice, a complete mailing list of all current record owners of fee title to the site. You may use the enclosed "list of landowners" form (sample letter 2) as a template to comply with this requirement. If the list of current record owners of fee title to the site changes, you must notify the local agency of the change within 20 calendar days from when you are notified of the change.

If you are the sole landowner, please indicate that on the landowner list form. The following notice requirements do not apply to responsible parties who are the sole landowner for the site.

LANDOWNER NOTIFICATION

Re: 1333 Park Avenue, Emeryville

June 9, 1999 Page 2 of 2

In accordance with Section 25297.15(a) of Ch. 6.7 of the Health & Safety Code, you must certify to the local agency that all current record owners of fee title to the site have been informed of the proposed action before the local agency may do any of the following:

- 1) consider a cleanup proposal (corrective action plan)
- 2) consider a site closure proposal
- 3) make a determination that no further action is required
- 4) issue a closure letter

You may use the enclosed "notice of proposed action" form (sample letter 3) as a template to comply with this requirement. Before approving a cleanup proposal or site closure proposal, determining that no further action is required, or issuing a closure letter, the local agency will take all reasonable steps necessary to accommodate responsible landowner participation in the cleanup and site closure process and will consider all input and recommendations from any responsible landowner.

Please call me at (510) 567-6780 should you have any questions about the content of this letter.

Sincerely,

Susan L. Hugo

Hazardous Materials Specialist

Drawn J. Hugo

Attachments

cc:

Chuck Headlee, RWQCB

SH / files

DAVID J KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

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SAMPLE LETTER 3: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY
Name of local agency Street address City
SUBJECT: NOTICE OF PROPOSED ACTION SUBMITTED TO LOCAL AGENCY FOR (Site Name and Address)
In accordance with section 25297,15(a) of Chapter 6.7 of the Health & Safety Code, I, ( <u>name of primary responsible party</u> ), certify that I have notified all responsible landowners of the enclosed proposed action. Check space for applicable proposed action(s):
cleanup proposal (corrective action plan)
site closure proposal
local agency intention to make a determination that no further action is required
local agency intention to issue a closure letter
Sincerely,
Signature of primary responsible party
Name of primary responsible party

cc: Names and addresses of all record fee title owners

#### ALAMEDA COUNTY HAZARDOUS MATERIALS DIVISION

07/23/98

#### UNDERGROUND STORAGE TANK CLEANUP SITE

AGENCY#: 10000 SOURCE OF FUNDS: F-FEDERAL INSPECTOR: SH

StID: 3638 SUBSTANCE: 8006619 -Gasoline

SITE NAME: City of Emeryville DATE REPORTED : 01/02/92

ADDRESS : 1333 Park Ave DATE CONFIRMED: 01/01/92

CITY/ZIP : Emeryville, CA 94608 MULTIPLE RP's : N

CASE TYPE: O CONTRACT STATUS: 4 PRIOR: 2B5 EMERGENCY RESPONSE:

RP SEARCH : S DATE END: 01/30/92

PRELIM ASSESSMENT: DATE BEGIN: DATE END:
REMEDIAL INVESTIG: DATE BEGIN: DATE END:
REMEDIAL ACTION: DATE BEGIN: DATE END:
POST REMED MONITOR: DATE BEGIN: DATE END:

TYPE ENFORCEMENT ACTION TAKEN: 1 DATE OF ENFORC. ACTION: 01/30/92

UNDERGROUND STORAGE TANK CLEANUP SITE - SCREEN #2

LUFT FIELD MANUAL CONSIDERATION: 3 CASE CLOSED: on:

DT EXC START: 01/02/92 REMEDIAL ACTIONS TAKEN: ED

RP #1: CONTACT: Juan Arreguin RP COST:

RP COMPANY NAME: Emeryville Redevelopment Agenc Ph:

ADDRESS: 2200 Powell

CITY/STATE: Emeryville CA 94608

 $\triangle$ GOMENT:

# ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY



DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

DEPARTMENT OF ENVIRONMENTAL HEALTH
State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
80 Swan Way, Rm 200
Oakland, CA 94621

(510) 271-4530

September 28, 1992 STID # 3638

Mr. Juan Arreguin City of Emeryville 2200 Powell Street, 12th Floor Emeryville, California 94608

RE: City of Emeryville - 1333 Park Avenue, Emeryville CA 94608

Dear Mr. Arrequin:

The Alameda County Department of Environmental Health, Hazardous Materials Division has recently reviewed the files concerning the removal of a 2000 gallon underground gasoline storage tank at the referenced site. This office is also in receipt and has completed its review of the "Second Quarter, 1992 Report", prepared by Tank Protect Engineering, submitted under City of Emeryville's cover letter dated August 5, 1992.

Based on this review, this department regret to deny your proposal to close the project at this time because of the following issues:

- \* Soil sample (VSD-N) collected after limited overexcavation in February 3, 1992 on the north sidewall of the former pump dispenser excavation still showed considerable levels of contaminations. Total petroleum hydrocarbon as gasoline (190 ppm), benzene (0.320 ppm), toluene (5.2 ppm), ethylbenzene (2.7ppm), xylenes (31ppm) were detected. Excavation of this contaminated soil left on site is not feasible due to the impact it may create on the integrity of the nearby building.
- \* At this time, only two quarters of monitoring event have been performed at the site. Although free product was not detected during the past two monitoring events, groundwater monitoring wells must be sampled on a quarterly basis for two more quarters and analyzed for target compounds. After four quarters of non detectable levels have been achieved, the frequency of sampling events will be evaluated and/or a recommendation for signoff/case closure by RWQCB will be determined.
- \* Groundwater flow direction at the site has been variable within a range of 118 degrees for the last two monitoring events. Groundwater elevation readings must be performed every monitoring events until the site can be recommended to RWQCB for signoff/case closure.

Mr. Juan Arreguin

RE: 1333 Park Avenue, Emeryville 94608

September 28, 1992

Page 2 of 2

Until cleanup is complete, you will need to submit reports to this office and to RWQCB every three months (or at a more frequent interval, if specified at any time by either agency).

All reports and proposals must be submitted under seal of a California Registered Geologist or Registered Civil Engineer with a Statement of qualifications for each lead professionals involved with the project. Copies of reports must also be submitted to:

Rich Hiett RWQCB, San Francisco Bay Region 2101 Webster Street, Fourth Floor Oakland, California 94612

Because we are overseeing this site under the designated authority of the Regional Water Quality Control Board, this letter constitutes a formal requests for technical reports pursuant to California Water Code Section 13267 (b). Any extensions of stated deadlines or changes in the workplan must be confirmed in writing and approved by this agency or RWQCB.

Please contact me at (510) 271-4530 if you have any questions concerning this letter.

Sincerely,

Susan L. Hugo

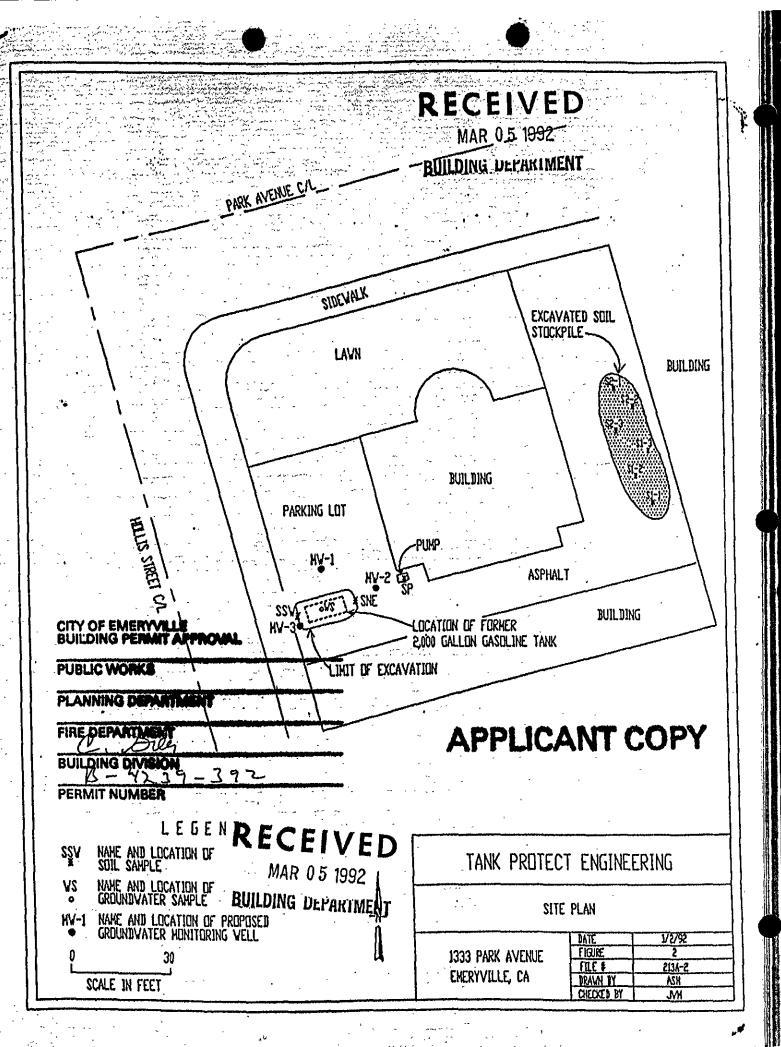
Susan & Hugo

Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Asst. Agency Director, Environmental Health Rich Hiett, San Francisco Bay RWQCB
Edgar B. Howell, Chief, Hazardous Materials Division - files John Mrakovich, Tank Protect Engineering - 2821 Whipple Road Union City, California 94587



	INSPECTION SERVICES DEPT.	3	<b>a</b> n ·		, <u>, , , , , , , , , , , , , , , , , , </u>
20	O POWELL STREET, 12TH FLOOR EMERYVILLE, CA 94608	五		Formit Number	12
	(415) 596-4310	WRITE			
		3 0	Application Received	in o Si	14.
,	APPLICATION AND PERMIT	2	Permit laying		<del>~</del>
٠.	THIS APPLICATION IS YOUR PERMIT WHEN PROPERLY FILLED OUT, SIGNED, VALIDATED & FEES PAID.	43		igned A S	Grading:
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e) Ta	(MA)		Commercial Industrial	Repair	☐ Fill ☐ Drainage ☐ Other
ą.	Approximate of Emographic Street Mark -4310	4	Industrial Public Building Accessory Other	☐ Other	□ Omer
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7	New Yar K Oristict Engineering		` 1 .1	44 :	oundwate
(T	ADDRESS O PHONE	1	157911	3 30	III
Ċ	GIT		monitori	ng we	
X.	1 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	1	•		
þ	In full force and effect	4			<u> </u>
Ř	WE ALSO 575837 A CITY BUSINESS		New Building Floor Area (Sq. Ft)		
ş	MINTENNE Project (-minering		1# 2nd	J3rd	Total
Q X	State of the state	熮	Garage	rport# Bedreoms.	
ķ	SCHALLER CA GALLETT AND VOX		Front Re	orleft	i Right
64	Thereby offirm 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,		Occupancy Group and Divi	kion .	Туре
Ş,	ofter, improve, demolish, or repoir any structure, prior to its assumes, also requires the applicant	R)	(Per UBC Toble SA)	_	(Per UBC Table 17A)
	Contractor's License Low Chapter 9 (commencing with Sec. 7000) or Division 3 of the alleged exemption.			A-	
4			Valuation of Proposed Work \$ (Include all labor and materials,	all lighting, heating, ventilation,	water supply, plumbing, electrical, fire
4.4	benoity of not more than \$500; or my employees with wages as their sole compensation, will be a ware 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 sole (Sec. 7044, Suriess and do the work, and the structure is not intended or offered for sole (Sec. 7044).		sprinklers, elevator equipment H	nerein and thereon.)	
ğ	Professions Code: The Contractor's Liceuse 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 improvements are not intended or offered for sale. If, however, the building or improvements.	1	THIS PERMIT SHALL COVE	R:	
Ş	ment is sold within one year of completion, the owner-builder will have the purchase of proving		☐ Building	Plon Check	☐ Electrical ☐ Insulation
Į	L as owner of the property, are exempt from the sale requirements or the court over will be		☐ Plumbing !	C Mechanical C Sign	☐ Pool/Spa
Ō	performed prior to sole, (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).		□ S.M.I.R.	[] Grading	Other
ř	is as owner or the property, an executively constructed like the class low does not		<u> 00</u>	NOT WRITE BELOW TH	IS LINE
۲	apply to an owner of property who buses or improves instruction who controlled the who controlled licensed pursuant to the Controlled's License Law).		N/n	· 1/	A
Ä	☐ I am exempt under Sec, B&P.C. for this reason	1	carring Aforoval-Doje	Fire Dept Approv	Date
8	Signature Date		ealth Dept. Approved-Date	5/5	192
Ě	I hereby affirm that I have a certificate of consent to self-beure, or a certificate of Workers' Compensation Insurance,	٦,	pecial		
	or a certified copy thereof [Sec 3800, Lab C) Policy Company	1	onditions:		
B	Certified copy is hereby furnished. Certified copy is filed with the city building inspection department.	\	talance Date	Use Permit Do	<u> </u>
1		<b> </b>	<del></del>	PERMIT FEI	3
A STATE OF THE STA	(This section need per be completed if the permit is for one hundred dollars (\$100) or less)		Building	MA	<u>. </u>
Š	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'	1	Plan Check		
B	Compensation Laws of California.  Date		Filing	45	,00
Ĺ			Electrical		·
1	NOTICE TO APPLICANT: If, offer making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Lobor Code, you must forthwith comply with such		Plumbing	·	·/
	provisions or this permit shall be deemed revoked.  The provisions of this permit shall be deemed revoked.  The provisions of this permit shall be deemed revoked.	_	Mechanical		<del>./</del>
Ú	I hereby affirm that there is a construction lending opency for the performance of the work for which this permit is issued (Sec. 3097, Chr. C.). (If no lender indicate "None".)  LENDERS		Insulation		<del>/</del>
C	Z NAME LENDERS ADDRESS		Fire .	<del>/</del>	<del>'</del>
ľ	I CERTIFY THAT THAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION GIVEN		Traffic	<del>-,-/-</del>	<del>                                     </del>
	LAWS RELATING TO BUILDING CONSTRUCTION AND I MAKE THIS STATEMENT OF THE CITY TO ENTER UPON	i	School	<del>-///-</del>	A—
1	THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSE TRAINED WITHIN 180 DAYS OR IF WORK IS NOT STARTED WITHIN 180 DAYS OR IF WORK IS NOT STARTED WITHIN 180 DAYS OR IF WORK IS NOT STARTED WITHIN 180 DAYS OR INCOME.		S.M.I.R-SB1374		
ľ	STRUCTION UNTIL THE WORK IS INSPECTED AND THE INSPECTION IS RECORDED ON THE FIELD CARD ISSUED FOR THIS PERMIT. ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS		Grading	<del>-/-</del>	<del></del>
	57 IN ADVANCE OF THIS INSPECTION. 11 I handle come to some indemnity and keep harmless the City of Emergville, and its officers	٠ I	Annexation Sewer Connection		
-{	breiby ognes to save, incoming on seep journess and expenses which may occur employees and ogents against all liabilities, judgments, costs and expenses which may occur ognized the City in consequence of the granting of this permit or from the use or occupancy of only 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.		Community Development	<u></u>	
-	comply with the conditions under which this perror is granted.		Growth Impact Fee	/	
F				,	



white -env.health yellow -facillty pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

# **Hazardous Materials Inspection Form**

11,111

•			mSite 2 (2 Site CL 1.1 7.4 Today's
			Site # 3638 Name City of Energyille Date 2/3 92
II.A	BUSINESS PLANS (Title 19)1, immediate Reporting	2703	Site Address 1333 Gark ave
	2, Bus. Plan Stds. 3, RR Can > 30 days	25503(b) 25503,7	
	4. inventory information 5, inventory Complete 6. Emergency Response	25504(a) 2730 25504(b)	City emergled be zip 94 60% Phone
	7. Training 8. Deficiency	25504(c) 25505(a)	MAX AMT stored > 500 lbs. 55 gal., 200 cft.?
	9. Modification	25505(b)	Inspection Categories:
II.B	ACUTELY HAZ, MATLS		I. Haz. Mat/Waste GENERATOR/TRANSPORTER  II. Business Plans, Acute Hazardous Materials
	10, Registration form Filed 11, Form Complete	25533(a) 25533(b)	VIII. Underground Tanks LOP- Sittle Part - Contractor
	12, RMPP Contents 13, implement 5ch, Regid? (Y/		on side - Juan unequen
	14, OffSite Conseq. Assess, 15, Probable Risk Assessment 16, Persons Responsible	25524(c) 25534(d) 25534(g)	* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)
	17, Certification 18, Exemption Request? (Y/N)	25534(f) 25536(b)	
	19, Trade Secret Requested?	25538	Comments:
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g Guju	Daily inventory     Annual tank testing		gasoline was noted by miself. Ineleted
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	9) Other		
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	Contact:	, , ,	B. O confirmation
	Title:	/	Inspector: With Char
	Signature:	Sugar.	C. Zinegece Signature:

Site name:  Cuty of Energy Plant Case  Site name:  Cuty of Energy Plant Case  City Energy Plant Case  STID # (if any)  Depret remaining \$	FROM: Brum Oliver
DepRef Project # 6/2/68 STID #(if any)  Number of Tanks: removed? Y N Date of removal 1/2/92  Samples received? Y N Contamination: Y Types: Avgas Jet leaded unleaded Diesel fuel oil waste oil kerosene solvents  Monitoring wells on site N Monitoring schedule? Y N  LUFT category 1 2 3 * H S C A R W G O  Briefly describe the following:  Preliminary Assessment foil, & Contomination  Remedial Action multiplication monitoring  Enforcement Action Monitoring  Enforcement Action Monitoring  Enforcement Action Monitoring	SUBJ: Transfer of Elligible Oversight Case
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Number of Tanks: removed? (Y) N Date of removal 1/2/92  Samples received? (Y) N Contamination: STA, TPHL. S. G.W  Petroleum (Y) N Types: Avgas Jet leaded unleaded Diesel fuel oil waste oil kerosene solvents  Monitoring wells on site N Monitoring schedule? Y N  LUFT category 1 2 3 * H S C A R W G O  Briefly describe the following:  Preliminary Assessment foil, G.W. Contamination  Remedial Action multiplication monitoring  Enforcement Action Monitoring  Enforcement Action Monitoring  Enforcement Action Monitoring	
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Post Remedial Action Monitoring  Enforcement Action	
Enforcement Action mone. They are co-operative	Remedial Action over excession montrong wells Construction not y
<b>V</b>	
upon receipt of addendum to workplan overexpensation	Enforcement Action mone . They are Co-oppushive
see my 1/23/92 letter to the RP	upon receipt of addendum to workplan overexpandion and construction of Monitoring welks is to take place

1/23/92 Local Oversight Program

DATE:

TO

	UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONT.  EMERGENCY  YES X NO  REPORT BEEN FILED?  YES X NO  REPORT DATE  CASE #  CASE #						
EME	RGENCY HAS STATE OFFICE OF EMERGENCY SERVICES	FOR LOCAL AGENCY USE ONLY	$\mathcal{O}$	/) +			
	YES X NO REPORT BEEN FILED? YES X NO	THEREBY CERTIFY THAT I HAVE DISTRIBUTE DISTRIBUTE DISTRIBUTION SHOWN ON THE INSTRUCTION	1222 Par	V AUP.			
REP	ORT DATE CASE #	— VISITIBUTION SHOWN ON THE INSTRUCTION	1770 1001				
0	1111 0 6 0 9 4 2 4	SIGNED	أنديس	1 0			
	NAME OF INDIVIDUAL FILING REPORT PHO	NE SIGNATURE	Emoryvil	allino			
à	Narc Zomorodi (5°	10) 429-8088 Mari	U	14600			
REPORTED	REPRESENTING OWNER/OPERATOR REGIONAL BOARD	Tank Protect Engineeri:	are mit tarent tracen	Calif.			
8	LOCAL AGENCY OTHER	Tree to a manage of a series of a	ASS AND ASSESSED SECTIONS	- Constant			
æ	ADDRESS 2821 Whipple Road	Union City	CA	94567			
	NAME STATET	CONTACT PERSON	STATE	ŹIP			
E L	City of Emeryville UNKNOWN	Trans Arrestories	510	96-4333			
RESPONSIBLE PARTY	ADDRESS			1			
HES.	2200 Powell Street	Theryville	CA CA	94608			
Ţ	STREET FACILITY NAME (IF APPLICABLE)	OPERATOR	STATE	ZIP			
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LOCATION	ADDRESS		······································	, , ,			
ğ	1333 Park Avenuo	_ maryville	Alameda	פול			
SIL	CROSS STREET		•				
			·				
2 8	LOCAL AGENCY Alanxada County Health Care Services Age	contact person Cliva	PHONE	271-4320			
EMENTING JENCIES	REGIONAL BOARD		· ( )				
F &	CRECCE-San Francisco Ray Region		PHONE	, , ,			
=			OLIANTITYLO	ST (GALLONS)			
Ž &	petroleum hydrocarbons-see below	*	, ADARTITE	UNKNOWN			
SUBSTANCES INVOLVED	(2)			· Constant			
8 2				UNKNOWN			
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ABA	DATE DISCHARGE BEGAN	METHOD USED TO STOP DISCHARGE (CHEC	` <b>,</b>				
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DISCOVER	HAS DISCHARGE BEEN STOPPED ?		IK & FILL IN PLACE	HANGE PROCEDURE			
}	YES NO IF YES, DATE M NO D D V	REPLACE TANK OTHER					
SOURCE	SOURCE OF DISCHARGE CAUSE!	OVERFILL RUPTURE/FAILUI	RE SPILL				
25	PIPING LEAK OTHER	CORROSION UNKNOWN	OTHER				
				7, 7			
CHECK ONE ONLY  SEL TO UNDETERMINED SOIL ONLY GROUNDWATER DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN A							
<u> </u>	CHECK ONE ONLY						
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STA	LEAK BEING CONFIRMED PRELIMINARY SITE ASSESSME	, , ,	T CLEANÚP MONITORING	N PROGRESS			
<u> </u>	T NEWEDIATION POAR	PLETED OR UNNECESSARY) CLEA	ANUP UNDERWAY				
ر ا	CHECK APPROPRIATE ACTION(S)  (SEE BACK FOR DETAILS)  EXCAVATE & DISPOSE (I	ED) REMOVE FREE PRODUCT (FP)	ENHANCED E	IO DEGRADATION (IT)			
ED S	CAP SITE (CD) EXCAVATE & TREAT (ET)	` <b></b>	R (GT) REPLACE SU	PPLY (RŞ)			
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2	One 2,000-gallon, single wall, steel,	mloaded pasoline, under	around storag				
COMMENTS	tank was rosoved.			, <u>,                                  </u>			
8		4					

#### INSTRUCTIONS

#### EMERGENCY

Indicate whether emergency response personnel and equipment were involved at any time. If so, a Hazardous Material Incident Report should be filed with the State Office of Emergency Services (OES) at 2800 Meadowview Road, Sacramento, CA 95832. Copies of the OES report form may be obtained at your local underground storage tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

#### LOCAL AGENCY ONLY

To avoid duplicate notification pursuant to Health and Safety code Section 25180.5, a government employee should sign and date the form in this block. A signature here <u>does</u> not mean that the leak has been determined to pose a significant threat to human health or safety, only that notification procedures have been followed if required.

#### REPORTED BY

Enter your name, telephone number, and address. Indicate which party you represent and provide company or agency name.

#### RESPONSIBLE PARTY

Enter name, telephone number, contact person, and address of the party responsible for the leak. The responsible party would normally be the tank owner.

#### SITE LOCATION

Enter information regarding the tank facility. At a minimum, you must provide the facility name and full address.

#### IMPLEMENTING AGENCIES

Enter names of the local agency and Regional Water Quality Control Board involved.

#### SUBSTANCES INVOLVED

Enter the name and quantity lost of the hazardous substance involved Room is provided for information on two substances if appropriate. If more than two substances leaked, list the two of most concern for cleanup.

#### DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the leak.

#### SOURCE/CAUSE

Indicate source(s) of leak. Check box(es) indicating cause of leak.

#### CASE TYPE

Indicate the case type category for this leak. Check one box only. Case type is based on the most sensitive resource affected. For example, if both soil and ground water have been affected, case type will be "Ground Water". Indicate "Drinking Water" only if one or more municipal or domestic water wells have actually been affected. A "Ground Water" designation does not imply that the affected water cannot be, or is not, used for drinking water, but only that water wells have not yet been affected. It is understood that case type may change upon further investigation.

#### CURRENT STATUS

Indicate the category which best describes the current status of the case. Check one box only. The response should be relative to the case type. For example, if case type is "Ground Water", then "Current Status" should refer to the status of the ground water investigation or cleanup, as opposed to that of soil. Descriptions of options follow:

No Action Taken - No action has been taken by responsible party beyond initial report of leak.

<u>Leak Being Confirmed</u> - Leak suspected at site, but has not been confirmed. <u>Preliminary Site Assessment Workplan Submitted</u> - workplan/proposal requested of/submitted by responsible party to determine whether ground water has been, or will be, impacted as a result of the release.

<u>Preliminary Site Assessment Underway</u> - implementation of workplan.

<u>Pollution Characterization</u> - responsible party is in the process of fully defining the extent of contamination in soil and ground water and assessing impacts on surface and/or ground water.

Remediation Plan - remediation plan submitted evaluating long term remediation options. Proposal and implementation schedule for appropriate remediation options also submitted.

Cleanup Underway - implementation of remediation plan.

Post Cleanup Monitoring in Progress - periodic ground water or other monitoring at site, as necessary, to verify and/or evaluate effectiveness of remedial activities.

<u>Case Closed</u> - regional board and local agency in concurrence that no further work is necessary at the site.

IMPORTANT: THE INFORMATION PROVIDED ON THIS FORM IS INTENDED FOR GENERAL STATISTICAL PURPOSES ONLY AND IS NOT TO BE CONSTRUED AS REPRESENTING THE OFFICIAL POSITION OF ANY GOVERNMENTAL AGENCY

#### REMEDIAL ACTION

Indicate which action have been used to cleanup or remediate the leak.

Descriptions of options follow:

<u>Cap Site</u> - install horizontal impermeable layer to reduce rainfall infiltration.

Containment Barrier - install vertical dike to block horizontal movement of contaminant.

Excavate and Dispose - remove contaminated soil and dispose in approved site.

Excavate and Treat - remove contaminated soil and treat (includes spreading or land farming).

Remove Free Product - remove floating product from water table.

Pump and Treat Groundwater - generally employed to remove dissolved contaminants.

Enhanced Biodegradation - use of any available technology to promote bacterial decomposition of contaminants.

Replace Supply - provide alternative water supply to affected parties.

Treatment at Hookup - install water treatment devices at each dwelling or other place of use.

Vacuum Extract - use pumps or blowers to draw air through soil.

Vent Soil - bore holes in soil to allow volatilization of contaminants.

No Action Required - incident is minor, requiring no remedial action.

COMMENTS - Use this space to elaborate on any aspects of the incident.

SIGNATURE - Sign the form in the space provided.

#### DISTRIBUTION

If the form is completed by the tank owner or his agent, retain the last copy and forward the remaining copies intact to your local tank permitting agency for distribution.

- 1. Original Local Tank Permitting Agency
- State Water Resources Control Board, Division of Clean Water Programs, Underground Storage Tank Program, P.O. Box 944212, Sacramento, CA 94244-2120
- 3. Regional Water Quality Control Board
- 4. Local Health Officer and County Board of Supervisors or their designee to receive Proposition 65 notifications.
- 5. Owner/responsible party.

AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

DEPARTMENT OF ENVIRONMENTAL HEALTH 80 Swan Way, Rm. 210 Oakland, CA 94621 (415) 271-4300

January 23, 1992

City of Emeryville 2200 Powell Street Emeryville, CA 94608 ATTN; Juan Arreguin

Subject: 1333 Park Street, Emeryville CA 94608

Dear Mr. Arrequin:

This office is in receipt of a workplan from Tank Protect Engineering Inc.(TPE), dated January 15, 1992, submitted to this office for review. Thank you for the prompt attention given this investigation. Upon review of the workplan, there are several points in need of clarification prior to concurrence by the Alameda County Division of Hazardous Materials:

- 1) Provide copies of the necessary permit(s) from the Bay Area Air Quality Management District as stated in the workplan.
- 2) There is evidence of soil contamination under the fuel dispenser at the site, as demonstrated by sampling from under said dispenser. Please indicate a plan for addressing this contamination.
- 3) The use of duct tape has been shown to sometimes indicate a "false-positive reading for toluene. It will be adequate to employ "teflon" sealed over with foil, as an alternative.
- 4) Remediated soil should not be employed as backfill without the express permission of the Regional Water Board or the Local Agency (Alameda County). Clean fill should be utilized if at all possible.
- 5) Regarding the installation of monitoring wells at the site, a sieve analysis should be completed on at least one of the constructed wells.
- 6) If free product is encountered in the monitoring wells following their construction and subsequent development, it will be necessary to implement a remedial plan for the removal of said product.

page 2 of 2

7) Please extend to this office forty-eight(48) hours notice prior to commencing any work at the site.

Upon receipt of an addendum to the workplan adequately addressing the above issues, this office will concur with the plan's implementation. The required work should be sent to our department by February 23, 1992 (within 30 days).

If you have any questions concerning the above site, please call this office at (510) 271-4320

Sincerely,

Bun Oliva

Brian P. Oliva, REHS Hazardous Materials Specialist

cc: Eddie So, SFBRWQCB

John Mrakovich, Tank Protect Engineering

C

January 3, 1992

Mr. Brian Oliva Alameda County Health Agency 80 Swan Way, Room 200 Oakland, CA 94621

Re: Tank Removal, City of Emeryville, 1333 Park Avenue, Emeryville, CA 94608

Dear Mr. Oliva:

Per Mrs. Susan Hugo's request please find enclosed Forms A and B for the subject site. These forms were required to update information on the site.

If you have any question please call our office at (510) 429-8088.

Sincerely,

TANK PROTECT ENGINEERING

ATER RESOURCES CONTROL BOX DIVISION OF WATER QUALITY - UST CLEANUP PROGRAM SITE SPECIFIC QUARTERLY REPORT 01/01/92 THROUGH 03/31/92

SUBSTANCE: 8006619 SOURCE OF FUNDS: F AGENCY # : 10000

stID : 3638

SITE NAME: City of Emeryville

DATE REPORTED: 01/02/92
DATE CONFIRMED: ADDRESS: 1333 Park Ave. CITY/ZIP : Emeryville 94608 MULTIPLE RPs : N

SITE STATUS

EMERGENCY RESP: CONTRACT STATUS: 2 CASE TYPE: G

DATE COMPLETED: 01/30/92 RP SEARCH: S

PRELIMINARY ASMNT: DATE UNDERWAY:
REM INVESTIGATION: DATE UNDERWAY:
REMEDIAL ACTION: DATE UNDERWAY:
POST REMED ACT MON: DATE UNDERWAY: DATE COMPLETED: DATE COMPLETED: DATE COMPLETED:

LUFT FIELD MANUAL CONSID: 3
CASE CLOSED:

DATE EXCAVATION STARTED: 01/02/92 REMEDIAL ACTIONS TAKEN: NT

RESPONSIBLE PARTY INFORMATION \_\_\_\_\_

RP#1-CONTACT NAME: Juan Arreguin

COMPANY NAME: Rdvlpm Agency Of The City Of

ADDRESS: Emeryville/ 2200 Powell CITY/STATE: Emeryville, Ca 94608

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# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

# **Hazardous Materials Inspection Form**

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****			Site "	Site Name	C.t. J. G.		Today;s	12/92
II.A	BUSINESS PLANS (Title 19)		ID #	_ 1401116	City of Emo		_DOI#	122-1-72
	1, immediate Reporting 2, Bus, Plan Stds.	2703 25503(b)	Site Addı	ess - 133	3 Park. (	Twe		· · · · · · · · · · · · · · · · · · ·
	3. RR Can > 30 days 4, Inventory information	25503,7 25504(a)	6444	ÓΩ	04 fa.h	. G		
	5. Inventory Complete 6. Emergency Response	2730 25504(b)	city <u>Emo</u>	_/	zip <u>94 66</u>			
	7. Training B. Deficiency	25504(c) 25505(c)		MAX AMT stored	d > 500 lbs, 55 g	gai., 200 cft.?	, ~	יי
	9. Modification	25505(b)	ins	pection Cate	gorles:		100	4
II.B	ACUTELY HAZ. MATLS	İ	[t.		ite GENERATOR/T . Acute Hazardou			
	10. Registration Form Filed 11, Form Complete	25533(a) 25533(b)			Tanks TANK R		}	
	12, RMPP Contents 13, implement 5ch, Regid? (Y/I	25534(c) N)						
	14. OffSite Conseq. Assess. 15. Probable Risk Assessment	25524(c) 25534(d) 25534(g)	* Calif. Adm	ninistration Code	e (CAC) or the He	ealth & Safety (	Code (HS&C	Σ)
	16, Persons Responsible 17, Certification 18, Exemption Request? (Y/N)	25534(I) 25534(I) 25536(b)	1210 thave	<b>/</b>	j <del>00</del> 90	Usnof gas	were	move
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xlathy	5) Daily Inventory Annual tank feeling July Controlog lock delt 40		NOTO	5A 4	1	2 Salab.	Charge	Div.
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80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

# **Hazardous Materials Inspection Form**

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	BUSINESS PLANS (Title 19)  1. Immediate Reporting 2. Bus. Plan Stds. 3. RR Cars > 30 days 4. Inventory information 5. Inventory Complete 6. Emergency Response 7. Training 8. Deficiency 9. Modification  ACUTELY HAZ MATLS  10. Registration Form Filed 11. Form Complete 12. RMPP Contents 13. Implement Sch. Regid? (Y/N) 14. OffSite Conseq. Assess. 15. Probable Risk Assessment 16. Persons Responsible 17. Certification	2703 25503(b) 25503,7 25504(c) 2730 25504(c) 25505(d) 25505(d) 25505(d) 25533(d) 25533(d) 25534(d) 25534(d) 25534(d) 25534(d)	Site Name Cty of Emanyolle Dates   Site Address   1333 West. Querue    City Emanyolle Zip 94 608 Phone   MAX AMT stored > 500 lbs, 55 gal., 200 cft.?  Inspection Categories:   I. Haz. Mat/Waste GENERATOR/TRANSPORTER   II. Business Plans, Acute Hazardous Materials   III. Underground Tanks TANK Remarks   III. Underground Tanks TANK Remarks   Calif. Administration Code (CAC) or the Health & Safety Code (HS&	(C)
		25536(b) 25538	Comments: *	
m.	UNDERGROUND TANKS (Title	23)		
General	1. Permit Application 2. Pipeline Leak Detection 3. Records Maintenance 4. Release Report 5. Closure Plans	25284 (H&S) 25292 (H&S) 2712 2651 2670		
Monitoring for Existing Tonks		2643 2644 2646 2647	Required actions:  (5) Iwo (2) soil samples taken from both and  (5) one (1) water sample to soil water inte  (3) submit samples analyzed by Catherola  to the office water. I'd days  (4) Samples toll be analyzed for TPH or Gost  (5) Provide Organt Seal from on soil	of Tale Hare b 67 EX semple
New Tonka	12.Access. Secure	2632 2634 2711 2635	@ Complete unauthor Delegation had @ Brivile   suple to fuel despense	Regime y Jine
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	Contact: ]		Soil  Clui Breme Inspector: Brief Columnary Right Signature:	<sup>v</sup> ıı, ıu ≤
	Signature:		Comment & Signature:	



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Ahmad Shah Civil Engineer

# Tank Protect Engineering of Northern California Environmental Management

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2821 Whipple Rd. Union City, CA 94587 Engr. Contr. Lic. No. 575837

(415) 429-8088 (800) 523-8088 FAX: (415) 429-8089

CITY OF EMERYVILLE



TELEPHONE: 596-3750 FAX: 420-1785

GEORGE WARREN FIRE INSPECTOR

6303 HOLLIS STREET EMERYVILLE, CA 94608

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

# BILLING ADJUSTMENT FORM

		Generator H HMMP L UST T	
Date: <u>//3/92</u>		031	······································
HazMat StID#:	<b>26</b>		
Caller:	Phone:	a I the an	1011
Company Name: City of Emeryving Site Address: 1333 Park St.	re receverop	Il- out of	-
Site Address: 1333 Fark 57.	Emergy /	Zip Zip	
Requested Changes :			
		Initials:	
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Rescind Bill with explanation and date*(if a	ivaliable).		
Generator	// ^	1 1	7
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Change number of TANKS			
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# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

## **Hazardous Materials Inspection Form**

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II.A	BUSINESS PLANS (Title 19)	2703	$\rho \sim 0$ $\rho \sim 0$
	1. Immediate Reporting 2. Bus. Plan Stas. 3. RR Cars > 30 days	25503(b) 25503.7	
	4. Inventory information 5. Inventory Complete 6. Emergency Response	25504(a) 2730 25504(b)	City Emorgaelle Zip 94 668 Phone
	7. Training 8. Deficiency	25504(c) 25505(a) 25505(b)	MAX AMT stored > 500 lbs, 55 gal., 200 cft.?
ii.8	— 9. Modification  ACUTELY HAZ. MATLS	25533(a) 25533(b)	Inspection Categories:  I. Haz. Mat/Waste GENERATOR/TRANSPORTER  II. Business Plans, Acute Hazardous Materials  III. Underground Tanks TANK Removal
	12, RMPP Contents 13, Implement Sch. Regid? (Y/N) 14, OffSite Conseq. Assess.	25524(c)	
	15. Probable Risk Assessment 16. Persons Responsible	25534(d) 25534(g) 25534(f)	* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)
	17. Certification 18. Exemption Request? (Y/N) 19. Trade Secret Requested?	25536(b) 25538 Jan All - Mal	Comments: 100 PM On Site for Romancel of Undaground
111.	UNDERGROUND TANKS TILLE		Storage tarle (UST) 2000 g(?)
General	1. Permit Application     2. Pipeline Leak Detector     3. Records Maintenance     4. Release Report     5. Closure Pions	25284 (H&S) 25292 (H&S) 2712 2651	TPE on site tank in ground
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gk	Annual tank test 4) Monthly Gnawater	× 11	a ods of stale old hydrocars on supply fence
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<u>F</u>	7) Weekly Tank Gauge Annual tank tstra 8) Annual Tank Testing 4	Wex	the west and of the execution. ploto # 5
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	11.Monitor Plan 12.Access, Secure	2632	toute (Islan) Coment soil that alkered had a
w Tanks	13.Plans Submit Date:	2634 2711	area. obviously stained (ahoto taken)
ž	14. As Built Date:	2635 baokgaine	STATIZ monifest mandrer.
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	Contact	hules C	AC 000 658 512. Generator A City of Emeryculle 11,111
	Title:	anple,	Inspector: Buch P. OLIVE
	Signature:	(0)	DA Armad 8 Cansignature: Bua Molet p
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# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

# **Hazardous Materials Inspection Form**

11,111

****	······································		"Site Site Name City of Energylle Date	1/s 1021 gr
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		2703 25503(b)	Site Address 1333 Work avenue	
	4, Inventory Information	25503.7 25504(a)	city Enorquelle Zip 94 608 Phone	
	6. Emergency Response	2730 25504(b)		
	8. Deficiency	25504(c) 25505(d) 25505(b)	MAX AMT stored > 500 lbs, 55 gal., 200 cft.?	
	Y, modification	22000(0)	Inspection Categories:	
II.B	ACUTELY HAZ MAT'LS		I. Haz. Mat/Waste GENERATOR/TRANSPORTERII. Business Plans, Acute Hazardous Materials	
	10. Registration Form Filed 11. Form Complete	25533(a) 25533(b)	Will. Underground Tanks TANK Removal	
	12, RMPP Contents 13, implement Sch. Reg'd? (Y/N)	25534(c) 25524(c)		
	14, OffSite Conseq. Assess. 15, Probable Risk Assessment 16, Persons Responsible	25534(d) 25534(g)	<ul> <li>Calif. Administration Code (CAC) or the Health &amp; Safety Code (I</li> </ul>	HS&C)
	17, Certification 18, Exemption Request? (Y/N)	25534(f) 25536(b)		
	19, Trade Secret Requested?	25538	Comments:	
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jii,	UNDERGROUND TANKS (Title	23)		
General	1. Permit Application 2. Pipeline Leak Detection 3. Records Maintenance	25284 (H&S) 25292 (H&S)		<del></del>
ů	4. Release Report 5. Closure Plans	2712 2651 2670		
	d. Method	2070		
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	Semi-annual gnawater One time solis 3) Daily Vadose			
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	Signature:		Mmmess 8 12 Signature:	<u> </u>
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#### PHOTO RECORD

STTR	NAME:
CTTD	TANATATA .

SITE ADDRESS:

PHOTOGRAPHER:

AFFILIATION:

PROGRAM:



WST IN PLACE 1323 PARK ADE. EMERYVILLE

Photo #1

NE E ES



1333 Park. Ave STAINED SOIT



ENE E ESE



Slab under UST @ 1333 Gork Aue Energoille Otea Changi

SITE NAME: SITE ADDRESS: PHOTOGRAPHER: DATE OF PHOTO:	AFFILIATION:PROGRAM:





E ENE E I





#### PHOTO KECUKU

SITE NAME:	
SITE ADDRESS:	
PHOTOGRAPHER:	AFFILIATION:
DATE OF PHOTO:	PROGRAM:



WSW LOOKING... ESE
SW SE
SSW S SSE

Description:

NNW N NNE

PHOTO ENE W TAKEN E





# ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY DEPARTMENT OF ENVIRONMENTAL HEALTH HAZARDOUS MATERIALS DIVISION 80 SWAN WAY, ROOM 200 OAKLAND, CA 94621 PHONE NO. 415/271-4320

# ACCEPTED

DEPARTMENT OF ENVIRONMENTAL HEALTH 470 - 27th Street, Third Floor Telephone: (4:5) 874-7237 Oakland, CA 94612

is all health taws. Changes to your plans indicated by this the and essentially meet the requirements of State and The plans have been reviewed and found to be accept Transmittent are to assure compilence with State and local invis. The project proposed horein is now released for issuand of any required building parmits for construction.

Ore copy of these accepted plans must be on the job and emissis to all contractors and craftsmen involved with · 3 removal.

be stomitted to this Department and to the Fire and Any change of alterations of those plans and specifications inconction Department to determine if such or by this Department of legal 48 hours, prior to the anges mae't the requirements of State and local laws. anowing required inspections:

Removal of Tank and Piping Sampling

accepted plans and all applicable laws and energy and a permit to operate is dependent on comgu áitíons.

-Fine! Inspection

THERE IS A FINANCIAL PENALTY FOR NOT OSTAINING THESE INSPECTIONS.

UNDERGROUND TANK CLOSURE PLAN Complete according to attached instructions

1.	Business Name CITY OF EMERYVILLE		<del></del>		
	Business Owner CITY OF EMERYVILLE		· · · · · · · · · · · · · · · · · · ·		 
2.	Site Address 1333 PARK AVENUE				; ! !
	city EMERYVILLE CA Zip	94608	Phone	(415) 59	6-4330
3.	Mailing Address 2200 POWELL STREET				
	city <u>EMERYVILLE</u> CA Zip	94608	Phone (	415) 596	4330
4.	Land Owner CITY OF EMERYVILLE				1
	Address 2200 POWELL STREET City,	State EMERY	VILLE,	CA Zip	94608
5.	Generator name under which tank will h			_	1
•					
	EPA I.D. No. under which tank will be	manifested	CACOO	1658512	
				<del></del>	

•	Contractor TANK PROTECT ENGINEERING OF NORTHERN CALIFORNIA	
	Address 2821 WHIPPLE ROAD	· · · · · · · · · · · · · · · · · · ·
	City <u>UNION CITY</u> , CA 94587 Phone (510) 429-8	088
	License Type A ID# 575837	
•	Consultant TANK PROTECT ENGINEERING OF NORTHERN CALIFORNIA	
	Address 2821 WHIPPLE ROAD	······································
	City UNION CITY ,CA 94587 Phone (510) 429-8088	.— <u>.</u>
•	Contact Person for Investigation	
	Name <u>JUAN C. ARREGUIN</u> Title	
	Phone (415) 596-4330	
•	Number of tanks being closed under this plan1	
	Length of piping being removed under this plan	
	Total number of tanks at facility	
•	State Registered Hazardous Waste Transporters/Facilities (see instructions).	
	** Underground tanks are hazardous waste and must be handled as hazardous waste	**
	a) Product/Residual Sludge/Rinsate Transporter	
	Name N/A EPA I.D. No.	
	Hauler License No License Exp. Date	
	Address	ļ
	City State Zip	<u></u>
	b) Product/Residual Sludge/Rinsate Disposal Site	!   
	Name N/A EPA I.D. No.	<u> </u>
	Address	
	City State Zip	

C	Tank and Piping Transporter
	Name ERICKSON, INC EPA I.D. No. CAD009466392
	Hauler License No License Exp. Date
	Address 255 PARR BLVD.
	City RICHMOND State CA Zip 94801
	Tank and Piping Disposal Site
	Name ERICKSON, INC EPA I.D. No. CAD009466392
	Address _ 255 PARR BLVD.
	City RICHMOND State CA Zip 94801
	me LYLE TRAVIS
	mpany TANK PROTECT ENGINEERING
	dress 2821 WHIPPLE ROAD
	ty <u>UNION CITY</u> State <u>CA</u> Zip <u>94587</u> Phone (510) 429-8088
	oratory meSEQUOIA ANALYTICAL
	dress 680 CHESAPEAK DRIVE
	ty REDWOOD CITY State CA Zip 94063
	ate Certification No.
	e tanks or pipes leaked in the past? Yes [ ] No [ ] yes, describe.
·. —	

	Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated)	Sampling Plan One sample for every 20 cubic yards maximum or 1 every 50 cubic yards minimum.	sample

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

16. Chemical methods and associated detection limits to be used for analyzing samples

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
Gasoline TPHG BTEX	EPA 5030 EPA 5030	GCFID 8020/8240	1PPM .005ppm
ţ.			
IF groundwater (	encountered: TPHG 5030/GCFII BTEX 5030/602 o		

17. Submit Site Health and Safety Plan (See Instructions)

18. Submit Worker's Coppensation Certificate copy

Name of Insurer STATE COMPENSATION INSURANCE FUND

- 19. Submit Plot Plan (See Instructions)
- 20. Enclose Deposit (See Instructions)
- 21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)
- 22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.

I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

Signature of Contractor	
Name (please type)	
Signature from From	
Date 12/09/91	
Signature of Site Owner or Operator	
Name (please type) Juan C. Arreguin	<u></u>
signature from C. Aneque	
Signature Juan C. Amegue	: : !

14. Describe methods to be used for rendering tank inert

USE 15 LBS. OF DRY ICE PER EACH 1,000 GALLON CAPACITY FOR EACH TANK.

VERIFY	WITH	ON-SITE	T.F.T.	METTER .

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be plugged.

The Bay Area Air Quality Management District (771-6000), along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of explosion proof combustible gas meters to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas meter on site to verify tank inertness.

## 15. Tank History and Sampling Information

Tank		Material to			
Capacity	Use History (see instructions)	be sampled (tank contents, soil, ground-water, etc.)	Location and Depth of Samples		
2,000 gallon	Gasoline	Soil	One sample at each end of the tank pit, max. of 2 ft. below the tank pit.		
	Piping	Soil	One sample every 20 lineal feet, or under swing joint dispenser.		
	GROUNDWATER TO BE SAMPLED	IF ENCOUNTERED.			

One soil sample must be collected for every 20 feet of piping that is removed. A ground water sample must be collected should any ground water be present in the excavation.

# TANK PROTECT ENGINEERING OF NORTHERN CALIFORNIA, INC. SITE SAFETY PLAN

Plan Prepared by Da Plan Approved by Da Please respond to each item as completely as possible pplicable, please mark "N/A".  . KEY PERSONNEL AND RESPONSIBILITIES  (Include name, telephone number and health as project manager - Joe Smith - responsible for surproject Manager AHMAD SHAH  Site Safety Manager AHMAD SHAH  Alternate Site Safety Manager TOM NORVELL  Field Team Members AHMAD SHAH	nd safety responsibilit	is no
Please respond to each item as completely as possible pplicable, please mark "N/A".  KEY PERSONNEL AND RESPONSIBILITIES  (Include name, telephone number and health as project manager - Joe Smith - responsible for sure project Manager AHMAD SHAH  Site Safety Manager AHMAD SHAH  Alternate Site Safety Manager TOM NORVELL Field Team Members AHMAD SHAH	te Where an item  nd safety responsibilit	is no
Please respond to each item as completely as possible pplicable, please mark "N/A".  KEY PERSONNEL AND RESPONSIBILITIES  (Include name, telephone number and health as project manager - Joe Smith - responsible for supering the supering of	e. Where an item	ięs; i.e
pplicable, please mark "N/A".  . KEY PERSONNEL AND RESPONSIBILITIES  (Include name, telephone number and health a project manager - Joe Smith - responsible for superior of the superior of th	nd safety responsibilit	ięs; i.e
(Include name, telephone number and health as project manager - Joe Smith - responsible for sure Project Manager AHMAD SHAH  Site Safety Manager AHMAD SHAH  Alternate Site Safety Manager TOM NORVELL  Field Team Members AHMAD SHAH	*	
Project manager - Joe Smith - responsible for superior of the	*	
Site Safety Manager AHMAD SHAH  Alternate Site Safety Manager TOM NORVELL  Field Team Members AHMAD SHAH		
Alternate Site Safety Manager TOM NORVELL Field Team Members AHMAD SHAH		
Field Team Members AHMAD SHAH		
		İ
. LOUIS TRAVIS		
Agency Reps: [Please specify by one of the		Federal
(F), State: (S), Local: (L), Co	ontractor(s): (C)	
ALAMEDA COUNTY HEALTH DEPT.		<u> </u>
CITY OF EMERYVILLE FIRE DEPT.		<u> </u>
		i 
Excavation jet must &	e elevered	2
Excariation jui mine		

# 2. JOB HAZARD ANALYSIS

2.1 OVER	ALL	HAZARD E	VALUAT	NOI			!		
Hazard Le	evel:	High ( )	Mode	rate (X)	Low	()	Unknown	()	
Hazard Ty	/pe:	Liquid ( )	S	Solid ( )	Sludge	()	Vapor/Gas	<b>(</b> X)	
-	SEE I	n or suspected BELOW; GASOLI LBENZENE			-			ES,	·
		cteristics of h	azardous	materials	included	above	(complete	for e	ach
	chemic	cal presents):					!		
MATERIAL A	#1				······			········	
Corrosive (	()	Ignitable	(X)	,	Toxic	(X)	Reactive	()	
Volatile (	(X)	Radioactive	()	Biologica	l Agent	()	,		
Exposure Rou	ites:	Inhalation	(X)	I	ngestion	()	Contact MUCOUS		
MATERIAL i	#2						<u> </u>		,
Corrosive (	()	Ignitable	( )		Toxic	()	Reactive	()	
Volatile (	()	· Radioactive	()	Biologica	l Agent	()	 		
Exposure Rou	ites:	Inhalation	()	I	ngestion	()	Contact	.()	
MATERIAL :	#3								
Corrosive	()	Ignitable	()		Toxic	()	Reactive	()	
Volatile	()	Radioactive	()	Biologica	1 Agent	()	! !		
Exposure Rou	ites:	Inhalation	()	I	ngestion	()	Contact	()	
MATERIAL :	#4		•	<del></del>					
Corrosive	()	Ignitable	()		Toxic	()	Reactive	()	
Volatile	()	Radioactive	( )	Biologica	l Agent	()			
Exposure Rou	ites:	Inhalation	()	I	ngestion	()	Contact	()	

# 2.2 JOB-SPECIFIC HAZARDS

	available (i.e., Task-driller, Heach hazard, indicate steps to	cify the possible hazards based on information azards-trauma from drill rig accidents, etc.) For be taken to minimize the hazard.  D - GASOLINE VAPOR EXPLOSION
	TO MINIMIZE - USE 15 LB OF	DRY ICE PER EACH 1,000 GALLON CAPACITY
	TO INERT VAPOR PRESENT IN	TANK
	The following additional hazar extreme heat, etc.):	ds are expected on site (i.e., snake infested area,
	Measures to minimize the eff	ects of the additional hazards are:
		·
3. MC	ONITORING PLAN	
<b>3.</b> 1	1 (a) Air Monitoring Plan	
	<del>"</del>	on of air monitoring. Action levels should be lable on contaminants of concern. Action levels crienced in industrial hygiene.
	Level	Action Taken
	(i.e.,.5 ppm)	(i.e., commence perimeter monitoring)  N/A
•		

(b) Air Monitoring Equipment

Outline the specific equipment to be used, calibration method, frequenciation, locations to be monitored, and analysis of samples (if applications)	•
AIR MONITORING WILL BE DONE BY USING GASTECH MODEL 1314.	
HEXANE WILL BE USED FOR CALIBRATION OF THE GASTECH.	<del></del>
If air monitoring is not to be implemented for this site, explain why: THIS CASE INVOLVES ONLY TANK REMOVAL	-
3.2 Personnel Monitoring  (Include hierarchy of responsibilities decision making on the site)	,
SAFETY OFFICER ADVISES FIELD MANAGER WHO DELEGATES RESPONSIBILIT	IES
TO INDIVIDUAL TEAM WORKERS.	
. 3.3 Sampling Monitoring	
(a) Techniques used for sampling	<del></del>
INSERT A PROBE INSIDE THE TANK TO DETERMINE LEL AND OXYGEN	
LEVELS.	
(b) Equipments used for sampling GASTECH MODEL 1314	
1 - HYDROCARBON SUPER SURVEYOR	
2 - BRASS SLEEVE AND SAMPLER WITH HAMMER	

	(c) Maintenance and calibration of equipments
	USE HEXANE FOR CALIBRATION
	EQUIPMENT WILL BE CALIBRATED PRIOR TO OPERATION
4. PER	RSONAL PROTECTIVE EQUIPMENT (PPE)
	Equipment used by employees for the site tasks and operations being conducted. Be Specific (i.e., hard hat, impact resistance goggles, other protective glove, etc.).
	HARD HAT, PROTECTIVE GLOVES
5. SIT	E CONTROL AND SECURITY MEASURES
	The following general work zone security guidelines should be implemented:
	- Work zone shall be barricaded and caution tape used.
	- Excavations shall be closed when drilling and sampling activities are not actually taking place.
,	- No excavations shall be left unattended. Visitors will not enter the work zone unless they have attended a project safety briefing.
	- Persons will not leave the work zone without first passing through the decontamination zone.
6. DE	CONTAMINATION PROCEDURE
	List the procedures and specific steps to be taken to decontaminate equipment and PPE.
·	N/A

#### 7. TRAINING REQUIREMENTS

Prior to mobilization at the job site, employees will attend a safety briefing. The briefing will include the nature of the wastes and the site, donning personal protection equipment, decontamination procedures and emergency procedures.

### 8. MEDICAL SURVEILLANCE REQUIREMENTS

If any task requires a very high personnel protection level, personnel shall provide assurances that they have received a physical examination and they are fit to do the task. Also personnel will be instructed to look for any symptom of heat stress, heat stroke, heat exhaustion or any other unusual symptom. If there is any report of that kind it will be immediately followed through, and appropriate action will be taken.

#### 9. STANDARD OPERATION PROCEDURES

Tank Protect Engineering of Northern California, Inc. (TPE) is responsible for the safety of all TPE employees on site. Each contractor shall provide all the equipment necessary to meet safe operation practices and procedures for their personnel on site and be responsible for the safety of their workers.

A "Three Warning" system is utilized to enforce compliance with Health and Safety procedures practices which will be implemented at the site for worker safety:

- \* Eating, drinking, chewing gum or tobacco, and smoking will be allowed only in designated areas:
- \* Wash facilities will be utilized by workers in the work areas before eating, drinking, or use of the toilet facilities.
- \* Containers will be labeled identifying them as waste, debris or contaminated clothing.

- \* All Excavation/drilling work will comply with regulatory agencies requirement.
- \* All site personnel will be required to wear hard hats and advised to take adequate measures for self protection.
- \* Any other action which is determined to be unsafe by the site safety officer.

## 10. CONFINED SPACE ENTRY PROCEDURES

No one is allowed to enter any confined space operation without proper safety measures. Specifically in case of an excavated Tank Pit no one should enter at no time.

#### 11. EMERGENCY RESPONSE PLAN

Fire	extinguisher(s)	will l	be o	n site	prior	to	excavation. > Relevant	phone
numbers:								

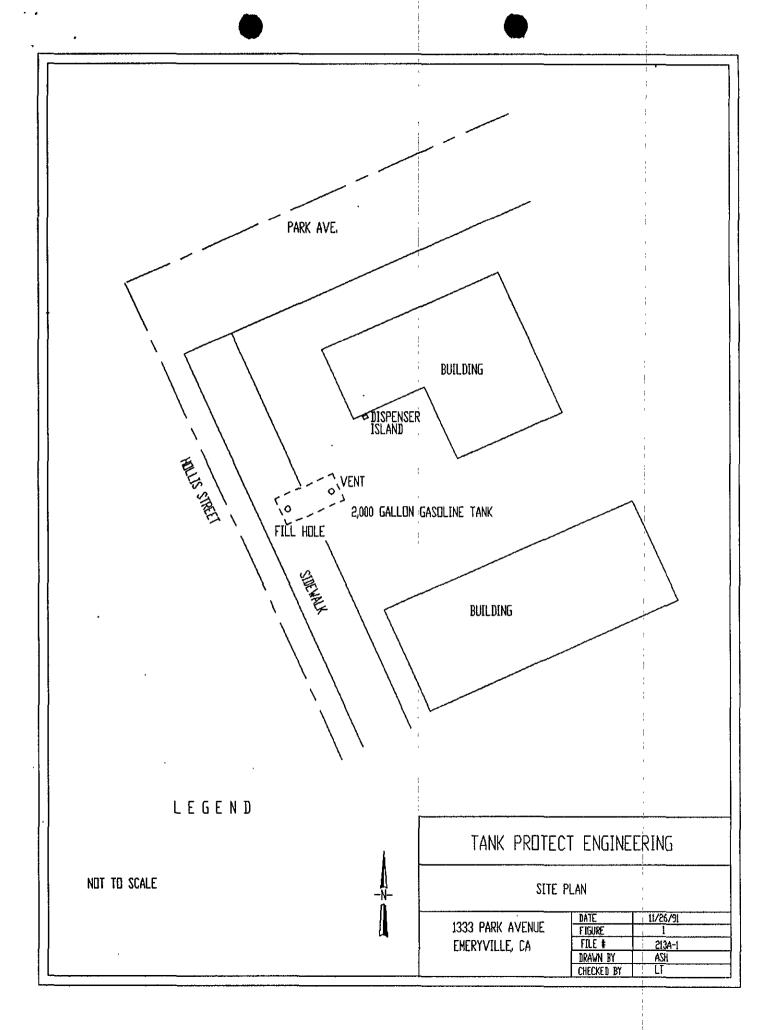
Person	Title	Phone No.		
AHMAD SHAH.	Project Manager	(510) 429-8088		
	Fire	911 or		
<u> </u>	Police	911 or		
	Ambulance	911 or		
	Poison Control Cent	er (800)523-2222		
	Site Phone			
	Nearest off-site no.			
	Medical Advisor			
JUAN ARREGUIN	Client Contact	(510) 596-4330		

HAND SIDE.

U.S EPA - ERT	(201) 321-6660
Chemtrec	(800) 424-9300
Centers for Disease Control Day	(404) 329-3311
Night	(404) 329-2888
National Response Center	(800) 424-8802
Superfund/RCRA Hotline	
TSCA Hotline	i
National Pesticide Information Services	1
Bureau of Alcohol, Tobacco, and Firearms	
HEALTH AND SAFETY COMPLIANCE STATEMENT  I, AHMAD SHAH , have received and read a copy  Health and Safety Plan.	
I understand that I am required to have read the aforementioned docu received proper training under the occupational Safety and Health Act 1910.120) prior to conducting site activities at the site.	
Signature Ohmad 81ah 12/09/9	7.1
NEAREST HOSPITAL FROM SITE: PROVIDENCE HOSPITAL 3100 SUMMIT STREET OAKLAND, CA 94609 (510) 835-4500	

o

GOING EAST ON 580, EXIT ON BROADWAY, TURN RIGHT ONTO BROADWAY, CONTINUING UNTIL 3TH STREET, THEN MAKE A RIGHT ONTO SUMMIT. HOSPITAL IS ON THE RIGHT





(415) 429-8088 (800) 523-8088 FAX (415) 429-8089

FROM: TANK PROTECT ENGINEERING TO:_ACHCSA	DATE: 12-16-91  ATTN: Mrs. Susar	Hugo
RE.: City of Energyille, 1333 Park Ave.	NO. OF PAGES:(Include cover sheet)	
If all pages are not received please notify sender.		:
MESSAGE:		÷ ;
		1

2821 Whipple Road • Union City, California • 94587

# TANK PROTECT ENGINEERING OF NORTHERN CALIFORNIA, INC. SITE SAFETY PLAN

Site 1333 PARK AVENUE, EMERYVILLE, CA Original Site Safety Plan: Yes () No () Plan Prepared by Ahmad Shah Plan Approved by Ahmad Shah Please respond to each item as completely as posapplicable, please mark "N/A".	Project Number 213  Revision Number Date 12/9/91  Date 12/9/91  ssible. Where an item	
1. KEY PERSONNEL AND RESPONSIBILITIES  (Include name, telephone number and health project manager - Joe Smith - responsible for Project Manager AHMAD SHAH  Site Safety Manager AHMAD SHAH  Alternate Site Safety Manager TCM NORVELL Field Team Members AHMAD SHAH	supervision of all site a	ctivities.)
LOUIS TRAVIS		.l
Agency Reps: [Please specify by one of (F), State: (S), Local: (L)  ALAMEDA COUNTY HEALTH DEPT.		Federal:
EPPY OF EMERYVILLE FIRE DEPT.		,
		1
	<u> </u>	
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#### P.O. BOX 807, SAN FRANCISCO, CA 94101-0807

#### CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

POLICY NUMBER:

214 PØ3

1145921-91

SEPT. 26, 1991

CERTIFICATE EXPIRES:

9-1-92

ALAMEDA COUNTY
HEALTH CARE SERVICES AGENCY
80 SWAN WAY, RM. #200
OAKLAND, CA. 94621

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 is not an insurance policy and does not amend, extend or after the coverage afforded by the policies listed herein. Notwithstanding any requirement, term, or condition of any 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

EMPLOYER

TANK PROTECT ENGINEERING OF NO CALIFORNIA, INC. 2821 WHIPPLE RD. UNION CITY, CA. 94587

OLD 262A