

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

February 26, 2007

Mr. Ignacio Dayrit
City of Emeryville Redevelopment Agency
4331 San Pablo Avenue
Emeryville, CA 94011-7820

Park Emery Associates Limited Partnership
2500 El Camino Real
San Mateo, CA 94403-2353

Subject: Fuel Leak Case No. RO0000068, City of Emeryville Fire Station, 4331 San Pablo Avenue, Emeryville, CA

Dear Mr. Dayrit:

Alameda County Environmental Health Department (ACEH) staff have reviewed the case file and report entitled, "Quarterly Groundwater Monitoring Report, 4th Quarter 1995," dated February 20, 1996 and prepared on your behalf by Seacor International. Groundwater sampling conducted during December 1995 confirmed the presence of high concentrations of dissolved petroleum hydrocarbons in monitoring well MW-1 up to 8,700 micrograms per liter ($\mu\text{g/L}$) total petroleum hydrocarbon as gasoline (TPHg), 98,000 $\mu\text{g/L}$ total petroleum hydrocarbon as diesel (TPHd) and 230 $\mu\text{g/L}$ benzene.

In the interest of moving your site through the regulatory closure process, ACEH requests that additional groundwater monitoring and sampling be conducted at the site. Our request is based on the conclusion that the most recent groundwater monitoring data available in our files dates back to 1995. Additionally, the extent of soil and groundwater contamination has not been fully defined at your site. Therefore, we request that additional site characterization be completed downgradient of the former underground storage tank (UST) and dispenser locations. In addition, ACEH requires a Well Survey be complete for the site.

Based on ACEH staff review of the case file, we request that you address the following technical comments and prepare a work plan detailing work to be performed, and send us the reports described below. Please provide 72-hour advance written notification to this office (e-mail preferred to steven.plunkett@acgov.org) prior to the start of field activities.

TECHNICAL COMMENTS

1. **Downgradient Site Characterization.** Soil sampling conducted during the initial UST and fuel dispenser removal detected elevated concentrations of TPHg, TPHd and benzene in soil at up to 190 parts per million (mg/kg), 4,800 mg/kg and 0.38 mg/kg, respectively. In order to confirm soil and groundwater contamination is limited in extent both laterally and vertically,

we request that you advance soil borings in locations directly downgradient from monitoring well MW-1.

We recommend that your investigation incorporate expedited site assessment techniques. Expedited site assessment tools and methods are a scientifically valid and cost-effective approach to fully define the three-dimensional extent of groundwater contamination. Technical protocol for expedited site assessments are provided in the U.S. Environmental Protection Agency's "Expedited Site Assessment tools for Underground Storage Tanks: A Guide for Regulators," (EPA 510-B-97-001), dated March 1997. Therefore, we recommend that you utilize direct push technology to collect soil samples and depth-discrete groundwater samples. Sampling locations should be sited to assess the extent of soil and groundwater contamination downgradient of the source area. Other options for additional investigation may be appropriate to define contamination at your site. Please present plans to fully define the lateral and vertical extent of soil and groundwater contamination at the site in the Work Plan requested below.

2. **Sensitive Receptor Survey.** It appears that a sensitive receptor survey has not been completed for your site. The survey shall include a detailed assessment of all wells (monitoring and production wells: active, inactive, standby decommissioned (sealed with concrete), abandoned, (improperly decommissioned or lost); and dewatering and cathodic protection wells) within a ½ mile radius of the subject site. The well survey should include well data from California Department of Water Resource well database and Alameda County Department of Public Works. Please present the results of the well survey in the report requested below.
3. **Monitoring Well Rehabilitation and Redevelopment.** ACEH requests that prior to monitoring well sampling, all onsite monitoring wells should be rehabilitated and/or redeveloped; thus allowing the collection of a representative sample of formation groundwater. Note that well redevelopment may require additional well volumes to be removed to assure that water quality parameters are satisfied. Please present plans in the Work Plan requested below to sample monitoring well MW-1, in conjunction with the soil and grab groundwater sampling requested in comment 1 above.
4. **Groundwater Sampling.** Groundwater monitoring has not been conducted at the site since 1999. Please sample the existing monitoring wells in order to determine current groundwater conditions throughout the site. The water samples are to be analyzed for TPHg and TPHd by EPA Method 8015M or 8260, BTEX, EDB, EDC, MiBE, TAME, ETBE, DIPE, TBA and EtOH by EPA Method 8260 and total lead. Please present the results from groundwater monitoring and sampling in the report requested below.
5. **Geotracker EDF Submittals** - A review of the case file and the State Water Resources Control Board's (SWRCB) Geotracker website indicate that electronic copies of analytical data have not been submitted for your site. Pursuant to CCR Sections 2729 and 2729.1, beginning September 1, 2001, all analytical data, including monitoring well samples, submitted in a report to a regulatory agency as part of the LUFT program, must be transmitted electronically to the SWRCB Geotracker website via the internet. Additionally, beginning January 1, 2002, all permanent monitoring points utilized to collect groundwater samples (i.e. monitoring wells) and submitted in a report to a regulatory agency, must be surveyed (top of casing) to mean sea level and latitude and longitude accurate to within 1-

meter accuracy, using NAD 83, and transmitted electronically to the SWRCB Geotracker website. Beginning July 1, 2005, electronic submittal of a complete copy of all reports is required in Geotracker (in PDF format). In order to remain in regulatory compliance, please upload all analytical data (collected on or after September 1, 2001), to the SWRCB's Geotracker database website in accordance with the above-cited regulation. Please perform the electronic submittals for applicable data and submit verification to this Agency by March 15, 2007.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Steven Plunkett), according to the following schedule:

- **March 30, 2007** – Work Plan Report and Sensitive Receptor 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

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. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

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. Submission of reports to the Geotracker website does not fulfill the requirement to submit documents to the Alameda County ftp site. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for 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 monitor wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all necessary reports was required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

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

Mr. Ignacio Dayrit
February 25, 2007
Page 4

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.

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

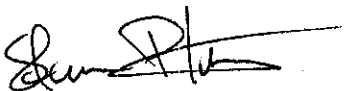
Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

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.

Should you have any questions, do not hesitate to call me at (510) 383-1767.

Sincerely,



Steven Plunkett
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Donna Drogos, ACEH
Steven Plunkett, ACEH
File



ENVIRONMENTAL HEALTH SERVICES

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

June 9, 1999

Mr. Ron Gerber
City of Emeryville Redevelopment Agency
2200 Powell Street, 12th Floor
Emeryville, California 94608

**RE: Former City of Emeryville Fire Station (STID # 4058)
4331 San Pablo Avenue, Emeryville, California 94608**

LANDOWNER NOTIFICATION AND PARTICIPATION REQUIREMENTS

Dear Mr. Gerber:

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.

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, (*name of primary responsible party*), 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

2068

SAMPLE LETTER (2): LIST OF LANDOWNERS FORM

Name of local agency Emeryville Redevelopment Agency
Street address 2200 Powell Street, 12th Floor
City Emeryville, CA 94608
ATTN: Ron Gerber

SUBJECT: CERTIFIED LIST OF RECORD FEE TITLE OWNERS FOR (Site Name and Address)

(Note: Fill out item 1 if there are multiple site landowners. If you are the sole site landowner, skip item 1 and fill out item 2.)

1. In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that the following is a complete list of current record fee title owners and their mailing addresses for the above site:

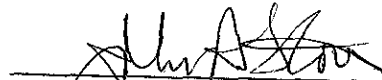
2. In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that I am the sole landowner for the above site.

4331 San Pablo Avenue (Former Fire Station Site)
Emeryville, CA 94608

Sincerely,

Signature of primary responsible party

Name of primary responsible party



John A. Flores
Executive Director

99 JUL -7 PM 4:46

ENVIRONMENTAL PROTECTION

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

October 18, 1994
STID# 4058

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

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

RE: **Underground Storage Tank Removal**
Former City of Emeryville Fire Station
4331 San Pablo Avenue, Emeryville, California 94608

Dear Mr. Arreguin:

The Alameda County Department of Environmental Health, Hazardous Materials Division has recently reviewed the files concerning the removal of one 500 gallon underground storage tank (used to store gasoline and/or diesel fuel) on July 20, 1994 at the referenced site. We are in receipt of the Summary Report -Tank Removal and Soil (August 17, 1994) and Soil Sampling Results (August 25, 1994) submitted by Seacor for the subject site.

One sample collected from the native soil beneath the fill end of the former tank at 8.5 feet below ground surface (bgs) found the following contaminants: 86 ppm TPH diesel, 1 ppm TPH gasoline, nd benzene, 0.032 ppm toluene, 0.012 ppm xylene and 0.034 ppm ethyl benzene. Soil sample collected underneath the dispenser (at 0.5 feet bgs) showed 4800 ppm TPH diesel, 18 ppm TPH gasoline, 0.028 ppm benzene, 0.16 ppm toluene, 0.099 ppm xylene, 0.04 ppm ethyl benzene. Strong soil staining and hydrocarbon odor (gasoline) appeared to be present at the site during the removal of the former tank.

On August 16, 1994, overexcavation was conducted around the perimeter of the former tank pit and in the area of the former fuel dispenser. Confirmation samples collected from the sidewalls (at 7 feet bgs) detected the following levels of contaminants: 3 - 190 ppm TPH gasoline, 28 - 260 ppm TPH diesel, nd - 0.38 ppm benzene, 0.057 - 0.37 ppm toluene, 0.05 - 3.9 ppm ethyl benzene, and 0.016 to 9.6 ppm xylene. Confirmation sample collected from the former dispenser area (at 5 feet bgs) identified 5 ppm TPH gasoline, nd TPH diesel, 0.2 ppm benzene, 0.023 ppm toluene, 0.36 ppm ethyl benzene and 0.22 ppm xylene.

Because of the degree of contamination found at the site further environmental assessment is required. A preliminary assessment should be conducted to determine the extent of soil and/or groundwater contamination that has resulted from the former leaking tank. The information gathered by this investigation will be used to assess the need for additional actions at the site.

Mr. Juan Arreguin
RE: 4331 San Pablo Avenue, Emeryville, CA 94608
October 18, 1994
Page 2 of 3

Groundwater flow direction must be established at the site. One monitoring well should be installed within 10 feet in the verified downgradient location of the former tank excavation. Quarterly monitoring must be performed to determine extent of the groundwater contamination. Groundwater monitoring wells must be sampled and analyzed for the following target compounds: TPH gasoline, TPH diesel, benzene, toluene, ethyl benzene, xylene and lead. Groundwater elevation readings must be incorporated in the quarterly sampling.

Until cleanup is complete, you will need to submit reports to this office every three months (or at a more frequent interval, if specified at any time). This reports must include information pertaining to further investigative results; the methods of cleanup actions implemented to date; and the method and disposal of any contaminated material. Copies of manifests for such disposal must be sent to this office. Stockpiled soil from the pit may not be used to backfill these holes without authorization from this office. Only clean fill can be used to backfill the excavation pit. Please provide our office with documentation of the disposal of the stockpiled soil.

It is my understanding that the possible presence of another underground storage tank at the site was investigated. Please provide our office with a copy of the report or findings from this investigation. Additionally, the sump located near the former tank area must be properly closed. The site assessment must include a determination if the sump is a potential source of contamination.

Your work plan must be submitted to this office no later than **November 30, 1994**. 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.

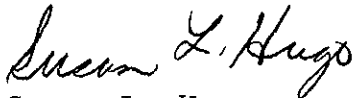
This letter constitutes a formal requests for technical reports pursuant to California Water Code Section 13267(b). Any extensions of stated deadlines or changes in the workplan must be confirmed in writing and approved by this agency.

Enclosed is a copy of the Underground Storage Tank Unauthorized Release (Leak)/Contamination Site Report which must be completed and submitted to this office **within five working days** upon receipt of this letter.

Mr. Juan Arreguin
RE: 4331 San Pablo Avenue, Emeryville, CA 94608
October 18, 1994
Page 3 of 3

If you have any questions regarding this letter, please contact me
at (510) 567-6700.

Sincerely,



Susan L. Hugo
Senior Hazardous Materials Specialist

Enclosure

cc: Rafat A. Shahid, Asst. Agency Director, Environmental Health
Kevin Graves, San Francisco Bay RWQCB
Edgar B. Howell, Chief, Hazardous Materials Division / file

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



Alameda County CC4580
Environmental Health Services
1131 Harbor Bay Pkwy., #250
Alameda CA 94502-6577
(510)567-6700 FAX(510)337-9335

June 20, 1996
STID # 4058

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

RE: City of Emeryville, Former Fire Station
4331 San Pablo Avenue, Emeryville, CA 94608

Dear Mr. Arreguin:

This office has recently reviewed the case file concerning the removal of one 500 gallon underground storage tank in July 1994 at the above referenced site.

On February 21, 1995, one soil boring was advanced to 23 feet below ground surface (bgs) and converted to a groundwater monitoring well. Soil samples collected from the boring at 5.5 feet to 11.5 feet found contamination up to 35 ppm TPH gasoline, 120 ppm TPH diesel, 420 ppb benzene, 16 ppb toluene, 170 ppb ethylbenzene, and 130 ppb xylene. Groundwater monitoring well MW-1 has been sampled for four quarters from 2/95 to 12/95. The last sampling event showed 8700 ppb TPH gasoline, 98000 ppb TPH diesel, 230 ppb benzene, 19 ppb toluene, 42 ppb ethylbenzene and 58 ppb xylene.

Based on this review, the following items must be addressed regarding the investigation / remediation at the site:

- 1) The petroleum hydrocarbon contamination in soil and in groundwater has not been completely characterized.
- 2) Methyl tertiary butyl ether must be included as target analyte in soil and groundwater samples.
- 3) The threat or impact to public health, safety and environment including water quality must be evaluated.

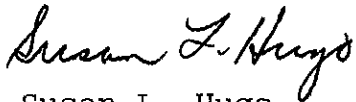
Please submit a work plan which addresses the items listed above no later than August 16, 1996.

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.

Mr. Juan Arreguin
RE: 4331 San Pablo Avenue, Emeryville, CA 94608
June 20, 1996
Page 2 of 2

If you have any questions concerning this letter, please call me
at (510) 567-6780.

Sincerely,



Susan L. Hugo
Senior Hazardous Materials Specialist

c: Mee Ling Tung, Director, Environmental Health
Gordon Coleman, Acting Chief, Environmental Protection /s/files
Kevin Graves, San Francisco Bay RWQCB

STID 4058

RP - City of Emeryville
2200 Powell St 12th Fl
Emeryville CA 94608

DATE: 8/16/94
TO : Local Oversight Program
FROM: BR
SUBJ: Transfer of Eligible Local Oversight Case

Site name: City of Emeryville Fuel
Address: 4331 San Pablo city Emeryville zip 94608

TO BE ELIGIBLE FOR LOP A CASE MUST MEET 3 QUALIFICATIONS:

- 1. Number of Tanks: 1 removed? Y N Date of removal 7/20/94
- 2. Samples received? Y N Contamination level: TPH-0 4800
(ppm and type of test)

Contamination should be over 100 ppm TPH to qualify for LOP

- 3. Petroleum Y N Types: Avgas Jet leaded unleaded Diesel
fuel oil waste oil kerosene solvents

DepRef remaining \$ None Closed with Candace/Leslie? Y N
Neg balance (If no explain why?)

IF YOUR SITE MEETS ALL OF THE ABOVE QUALIFICATIONS YOU SHOULD DO THE FOLLOWING TO TRANSFER THE SITE:

- 1. YOU MUST CLOSE THE DEPOSIT REFUND CASE AT THIS TIME. YOU MUST ACCOUNT FOR ALL TIME YOU HAVE SPENT ON THE CASE AND TURN IN THE ACCOUNT SHEET TO LESLIE. IF THERE ARE FUNDS STILL REMAINING IT IS STILL BETTER TO TRANSFER THE CASE TO LOP AS THE RATE FOR LOP ALLOWS THE ADDITION OF MANAGEMENT AND CLERICAL TIME. DO NOT ATTEMPT TO CONTINUE TO OVERSEE THE SITE SIMPLY BECAUSE THERE ARE FUNDS REMAINING!
- 2. COMPLETE THE A AND B PERMIT APPLICATION FORMS AND GIVE TO CONNIE/ELAINE
- 3. GIVE THE ENTIRE CASE TO THE PROPER LOP STAFF UPSTAIRS FOR THEM TO DO THE REST OF THE TRANSFER AND YOU ARE DONE!

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 Inspection Form

II, III

Site ID # _____ Site Name Emerquille Fuel Today's Date 8/16/94

II.A BUSINESS PLANS (Title 19)

- ___ 1. Immediate Reporting 2703
- ___ 2. Bus. Plan Stds 25503(b)
- ___ 3. RR Cars > 30 days 25503.7
- ___ 4. Inventory Information 25504(a)
- ___ 5. Inventory Complete 2730
- ___ 6. Emergency Response 25504(b)
- ___ 7. Training 25504(c)
- ___ 8. Deficiency 25505(a)
- ___ 9. Modification 25505(b)

Site Address 4331 San Pablo

City Emerquille Zip 94608 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

on site (SECOR for Sampling)

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

II.B ACUTELY HAZ. MATLS

- ___ 10. Registration Form Filed 25533(a)
- ___ 11. Form Complete 25533(b)
- ___ 12. RMPP Contents 25534(c)
- ___ 13. Implement Sch. Req'd? (Y/N)
- ___ 14. OnSite Conseq. Assess. 25524(c)
- ___ 15. Probable Risk Assessment 25534(d)
- ___ 16. Persons Responsible 25534(g)
- ___ 17. Certification 25534(i)
- ___ 18. Exemption Request? (Y/N) 25536(b)
- ___ 19. Trade Secret Requested? 25538

Comments:

On site for side wall sampling of formerly excavated fuel containing UST

III. UNDERGROUND TANKS (Title 23)

- General
- ___ 1. Permit Application 25284 (H&S)
 - ___ 2. Pipeline Leak Detection 25292 (H&S)
 - ___ 3. Records Maintenance 2712
 - ___ 4. Release Report 2651
 - ___ 5. Closure Plans 2670

- Monitoring for Existing Tanks
- 6. Method
 - 1) Monthly Test
 - 2) Daily Vadose Semi-annual groundwater One time soils
 - 3) Daily Vadose One time soils Annual tank test
 - 4) Monthly Endwater One time soils
 - 5) Daily Inventory Annual tank testing Cont. pipe leak det Vadose/gndwater mon
 - 6) Daily Inventory Annual tank testing Cont. pipe leak det
 - 7) Weekly Tank Gauge Annual tank testing
 - 8) Annual Tank Testing Daily inventory
 - 9) Other

- ___ 7. Precip Tank Test Date: 2643
- ___ 8. Inventory Rec. 2644
- ___ 9. Soil Testing 2646
- ___ 10. Ground Water 2647

- New Tanks
- ___ 11. Monitor Plan 2632
 - ___ 12. Access, Secure 2634
 - ___ 13. Plans Submit Date: 2711
 - ___ 14. As Built Date: 2635

*Samples taken at approximately 7 feet
 See the West wall taken first 1-7
 the South " " 2nd ~ 6.5 feet
 east " " 3rd ~ 7 feet
 North " " 4th ~ 7 feet*

following sampling case to be transferred to HOP for continued oversight

over excavation to be done in area of former fuel dispenser (not on site)

Required actions ① Submit samples results to this office within 21 days

Rev 8/88

Contact: X VARINDER S. OBEROI (for SECOR)

Title: Environmental Engr.

Signature: [Signature]

Inspector: Bruce P. Olson

Signature: _____

II, III

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 Inspection Form

II, III

Site ID # _____ Site Name Emergency Today's Date 8/9/99

II.A BUSINESS PLANS (Title 19)

- ___ 1. Immediate Reporting 2703
- ___ 2. Bus. Plan Stds. 25503(b)
- ___ 3. RR Cars > 30 days 25503.7
- ___ 4. Inventory Information 25504(a)
- ___ 5. Inventory Complete 2730
- ___ 6. Emergency Response 25504(b)
- ___ 7. Training 25504(c)
- ___ 8. Deficiency 25505(a)
- ___ 9. Modification 25505(b)

Site Address 4331 San Pablo
 City Emeryville Zip 94 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

II.B ACUTELY HAZ. MATLS

- ___ 10. Registration Form Filed 25533(a)
- ___ 11. Form Complete 25533(b)
- ___ 12. RMPP Contents 25534(c)
- ___ 13. Implement Sch. Req'd? (Y/N)
- ___ 14. OffSite Conseq. Assess. 25524(c)
- ___ 15. Probable Risk Assessment 25534(d)
- ___ 16. Persons Responsible 25534(g)
- ___ 17. Certification 25534(f)
- ___ 18. Exemption Request? (Y/N) 25536(b)
- ___ 19. Trade Secret Requested? 25538

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

III. UNDERGROUND TANKS (Title 23)

- General
- ___ 1. Permit Application 25284 (H&S)
 - ___ 2. Pipeline Leak Detection 25292 (H&S)
 - ___ 3. Records Maintenance 2712
 - ___ 4. Release Report 2651
 - ___ 5. Closure Plans 2670

- Monitoring for Existing Tanks
- ___ 6. Method
 - 1) Monthly Test
 - 2) Daily Vadose
Semi-annual groundwater
One time sols
 - 3) Daily Vadose
One time sols
Annual tank test
 - 4) Monthly Gndwater
One time sols
 - 5) Daily Inventory
Annual tank testing
Cont pipe leak det
Vadose/gndwater mon.
 - 6) Daily Inventory
Annual tank testing
Cont pipe leak det
 - 7) Weekly Tank Gauge
Annual tank testing
 - 8) Annual Tank Testing
Daily Inventory
 - 9) Other _____

- ___ 7. Precs Tank Test 2643
Date: _____
- ___ 8. Inventory Rec. 2644
- ___ 9. Soil Testing 2646
- ___ 10. Ground Water. 2647

- New Tanks
- ___ 11. Monitor Plan 2632
 - ___ 12. Access. Secure 2634
 - ___ 13. Plans Submit 2711
Date: _____
 - ___ 14. As Built 2635
Date: _____

Comments:
 On site at request of Consultant for unwanted outer excavation and supply of Sidewalls -
 2 PM Mo One on site for above activities will return at 3:00 pm to site

15 hours

Returned @ 9:30 spoke with Consultant (SANDRA) re actions at site - not able to over operate - Conflict of time with contractor/City

II, III

Contact: _____
 Title: _____
 Signature: _____

Inspector: Bush
 Signature: _____

MEMORANDUM

DATE: August 1, 1994

TO: files

FROM: Brian P. Oliva

SUBJ: On Site Investigation City of Emeryville Fire Station, 4331
San Pablo, CA on 8/1/94

On site for investigation regarding the removal of one (1) UST from this former fire station. I had previously requested that the City of Emeryville cover the excavated pit due to the fact that there was volatile organic hydrocarbons emanating from the pit during the excavation and removal of the ust. There was also a sump pit in the rear of the facility that was formerly used by the fire department that contained hazardous wastes (waste oil, and waste transmission fluid). Upon revisit, the sump was cleaned of all products/wastes, and otherwise made safe. I have advised the operators of the food service not to use the sump for any reason otherwise the facility may have to be closed.

1132 Harbor L
Alameda, 9
80 Swan Way, #200
Oakland, CA 94621
(415) 271-4320

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Inspection Form

II, III

white -env.health
yellow -facility
pink -files

Site ID # 4058 Site Name City of Emeryville Today's Date 7/20/94

Site Address 4331 San Pablo
City Emeryville Zip 94608 Phone _____

II.A BUSINESS PLANS (Title 19)

- ___ 1. Immediate Reporting 2703
- ___ 2. Bus. Plan Stds. 25503(b)
- ___ 3. RR Cars > 30 days 25503.7
- ___ 4. Inventory Information 25504(a)
- ___ 5. Inventory Complete 2730
- ___ 6. Emergency Response 25504(b)
- ___ 7. Training 25504(c)
- ___ 8. Deficiency 25505(a)
- ___ 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- ___ 10. Registration Form Filed 25533(a)
- ___ 11. Form Complete 25533(b)
- ___ 12. RMPP Contents 25534(c)
- ___ 13. Implement Sch. Req'd? (Y/N)
- ___ 14. OnSite Conseq. Assess. 25524(c)
- ___ 15. Probable Risk Assessment 25534(d)
- ___ 16. Persons Responsible 25534(g)
- ___ 17. Certification 25534(f)
- ___ 18. Exemption Request? (Y/N) 25536(b)
- ___ 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- | | |
|-------------------------------|--|
| General | ___ 1. Permit Application 25284 (H&S) |
| | ___ 2. Pipeline Leak Detection 25292 (H&S) |
| | ___ 3. Records Maintenance 2712 |
| | ___ 4. Release Report 2651 |
| | ___ 5. Closure Plans 2670 |
| Monitoring for Existing Tanks | ___ 6. Method |
| | 1) Monthly Test |
| | 2) Daily Vadose |
| | Semi-annual groundwater |
| | One time soils |
| | 3) Daily Vadose |
| | One time soils |
| | Annual tank test |
| | 4) Monthly Gndwater |
| | One time soils |
| 5) Daily Inventory | |
| Annual tank testing | |
| Cont pipe leak det | |
| Vadose/gndwater mon. | |
| 6) Daily Inventory | |
| Annual tank testing | |
| Cont pipe leak det | |
| 7) Weekly Tank Gauge | |
| Annual tank testing | |
| 8) Annual Tank Testing | |
| Daily Inventory | |
| 9) Other _____ | |
| New Tanks | ___ 7. Precs Tank Test 2643 |
| | Date: _____ |
| | ___ 8. Inventory Rec. 2644 |
| | ___ 9. Soil Testing . 2646 |
| | ___ 10. Ground Water. 2647 |
| ___ 11. Monitor Plan 2632 | |
| ___ 12. Access. Secure 2634 | |
| ___ 13. Plans Submit 2711 | |
| Date: _____ | |
| ___ 14. As Built 2635 | |
| Date: _____ | |

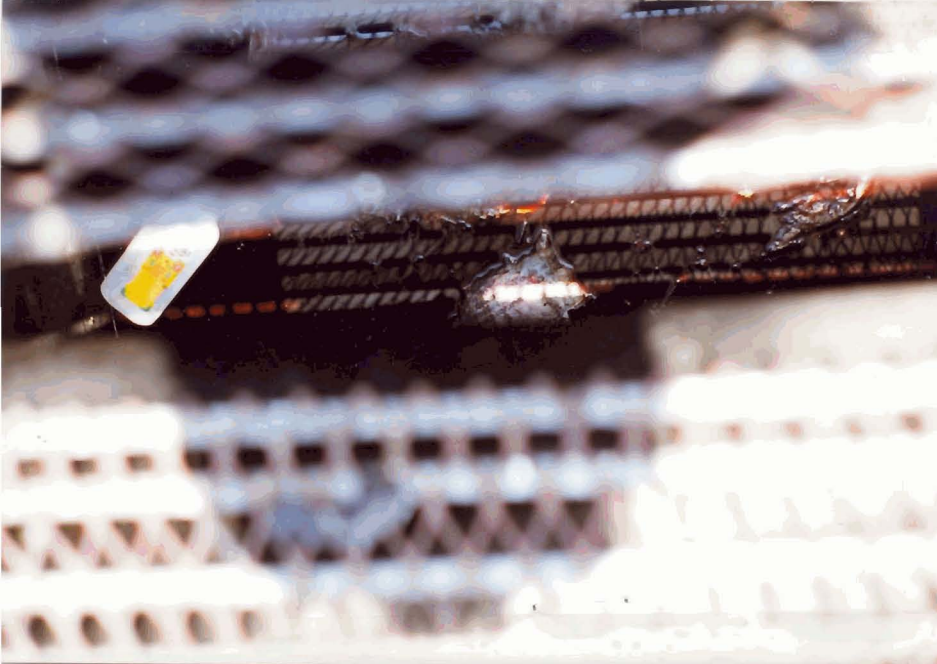
MAX AMT stored > 500 lbs, 55 gal., 200 qrt
Inspection Categories:
___ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
___ II. Business Plans, Acute Hazardous Materials
 III. Underground Tanks Removal
On Site Seacor Environmental

Calif. Administration Code (CAC) or the Health & Safety Code (H&S C)
Comments:
550 gal
on site for removal of UST at West
side of Jamba Fire Station -
Upon arrival I observed
Contaminated Soil -
TPH-6 550 ppm
The vapors in the area are
- in light of this TPH-6 to be analyzed
from soil samples - also necessary to cover
soil stockpile as site is next to
food distribution center - (Pepsi Cola)
Many photographs taken of area -
*TANK has been inerted with 40 lbs of CO2.
Emeryville Fire dept on scene - LEL 790 Ab 10%
Tank pulled at 230. No apparent holes or
the UST -
Small amount of water in pot 5 keep present
on it -
Sample taken at West (full) end of tank
in nature soil/ck -

Rev 6/88

Contact: Alexander Bini Inspector: Bruce P. Oler
Title: Project Geologist
Signature: _____ Signature: _____

II, III



ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

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

white -env.health
yellow -facility
pink -files

Hazardous Materials Inspection Form

II, III

Site ID # 4058 Site Name City of Emeryville Today's Date 7/20/94

Site Address 4331 San Pablo,

City Emeryville Zip 94608 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 Removal

Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

Required Actions
(1) Analyze Soil Samples for TPH-G, TPH-D BTEX.
(2) Submit findings to this office w/ 21 days or less.
(3) Upon Confirmation of Soil Sample Contaminated submit an UnAuthorized Release form (UARF)
(4) Submit a Summary of Activities to this office within 30 days
(5) Conduct stockpile (soil) following removal of UST - and Sampling of Stockpile

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
2. Bus. Plan Sids. 25503(b)
3. RR Cars > 30 days 25503.7
4. Inventory Information 25504(a)
5. Inventory Complete 2730
6. Emergency Response 25504(b)
7. Training 25504(c)
8. Deficiency 25505(a)
9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

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11. Form Complete 25533(b)
12. RMPP Contents 25534(c)
13. Implement Sch. Req'd? (Y/N)
14. OffSite Conseq. Assess. 25524(c)
15. Probable Risk Assessment 25534(d)
16. Persons Responsible 25534(g)
17. Certification 25534(i)
18. Exemption Request? (Y/N) 25536(b)
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III. UNDERGROUND TANKS (Title 23)

- General
1. Permit Application 25284 (H&S)
2. Pipeline Leak Detection 25292 (H&S)
3. Records Maintenance 2712
4. Release Report 2651
5. Closure Plans 2670

- Monitoring for Existing Tanks
6. Method
1) Monthly Test
2) Daily Vadose Semi-annual groundwater One time soils
3) Daily Vadose One time soils Annual tank test
4) Monthly Groundwater One time soils
5) Daily Inventory Annual tank testing Cont pipe leak det Vadose/groundwater mon.
6) Daily Inventory Annual tank testing Cont pipe leak det
7) Weekly Tank Gauge Annual tank testing
8) Annual Tank Testing Daily Inventory
9) Other

- 7. Precs Tank Test 2643
Date:
8. Inventory Rec. 2644
9. Soil Testing 2646
10. Ground Water 2647

- New Tanks
11. Monitor Plan 2632
12. Access. Secure 2634
13. Plans Submit 2711
Date:
14. As Built 2635
Date:

II, III

Contact: Alessandra Broni
Title: Project Geologist
Signature: Alessandra Broni

Inspector: Brad P. Olive
Signature: Brad P. Olive

ACCEPTED

Underground Storage Tank Closure Permit Application

Alameda County Division of Hazardous Materials

80 Swan Way, Suite 108,
Oakland, CA 94621
Telephone: (510) 271-4329

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is as released for issuance of any required building permits for construction/destruction.

One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal. Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws.

Notify this Department at least 72 hours prior to the following required inspections:

- Removal of Tank(s) and Piping
- Sampling
- Final Inspection

Issuance of a) permit to operate, b) permanent site closure, if dependent on compliance with accepted plans and all applicable laws and regulations.

IF THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS, CONTACT SPECIALISTS!

Speed Inductance

① Health + Safety Plan must adhere to 29CFR 1910-120 or Title 8 - DSHA (Cal)

② See: Collection #266 on page 4

Barot. Oler

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND, CA 94621
71-4329

RECEIVED
16 1994

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

1. Business Name FIRE STATION
Business Owner City of Emeryville
 2. Site Address 4331 San Pablo Avenue
City Emeryville Zip _____ Phone NA
 3. Mailing Address 2200 Powell Street, 12th Floor
City Emeryville Zip 94608 Phone (510) 596-4333
 4. Land Owner City of Emeryville
Address 2200 Powell St. City, State Emeryville, CA Zip 94608
 5. Generator name under which tank will be manifested CITY OF EMERYVILLE
- EPA I.D. No. under which tank will be manifested CAC000-71920

6. Contractor Re Horse Constructors, Inc.
Address 3060 Kerner Blvd., Suite A
city San Rafael, CA. 94901 Phone (415) 457-8506
License Type* A-Haz. ID# 555394

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board. Indicate that the certificate has been received, in addition, to holding the appropriate contractors license type.

7. Consultant Science & Engineering Analysis, Corp.
Address 90 New Montgomery Street #620
city San Francisco Phone (415) 882-1548

8. Contact Person for Investigation
Name SANDRA BRUNI Title PROJECT GEOLOGIST
Phone (415) 882-1548

9. Number of tanks being closed under this plan one
Length of piping being removed under this plan 15 feet.
Total number of tanks at facility one

10. 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 H & H Shipyard EPA I.D. No. CAD004771168
Hauler License No. C 334 License Exp. Date 4-30-95
Address 220 China Basin Street
city San Francisco state CA zip 94107

b) Product/Residual Sludge/Rinsate Disposal Site

Name PRC-Patterson EPA I.D. No. CAD083166728
Address 13331 N. Hwy. 33
city Patterson state CA zip 95363

c) Tank and Pipe Transporter

Name H & H Shipyard EPA I.D. No. CAD004771168
Hauler License No. 0334- License Exp. Date 4.30.95
Address 220 China Basin Street
City San Francisco State CA Zip 94107

d) Tank and Piping Disposal Site

Name H & H Shipyard EPA I.D. No. CAD004771168
Address 220 China Basin Street
City San Francisco State CA Zip 94107

11. Experienced Sample Collector

Name SANDRA E. BRUNI
Company Science & Engineering Analysis, Corporation
Address 90 New Montgomery Street, Suite 620
City San Francisco State CA Zip 94105 Phone (415) 882-1548

12. Laboratory

Name Superior Precision Analytical, Inc.
Address 1555 Burke, Unit 1
City San Francisco State CA Zip 94124
State Certification No. 1332

13. Have tanks or pipes leaked in the past? Yes [] No [X]

If yes, describe. _____

14. Describe method to be used for rendering tank inert

Pack with dry ice.
 at least 30 pounds CO₂/1000 gal

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 be sampled (tank contents, soil, groundwater, etc.)	Location and Depth of Samples
Capacity	Use History (see instructions)		
550-gal.	diesel fuel storage.	soil and groundwater if encountered.	beneath tank & beneath product piping at a maximum of two feet below the native soil/backfill interface

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.

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated) 20. yds ³	Sampling Plan STOCKPILED SOIL WILL BE SAMPLED ACCORDING TO TRI-REGIONAL BOARD STAFF RECOMMENDATIONS PENDING ANALYTICAL RESULTS OF INITIAL SOIL SAMPLES FROM EXCAVATION BASE & PRODUCT PIPING AREA OR IF VISIBLE CONTAMINATION IS OBSERVED.

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
TPHd	EPA Method 3550	EPA Method 8015M	1 ppm
BTEX	EPA Method 5030	EPA Method 8020	0.005 ppm

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

- * 18. Submit Worker's Compensation Certificate copy
Name of Insurer ROLLINS HUDIG HALL OF NORTHERN CALIFORNIA, INC.
- 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.

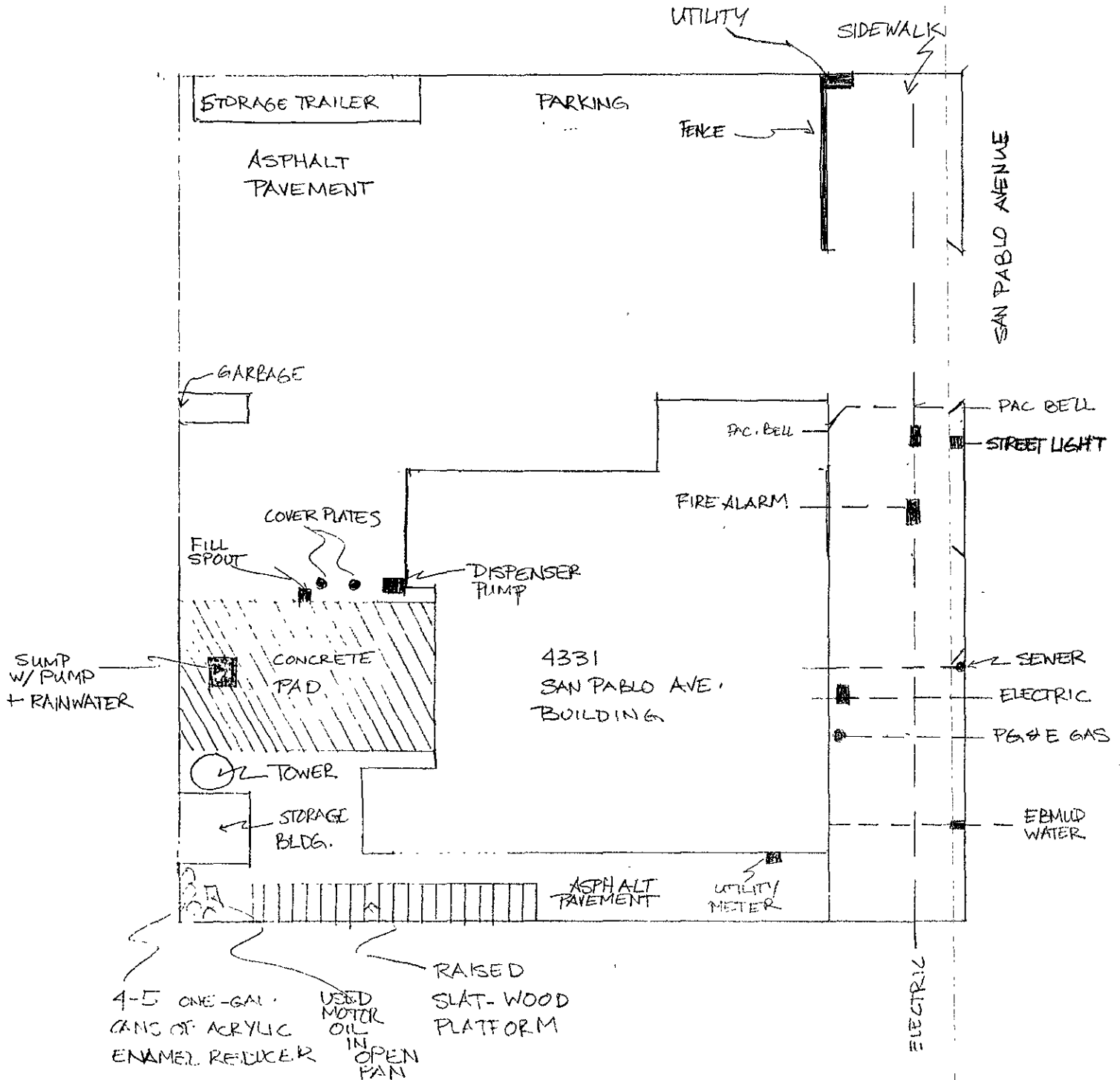
Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

* Signature of Contractor
 Name (please type) Redhorse Constructors Inc. - Mark Warner
 Signature *Mark Warner*
 Date 5-24-94

Signature of site owner or operator
 Name (please type) Juan C. Arreguin
 Signature *Juan C. Arreguin*
 Date 6/24/94

SEACOR

JOB NAME CITY OF EMERYVILLE
JOB NO. 50000-003-01
CALCULATED BY EB DATE 5/94
CHECKED BY _____ DATE _____
SHEET 1 OF 1
SCALE: 1" = 20'





ROLLINS HUDIG HALL

Rollins Hudig Hall of Northern California, Inc.
Insurance Services
One Market, Spear Tower, Suite 2100
San Francisco, CA 94105
Telephone 415 543-9360 Fax 415 543-5628

DATE: June 16, 1994

TELECOPIER MESSAGE COVER SHEET

TOTAL NUMBER OF PAGES (INCLUDING THIS PAGE): 2

PLEASE CALL (415) 512-6176 IF YOU DO NOT RECEIVE ALL PAGES.

TO: FAX NUMBER: 882-4406
FIRM NAME: Seacor

ATTENTION:

FROM: Sharla Rodriguez
Senior Account Administrator

RE: Certificate of Insurance
INSURED: Redhorse Constructors

MESSAGE:

Please find attached your FAX copy of the certificate of insurance you requested. The hard copy will be in today's mail. If you should need any kind of revisions let me know.

If you should have any questions, please contact our office.

Sincerely,

Sharla Rodriguez
Senior Account Administrator

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

6/16/94

PRODUCER

RHH of Northern California
 One Market
 Spear Street Tower Ste. 2100
 San Francisco, CA 94105
 415-543-9360

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY LETTER	A	Republic Indemnity Co of Amer
COMPANY LETTER	B	
COMPANY LETTER	C	
COMPANY LETTER	D	
COMPANY LETTER	E	

INSURED

Mary Melrow
 c/o Redhorse Constructors Inc.
 3060 Kerner Boulevard #A
 San Rafael
 CA 94901

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CD LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$ PERSONAL & ADV. INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED. EXPENSE (Any one person) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
A	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	PC995767	8/01/93	8/01/94	STATUTORY LIMITS EACH ACCIDENT \$ 1000000 DISEASE-POLICY LIMIT \$ 1000000 DISEASE-EACH EMPLOYEE \$ 1000000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: All Operations

CERTIFICATE HOLDER

Seacor
 90 New Montgomery Street
 Suite 620
 San Francisco, CA 94105

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Philip J. Brennan

001743000



CITY OF EMERYVILLE

INCORPORATED 1896

PUBLIC WORKS DEPARTMENT
2200 POWELL, 12TH FLOOR
EMERYVILLE, CALIFORNIA 94608

TEL: (510) 596-4330 FAX: (510) 658-8095

ALCO
HAZMAT
94 JUL 31 AM 9:33

June 30, 1994

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

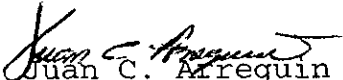
ATTN: Brian P. Oliva (R.E.H.S.)

Dear Brian,

Enclosed, please find an underground Storage Tank application for the 4331 San Pablo Avenue site. Also the closures plan and a check of \$483.00 for the permit fee.

Thank you in advance for your assistance. Should you have any further questions, please call me at (510) 596-4333.

Sincerely yours


Juan C. Arreguin
Public Works Depart.
Project Engineer

CITY OF EMERYVILLE

ORGANIZATION	ACCOUNT	PURCHASE ORDER	INVOICE NUMBER	AMOUNT	DESCRIPTION
410	9087			483.00	UNDERGR TANK FEE-SP FIRE

A143 ALAMEDA COUNTY-ENU HEALTH DIVISION



CITY OF EMERYVILLE
 2200 POWELL STREET, 12TH FLOOR
 EMERYVILLE, CALIFORNIA 94608
 INCORPORATED 1896

EMERYVILLE OFFICE
 FIRST INTERSTATE BANK of California
 5901 CHRISTIE AVENUE
 EMERYVILLE, CALIFORNIA 94608
 11-57/642
 1210

CHECK **061413**
 DATE **61413**
06/27/94

AMOUNT

*****483.00**

PAY

THE SUM OF *****483.00DOLLARS

TO THE
 ORDER
 OF

ALAMEDA COUNTY-ENU HEALTH DIVISION
 HAZARDOUS MATERIALS DIVISION
 80 SWAN WAY, RM 200
 OAKLAND, CA 94621

Rex Bulawski
Ellen Chew

⑈061413⑈ ⑆121000578⑆642998000⑈ 11

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A



COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)

DBA OR FACILITY NAME CITY OF EMERYVILLE		NAME OF OPERATOR CITY OF EMERYVILLE		
ADDRESS 4331 SAN PABLO AVENUE		NEAREST CROSS STREET 43rd STREET	PARCEL # (OPTIONAL) 49-1178-15-3	
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	SITE PHONE # WITH AREA CODE (510) 596-4333
<input checked="" type="checkbox"/> BOX TO INDICATE <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> LOCAL-AGENCY DISTRICTS*		<input type="checkbox"/> COUNTY-AGENCY* <input type="checkbox"/> STATE-AGENCY* <input type="checkbox"/> FEDERAL-AGENCY*		
* If owner of UST is a public agency, complete the following: name of Supervisor of division, section, or office which operates the UST JUAN C. ARREGUIN, D.P.W.				
TYPE OF BUSINESS <input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS		# OF TANKS AT SITE 1
E.P.A. I.D.# (optional) CA0000-71920 TKHQ44-000436e				

EMERGENCY CONTACT PERSON (PRIMARY)

EMERGENCY CONTACT PERSON (SECONDARY) - optional

DAYS: NAME (LAST, FIRST) ARREGUIN, JUAN CARLOS	PHONE # WITH AREA CODE (510) 596-4333	DAYS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE
NIGHTS: NAME (LAST, FIRST) SAME	PHONE # WITH AREA CODE	NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME CITY OF EMERYVILLE		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	PHONE # WITH AREA CODE (510) 596-4333

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER CITY OF EMERYVILLE		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	PHONE # WITH AREA CODE (510) 596-4333

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 322-9669 if questions arise.

TY(TK) HQ **44-000436**

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND
	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 99 OTHER	

VI. LEGAL NOTIFICATION AND BILLING ADDRESS Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING: I. II. III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

OWNER'S NAME (PRINTED & SIGNED) JUAN C. ARREGUIN FOR	OWNER'S TITLE PROJECT ENGINEER	DATE MONTH/DAY/YEAR 05/25/94
THE CITY OF EMERYVILLE X		

LOCAL AGENCY USE ONLY

COUNTY # <input type="text"/>	JURISDICTION # <input type="text"/>	FACILITY # <input type="text"/>
LOCATION CODE - OPTIONAL <input type="text"/>	CENSUS TRACT # - OPTIONAL <input type="text"/>	SUPVISOR - DISTRICT CODE - OPTIONAL <input type="text"/>

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.
OWNER MUST FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: **FIRE STATION**

I. TANK DESCRIPTION COMPLETE ALL ITEMS -- SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D. #	B. MANUFACTURED BY:
C. DATE INSTALLED (MO/DAY/YEAR)	D. TANK CAPACITY IN GALLONS: 550 GALLONS

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL <input type="checkbox"/> 2 PETROLEUM <input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 4 OIL <input type="checkbox"/> 80 EMPTY <input type="checkbox"/> 95 UNKNOWN	B. <input type="checkbox"/> 1 PRODUCT <input type="checkbox"/> 2 WASTE
C. <input type="checkbox"/> 1a REGULAR UNLEADED <input type="checkbox"/> 1b PREMIUM UNLEADED <input type="checkbox"/> 2 LEADED		<input checked="" type="checkbox"/> 3 DIESEL <input type="checkbox"/> 4 GASAHOL <input type="checkbox"/> 5 JET FUEL <input type="checkbox"/> 6 AVIATION GAS <input type="checkbox"/> 7 METHANOL <input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED		
C. A. S. #:		

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM <input type="checkbox"/> 1 DOUBLE WALL <input type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER <input type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank) <input type="checkbox"/> 1 BARE STEEL <input type="checkbox"/> 5 CONCRETE <input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 2 STAINLESS STEEL <input type="checkbox"/> 6 POLYVINYL CHLORIDE <input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 3 FIBERGLASS <input type="checkbox"/> 7 ALUMINUM <input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 99 OTHER
C. INTERIOR LINING <input type="checkbox"/> 1 RUBBER LINED <input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 2 ALKYD LINING <input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 3 EPOXY LINING <input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 4 PHENOLIC LINING <input type="checkbox"/> 99 OTHER
IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___		
D. CORROSION PROTECTION <input type="checkbox"/> 1 POLYETHYLENE WRAP <input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 2 COATING <input type="checkbox"/> 91 NONE	<input type="checkbox"/> 3 VINYL WRAP <input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC <input type="checkbox"/> 99 OTHER
E. SPILL AND OVERFILL SPILL CONTAINMENT INSTALLED (YEAR) _____ OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) _____		

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A U 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 99 OTHER
B. CONSTRUCTION	A U 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A U 4 FIBERGLASS PIPE
	A U 5 ALUMINUM	A U 6 CONCRETE	A U 7 STEEL W/ COATING	A U 8 100% METHANOL COMPATIBLE W/FRP
	A U 9 GALVANIZED STEEL	A U 10 CATHODIC PROTECTION	A U 95 UNKNOWN	A U 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input checked="" type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input checked="" type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING _____ GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) JUAN C. ARREGUIN FOR CITY OF EMERYVILLE X	DATE
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LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE		PERMIT EXPIRATION DATE	

THIS FORM MUST BE ACCOMPANIED BY A PERMIT APPLICATION - FORM A, UNLESS A CURRENT FORM A HAS BEEN FILED.
FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A



COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)

DBA OR FACILITY NAME CITY OF EMERYVILLE		NAME OF OPERATOR CITY OF EMERYVILLE		
ADDRESS 4331 SAN PABLO AVENUE		NEAREST CROSS STREET 43rd STREET	PARCEL # (OPTIONAL) 49-1178-15-3	
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	SITE PHONE # WITH AREA CODE (510) 596-4333
<input checked="" type="checkbox"/> BOX TO INDICATE <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> LOCAL-AGENCY DISTRICTS*		<input type="checkbox"/> COUNTY-AGENCY* <input type="checkbox"/> STATE-AGENCY* <input type="checkbox"/> FEDERAL-AGENCY* * If owner of UST is a public agency, complete the following: name of Supervisor of division, section, or office which operates the UST JUAN C. ARREGUIN, D.P.W.		
TYPE OF BUSINESS <input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE 1	E.P.A. I.D.# (optional) CA0000-1920 TKHQ44-000436e

EMERGENCY CONTACT PERSON (PRIMARY)		EMERGENCY CONTACT PERSON (SECONDARY) - optional	
DAYS: NAME (LAST, FIRST) ARREGUIN, JUAN CARLOS	PHONE # WITH AREA CODE (510) 596-4333	DAYS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE
NIGHTS: NAME (LAST, FIRST) SAME	PHONE # WITH AREA CODE	NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME CITY OF EMERYVILLE		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	PHONE # WITH AREA CODE (510) 596-4333
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER CITY OF EMERYVILLE		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 2200 POWELL STREET		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> INDIVIDUAL <input checked="" type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY	PHONE # WITH AREA CODE (510) 596-4333
CITY NAME EMERYVILLE		STATE CA	ZIP CODE 94608	

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 322-9669 if questions arise.

TY(TK) HQ **44-000436**

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND
	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 99 OTHER	

VI. LEGAL NOTIFICATION AND BILLING ADDRESS Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING: I. II. III.

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OWNER'S NAME (PRINTED & SIGNED) JUAN C. ARREGUIN FOR THE CITY OF EMERYVILLE X	OWNER'S TITLE PROJECT ENGINEER	DATE MONTH/DAY/YEAR 05/25/94
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LOCAL AGENCY USE ONLY

COUNTY # <input type="text"/>	JURISDICTION # <input type="text"/>	FACILITY # <input type="text"/>
LOCATION CODE - OPTIONAL <input type="text"/>	CENSUS TRACT # - OPTIONAL <input type="text"/>	SUPVISOR - DISTRICT CODE - OPTIONAL <input type="text"/>

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STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



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	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: FIRE STATION

I. TANK DESCRIPTION COMPLETE ALL ITEMS -- SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D.#	B. MANUFACTURED BY:
C. DATE INSTALLED (MO/DAY/YEAR)	D. TANK CAPACITY IN GALLONS: <u>550 GALLONS</u>

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input type="checkbox"/> 1 PRODUCT	C. <input type="checkbox"/> 1a REGULAR UNLEADED	<input checked="" type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 5 JET FUEL	
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED					C. A. S. #:

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D AND E

A. TYPE OF SYSTEM	<input type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input checked="" type="checkbox"/> 95 UNKNOWN
	<input type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank)	<input type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 8 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input checked="" type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 4 PHENOLIC LINING
			<input checked="" type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___			
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
			<input checked="" type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
E. SPILL AND OVERFILL	SPILL CONTAINMENT INSTALLED (YEAR) _____		OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) _____

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A U 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 99 OTHER
B. CONSTRUCTION	A U 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN
				A U 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	A U 2 STAINLESS STEEL	A U 3 POLYVINYL CHLORIDE (PVC)	A U 4 FIBERGLASS PIPE
	A U 5 ALUMINUM	A U 6 CONCRETE	A U 7 STEEL W/ COATING	A U 8 100% METHANOL COMPATIBLE W/FRP
	A U 9 GALVANIZED STEEL	A U 10 CATHODIC PROTECTION	A U 95 UNKNOWN	A U 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input checked="" type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VADOZE MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input checked="" type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING _____ GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) <u>JUAN C. ARREGUIN FOR CITY OF EMERYVILLE</u> X	DATE
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LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
PERMIT NUMBER	PERMIT APPROVED BY/DATE		PERMIT EXPIRATION DATE	

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