

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

Certified Mail #: 7006 3450 0000 0503 3930

November 13, 2008

ENVIRONMENTAL HEALTH SERVICES

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

NOTICE OF RESPONSIBILITY

Site Name & Address:

**GOLDSMITH LATHROP
5813-5815 SHELLMOUND ST
Emeryville, CA 94608**

**Local ID: RO0000071
Related ID: 5557
RWQCB ID: 01-2393
Global ID: T0600102203**

Responsible Party:

**LADIES & GENTLEMEN
BRE PROPERTIES INC
525 MARKET ST. FL 4
SAN FRANCISCO CA 94105**

Date First Reported: 9/11/1989

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

Funding for Oversight: LOPS - LOP State Fund

Multiple RPs?: Yes

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

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5650.

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

Please contact your caseworker JAKUB, BARBARA, at this office at (510)639-1287 if you have questions regarding your site.



ARIU LEVI, Director
Contract Project Director

Date: 11/14/08

Action: Add
Reason: ADD RPs

ALAMEDA COUNTY ENVIRONMENTAL HEALTH
LUFT LOCAL OVERSIGHT PROGRAM

ATTACHMENT A - RESPONSIBLE PARTIES DATA SHEET

November 13, 2008

Site Name & Address:
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5813-5815 SHELLMOUND ST
Emeryville, CA 94608

Local ID: RO0000071
Related ID: 5557
RWQCB ID: 01-2393
Global ID: T0600102203

All Responsible Parties

RP has been named a Primary RP - F P LATHROP

GOLDSMITH LATHROP

2000 POWELL STREET | EMERYVILLE, CA 94608-1804 | Phone No Phone Number Listed

RP has been named a Primary RP - MARCIA F & SANDRA HYDE

MARCIA F & SANDRA HYDE TRUST

2000 POWELL ST | EMERYVILLE, CA 94608-1804 | Phone No Phone Number Listed

RP has been named a Primary RP - LADIES & GENTLEMEN

BRE PROPERTIES INC

525 MARKET ST. FL 4 | SAN FRANCISCO, CA 94105 | Phone No Phone Number Listed

RP has been named a Primary RP - C/O PROP TAX DEPT

SPK INDUSTRIAL PORTFOLIO LLC

PO BOX A-3879 | CHICAGO, IL 60690 | Phone No Phone Number Listed

Responsible Party Identification Background

Alameda County Environmental Health (ACEH) names a "Responsible Party," as defined under 23 C.C.R. Sec. 2720. Section 2720 defines a responsible party 4 ways. An RP can be:

1. "Any person who owns or operates an underground storage tank used for the storage of any hazardous substance."
2. "In the case of any underground storage tank no longer in use, any person who owned or operated the underground storage tank immediately before the discontinuation of its use."
3. "Any owner of property where an unauthorized release of a hazardous substance from an underground storage tank has occurred."
4. "Any person who had or has control over an underground storage tank at the time of or following an unauthorized release of a hazardous substance."

ACEH has named the responsible parties for this site as detailed below.

ATTACHMENT A - RESPONSIBLE PARTIES DATA SHEET (Continued)

November 13, 2008

Responsible Party Identification

RO0000071, 5813-5815 San Pablo Avenue, Oakland, CA 94608

Existence of Unauthorized Release

A 2,000-gallon underground storage tank was removed from the site in 1989. During the investigation 23,000 micograms per liter (ug/L) total petroleum hydrocarbons as gasoline and 32 ug/L benzene were detected in groundwater indicating that a release from the underground storage tanks had occurred. Subsequent groundwater investigations indicate that a maximum concentration of 1,500 ug/L benzene was detected in the most recent groundwater samples from 1998.

Responsible Party Identification

FP Lathrop c/o Goldsmith Lathrop owned and operated the underground storage tanks from March 1, 1969 to July 14, 1994. FP Lathrop meets the definition of a responsible party for the site because he had control over an underground storage tank at the time or following an unauthorized release of a hazardous substance (Definition 4) and owned the property where an unauthorized release occurred, (Definition 3).

Marcia and Sandra Hyde Trust owned the property starting on July 14, 1994. The Marcia and Sandra Hyde Trust meet the definition of a responsible party for the site because they owned the property where an unauthorized release occurred, (Definition 3).

SPK Industrial Portfolio LLC purchased the property on January 28, 1997 and was the property owner following an unauthorized petroleum hydrocarbon release(s). SPK Industrial Portfolio LLC meets the definition of a responsible party for the site because they owned the property where an unauthorized release occurred, (Definition 3).

BRE Properties, Inc. purchased the property on June 29, 2005 and was the property owner following an unauthorized petroleum hydrocarbon release(s). BRE Properties, Inc. meets the definition of a responsible party for the site because they owned the property where an unauthorized release occurred, (Definition 3).

7006 3450 0000 0503 3930

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OFFICIAL USE	
Postage \$	Postmark Here
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage	
Sent To	LADIES & GENTLEMEN
Street, Apt. No. or PO Box No.	BRE PROPERTIES INC
City, State, ZIP	525 MARKET STREET, 4TH FLOOR
	SAN FRANCISCO, CA 94105
PS Form 3800, August 2006 See Reverse for Instructions	

UNITED STATES POSTAL SERVICE



First-Class Mail
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USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

**Environmental Health Services
Environmental Protection
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
Attn: Barbara, RO#71**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <i>Alameda</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Alameda</i></p> <p>C. Date of Delivery <i>12/1</i></p>
<p>1. Article Addressed to:</p> <p>LADIES & GENTLEMEN BRE PROPERTIES INC 525 MARKET STREET, 4TH FLOOR SAN FRANCISCO, CA 94105</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: DEC 04 2008 Environmental Health</p> <p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7006 3450 0000 0503 3930</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

Certified Mail #: 7006 3450 0000 0503 3947

November 13, 2008

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

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Emeryville, CA 94608**

**Local ID: RO0000071
Related ID: 5557
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**C/O PROP TAX DEPT
SPK INDUSTRIAL PORTFOLIO LLC
PO BOX A-3879
CHICAGO IL 60690**

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Total Posts	C/O PROP TAX DEPT
Sent To	SPK INDUSTRIAL PORTFOLIO LLC
Street, Apt. # or PO Box No.	P O BOX A-3879
City, State, Zi.	CHICAGO, IL 60690
PS Form 3800, August 2006	
See Reverse for Instructions	

UNITED STATES POSTAL SERVICE



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**Environmental Health Services
Environmental Protection
1131 Harbor Bay Parkway
Alameda, CA 94502-6577
Attn: Barbara, RO#71**

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**C/O PROP TAX DEPT
SPK INDUSTRIAL PORTFOLIO LLC
P O BOX A-3879
CHICAGO, IL 60690**

2. Article Number
(Transfer from service label)

7006 3450 0000 0503 3947

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *[Signature]*

- Agent
 Addressee

B. Received by (Printed Name)

Derrick Walker

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below No

DELIVERED
DEC 18 2008

3. Service Type

- Certified Mail Return Receipt for Merchandise
 Registered C.O.D.
 Insured Mail

4. Restricted Delivery? (Extra Fee)

Yes