## ALAMEDA COUNTY

## HEALTH CARE SERVICES





DAVID J. KEARS, Agency Director



Certified Mail # 7 773 036 379

10/28/94 STID# 4903 ALAMEDA COUNTY CC4580 DEPT. OF ENVIRONMENTAL HEALTH ENVIRONMENTAL PROTECTION DIVISION 1131 HARBOR BAY PKWY., #250 ALAMEDA CA 94502-6577

## Notice of Requirement to Reimburse

K.c. Ma C/o John Kao, Attorney 650 California St., 29th San Francisco C A 94108

Former Chrysler Dealership 2417 Broadway Oakland , CA 94612

Responsible Party Property Owner

SITE

Date First Reported 07/28/94

Substance: Gasoline Petroleum: (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of site investigation or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. YOU ARE HEREBY NOTIFIED that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Jennifer EBERLE, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

Edgar B. Howell, III, Chief Contract Project Director

Mike Harper, SWRCB

SWRCB Use:

Reason: / (CW) : X

#4903 JE

Z 773 036 379



Receipt for Certified Mail No Insurance Coverage Provided Do not use for International Mail (See Reverse)

	Sent to K.C. Ma		
	Street and No. 650 California St., 29th		
	P.O., State and ZIP Code San Francisco CA 94108		
	Postage	\$	
	Certified Fee		
	Special Delivery Fee		
PS Form <b>3800, March</b> 1993	Restricted Delivery Fee	<u> </u>	
	Return Receipt Showing to Whom & Date Delivered		
	Return Receipt Showing to Whom, Date, and Addressee's Address		
	TOTAL Postage & Fees	\$	
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	Complete terms 1 and/er 2 for additional services. Complete items 3, and 4s & b. Print your name and address on the reverse of this form so the turn this card to you. Attach this form to the front of the mailpiece, or on the backies not permit. Write "Return Receipt Requested" on the mailpiece below the at The Return Receipt will show to whom the article was delivered allvered.  3. Article Addressed to:  JE #4903	tif space 1. Addressee's Add.	
ADDRESS completed	K. C. Ma C/O John Kao, Attorney 650 California St., 29th San Francisco CA 94108	Z 773 036 379  4b. Service Type Registered Insured  COD Express Mail Return Receipt for Merchandise  7. Date of Delivery	
	. Signature (Addressee)	8. Addressee's Address (Only if requested and fee is paid)	
변 <u>6</u> .	. Signature (Agent)		