

TRC
Customer-Focused Solutions

Roz B

December 7, 2005

Project # 42016504

Mr. Don Hwang
Alameda County Health Services
1131 Harbor Bay Parkway
Alameda, CA 94502-6577

Site: 76 Service Station #0018
6201 Claremont Avenue
Oakland, California

DEC 12 2005

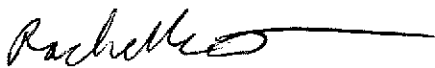
Re: REQUEST FOR WELL LOCATIONS

Dear Mr. Hwang:

On behalf of ConocoPhillips, TRC is performing a sensitive receptor survey for the above referenced sites. The survey is for the area within a ½ mile radius of 76 Service Station 6201 Claremont Avenue, Oakland. We request from you the authorization to continue with this survey by viewing well completion reports for those domestic and municipal wells within a ½ mile radius of the subject site. Upon your signature and return, the attached DWR Well Completion Report Release Agreement will be forwarded to the Department of Water Resources.

Should you have any questions, please feel free to call Keith Woodburne at (925) 688-2488 or myself at (925) 688-2464. Thank you for your time.

Sincerely,
TRC



Rachelle Dunn
Staff Geologist

STATE OF CALIFORNIA - THE RESOURCES AGENCY

GRAY DAVIS, Governor

DEPARTMENT OF WATER RESOURCES

CENTRAL DISTRICT

3251 S Street
Sacramento, CA 95816
(916) 227-7632
(916) 227-7600(Fax)

NORTHERN DISTRICT

2440 Main Street
Red Bluff, CA 96080
(530) 529-7300
(530) 529-7322 (Fax)

SAN JOAQUIN DISTRICT

3374 East Shields Avenue
Fresno, CA 93726
(559) 230-3300
(559) 230-3301 (Fax)

SOUTHERN DISTRICT

770 Fairmont Avenue
Glendale, CA 91203
(818) 543-4600
(818) 543-4604 (Fax)

WELL COMPLETION REPORT RELEASE AGREEMENT--AGENCY

(Government and Regulatory Agencies and their Authorized Agents)

Project/Contract No. 42016504 County Alameda

Township, Range, and Section T1S, R2W, Sec 11, 12, 13, 14 & Radius 1/2 Mile
(Must include entire study area and a map that shows the area of interest.) T1S, R3W, sec 7, 18

Under California Water Code Section 13752, the agency named below requests permission from Department of Water Resources to inspect or copy, or for our authorized agent named below to inspect or copy, Well Completion Reports filed pursuant to Section 13751 to (check one):

Make a study, or,

Perform an environmental cleanup study associated with an unauthorized release of a contaminant within a distance of 2 miles.

In accordance with Section 13752, information obtained from these reports shall be kept confidential and shall not be disseminated, published, or made available for inspection by the public without written authorization from the owner(s) of the well(s). The information shall be used only for the purpose of conducting the study. Copies obtained shall be stamped **CONFIDENTIAL** and shall be kept in a restricted file accessible only to agency staff or the authorized agent.

TRC, Rachelle Dunn
Authorized Agent

1590 Solano way, St A
Address

Concord, CA 94520
City, State, and Zip Code

Signature Rachelle

Title Staff Geologist

Telephone (925) 688-2464

Fax (925) 688-0388

Date 12/7/05

E-mail rdunn@trcsolutions.com

ALAMEDA COUNTY
GOVERNMENT AGENCY
ENVIRONMENTAL HEALTH SERVICES
1151 HARBOR BAY PARKWAY
ALAMEDA, CALIFORNIA 94502-8577

Address

City, State, and Zip Code

Signature Don Hwang

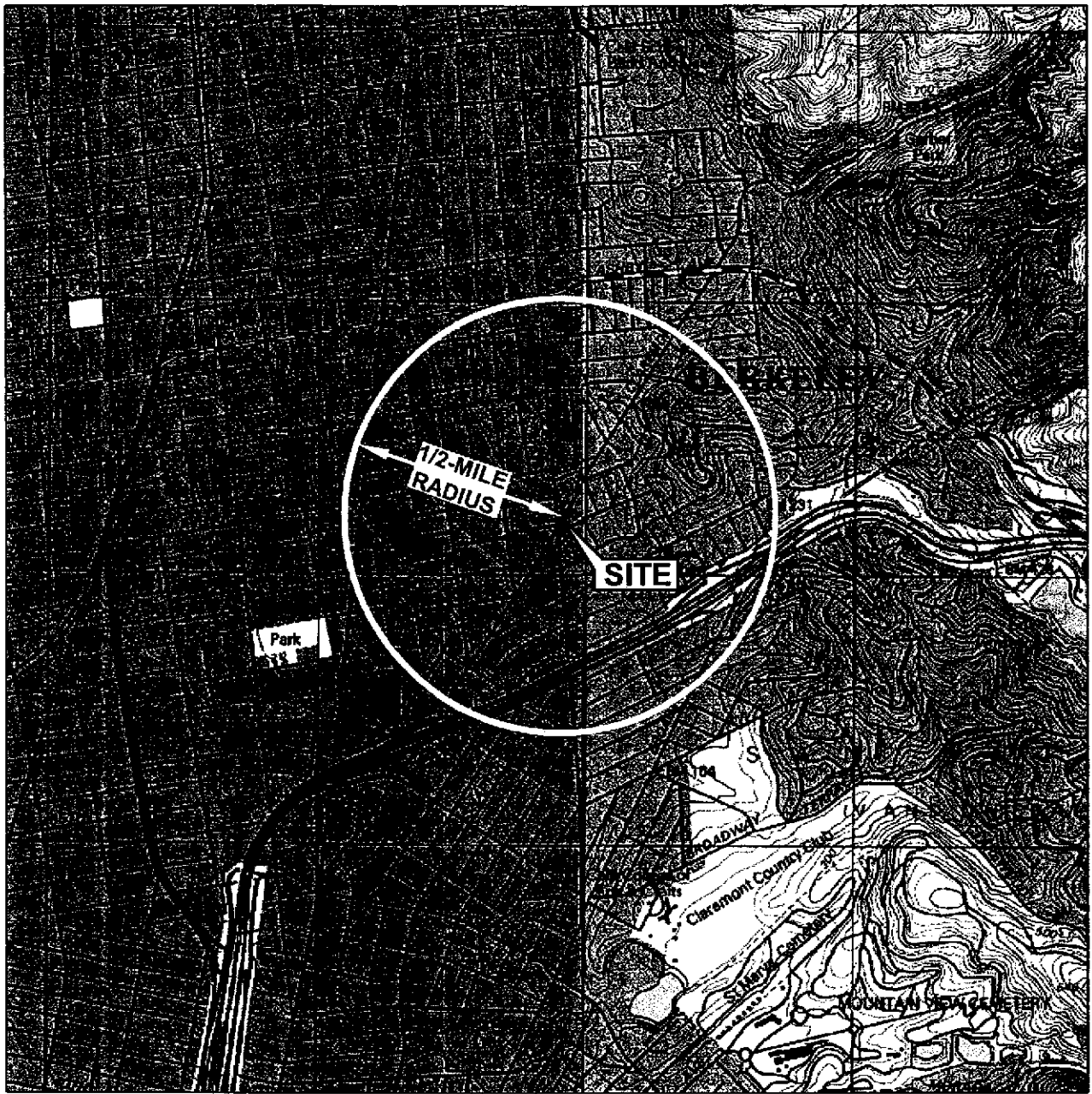
Title HAZARDOUS MATERIALS

SPECIALIST
Telephone (510) 567-6746

Fax (510) 337-9335

Date 12/29/05

E-mail don.hwang@acgov.org



1 MILE 3/4 1/2 1/4 0 1 MILE



SCALE 1 : 24,000



SOURCE:

United States Geological Survey
7.5 Minute Topographic Maps:
Oakland East and Oakland West
Quadrangles, California

**VICINITY MAP WITH HALF-MILE
RADIUS AROUND SITE**

Tosco (76) Service Station 0018
6201 Claremont Avenue
Oakland, California

TRC

FIGURE 1

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



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

July 17, 2001

David De Witt
Tosco Marketing Co.
2000 Crow Canyon Pl., #400
San Ramon, CA 94583

Dear Mr. De Witt,

Subject: Tosco 76 Branded Facility No. 0018, 6201 Claremont Ave., Oakland, CA
RO0000243

The first and second quarter 2001 groundwater monitoring & sampling reports dated March 26, 2001 and June 15, 2001, prepared by Gettler-Ryan were reviewed. Total Petroleum Hydrocarbons-Gasoline (TPH-G) concentrations have increased in monitoring well MW-1. The May 11, 2001 sample had a concentration of 1,250 ug/l. Concentrations for prior quarters were 330, 169, and 120 ug/l. The Methyl Tertiary-Butyl Ether (MTBE) concentration for MW-1 was 122 ug/l on May 11, 2001. All other analytes have been Not Detected (ND). Please continue with quarterly groundwater monitoring & sampling.

If you have any questions about the content of this letter, you may call me at (510) 567-6746.

Sincerely,

Don Hwang
Hazardous Materials Specialist

✓ C: file

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



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

February 22, 2001

David De Witt
Tosco Marketing Co.
2000 Crow Canyon Pl., #400
San Ramon, CA 94583

Dear Mr. De Witt,

Subject: Tosco 76 Branded Facility No. 0018, 6201 Claremont Ave., Oakland, CA
StId 512

"Fourth Quarter 2000 Groundwater Monitoring & Sampling Report" prepared by Gettler-Ryan, dated December 14, 2000 was reviewed. The concentrations of analytes sought thus far have been low or Not Detected (ND). Therefore, if future results are also low or ND, then a request for case closure may be warranted. In the meantime, please continue with groundwater monitoring & sampling.

Please call me at (510) 567-6746 if you have any questions about the content of this letter.

Sincerely,

Don Hwang
Hazardous Materials Specialist

a
C: Deanna L. Harding, Gettler-Ryan Inc., 6747 Sierra Ct., Suite J, Dublin, CA 94568

✓ file



State Water Resources Control Board



Winston H. Hickox
Secretary for
Environmental
Protection

Division of Clean Water Programs
1001 I Street • Sacramento, California 95814 • (916) 341-5714
Mailing Address: P.O. Box 944212 • Sacramento, California • 94244-2120
FAX (916) 341-5806 • Internet Address: <http://www.swrcb.ca.gov/cwphome/ustcf>

Gray Davis
Governor

JAN 25 2001

Ron Schwab
Unocal Corp.
376 Valencia Ave S #A-113
Brea, CA 92823-6345

UNDERGROUND STORAGE TANK CLEANUP FUND PROGRAM, NOTICE OF ELIGIBILITY DETERMINATION: CLAIM NUMBER 016133; FOR SITE ADDRESS: 6201 CLAREMONT AVE, OAKLAND

Your claim has been accepted for placement on the Priority List in Priority Class "D" with a deductible of \$10,000.

We have completed our initial review. The next step in the claim review process is to conduct a compliance review.

Compliance Review: Staff reviews, verifies, and processes claims based on the priority and rank within a priority class. After the Board adopts the Priority List, your claim will remain on the Priority List until your Priority Class and rank are reached. At that time, staff will conduct an extensive Compliance Review at the local regulatory agency or Regional Water Quality Control Board. During this Compliance Review, staff may request additional information needed to verify eligibility. Once the Compliance Review is completed, staff will determine if the claim is valid or must be rejected. If the claim is valid, a Letter of Commitment will be issued obligating funds toward the cleanup. If staff determine that you have not complied with regulations governing site cleanup, you have not supplied necessary information or documentation, or your claim application contains a material error, the claim will be rejected. In such event, you will be issued a Notice of Intended Removal from the Priority List, informed of the basis for the proposed removal of your claim, and provided an opportunity to correct the condition that is the basis for the proposed removal. Your claim will be barred from further participation in the Fund, if the claim application contains a material error resulting from fraud or intentional or negligent misrepresentation.

Record keeping: During your cleanup project you should keep complete and well organized records of all corrective action activity and payment transactions. If you are eventually issued a Letter of Commitment, you will be required to submit: (1) copies of detailed invoices for all corrective action activity performed (including subcontractor invoices), (2) copies of canceled checks used to pay for work shown on the invoices, (3) copies of technical documents (bids, narrative work description, reports), and (4) evidence that the claimant paid for the work performed (not paid by another party). These documents are necessary for reimbursement and failure to submit them could impact the amount of reimbursement made by the Fund. *It is not necessary to submit these documents at this time; however, they will definitely be required prior to reimbursement.*

Compliance with Corrective Action Requirements: In order to be reimbursed for your eligible costs of cleanup incurred after December 2, 1991, you must have complied with corrective action requirements of Article 11, Chapter 16, Division 3, Title 23, California Code of Regulations. Article 11 categorized the corrective action process into *phases*. In addition, Article 11 requires the responsible party to submit an

investigative workplan/Corrective Action Plan (CAP) before performing any work. This phasing process and the workplan/CAP requirements were intended to:

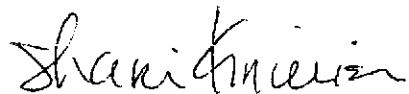
1. help the responsible party undertake the necessary corrective action in a cost-effective, efficient and timely manner;
2. enable the regulatory agency to review and approve the proposed cost-effective corrective action alternative before any corrective action work was performed; and
3. ensure the Fund will only reimburse the most cost-effective corrective action alternative required by the regulatory agency to achieve the minimum cleanup necessary to protect human health, safety and the environment.

In some limited situations *interim cleanup* will be necessary to mitigate a demonstrated immediate hazard to public health, or the environment. Program regulations allow the responsible party to undertake interim remedial action after: (1) notifying the regulatory agency of the proposed action, and; (2) complying with any requirements that the regulatory agency may set. Interim remedial action should only be proposed when necessary to mitigate an immediate demonstrated hazard. ***Implementing interim remedial action does not eliminate the requirement for a CAP and an evaluation of the most cost-effective corrective action alternative.***

Three bids and Cost Preapproval: Only corrective action costs required by the regulatory agency to protect human health, safety and the environment can be claimed for reimbursement. You must comply with all regulatory agency time schedules and requirements and you must obtain three bids for any required corrective action. Unless waived in writing, you are required to obtain preapproval of costs for all future corrective action work. ***If you do not obtain three bids and cost preapproval, reimbursement is not assured and costs may be rejected as ineligible.***

If you have any questions, please contact me at (916) 341-5714.

Sincerely,



Shari Knieriem
Claims Review Unit
Underground Storage Tank Cleanup Fund

cc: Mr. Steve Morse
RWQCB, Region 2
1515 Clay Street, Ste. 1400
Oakland, CA 94612

Mr. Thomas Peacock
Alameda County EHD
1131 Harbor Bay Pkway, 2nd Fl.
Alameda, CA 94502-6577

STID
512

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



ENVIRONMENTAL HEALTH SERVICES

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

June 2, 2000

David De Witt
Tosco Marketing Co.
2000 Crow Canyon Pl., #400
San Ramon, CA 94583

Dear Mr. De Witt,

Subject: Tosco 76 Branded Facility No. 0018, 6201 Claremont Ave., Oakland, CA
StId 512

"Work Plan for Monitoring Well Installation at Tosco 76 Branded Facility No. 0018, 6201 Claremont Ave., Oakland, CA, Report No. 140061.03-1" prepared by Gettler-Ryan, dated February 15, 2000 was reviewed and is approved. The work plan may be implemented.

Please call me at (510) 567-6746 if you have any questions about the content of this letter.

Sincerely,

Don Hwang
Hazardous Materials Specialist

es
C: file

LOP - RECORD CHANGE REQUEST FORM

printed:
03/13/2000

Mark Out What Needs Changing and Hand to LOP Data Entry
(Name/Address changes go to Annual Programs Data Entry)

Insp: DH

AGENCY # : 10000 SOURCE OF FUNDS: F SUBSTANCE: 8006619
 StID : 512 LOC: -0-
 SITE NAME: Unocal Station #0018 DATE REPORTED : 03/18/1998
 ADDRESS : 6201 -0 Claremont Ave DATE CONFIRMED: 03/18/1998
 CITY/ZIP : Oakland 94619 MULTIPLE RPs : N

SITE STATUS

CASE TYPE: U CONTRACT STATUS: 4 PRIOR CODE: 2A2 EMERGENCY RESP: -0-
 RP SEARCH: S DATE COMPLETED: 03/18/1998
 PRELIMINARY ASMNT: - DATE UNDERWAY: -0- DATE COMPLETED: -0-
 REM INVESTIGATION: - DATE UNDERWAY: -0- DATE COMPLETED: -0-
 REMEDIAL ACTION: - DATE UNDERWAY: -0- DATE COMPLETED: -0-
 POST REMED ACT MON: - DATE UNDERWAY: -0- DATE COMPLETED: -0-

ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 03/13/1998
 LUFT FIELD MANUAL CONSID: -0-
 CASE CLOSED: - DATE CASE CLOSED: -0-
 DATE EXCAVATION STARTED : 03/07/1997 REMEDIAL ACTIONS TAKEN: -0-

RESPONSIBLE PARTY INFORMATION

RP#1-CONTACT NAME: Tina Berry
 COMPANY NAME: Tosco Marketing Compliance
 ADDRESS: 2000 Crow Canyon Rd, 400
 CITY/STATE: San Ramon, Ca - 94583

INSPECTOR VERIFICATION:

NAME	SIGNATURE	DATE

DATA ENTRY INPUT:

Name/Address Changes Only

Case Progress Changes

LOP	DATE	LOP	DATE

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

May 27, 1998

ENVIRONMENTAL HEALTH SERVICES

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

Tina Berry
Tosco Marketing Company
Environmental Compliance Group
2000 Crow Canyon Place, Suite 400
San Ramon, California 94583

Subject: 6201 Claremont Avenue, Oakland, California

Dear Ms Berry:

I am in receipt of the soil and groundwater sampling report, dated April 17, 1997, prepared by Kaprealian Engineering for the above referenced site. One waste oil underground storage tank and two gasoline underground storage tanks were removed on March 5, 1997. Subsequent to tank removal, soil samples were collected from the tank pit and pump island area and analyzed for petroleum hydrocarbons.

The laboratory results of the soil samples indicate the presence of benzene in the area of the dispenser islands and tank pit. Hence, please submit a work plan within 30 days from the date of this letter to define the extent of soil and groundwater contamination. If you have any questions, you may reach me at (510) 567-6764.

Sincerely,

Madhulla Logan
Hazardous Material Specialist

Revised Table 4

Tier 1 Groundwater Risk-Based Screening Levels

Exposure Pathway	Receptor Scenario	Unit	Target Cancer Risk Level Benzene			ACDEH Accepted Risk Level ¹	Hazard Quotient		
			10 ⁻⁴	10 ⁻⁵	10 ⁻⁶		Ethylbenzene	Toluene	Xylenes
							1	1	1
groundwater volatilization to outdoor air	residential	mg/l	1100	110	11	31.9	>S ¹	>S	>S
groundwater ingestion	residential	mg/l	<u>0.294</u> ³	<u>0.0294</u>	<u>0.00294</u>	<u>0.0085</u>	3.65	7.3	73
groundwater vapor intrusion from groundwater to buildings	residential	mg/l	2.38	<u>0.238</u>	<u>0.0238</u>	<u>0.069</u>	77.5	32.8	>S
groundwater volatilization to outdoor air	commercial/industrial	mg/l	>S	184	18.4	53.4	>S	>S	>S
groundwater ingestion	commercial/industrial	mg/l	<u>0.987</u>	<u>0.0987</u>	<u>0.00987</u>	<u>0.029</u>	10.2	20.4	>S
groundwater vapor intrusion from groundwater to buildings	commercial/industrial	mg/l	7.39	<u>0.739</u>	<u>0.0739</u>	<u>0.21</u>	>S	85.0	>S
							0		
Maximum Contaminant Level		mg/l	<u>0.005</u>				0.7	1.0	1.0
Maximum Detected Concentration (11/13/97)		mg/l	0.410				0.64	<0.005	0.330

Notes:

1. The ACDEH accepted risk level is the ASTM 10⁻⁵ Tier 1 Risk-Based Screening Level multiplied by a slope factor of 0.29.
2. Selected risk level is not exceeded for all possible dissolved levels.
3. Screening levels that are exceeded by the average of the benzene concentrations measured for the last four rounds of groundwater sampling are underlined.

Source: ASTM Standard E 1739-95, *Standard Guide for Risk-Based Corrective Action Applied at Petroleum Release Sites*.

Calculation of Average Concentrations:

Sampling Date	Benzene Concentration, mg/l	
	MW-1	MW-3
12/19/95	1.8	4.3
3/25/96	0.12	1.9
6/27/96	0.94	2.5
11/13/97	0.41	0.28
Average:	0.82	2.25

Post-It™ brand fax transmittal memo 7671 # of pages ▶ 1

To <i>Madulla Logan</i>	From <i>Tina Berry</i>
Co. <i>ACHESA</i>	Co. <i>Tosco</i>
Dept.	Phone #
Fax # <i>337-9335</i>	Fax #

UNDERGROUND STORAGE TANK UNAUTHORIZED FILL

EMERGENCY YES NO HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? YES NO

REPORT DATE *03/23/98* CASE #

REPORTED BY: NAME OF INDIVIDUAL FILING REPORT *Tina Berry* PHONE *(510) 277-2321* SIGNATURE *J. Berry*

REPRESENTING OWNER/OPERATOR REGIONAL BOARD COMPANY OR AGENCY NAME *76 Products Company*

LOCAL AGENCY OTHER ADDRESS *2000 Crow Canyon Place, Ste. 400 San Ramon CA 94583*

RESPONSIBLE PARTY: NAME *Tosco / UNOCAL* UNKNOWN CONTACT PERSON *Tina Berry* PHONE *(510) 277-2321*

ADDRESS *2000 Crow Canyon Place, Ste. 400 San Ramon CA 94583*

SITE LOCATION: FACILITY NAME (IF APPLICABLE) *Unocal SS # 0018* OPERATOR *John Coffin* PHONE *(510) 655-9430*

ADDRESS *6201 Claremont Ave. Oakland Alameda 94618*

CROSS STREET *College*

IMPLEMENTING AGENCIES: LOCAL AGENCY AGENCY NAME *ACHESA - LOP* CONTACT PERSON *Madulla Logan* PHONE *(510) 567-6764*

REGIONAL BOARD *RWQCB - SF Bay Region* UNKNOWN PHONE ()

SUBSTANCES INVOLVED: NAME *Gasoline* QUANTITY LOST (GALLONS) UNKNOWN UNKNOWN

DISCOVERY/ABATEMENT: DATE DISCOVERED *03/07/97* HOW DISCOVERED INVENTORY CONTROL SUBSURFACE MONITORING NUISANCE CONDITIONS

TANK TEST TANK REMOVAL OTHER

DATE DISCHARGE BEGAN *UNKNOWN* METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY)

REMOVE CONTENTS CLOSE TANK & REMOVE REPAIR PIPING

HAS DISCHARGE BEEN STOPPED? YES NO IF YES, DATE *03/07/97* REPAIR TANK CLOSE TANK & FILL IN PLACE CHANGE PROCEDURE

REPLACE TANK OTHER

SOURCE/CAUSE: SOURCE OF DISCHARGE TANK LEAK UNKNOWN PIPING LEAK OTHER

CAUSE(S) OVERFILL RUPTURE/FAILURE SPILL UNKNOWN OTHER

CASE TYPE: CHECK ONE ONLY UNDETERMINED SOIL ONLY GROUNDWATER DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)

CURRENT STATUS: CHECK ONE ONLY NO ACTION TAKEN PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED POLLUTION CHARACTERIZATION

LEAK BEING CONFIRMED PRELIMINARY SITE ASSESSMENT UNDERWAY POST CLEANUP MONITORING IN PROGRESS

REMEDIATION PLAN CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) CLEANUP UNDERWAY

REMEDIAL ACTION: CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) EXCAVATE & DISPOSE (ED) REMOVE FREE PRODUCT (FP) ENHANCED BIO DEGRADATION (BT)

CAP SITE (CS) EXCAVATE & TREAT (ET) PUMP & TREAT GROUNDWATER (GT) REPLACE SUPPLY (RS)

CONTAINMENT BARRIER (CB) NO ACTION REQUIRED (NA) TREATMENT AT HOOKUP (HL) VENT SOIL (VS)

VACUUM EXTRACT (VE) OTHER (OT) *To be determined.*

COMMENTS: *Further action to be based on investigative findings.*

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.		
REPORT DATE 03/23/98		CASE #		SIGNED _____ DATE _____		
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Tina Berry		PHONE (510) 277-2321		SIGNATURE T. Berry	
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME 76 Products Company			
	ADDRESS 2000 Crow Canyon Place, Ste. 400 San Ramon CA 94583					
RESPONSIBLE PARTY	NAME Tosco / UNOCAL <input type="checkbox"/> UNKNOWN		CONTACT PERSON Tina Berry		PHONE (510) 277-2321	
	ADDRESS 2000 Crow Canyon Place, Ste. 400 San Ramon CA 94583					
SITE LOCATION	FACILITY NAME (IF APPLICABLE) Unocal SS # 0018		OPERATOR John Coffin		PHONE (510) 655-9430	
	ADDRESS 6201 Claremont Ave. Oakland Alameda 94612		CROSS STREET College			
	LOCAL AGENCY AGENCY NAME CONTACT PERSON PHONE ACHSA - LOP Modulla Logan (510) 567-6764					
REGIONAL BOARD PHONE RUCRB - SF Bay Region ()						
SUBSTANCES INVOLVED	(1)		NAME		QUANTITY LOST (GALLONS)	
	(2)				<input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> UNKNOWN	
DISCOVERY/ABATEMENT	DATE DISCOVERED 03/07/97		HOW DISCOVERED <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> OTHER			
	DATE DISCHARGE BEGAN UNKNOWN		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER			
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 03/07/97					
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input checked="" type="checkbox"/> TANK LEAK <input type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER		CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER			
	CASE TYPE CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input checked="" type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)					
CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input checked="" type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY					
	REMEDIAL ACTION CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input checked="" type="checkbox"/> OTHER (OT) To be determined.					
COMMENTS	Further action to be based on investigative findings.					
	Dispenser ^{leak} and line test failure reported 11/96.					

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 does 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.

Leak Being Confirmed - Leak suspected at site, but has not been confirmed.

Preliminary Site Assessment Workplan Submitted - 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.

Preliminary Site Assessment Underway - implementation of workplan.

Pollution Characterization - 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.

Case Closed - 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:

Cap Site - 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
2. Regional Water Quality Control Board
3. Local Health Officer and County Board of Supervisors or their designee to receive Proposition 65 notifications.
4. Owner/responsible party.

white - env. health
 yellow - facility
 pink - files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy
 Alameda CA 94502
 510/567-6700

Hazardous Materials Inspection Form

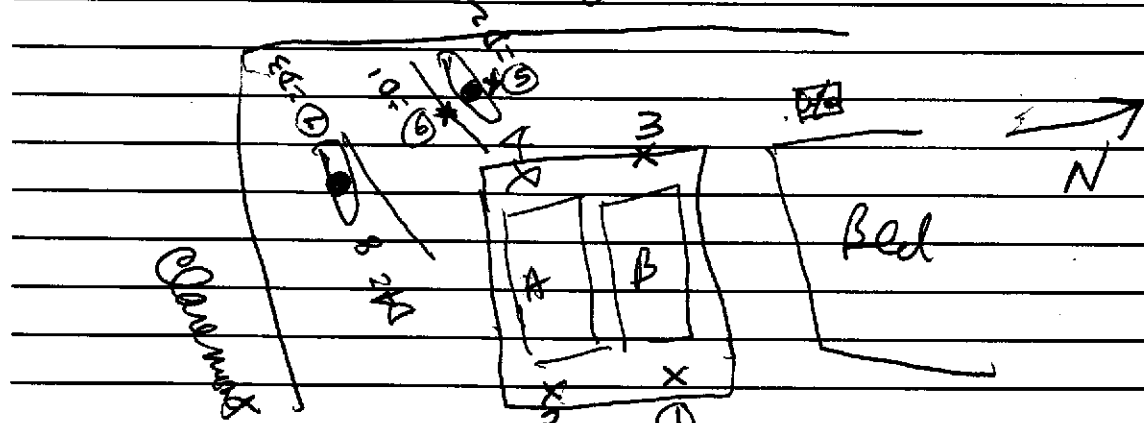
II, III

Site ID # _____ Site Name Unocal Today's Date 3/7/97
 Site Address 6201 Claremont Ave
 City Oakland Zip 94619 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?
Inspection Categories:
 I. Haz. Mat/Waste GENERATOR/TRANSPORTER
 II. Hazardous Materials Business Plan, Acutely Hazardous Materials
X III. Under ground Storage Tanks R 1 sampling

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

Comments: HAIG KEVORK KEI - present & sampler.
college



Sple #1, east end of tank B, blue gray clay no odor
 Pit depth is 16' bgs
 Sple #2, east end tank A, brown clay no odor
 sple #3, from soil/GW interface dark gray rust no odor
 sple #4 from floor @ soil/GW interface, slight gas odor
 Pit is shored, spoils taken to Forward landfill
 GW encountered in pit, VOA splees taken for chem. analysis
 All splees to be used for Tlthg, BTEX, CMTE
 Soil splees 5 + 6 taken from beneath former dispensers ~ 1-2' bgs no odor
 splees 7 & 8 taken from " " " "

Contact HAIG KEVORK - no odors observed in dispenser splees II, III
 Title ENG
 Signature [Signature]
 Inspector B. CHAN
 Signature [Signature]

white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF
ENVIRONMENTAL HEALTH
 Hazardous Materials Inspection Form

1131 Harbor Bay Pkwy
 Alameda CA 94502
 510/567-6700

II, III

Site ID # _____ Site Name _____ Today's Date ___/___/___

Site Address _____

City _____ Zip 94114 Phone _____

____ MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

____ I. Haz. Mat/Waste GENERATOR/TRANSPORTER

____ II. Hazardous Materials Business Plan, Acutely Hazardous Materials

____ III. Under ground Storage Tanks

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

Comments:

Very good for a private company

Site map showing storage tanks and building

1. All tanks are properly labeled

2. All tanks are properly secured

3. All tanks are properly vented

4. All tanks are properly grounded

5. All tanks are properly bonded

6. All tanks are properly filled

7. All tanks are properly maintained

8. All tanks are properly inspected

9. All tanks are properly documented

10. All tanks are properly trained

Contact HAIG KEVORK

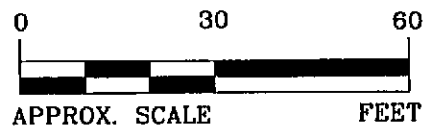
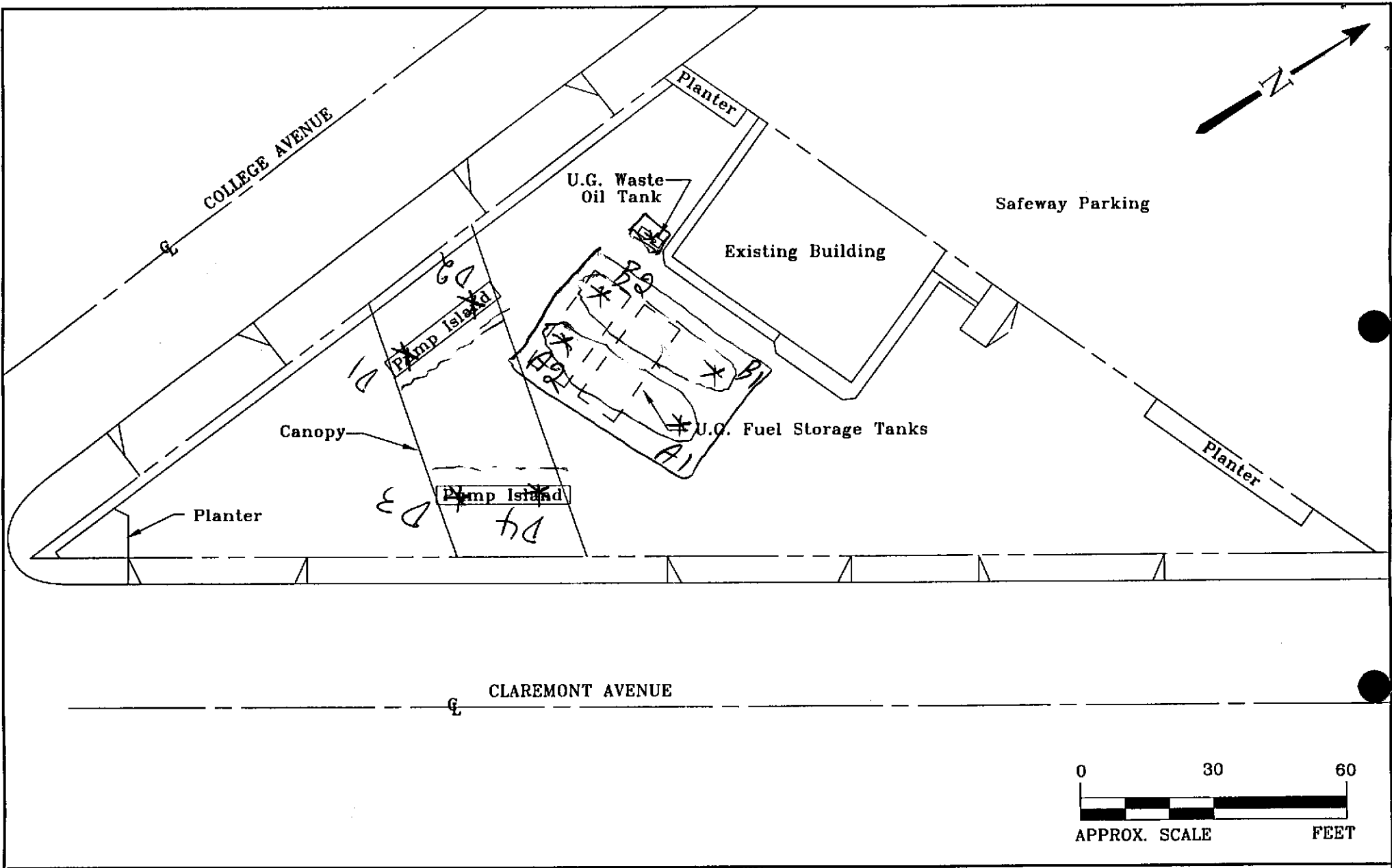
Title ENG.

Signature [Signature]

Inspector _____

Signature _____

II, III



SITE PLAN



76 PRODUCTS S/S #0018
 6201 CLAREMONT AVENUE
 OAKLAND, CALIFORNIA

FIGURE
 1



D4 ~~→~~ D3 3/7/97



D2 → D1



white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
 Hazardous Materials Inspection Form

1131 Harbor Bay Pkwy.
 Suite 250
 Alameda, CA 94502-6577
 (510) 567-6700

II, III

Site ID # _____ Site Name UNOCAL Today's Date 3/5/97

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 6201 Claremont
 City OAKLAND Zip 94619 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) _____
- ___ 19. Trade Secret Requested? 25538

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

Comments:

TANK REMOVAL

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/gndwater mon.
 - 6) Daily Inventory
Annual tank testing
Cont pipe leak det
 - 7) Weekly Tank Gauge
Annual tank teting
 - 8) Annual Tank Testing
Daily Inventory
 - 9) Other _____

- ___ 7. Precls 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: _____

TINA BERRY from UNOCAL
Herman Gomez from Oakland City Fire Dept
Mr. Kevork Haig from KI were also
present for the tank removal - 2 gasoline
(16,000 gallons) & 1 280 gallon waste oil
tank were removed - 0, 0 - LEL

<u>Tank 1</u>	<u>15%</u>	<u>0%</u>
<u>Tank 2</u>	<u>16%</u>	<u>0%</u>
<u>W.O tank</u>	<u>11%</u>	<u>0%</u>

Waste oil tank - was very corroded &
3 holes on top of tank! The gasoline
tanks were in good condition. A
to Sampling

For gasoline tanks - no soil samples were
collected but will be done on Friday, since
they are going to anyway excavate upto
14 ft (to install new tanks). One sample
was collected from the center of the W.O
at site - (W.O-1). The soil was tank

Rev 6/88

Contact: HAIG KEVORK

Title: ENG.

Signature: [Signature]

Inspector: [Signature]

Signature: _____

white -env.health
 yellow -facility
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
 Hazardous Materials Inspection Form

1131 Harbor Bay Pkwy.
 Suite 250
 Alameda, CA 94502-6577
 (510) 567-6700

II, III

Site ID # _____ Site Name UNUAL Today's Date 12/17

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 6201 Alameda
 City CAR. AWD Zip 94619 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. OHSite Conseq. Assess. 25524(c)
- ___ 15. Probable Risk Assessment 25534(d)
- ___ 16. Persons Responsible 25534(g)
- ___ 17. Certification 25534(i)
- ___ 18. Exemption Request? (Y/N) _____
- ___ 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 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 def
Vadose/gndwater mon. |
| | 6) Daily Inventory
Annual tank testing
Cont pipe leak def |
| | 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: _____ | |

Comments: TANK REMOVAL
TWO ABOVE GROUND TANKS
Removed from 6201 Alameda Key Fire Dept
in Kevork, HAIG from the warehouse
removed. At the tank removal: 2, gasoline
(1500 gallons) + 1 250 gallon waste oil
both were removed. O, S - LEL

___ Tank 1	16.15%	0%
___ Tank 2	16%	0%
___ W.O. tank	11%	0%

3 holes on top of tank. The gasoline
tanks were in good condition.
to sampling
For both line tanks, residual samples were
collected but will be done on Friday since
they are going to require excavation upto
up to 4 ft (to install new tanks). Do sample
from which hole the water of the tank
is at (W O-1) the soil was tank

Contact: HAIG KEVORK
 Title: ENG.
 Signature: [Signature]

Inspector: [Signature]
 Signature: _____

**ALAMEDA COUNTY HEALTH CARE SERVICE AGENCY
 DEPARTMENT OF ENVIRONMENTAL HEALTH
 ENVIRONMENTAL PROTECTION DIVISION
 1131 HARBOR BAY PARKWAY, RM 250
 ALAMEDA, CA 94502-6577
 PHONE # 510/567-6700
 FAX # 510/337-9335**

Project Specialist

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Environmental Protection
 1131 Harbor Bay Parkway, Room 250
 Alameda, CA 94502-6577

These underground tanks have been installed and found to be empty. It is recommended that the tanks be filled with water to prevent collapse. The tanks should be filled with water to a depth of 10 feet above the bottom of the tank. The water should be treated with a biocide to prevent the growth of bacteria. The water should be replaced every 12 months. The tanks should be inspected every 12 months. The tanks should be closed within 180 days of the date of this permit. The tanks should be closed in accordance with the following instructions:

1. The tanks should be closed in accordance with the following instructions:
 a. The tanks should be closed in accordance with the following instructions:
 b. The tanks should be closed in accordance with the following instructions:
 c. The tanks should be closed in accordance with the following instructions:
 d. The tanks should be closed in accordance with the following instructions:
 e. The tanks should be closed in accordance with the following instructions:
 f. The tanks should be closed in accordance with the following instructions:
 g. The tanks should be closed in accordance with the following instructions:
 h. The tanks should be closed in accordance with the following instructions:
 i. The tanks should be closed in accordance with the following instructions:
 j. The tanks should be closed in accordance with the following instructions:

Maureen Cogan
 Project Specialist and Permitting

Permit is valid for 180 days. If the permit expires, the permittee must re-apply for a permit. The permittee must comply with all applicable laws and regulations. The permittee must provide a copy of this permit to the appropriate authorities.

THIS IS A FINANCIAL PENALTY FOR
 NOT OBTAINING THESE INSTRUCTIONS

Contact Specialist

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

- Name of Business Claremont 76 #0018
 Business Owner or Contact Person (PRINT) Ben Sorenson / RHL Design Group
- Site Address 6201 Claremont Avenue
 City Oakland Zip 94618 Phone (510)655-9430
- Mailing Address 6201 Claremont Avenue
 City Oakland Zip 94618 Phone (510)655-9430
- Property Owner UNOCAL of California (UNOCAL)
 Business Name (if applicable) _____
 Address 2000 Crow Canyon Place Suite 400
 City, State San Ramon, CA Zip 94583
- Generator name under which tank will be manifested
UNOCAL 76 Products Co.
 EPA ID# under which tank will be manifested CA 0000000516

6. Contractor Bald Petroleum
Address 930 Amas Avenue
City Milpitas Phone (408) 942-8080
License Type* AB HAZ CIO ID# _____

*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.

7. Consultant (if applicable) RHL Design Group, Inc.
Address 450 Howe Avenue
City, State Sacramento, CA Phone (916) 646-4003

8. Main Contact Person for Investigation (if applicable)
Name Ron Sorenson Title Job Captain/owners Agent
Company RHL Design Group
Phone (916) 646-4003

9. Number of underground tanks being closed with this plan 3
Length of piping being removed under this plan 380' (product & vapor)
Total number of underground tanks at this facility (**confirmed with owner or operator) 3

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

**** Underground storage tanks must be handled as hazardous waste ****

a) Product/Residual Sludge/Rinsate Transporter

Name Erickson, Inc. EPA I.D. No. CAD009466392
Hauler License No. 0019 License Exp. Date 5/31/97
Address 255 Parr Blvd.
City Richmond State CA Zip 94801

b) Product/Residual Sludge/Rinsate Disposal Site

Name Erickson, Inc. EPA ID# CAD009466392
Address 255 Parr Blvd.
City Richmond State CA Zip 94801

c) Tank and Piping Transporter

Name Erickson, Inc. EPA I.D. No. CA0009466392

Hauler License No. 0019 License Exp. Date _____

Address 255 Parr Blvd.

City Richmond State CA Zip 94801

d) Tank and Piping Disposal Site

Name Erickson, Inc. EPA I.D. No. CA0009466392

Address 255 Parr Blvd.

City Richmond State CA Zip 94801

11. Sample Collector

Name Tim Ross

Company Kaprealian Engineering

Address P.O. Box 913

City Benecia State CA Zip 94510 Phone (510)402-5100

12. Laboratory

Name Sequoia Analytical Labs

Address 680 Chesapeake Dr.

City Redwood City State CA Zip 94063

State Certification No. 1210

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

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

15 lbs of CO₂ (dry ice) placed in fill opening for every
1000 gal. capacity - then triple rinsed per spec sheet
J-O.

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 permanently plugged.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
280 gal waste oil	Installed 1962 Removal 3/1/97	Residual waste oil soil below tank	Tank pit to a depth of 24" below tank bottom ↓
12,000 gal gasoline	Installed 1982 Removal 3/1/97	Residual gasoline soil below tank	
12,000 gal gasoline	Installed 1982 Removal 3/1/97	Residual gasoline soil below tank	

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

Excavated/Stockpiled So

Stockpiled Soil Volume (estimated)

430 cubic yards

Sampling Plan

One composite sample, consisting of four individual brass sampling cylinders will be analyzed for every 50 cubic yards of soil. Samples will be analyzed for TPHG and BTXE. If detectable amounts of petroleum hydrocarbons are found, samples will be tested for lead.

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

Will the excavated soil be returned to the excavation immediately after tank removal? [] yes [X] no [] unknown

If yes, explain reasoning _____

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from Alameda County. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling operations.

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.

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

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
TPH G & BTX&E MTBE W.O. TANK	GCFID 5030, WATER GCFID 5030, 3810, SOIL	MOD. 8015, 8020, OR 8240, SOIL 602 OR 624, WATER Also MTBE → 8020 (used material) method	SOIL WATER 1.0 50.0 0.0005 0.5
TPH D	GCFID 5030, WATER GCFID 5030, 3810, SOIL	GCFID 3550, SOIL GCFID 3510, WATER	1.0 50.0
TOG	413.1	SM 5520 D&E, SOIL SM 5520 A&E, WATER	50.0 5,000.0
CL HC		8010, 8240, SOIL 601 OR 624, WATER	
PMA's. <i>especially Naphthalene & Benzopyrene</i>		8270 or 610	
TESTS WILL BE RUN FOR THE FOLLOWING:			
Ca, Cr, Pb, Zn	7130, 7197, 7421, 7950	ICAP OR AA	
PCP, PCB, PNA&CREOSITE	8080	8270	

18. Submit Worker's Compensation Certificate copy

Name of Insurer Public Indemnity Company of America

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 written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that 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 approval from the Environmental Protection Division 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.

CONTRACTOR INFORMATION

Name of Business Balch Petroleum

Name of Individual Tom Evernden

Signature _____ Date _____

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business 7co Products Company (UNOCAL)

Name of Individual William Buerster

Signature M.J. Buerster Date 1-27-97

INSTRUCTIONS

General Instructions

- * Three (3) copies of this plan plus attachments and a deposit must be submitted to this Department.
- * Any cutting into tanks requires local fire department approval.
- * One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.
- * State of California Permit Application Forms A and B are to be submitted to this office. One Form A per site, one Form B for each removed tank.

Line Item Specific Instructions

2. SITE ADDRESS
Address at which closure is taking place.
5. EPA I.D. NO. under which the tanks will be manifested
EPA I.D. numbers may be obtained from the State Department of Toxic Substances Control, 916/324-1781.
6. CONTRACTOR
Prime contractor for the project.
10. STATE REGISTERED HAZARDOUS WASTE TRANSPORTERS/FACILITIES
 - a) All residual liquids and sludges are to be removed from tanks before tanks are inerted.
 - c) Tanks must be hauled as hazardous waste.
 - d) This is the place where tanks will be taken for cleaning.
15. TANK HISTORY AND SAMPLING INFORMATION
Use History - This information is essential and must be accurate. Include tank installation date, products stored in the tank, and the date when the tank was last used.

Material to be sampled - e.g. water, oil, sludge, soil, etc.

Location and depth of samples - e.g. beneath the tank a maximum of two feet below the native soil/backfill interface, side wall at the high water mark, etc.

16. CHEMICAL METHODS AND ASSOCIATED DETECTION LIMITS
See attached Table 2.

17. SITE HEALTH AND SAFETY PLAN

A site specific Health and Safety plan must be submitted. We advocate the site health and safety plan include the following items, at a minimum:

- a) The name and responsibilities of the site health and safety officer;
- b) An outline of briefings to be held before work each day to appraise employees of site health and safety hazards;
- c) Identification of health and safety hazards of each work task. Include potential fire, explosion, physical, and chemical hazards;
- d) For each hazard, identify the action levels (contaminant concentrations in air) or physical conditions which will trigger changes in work habits to ensure workers are not exposed to unsafe chemical levels or physical conditions;
- e) Description of the work habit changes triggered by the above action levels or physical conditions;
- f) Frequency and types of air and personnel monitoring - along with the environmental sampling techniques and instrumentation - to be used to detect the above action levels. Include instrumentation maintenance and calibration methods and frequencies;
- g) Confined space entry procedures (if applicable);
- h) Decontamination procedures;
- i) Measures to be taken to secure the site, excavation and stockpiled soil during and after work hours (e.g. barricades, caution tape, fencing, trench plates, plastic sheeting, security guards, etc.);
- j) Spill containment/emergency/contingency plan. Be sure to include emergency phone numbers, the location of the phone nearest the site, and directions to the hospital nearest the site;
- k) Documentation that all site workers have received the appropriate OSHA approved trainings and participate in appropriate medical surveillance per 29 CFR 1910.120; and
- l) A page for employees to sign acknowledging that they have read and will comply with the site health and safety plan.

The safety plan must be distributed to all employees and contractors working in hazardous waste operations on site. A complete copy of the site health and safety plan along with any standard operating procedures shall be on site and accessible at all times.

NOTE: These requirements are excerpts from 29 CFR Part 1910.120(b)(4), Hazardous Waste Operations and Emergency Response; Final Rule, March 6, 1989. Safety plans of certain underground tank sites may need to meet the complete requirements of this Rule.

19. PLOT PLAN

The plan should consist of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale;
- b) North Arrow;
- c) Property Lines;
- d) Location of all Structures;
- e) Location of all relevant existing equipment including tanks and piping to be removed and dispensers;
- f) Streets;
- g) Underground conduits, sewers, water lines, utilities;
- h) Existing wells (drinking, monitoring, etc.);
- i) Depth to ground water; and
- j) All existing tank(s) and piping in addition to the tank(s) being removed.

20. DEPOSIT

A deposit, payable to "County of Alameda" for the amount indicated on the Alameda County Underground Storage Tank Fee Schedule, must accompany the plans.

21. Blank Unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from this office or from the San Francisco Bay Regional Water Quality Control Board (510/286-1255). Larger quantities may be obtained directly from the State Water Resources Control Board at (916) 739-2421.

22. TANK CLOSURE REPORT

The tank closure report should contain the following information:

- a) General description of the closure activities;
- b) Description of tank, fittings and piping conditions. Indicate tank size and former contents; note any corrosion, pitting, holes, etc.;

- c) Description of the excavation itself. Include the tank and excavation depth, a log of the stratigraphic units encountered within the excavation, a description of root holes or other potential contaminant pathways, the depth to any observed ground water, descriptions and locations of stained or odor-bearing soil, and descriptions of any observed free product or sheen;
- d) Detailed description of sampling methods; i.e. backhoe bucket, drive sampler, bailer, bottle(s), sleeves
- e) Description of any remedial measures conducted at the time of tank removal;
- f) To-scale figures showing the excavation size and depth, nearby buildings, sample locations and depths, and tank and piping locations. Include a copy of the plot plan prepared for the Tank Closure Plan under item 19;
- g) Chain of custody records;
- h) Copies of signed laboratory reports;
- i) Copies of "TSDF to Generator" Manifests for all hazardous wastes hauled offsite (sludge, rinsate, tanks and piping, contaminated soil, etc.); and
- j) Documentation of the disposal of/and volume and final destination of all non-manifested contaminated soil disposed offsite.

TABLE #2
RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR
UNDERGROUND TANK LEAKS

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u>	<u>WATER ANALYSIS</u>
Unknown Fuel	TPH G GCFID(5030)	TPH G GCFID(5030)
	TPH D GCFID(3550)	TPH D GCFID(3510)
	BTX&E 8020 or 8240	BTX&E 602, 624 or 8260
	TPH AND BTX&E 8260	
Leaded Gas	TPH G GCFID(5030)	TPH G GCFID(5030)
	BTX&E 8020 OR 8240	BTX&E 602 or 624
	TPH AND BTX&E 8260	TOTAL LEAD AA
	TOTAL LEAD AA	
	-----Optional-----	
	TEL DHS-LUFT	TEL DHS-LUFT
	EDB DHS-AB1803	EDB DHS-AB1803
Unleaded Gas	TPH G GCFID(5030)	TPH G GCFID(5030)
	BTX&E 8020 or 8240	BTX&E 602, 624 or 8260
	TPH AND BTX&E 8260	
Diesel, Jet Fuel and Kerosene	TPH D GCFID(3550)	TPH D GCFID(3510)
	BTX&E 8020 or 8240	BTX&E 602, 624 or 8260
	TPH AND BTX&E 8260	
Fuel/Heating Oil	TPH D GCFID(3550)	TPH D GCFID(3510)
	BTX&E 8020 or 8240	BTX&E 602, 624 or 8260
	TPH AND BTX&E 8260	
Chlorinated Solvents	CL HC 8010 or 8240	CL HC 601 or 624
	BTX&E 8020 or 8240	BTX&E 602 or 624
	CL HC AND BTX&E 8260	CL HC AND BTX&E 8260
Non-chlorinated Solvents	TPH D GCFID(3550)	TPH D GCFID(3510)
	BTX&E 8020 or 8240	BTX&E 602 or 624
	TPH AND BTX&E 8260	TPH and BTX&E 8260
Waste and Used Oil or Unknown (All analyses must be completed and submitted)	TPH G GCFID(5030)	TPH G GCFID(5030)
	TPH D GCFID(3550)	TPH D GCFID(3510)
	TPH AND BTX&E 8260	
	O & G 5520 D & F	O & G 5520 B & F
	BTX&E 8020 or 8240	BTX&E 602, 624 or 8260
	CL HC 8010 or 8240	CL HC 601 or 624
	ICAP or AA TO DETECT METALS: Cd, Cr, Pb, Zn, Ni	
	METHOD 8270 FOR SOIL OR WATER TO DETECT:	
	PCB*	PCB
	PCP*	PCP
	PNA	PNA
	CREOSOTE	CREOSOTE

* If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)

Reference: Tri-Regional Board Staff Recommendations for Preliminary Evaluation and Investigation of Underground Tank Sites, 10 August 1990

EXPLANATION FOR TABLE #2: MINIMUM VERIFICATION ANALYSIS

1. OTHER METHODOLOGIES are continually being developed and as methods are accepted by EPA or DHS, they also can be used.
2. For DRINKING WATER SOURCES, EPA recommends that the 500 series for volatile organics be used in preference to the 600 series because the detection limits are lower and the QA/QC is better.
3. APPROPRIATE STANDARDS for the materials stored in the tank are to be used for all analyses on Table #2. For instance, seasonally, there may be five different jet fuel mixtures to be considered.
4. To AVOID FALSE POSITIVE detection of benzene, benzene-free solvents are to be used.
5. TOTAL PETROLEUM HYDROCARBONS (TPH) as gasoline (G) and diesel (D) ranges (volatile and extractable, respectively) are to be analyzed and characterized by GCFID with a fused capillary column and prepared by EPA method 5030 (purge and trap) for volatile hydrocarbons, or extracted by sonication using 3550 methodology for extractable hydrocarbons. Fused capillary columns are preferred to packed columns; a packed column may be used as a "first cut" with "dirty" samples or once the hydrocarbons have been characterized and proper QA/QC is followed.
6. TETRAETHYL LEAD (TEL) analysis may be required if total lead is detected unless the determination is made that the total lead concentration is geogenic (naturally occurring).
7. CHLORINATED HYDROCARBONS (CL HC) AND BENZENE, TOLUENE, XYLENE AND ETHYLBENZENE (BTX&E) are analyzed in soil by EPA methods 8010 and 8020 respectively, (or 8240) and in water, 601 and 602, respectively (or 624).
8. OIL AND GREASE (O & G) may be used when heavy, straight chain hydrocarbons may be present. Infrared analysis by method 418.1 may also be acceptable for O & G if proper standards are used. **Standard Methods" 17th Edition, 1989, has changed the 503 series to 5520.**
9. **PRACTICAL QUANTITATION REPORTING LIMITS are influenced by matrix problems and laboratory QA/QC procedures. Following are the Practical Quantitation Reporting Limits:**

	<u>SOIL PPM</u>	<u>WATER PPB</u>
TPH G	1.0	50.0
TPH D	1.0	50.0
BTX&E	0.005	0.5
O & G	50.0	5,000.0

Based upon a Regional Board survey of Department of Health Services Certified Laboratories, the Practical Quantitation Reporting Limits are attainable by a majority of laboratories with the exception of diesel fuel in soils. The Diesel Practical Quantitation Reporting Limits, shown by the survey, are:

ROUTINE	MODIFIED PROTOCOL
≤ 10 ppm (42%)	≤ 10 ppm (10%)
≤ 5 ppm (19%)	≤ 5 ppm (21%)
≤ 1 ppm (35%)	≤ 1 ppm (60%)

When the Practical Quantitation Reporting Limits are not achievable, an explanation of the problem is to be submitted on the laboratory data sheets.

- LABORATORY DATA SHEETS are to be signed and submitted and include the laboratory's assessment of the condition of the samples on receipt including temperature, suitable container type, air bubbles present/absent in VOA bottles, proper preservation, etc. The sheets are to include the dates sampled, submitted, prepared for analysis, and analyzed.
- IF PEAKS ARE FOUND, when running samples, that do not conform to the standard, laboratories are to report the peaks, including any unknown complex mixtures that elute at times varying from the standards. Recognizing that these mixtures may be contrary to the standard, they may not be readily identified; however, they are to be reported. At the discretion of the LIA or Regional Board the following information is to be contained in the laboratory report:

The relative retention time for the unknown peak(s) relative to the reference peak in the standard, copies of the chromatogram(s), the type of column used, initial temperature, temperature program is C/minute, and the final temperature.

- REPORTING LIMITS FOR TPH are: gasoline standard ≤ 20 carbon atoms, diesel and jet fuel (kerosene) standard ≤ 50 carbon atoms. It is not necessary to continue the chromatography beyond the limit, standard, or EPA/DHS method protocol (whichever time is greater).

EPILOGUE

ADDITIVES: Major oil companies are being encouraged or required by the federal government to reformulate gasoline as cleaner burning fuels to reduce air emissions. MTBE (Methyl-tertiary butyl ether), ETHANOL (ethyl alcohol), and other chemicals may be added to reformulate gasolines to increase the oxygen content in the fuel and thereby decrease undesirable emissions (about four percent with MTBE). MTBE and ethanol are, for practical purposes, soluble in water. The removal from the water column will be difficult. Other compounds are being added by the oil companies for various purposes. The refinements for detection and analysis for all of these additives are still being worked out. If you have any questions about the methodology, please call your Regional Board representative.

ALAMEDA COUNTY ENVIRONMENTAL PROTECTION DIVISION

DECLARATION OF SITE ACCOUNT REFUND RECIPIENT

There may be excess funds remaining in the Site Account at the completion of this project. The PAYOR (person or company that issues the check) will use this form to predesignate another party to receive any funds refunded at the completion of this project. In the absence of this form, the PAYOR will receive the refund.

SITE INFORMATION:

Site ID Number
(if known)

Claremont 76 #0018

Name of Site

6201 Claremont Avenue

Street Address

Oakland, CA 94618

City, State & Zip Code

I designate the following person or business to receive any refund due at the completion of all deposit/refund projects:

Robert H. Lee & Assoc.

Name

650 Howe Ave #504

Street Address

Sacramento, CA 95825

City, State & Zip Code



Signature of Payor

1/27/97

Date

Ron Sorenson

Name of Payor

(PLEASE PRINT CLEARLY)

Robert H. Lee & Assoc.

Company Name of Payor

RETURN FORM TO:

County of Alameda, Environmental Protection
1131 Harbor Bay Parkway, Rm 250
Alameda CA 94502-6577
Phone#(510) 567-6700



State of California
CONTRACTORS STATE LICENSE BOARD
ACTIVE LICENSE



License Number **677909** Entity **CORP**

Business Name **PARADISO MECHANICAL INC**

Crafts/Trade **B C-8 C10 C61/D23 HAZ A**

Expiration Date **09/30/97**



ACORD CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)
1/1/96

PRODUCER
MEIER COMMERCIAL INSURANCE
11 EMBARCADERO WEST, STE. 133
OAKLAND, CALIFORNIA 94607
(510) 893-1222

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

INSURED
PARADISO MECHANICAL INC
PARADISO CONSTRUCTION CO
P.O. BOX 1836
SAN LEANDRO CA 94577

COMPANY
A
COMPANY
B
COMPANY
C
COMPANY
D REPUBLIC INDEMNITY CO OF AMERICA

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.

CO 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 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 EXP (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				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$ \$
D	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL	3516634	1/01/96	1/01/97	<input checked="" type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT \$ 1,000,000 DISEASE - POLICY LIMIT \$ 1,000,000 DISEASE - EACH EMPLOYEE \$ 1,000,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATION & VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ~~ISSUE~~ MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT PREORE TO MAIL SUCH NOTICE TO THE ADDRESS OF THE POLICY OR TO THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Christa Tom Meier

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ENVIRONMENTAL PROTECTION DIVISION
1131 HARBOR BAY PARKWAY RM250
ALAMEDA, CALIFORNIA 94502-6577
PHONE # 510/567-6700
FAX # 510/337-9335

Project Specialist:

UNDERGROUND TANK INSTALLATION PLAN

* * * Complete according to attached instructions * * *

1. Business Name Claremont 76 # 0018
Business Owner John & Jo Coffin
2. Site Address 6201 Claremont Avenue
City Oakland Zip 94618 Phone (510)655-9430
3. Mailing Address 6201 Claremont Avenue
City Oakland Zip 94618 Phone (510)655-9430
4. Land Owner UNION oil of California (UNOCAL)
Address 2000 Crow Canyon Place Suite 400
City, State San Ramon, CA Zip 94583

5. Tank Information: Note: any special treatment to prevent corrosion, details of cathodic protection, piping coatings, and any special or unique equipment not otherwise noted. 15 gallon minimum overfill protection is required. Attach appropriate manufacturer brochures and instructions for clarity.

Manufacturer	Model	Size (gal.)	Material/Design	Contents
Joor	Plasteel	15,000 gal	Welded steel tank w/ F.R.P. Laminate	Unleaded gasoline 87 octane
Joor	Plasteel	12,000 gal	Welded steel tank w/ F.R.P. Laminate	Unleaded gasoline 92 octane
Monitoring Eq*	Model	Manual/Auto	line leak Detect	Monitoring Meth
Veedor-Root	TLS-350	Auto $\frac{1}{2}$ Continuous	yes - probes in sumps $\frac{1}{2}$ @ turbines	Interstitial

* a copy of the manufacturer's brochure must be submitted with tank installation diagrams. It must show test methods and procedures.

6. Contractor Balch Petroleum

Address 930 Ames Avenue

City Milpitas

Phone (408) 942-8086

License Type* A B HAZ C10

ID# _____

*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. Submit Worker's Compensation Certificate copy

Name of Insurer Republic Indemnity Company of America

8. Contact person for installation Ron Sorenson /o RHL Design Group

Phone 916 646-4003 Title Jch Captain / owner's Agent

9. Submit 3 set of scaled Blue Prints: consisting of detailed engineering descriptions of the installation and must include the following information:

- a) North Arrow, property Lines, location of all structures;
- b) plan views and elevations of tanks, piping runs, and dispensers, as well as schematics of all appurtenant equipment and monitoring devices to be installed, utilities;
- c) Existing wells (drinking, monitoring, etc.);
- d) Depth to ground water; and
- e) All existing tanks and piping in addition to the ones being installed/modified.
- f) electrical and wiring diagrams, including emergency shutoff.
- g) installation specifications and construction standards to be followed.

10. Enclose Deposit:

A deposit, payable to "County of Alameda" for the amount indicated on the Alameda County Underground Storage Tank Fee Schedule, must accompany the plans. The time spent on the project will be charged on an hourly basis at the current service rate. Any refund at the conclusion of the project will be refunded to the owner or his/her designee.

* One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.

11. Of the three sets of plans submitted, two will be returned after review and approval. Next you must contact the appropriate fire and building departments for any required permits. You must schedule at least 3 days in advance for the following inspections: piping inspection prior to covering, and final inspection prior to operating. A precision test will be required on the system to assure it does not leak. Any questions or problems should be referred directly to the specialist assigned to your project.

12. Blank Unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from our office and from the San Francisco Bay Regional Water Quality Control Board (510/286-1255). Larger quantities may be obtained directly from the State Water Resources Control Board at (916) 227-4352.

13. As-built plans are to be submitted within 30 days of completion. Permit Application Forms A, B, and C are to be submitted and fees paid prior to operation of the tank(s).

14. A written monitoring plan must be submitted prior to the operation of the tank(s) and prior to the issuance of a permit.

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

15. These instructions do not apply in the city limits of Fremont, Newark, Union City, Hayward, Pleasanton, Berkeley, or San Leandro as they are the Local Implementing Agencies for the underground storage tank regulatory program.

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 installation 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 _____

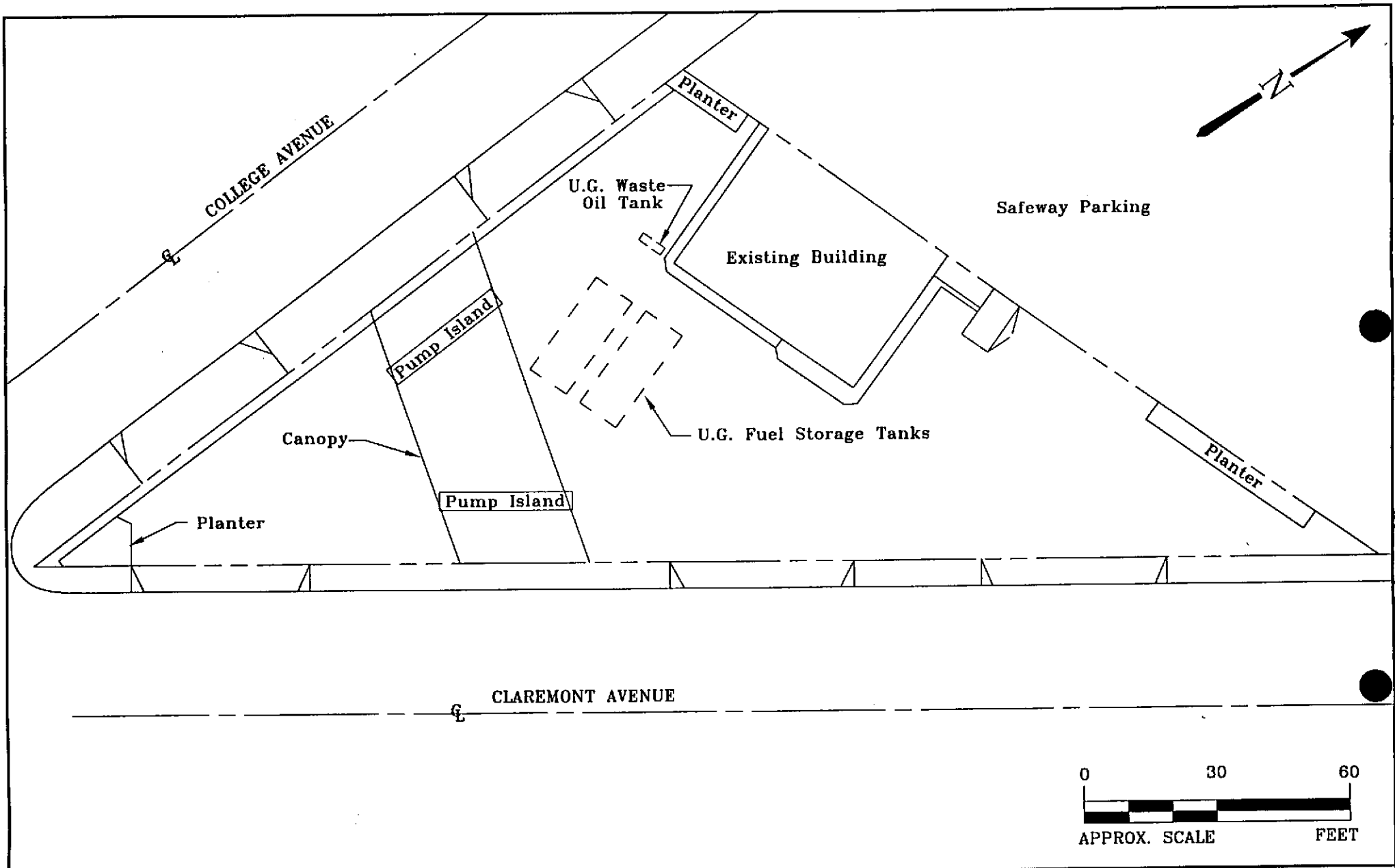
Date _____

Signature of Site Owner or Operator

Name (please type) *William Buarster*

Signature *WJ Buarster* _____

Date *1-27-97* _____



SITE PLAN



76 PRODUCTS S/S #0018
6201 CLAREMONT AVENUE
OAKLAND, CALIFORNIA

FIGURE
1

Unocal Corporation
2141 Rosecrans Avenue
Suite 4000
El Segundo, California 90245
Telephone (310) 726-7621

UNOCAL 

April 30, 1996

Neal E. Schmale
Chief Financial Officer

Regional Administrator
Environmental Protection Agency - Region X
1200 6th Avenue
Seattle, WA 98101

RE: CORPORATE GUARANTEE STATEMENT

Dear Regional Administrator:

Guarantee made this April 30, 1996, by Unocal Corporation, a business entity organized under the laws of the state of Delaware, herein referred to as guarantor, to Environmental Protection Agency and to any and all third parties, and obligees, on behalf of Union Oil Company of California, Molycorp, Inc., Poco Graphite, Inc., Automatic Heat Company, Pacific Coast Hemphill Oil Company, and Hemphill Oil Company of 2141 Rosecrans Ave., Suite 4000, El Segundo, California 90245 (herein referred to as "the Subsidiaries").

Recitals

- (1) Guarantor meets or exceeds the financial test criteria of 40 CFR 280.95(b) or (c) and (d) and agrees to comply with the requirements for guarantors as specified in 40 CFR 280.96(b).
- (2) The Subsidiaries own or operate the following underground storage tank(s) covered by this guarantee:

(See Attachment A)

This guarantee satisfies 40 CFR Part 280, Subpart H requirements for assuring funding for taking corrective action and compensating third parties for bodily injury and property damage caused by accidental releases arising from operating the above-identified underground storage tank(s) in the amount of \$1,000,000 per occurrence and \$2,000,000 annual aggregate.

- (3) On behalf of the Subsidiaries, guarantor guarantees to Environmental Protection Agency and to any and all third parties that:

In the event that the Subsidiaries fail to provide alternative coverage within 60 days after receipt of a notice of cancellation of this guarantee and the EPA Regional Administrator has determined or suspects that a release has occurred at an underground storage tank covered by this guarantee, the guarantor, upon instructions from the EPA Regional Administrator, shall fund a standby trust fund in accordance with the provisions of 40 CFR 280.108, in an amount not to exceed the coverage limits specified above.

In the event that the EPA Regional Administrator determines that the Subsidiaries have failed to perform corrective action for releases arising out of the operation of the above-identified tank(s) in accordance with 40 CFR Part 280, Subpart F, the guarantor upon written instructions from the EPA Regional Administrator shall fund a standby trust in accordance with the provisions of 40 CFR 280.108, in an amount not to exceed the coverage limits specified above.

If the Subsidiaries fail to satisfy a judgment or award based on a determination of liability for bodily injury or property damage to third parties caused by sudden and nonsudden accidental releases arising from the operation of the above-identified tank(s), or fail to pay an amount agreed to in settlement of a claim arising from or alleged to arise from such injury or damage, the guarantor, upon written instructions from the EPA Regional Administrator, shall fund a standby trust in accordance with the provisions of 40 CFR 280.108 to satisfy such judgment(s), award(s), or settlement agreement(s) up to the limits of coverage specified above.

- (4) Guarantor agrees that if, at the end of any fiscal year before cancellation of this guarantee, the guarantor fails to meet the financial test criteria of 40 CFR 280.95(b) or (c) and (d), guarantor shall send within 120 days of such failure, by certified mail, notice to the Subsidiaries. The guarantee will terminate 120 days from the date of receipt of the notice by the Subsidiaries, as evidenced by the return receipt.
- (5) Guarantor agrees to notify the Subsidiaries by certified mail of a voluntary or involuntary proceeding under Title 11 (Bankruptcy), U.S. Code naming guarantor as debtor, within 10 days after commencement of the proceeding.
- (6) Guarantor agrees to remain bound under this guarantee notwithstanding any modification or alteration of any obligation of the Subsidiaries pursuant to 40 CFR Part 280.
- (7) Guarantor agrees to remain bound under this guarantee for so long as the Subsidiaries must comply with the applicable financial responsibility requirements of 40 CFR Part 280, Subpart H for the above-identified tank(s), except that guarantor may cancel this guarantee by sending notice by certified mail to the Subsidiaries, such cancellation to become effective no earlier than 120 days after receipt of such notice by the Subsidiaries, as evidenced by the return receipt.
- (8) The guarantor's obligation does not apply to any of the following:
 - (a) Any obligation of the Subsidiaries under a workers' compensation, disability benefits, or unemployment compensation law or other similar law;
 - (b) Bodily injury to an employee of the Subsidiaries arising from, and in the course of, employment by the Subsidiaries;
 - (c) Bodily injury or property damage arising from the ownership, maintenance, use, or entrustment to others of any aircraft, motor vehicle or watercraft;

- (d) Property damage to any property owned, rented, loaded to, in the care, custody, or control of, or occupied by the Subsidiaries that is not the direct result of a release from a petroleum underground storage tank;
 - (e) Bodily damage or property damage for which the Subsidiaries are obligated to pay damages by reason of the assumption of liability in a contract or agreement other than a contract or agreement entered into to meet the requirements of 40 CFR 280.93.
- (9) Guarantor expressly waives notice of acceptance of this guarantee by Environmental Protection Agency, by any or all third parties, or by the Subsidiaries.

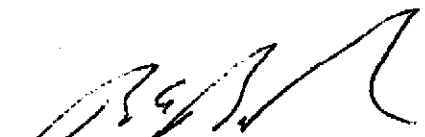
I hereby certify that the wording of this guarantee is identical to the wording specified in 40 CFR 280.96(c) as such regulations were constituted on the effective date shown immediately below.

Effective date: April 30, 1996

Unocal Corporation



 Neal E. Schmale
 Chief Financial Officer



 Signature of Witness

AGORD. CERTIFICATE OF INSURANCE

ISSUE (MM/DD/YY) **7/01/96**

PRODUCER

J. F. ARENTS AND COMPANY
 920 S. El Camino Real, #342
 San Mateo, CA 94402
 (415) 342-3095
 (415) 342-8789 FAX

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**
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D** **REPUBLIC INDEMNITY CO. OF AM.**
- COMPANY LETTER **E**

INSURED

BALCH PETROLEUM CONTRACTORS AND BUILDERS, INC.
 930 Ames Avenue
 Milpitas, CA 95035

COVERAGE

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.

CO 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 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 \$
D	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	97PC3511162	7/01/96	7/01/97	<input checked="" type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT \$ 1000000 DISEASE-POLICY LIMIT \$ 1000000 DISEASE-EACH EMPLOYEE \$ 1000000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

RE: ALL CALIFORNIA OPERATIONS OF THE NAMED INSURED

CERTIFICATE HOLDER

CITY OF HAYWARD
 22300 Foothill Boulevard
 Hayward, CA 94541

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.

AUTHORIZED REPRESENTATIVE

J. F. ARENTS AND COMPANY/as

J. F. Arents + Co. Inc.

AGORD 25-S (7/80)

State of California

Contractors State License Board

Pursuant to Chapter 9 of Division 3 of the Business and Professions Code and the Rules and Regulations of the Contractors State License Board, the Registrar of Contractors does hereby issue this license to:

BALCH PETROLEUM CONTRACTORS AND BUILDERS INC



to engage in the business or act in the capacity of a contractor in the following classification(s):

- A - GENERAL ENGINEERING CONTRACTOR
- B - GENERAL BUILDING CONTRACTOR
- HAZ - HAZARDOUS SUBSTANCES REMOVAL
- C10 - ELECTRICAL (GENERAL)



Witness my hand and seal this day,
April 16, 1996

Balch Petroleum

Signature of Licensee

Issued December 8, 1980

Wil Balch

Signature of License Qualifier

CERTIFIED COPY

Paul W. Johnson

Registrar of Contractors

396575

License Number

This license is the property of the Registrar of Contractors, is not transferrable, and shall be returned to the Registrar upon demand when suspended, revoked, or invalidated for any reason. It becomes void if not renewed.



State of California
 CONTRACTORS STATE LICENSE BOARD
 ACTIVE LICENSE



License Number: 396575
 License Name: BALCH PETROLEUM CONTRACTORS AND BUILDERS INC
 Classification: A B HAZ CIO
 Expiration Date: 12/31/96

CORP

