

# **COTTLE** *Engineering*

ALCO  
HAZMAT  
91 NOV 23 PM 2: 28

P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935

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CA Lic. No. 481444

**Fordham Properties  
5515 Doyle Street  
Emeryville, California**

## **UNDERGROUND TANK REMOVAL REPORT**

**November, 1994**

**Prepared By:  
Cottle Engineering  
P.O. Box 163  
Antioch, CA 94509**

# COTTLE Engineering

P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935

CA Lic. No. 481444

On, or about, August 25, 1994, Cottle Engineering was hired to perform the removal of one 1,000 gallon underground fuel storage tank at 5515 Doyle Street, Emeryville, California.

On September 21 and October 18, 1994 Cottle applied for underground tank removal permits from the Alameda County Health Department and the Emeryville Fire Department. We scheduled the removal with the Health and Fire inspectors for October 20, 1994 and began excavation of the tank on October 17, 1994. The excavation was barricaded off to prevent entry by unauthorized personnel during the performance of the work.

During excavation of the tank the excavated soil appeared to be contaminated with petroleum hydrocarbons upon visual inspection. The excavated soil was placed on plastic sheeting and covered with plastic sheeting in order to minimize exposure to the hydrocarbon contamination.

On October 20, 1994, the tank was prepared for removal by the introduction of dry ice at ratio of 2.5 lbs. per 100 gallons of tank volume. The tank's atmosphere was then tested for % oxygen and % LEL approximately one hour after the introduction of the dry ice.

When these readings reached levels that were acceptable to the inspectors, the tank was removed from it's excavation and the outer walls inspected for signs of corrosion and/or leakage. The tank was found to be in very corroded condition, with several perforations near the bottom of the tank. Groundwater was not reached during excavation of the tank, therefore no groundwater samples were collected.

The tank was placed on a truck operated by Dexanna Ltd. for transportation to Erickson's treatment and disposal facility located in Richmond, California for further processing and destruction. A certificate of proper destruction will be issued by H & H, copies of which will be forwarded to the owner upon receipt.

Immediately following removal of the tank soil samples were taken from the tank excavation, approximately one foot below each end of the bottom of the tank. The soil samples were properly packaged, refrigerated, and transported to McCampbell Analytical's laboratory in Pacheco, California for analyses.

We were instructed by the Health Department Inspector to have the samples analyzed for: total petroleum hydrocarbons as gasoline, benzene, toluene, ethylbenzene, and xylenes.

On October 24, 1994, the results of the analytical testing were received and the samples were found to contain the following contaminants: FP-1: North end of the excavation, 1 foot below the tank bottom; TPHg-760ppm/Benzene-.22ppm/Toluene-3.3ppm/Ethylbenzene-14ppm/Xylenes-68ppm. FP-2: South end of the excavation, 1 foot below tank bottom; TPHg-4,200ppm/Benzene-ND/Toluene-87ppm/Ethylbenzene-90ppm/Xylenes-540ppm. Comp-FP-1: Four point composite from spoil piles; TPHg-73ppm/Benzene-ND/Toluene-.23ppm/Ethylbenzene-.34ppm/Xylenes-1.4ppm.

Based upon the analytical results, we recommend excavation of the contaminated material with the use of a photoionization detector to help determine the extent of the contamination. Place the soil on plastic, cover it with plastic, and treat and aerate the soil until confirming samples indicate levels below 10ppm. At that point the soil could be used for backfilling the excavation or could be transported to a landfill for non-hazardous disposal.

Should you, or any other concerned party have questions regarding the information contained in this report, please contact our office at your convenience at 510-754-9935.

Sincerely,

David E. Cottle, Sr.  
Cottle Engineering

# **COTTLE** *Engineering*

P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935

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CA Lic. No. 481444

## **PERMIT FORMS**

**Fordham Properties  
5515 Doyle Street  
Emeryville, California**



6. Contractor Cottle Engineering  
Address P.O. Box 163  
City Antioch, CA 94509 Phone 510-754-9935  
License Type A ID# 481944

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

7. Consultant N/A  
Address \_\_\_\_\_  
City \_\_\_\_\_ Phone \_\_\_\_\_

8. Contact Person for Investigation  
Name Ray Pantle Title Operations Mgr.  
Phone 510-754-9935

9. Number of tanks being closed under this plan ONE  
Length of piping being removed under this plan 15 L.F.  
Total number of tanks at facility ONE

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

\*\* Underground tanks are hazardous waste and must be handled \*\*  
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter  
Name N/A EPA I.D. No. \_\_\_\_\_  
Hauler License No. \_\_\_\_\_ License Exp. Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

b) Product/Residual Sludge/Rinsate Disposal Site  
Name N/A EPA I.D. No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

c) Tank and Piping Transporter

Name Dexanna Ltd. EPA I.D. No. CAD982438566  
Hauler License No. 928262 License Exp. Date \_\_\_\_\_  
Address 3104 Athens Court  
City Concord State CA Zip \_\_\_\_\_

d) Tank and Piping Disposal Site

Name Erickson Environmental EPA I.D. No. CAD009466392  
Address 255 Parr Blvd.  
City Richmond State CA Zip 94801

11. Experienced Sample Collector

Name Roy Paulte  
Company Cottle Engineering  
Address P.O. Box 163  
City Antioch State CA Zip 94509 Phone 510-754-9935

12. Laboratory

Name McC Campbell Analytical  
Address 110 Second Ave. South  
City Pacheco State CA Zip 94553  
State Certification No. 16A

13. Have tanks or pipes leaked in the past? Yes ( ) No (X)

If yes, describe. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Describe methods to be used for rendering tank inert

Introduction of dry ice at a ratio of 2.5...  
lbs. per 100 gallons of tank volume approx.  
One hour prior to removal of the tank.

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

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

15. Tank History and Sampling Information

Tank		Material to be sampled (tank contents, soil, ground-water, etc.)	Location and depth of samples
Capacity	Use History (see instructions)		
550 gal.	Fuel Storage	Soil	1 Foot below bottom of tank

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



**Excavated/Stockpiled Soil**

<p><b>Stockpiled Soil Volume (Estimated)</b></p> <p><i>15 yards</i></p>	<p align="center"><b>Sampling Plan</b></p> <p><i>One composite from at least five locations in the stockpile</i></p>
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Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

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

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

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
<i>Diesel</i>	<i>TPHD</i>	<i>8015</i>	<i>1.0 ppm</i>
<i>Gasoline (unleaded)</i>	<i>TPHG BTXE</i>	<i>602/8020/8015</i>	<i>1.0 ppm 0.05 ppm</i>
<i>Lead</i>	<i>TOTAL Lead</i>		

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

18. Submit Worker's Compensation Certificate copy

Name of Insurer IPS Insurance

19. Submit EPC Plan (See Instructions)

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see instructions)

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

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

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

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

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

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

Signature of Contractor

Name (please type) DAVID E. COTTLE, SR.

Signature David E. Cottle, Sr.

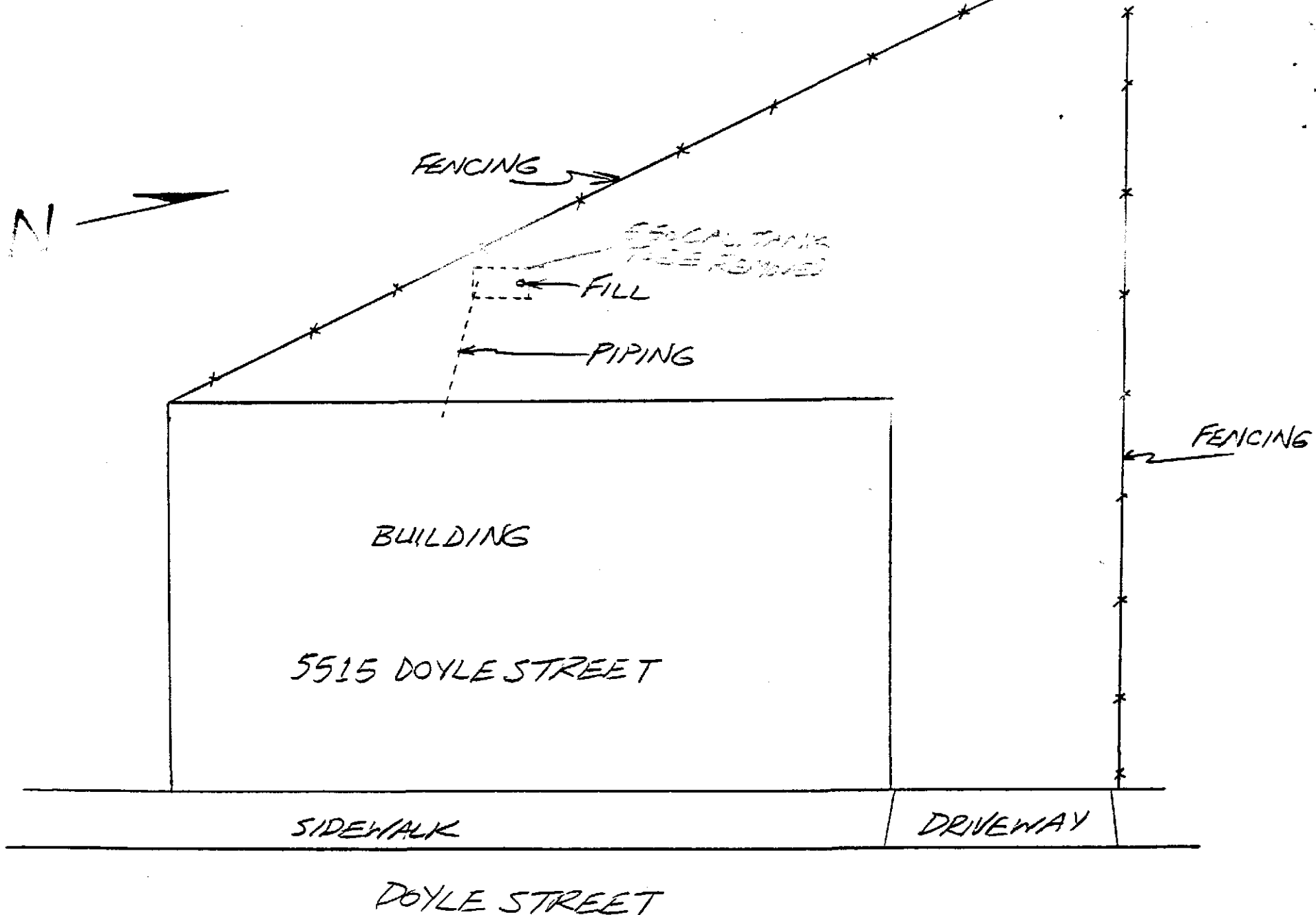
Date 9/11/94

Signature of Site Owner or Operator

Name (please type) JOE PIERI

Signature Joe Pieri

Date 9/11/94



PLOT PLAN: FORDHAM PROPERTIES  
5515 DOYLE STREET  
EMERYVILLE, CALIFORNIA

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



COMPLETE THIS FORM FOR EACH FACILITY/SITE

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

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

DBA OR FACILITY NAME <b>FORDHAM PROPERTIES</b>		NAME OF OPERATOR <b>RON HILL</b>		
ADDRESS <b>5515 WYLE STREET</b>		NEAREST CROSS STREET	PARCEL # (OPTIONAL)	
CITY NAME <b>EMERYVILLE</b>		STATE <b>CA</b>	ZIP CODE <b>94608</b>	SITE PHONE # WITH AREA CODE <b>510-547-7177</b>
<input checked="" type="checkbox"/> BOX TO INDICATE	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> LOCAL AGENCY DISTRICTS
	<input type="checkbox"/> COUNTY AGENCY	<input type="checkbox"/> STATE AGENCY	<input type="checkbox"/> FEDERAL AGENCY	
TYPE OF BUSINESS		<input type="checkbox"/> 1 GAS STATION	<input type="checkbox"/> 2 DISTRIBUTOR	<input type="checkbox"/> 3 FARM
	<input type="checkbox"/> 4 PROCESSOR	<input checked="" type="checkbox"/> 5 OTHER	<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE <b>ONE</b>
E. P. A. I. D. # (optional)				

**EMERGENCY CONTACT PERSON (PRIMARY)**

**EMERGENCY CONTACT PERSON (SECONDARY) - optional**

DAYS: NAME (LAST, FIRST) <b>HILL, RON</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	DAYS: NAME (LAST, FIRST) <b>PANTLE, ROY</b>	PHONE # WITH AREA CODE <b>510-754-9935</b>
NIGHTS: NAME (LAST, FIRST) <b>HILL, RON</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	NIGHTS: NAME (LAST, FIRST) <b>PANTLE, ROY</b>	PHONE # WITH AREA CODE <b>510-754-9935</b>

**II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)**

NAME <b>FORDHAM PROPERTIES</b>		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS <b>5743 LANDREGAN ST</b>		<input checked="" type="checkbox"/> box to indicate	<input checked="" type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LOCAL AGENCY
CITY NAME <b>EMERYVILLE</b>		<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> STATE AGENCY
		<input type="checkbox"/> COUNTY AGENCY	<input type="checkbox"/> FEDERAL AGENCY	
	STATE <b>CA</b>	ZIP CODE <b>94608</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	

**III. TANK OWNER INFORMATION - (MUST BE COMPLETED)**

NAME OF OWNER <b>FORDHAM PROPERTIES</b>		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS <b>5743 LANDREGAN ST.</b>		<input checked="" type="checkbox"/> box to indicate	<input checked="" type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LOCAL AGENCY
CITY NAME <b>EMERYVILLE</b>		<input type="checkbox"/> CORPORATION	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> STATE AGENCY
		<input type="checkbox"/> COUNTY AGENCY	<input type="checkbox"/> FEDERAL AGENCY	
	STATE <b>CA</b>	ZIP CODE <b>94608</b>	PHONE # WITH AREA CODE <b>510-547-7177</b>	

**IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 739-2582 if questions arise.**

TY (TK) HQ **44** - [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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

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

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

APPLICANT'S NAME (PRINTED & SIGNATURE) <b>RON HILL</b>	APPLICANT'S TITLE <b>PRESIDENT</b>	DATE MONTH/DAY/YEAR <b>9-21-94</b>
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**LOCAL AGENCY USE ONLY**

COUNTY # [ ] [ ]	JURISDICTION # [ ] [ ] [ ]	FACILITY # [ ] [ ] [ ] [ ] [ ] [ ]
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE PERMIT APPLICATION - FORM B, UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.

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



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

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

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: **FORDHAM PROPERTIES**

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

A. OWNERS TANK I.D.#	B. MANUFACTURED BY: <b>UNKNOWN</b>
C. DATE INSTALLED (MO/DAY/YEAR): <b>UNKNOWN</b>	D. TANK CAPACITY IN GALLONS: <b>550</b>

**II. TANK CONTENTS** PARTS MARKED, COMPLETE ITEM C.

A. <input type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input checked="" type="checkbox"/> 1 PRODUCT	C. <input checked="" type="checkbox"/> 1a REGULAR UNLEADED	<input type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input checked="" type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)

D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED \_\_\_\_\_ C. A. S. #: \_\_\_\_\_

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

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

**IV. PIPING INFORMATION** MARK ONE ITEM ONLY IN EACH ROW. MARK A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

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

**V. TANK LEAK DETECTION**

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

**VI. TANK CLOSURE INFORMATION**

1. ESTIMATED DATE LAST USED: <b>6/89</b>	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING: <b>0</b> GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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THIS FORM HAS BEEN PREPARED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE): **WILL HILL** *Will Hill* DATE: **9-21-94**

LOCAL AGENCY USE ONLY. THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

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

IPS Insurance Agency, Inc.  
346 West Grantline Road  
Tracy, CA 95376

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 A AMERICAN INT'L SPEC LINES INS CO.
- COMPANY B NATIONAL UNION FIRE INSURANCE
- COMPANY C
- COMPANY D

D.C. ENGINEERING  
P.O. Box 163  
Antioch, CA 94509

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 LTY	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	91644-9406049	6/08/94	6/08/95	GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG \$ 1,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 50,000
	<input type="checkbox"/> OWNERS & CONT PROP				EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> Premises Operations				FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$ 1,000
B	AUTOMOBILE LIABILITY	91644-9406049	6/08/94	6/08/95	COMBINED SINGLE LIMIT \$ 1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input checked="" type="checkbox"/> HIRED AUTOS				
<input checked="" type="checkbox"/> NON-OWNED AUTOS					
<input checked="" type="checkbox"/> Uninsured Motorist					
C	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
D	EXCESS LIABILITY				AGGREGATE \$
	<input type="checkbox"/> UMBRELLA FORM				SACH OCCURRENCE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE \$
E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS
	<input type="checkbox"/> THE PROPRIETOR				EACH ACCIDENT \$
	<input type="checkbox"/> PARTNERS/EXECUTIVE OFFICERS ARE:				DISEASE - POLICY LIMIT \$
					DISEASE - EACH EMPLOYEE \$
OTHER					

COPY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS  
Additional insured per attached endorsement

PONDEROSA HOMES, INC.  
6671 Owens Drive  
Pleasanton, CA 94588

ATTN: Carole Thompson

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL SEND BY MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO RECEIVE SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY ON THE ISSUING COMPANY.

AUTHORIZED REPRESENTATIVE  
Colleen Jedd

**HEALTH & SAFETY PLAN**

**for**

**FORDHAM PROPERTIES  
EMERYVILLE, CALIFORNIA**

**SEPTEMBER, 1994**

**prepared by:**

**COTTLE ENGINEERING  
P.O. BOX 163  
ANTIOCH, CA 94509  
510-754-9935**

## HEALTH AND SAFETY PLAN

### INTRODUCTION:

Cottle Engineering (Cottle) Health and Safety Program is designed to meet the requirements of 29 CFR 1910.120.

The objective of this Health and Safety Plan is to establish health and safety guidelines for the removal of one ~~4,700~~<sup>550</sup> gallon underground fuel storage tank located at 5515 Doyle Street, Emeryville, California. The project will consist of the removal and disposal of one 550 gallon underground fuel storage tank, collecting soil samples for laboratory analyses, and general site cleanup following completion of site operations. General information pertaining to the site is provided in Table 1.

TABLE 1

#### GENERAL INFORMATION HEALTH AND SAFETY PLAN

Fordham Properties  
Emeryville, California

Site: Fordham Properties

Location: 5515 Doyle Street, Emeryville, California

Background Review: Preliminary

#### Site/Hazard Overview

Apparent Hazard: Low

Type of Facility: Fuel Storage

Status of Facility: Inactive

Waste Types: Liquid, Solid

Waste Characteristics: Toxic, Ignitable, Volatile

Hazard Type: Liquids, Vapors



## CHARACTERIZATION OF WASTE PRODUCTS

The chemicals of concern on site are petroleum hydrocarbons. A summary of the health effects is given in Appendix I.

## SITE SAFETY WORK PLAN

### GENERAL:

Operations that will be conducted on the site include the excavation and removal of one 550 gallon single walled fuel storage tank and related piping, the collection of soil samples, and general site cleanup. The procedures for collection of soil and groundwater samples are described in Appendix II.

The Site Safety Officer (Table 3), will assess the hazard of inhalation of vapors or particulate matter according to meteorological conditions and the phase of site operations, and will determine when, and in what areas of the site, personnel will be required to wear respirators.

On site personnel are trained to be aware of the potential for temperature stress during site operations. The combination of overexertion, protective clothing, and ambient temperature extremes could cause stress which could lead to dehydration if body liquids and minerals are not replaced. Heat exhaustion in warm climate, and hypothermia in cold climates, etc.. Rest periods and replacement of body fluids by potable drinking water and electrolyte containing beverages are required to prevent heat stress.

#### **HEALTH AND SAFETY RESPONSIBILITIES FOR KEY PERSONNEL:**

The Project Manager and the Site Safety Officer will be responsible for planning and coordinating all on site activities and will ensure that a Tailgate Safety Meeting Form is obtained before work begins. They will also ensure that the Tailgate Safety Meeting Form is signed daily by each employee on site and that the Health and Safety Plan is reviewed by all site operations personnel before work begins.

The Site Safety Officer will be responsible for implementing all facets of the Health and Safety Plan during site operations, including briefing all participants in the Health and Safety Plan requirements, ensuring that all necessary permits are on site, enforcing the use of hearing protection where required, establishing the exclusionary zone or other safe zones as appropriate, and determining actions to be taken in case of an on site emergency. The Site Safety Officer will bring all real or potential health and safety problems to the attention of the Project Manager.

The Project Manager will be responsible for determining all site-specific health and safety decisions and will oversee their implementation.

#### **WORKER TRAINING REQUIREMENTS:**

As required by 29 CFR 1910.120, all site operations personnel will have completed at least 40 hours of health and safety

training prior to entering the site. Additionally, the Site Supervisor will have completed an additional 8 hours of specialized instruction. Evidence is generally demonstrated by a Certificate of Training. In addition, no visitors will be allowed inside the exclusionary zone if compliance with the training provisions of 29 CFR 1910.120 cannot be demonstrated.

#### **MEDICAL SURVEILLANCE REQUIREMENTS:**

As required by 29 CFR 1910.120, all site operations personnel shall participate in a medical surveillance (Occupational Health) monitoring program (as appropriate for each project).

Documentation will be required from all subcontractor site operations personnel to demonstrate this compliance.

#### **DOCUMENTATION:**

Compliance with the Health and Safety Plan review requirement will be documented on a sign-off sheet during the safety briefing attendance meetings which will be scheduled at the beginning of field operations and which will be reviewed at the beginning of each day during the conduct of site operations. A sign-off sheet is presented in Appendix III.

This meeting, also known as the Tailgate Safety Meeting, will be conducted by the Site Safety Officer or the Site Operations Supervisor (Table 2). This meeting must be attended by all Cottle employees and other subcontractors working on the project that day. It is strongly recommended that all non-employees at the site also attend.

## GENERAL SAFETY REQUIREMENTS:

The following general safety requirements shall be followed by all site operations personnel, or qualified visitors, working and/or entering the site during the conduct of the site operations.

- \* No site operations personnel or visitors will be allowed on site without the prior knowledge and consent of the Site Safety Officer.
- \* There will be no activities conducted on site without sufficient backup personnel. At a minimum, two persons must be present on the site during the conduct of the site operations. A trained Cottle supervisor, as required by 29 CFR 1910.120, must be present on site at all times during the conduct of site operations.
- \* All site operations personnel shall immediately bring to the attention of the Site Safety Officer of Project Manager any unsafe condition or practice associated with the site activities that they are unable to correct themselves.
- \* There will be no smoking, eating, chewing gum, drinking or tobacco consumption inside the exclusionary zone/controlled area.
- \* Good housekeeping practices will be used on site at all times.
- \* Hands shall be thoroughly cleaned prior to smoking, eating or other activities outside the exclusionary zone/controlled area.
- \* All borings will be monitored to prevent inadvertent contact.
- \* Site operations personnel must avoid unnecessary contamination, including walking through known or suspected "hot spots" or contaminated puddles, kneeling or sitting on the ground, leaning against potentially contaminated barrels or equipment.
- \* A fire extinguisher (minimum rating 10:B:C) will be on site at all times.
- \* Respiratory devices will not be worn with beards, long sideburns, or under any other conditions that prevent a proper seal while the respirator is being worn.

- \* Contact lenses will not be worn with respirators in use.
- \* Only designated personnel will be allowed to operate specialized equipment (e.g. drill rig).
- \* No confined space entry is authorized by this Health and Safety Plan.

**EXCLUSIONARY ZONE/CONTROLLED AREA:**

An Exclusionary Zone will be established immediately around the tank excavation area and the soils stockpile, clearly marked (as needed). A map will be posted on site showing these areas.

The following activities will be conducted in the Exclusionary Zone:

- \* Equipment Staging
- \* Excavation of The Tank and Stockpiling of The Spoil
- \* Soil Sampling

#### PERSONAL PROTECTIVE EQUIPMENT:

The level of protection will be Level D (modified if appropriate) with upgrade to Level C if appropriate. Level D includes the following equipment:

- \* Hard hat
- \* Routine work clothes
- \* Steel-toed safety boots
- \* Protective eye wear
- \* Nitrile gloves (when handling soil, during testing, sampling, shovelling, etc.).

Level D includes the following equipment:

- \* Hard hat
- \* Nitrile gloves
- \* Disposable Tyvek coveralls over work clothes
- \* Disposable PVC booties over steel-toed safety boots
- \* NIOSH-approved full face (or half-face respirator with goggles) equipped with high-efficiency combination cartridges for toxic particulates and organic vapors (on standby)
- \* Earplugs or earmuffs (while working on or around operating equipment)

The decision to upgrade to Level C protective equipment will be determined by the on site Health & Safety Officer.

#### DECONTAMINATION:

Decontamination consists of contamination-reduction phases and personal hygiene for site operations. The following decontamination/contamination reduction steps will be used:

- \* Maximize the use of disposable clothing for personnel protection (latex surgical gloves, Tyvek coveralls, and PVC booties).

- \* Remove disposable PVC booties, Tyvek coveralls, outer gloves, and dispose of them in clean unused garbage bags.
- \* Remove respirator, remove cartridges, and discard them. Return respirator to storeroom at the end of the job. All respirators will be properly washed, sanitized, tagged, and stored.
- \* The garbage bags holding disposable items from the site operations will be placed in securely covered, clearly marked 55-gallon steel drums and placed in an area of the site at the direction of the Site Engineer. Final disposition will be in accordance with the site remedial action.
- \* Wash hands and face with soap immediately upon exiting the Exclusionary Zone.
- \* After departing the site, site operations personnel should shower as soon as possible.
- \* After departing the site, fabric work clothes and undergarments should be washed as soon as possible using routine wash methods.
- \* (As appropriate) each piece of equipment (tools and all vehicles contacting potentially contaminated materials) must be decontaminated before it leaves the operation site. This must be done in an area designated for equipment decontamination (to be determined). Large items of equipment, such as the drill rig, vehicles and trucks, should be subjected to decontamination by high pressure water washes or steam. A special solution, such as Liqui-Nox, a 1% to 2% TSP solution, or Bola degreaser, may have to be used on sampling equipment or heavily soiled items. All wash and rinse water must be contained (on visqueen for large equipment, in 5 gallon buckets for tools), collected and stored in marked 55 gallon drums on site until final disposition is determined.

#### PHYSICAL HAZARDS:

The physical hazards associated with operating heavy equipment are as follows:

- \* Moving machine parts
- \* "Struck by" or rollover injuries from the equipment
- \* Noise levels
- \* Exposure to contaminated particulates while excavating soil

- \* Possible contact with gas or power lines during excavation
- \* Possible contact with underground utilities

All personnel operating the excavating equipment will be experienced with the equipment's operating procedures and safety precautions.

Noise levels for heavy equipment operators may be expected to exceed 85 decibels on the A-weighted scale. Therefore, heavy equipment operators will wear disposable earplugs or earmuffs with a noise reduction rating (NRR) of at least 25 decibels. A hearing conservation program, in conformance with OSHA requirements, will be in effect throughout the duration of the project.

Care will be used when moving excavated spoil to avoid creating dust. An air purifying respirator may be required while performing any operation where sufficient dust may be generated. See Personal Protective Equipment section.

The Project Manager or the Site Safety Officer shall investigate all potential excavation sites for gas and power lines above and below ground before excavating. This includes contacting the Underground Service Alert organization at 800-642-2444 at least 24 hours prior to the job commencement. No excavation will occur in any area where such lines are found.



#### OCCUPATIONAL EXPOSURE MONITORING:

In order to prevent overexposures to employees of physical and chemical agents, it may be necessary to conduct monitoring evaluations. Environmental agents of concern on this project may include airborne concentrations of petroleum hydrocarbons, noise, or temperature extremes. The Site Safety Officer may use any of the following equipment to assess employee exposure:

- \* HNu (or similar) Photoionization Detector
- \* Foxboro Organic Vapor Analyzer/Flame Ionization Detector
- \* Draeger Colorimetric Indicator Tubes
- \* Quest Noise Dosimeter
- \* Gilian Personal Air Sampling Pumps, with appropriate media
- \* Metrosonics WBGT Heat Stress Monitor
- \* Combustible gas indicator with ppm scale (Gastech 1314 or equivalent)
- \* Oxygen detector

#### EMERGENCY INFORMATION:

A description of local resources available in case of emergency is presented on Table 2.

#### EMERGENCY PROCEDURES FOR INJURY:

If an injury should occur on the site and involves exposure to gross contamination, the local emergency contacts (Table 2) will be notified of the incident and of the potential contaminants

involved. Before being transported to the medical care facility, the victim will undergo a gross washdown using clear water after removal of all contaminated clothing. This will reduce the chance of spreading contaminants to the emergency vehicle and local hospital.

If an accident should occur on site which results in a minor injury (e.g., cuts or bruises), a first aid kit and portable eye wash unit will be available for treatment.

If an accident should occur on site which results in a major trauma (e.g., fractured bones or severe lacerations), the local emergency telephone number (911) will be used to contact emergency services. The victim will not be transported in any vehicle other than a fully equipped emergency vehicle.

**SAFETY EQUIPMENT CHECKLIST:**

A safety equipment checklist is presented on Table 3.

**TABLE 2**

**EMERGENCY INFORMATION  
LOCAL RESOURCES**

**HEALTH AND SAFETY PLAN**

**FORDHAM PROPERTIES  
Emeryville, California**

**Ambulance: 510-420-6080**

**Hospital Emergency Room: MERRITT/PERALTA MEDICAL CENTER  
WEBSTER STREET  
OAKLAND, CALIFORNIA  
510-655-4000**

**Route to the Hospital: ENTER THE 580 FREEWAY EASTBOUND, EXIT AT  
TELEGRAPH, GO SOUTH ON TELEGRAPH TO  
WEBSTER, TURN RIGHT ON WEBSTER, LEFT ON  
HAWTHORNE AND PROCEED TO THE EMERGENCY  
ENTRANCE.**

**Local Police: (911)**

**Local Fire: (911)**

**San Mateo County Health Dept.: 510-567-6737**

**Cottle Project Manager: David E. Cottle, Sr.**

**Cottle Site Safety Officer: Alvin Knackstedt**

**Cottle Site Operations Supervisor: David E. Cottle, Sr.**

TABLE 3

SAFETY EQUIPMENT CHECKLIST

HEALTH AND SAFETY PLAN

FORDHAM PROPERTIES  
Emeryville, California

PERSONAL PROTECTION

Full face respirator  
Half face respirator  
High efficiency combination cartridges for  
toxic particulates, organic vapors, and  
acid gasses  
safety boots - industrial grade work boots  
with steel toe  
Tyvek coveralls  
Safety glasses  
Goggles  
Hard hat  
PVC rain gear  
Nitrile Gloves  
Latex gloves  
PVC Booties

MONITORING AND  
SURVEILLANCE

MISCELLANEOUS:

First aid kit  
Drinking water  
Eye wash kit  
Fire extinguisher  
Ear plugs or earmuffs

PERSONAL DECONTAMINATION EQUIPMENT

Clear water  
5 gallon plastic buckets  
Liqui-Nox  
Hand soap  
Plastic garbage bags  
Paper hand towels

HAZARDOUS WASTE GENERATOR INSPECTION REPORT **3329335**

STID #: \_\_\_\_\_ FACILITY NAME: Fordham Properties PG. 1 OF 1

SUPPLEMENTAL FORM  
5515 Doyle St  
Emergville

# 425262  
LEC - 8 F.D. George Warren Hanker Dixon LTD  
O<sub>2</sub> - 1.9 Derrit 4/95  
(Manifest Reviewed)

Tank removed approximately 750 gallons  
 containing fuel, type unknown. Tank rusted  
 with holes noted at bottom tank. Pictures  
 taken. Leak definitely occurred.

(1) Composite Samples  
 taken of Stockpile excavated  
 5.8'

10:55am FP-2	X	2 samples taken. 1 foot
10	7' excavation	below tank.
		Groundwater not reached.
10:45am FP-1	X	
		Fill-incl

Excavation: Strong odor and discoloration  
 to be evident.

(1) Simplest Analyze for - TPHD & TPHG & BTXES  
 5 - Days turn around time - Submit samples <sup>analysis</sup> to Brian Oliver

PRINT NAME: DAVID E. COTTLE SR. INSPECTED BY: Raul Murgillano  
 SIGNATURE: [Signature] DATE: 10/20/94

CITY OF EMERYVILLE  
FIRE DEPARTMENT  
6303 HOLLIS STREET  
EMERYVILLE, CA., 94608  
(510) 596-3750

FIRE DEPARTMENT  
USE ONLY

94-1018  
(PERMIT NUMBER)

APPLICATION AND PERMIT

THIS APPLICATION IS YOUR PERMIT WHEN PROPERLY FILLED OUT,  
SIGNED, VALIDATED AND FEES PAID.

ADDRESS: 5515 Doyle St  
BUSINESS NAME: Cattle Eng.  
CONTACT PERSON: Roy Pantle  
TELEPHONE NUMBER: 510-754-9935

Application Received :  
Date: 10/18/94 Signed: JW

Permit Issued:  
Date: 10/18/94 Signed: JW

EFD Permit Type(s) :  
(see reverse)  
Expiration Date : 6 mos. after  
date of issue -

TOTAL FEES DUE: \$125.00/tank

DESCRIPTION OF OPERATION:

Tank Removal

MAKE CHECK PAYABLE TO THE CITY  
OF EMERYVILLE. CK # 348

FEES ARE ESTABLISHED THRU THE  
CITY OF EMERYVILLE MASTER FEE  
SCHEDULE ADOPTED JUNE 1, 1993.  
COPY AVAILABLE ON REQUEST.

APPLICANT READ AND SIGN BELOW:

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT  
THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO  
COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS THAT  
RELATE TO THIS PERMIT. I HEREBY AUTHORIZE REPRESENTATIVES  
OF THE CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY TO  
VERIFY COMPLIANCE WITH THE CONDITIONS OF THIS PERMIT, AT  
ANY REASONABLE TIME.

Building Owner  
 Business Operator  
Date of Application: 10-18-94

Occupancy Group/Division:  
(per UBC Table 5A)

OCCUPANCY TYPE:

Commercial  Assembly   
Industrial  Educational   
Residential  H-class   
Other  Specify: \_\_\_\_\_

THIS PERMIT MUST BE AVAILABLE FOR INSPECTION AT ALL TIMES

REVOCACTION OF PERMIT

THE CHIEF IS AUTHORIZED TO SUSPEND/REVOKE A PERMIT WHEN THE CHIEF HAS  
DETERMINED THAT SECTION 4.107, 1991 UFC HAS BEEN VIOLATED.

POSTING OF PERMIT

PERMIT(S) SHALL BE KEPT ON THE PREMISES DESIGNATED AT ALL TIMES AND  
SHALL BE AVAILABLE FOR INSPECTION AT ANY TIME BY ANY PERSON(S) WHO  
ARE AUTHORIZED BY THE CHIEF OF THE EMERYVILLE FIRE DEPARTMENT.

DATE

INSPECTION NOTES/COMMENTS

INSPECTOR

# **COTTLE** *Engineering*

*P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935*

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CA Lic. No. 481444

## **MANIFEST DOCUMENTS**

**Fordham Properties  
5515 Doyle Street  
Emeryville, California**

**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. CA1C1010109127840 Manifest Document No. 00704

2. Page 1 of 1

Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address  
**Fordham Properties**  
**5743 Landreth Street - Emeryville, Calif.**  
**94608**

4. Generator's Phone **510 547-7177**

5. Transporter 1 Company Name **Dexanna, Ltd.** 6. US EPA ID Number CAAD982438566

7. Transporter 2 Company Name \_\_\_\_\_ 8. US EPA ID Number \_\_\_\_\_

9. Designated Facility Name and Mailing Address **Erickson, Inc. - 255 Parr Blvd.**  
**Richmond, California 94801** 10. US EPA ID Number CAAD009466392

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers		13. Total Quantity	14. Unit Wt/Vol
	No.	Type		
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.	001	T P	00750	P
b.				
c.				
d.				

15. Special Handling Instructions and Additional Information  
**Keep away from sources of ignition. Always wear hardhats when working around U.S.T.s - Site Location: 5515 Doyle Street - Emeryville, California**  
**24 Hr. Contact Name: Joe Pieri Phone # (510) 547-7177**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and international laws.  
 If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **RONALD J. SHERMAN** Signature *Ronald J. Sherman* Month 1 Day 20 Year 94

17. Transporter 1 Acknowledgment of Receipt of Materials  
 Printed/Typed Name **JAMES H. COX** Signature *James H. Cox* Month 1 Day 20 Year 94

18. Transporter 2 Acknowledgment of Receipt of Materials  
 Printed/Typed Name \_\_\_\_\_ Signature \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

19. Discrepancy Indication Space

20. Facility Owner or Operator Acknowledgment of receipt of hazardous materials covered by this manifest except as noted in Item 19.  
 Printed/Typed Name **DAVID SATO** Signature *DAVE SATO* Month 1 Day 20 Year 94

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-952-7550



# **COTTLE** *Engineering*

P.O. Box 163  
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(510) 754-9935

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CA Lic. No. 481444

## **ANALYTICAL RESULTS**

### **PRIMARY SAMPLING**

**Fordham Properties  
5515 doyle Street  
Emeryville, California**

Cottle Industries P.O. Box 7 Antioch, CA 94509	Client Project ID: Fordham Park	Date Sampled: 10/20/94
		Date Received: 10/20/94
	Client Contact: Roy Pantle	Date Extracted: 10/20/94
	Client P.O:	Date Analyzed: 10/20-10/21/94

Gasoline Range (C6-C12) Volatile Hydrocarbons as Gasoline\*, with BTEX\*

EPA methods 8000, modified 8015, and 8020 or 602; California RWQCB (SF Bay Region) method GCFID(5030)

Lab ID	Client ID	Matrix	TPH(g) <sup>+</sup>	Benzene	Toluene	Ethylbenzene	Xylenes	% Rec. Surrogate
41744	FP-1	S	760,b	0.22	3.3	14	68	92
41745	FP-2	S	4200,b	ND< 1	87	90	540	87
41746	Comp-FP-1	S	73,b,d	ND< 0.01	0.23	0.34	1.4	110
Detection Limit unless otherwise stated. ND means Not Detected	W		50 ug/L	0.5	0.5	0.5	0.5	
	S		1.0 mg/kg	0.005	0.005	0.005	0.005	

\*water samples are reported in ug/L, soil samples in mg/kg, and all TCLP extracts in mg/L

# cluttered chromatogram; sample peak co-elutes with surrogate peak

+ The following descriptions of the TPH chromatogram are cursory in nature and McCampbell Analytical is not responsible for their interpretation: a) unmodified or weakly modified gasoline is significant; b) heavier gasoline range compounds are significant(aged gasoline?); c) lighter gasoline range compounds (the most mobile fraction) are significant; d) gasoline range compounds are significant; no recognizable pattern; e) TPH pattern that does not appear to be derived from gasoline (?); f) one to a few isolated peaks present; g) strongly aged gasoline or diesel range compounds are significant; h) lighter than water immiscible phase is present.

## QC REPORT FOR HYDROCARBON ANALYSES

Date: 10/20/94

Matrix: Soil

Analyte	Concentration (mg/kg)			Amount Spiked	% Recovery		
	Sample	MS	MSD		MS	MSD	RPD
TUH (gas)	0.000	1.925	1.994	2.03	95	98	3.5
Benzene	0.000	0.194	0.186	0.2	97	93	4.2
Toluene	0.000	0.196	0.188	0.2	98	94	4.2
Ethylbenzene	0.000	0.192	0.188	0.2	96	94	2.1
Xylenes	0.000	0.600	0.584	0.6	100	97	2.7
TUH (diesel)	N/A	N/A	N/A	N/A	N/A	N/A	N/A
TPPH (oil & grease)	N/A	N/A	N/A	N/A	N/A	N/A	N/A

$$\% \text{ Rec.} = (\text{MS} - \text{Sample}) / \text{amount spiked} \times 100$$

$$\text{RPD} = (\text{MS} - \text{MSD}) / (\text{MS} + \text{MSD}) \times 2 \times 100$$



# **COTTLE** *Engineering*

*P.O. Box 163  
Antioch, CA 94509  
(510) 754-9935*

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CA Lic. No. 481444

## **CERTIFICATE OF DESTRUCTION**

**Fordham Properties  
5515 Doyle Street  
Emeryville, California**

DAY OR NIGHT  
TELEPHONE  
(510) 235-1393

# CERTIFICATE CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

## NO. 11567

CUSTOMER  
DEXANNA

JOB NO.  
964295

FOR: ERICKSON, INC. TANK NO. 14760

LOCATION: RICHMOND DATE: 94/10/21 TIME: 10:31

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT LG

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 750 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%  
ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN  
CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS  
WASTE FACILITY.  
ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK  
SHIPPED TO US FOR PROCESSING.

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

### STANDARD SAFETY DESIGNATION

**SAFE FOR MEN:** Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

**SAFE FOR FIRE:** Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration than permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

Janita Cuapo  
REPRESENTATIVE

TITLE

Dave Suto  
INSPECTOR

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7350

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator's US EPA ID No. CA1C10100927840	Manifest Document No. 00704	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Fordham Properties 5743 Landregon Street - Emeryville, Calif. 94608						
4. Generator's Phone 610 547-7177		6. US EPA ID Number CAD982438566				
5. Transporter 1 Company Name Dexanna, Ltd.		7. Transporter 2 Company Name				
9. Designated Facility Name and Site Address Erickson, Inc. - 255 Park Blvd. Richmond, California 94801		10. US EPA ID Number CAD1009466392				
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit	
		No.	Type			
		a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.	001	T P	00750	P
		b.				
		c.				
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Always wear hardhats when working around U.S.T.'s. - Site Location: 5515 Doyle Street - Emeryville, California 24 Hr. Contact Name: Joe Pieri Phone # (510) 547-7177						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and international laws.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name RONALD J. SILBERMAN		Signature <i>Ronald J. Silberman</i>		Month 10	Day 20	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name James R. Cox		Signature <i>James R. Cox</i>		Month 10	Day 20	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month	Day	
19. Discrepancy Indication Space						
20. Facility Owner or Generator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name DAVID SATO						
		Signature <i>DAVE SATO</i>		Month 10	Day 20	

DO NOT WRITE BELOW THIS LINE.