

The Goodyear Tire & Rubber Company
Akron, Ohio 44316 - 0001

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

August 22, 1995

MR BARNEY CHAN
ALAMEDA COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 HARBOR BAY PARKWAY, ROOM 250
ALAMEDA, CA 94502

UST Removal Closure Report
2101 Park Boulevard
Oakland, CA

Dear Mr Chan:

Enclosed is the Underground Storage Tank Closure Report for the above referenced facility as prepared by SEMCO.

Based on the results of the closure, we are requesting no further action.

If you have any questions, please contact Rhonda Reames-Kiper at Semco at (415) 572-8033 or the undersigned at (216) 796-7898.

Very truly yours,



Principal Environmental Engineer
D/110F

J M Smerglia:jmk

Enclosure

cc Rhonda Reames-Kiper
SEMCO
1741 Leslie Street
San Mateo, CA 94402

95 AUG 28 PM 3:01

RECEIVED

S E M C O
ENVIRONMENTAL CONTRACTORS & GENERAL ENGINEERING
1741 LESLIE STREET
SAN MATEO, CALIFORNIA 94402

August 16, 1995

Barney Chan
Alameda County
Department of Environmental Health
1131 Harbor Bay Parkway, Room 250
Alameda, California 94502

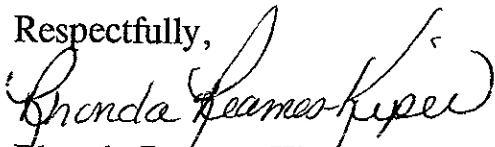
Re: Tank Removal Report
2101 Park Blvd., Oakland

Dear Barney:

Please find enclosed, a copy of the tank removal report for the above mentioned address.

If you have any questions, please give me a call.

Respectfully,


Rhonda Reames-Kiper
SEMCO-SAN MATEO

cc: Joseph Smerglia
Jim O'Neil
File

**TANK REMOVAL
ACTIVITY REPORT**

**2101 PARK BLVD.
OAKLAND, CALIFORNIA**

Prepared for:

**GOODYEAR TIRE & RUBBER COMPANY
1144 EAST MARKET STREET
AKRON, OHIO 44316-0001**

Submitted to:

**COUNTY OF ALAMEDA
ENVIRONMENTAL HEALTH DEPARTMENT
1131 HARBOR BAY PARKWAY, ROOM 250
ALAMEDA, CALIFORNIA 94502
(510) 567-6700**

Prepared by:

**SEMCO
1741 LESLIE STREET
SAN MATEO, CALIFORNIA 94402
(415) 572-8033**

**JOB # 95-4219
AUGUST 1995**

**Tank Removal Report
2101 Park Blvd.
Oakland, California**

SEMCO was contracted by Goodyear Tire & Rubber Company to remove one 550 gallon waste oil tank from the commercial site located at 2101 Park Blvd., Oakland, California. This report covers the tank removal and related soil sampling.

On July 14, 1995, SEMCO removed the concrete surface in order to access the tank. The soil was removed from the top and along one side of the tank and stockpiled on site.

The tank was cleaned with a high pressure hot water wash and inerted with solid carbon dioxide (dry ice) until acceptable levels of oxygen and lower explosive limits were reached to meet safety requirements. A total of 20 gallons of residual product and rinsate was pumped from the tank and placed into a barrel for disposal at a later date under manifest. On August 9, 1995, Evergreen Environmental pumped the barrel for transportation and disposal under manifest number 95643939.

Barney Chan of the Alameda County Environmental Health Department and Joan Austin of the Oakland Fire Department were on site to verify the tank reading and witness the removal, loading and samplings activities.

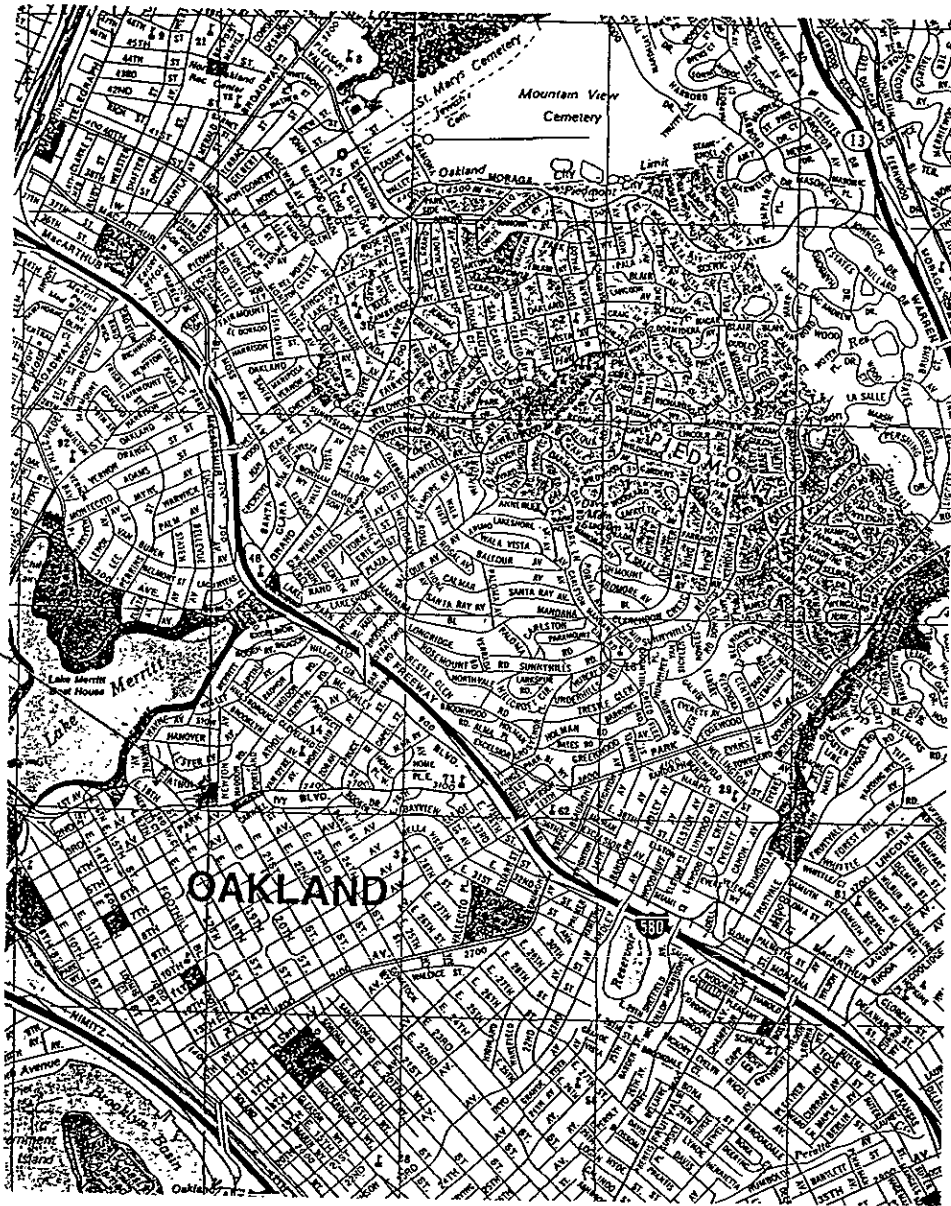
The tank was double wall steel and in excellent condition with no holes observed. The soil had no discoloration or odor. The tank was loaded onto H & H's truck and transported to their facility in San Francisco for disposal under manifest number 95208485.

Due to a concrete slab found beneath the tank, samples were collected at each end of the slab at 6 feet below ground surface. Additionally, a four point composite sample was collected from the excavated soil. All samples were collected in clean brass tubes, which were sealed with Teflon tape, pre-formed plastic end caps and masking tape.

The samples were labeled, entered onto a chain of custody and placed in an iced cooler for transportation to North State Environmental for the analysis of Total Petroleum Hydrocarbons as Gas and Diesel (TPH-G/D), Benzene, Toluene, Ethyl Benzene, Xylenes (BTEX), Total Oil and Grease (TOG), ICP 5 Metals and Method 8010. Analytical results demonstrated non detect levels of all constituents with the exception of minimal levels of Nickel, Zinc and Chromium in all three samples.

This report was prepared from field technicians daily reports, inspector's field notes and analytical data pertaining to this site.

SITE



SITE LOCATION MAP

APPENDIX



C E R T I F I C A T E O F A N A L Y S I S

JOB NO: 95-313 DATE SAMPLED: 07-14-95
 CLIENT: SEMCO DATE EXTRACTED: 07-17-95
 PROJECT NAME: 95-4219 GOODYEAR DATE ANALYZED: 07-17-95

BTXE AND GASOLINE RANGE ORGANICS BY
 EPA METHOD 8020/5030 AND 8015 M
 DIESEL RANGE HYDROCARBONS BY EPA METHOD 8015 M
 TEPH (OIL AND GREASE) BY EPA METHOD 5520 F

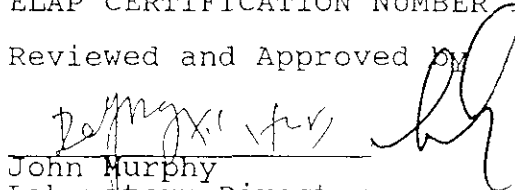
Sample No.	Client ID	Analyte	Result
95-313-01	#1-550-WO-N-6'	Benzene	ND
		Toluene	ND
		Ethylbenzene	ND
		Xylenes	ND
		Gasoline	ND
		Diesel	ND
		TEPH (5520 F)	ND
95-313-02	#2-550-WO-S-6'	Benzene	ND
		Toluene	ND
		Ethylbenzene	ND
		Xylenes	ND
		Gasoline	ND
		Diesel	ND
		TEPH (5520 F)	ND
95-313-03	#3-COMP SPOILS	Benzene	ND
		Toluene	ND
		Ethylbenzene	ND
		Xylenes	ND
		Gasoline	ND
		Diesel	ND
		TEPH (5520 F)	ND

Quality Control Quality Assurance Summary: Soil

Analyte	Method	Reporting limit	Blank	MS/MSD Recovery	RPD
Benzene	8020	5 ug/Kg	ND	AVG 98%	9
Toluene	8020	5 ug/Kg	ND		
Ethylbenzene	8020	5 ug/Kg	ND		
Xylenes	8020	10 ug/Kg	ND		
Gasoline	8015/5030	0.5 mg/Kg	ND	AVG 99%	12
Diesel	8015 M	1 mg/Kg	ND	AVG 99%	1
TEPH	5520 F	50 mg/Kg	ND	AVG 62%	8

ELAP CERTIFICATION NUMBER 1753

Reviewed and Approved


 John Murphy
 Laboratory Director



C E R T I F I C A T E O F A N A L Y S I S

JOB NO: 95-313 DATE SAMPLED: 07/14/95
 CLIENT: SEMCO DATE EXTRACTED: 07/17/95
 PROJECT NAME: 95-4219 GOODYEAR DATE ANALYZED: 07/17/95

HALOGENATED VOLATILE ORGANICS BY EPA SW-846 METHODS 5030/8010
 RESULT OF ANALYSIS

Laboratory Number	95-313-01
Client ID:	#1-550-WO-N-6'
Matrix:	Soil
Analyte	Result
Chloromethane/Vinyl Chloride:	ND<20
Bromomethane/Chloroethane:	ND<20
Trichlorofluoromethane:	ND<10
1,1-Dichloroethene:	ND<5
Dichloromethane:	ND<10
1,1-Dichloroethane:	ND<5
t-1,2-Dichloroethene:	ND<5
cis-1,2-Dichloroethene:	ND<5
Chloroform:	ND<5
1,1,1-Trichloroethane:	ND<5
Carbon tetrachloride/1,2-Dichloroethane:	ND<10
Bromodichloromethane:	ND<5
1,2-Dichloropropane:	ND<5
2-Chloro-ethyl-vinyl-ether:	ND<5
c-1-3-Dichloropropene:	ND<5
Trichloroethene:	ND<5
Dibromochloromethane:	ND<5
1,1,2-Trichloroethane:	ND<5
t-1,3-Dichloropropene:	ND<5
Bromoform:	ND<10
Tetrachloroethene:	ND<5
1,1,2,2-Tetrachloroethane:	ND<5
Chlorobenzene:	ND<5
1,3-Dichlorobenzene:	ND<5
1,4-Dichlorobenzene:	ND<5
1,2-Dichlorobenzene:	ND<5
Concentration:	ug/Kg



C E R T I F I C A T E O F A N A L Y S I S

JOB NO: 95-313 DATE SAMPLED: 07/14/95
CLIENT: SEMCO DATE EXTRACTED: 07/17/95
PROJECT NAME: 95-4219 GOODYEAR DATE ANALYZED: 07/17/95

HALOGENATED VOLATILE ORGANICS BY EPA SW-846 METHODS 5030/8010

RESULT OF ANALYSIS

Laboratory Number	95-313-02
Client ID:	#2-550-WO-S-6'
Matrix:	Soil
Analyte	Result
Chloromethane/Vinyl Chloride:	ND<20
Bromomethane/Chloroethane:	ND<20
Trichlorofluoromethane:	ND<10
1,1-Dichloroethene:	ND<5
Dichloromethane:	ND<10
1,1-Dichloroethane:	ND<5
t-1,2-Dichloroethene:	ND<5
cis-1,2-Dichloroethene:	ND<5
Chloroform:	ND<5
1,1,1-Trichloroethane:	ND<5
Carbon tetrachloride/1,2-Dichloroethane:	ND<10
Bromodichloromethane:	ND<5
1,2-Dichloropropane:	ND<5
2-Chloro-ethyl-vinyl-ether:	ND<5
c-1-3-Dichloropropene:	ND<5
Trichloroethene:	ND<5
Dibromochloromethane:	ND<5
1,1,2-Trichloroethane:	ND<5
t-1,3-Dichloropropene:	ND<5
Bromoform:	ND<10
Tetrachloroethene:	ND<5
1,1,2,2-Tetrachloroethane:	ND<5
Chlorobenzene:	ND<5
1,3-Dichlorobenzene:	ND<5
1,4-Dichlorobenzene:	ND<5
1,2-Dichlorobenzene:	ND<5
Concentration:	ug/Kg



North State Environmental
 Chemical Waste Disposal · Trucking · Consulting

C E R T I F I C A T E O F A N A L Y S I S

JOB NO: 95-313	DATE SAMPLED: 07/14/95
CLIENT: SEMCO	DATE EXTRACTED: 07/17/95
PROJECT NAME: 95-4219 GOODYEAR	DATE ANALYZED: 07/17/95

HALOGENATED VOLATILE ORGANICS BY EPA SW-846 METHODS 5030/8010

RESULT OF ANALYSIS

Laboratory Number	95-313-03
Client ID:	#1-COMP SPOILS
Matrix:	Soil
Analyte	Result

Chloromethane/Vinyl Chloride:	ND<20
Bromomethane/Chloroethane:	ND<20
Trichlorofluoromethane:	ND<10
1,1-Dichloroethene:	ND<5
Dichloromethane:	ND<10
1,1-Dichloroethane:	ND<5
t-1,2-Dichloroethene:	ND<5
cis-1,2-Dichloroethene:	ND<5
Chloroform:	ND<5
1,1,1-Trichloroethane:	ND<5
Carbon tetrachloride/1,2-Dichloroethane:	ND<10
Bromodichloromethane:	ND<5
1,2-Dichloropropane:	ND<5
2-Chloro-ethyl-vinyl-ether:	ND<5
c-1-3-Dichloropropene:	ND<5
Trichloroethene:	ND<5
Dibromochloromethane:	ND<5
1,1,2-Trichloroethane:	ND<5
t-1,3-Dichloropropene:	ND<5
Bromoform:	ND<10
Tetrachloroethene:	ND<5
1,1,2,2-Tetrachloroethane:	ND<5
Chlorobenzene:	ND<5
1,3-Dichlorobenzene:	ND<5
1,4-Dichlorobenzene:	ND<5
1,2-Dichlorobenzene:	ND<5

Concentration:	ug/Kg
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North State Environmental
Chemical Waste Disposal · Trucking · Consulting

C E R T I F I C A T E O F A N A L Y S I S

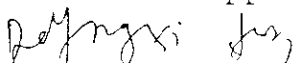
JOB NO: 95-313 DATE SAMPLED: 07/14/95
CLIENT: SEMCO DATE EXTRACTED: 07/17/95
PROJECT NAME: 95-4219 GOODYEAR DATE ANALYZED: 07/17/95

HALOGENATED VOLATILE ORGANICS BY EPA SW-846 METHODS 5030/8010
QUALITY ASSURANCE AND CONTROL DATA-SOIL

Compound:	Method Blank (ug/Kg)	RL (ug/Kg)	Spike Recovery (%)	Limits (%)	RPD (%)
Chloromethane/VChloride:	ND<20	20			
Bromomethane/Chloroethane:	ND<20	20			
Chloroethane:	ND<10	10			
Trichlorofluoromethane:	ND<10	10			
1,1-Dichloroethene:	ND<5	5			
Dichloromethane:	ND<10	10			
1,1-Dichloroethane:	ND<5	5	90/85	75/125	6
t-1,2-Dichloroethene:	ND<5	5			
cis-1,2-Dichloroethene:	ND<5	5			
Chloroform:	ND<5	5			
1,2-Dichloroethane:	ND<5	5			
1,1,1-Trichloroethane:	ND<5	5			
Carbon tetrachloride:	ND<5	5			
Bromodichloromethane:	ND<5	5			
1,2-Dichloropropane:	ND<5	5			
2-Chloro-ethyl-vinylether:	ND<5	5			
c-1-3-Dichloropropene:	ND<5	5			
Trichloroethene:	ND<5	5	105/85	75/125	21
Dibromochloromethane:	ND<5	5			
1,1,2-Trichloroethane:	ND<5	5			
t-1,3-Dichloropropene:	ND<5	5			
Bromoform:	ND<10	10			
Tetrachloroethene:	ND<5	5			
1,1,2,2-Tetrachloroethane:	ND<5	5			
Chlorobenzene:	ND<5	5	90/80	75/125	12
1,3-Dichlorobenzene:	ND<5	5			
1,4-Dichlorobenzene:	ND<5	5			
1,2-Dichlorobenzene:	ND<5	5			

ELAP CERTIFICATION # 1753

Reviewed and Approved


John Murphy
Laboratory Director



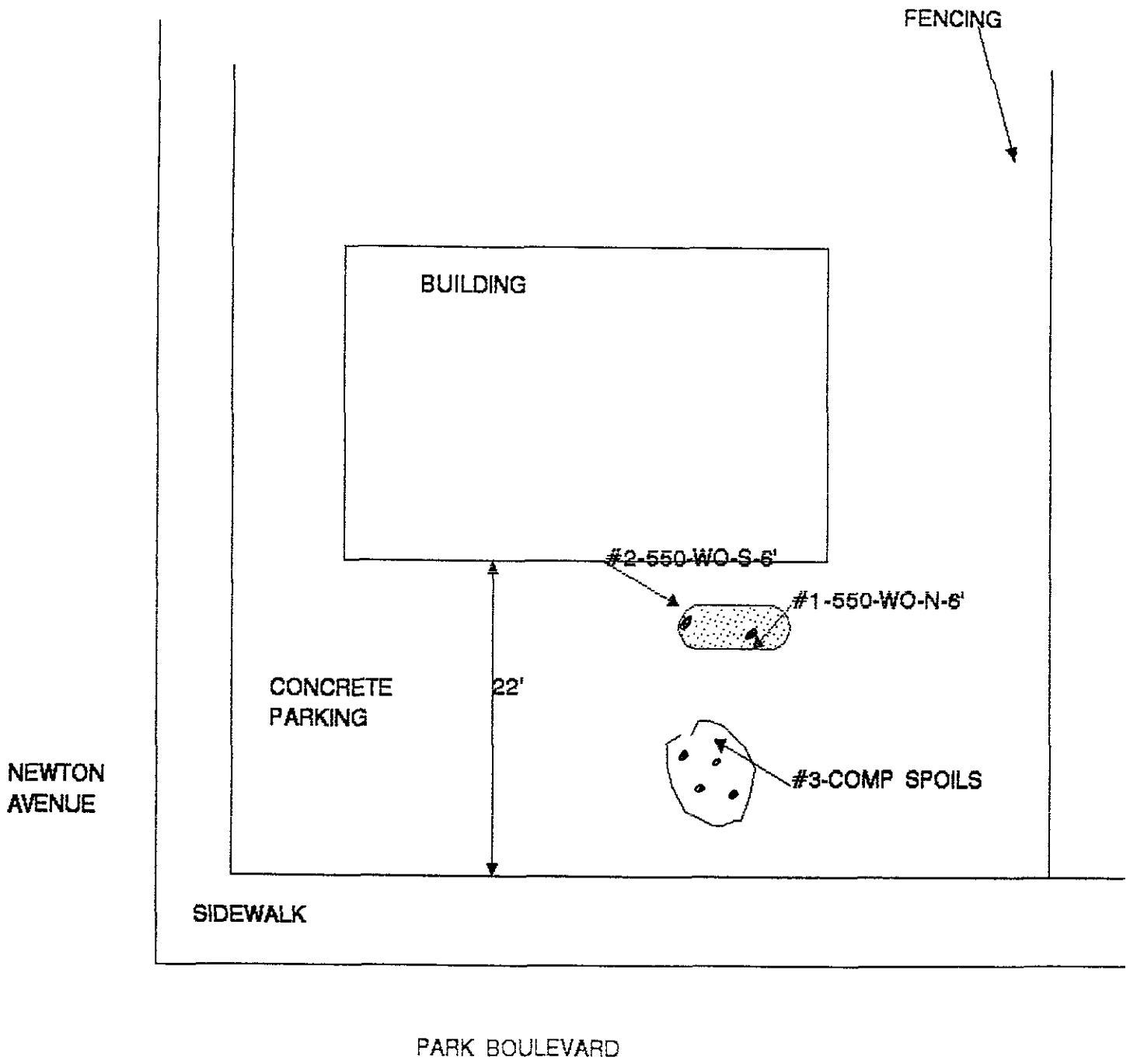
North State Environmental Analytical Laboratory

Chain of Custody/Request for Analysis

95-313

(415) 588-9652

Client: SEMCO		Phone: (415) 572-8033		Report to: SEMCO				Turnaround Time			
Mailing Address: 1741 LESLIE STREET SAN MATEO, CA 94402				Billing to: 1741 LESLIE STREET SAN MLATEO, CA 94402				8 Hr <input type="checkbox"/>		24 Hr <input type="checkbox"/>	
Site Address: 2101 PARK BLVD., OAKLAND				PO# / Billing Reference: 95-4219 GOODYEAR				40 Hr <input type="checkbox"/>		5 Days <input type="checkbox"/>	
Sampler: <i>Chuck Kip</i>		Date: <i>7/14/95</i>						Other <input type="checkbox"/>			
Sample ID	Sample Description	Container # / type	Sampling Time/Date	ANALYSIS REQUESTED						Remarks	
				TPH-D	TPH-G	BTEX	O+G	TCO 5	SO ₂		
<i>E1-550-40-N-6'</i>	<i>SOIL</i>	<i>1-BRASS</i>	<i>7-14-95 12:55</i>	X	X	X	X	X	X		
<i>E2-550-40-S-6'</i>	<i>SOIL</i>	<i>1 BRASS</i>	<i>" " 1:45</i>	X	X	X	X	X	X		
<i>E3 Comp Spalls</i>	<i>"</i>	<i>4-BRASS</i>	<i>" " 1:46</i>	X	X	X	X	X	X		
Relinquished by: <i>Chuck Kip</i>		Date: <i>7/14/95</i> Time: <i>5:25</i>		Received by: <i>[Signature]</i> <i>NSE</i>				Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Relinquished by:		Date: Time:		Received by:				Were samples Preserved ?			
Relinquished by:		Date: Time:		Received in lab by: <i>[Signature]</i> <i>NSE</i>				In good condition ?			



S E M C O

2101 PARK BLVD.
OAKLAND



NOT TO SCALE

Barney Chan
Project Specialist

OK, 5/31/95 Blha

*Pls note additions in RED.
Pls contact me at least 48 working hrs
prior to arrange inspection*

ALAMEDA COUNTY HEALTH CARE SERVICES 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

ACCEPTED

Underground Storage Tank Closure Permit Application
Alameda County Division of Hazardous Materials
80 Swan Way, Suite 200,
Oakland, CA 94621
Telephone: (510) 271-4320

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with all applicable laws. The project proposed herein is new and used for the purpose of any required building permits for construction of a new facility. One copy of the permit is to be submitted to the local health department and to the local fire and police departments. Any changes or other information must be submitted to the local health department and to the local fire and police departments for their review and approval. Inspectors from your local health department will conduct inspections to ensure compliance with all applicable laws and requirements of State and local laws.

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

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

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

THIS PERMIT IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS

Correct Specialist:

6/11/95
11:19
Barney Chan

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

1. Name of Business Gerard/Goodyear Tire
Business Owner or Contact Person (PRINT) James P. O'Neil
Goodyear Real Estate Manager
2. Site Address 2101 Park Boulevard
City Oakland Zip 94606 Phone (909) 591-6596
3. Mailing Address 4091 Riverside Drive, Suite 110
City Chino CA Zip 91710 Phone (909) 591-4558
4. Property Owner Frank J. Schlessinger
Business Name (if applicable) Gerard/Goodyear Tire
Address 2101 Park Boulevard
City, State Oakland Zip 94606
5. Generator name under which tank will be manifested
Frank J. Schlessinger

EPA ID# under which tank will be manifested C A L 000018961

6. Contractor SEMCO
Address 1741 LESLIE STREET
City SAN MATEO, CA 94402 Phone (415) 572-8033
A, B, C-61/D-40
License Type HAZ MAT ID# 449864

*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) N/A

Address _____

City, State _____ Phone _____

8. Main Contact Person for Investigation (if applicable)

Name CHUCK KIPER Title VICE PRESIDENT

Company SEMCO

Phone (415) 572-8033

9. Number of underground tanks being closed with this plan 1

Length of piping being removed under this plan unknown

Total number of underground tanks at this facility (**confirmed with owner or operator) 1

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 ALLIED PETROLEUM EPA I.D. No. CAL 000112314

Hauler License No. 1168 License Exp. Date 4-30-96

Address 1217 S. 7TH STREET

City MODESTO State CA Zip 95351

b) Product/Residual Sludge/Rinsate Disposal Site

Name ENVIROPUR WEST EPA ID# CAD 083166728

Address 13331 WEST HIGHWAY 33

City PATTERSON State CA Zip 95363

c) Tank and Piping Transporter

Name RICH HAMILTON TRUCKING EPA I.D. No. CAL 000112413
Hauler License No. 2753 License Exp. Date 4-30-96
Address 1217 S. 7TH STREET
City MODESTO State CA Zip 95351

d) Tank and Piping Disposal Site

Name ERICKSON, INC. EPA I.D. No. CAD 009466392
Address 255 PARR BLVD.
City RICHMOND State CA Zip 94801

11. Sample Collector

Name CHUCK KIPER
Company SEMCO
Address 1741 LESLIE STREET
City SAN MATEO State CA Zip 94402 Phone (415) 572-8033

12. Laboratory

Name NORTH STATE ENVIRONMENTAL
Address 90 W. SOUTH SPRUCE AVENUE
City SOUTH SAN FRANCISCO State CA Zip 94080
State Certification No. 1735

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

If yes, describe. _____

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

HIGH PRESSURE HOT WATER DETERGENT WASH, 20 LBS PER

1000 GALLONS DRY ICE

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)		
550 gallon	waste oil	SOIL/WATER IF ENCOUNTERED	2 FEET BELOW TANK IN NATIVE SOIL

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 Soil

Stockpiled Soil Volume (estimated)	Sampling Plan
unknown at this time	SOIL SAMPLES TAKEN FROM THE TANK EXCAVATION WILL BE COLLECTED, PLACED IN BRASS TUBES, SEALED WITH FOIL, TEFLON CAPS, SEALED WITH APPROVED TAPE, PLACED ON ICE, TRANSPORTED TO STATE CERTIFIED LAB UNDER CHAIN OF CUSTODY AND ANALYZED FOR CONSTITUENTS OF TANK.

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 [] no [x] 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
Waste, and Used Oil or Unknown (All analyses must be completed and submitted)	TPH G TPH D TPH AND BTX&E O & G BTX&E CL HC	GCFID(5030) GCFID(3550) 8260 5520 D & F 8020 or 8240 8010 or 8240	TPH G TPH D GCFID(5030) GCFID(3510) 5520 B & F 602, 624 or 8260 601 or 624
Metals Cd, Cr, Pb, Ni, Zn Semi-volatiles		AA or ICAP 8270	

18. Submit Worker's Compensation Certificate copy

Name of Insurer GOLDEN EAGLE INSURANCE COMPANY

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 SEMCO

Name of Individual CHUCK KIBER

Signature *Chuck Kiber* Date 5-25-95

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business GERARD/GOODYEAR TIRE

Name of Individual JAMES P. O'NEIL GOODYEAR REAL ESTA
M.M.A.C.O.R.

Signature *James P. O'Neil* Date 5/25/95

CITY OF OAKLAND
REPORT OF FIRE INSPECTION

ENGINE CO

ADDRESS 2101 Park

NAME Semco Environmental Const.

GENERAL INSPECTION PERMIT OTHER HAZARD NOTED HAZARD ABATED

NOTICE LEFT AFTER 1st NOTICE 2nd NOTICE FINAL

DATE	VIOLATION	O.F.C.	CONTACTED
7/14/85	double wheel 550 gal waste oil. Lab = 0 O2 = 8.2 + Chuck Piper Semco		

A REINSPECTION WILL BE MADE WITHIN _____ DAYS.

FIRE PREVENTION BUREAU - PHONE 273-3851
INSPECTOR [Signature]

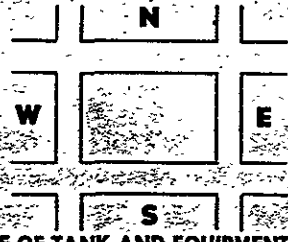
338-5 (Rev 5-77)

Excavation Permit Granted No. _____
CITY OF OAKLAND
Permit to Excavate and Install, Repair, or Remove Inflammable Liquid Tanks. No. 9928
Oakland, California June 13 19 95

PERMISSION IS HEREBY GRANTED TO ~~XXXXX~~ remove ~~XXXXX~~ Gasoline tank and excavate commencing _____ feet inside _____ line
on the _____ side of Park Blvd. Street Avenue _____ feet _____ of _____ Street Avenue _____
House No. 2101 Park Blvd. Street Avenue _____ Present Storage _____
Owner Frank J. Schlessinger Address 333 Kearney St., Ste. 309 Phone 415)982-6936
Applicant SEMCO Address 1741 Leslie St. Phone 415)572-8033
Address San Mateo, 94402 Phone _____
Sections of street (sidewalk) surface to be disturbed 0 x 0 Number of Tanks 1 Capacity 550 Gallons, each.

Remarks: _____
This Permit is granted in accordance with existing City Ordinances.
Owner hereby agrees to remove tanks on discontinuance of use or when notified by the City Authorities.
When installing, removing or repairing tanks, no open flame to be on or near premises.

Approved _____ Fire Marshal
Approved _____ Drainage Division Engineering Dept.



EXCAVATING PERMIT

Issued in accordance with Ord. No. 278 CMS, Sec. 6-2.04
_____ square feet of digging or removal granted.

CERTIFICATE OF TANK AND EQUIPMENT INSPECTION

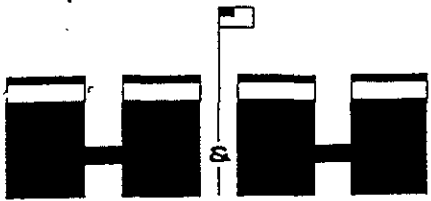
The receipt of \$ _____ special deposit is hereby acknowledged.
Inspected and passed on _____ 19 _____
by _____ Fire Marshal

GENERAL DEPOSIT.
BUREAU OF PERMITS AND LICENSES.

Inspection Fee Paid _____ \$ 150.00 Ck. #9851
Received by Sandra M. Smith Rec. #725302
FIRE PREVENTION BUREAU

NOTICE
Before Covering Tanks, Above Certificate Must Be Signed.
When ready for inspection notify Fire Prevention Bureau, 273-3851

THIS PERMIT MUST BE LEFT ON THE WORK AS AUTHORITY THEREFOR.



H&H SHIP SERVICE COMPANY
dba H&H Environmental Services

220 TERRY FRANCOIS/CHINA BASIN STREET, SAN FRANCISCO, CA 94107-2106 (415) 543-4835 FAX (415) 543-8265

CERTIFICATE OF DESTRUCTION

JULY 31, 1995

H & H Ship Service Co. hereby certifies to SEMCO
that: _____

1. The storage tank(s), size(s) ONE (1) 550 GALS.

removed from the GERARD/GOODYEAR

facility at 2101 PARK BLVD.

OAKLAND, CALIFORNIA

were transported to H & H Ship Service Company, 220 Terry Francois/
China Basin Street, San Francisco, California 94107.

2. The following tank(s), H & H Job Number 15977

have been cleaned, rendered harmless, cut with approximately 2' x
2' holes and disposed of as scrap metal.

3. Disposal site: LEVIN METALS CORPORATION, RICHMOND, CALIFORNIA

4. The foregoing method of destruction/disposal is suitable for the
materials involved, and fully complies with all applicable
regulatory and permit requirements.

5. Should you require further information, please call (415) 543-4835
or (415) 905-5510.

Very truly yours,

S. H. Parsons
Operations Coordinator



IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A C 0 0 0 0 1 8 9 6 1		Manifest Document No. 0 8 4 8 5		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address FRANK J. SCHLESSINGER 33 Kearny Street, #309, San Francisco, CA. 94108						A. State Manifest Document Number 95208485							
4. Generator's Phone (415) 982-6936						B. State Generator's ID							
5. Transporter 1 Company Name H & H SHIP SERVICE COMPANY			6. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8			C. State Transporter's ID 600944		D. Transporter's Phone (415) 543-4835					
7. Transporter 2 Company Name						8. US EPA ID Number		E. State Transporter's ID					
9. Designated Facility Name and Site Address H & H SHIP SERVICE COMPANY 220 TERRY FRANCOIS/CHINA BASIN SAN FRANCISCO, CA. 94107						10. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8		G. State Facility's ID					
								H. Facility's Phone (415) 543-4835					
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) WASTE EMPTY STORAGE TANK NON-RCRA HAZARDOUS WASTE SOLID					12. Containers		13. Total Quantity		14. Unit Wt/Vol		1. Waste Number		
					No. Type		Quantity		Wt/Vol		State EPA/Other		
					0 0 1 T P		0 0 5 5 0		P		State 512 EPA/Other		
b.											State EPA/Other		
c.											State EPA/Other		
d.											State EPA/Other		
J. Additional Descriptions for Materials Listed Above ONE (1) 550 gallon waste empty storage tank. TANK INERTED WITH DRY ICE FOR SAFE TRANSPORT. PROFILE #A4881						K. Handling Codes for Wastes Listed Above a. 01 b. c. d.							
15. Special Handling Instructions and Additional Information JOB #15977 24 Hr. Emergency Contact: H & H #(415) 543-4835 APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR JOB SITE: GERARD/GOODYEAR 2101 Park Blvd. Oakland, California													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this 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 international and national government regulations. 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 AMES P. O'NEIL				Signature <i>James P. O'Neil</i>				Month 0 7		Day 1 4		Year 9 5	
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name ROBERT M. BREWSTER				Signature <i>Robert M. Brewster</i>				Month 0 7		Day 1 4		Year 9 5	
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name				Signature				Month		Day		Year	
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19													
Printed/Typed Name J H PARSONS				Signature <i>J H Parsons</i>				Month 0 7		Day 1 4		Year 9 5	

DO NOT WRITE BELOW THIS LINE.

95643939
 IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAL1000001184161143939	Manifest Document No. 1 of 1	2. Page 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address SCALLESIMBER 2101 PARK BLVD OAKLAND CA 94621			A. State Manifest Document Number 95643939			
4. Generator's Phone (415) 572-8033		6. US EPA ID Number C A D 9 8 0 6 9 5 7 6 1		B. State Generator's ID		
5. Transporter 1 Company Name EVERGREEN ENVIRONMENTAL SERVICES			C. State Transporter's ID 610598		D. Transporter's Phone (510) 795-4400	
7. Transporter 2 Company Name			8. US EPA ID Number		E. State Transporter's ID	
9. Designated Facility Name and Site Address EVERGREEN OIL, INC. 6880 Smith Avenue Newark, CA 94560			10. US EPA ID Number C A D 9 8 0 8 8 7 4 1 8		G. State Facility's ID C A D 9 8 0 8 8 7 4 1 8	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. OIL & WATER NON-RCRA HAZARDOUS WASTE, LIQUID			No. Type 0 0 1 T T		00020	G
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Wastes Listed Above			
15. Special Handling Instructions and Additional Information IN EMERGENCY CALL CHEMTREC 1-800-424-9300 DOT ERG 31 WEAR PROTECTIVE EQUIPMENT			a. b. c. d.			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this 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 international and national government regulations. 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 FRANK SCHLESINGER		Signature [Signature]		Month	Day	Year
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature [Signature]		Month	Day	Year
Printed/Typed Name ETHEL SIVARDES		Signature [Signature]		Month	Day	Year
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature		Month	Day	Year
Printed/Typed Name		Signature		Month	Day	Year
19. Discrepancy Indication Space						
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19						
Printed/Typed Name		Signature		Month	Day	Year

DO NOT WRITE BELOW THIS LINE.

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 # 271 Site Name Furnace Shell Inc Today's Date 7/12/95
Site Address 2101 Park Blvd
City Oak Zip 94606 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 Removal

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

Comments:

TEL 0% O₂ - 8.2%

Source - Contractor - Chuck Kiper present

Mr. Gene Neal - Goodyear present

Witness - removal of 4-500 gallon double walled steel - 1/2" holes observed in slight corrosion

OPD - ~~Shantone~~ present Ivan Austin

Manifest # - 95208485

4-4 shaker app 1/96 #650944

Backfill w/ sand approx 3 cu

Good year bld

pt approx 6x5x5

N

1 4x4 composite taken at backfill - soils will be reused

(2) ← drill cutting from

← sandy backfill

provisional investigation (Envtas)

1 severe slab encountered beneath tank - soil spill

John Kiper on end 10-11-94. 1/2" hole 6' deep

split - taken 6' deep, 2' dia

Contact _____

Title _____

Signature Chuck Kiper

Inspector _____

Signature _____

II, III

SEMCO ENVIRONMENTAL CONTRACTORS

SAN MATEO - (800)831-2344 (415)572-8033
 MODESTO - (800)585-9293 (209)524-9653

UST CLOSURE INSPECTION WORKSHEET

2101 Park Blvd Oakland Goodyear 95-4219
 UST SITE ADDRESS BUSINESS NAME JOB #

ENV. HEALTH INSP. FIRE INSP. DATE 7/14/95

Burney Chan

	Tank ID #	Tank Volume	Date Tank Closed
1	95-4219	550	7/14/95
2			
3			
4			
5			
6			

NOTES

LEL 0% Oxy 2.2%
 double wall tank in excellent
 condition brand new. no
 signs of contamination

UST CONDITION	TANK #	1				
	LEAKED	YES				
PRODUCT FREE	YES					
HOLES/PITS	NO					
TANK OUTCLEANED	NO					
RUST/SCALES	NO					
SOIL CON- DITON	VAPOR	NO				
	DISCOLOR- ATION	NO				
GROUND WATER	SHEEN	N/A				
	FLOATING PRODUCT	N/A				
ANALYTICALS REQUESTED	TPH GAS	X				
	TPH DIESEL	X				
	TOTAL OIL AND GREASE	X				
	BTEX (8020)	X				
	TOTAL LEAD					
	CHC (8010)					
	8010 & 8020 or 8240					
	8270					
Cd, Cr, Pb, Zn Hg						

PROJECT MANAGER
 Chuck Kiper
 DEPTH OF EXCAVATION
 6'
 DIMENSION OF EXCAVATION
 6'8" x 11'7"

TANK MANIFEST #
 95208485
 LIQUID MANIFEST #
 DEPTH TO GROUNDWATER

DAILY SAFETY BRIEFING REPORT

PROJECT # 95-4219 DATE 7/14/95 TIME 10.00
PROJECT NAME Gas year line
PROJECT LOCATION 2101 Park Blvd, Oakland
CLIENT/ADDRESS 1144 East Market St, Akron, Ohio 44316-0001
PROJECT ACTIVITY _____

SAFETY TOPICS

CHEMICAL HAZARDS: Benzene, Toluene, Xylene, Ethyl Benzene, ,
 Waste Oil, Petroleum Hydrocarbons.

PHYSICAL HAZARDS: Open excavation, debris piles, exposed piping,
cave-ins, moving equipment, electrical shock.

RESPIRATORY PROTECTIVE EQUIPMENT: Half-face respirator with organic
vapor cartridges if necessary.

SAFETY/PERSONAL PROTECTIVE EQUIPMENT/CLOTHING: (List specifically for
each activity) - Hard hats, steel toe shoes, safety glasses, uniform
shirt, protective gloves.

SPECIFIC INSTRUCTIONS: No smoking, eating, drinking, or chewing within
25' of the excavation, wash hands before doing any of the above.

HOSPITAL/CLINIC Highland General Hospital PHONE (510) 534-8055

HOSPITAL ADDRESS 1411 E. 31st St, Oakland

PARAMEDIC 911 FIRE DEPT. 911 POLICE 911

EMERGENCY PROCEDURES: Treat minor injuries on site, transport victim to
hospital if necessary.

ATTENDEES

NAME (Please Print)

NAME (Signature)

Jim Noces

James Noces

Adam Walsh

Adam Walsh

Chuck Kiper

Chuck Kiper

MEETING CONDUCTED BY Jim Noces

SUPERVISOR _____