



North State Environmental
Chemical Waste Disposal • Trucking • Consulting

FAX

Date

10/18/99

Number of pages including cover sheet-

9

TO:

Ms.

Eva Chu

Alameda Co.

FROM:

J. Perry

North State Environmental Lab
90 S. Spruce Avenue, Suite W
South San Francisco, CA 94080

Phone

Fax Phone

510

337.9335

Phone

650.266.4563

Fax Phone

650.266.4560

REMARKS:



Urgent



For your review



Reply ASAP



Please Comment

Ms. Chu -

Here are the CHROMATOGRAMS you
Requested. They are consistent
with Gasoline + Diesel Mixtures.

These chromatograms are in an old
style, New ones give a much
better picture -

chly



North State Environmental
Chemical Waste Disposal - Trucklog - Consulting

CERTIFICATE OF ANALYSIS

JOB NO: 95-611

CLIENT: SEMCO

PROJECT NAME: 95-4468

DATE SAMPLED: 11-21-95

DATE EXTRACTED: 11-27-95

DATE ANALYZED: 11-27-95

1347 PARK ST-ALAMEDA

BTX RANGE ORGANICS BY
EPA METHOD 8020/5030 AND 8015 M
DIESEL RANGE HYDROCARBONS BY EPA METHOD 8015 M

Sample No.	Client ID	Analyte	Result
95-611-01	#1 SouthEnd 11'	Benzene	26 ug/Kg
		Toluene	15 ug/Kg
		Ethylbenzene	190 ug/Kg
		Xylenes	3100 ug/Kg
		Diesel	15000 mg/Kg
95-611-02	#2 NorthEnd 11'	Benzene	15 ug/Kg
		Toluene	68 ug/Kg
		Ethylbenzene	250 ug/Kg
		Xylenes	3700 ug/Kg
		Diesel	14000 mg/Kg
95-611-03	#3 Center 14'	Benzene	ND
		Toluene	ND
		Ethylbenzene	ND
		Xylenes	ND
		Diesel	ND
95-611-04	#4 Stockpile	Benzene	ND
		Toluene	ND
		Ethylbenzene	60 ug/Kg
		Xylenes	750 ug/Kg
		Diesel	3600 mg/Kg

Page 1 of 2

John Murphy,

Can I get the chromatograms for Sample No.

95-611-01 and 95-611-02. Thanks.

ALAMEDA COUNTY HEALTH AGENCY
LAB SERVICES

eva chu
Hazardous Materials Specialist

File : 11275117.D02

55611-01

MURPHY

Run : 01

Queue : DEFAULT Set Number : 1

Type : Sample

Path : C:\TPH

Inst : Model 1020

Collection : 22:03:35 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]

Integration: 22:06:35 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]

Report : 22:32:25 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]

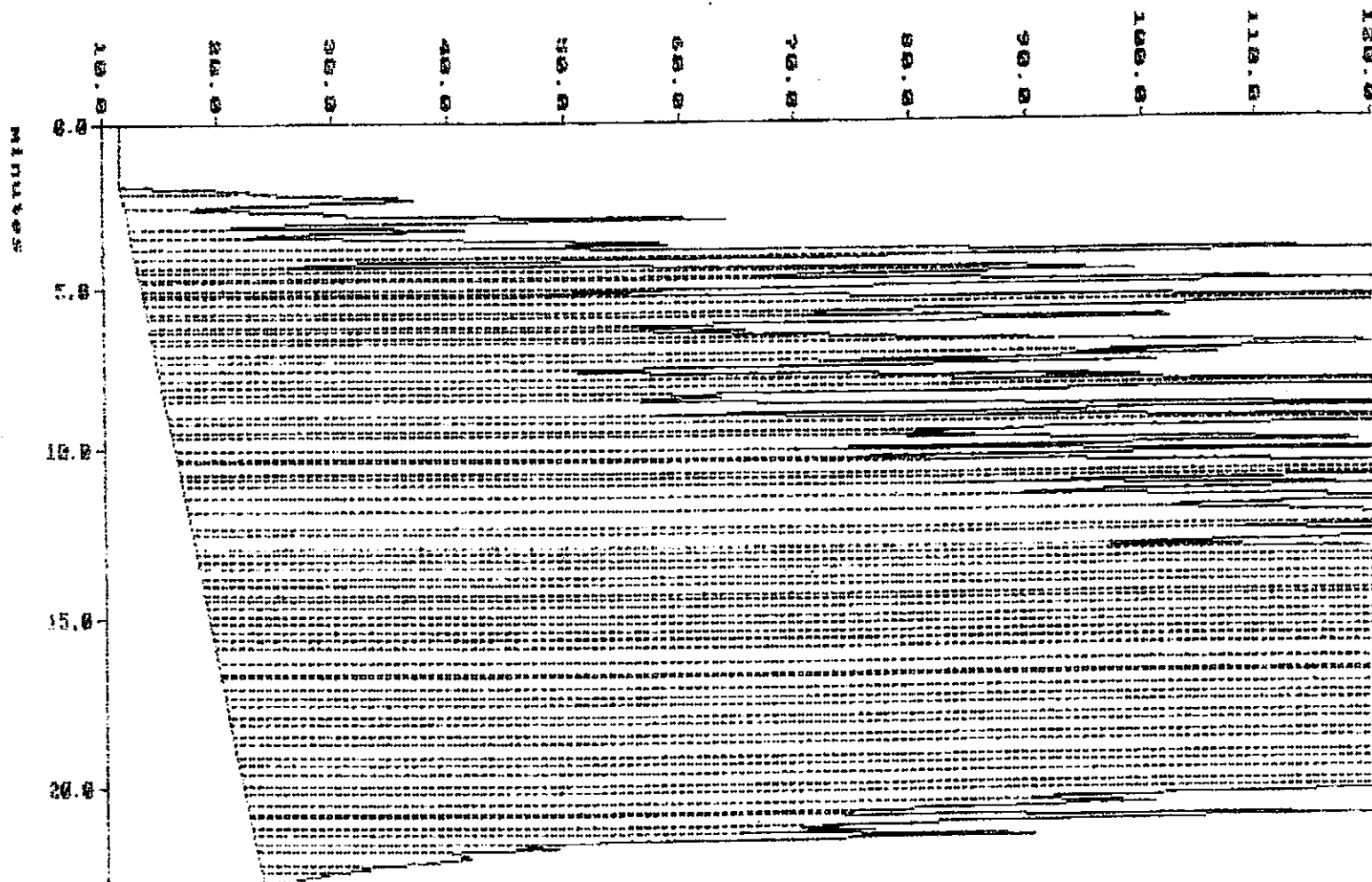
Sample Amt : 1.00000e+0

Dilution: 1.00000e+0

EXTERNAL STANDARD (AREA)

RT	Area	ExpRT	Height	UG/L	Name
11.375	122548157	11.00	9885.46	30024.113	GASOLINE

(11275117.D02) MU



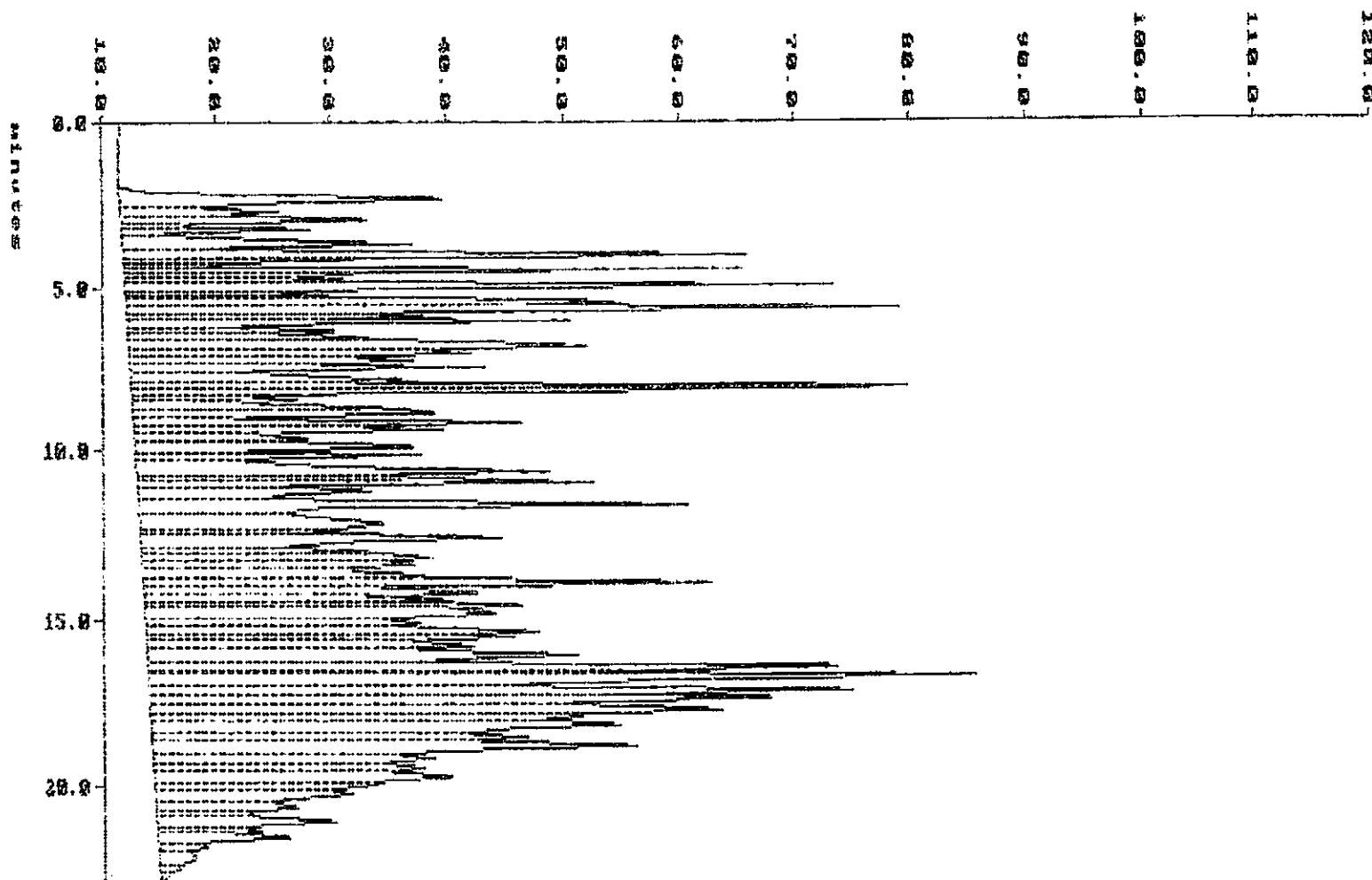
File : 11275118.D02 95611-02 MURPHY
Run : 01 Queue : DEFAULT Set Number : 1 Type : Sample
Path : C:\NPH Inst : Model 1020
Collection : 22:54:07 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]
Integration: 22:54:07 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]
Report : 23:17:57 Nov 27 1995 Meth(B): BTXEM [13:17:02 Nov 27 1995]

Sample Amt : 1.00000e+0 Dilution: 1.00000e+0

EXTERNAL STANDARD : AREA :

RT	Area	ExpRT	Height	UG/L	Name
11.373	247081696	11.000	2176.030	6976.3638	GASOLINE

(11275118.D02) mV



SEMCO ENVIRONMENTAL CONTRACTORS

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

UST CLOSURE INSPECTION WORKSHEET

UST SITE ADDRESS

BUSINESS NAME

95-4468

JOB #

ENV. HEALTH INSP.

FIRE INSP.

11-21-95

DATE

	Tank ID #	Tank Volume	Date Tank Closed
1	16920	1500	11-21-95
2			
3			
4			
5			
6			

NOTES

Cont. Started half way down the side of the tank. The tank had several holes in it. 2 soil samples at 11' were sent. 1 soil sample at 14' was clean. Backfilled all moisture in bottom & topped off with 1 layer of rock.

UST CONDITION	TANK #	1							
	LEAKED	Y							
	PRODUCT FREE	Y							
	HOLES/PITS	Y							
	TANK CUT/CLEANED	Y							
	RUST/SCALES	Y							
SOIL CON- DITION	VAPOR	Y							
	DISCOLOR- ATION	Y							
	SHEEN	Y							
	FLOATING PRODUCT	Y							
ANALYTICALS REQUESTED	TPH GAS								
	TPH DIESEL								
	TOTAL OIL AND GREASE								
	BTXLE (8020)								
	TOTAL LEAD								
	CHC (8010)								
	8010 & 8020 or 8240								
	8270								
	Cd, Cr, Pb, Zn, Hg								

PROJECT MANAGER

TANK MANIFEST #

DEPTH OF EXCAVATION

95 269 874

LIQUID MANIFEST #

DIMENSION OF EXCAVATION

DEPTH TO GROUNDWATER

9.5'

14'

7'x13'

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE
CERTIFIED SERVICES COMPANY
255 Parr Boulevard • Richmond, California 94801

NO. 18362

CUSTOMER
SEMCO - II
JOB NO.
267069

FOR: ERICKSON, INC. TANK NO. 16920

LOCATION: RICHMOND DATE: 95/11/30 TIME: 12:31

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT FO

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 1500 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.

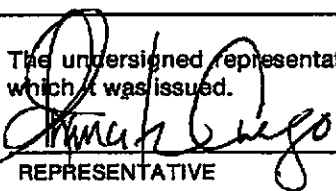
In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

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.


REPRESENTATIVE

TITLE


INSPECTOR

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

GENERATOR OR FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address <i>Steve Simi 70 Gougher & Lindsay, Inc. - 2424 Central Ave Alameda, Calif 94501</i>		CAC0000757624		A. State Manifest Document Number 95269874	
4. Generator's Phone <i>(510) 748-1798</i>		6. US EPA ID Number 94501		B. State Generator's ID	
5. Transporter 1 Company Name Dexanna, Ltd.		8. US EPA ID Number CAD982438565		C. State Transporter's ID 602255	
7. Transporter 2 Company Name		10. US EPA ID Number		D. Transporter's Phone (510) 687-1292	
9. Designated Facility Name and Site Address Erickson, Inc. - 255 Parr Blvd. Richmond, Calif. 94301		12. Containers No. Type 0 0 1 T P		E. State Transporter's ID	
		13. Total Quantity 0.500		F. Transporter's Phone	
		14. Unit Wt/Vol P		G. State Facility's ID CAD009466392	
		15. Waste Number State 512 EPA/Other NONE		H. Facility's Phone (510) 235-1393	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type		13. Total Quantity	
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.		0 0 1 T P		0.500	
b.					
c.					
d.					
1. Additional Descriptions for Materials Listed Above Qty. 1 Empty Storage Tank # 16920. Tank has been inerted with 15 lbs. DRY ICE per 1000 gallons capacity.		K. Handling Codes for Wastes Listed Above a. 01		b.	
		c.		d.	
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Site Location: 1347 Park St. - Alameda, California 24 Hr. Contact Name: Steve Simi & Phone # (510) 748-1798					
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 DONALD LINDSEY		Signature <i>[Signature]</i>		Month Day Year 1 1 2 1 9 5	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name James R. Cox		Signature <i>[Signature]</i>		Month Day Year 1 1 2 1 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 KAREN RUFFIN					
		Signature <i>[Signature]</i>		Month Day Year 1 1 2 1 9 5	

DO NOT WRITE BELOW THIS LINE.

Please print type. Form designed for use on site (12 pt. min.)

Registered as a waste transporter in
Sacramento, CaliforniaUNIFORM HAZARDOUS
WASTE MANIFEST

1. Generator's US EPA ID No.

Manifest Document No.

2. Page 1

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

3. Generator's Name and Billing Address

STATE STONE CO. Gallagher & Lindsay
1347 PARK ST. 94501
ALAMOGORDA, CA

4. Generator's Phone

(505) 745-1798

5. Transporter 1 Company Name

EVERGREEN ENVIRONMENTAL SERVICES

6. US EPA ID Number

C A D B B 0 8 8 7 4 1 1 8

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

EVERGREEN OIL, INC.

6880 Smith Avenue

Newark, CA 94560

10. US EPA ID Number

C A D B B 0 8 8 7 4 1 1 8

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

USED OIL

NON-RCRA HAZARDOUS WASTE, LIQUID

12. Containers

No.

Type

13. Total

Quantity

14. Unit

Vol/Vol

0101

T T

000500

G

13. Special Handling Instructions and Additional Information

IN EMERGENCY
CALL CHEMTREC
1-800-424-9300
DOT ERG 31

WEAR PROTECTIVE EQUIPMENT

14. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this manifest 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

DONALD LINDSEY

Signature

Donald Lindsey

5319

Month

Day

Year

11

12

96

17. Transporter 1 Acknowledgment of Receipt of Materials

Printed/Typed Name

AL HANSEN

Signature

Al Hansen

Month

Day

Year

11

12

96

18. Transporter 2 Acknowledgment of Receipt of Materials

Printed/Typed Name

Signature

Month

Day

Year

11

12

96

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

D B Moore

Signature

D B Moore

Month

Day

Year

11

12

96

DO NOT WRITE BELOW THIS LINE.

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-9300. WITHIN CALIFORNIA, CALL 1-800-832-7355