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EDMUND G. BROWN JR.
GOVERNOR

MATTHEW RODRIGUEZ
SECRETARY FOR
ENVIRONMENTAL PROTECTION

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State Water Resources Control Board

FEB 24 2012

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FEB 27 2012

EXXON MOBIL CORP.
OMAR EL KORDY
PNC BANK, LOCK BOX 676443
DALLAS, TX 75267-6443

Environmental Health

UNDERGROUND STORAGE TANK (UST) CLEANUP FUND (FUND), CLAIM NO. 005319,
FOR SITE ADDRESS: 349 MAIN ST, PLEASANTON

The State Water Resources Control Board (State Water Board) is able to issue, pursuant to applicable regulations, the enclosed Letter of Commitment (LOC). The LOC is your acknowledgement from the State Water Board that you are eligible to submit reimbursement requests for corrective action costs incurred. As stated in the LOC, the State Water Board will reimburse necessary and eligible corrective action costs.

All invoices must be billed in the claimant's name and checks paying for invoices must come from the claimant as listed on the application. Any other invoicing and payment arrangements must be reviewed and approved by the Fund or the costs may not be reimbursed.

It is very important that you read the terms and conditions listed in the enclosed LOC. Claims filed with the Fund far exceed the funding available and it is very important that you make use of it in a timely manner.

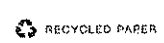
You are reminded that you must comply with all regulatory agency time schedules and requirements. You are encouraged to take the necessary steps in obtaining the most reasonable, necessary, and cost effective method for your corrective action. Only corrective action costs *required* by the regulatory agency to protect human health, safety and the environment can be claimed for reimbursement. If you have any questions about obtaining preapproval or obtaining the most reasonable costs, please call Sunil Ramdass, our Technical Reviewer assigned to claims in your Region, at (916) 341-5757.

The following documents must be submitted when seeking reimbursement. The Fund will not reimburse costs incurred prior to January 1, 1988:

- 1. **The Conditions of Payment Certification form (enclosed).** This form must be submitted with your first reimbursement request.

CHARLES R. HOPPIN, CHAIRMAN | THOMAS HOWARD, EXECUTIVE DIRECTOR

1001 I Street, Sacramento, CA 95814 | Mailing Address: P.O. Box 100, Sacramento, CA 95812-0100 | www.waterboards.ca.gov



FEB 24 2012

2. A Reimbursement Request Form (enclosed). Two copies of this form have been enclosed for your use in this packet. Instructions for filling out the Reimbursement Request form can be found on the back of the form.

3. A Reimbursement Request Spreadsheet. This form is used to organize and track corrective action costs incurred. A copy of this form and instructions can be found at: http://www.waterboards.ca.gov/water_issues/programs/ustcf/forms.shtml. After completion, this spreadsheet must be printed and submitted with your reimbursement request. Additionally, you must submit the completed spreadsheet electronically to the Fund.

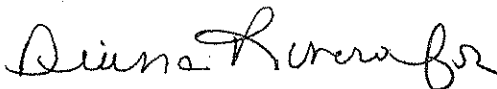
THIS IS IMPORTANT TO YOU, PLEASE NOTE:

Signature(s) on the application will be the signature(s) required for all future Fund documents.

We encourage claimants to sign all Fund documents personally. However, there may be circumstances where a claimant wants a representative to be able to sign Fund documents on the claimant's behalf. In this situation, claimants must submit a notarized Power of Attorney form designating a specific representative to sign and submit documents to the Fund. The designated representative should not be a consultant or contractor performing work on the project site because it would create a conflict of interest. Claimants should be aware that they are personally responsible and bound by any assertions made to the Fund pursuant to a Power of Attorney. (An appropriate Power of Attorney form is available on our web site or by request, however other forms may also be acceptable.)

You have 90 calendar days from the date of this letter to submit your first reimbursement request for incurred corrective action costs. We continuously review the status of all active claims. You must continue to remain in compliance and submit either a reimbursement request every 6 months, or a status report of your site. Failure to do so will result in the Fund taking steps to withdraw your LOC.

Sincerely,



Lisa Babcock, P.G., C.E.G., Fund Manager
Underground Storage Tank Cleanup Fund

Enclosures

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

Ms. Donna Drogos
Alameda County EHD
1131 Harbor Bay Pkway, 2nd Fl.
Alameda, CA 94502-6577

LETTER OF COMMITMENT FOR REIMBURSEMENT OF COSTS

CLAIM NO: **005319**

CLAIMANT: **EXXON MOBIL CORP.**

CO-PAYEE: **NONE**

JOINT CLAIMANT: **NONE**

C/O:
ATTN: **OMAR EL KORDY**
MAILING ADDRESS: **PNC BANK, LOCK BOX 676443**
DALLAS, TX 75267-6443

TAX ID/SSA NO: **13-5409005**

Subject to availability of funds, the State Water Resources Control Board (State Water Board) agrees to reimburse **EXXON MOBIL CORP.** (Claimant) for eligible corrective action costs at **EXXON #7-7003, 349 MAIN ST, PLEASANTON, CA 94566** (Site). The commitment reflected by this Letter is subject to all of the following terms and conditions:

1. Reimbursement shall not exceed **\$1,500,000, less the applicable deductible of \$10,000 per occurrence.**
2. The obligation to pay any sum under this Letter of Commitment is contingent upon availability of funds. In the event that sufficient funds are not available for reasons beyond the reasonable control of the State Water Board, the State Water Board shall not be obligated to make any disbursements hereunder. If any disbursements otherwise due under this Letter of Commitment are deferred because of unavailability of funds, such disbursements will promptly be made when sufficient funds do become available. Nothing herein shall be construed to provide the Claimant with a right of priority for disbursement over any other claimant who has a similar Letter of Commitment.
3. All costs for which reimbursement is sought must be eligible for reimbursement and the Claimant must be the person entitled to reimbursement thereof.
4. Claimant must at all times be in compliance with all applicable state laws, rules and regulations and with all terms, conditions, and commitments contained in the Claimant's Application and any supporting documents or in any payment requests submitted by the Claimant.
5. No disbursement under this Letter of Commitment will be made except upon receipt of acceptable Standard Form Payment Requests duly executed by or on behalf of the Claimant. All Payment Requests must be executed by the Claimant or a duly authorized representative who has been approved by the Division of Financial Assistance.
6. Any and all disbursements payable under this Letter of Commitment may be withheld if the Claimant is not in compliance with the provisions of Paragraph 5 above.
7. Neither this Letter of Commitment nor any right thereunder is assignable by the Claimant without the written consent of the State Water Board. In the event of any such assignment, the rights of the assignee shall be subject to all terms and conditions set forth in this Letter of Commitment and the State Water Board's consent.
8. This Letter of Commitment may be withdrawn at any time by the State Water Board if completion of corrective action is not performed with reasonable diligence.

IN WITNESS WHEREOF, this Letter of Commitment has been issued by the State Water Board this **23rd** day of **February, 2012.**

STATE WATER RESOURCES CONTROL BOARD

By *Dawn A. Rivers*
Manager, Underground Storage Tank Cleanup Fund

STATE USE ONLY	
<input checked="" type="checkbox"/>	RESIDENT
<input type="checkbox"/>	NON-RESIDENT
VENDOR TYPE:	<u>COOP</u>
INITIALS:	<u>km</u>
TO ACCT:	INITIALS: