



Environmental
Science &
Engineering, Inc.

SEP 07 1993

UST 3

September 2, 1993

File 7040

Mr. Peter Kinney
Building Management Division
Alameda County General Services Agency
4400 MacArthur Boulevard
Oakland, California 94619

**SUBJECT: FAIRMONT HOSPITAL
15400 FOOTHILL BOULEVARD,
SAN LEANDRO, CALIFORNIA
PROJECT #6-93-5057**

ALCO
HAZMAT
94 MAR 11 AM 9:14

Dear Mr. Kinney:

Environmental Science and Engineering, Inc. (ESE) is pleased to provide this closure report for underground storage tank (UST) number 5511-3, formerly located at the subject facility. This report serves to document the legal removal and disposal of this UST. ESE presents this report in accordance with Alameda County Health Care Services Agency (HCSA) UST Closure Permit requirements. The following information is submitted in support of this tank closure.

ESE was authorized by the Alameda County General Services Agency (GSA), to effect the removal of this UST located at the subject facility (see Figure 1 - "Location Map") under Purchase Order No. 141-0-5845-00.

TANK HISTORY

GSA owned and operated one 1,000 gallon (4-foot diameter, 12-foot long) underground diesel fuel storage tank located north-east of the power house building (see Figure 2 "Site Map"). The single-wall carbon-steel tank fueled an emergency generator located in the power house building. Reportedly, the tank was installed in 1960.

TANK CLOSURE ACTIVITIES

1. Permits for this tank removal were procured by ESE from HCSA, Bay Area Air Quality Management District (AQMD), and Alameda County Fire Department (ACFD). Also the State of California State Water Resources Control Board (WRCB) forms A and B were completed and submitted. A copy of the cover sheet for the HCSA permit, WRCB UST permit application forms A and B, AQMD permit, and ACFD permit are attached.
2. On Friday, March 26, 1993, approximately 350 gallons of fuel was removed from the diesel tank by Erickson Environmental of Richmond, California. This fuel was transported to the Gibson Oil/Pilot Petroleum facility located at 475 Sea Port Boulevard, Redwood City, California, 94604, a state-licensed treatment, storage and disposal facility (TSDF). A copy of the Uniform Hazardous Waste Manifest is attached.
3. On Thursday, July 29, 1993, approximately 22 cubic yards of soil was excavated to free the tank from the excavation (see Figure 3 "Tank Plan"). This soil was temporarily stockpiled near the excavation. Fill piping was completely removed from the site. Product supply, return piping and vent piping was tar coated, 1.5-inch steel pipe which was corroded and showed signs of leaking. Product supply, return and vent piping was cut at the edge of the excavation. This piping was also cut and capped approximately 3-inches above the floor where it entered the power house building.
4. Upon completion of the tank excavation, the tank internal atmosphere was rendered inert by the addition of 100 pounds of dry ice. In the presence of Mr. Robert Weston of the HCSA and Inspector Edward Laudani of the ACFD, the diesel tank was lifted from the excavation and loaded onto a flatbed truck. The tank was inspected and found to have limited corrosion and one 0.25-inch diameter hole located at the south-west end of the tank, approximately 18-inches above the tank invert. The tank was manifested as a hazardous waste, and transported to Erickson Environmental of Richmond, California, a state-licensed TSDF. A copy of the tank manifest and certificate of destruction indicating final acceptance and disposal, are attached.

5. The dimensions of the excavation were 7 feet by 13 feet by 8.5 feet below ground surface. ~~Soil within the excavation from the surface to 1-foot below grade consisted~~ of a reddish brown well graded gravel with sand and silt; soil from 1-foot below grade to 4-feet below grade consisted of a tan, well graded sand with gravel and silt; soil from 4-feet below grade to 8.5-feet below grade consisted of a light brown well graded sand with gravel and silt. A slight hydrocarbon odor was observed in these soils.

6. On completion of the tank removal, one soil sample, S-1, was collected by ESE personnel from the south-west side of the excavation as directed by the HCSA representative (see Figure 3 - "Tank Plan") below the product supply and return piping at a depth of 2.5 feet. This soil sample was collected utilizing a slide hammer fitted with a 2-inch diameter brass ring. The ring was driven into native soil until filled with soil. The brass sampling ring ends were covered with Teflon tape, plastic end caps and sealed with duct tape. Samples S-2 and S-3 were collected from the south-west and north-east ends (respectively) of the floor of the excavation. Both S-2 and S-3 were sampled at a depth of 10-feet (approximately 1.5-feet below the tank invert). These two samples were collected from the hoe bucket with a 2-inch diameter brass ring without the use of a slide hammer. A field composite sample of four sample locations, S-4, was collected from the soil stockpile (approximately 22 cubic yards). All samples were collected under the direction of the HCSA representative with the samples being sealed in the same manner as stated above. These samples were placed in a cooler with ice and transported to McCampbell Analytical, Inc. a California Department of Health Services certified analytical laboratory. The samples were analyzed by the following methods:
 - EPA Method 8015M for total petroleum hydrocarbons as diesel (TPH-d); and
 - EPA Method 8020 for benzene, toluene, ethylbenzene, and xylenes (BTEX).

7. Analysis of the soil sample collected from the south-west side of the excavation, S-1, indicated a concentration of toluene of 0.005 mg/Kg with benzene, ethylbenzene, xylenes and TPH-d as non-detectable. The analysis of the soil sample collected from the floor of the excavation at the south-west end, S-2, indicated a concentration of TPH-d of 12,000 mg/Kg and BTEX as non-detectable. The analysis of the soil sample collected from the floor of the excavation at the north-east end, S-3, indicated a concentration of TPH-d of 1,100 mg/Kg and BTEX as non-detectable. The analysis of the composite soil sample S-4, collected from the soil stockpile, indicated a concentration of TPH-d of 880 mg/Kg and BTEX as non-detectable. Copies of the laboratory reports and chain of custody documentation are attached.

Mr. Peter Kinney
September 2, 1993
Page 4

8. After the soil samples were collected, the excavation was partially backfilled with clean imported pea gravel.
9. On July 30, 1993, the excavation was completely backfilled with clean imported base rock material, and then 3-inches of hot asphaltic paving was placed to resurface the area.
10. On August 24, 1993, approximately 22 cubic yards of diesel-impacted soils from the diesel tank excavation stockpile were removed from site by Caballero Trucking of San Jose, California. This soil was transported as non-hazardous waste to the Browning-Ferris Industries Vasco Road landfill located at 4001 North Vasco Road, Livermore, California 94550, a state-licensed sanitary landfill facility. A copy of the non-hazardous special waste manifest is attached.

No further action has been taken at the subject facility. ESE recommends that a subsurface site investigation be conducted in order to determine the extent of diesel impacted soil.

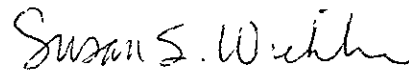
ESE appreciates the opportunity to perform this scope of work. Please contact Mike Foget at (510) 685-4053 with any questions regarding this project.

Sincerely,

ENVIRONMENTAL SCIENCE & ENGINEERING, INC.



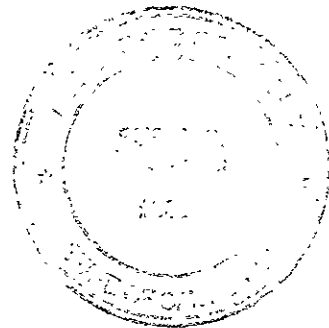
Michael K. Foget
Staff Engineer



Susan S. Wickham, RG 3851
Senior Geologist

MKF:sf

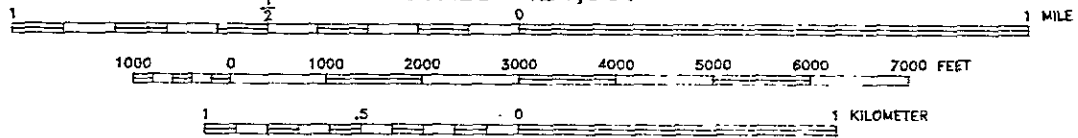
Attachments






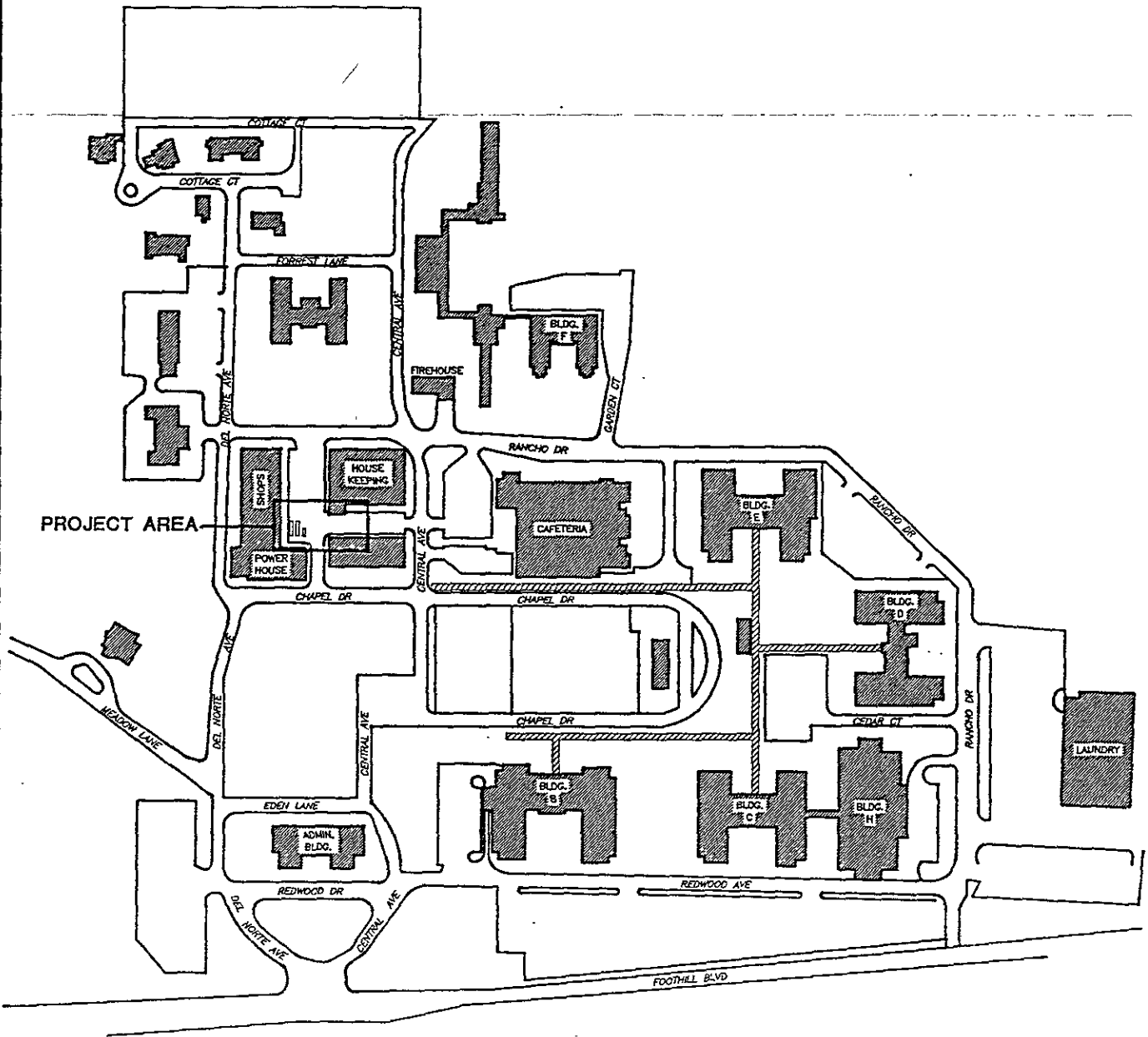
FAIRMONT HOSPITAL
15401 FOOTHILL BLVD.

SCALE 1:24,000



ADAPTED FROM U.S.G.S HAYWARD AND SAN LEANDRO 7.5 MINUTE TOPOGRAPHIC QUADRANGLE MAPS, 1980.

 Environmental Science & Engineering, Inc. <small>A CILCORP Company</small>	DATE 7/93	LOCATION MAP	FIGURE NO. 1
	REVISED		ALAMEDA COUNTY GSA -- FAIRMONT HOSPITAL 15401 FOOTHILL BOULEVARD SAN LEANDRO, CALIFORNIA
4090 NELSON AVENUE, SUITE J CONCORD, CA 94520	CAD FILE 50571001		



NOT TO SCALE



**Environmental
Science &
Engineering, Inc.**

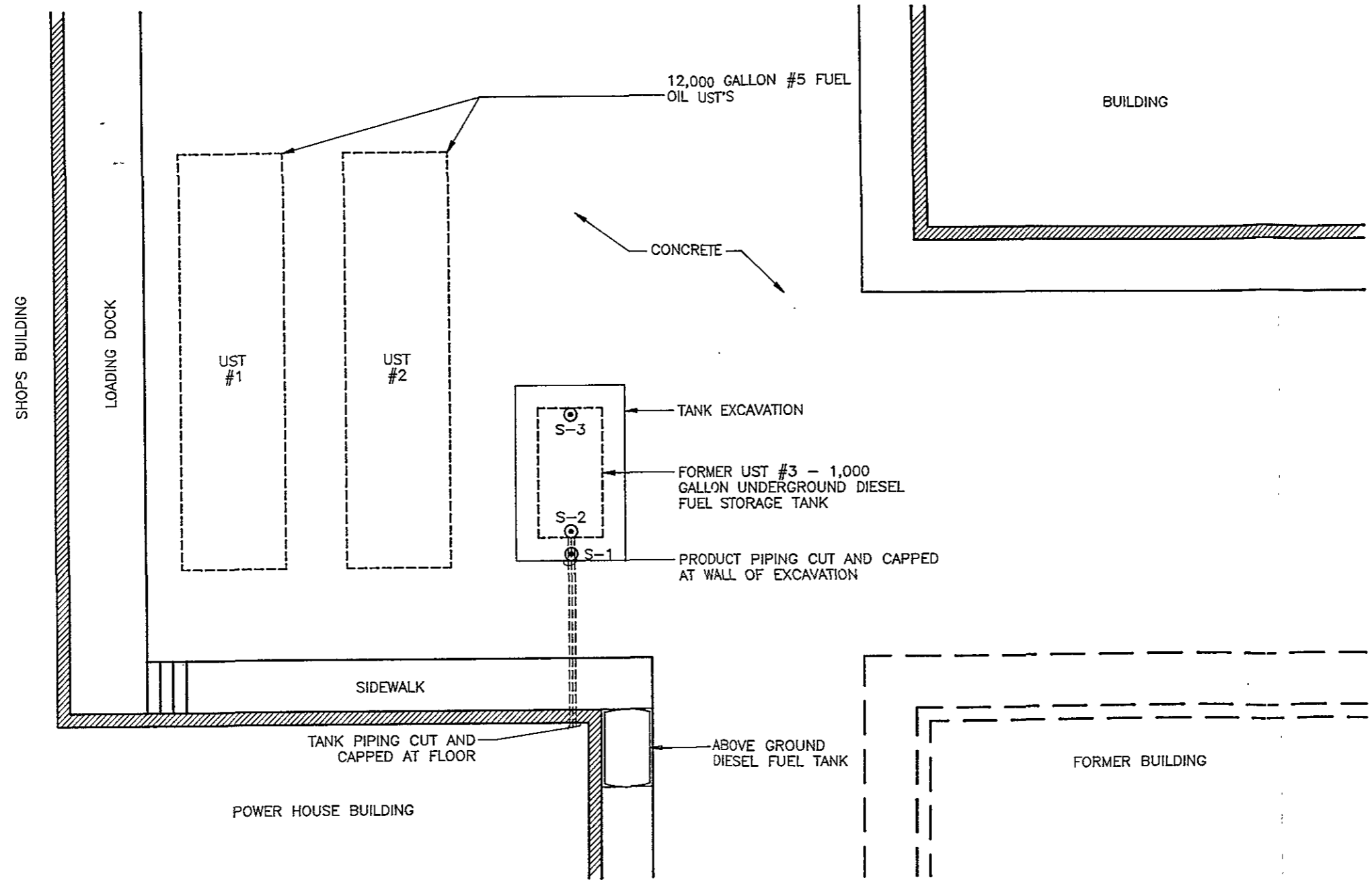
4090 NELSON AVENUE, SUITE J
CONCORD, CA 94520

DATE	7/93
REVISED	
CAD FILE	50571002

SITE MAP

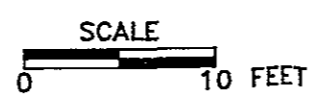
ALAMEDA COUNTY GSA - FAIRMONT HOSPITAL
15401 FOOTHILL BOULEVARD
S- LEANING, CALIFORNIA

FIGURE NO.	2
PROJ. NO.	6-93-5057



LEGEND

- UST UNDERGROUND STORAGE TANK
- ⊙ SOIL SAMPLE



	DATE 7/93	TANK PLAN ALAMEDA COUNTY GSA - FAIRMONT HOSPITAL 15401 FOOTHILL BOULEVARD SAN LEANDRO, CALIFORNIA	FIGURE NO. 3
	REVISED 9/93		PROJ. NO. 6-93-5057
	4090 NELSON AVENUE, SUITE J CONCORD, CA 94520 CAD FILE 50571003		

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
80 SWAN WAY, ROOM 200
OAKLAND, CA 94621
PHONE NO. 415/271-4320

Project Specialist (print) Robert Weston

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 State and local laws. The project proposed herein is now released for issuance of any required building permits for construction/destruction.

One copy of the accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.

Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the 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.

***THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS**

Contact Specialist

UNDERGROUND TANK CLOSURE PLAN

*** * * Complete according to attached instructions * * ***

1. Business Name Fairmont Hospital
Business Owner Alameda County General Services Agency
2. Site Address 15400 Foothill Boulevard
City San Leandro Zip 94578 Phone (510) 667-4473
3. Mailing Address 15400 Foothill Boulevard
City San Leandro Zip 94578 Phone (510) 667-4473
4. Land Owner Alameda County General Services Agency
Address 4400 MacArthur Boulevard City, State Oakland, CA Zip 94619
5. Generator name under which tank will be manifested Alameda County General Services Agency
EPA I.D. No. under which tank will be manifested CAD 981429533

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



COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM	<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 ALAMEDA COUNTY GSA - FAIRMONT HOSPITAL		NAME OF OPERATOR PAUL HILLER		
ADDRESS 15400 FOOTHILL BLVD.		NEAREST CROSS STREET	PARCEL # (OPTIONAL)	
CITY NAME SAN LEANDRO	STATE CA	ZIP CODE 94578	SITE PHONE # WITH AREA CODE (510) 607-4473	
<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 checked="" type="checkbox"/> COUNTY AGENCY* <input type="checkbox"/> STATE AGENCY* <input type="checkbox"/> FEDERAL AGENCY*				
* If owner of UST is a public agency, complete the following: name of Supervisor of division, section, or office which operates the UST				
TYPE OF BUSINESS		<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS	# OF TANKS AT SITE 84	E. P. A. I. D. # (optional) CAD 981429533
<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		

EMERGENCY CONTACT PERSON (PRIMARY)

EMERGENCY CONTACT PERSON (SECONDARY) - optional

DAYS: NAME (LAST, FIRST) KINNEY, PETER	PHONE # WITH AREA CODE (510) 535-6280	DAYS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE
NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE	NIGHTS: NAME (LAST, FIRST)	PHONE # WITH AREA CODE

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME ALAMEDA COUNTY GENERAL SERVICES AGENCY		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 4400 MAC ARTHUR BLVD.		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> STATE AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input checked="" type="checkbox"/> COUNTY AGENCY <input type="checkbox"/> FEDERAL AGENCY		
CITY NAME OAKLAND	STATE CA	ZIP CODE 94619	PHONE # WITH AREA CODE (510) 535-6280	

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER SAME AS PROPERTY OWNER		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> STATE AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY AGENCY <input type="checkbox"/> FEDERAL AGENCY		
CITY NAME	STATE	ZIP CODE	PHONE # WITH AREA CODE	

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 322-9669 if questions arise.

TY (TK) HQ **44-000324**

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input checked="" type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND
	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 99 OTHER	

VI. 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

OWNER'S NAME (PRINTED & SIGNED) Peter Kinney	OWNER'S TITLE Env. Prog. Mgr	DATE 6-6-93
--	--	-----------------------

LOCAL AGENCY USE ONLY

COUNTY # <input type="text"/>	JURISDICTION # <input type="text"/>	FACILITY # <input type="text"/>
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.

OWNER MUST FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

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 NEW 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 INTERIM 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: _____

I. TANK DESCRIPTION COMPLETE ALL ITEMS - SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D.# <u>5511-3</u>	B. MANUFACTURED BY: <u>UNKNOWN</u>
C. DATE INSTALLED (MO/DAY/YEAR) <u>1960</u>	D. TANK CAPACITY IN GALLONS: <u>1,000</u>

II. TANK CONTENTS IF A-1 IS 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 type="checkbox"/> 1a REGULAR UNLEADED
<input checked="" type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 60 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED
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 BARE STEEL	<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 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LIVING	<input type="checkbox"/> 3 EPOXY LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input checked="" type="checkbox"/> 95 UNKNOWN
	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"/> 4 FIBERGLASS REINFORCED PLASTIC
			<input type="checkbox"/> 99 OTHER _____
E. SPILL AND OVERFILL	SPILL CONTAINMENT INSTALLED (YEAR) _____		OVERFILL PREVENTION EQUIPMENT INSTALLED (YEAR) _____

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A <u>(U)</u> 1 SUCTION	A U 2 PRESSURE	A U 3 GRAVITY	A U 99 OTHER
B. CONSTRUCTION	A <u>(U)</u> 1 SINGLE WALL	A U 2 DOUBLE WALL	A U 3 LINED TRENCH	A U 95 UNKNOWN
C. MATERIAL AND CORROSION PROTECTION	A U 1 BARE STEEL	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>(U)</u> 95 UNKNOWN	A U 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 INVENTORY 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 INTERSTITIAL MONITORING	<input checked="" type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR) <u>UNKNOWN</u>	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING <u>0</u> GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
---	---	---

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) <u>Peter Kinney</u>	DATE <u>6-16-93</u>
---	------------------------

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	

THIS FORM MUST BE ACCOMPANIED BY A PERMIT APPLICATION - FORM A, UNLESS A CURRENT FORM A HAS BEEN FILED.
FILE THIS FORM WITH THE LOCAL AGENCY IMPLEMENTING THE UNDERGROUND STORAGE TANK REGULATIONS

BAAQMD
Bay Area Air Quality
Management District

Acknowledgment

Bay Area Air Quality Management District
acknowledges receipt of your Tank
Removal/Contaminated Soil Excavation
Notification Form received on

7/26/93 *By*

R E C E I V E D
JUL 30 1993



BAY AREA AIR QUALITY MANAGEMENT DISTRICT

939 ELLIS STREET
SAN FRANCISCO, CALIFORNIA 94109
(415) 771-6000

REGULATION 8, RULE 40 Aeration of Contaminated Soil and Removal of Underground Storage Tanks

NOTIFICATION FORM

- Removal or Replacement of Tanks
- Excavation of Contaminated Soil

SITE INFORMATION

N. Lewis

SITE ADDRESS 15400 FOOTHILL BOULEVARD
 CITY, STATE SAN LEANDRO, CA ZIP 94578
 OWNER NAME ALAMEDA COUNTY GENERAL SERVICES AGENCY
 SPECIFIC LOCATION OF PROJECT FAIRMONT HOSPITAL

TANK REMOVAL

CONTAMINATED SOIL EXCAVATION

SCHEDULED STARTUP DATE 7/29/93

SCHEDULED STARTUP DATE _____

VAPORS REMOVED BY:

STOCKPILES WILL BE COVERED? YES _____ NO _____

- WATER WASH
- VAPOR FREEING (CO²)
- VENTILATION

ALTERNATIVE METHOD OF AERATION (DESCRIBE BELOW):

(MAY REQUIRE PERMIT)

CONTRACTOR INFORMATION

NAME ENVIRONMENTAL SCIENCE & ENGINEERING CONTACT JAY CARPENTER
 ADDRESS 4090 NELSON AVE. STE J PHONE (510) 685-4053
 CITY, STATE, ZIP CONCORD, CA 94520

CONSULTANT INFORMATION

(IF APPLICABLE)

NAME ENVIRONMENTAL SCIENCE & ENGINEERING CONTACT JAY CARPENTER
 ADDRESS 4090 NELSON AVE. STE J PHONE (510) 685-4053
 CITY, STATE, ZIP CONCORD, CA 94520

FOR OFFICE USE ONLY

DATE RECEIVED FAX 7/26/93

BY PLG (init.)

DATE POSTMARKED _____

BY _____ (init.)

CC: INSPECTOR NO. 553

DATE 7/28/93

BY PLG (init.)

UPDATE: CONTACT NAME _____

DATE _____

BY _____ (init.)

BAAQMD N # _____

DATA ENTRY 7/28/93

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

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No.	Manifest Document	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address FAIRMONT HOSPITAL 15400 FOOTHILL BLVD		C1A1D91811412915313		814101012	
4. Generator's Phone (510) 667-7975		SAN LEANDRO CA 94578		A. State Manifest Document Number 92284002	
5. Transporter 1 Company Name Erickson, Inc.		C1A1D0109466392		B. State Generator's ID No. HAH1913601265161	
7. Transporter 2 Company Name		8. US EPA ID Number		C. State Transporter ID No. 309153	
9. Designated Facility Name and Site Address Gibson Oil/Pilot Petroleum 475 Sea Port Blvd. Redwood City, Ca. 94604		10. US EPA ID Number C1A1D043260702		D. State Facility ID No. (510) 235-1393	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	
a. RQ Hazardous Waste Liquids NOS ORM E NA9189 D018		No. Type		14. Unit Wt/Vol	
		0 0 1 1 7 17		0 0 0 3 5 10 G	
b.					
c.					
d.					
Hydrocarbon Mixture with Water (99% Water, 1% Hydrocarbons)		K. Handling Code(s) for Waste Listed Above		Waste Number 228	
15. Special Handling Instructions and Additional Information Gibson Oil Waste Stream Profile # <u>ERG 31</u> 24 Hr. Contact <u>JAY CARPENTER</u> 24 Hr. Phone# <u>(510) 685-4053</u>					
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 JAY CARPENTER		Signature <i>Jay Carpenter</i>		Month Day Year 13 26 93	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Norwood Richmond		Signature <i>Norwood Richmond</i>		Month Day Year 03 26 93	
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					
Signature		Month Day Year			

DO NOT WRITE BELOW THIS LINE.

See Instructions on back of page 6.

Department of Toxic Substances Control
Sacramento, California

State of California—Environmental Protection Agency
Form Approved OMB No. 2050-0039 (Expires 9-30-94)
Please print or type. Form designed for use on elite (12-pitch) typewriter.

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CA D98142953382242		Manifest Document No. 2142		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address Alameda County General Services Agency 4400 MacArthur Blvd, OAKLAND, CA 94619													
4. Generator's Phone (510) 662-4473													
5. Transporter 1 Company Name ERICKSON INC.					6. US EPA ID Number CA D009466392								
7. Transporter 2 Company Name													
8. US EPA ID Number													
9. Designated Facility Name and Site Address Erickson, Inc. 255 Parr Blvd. Richmond, Ca. 94801													
10. US EPA ID Number CAID0109466392													
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit Wt/Vol			
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.						No. 001		Type TP		Quantity 1000		Unit P	
b.													
c.													
d.													
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Always wear hardhats when working around U.G.S.T.'s 24 Hr. Contact Name <u>P. Kinney</u> & Phone <u>510-662-4473</u>													
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 Peter Kinney						Signature <i>[Signature]</i>		Month 07		Day 29		Year 99	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Robert Haney						Signature <i>[Signature]</i>		Month 07		Day 29		Year 99	
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 DAMU SATO						Signature <i>[Signature]</i>		Month 07		Day 29		Year 99	

DO NOT WRITE BELOW THIS LINE.

White: TSDP SENDS THIS COPY TO DTSC WITHIN 30 DAYS.
To: P.O. Box 3000, Sacramento, CA 95812

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

CUSTOMER
ENV SCIENCE & ENG
JOB NO. 82242

FOR: Erickson, Inc. TANK NO. 11738

LOCATION: Richmond DATE: 07/30/93 TIME: 13:16:28

TEST METHOD Visual Gastech/1314 SMPN LAST PRODUCT D

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 1000 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."

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 that 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.

[Signature]
REPRESENTATIVE

TITLE

[Signature]
INSPECTOR

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name ALAMEDA COUNTY GSA Generating Location FAIRMONT HOSPITAL
 Address 440 MACARTHUR BLVD. Address 15400 FOOTHILL ROAD
OAKLAND, CA. 94619 SAN LEANDRO, CA.

Phone No. 5 1 0 - 5 3 5 6 2 8 0 Phone No. 5 1 0 - 6 6 7 4 4 7 3

FI Waste Code C A 4 0 5 0 8 1 3 9 3 3 9 3 4 9 Containers
 Description of Waste Quantity Units No. Type
SOIL WITH DIESEL FUEL 16 Y 0 1 T
NON HAZARDOUS

- Type
- D - Drum
- C - Carton
- B - Bag
- T - Truck
- P - Pounds
- Y - Yards
- O - Other

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

IV CARPENTER AS AGENT FOR ACGSA [Signature] 082493
 Generator Authorized Agent Name Signature Shipment Date

TRANSPORTER

Truck No. C-85 Phone No. 408-729-0196
 Transporter Name CABALLERO TRUCKING Driver Name (Print) ED CABALLERO
 Address 2530 BERRYESSA ROAD, STE 527 Vehicle License No./State _____
SAN JOSE, CA. 95132 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

[Signature] 082493 [Signature] 082493
 Driver Signature Shipment Date Driver Signature Delivery Date

DESTINATION

Site Name BFI VASCO ROAD Phone No. 5 1 0 - 4 4 7 0 4 9 1
 Address 4001 NORTH VASCO ROAD, LIVERMORE, CA. 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

[Signature] [Signature] 082493
 Name of Authorized Agent Signature Receipt Date

PASS CODE _____

NON-HAZARDOUS SPECIAL WASTE MANIFEST

GENERATOR

Generator Name ALAMEDA COUNTY GSA Generating Location FAIRMONT HOSPITAL
 Address 440 MACARTHUR BLVD. Address 15400 FOOTHILL ROAD
OAKLAND, CA. 94619 SAN LEANDRO, CA.

Phone No. 5 1 0 - 5 3 5 6 2 8 0 Phone No. 5 1 0 - 6 6 7 4 4 7 3

3FI Waste Code	Description of Waste	Quantity	Units	Containers No.	Type	Type
<u>C A 4 0 5 0 8 1 3 9 3</u>	<u>SOIL WITH GASOLINE (approx. 6 cubic yards)</u> <u>NON HAZARDOUS</u> <u>Comingled with approx. 6 cubic yards of soil with Diesel</u>	<u>1 2</u>	<u>Y</u>	<u>0 1</u>	<u>T</u>	<u>T</u>

I hereby certify that the above named material does not contain free liquid as defined by 40 CFR Part 260.10 or any applicable state law, is not a hazardous waste as defined by 40 CFR Part 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Name BY CARPENTER AS AGENT FOR ACGSA Signature [Signature] Shipment Date 08 24 93

TRANSPORTER

Truck No. C-85 Phone No. 408-729-0196
 Transporter Name CABALLERO TRUCKING Driver Name (Print) ED CABALLERO
 Address 2530 BERRYESSA ROAD, STE 527 Vehicle License No./State _____
SAN JOSE, CA. 95132 Vehicle Certification _____

I hereby certify that the above named material was picked up at the generator site listed above.

I hereby certify that the above named material was delivered without incident to the destination listed below.

Driver Signature [Signature] Shipment Date 08 24 93 Driver Signature [Signature] Delivery Date 08 24 93

DESTINATION

Site Name BFI VASCO ROAD Phone No. 5 1 0 - 4 4 7 0 4 9 1
 Address 4001 NORTH VASCO ROAD, LIVERMORE, CA. 94550

I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.

Name of Authorized Agent _____ Signature _____ Receipt Date _____

PASS CODE _____

GENERATOR RETAIN

McCAMPBELL ANALYTICAL INC.	110 2nd Avenue South, #D7, Pacheco, CA 94553 Tele: 510-798-1620 Fax: 510-798-1622
-----------------------------------	--

Environmental Science & Eng. 4090 Nelson Avenue, Suite J Concord, CA 94520	Client Project ID: Fairmont Hospital; San Leandro	Date Sampled: 07/29/93
	Client Contact: Mike Foget	Date Received: 07/29/93
	Client P.O.:	Date Extracted: 07/30/93
	Date Analyzed: 07/30-08/02/93	

Diesel Range (C10-C23) Extractable Hydrocarbons as Diesel *
 EPA methods modified 8015, and 3550 or 3510; California RWQCB (SF Bay Region) method GCFID(3550) or GCFID(3510)

stack pile

Lab ID	Client ID	Matrix	TPH(d) [†]	% Recovery Surrogate
31532	S-1	S	ND	98
31533	S-2	S	12,000,a	98
31534	S-3	S	1100,a	98
31535	S-4	S	880,a	98
Detection Limit unless otherwise stated; ND means Not Detected		W	50 ug/L	
		S	10 mg/kg	

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

cluttered chromatogram; surrogate and sample peaks co-elute or surrogate peak is on elevated baseline

† 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 diesel is significant; b) diesel range compounds are significant; no recognizable pattern; c) modified diesel?; light(CL) or heavy(CH) diesel compounds are significant; d) gasoline range compounds are significant; e) medium boiling point pattern that does not match diesel(?); f) one to a few isolated peaks present; g) oil range compounds are significant; h) lighter than water immiscible phase is present.

McCAMPBELL ANALYTICAL INC. 110 2nd Avenue South, #D7, Pacheco, CA 94553
 Tele: 510-798-1620 Fax: 510-798-1622

Environmental Science & Eng. 4090 Nelson Avenue, Suite J Concord, CA 94520	Client Project ID: Fairmont Hospital; San Leandro	Date Sampled: 07/29/93
		Date Received: 07/29/93
	Client Contact: Mike Foget	Date Extracted: 07/30/93
	Client P.O:	Date Analyzed: 08/01-08/03/93

Gasoline Range (C6-C12) Volatile Hydrocarbons as Gasoline*, with BTEX*
 EPA methods 5030, modified 8015, and 8020 or 602; California RWQCB (SF Bay Region) method GCFID(5030)

Lab ID	Client ID	Matrix	TPH(g) ⁺	Benzene	Toluene	Ethylbenzene	Xylenes	% Rec. Surrogate
31532	S-1	S	---	ND	0.005	ND	ND	98
31533	S-2	S	---	ND < 0.05	ND < 0.05	ND < 0.05	ND < 0.05	81
31534	S-3	S	---	ND < 0.05	ND < 0.05	ND < 0.05	ND < 0.05	88
31535	S-4	S	---	ND < 0.03	ND < 0.03	ND < 0.03	ND < 0.03	89
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.

stack pile

McCAMPBELL ANALYTICAL INC.

110 2nd Avenue South, #D7, Pacheco, CA 94553
 Tele: 510-798-1620 Fax: 510-798-1622

Environmental Science & Eng. 4090 Nelson Avenue, Suite J Concord, CA 94520	Client Project ID: 6-93-5057; ACGSA-Fairmont	Date Sampled: 08/04/93
	Client Contact: Mike Foget	Date Received: 08/04/2/93
	Client P.O:	Date Extracted: 08/05/93
		Date Analyzed: 08/05/93

RCI (Reactivity, Corrosivity & Ignitability)

CA Title 22, Section 66261.21-66261.23

Lab ID	Client ID	Matrix	Reactivity ⁺	Corrosivity (pH)	Ignitability ^o
31589	S-3	S	negative	8.26	negative

⁺ negative means no obvious reaction with water, no evolution of gas upon contact with water, appears to contain no reactive cyanide or sulfide (< ~ 5 mg/kg by EPA SW-846, chapter 7, modified), and shows no indication of explosivity.

^o negative for a soil means the absence of spontaneous combustion and the absence of flammability upon exposure to a naked flame.

McCAMPBELL ANALYTICAL

110 2nd AVENUE, # D7

(510) 798-1820

PACHECO, CA 94553

FAX (510) 798-1822

CHAIN OF CUSTODY RECORD

TURN AROUND TIME:

RUSH
 24 HOUR
 48 HOUR
 5 DAY

REPORT TO: *M. FOGELT*

BILL TO: *F252*

COMPANY: *FSE*

TELE: _____

FAX #: _____

PROJECT NUMBER: *6-93 5057*

PROJECT NAME: *ACGSA - FAIRMONT*

PROJECT LOCATION: _____

SAMPLER SIGNATURE: *[Signature]*

ANALYSIS REQUEST

OTHER

- BTEX & TPH as Gasoline (602/8020 & 8015)
- THP as Diesel (8015)
- Total Petroleum Oil & Grease (5520 ENF/5520 BNF)
- Total Petroleum Hydrocarbons (418.1)
- EPA 601/8010
- EPA 602/8020
- EPA 608/8080
- EPA 608/8080 - PCBs Only
- EPA 624/8240/8260
- EPA 625/8270
- CAM - 17 Metals
- EPA - Priority Pollutant Metals
- LEAD (7240/7421/239.2/6010)
- ORGANIC LEAD
- PCP

COMMENTS

SAMPLE ID	LOCATION	SAMPLING		# CONTAINERS	TYPE CONTAINERS	MATRIX							METHOD PRESERVED			
		DATE	TIME			WATER	SOIL	AIR	SLUDGE	OTHER	HCL	HNO ₃		OTHER		
<i>5-3</i>	<i>STOCHPLZ</i>	<i>8/4/93</i>	<i>14:27</i>	<i>1</i>	<i>200</i>		<i>X</i>									<i>X</i>

ICE/T
 PRESERVATIVE
 VOAS O & G METALS OTHER
 GOOD CONDITION
 APPROPRIATE CONTAINERS
 HEAD SPACE ABSENT

RELINQUISHED BY: <i>[Signature]</i>	DATE: <i>8/4/93</i>	TIME: <i>15:41</i>	RECEIVED BY: <i>[Signature]</i>
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY:
RELINQUISHED BY:	DATE:	TIME:	RECEIVED BY LABORATORY:

REMARKS:

11/29/93

CHAIN OF CUSTODY RECORD

DATE 7/29/93 PAGE 1 OF 1

PROJECT NAME Fairmont Hospital


ADDRESS 15400 Foothill Rd.

San Leandro CA

PROJECT NO. 6935057

SAMPLED BY M. Foget

LAB NAME McCampbell Analytical



Environmental Science & Engineering, Inc.
 Phone (510) 685-4053
 Fax (510) 685-3323

SAMPLE #	DATE	TIME	LOCATION	ANALYSES TO BE PERFORMED							MATRIX	CONTAINERS	REMARKS (CONTAINER, SIZE, ETC.)
				TPH	diesel	BTEX	REI	P-V	PC	OC			
S-1	7/29	13:40	West side excavation	X	X						Soil	X	Brass Liner
S-2	7/29	13:45	West side excavation	X	X						Soil	X	"
S-3	7/29	13:50	East side excavation	X	X						Soil	X	"
S-4	7/29	14:00	Stockpile	X	X	X					Soil	X	"

31532
 31533
 31534
 31535

ICE/T°
 GOOD CONDITION
 PRESERVATIVE
 APPROPRIATE CONTAINERS

RELINQUISHED BY: (signature) [Signature] RECEIVED BY: (signature) [Signature]
 date time 7/29/93 14:10

TOTAL NUMBER OF CONTAINERS 4
 REPORT RESULTS TO: M. Foget
 SPECIAL SHIPMENT REQUIREMENTS

INSTRUCTIONS TO LABORATORY (handling, analyses, storage, etc.):
Please do not Analyze for TPH - gasoline

SAMPLE RECEIPT
 CHAIN OF CUSTODY SEALS
 REC'D GOOD COND'TN/COLD
 CONFORMS TO RECORD

08-04-1993 12:00PM FROM McCampbell TO 6855323 P.08