	UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT
	RGENCY  HAS STATE OF RICE OF EMERGENCY SERVICES  YES NO  NO  HAS STATE OF RICE OF EMERGENCY SERVICES  NO  FOR LOCAL AGENCY USE ONLY  1 HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE  DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM.  ORT DATE  C'. JULY CASE 1
0.	
	SEMCO / A. Jacques (415) 572 8033 SEMCO / A. Jacques
REPORTED BY	REPRESENTING OWNER/OPERATOR REGIONAL BOARD COMPANY OR AGENCY NAME  LOCAL AGENCY OTHER  COMPANY OR AGENCY NAME  SEMCO
F 2	ADDRESS COLVICE
	1741 street Leslie Street on San Mateo STATE CA 94404
RESPONSIBLE PARTY	NAME VAI DAVID TAY OF Trustee of the CONTACT PERSON MILTON H. Price + Violet & Price Junknown BOD LEWIS (45)3642400 ADDRESS
RESPO	499 Scaport Court #302 Red wood City of 94063
NO	Residence BOD Lewis (415)3104-2400
SITE LOCATION	801 Buenar Vista Ave Alameda CA COUNTY 94501
IIS	CROSS STREET 8th Street
TING	Alameda County Enviro. Eva Chu (510)271-4320
1 1 2	DIOCI + TO
MPLEN	
Sign	NAME QUANTITY LOST (GALLONS)  Waste Oil  NAME  UNKNOWN
SUBSTANCES	Wasic Oil
SUB	(2) UNKNOWN
Ι	DATE DISCOVERED HOW DISCOVERED INVENTORY CONTROL SUBSURFACE MONITORING NUISANCE CONDITIONS
BATEMENT	ON THI ON SO 9 4 Y TANK TEST TANK REMOVAL OTHER
	DATE DISCHARGE BEGAN  METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY)  UNKNOWN  REMOVE CONTENTS CLOSE TANK & REMOVE  REPAIR PIPING
DISCOVERY/	HAS DISCHARGE BEEN STOPPED?  REPAIR TANK  CLOSE TANK & FILL IN PLACE  CHANGE PROCEDURE
DISC	YES NO IF YES, DATE M M D D Y Y REPLACE TANK OTHER
Ä,	SOURCE OF DISCHARGE CAUSE(S)
SOURCE/	TANK LEAK UNKNOWN OVERFILL RUPTURE/FAILURE SPILL  PIPING LEAK OTHER CORROSION UNKNOWN OTHER
ļ	
CASE	UNDETERMINED SOIL ONLY GROUNDWATER DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
	CHECK ONE ONLY
CURRENT	NO ACTION TAKEN PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED POLLUTION CHARACTERIZATION  LEAK BEING CONFIRMED PRELIMINARY SITE ASSESSMENT UNDERWAY POST CLEANUP MONITORING IN PROGRESS
25	LEAK BEING CONFIRMED PRELIMINARY SITE ASSESSMENT UNDERWAY POST CLEANUP MONITORING IN PROGRESS REMEDIATION PLAN CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) CLEANUP UNDERWAY
$\vdash$	CHECK APPROPRIATE ACTION(S) EXCAVATE & DISPOSE (ED) REMOVE FREE PRODUCT (FP) ENHANCED BIO DEGRADATION (IT)
REMEDIAL	
REME	CONTAINMENT BARRIER (CB) ON ACTION REQUIRED (NA) TREATMENT AT HOOKUP (HU) VENT SOIL (VS)
	VACUUM EXTRACT (VE) OTHER (OT)
ξ	
COMMENTS	
18	
	HSC 05 (8/90)



ALCO HAZMAT

94 SEP 22 PH 3: 43 DATE 9-5-94

LETTER OF TRAN		*****	******	DAT	E 9-5	-94
From: MIKE TAMB	RONI	Pro	oject No:	94-12		
TO: EVA CHU ALAMEDA CO. ENV. 1131 HANDON BAY ALAMEDA, CA 9	HEAUTH PKWY - 2002 F 4502-6577		ЉЈЕСТ:	EXCAUATION 801 BUENN ALAMRDA,		G REPORT HUE.
The following ite	ems are:	E	nclosed	Ser via	nt Separa	tely
Date	Descri	-	·····	******	No. of Co	
9-5-94	EXCAUATON				<u> </u>	
These are transmitted:		At your re For your a For your a Prelimina	approval review	For yo	our action our files our information	on
COMMENTS: FVA	,	JESTION FICE.	is or	Comments	, GIUE	ME
Sincerely,	<u>L.</u>					

Touchstone Developments 684 30th Avenue - San Francisco, California 94121 (415) 386-8791

### ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

### **Hazardous Materials Division Inspection Form**

Site Address  City  Hareda Zip 94 50 Phone  MAX Amt. Stored > 5001bs/55g/200cf? YN Inspection Categories: Hazardous Waste generated per month?  II. Haz. Mat/Waste GENERATOR/TRANSPORTER III. Underground Tanks Acute Hazardous Materials		Site ID#	Site Name	[Cudential Today's Date 7 26, 2
MAX Amt. Stored > 500 lbs/55g/200cf? YN Hazardous Waste generated per month?  Hazardous Waste generated per month?  The marked items represent violations of the Calif. Administration Code (CAC) or the Heatin & Safety Code (HS&)  II. Underground Tanks MurenCavatur  The marked items represent violations of the Calif. Administration Code (CAC) or the Heatin & Safety Code (HS&)  I. Waste D		Site Address _		m/ k, 11 .1-
Hazardous Waste generated per month?   Hazardous Waste generated	_	City		Alaneda zip 9450] Phone
1.   Waste   0	=	Hazardous Waste gener	ated per month	II. Underground Tanks    II. Business Plans, Acute Hazardous Materials   III. Underground Tanks
1. Waste ID   66472   1. Label dates   65503	=	THO THOUSAND IT OFFICE	a longion in ea	of the Call. Administration Code (CAC) of the Health & Safety Code (HS&C)
1.   Cornect   66484   66492	I.A	1. Waste ID 2. EPA ID 3. > 90 days 4. Label dates 5. Blennial	66472 66508 66508 66493	Mike Tanbuni - Suchstone present.
12. Charles Disp. (H.S.&C.) 261895   21. Et Haz Washe   27121   21. Also space   27121   21. Copies   27141   22. Smalles   27141   22. Smalles   27242   25. Maintenance   27242   25. Maintenance   27242   25. Maintenance   27242   26. Maintenance   27242   27. Buffer Zone   27242   2724	Monifer	8. Copy sent 9. Exception 10. Copies Rec'd	66492 66484 66492	ON mel deread, taken purto arungato
15. Asia space   67126	MISC.	12. On-site Disp. (H.S.&C.)	) 26189.5	3 N S
20. Name list 67141 21. Copies 21. Copies 22. Eng. Coord. Ing. 67144 22. Eng. Coord. Ing. 67144 23. Contition 32. Applic. Dispection 32. Maintenance 33. Continement 67242 25. Maintenance 32. Some inspection 32. Applic. Inspection 33. Sorte Storage 30. Softe Storage 31. Freeboard 31. Freeboard 32. Applic. Insurance 33. Applic. Insurance 33. Applic. Insurance 33. Applic. Insurance 33. Comp. Cert. ICHP inso. 34. Containers 35. Vehicles 36. EPA ID \$ 35. Vehicles 36. EPA ID \$ 36. EPA ID \$ 36. EPA ID \$ 36. EPA ID \$ 37. Correct 38. HW Desivery 39. Records 39. Records 30. Aname/ Covers 40. Name/ Covers 40. Name/ Covers 40. Name/ Covers 41. Recyclobles  Contact: Title:  Title:	Prevention	15. Aisle Space 16. Local Authority 17. Maintenance	67124 67126 67120	26×12×12,
23. Condition  \$\frac{2}{24} \text{Compatibility} \text{67243} \text{7244} \text{24. Compatibility} \text{67243} \text{67244} \text{25. Michiteronice} \text{67244} \text{25. Michiteronice} \text{67245} \text{27. Buffer Zon \text{67246} \te	Gentin, gency	20. Name List 21. Copies	67141 67141	
I.B TRANSPORTER (Title 22)  32. Applic./Insurance 33. Comp. Cert./CHP Inso. 66428  34. Containers 66465  35. Vehicles 66465  36. SPA ID #s 66531  37. Correct 66541  38. HW Delivery 66543  39. Records 66544  41. Recyclables 66845  Contact:  Title:  PM  Tambach:  Inspector:  B. Chan  Inspector:  Title:	Containers, Tanks	24. Compatibility 25. Maintenance 26. Inspection 27. Buffer Zone 28. Tank Inspection 29. Containment 30. Safe Storage	67242 67243 67244 67246 67259 67245 67261	Etilities wii fit, put excounter wii 2'9 b Ence the 12'h' soil gle appeared clea &
36. EPA ID #s  37. Correct 46541 45541 40. Name/ Covers 46544 41. Recyclables  Contact:  Title:  PM  Inspector:  B Chan  Contact  Title:  Titl	I.B	32. Applic./Insurance 33. Comp. Cert./CHP Inso	66448	not pursed. Sples to be run for TPHG +BTEX
Contact: M. Tambroni  Title: PM Inspector: B. Chan		36. £PA ID ≸s 37. Correct 38. HW Delivery	66531 66541 66543	Hus the water sple will also be her for OS-
Contact: M. Tambroni  Title: PM Inspector: B. Chan	Conf're			
		Contact: $\overline{P}$	M To	all, Inspector: B. Chan

## ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

DAVID J. KEARS, Agency Director

RAFAT A SHAHID, ASST AGENCY DIRECTOR

DEPARTMENT OF ENVIRONMENTAL HEALTH
State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
80 Swan Way, Rm 200
Oakland, CA 94621
(510) 271-4530

StID 4896

July 18, 1994

Mr. Bob Lewis Milton Price Trust 499 Seaport Ct, Suite 302 Redwood City, CA 94063

RE: Additional Investigations at 801 Buena Vista Ave, Alameda

Dear Mr. Lewis:

I have completed review of soil analytical results collected during the removal of an underground gasoline storage tank from the above referenced site. Elevated levels of fuel hydrocarbons, up to 1,400 parts per million total petroleum hydrocarbons as gasoline (ppm TPH-G), 4.7ppm ethylbenzene, and 13 ppm xylenes, were detected at 9' depth. Another soil sample was collected at 12.6' depth (at the capillary fringe) and levels dropped considerably, to only .0064 ppm xlyenes. Contaminated backfill was placed back into the pit, pending results of laboratory analyses.

At this time, the backfill and additional contaminated soil should be re-excavated from the pit for proper disposal. Confirmatory soil samples (from 9'depth and from the capillary fringe) and a groundwater grab sample should be collected and analyzed for TPH-G, BTEX, and total dissolved solids. Upon review of these laboratory analytical results, a determination will be made if further investigations to remediate the site will be needed.

Please have your consultant contact me at (510) 337-2869 at least 72 hours prior to the start of excavation. If you have any questions, do not hesitate to call this office.

eva chu

Hazardous Materials Specialist

cc: files

801buena

#### LOP - RECORD CHANGE REQUEST FORM

printed: 02/21/95

Mark Out What Needs Changing and Hand to LOP Data Entry (Name/Address changes go to Annual Programs Data Entry)

Insp: EC

AGENCY # : 10000 SOURCE OF FUNDS: F SUBSTANCE: 8006619

StID : 4896

LOC:

SITE NAME: Private Residence DATE REPORTED : 07/15/41 ADDRESS: 801 Buena Vista Ave DATE CONFIRMED: 07/15/94

CITY/ZIP : Alameda 94501 MULTIPLE RPs : N

> SITE STATUS \_\_\_\_\_\_

CASE TYPE: S CONTRACT STATUS: 9 PRIOR CODE: 3A1 EMERGENCY RESP:

RP SEARCH: S DATE COMPLETED: 07/15/94

DATE COMPLETED: 09/05/94

PRELIMINARY ASMNT: U DATE UNDERWAY: 07/18/94
REM INVESTIGATION: DATE UNDERWAY:
REMEDIAL ACTION: DATE UNDERWAY:
POST REMED ACT MON: DATE UNDERWAY: DATE COMPLETED: DATE COMPLETED: DATE COMPLETED:

DATE ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 07/18/94
LUFT FIELD MANUAL CONSID: 2HSCA
CASE CLOSED: Y

DATE EXCAVATION STARTED: 07/08/94 REMEDIAL ACTIONS TAKEN: ED

RESPONSIBLE PARTY INFORMATION \_\_\_\_\_\_

RP#1-CONTACT NAME: Bob Lewis For

COMPANY NAME: M. H. And V. G. Price Trust

ADDRESS: 499 Seaport Ct, #302 CITY/STATE: Redwood City, C A 94063

	INSE	PECTOR VERIFICA	TION:	
NAME	si	GNATURE		DATE
Name/Address Chan		ATA ENTRY INPU	_ ·	Progress Changes
ANNPGMS	LOP DATE		LOP _	DATE

## ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200 Oakland, CA 94621 (415) 271-4320

### **Hazardous Materials Division Inspection Form**

	Site ID#	Site Nam	e Rusy	<del>lance</del>		Today's	Date	7/8/94
	Site Address	€0 V	Buena	Vista		EP/	A ID#	
	city <u>Alam</u>	eda			Zip <u>94</u> 50	)   Phone		
_	MAX Amt. Stored > 5001t Hazardous Waste genera The marked Items repres	ted per mont	h?	II. Bus III. Und	z. Mat/Waste G iness Plans, Acu derground Tank		erials	(HS&C)
=			1	.,,(a,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
I.A	. GENERATOR (Title 22)	* 66471 66472 66508 66508 66493	Commen One 29		re steel t	Sor gasolin	re st	enterting.
Manifest	6. Records 7. Correct 8. Copy sent 9. Exception 10. Copies Rec'd	66492 66484 66492 66484 66492	Susta gas LEL (	lled 1925 Line (5)	1 by C11 1 dewalk g	· Rickerke.		Conlos
MIE.	11. Treatment 12. On-site Disp. (H.S.&C.) 13. Ex Hazz. Waste	66371 26189.5 66570	Some o	reen sta	mini of	Stockpiled	Soil	
Prevention	14. Communications 15. Alsle Space 16. Local Authority 17. Maintenance 18. Training	67121 67124 67126 67120 67105	\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	, 	o )			
gency	19. Prepared 20. Name List 21. Coples 22. Emg. Coord. Trng.	67140 67141 67141 67144		\\	<u> </u>	Bus bue	na Vis	4>>
Containers, Tanks	23. Condition 24. Compatibility 25. Maintenance 26. Inspection 27. Buffer Zone 28. Tank Inspection 29. Containment 30. Safe Storage 31. Freeboard	67241 67242 67243 67244 67244 67259 67245 67261 67257	Rust ( thron Hasted to Bottom	ngh hole z Defann	n+some s to En	pitture b	t på	2001rds
I.B	TRANSPORTER (Title 22) 32, Applic./Insurance33, Comp. Cert./CHP Insp34, Containers	66428 66448 66465	Soil sa West Analyz	hored gas	-1- (	- stamel	greens en Ron Et C	soil w/
Manifest	35. Vehicles 36. EPA iD ≠s 37. Correct 38. HW Delivery 39. Records	66465 66531 66541 66543 66544	hydroc semil	carbons clatile co	metals (compands	J. Cr. Pb. Zn S stammy to MOIST SOIL	Ni)	Startu
Confra	40. Name/ Covers 41. Recyclables	66545 66800	to an	re into	pt-Anal	ese for PH	-6,BT	ex+ totallea
Rev 6,	Contact:	<del></del>	IX pit	fills will	if Gw.	take grab &	talled	ad a
	Title:	espensa	org	<del></del>	Inspector:	Eva C	W	
	Signature: 🔾	flues	Statuen	<del></del>	Signature:	_low	Mi	

AGORD. CERTI	FICA E OF I	NSURANC		ISSUE	DATE(MM/DD/YY) 4/11/94		
PRODUCER Insurance Center of 2908 North G Street		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.					
P. 0. Box 2268 Merced, CA 95344		COMPANIES AFFORDING COVERAGE					
		COMPANY A Golde	en Eagle	Ins. Co			
INSURED		COMPANY B					
Semco, Inc. 1217 South 7th Street	<b>^+</b>	COMPANY C	<del></del>				
Modesto, CA 95351	et	COMPANY D					
		COMPANY E			<u></u>		
COVERAGES  THIS IS TO CERTIFY THAT THE PO- INDICATED, NOTWITHISTANDING AN CERTIFICATE MAY BE ISSUED OR EXCLUSIONS AND CONDITIONS OF	LICIES OF INSURANCE LISTED IY REQUIREMENT, TERM OR O MAY PERTAIN, THE INSURANCE	BELOW HAVE BEEN ISSU CONDITION OF ANY CON CE AFFORDED BY THE IN MAY HAVE BEEN RED	JED TO THE INSU TRACT OR OTHER POLICIES DESCRI UCED BY PAID CL	RED NAMED ABOVE FOR T DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T AMMS.	THE POLICY PERIOD		
CO TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	'S		
GENERAL LIABILITY				GENERAL AGGREGATE	s		
COMMERCIAL GENERAL LIABILITY	i			PRODUCTS-COMP/OP AGG.			
OWNER'S & CONTRACTOR'S PROT.				PERSONAL & ADV. INJURY	\$		
OWNER 3 & CONTRACTOR SPROT.				FIRE DAMAGE (Any one fire)	s		
				MED.EXPENSE (Any one person	· · · · · · · · · · · · · · · · · · ·		
AUTOMOBILE LIABILITY ANY AUTO				COMBINED SINGLE	s		
ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$		
HIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$		
GARAGE LIABILITY				PROPERTY DAMAGE	\$		
EXCESS LIABILITY				EACH OCCURRENCE	\$		
UMBRELLA FORM				AGGREGATE	\$		
OTHER THAN UMBRELLA FORM							
A WORKER'S COMPENSATION	PWC254163	04/05/94	04/05/95	X STATUTORY LIMITS	7 000 000		
AND				EACH ACCIDENT	\$1,000,000		
EMPLOYERS' LIABILITY				DISEASE-POLICY LIMIT DISEASE-EACH EMPLOYEE	\$1,000,000 \$1,000,000		
OTHER							
DESCRIPTION OF OPERATIONS/LOCATIONS. All California Opera							
CERTIFICATE HOLDER		CANCELLATION	10 DAY	FOR NON-1	A.K.		
in the second material of the second policy and the second	A MATERIAL TO A LANGUAGE NO DESTINATION NOT HAVE NEED A	• ^ y	•	IBED POLICIES BE CANCELL	•		
		.2		ISSUING COMPANY WILL			
County of Alameda		**		THE CERTIFICATE HOLDER			
80 Swan Way, Room 20	00	. 41		IOTICE SHALL IMPOSE NO			
Oakland, CA 94621	:	73 <u> </u>		MPANY, ITS AGENTS OR RE	PRESENTATIVES.		
		AUTHORIZED REPRESE	NTATIVE NO. 1	MJN @ ACORD C			
ACORD 25-5 (7/90) 1 of 1 #M1	220	voy	Tuge	MJN @ ACORD C	ORPORATION 1990		

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

ACCEPTED

Underground Storage Tank Closure Permit Application Alameda County Division of Hazardous Materials 80 Swan Way, Suite 200. Oakland, CA 94621 These closure/removal plans have been received and found to aptible and essentially meet the requirements of State

Telephone: (510) 271-4320

and total Health Laws Changes to your closure plans indicated la . It. project proposed herein is now released for issuance O e copy of the accepted plans must be on the job and availby this Department are to assure compliance with State and local of any required building permits for construction/destruction. able 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 Notify this Department at least 72 hours prior to the following requirements of State and local laws. required inspections: •

issuance of a) permit to operate, b) permanent site closure, is dependant on compliance with accepted plans and all - Final Inspection Sampling plicable laws and regulations.

Removel of Tank(s) and Piping

Contact Specialists REVIEWAS THERE IS A FINANCIAL PENALTY FOR F NOT OBTAINING THESE INSPECTIONS

UNDERGROUND TANK CLOSURE PLAN Complete according to attached instructions

			Former	u/		
1.	Business Name	Residence /	ELL Fin	e House		
	Business Owner _					
2.	Site Address	801 Buena Vist	a Avenue			
	City	Alameda	Zip_	94501	Phone	
3.	Mailing Address	499 Seaport C	ourt, #30	)2		
	City Redwood  Val David  Land Owner Property	od City , CA Taylor, Trustee	Zip Cof the N	94063 Milton H	Phone (41 Price &	5) 364-2400 Violet G.
4.		aport Crt., #302				
5.	Generator name u Bob Lewis, Att	<b>nder which tank</b> tornèy for Trust		manifest	ced	
	EPA I.D. No. und	er which tank w	ill be ma	nifeste	CAC 00	0740088
		-	1 -	Fax (415	1364-9	78 <b>&lt;</b>

rev 12/90

6.	Contractor SEMCO
	Address 1741 Leslie Street
	City San Mateo. CA 94402 Phone (415) 572-8033
	License Type <u>A.B. &amp; C-61/D-40</u> HAZ MAT  HAZ MAT
7.	Consultant N/A
	Address
	City Phone
8.	Contact Person for Investigation
	Name Chuck Kiper Title Vice-President
	Phone (415) 572-8033
9.	Number of tanks being closed under this plan
	Length of piping being removed under this plan undetermined
	Total number of tanks at facility 1
10.	State Registered Hazardous Waste Transporters/Facilities (see instructions).
	** Underground tanks are hazardous waste and must be handled ** as hazardous waste
	a) Product/Residual Sludge/Rinsate Transporter
	Name Allied Petroleum EPA I.D. No. CAL 000112314
	Hauler License No. 1168 License Exp. Date 4/30/95
	Address 1217 7TH Street
	CityModesto State CA Zip _95351
	b) Product/Residual Sludge/Rinsate Disposal Site
	Name Refineries Services EPA I.D. No.CAD083166728
	Address 13331 West Highway 33
•	City Patterson State CA Zip 95363

c)	Tank and Piping Transporter	
	Name RHT Trucking	EPA I.D. No. CAL 000112413
	Hauler License No. 2753	License Exp. Date 4/30/95
	Address 1217 7TH Street	<del></del>
	City <u>Modesto</u> S	State <u>CA</u> Zip <u>95351</u>
d)	Tank and Piping Disposal Site	
	Name Erickson	EPA I.D. No. <u>CAD009466392</u>
	Address 255 Parr Blvd.	······································
	City Richmond S	State <u>CA</u> Zip <u>94801</u>
11. Exp	perienced Sample Collector	
· Na	ame <u>Chuck Kiper</u>	
Co	ompany SEMCO	
A	ddress 1741 Leslie Street	
C	ity <u>San Mateo</u> State <u>CA</u>	Zip <u>94402</u> Phone (415)572-8033
12. Lal	boratory	
N	ame Superior Analytical	
A	ddress 1555 Burke Unit I	<b>_</b>
	ity San Francisco State	
S.	tate Certification No. 1332 & 319	
13. Ha	ve tanks or pipes leaked in the pas	t? Yes [ ] No [X]
If	yes, describe.	

14.	pescribe	methods	co be	usea	LOF	rendering	tank	inert	
	_ High pr	essure h	ot wat	er_dei	terg	ent wash.			
	_20 lbs.	per 100	<u>0 gall</u>	ons_d	ry i	ce.			

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

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

#### 15. Tank History and Sampling Information

Tai	nk	Material to	Tombies and
Capacity	Use History (see instructions)	be sampled (tank contents, soil, ground- water, etc.)	Location and Depth of Samples
200	waste oil	soil/water if encountered	2 ft. belowtand in native soil

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

	Excavated/Stockpiled Soil
Stockpiled Soil Volume (Estimated) Anywhere from approx. 25 to 100 cy	Sampling Plan Soil samples taken from the tank excavation will be collectd, 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.

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

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

Contaminant Sought	,,	or Other eparation mber	Othe	DHS, or r Analys od Numbe	sis	De	thod tecti mit	on
Waste and Use or Unknown (All analyses completed and	must be	TPH D G	X&E 826	550) 50	TPH	D	GCFID GCFID 5520	(3510
		BTX&E 8	020 or	8240	BTX&	E	602, 8260 601 c	624 d
•		ICAP or AA METHOD 827 PCB* PCP* PNA CREOSOTE	TO DET	PECT MET SOIL OR	WATER PCB PCP PNA	Cd, C TO D	r, Pb ETECI	o, Zn
* If found, a	nalyze for d	ibenzofuran	s (PCBs	s) or di	oxins	(PCP	•	٠ ٧

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

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 report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)  22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
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 report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)  22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the bepartment of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
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 report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)  22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
<ul> <li>20. Enclose Deposit (See Instructions)</li> <li>21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)</li> <li>22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.</li> <li>I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.</li> <li>I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.</li> <li>I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.</li> </ul>
21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)  22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will yold this plan if prior approval is not obtained.
Storage Tank Unauthorized Leak/Contamination Site Report form.  (see Instructions)  22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the bepartment of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
in item 22 of the instructions.  I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.  I understand that information in addition to that provided above may be needed in order to obtain an approval from the bepartment of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.  I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.
void this plan if prior approval is not obtained.
_
I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.
Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.
Signature of Contractor
Name (please type) Chuck Kiper.
Name (please type) Chuck Kiper.  Signature Much Ky
Date6-1-94
Signature of Site Owner or Operator
Val David Tay for, Trustee of the Milton H. Price
Name (please type) and Niolet G Price Revocable Trust, Trust R
Signature By Robert J. Lewis, Attorney for Trust

#### INSTRUCTIONS

#### General Instructions

- \* Three (3) copies of this plan plus attachments and deposit must be submitted to this Department.
- \* Any cutting into tanks requires local fire department approval.
- \* One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.

#### Item Specific Instructions

- 2. <u>SITE ADDRESS</u>
  Address at which closure is taking place.
- 5. <u>EPA I.D. NO. under which the tanks will be manifested</u>
  EPA I.D. numbers may be obtained from the State Department of
  Health Services, 916/324-1781.
- 6. <u>CONTRACTOR</u>
  Prime contractor for the project.

#### 10. STATE REGISTERED HAZARDOUS WASTE TRANSPORTERS/FACILITIES

- a) All residual liquids and sludges are to be removed from tanks before tanks are inerted.
- c) Tanks must be hauled as hazardous waste.
- d) This is the place where tanks will be taken for cleaning.
- 15. TANK HISTORY AND SAMPLING INFORMATION

  Use Histor This information is essential and must be accurate.

  Include that installation date, products stored in the tank, and the date when the tank was last used.

Material to be sampled - e.g. water, oil, sludge, soil, etc...

Location and depth of samples - e.g. beneath the tank a maximum of two feet below the native soil/backfill interface, side wall at the high water mark, etc.

- 17. SITE HEALTH AND SAFETY PLAN
  - A <u>site specific</u> Health and Safety plan must be submitted. We advocate the site health and safety plan include the following items, at a minimum:
  - a) The name and responsibilities of the site health and safety officer;
  - b) Identification of health and safety hazards of each work task. Include potential fire, explosion, physical, and chemical hazards;
  - c) An outline of briefings to be held before work each day to appraise employees of site health and safety hazards;
  - d) Frequency and types of air and personnel monitoring to be used - along with the environmental sampling techniques and instrumentation. Include instrumentation maintenance and calibration methods and frequencies;
  - e) Specific personal protective equipment and procedures to be used by workers to protect themselves from the identified hazards. Also state the contaminant concentrations in air or other conditions which will trigger changes in work or work habits to ensure workers are not exposed to high levels of hazardous chemicals or to other unsafe conditions;
  - f) Confined space entry procedures (if applicable);
  - g) Decontamination procedures;
  - h) Measures to be taken to secure the site, excavation and stockpiled soil during and after work hours (e.g. barricades, caution tape, fencing, trench plates, security guards, etc.);
  - i) Spill containment and emergency/contingency plan. Be sure to include emergency phone numbers, the location of the phone nearest the site, and directions to the hospital nearest the site;
  - j) Documentation that all site workers have received the appropriate OSHA approved trainings and participate in appropriate medical surveillance per 29 CFR 1910.120; and
  - k) Page for employees to sign indicating they have read and will comply with the site health and safety plan.

The safety plan must be distributed to all employees and contractors working in hazardous waste operations on site. A complete copy of the site health and safety plan along with any standard operating procedures shall be on site and accessible at all times.

. . . . . . . . . . . . . . .

NOTE: These requirements are excerpts from 29 CFR Part 1910.120, Hazardous Waste Operations and Emergency Response; Final Rule, March 6, 1989. Safety plans of certain underground tank sites may need to meet the complete requirements of this Rule.

#### 19. PLOT PLAN

The plan should consist of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale;
- b) North Arrow;
- c) Property Lines;
- d) Location of all Structures;
- e) Location of all relevant existing equipment including tanks and piping to be removed and dispensers;
- f) Streets;
- g) Underground conduits, sewers, water lines, utilities;
- h) Existing wells (drinking, monitoring, etc.);
- i) Depth to ground water; and
- j) All existing tanks and piping in addition to the ones being pulled.

#### 20. DEPOSIT

A deposit, payable to Alameda County for the amount indicated on the Alameda County Underground Storage Tank Fee Schedule, must accompany the plans.

21. Blank Unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from our office and from the San Francisco Bay Regional Water Quality Control Board (415/464-1255). Larger quantities may be obtained directly from the State Water Resources Control Board at (916) 739-2421.

#### 22. TANK CLOSURE REPORT

The tank closure report should contain the following information:

- a) General description of the closure activities;
- b) Description of tank, fittings and piping conditions. Indicate tank size and former contents; note any corrosion, pitting, holes, etc.;

- 9 -

4.00

- c) Description of the excavation itself. Include the tank and excavation depth, a log of the stratigraphic units encountered within the excavation, a description of root holes or other potential contaminant pathways, the depth to any observed ground water, descriptions and locations of stained or odor-bearing soil, and descriptions of any observed free product or sheen;
- d) Description of sampling methods;
- e) Description of any remedial measures conducted at the time of tank removal;
- f) To-scale figures showing the excavation size and depth, nearby buildings, sample locations and depths, and tank and piping locations. Include a copy of the plot plan prepared for the Tank Closure Plan under item 19;
- g) Chain of custody records;
- h) Copies of signed laboratory reports;

. - , -

- i) Copies of "TSDF to Generator" Manifests for all hazardous wastes hauled offsite (sludge, rinsate, tanks and piping, contaminated soil, etc.); and
- j) Tabulation of the volume and final destination of all nonmanifested contaminated soil hauled offsite.

- 10 -

. · ¥

# TABLE #2 RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR UNDERGROUND TANK LEAKS

<u>KECOMBANIE</u>	UNDERGROUND TANK LEAKS	
TUDDOGARRON LEAK	SOIL ANALYSIS	WATER ANALYSIS
Unknown Fuel	TPH G GCFID(5030) TPH D GCFID(3550) BTX&E 8020 or 8240 TPH AND BTX&E 8260	TPH G GCFID(5030) TPH D GCFID(3510) BTX&E 602, 624 or 8260
Leaded Gas	TPH G GCFID(5030) BTX&E 8020 OR 8240 TPH AND BTX&E 8260 TOTAL LEAD AA	TPH G GCFID(5030) BTX&E 602 or 624 TOTAL LEAD AA
	TEL DHS-LUFT EDB DHS-AB1803	TEL DHS-LUFT EDB DHS-AB1803
Unleaded Gas	TPH G GCFID(5030) BTX&E 8020 or 8240 TPH AND BTX&E 8260	TPH G GCFID(5030) BTX&E 602, 624 or 8260
Diesel, Jet Fuel and Kerosene	TPH D GCFID(3550) BTX&E 8020 or 8240 TPH AND BTX&E 8260	TPH D GCFID(3510) BTX&E 602, 624 or 8260
Fuel/Heating Oil	TPH D GCFID(3550) BTX&E 8020 or 8240 TPH AND BTX&E 8260	TPH D GCFID(3510) BTX&E 602, 624 or 8260
Chlorinated Solvents	CL HC 8010 or 8240 BTX&E 8020 or 8240 CL HC AND BTX&E 8260	CL HC 601 or 624 BTX&E 602 or 624 CL HC AND BTX&E 8260
Non-chlorinated Solvents	TPH D GCFID(3550) BTX&E 8020 or 8240 TPH AND BTX&E 8260	TPH D GCFID(3510) BTX&E 602 or 624 TPH and BTX&E 8260
Waste and Used Oil or Unknown (All analyses must be completed and submitted)	TPH G GCFID(5030) TPH D GCFID(3550) TPH AND BTX&E 8260 O & G 5520 D & F BTX&E 8020 or 8240	TPH G GCFID(5030) TPH D GCFID(3510  O & G 5520 C & F BTX&E 602, 624 or 8260
	CL HC 8010 or 8240	CL HC 601 or 624
		METALS: Cd, Cr, Pb, Zn, N OR WATER TO DETECT: PCB PCP PNA CREOSOTE

<sup>\*</sup> If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)

Reference: Tri-Regional Board Staff Recommendations for Preliminary Evaluation and Investigation of Underground Tank Sites, 10 August 1990

#### EXPLANATION FOR TABLE #2: MINIMUM VERIFICATION ANALYSIS

- 1. OTHER METHODOLOGIES are continually being developed and as methods are accepted by EPA or DHS, they also can be used.
- 2. For DRINKING WATER SOURCES, EPA recommends that the 500 series for volatile organics be used in preference to the 600 series because the detection limits are lower and the QA/QC is better.
- 3. APPROPRIATE STANDARDS for the materials stored in the tank are to be used for all analyses on Table #2. For instance, seasonally, there may be five different jet fuel mixtures to be considered.
- 4. To AVOID FALSE POSITIVE detection of benzene, benzene-free solvents are to be used.
- 5. TOTAL PETROLEUM HYDROCARBONS (TPH) as gasoline (G) and diesel (D) ranges (volatile and extractible, respectively) are to be analyzed and characterized by GCFID with a fused capillary column and prepared by EPA method 5030 (purge and trap) for volatile hydrocarbons, or extracted by sonication using 3550 methodology for extractable hydrocarbons. Fused capillary columns are preferred to packed columns; a packed column may be used as a "first cut" with "dirty" samples or once the hydrocarbons have been characterized and proper QA/QC is followed.
- 6. TETRAETHYL LEAD (TEL) analysis may be required if total lead is detected unless the determination is made that the total lead concentration is geogenic (naturally occurring).
- 7. CHLORINATED HYDROCARBONS (CL HC) AND BENZENE, TOLUENE, XYLENE AND ETHYLBENZENE (BTX&E) are analyzed in soil by EPA methods 8010 and 8020 respectively, (or 8240) and in water, 601 and 602, respectively (or 624).
- 8. OIL AND GREASE (O & G) may be used when heavy, straight chain hydrocarbons may be present. Infrared analysis by method 418.1 may also be acceptable for O & G if proper standards are used. Standard Methods" 17th Edition, 1989, has changed the 503 series to 5520.
- 9. PRACTICAL QUANTITATION REPORTING LIMITS are influenced by matrix problems and laboratory QA/QC procedures. Following are the Practical Quantitation Reporting Limits:

	SOIL PPM	WATER PPB
TPH G	1.0	50.0
TPH D	1.0	50.0
BTX&E	0.005	0.5
0 & G	50.0	5,000.0

. . . . . . . . . . . .

Based upon a Regional Board survey of Department of Health Services Certified Laboratories, the Practical Quantitation Reporting Limits are attainable by a majority of laboratories with the exception of diesel fuel in soils. The Diesel Practical Quantitation Reporting Limits, shown by the survey, are:

ROUTINE	MODIFIED PROTOCO
<pre>≤ 10 ppm (42%) ≤ 5 ppm (19%) ≤ 1 ppm (35%)</pre>	<pre>≤ 10 ppm (10%) ≤ 5 ppm (21%) ≤ 1 ppm (60%)</pre>

When the Practical Quantitation Reporting Limits are not achievable, an explanation of the problem is to be submitted on the laboratory data sheets.

- 10. LABORATORY DATA SHEETS are to be signed and submitted and include the laboratory's assessment of the condition of the samples on receipt including temperature, suitable container type, air bubbles present/absent in VOA bottles, proper preservation, etc. The sheets are to include the dates sampled, submitted, prepared for analysis, and analyzed.
- 11. IF PEAKS ARE FOUND, when running samples, that do not conform to the standard, laboratories are to report the peaks, including any unknown complex mixtures that elute at times varying from the standards. Recognizing that these mixtures may be contrary to the standard, they may not be readily identified; however, they are to be reported. At the discretion of the LIA or Regional Board the following information is to be contained in the laboratory report:

The relative retention time for the unknown peak(s) relative to \_\_\_\_ the reference peak in the standard, copies of the chromatogram(s), the type of column used, initial temperature, temperature program is C/minute, and the final temperature.

12. REPORTING LIMITS FOR TPH are: gasoline standard ≤ 20 carbon atoms, diesel and jet fuel (kerosene) standard ≤ 50 carbon atoms. It is not necessary to continue the chromatography beyond the limit, standard, or EPA/DHS method protocol (whichever time is greater).

#### **EPILOGUE**

ADDITIVES: Major oil companies are being encouraged or required by the federal government to reformulate gasoline as cleaner burning fuels to reduce air emissions. MTBE (Methyl-tertiary butyl ether), ETHANOL (ethyl alcohol), and other chemicals may be added to reformulate gasolines to increase the oxygen content in the fuel and thereby decrease undesirable emissions (about four percent with MTBE). MTBE and ethanol are, for practical purposes, soluble in water. The removal

from the water column will be difficult. Other compounds are being added by the oil companies for various purposes. The refinements for detection and analysis for all of these additives are still being worked out. If you have any questions about the methodology, please call your Regional Board representative.

LANCE COMPA





STATE OF CAUFORNIA
STATE OF CAUF



արարյանի արևարկանի արևանի անկանի անկան



CONTRACTORS STATE LICENSE BOARD

Building Quality

ISSUED 12-15-83 CERTIFIED COPY No. 445864

This license is the property of the Registrar of Contractors, is not transferable, and shall be returned to the Registrar upon demand when suspended, revoked, or invalidated for any reason. It becomes void if not renewed.

Contractor's License

Pursuant to the provisions of Chapter 9 of Division 3 of the Business and Professions Code and the Rules and Regulations of the Contractors State License Board, the Registrar of Contractors does hereby issue this license to:

SENCO+JAMES C BATEMAN FETROLEUM SERVICES INC

to engage in the business or act in the capacity of a contractor in the following classification(s):

C61 SERVICE STATION EQUIPMENT & MAINTENANCE

B GENERAL BUILDING CONTRACTOR

A GENERAL ENGINEERING CONTRACTOR

WITNESS my hand and sealed this 7TH day of AUGUST 1984.

Registrar of Contractors

Long Hamilton President

Signature of person who qualified on behalf of the licensee



STATE AND CONSUMER SERVICES AGENCY DEPARTMENT OF CONSUMER AFFAIRS

Consumer

State of Colifornia
CONTRACTORS STATE LICENSE BOARD
ACTIVE LICENSE

tanallaria 449864

EN CORP

SERVICES INC DBA SERCO

Cambridge C61/D40 B A HAZ

Excitation Data 12/31/95

