



**Peter M. Rooney**  
Secretary for  
Environmental  
Protection

# State Water Resources Control Board

**John P. Caffrey, Chairman**



**Pete Wilson**  
Governor

## Division of Clean Water Programs

2014 T Street, Suite 130 • Sacramento, California 95814 • (916) 227-0748 FAX (916) 227-4530  
Mailing Address: P.O. Box 944212 • Sacramento, California • 94244-2120  
Internet Address: <http://www.swrcb.ca.gov/~cwphome/ustc/fundhome.htm>

July 31, 1998

Mr. Scott Seery  
Alameda County EHD  
1131 Harbor Bay Pkwy, 2nd Floor  
Alameda, CA 94502-6577

**UNDERGROUND STORAGE TANK CLEANUP FUND (FUND) REQUESTS CONFIRMATION OF SITE CLOSURE FOR CLAIM NO. 3553 AT SITE ADDRESS: 1900 LEWELLING BLVD, SAN LEANDRO**

The Fund is processing this claim for closure — JOHNNY T. LIN at site address 1900 LEWELLING BLVD, SAN LEANDRO.

However, we must confirm the site has received final closure from the oversight agency before we can complete our file closure. Please send a facsimile or mail a copy of the site closure letter OR complete the following information and facsimile to my attention.

**The above referenced site met our UST corrective action standards and closure was granted on 9-5-97.**

**NO, this site has not yet met our closure standards.**

SIGNED: [Signature] DATE: 8-3-98

TITLE: Hazardous Materials Specialist

Your assistance is appreciated. If you have any questions, please call me at (916) 227-0748.

Sincerely,

[Signature]  
Deborah Cheung

Claims Closure Unit  
Underground Storage Tank Cleanup Fund Program

**California Environmental Protection Agency**

**ALAMEDA COUNTY ENVIRONMENTAL  
HEALTH SERVICES**



**ENVIRONMENTAL PROTECTION DIVISION**  
1131 Harbor Bay Parkway, Suite 250  
Alameda, CA 94502-6577  
Telephone (510) 567-6700 Fax (510) 337-9335

**FAX COVER SHEET**

DATE: 10-20, 1997

TO: Larry Fresquez

FAX # ( ) 352-5125

Total number of pages including cover sheet 2

FROM:  
**Pamela J. Evans**  
Senior Hazardous Materials Specialist

NOTE: (510) 567-6770 • Fax (510) 337-9335

Here is the closure letter to Mr. + Ms. Lin

**(SMILE) HAVE A NICE DAY  
DO SOMETHING FOR OUR ENVIRONMENT**

LOP - RECORD CHANGE REQUEST FORM

printed:  
08/29/97

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

Insp: TP

AGENCY # : 10000      SOURCE OF FUNDS: F      SUBSTANCE: 12035  
 StID : 3583      LOC: 07/01/94  
 SITE NAME: Windsor Square Auto Service      DATE REPORTED : 11/27/90  
 ADDRESS : 1900 Lewelling Blvd      DATE CONFIRMED: 09/25/90  
 CITY/ZIP : San Leandro 94579      MULTIPLE RPs : N

SITE STATUS

-----  
 CASE TYPE: S      CONTRACT STATUS: 4      PRIOR CODE:2A4      EMERGENCY RESP:  
 RP SEARCH: S      DATE COMPLETED: 06/24/93  
 PRELIMINARY ASMNT: C      DATE UNDERWAY:      DATE COMPLETED:  
 REM INVESTIGATION:      DATE UNDERWAY:      DATE COMPLETED:  
 REMEDIAL ACTION:      DATE UNDERWAY:      DATE COMPLETED:  
 POST REMED ACT MON: C      DATE UNDERWAY:      DATE COMPLETED:

ENFORCEMENT ACTION TYPE: 1      DATE ENFORCEMENT ACTION TAKEN: 06/24/93  
 LUFT FIELD MANUAL CONSID: 2  
 CASE CLOSED: Y      DATE CASE CLOSED:  
 DATE EXCAVATION STARTED : 09/25/90      REMEDIAL ACTIONS TAKEN: NT

RESPONSIBLE PARTY INFORMATION

-----  
 RP#1-CONTACT NAME: Johnny T. & Amy Lin  
 COMPANY NAME: N A  
 ADDRESS: P.O. Box 4154  
 CITY/STATE: San Leandro CA 94579

INSPECTOR VERIFICATION:

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DATA ENTRY INPUT:

Name/Address Changes Only      Case Progress Changes

ANPNPGMS \_\_\_\_\_ LOP \_\_\_\_\_ DATE \_\_\_\_\_ || LOP \_\_\_\_\_ DATE \_\_\_\_\_

*Carry  
 need to cleanup database*



EMCON ASSOCIATES

# WATER SAMPLE FIELD DATA SHEET

Rev. 2, 5/91

PROJECT NO: 0670-007, 01

SAMPLE ID: MW-8(10)

PURGED BY: K REICHELDERFER

CLIENT NAME: ARCO 601

SAMPLED BY: ↓

LOCATION: 712 LEWELLING BLVD,  
SAN LEANDRO, CA

TYPE: Ground Water  Surface Water \_\_\_\_\_ Treatment Effluent \_\_\_\_\_ Other \_\_\_\_\_

CASING DIAMETER (inches): 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4  4.5 \_\_\_\_\_ 6 \_\_\_\_\_ Other \_\_\_\_\_

CASING ELEVATION (feet/MSL):	<u>NR</u>	VOLUME IN CASING (gal.):	<u>1.21</u>
DEPTH TO WATER (feet):	<u>8.35</u>	CALCULATED PURGE (gal.):	<u>3.63</u>
DEPTH OF WELL (feet):	<u>10.2</u>	ACTUAL PURGE VOL. (gal.):	<u>2.00</u>

DATE PURGED:	<u>11-8-93</u>	Start (2400 Hr)	<u>1422</u>	End (2400 Hr)	<u>1428</u>
DATE SAMPLED:	<u>11-8-93</u>	Start (2400 Hr)	<u>1528</u>	End (2400 Hr)	<u>1556</u>

TIME (2400 Hr)	VOLUME (gal.)	pH (units)	E.C. (µmhos/cm @ 25° C)	TEMPERATURE (°F)	COLOR (visual)	TURBIDITY (visual)
<u>1425</u>	<u>1.50</u>	<u>6.81</u>	<u>1505</u>	<u>71.1</u>	<u>GREY</u>	<u>HEAVY</u>
<u>1428</u>	<u>WELL DRIED</u>	<u>DRIED</u>	<u>@ 2.00 GALLONS</u>			
<u>1457</u>	<u>RECHARGE</u>	<u>6.93</u>	<u>1607</u>	<u>70.1</u>	<u>GREY</u>	<u>MODERATE</u>
D. O. (ppm):	<u>NR</u>	ODOR:	<u>STRONG</u>		<u>NR</u>	<u>NR</u>
					(COBALT 0 - 100)	(NTU 0 - 200)

FIELD QC SAMPLES COLLECTED AT THIS WELL (i.e. FB-1, XDUP-1): NR

PURGING EQUIPMENT		SAMPLING EQUIPMENT	
<input type="checkbox"/> 2" Bladder Pump	<input type="checkbox"/> Bailer (Teflon®)	<input type="checkbox"/> 2" Bladder Pump	<input checked="" type="checkbox"/> Bailer (Teflon®)
<input type="checkbox"/> Centrifugal Pump	<input checked="" type="checkbox"/> Bailer (PVC)	<input type="checkbox"/> DDL Sampler	<input type="checkbox"/> Bailer (Stainless Steel)
<input type="checkbox"/> Submersible Pump	<input type="checkbox"/> Bailer (Stainless Steel)	<input type="checkbox"/> Dipper	<input type="checkbox"/> Submersible Pump
<input type="checkbox"/> Well Wizard™	<input type="checkbox"/> Dedicated	<input type="checkbox"/> Well Wizard™	<input type="checkbox"/> Dedicated
Other: _____		Other: _____	

WELL INTEGRITY: OK LOCK #: 3259

REMARKS: 1428 WELL DRIED @ 2.00 GALLONS  
1526 DTW 9.39

Meter Calibration: Date: 11-8-93 Time: 1227 Meter Serial #: 9203 Temperature °F: \_\_\_\_\_  
( EC 1000 \_\_\_\_\_ / \_\_\_\_\_ ) ( DI \_\_\_\_\_ ) ( pH 7 \_\_\_\_\_ / \_\_\_\_\_ ) ( pH 10 \_\_\_\_\_ / \_\_\_\_\_ ) ( pH 4 \_\_\_\_\_ / \_\_\_\_\_ )

Location of previous calibration: MW-10  
Signature: K. Reichelderfer Reviewed By: JB Page 3 of 15

LOP - RECORD CHANGE REQUEST FORM

printed:  
08/12/97

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

Insp: KT

AGENCY # : 10000      SOURCE OF FUNDS: F      SUBSTANCE: 12035  
StID : 3583      LOC: 07/01/94  
SITE NAME: Windsor Square Auto Service      DATE REPORTED : 11/27/90  
ADDRESS : 1900 Lewelling Blvd      DATE CONFIRMED: 09/25/90  
CITY/ZIP : San Leandro 94579      MULTIPLE RPs : N

SITE STATUS

CASE TYPE: S      CONTRACT STATUS: 4      PRIOR CODE:2A4      EMERGENCY RESP:  
RP SEARCH: S      DATE COMPLETED: 06/24/93  
PRELIMINARY ASMNT:      DATE UNDERWAY:      DATE COMPLETED:  
REM INVESTIGATION:      DATE UNDERWAY:      DATE COMPLETED:  
REMEDIAL ACTION:      DATE UNDERWAY:      DATE COMPLETED:  
POST REMED ACT MON:      DATE UNDERWAY:      DATE COMPLETED:

ENFORCEMENT ACTION TYPE: 1      DATE ENFORCEMENT ACTION TAKEN: 06/24/93  
LUFT FIELD MANUAL CONSID: 2  
CASE CLOSED:      DATE CASE CLOSED:  
DATE EXCAVATION STARTED : 09/25/90      REMEDIAL ACTIONS TAKEN:

RESPONSIBLE PARTY INFORMATION

RP#1-CONTACT NAME: Johnny T. & Amy Lin  
COMPANY NAME: N A  
ADDRESS: P.O. Box 4154  
CITY/STATE: San Leandro CA 94579

TABLE 2  
CUMULATIVE LABORATORY ANALYTICAL RESULTS OF GROUNDWATER SAMPLES  
ARCO Station 601  
712 Lewelling Boulevard  
San Leandro, California  
(page 3 of 5)

Sample	TPHg	TPHd	B	T	E	X	TOG	BNAs	VOCs	Cd	Cr	Pb	Ni	Zn
<u>MW-6 (con't)</u>														
02/16/93	65,000	NA	14,000	3,500	1,300	6,100	NA	NA	NA	NA	NA	NA	NA	NA
05/13/93	36,000	NA	8,200	870	1,000	5,200	NA	NA	NA	NA	NA	NA	NA	NA
08/17/93	Not sampled—dry													
11/08/93	Not sampled—dry													
<u>MW-7</u>														
06/10/91	Not sampled—dry													
10/10/91	Not sampled—dry													
03/23/92	270	NA	10	0.5	3.0	13	NA	NA	NA	NA	NA	NA	NA	NA
06/08/92	Not sampled—residual water													
09/15/92	Not sampled—dry													
11/16/92	Not sampled—dry													
02/16/93	120	NA	3.6	<0.5	<0.5	1.2	NA	NA	NA	NA	NA	NA	NA	NA
05/13/93	<50	NA	0.8	<0.5	<0.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA
08/17/93	Not sampled—dry													
11/08/93	Not sampled—dry													
<u>MW-8</u>														
06/10/91	5,800	NA	73	7.2	150	21	<5,000	NA	NA	NA	NA	NA	NA	NA
10/10/91	2,800	NA	31	6.1	4.5	3.9	NA	NA	NA	NA	NA	NA	NA	NA
03/23/92	8,000	NA	18	<5.0**	320	42	NA	NA	ND	NA	NA	NA	NA	NA
			(23**)	(<5.0**)	(450**)	(23**)								
06/08/92	4,000	NA	<10**	<10**	110	<10**	NA	NA	NA	NA	NA	NA	NA	NA
09/15/92	4,200	460***	6.4	<5*	120	<5*	NA	6*	ND	ND	59	18	78	128
11/16/92	2,600	1,100***	4.0	<2.5**	21	5.2	1,200	32*	ND	7	42	20	69	123
02/16/93	8,700	5,300***	<5**	<5**	200	<5**	150,000	730*	ND	<3	7	4	24	54
								130 <sup>b</sup>						
05/13/93	2,300	2,300***	<5**	<5**	42	<5**	2,000	97*	ND	<3	17	10	31	49
								20 <sup>b</sup>						
08/17/93	1,700	1,000***	1.8	<1.3****	16	1.2	1,200	26*	ND	<5	16	7	<40	180
11/08/93	1,200	<1000	2.4	<1**	19	2.3	4,200	20*	ND	<5	50	25	60	100
								19*						
<u>MW-9</u>														
06/11/93	<50	NA	<0.5	<0.5	<0.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA
08/17/93	<50	NA	<0.5	<0.5	<0.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA
11/08/93	<50	NA	<0.5	<0.5	<0.5	<0.5	NA	NA	NA	NA	NA	NA	NA	NA

See notes on page 15 of 15

8 ~~10~~ Aug 97

Comments on Solvents found at 1900 Lewelling Blvd, San Leandro, CA - 94579

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Tom,

You gave me the closure summary for Windsor Square Auto Repair after it was signed off by Scott and Barney, since they had some residual chlorinated hydrocarbons like 1,2 DCE at 25 ppb and 1,1 DCA at 9.7 ppb in the last quarter in MW-2. Since MCL's, ie drinking water standard is not appropriate for areas like San Leandro, where water at present is not used for drinking, I used the ASTM RBCA Tier 1 equations, to come up with acceptable risk based levels for both the solvents mentions above.

The RBSL for the exposure route " ingestion of water" for 1,2 DCE and 1,1 DCA are 360 ppb and 3600 ppb respectively. Based on the exposure route" indoor inhalation from soils" the RBSL for 1,2 DCE and 1,1 DCA are 400 ppb and 49,000 ppb respectively.

The high cleanup numbers are probably because both the solvents are non-carcinogens. Based on the last quarter data, the solvents do not appear to be a problem

Madhulla



Environmental Services • General Engineering Contractor • Hazardous • Lic. #487537

FAX TRANSMITTAL

RE: DOCUMENTATION FOR WINDSOR SQUARE  
TO: DALE KLETTKE  
COMPANY: ALAMEDA COUNTY HEALTH  
FROM: MERLIN BOWEN

MESSAGE: FOLLOWING ARE MANIFESTS FOR MATERIAL  
TAKEN FROM WINDSOR SITE TO FORWARD  
LANDFILL.

MERLIN

DATE: 3/1/96

NUMBER OF PAGES TRANSMITTED: 7





# FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206  
(209) 466-4482 • FAX (209) 465-0631

004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALTA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006970	D94
WEIGHMASTER		
DATE IN		TIME IN
06/23/95		07:42
DATE OUT		TIME OUT
06/23/95		07:43

VEHICLE	ROLL OFF
VCI 0227	

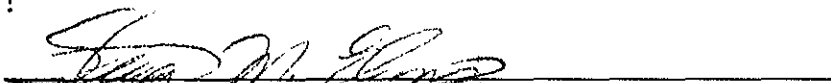
REFERENCE	ORIGIN
CMM 4304	JOHNNY TSU LIN

QTY	DESCRIPTION	AMOUNT
10.00	Class II Soil per CU YD	

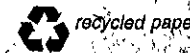
Manifest # 50203  
Generator JOHNNY TSU LIN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X



NET AMOUNT
TENDERED
CHANGE



JOB ACCEPTANCE NO.

2MM-4304

TO BE COMPLETED BY THE GENERATOR

GENERATOR John Lin

MAILING ADDRESS  
1900 LEWELLING BLVD

CITY, STATE, ZIP  
SAN LEANDRO, CA, 94577

PHONE  
(510) 568-1234

CONTACT PERSON  
MERLIN BOWEN

SIGNATURE OF AUTHORIZED AGENT / TITLE  
\* Merlin Bowen DATE  
6-23-95

REQUIRED PERSONAL PROTECTIVE EQUIPMENT

GLOVES  GOGGLES  RESPIRATOR  HARD HAT

TY-VEK  OTHER

SPECIAL HANDLING PROCEDURES:

WASTE TYPE

TREATMENT SOIL  SLUDGE

DISPOSAL SOIL  NON-FRIABLE ASBESTOS

CONSTRUCTION SOIL  WOOD

OTHER

RECEIVING FACILITY

**FORWARD INC. LANDFILL**  
9999 SOUTH AUSTIN ROAD  
MANTECA, CALIFORNIA 95336  
(209) 982-4298 PHONE  
(209) 982-1009 FAX

GENERATING FACILITY

1900 LEWELLING BLVD  
SAN LEANDRO, CA. 94577

TRANSPORTER  
HAULER MUST COMPLETE

NAME V.C.I. OF CALIFORNIA

ADDRESS 753 PERALTA AVE.

CITY, STATE, ZIP  
SAN LEANDRO, CA. 94577

PHONE  
510 568-1234

SIGNATURE OF AUTHORIZED AGENT OR DRIVER  
\* Steven M. Elmer DATE  
6-23-95

NOTES:

TRUCK NUMBER  
0227

END DUMP  BOTTOM DUMP  TRANSFER

ROLL-OFF(S)  FLAT-BED  VAN  DRUMS

FACILITY REQUIREMENTS

**FORWARD INC. LANDFILL**

Forward shall have no obligation to accept the waste if weather or other conditions impair the safe and effective disposal of the waste or if the waste impairs the safe and effective operation of the Landfill. Forward shall use reasonable efforts to promptly notify Disposer of its inability to accept the waste for any reason. If Forward's refusal to accept the waste is based on weather or other site conditions, Forward shall notify the Disposer when site conditions are expected to change such that Forward will be able to accept the waste.

REMARKS

FACILITY TICKET NUMBER

SIGNATURE OF AUTHORIZED AGENT  
[Signature] DATE  
6-23-95

CUBIC YARDS

DISPOSAL METHOD:	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL					
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

SCHEDULING MUST BE MADE PRIOR TO 4:00 PM THE DAY PRIOR TO EXPECTED ARRIVAL • ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298



# FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206  
(209) 466-4482 • FAX (209) 465-0631

004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALTA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006999	D94
WEIGHMASTER		
DATE IN		TIME IN
06/23/95		14:37
DATE OUT		TIME OUT
06/23/95		14:38

VEHICLE	ROLL OFF
VCI 0227	

REFERENCE	ORIGIN
CMM-4304	JOHNNY TSU LIN

--	--	--

QTY	DESCRIPTION	AMOUNT
10.00	Class II Soil per CU YD	

Manifest # 36841  
Generator JOHNNY TSU LIN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X

*John M. Elms*

NET AMOUNT
TENDERED
CHANGE



JOB ACCEPTANCE NO. XXXXXXXXXX

TO BE COMPLETED BY THE GENERATOR

TRANSPORTER HAULER MUST COMPLETE

FACILITY REQUIREMENTS

**GENERATOR** John Lin

**MAILING ADDRESS**  
1900 LEWELING BLVD

**CITY STATE ZIP**  
SAN LEANDRO, CA. 94577

**PHONE**  
510 568-1234

**CONTACT PERSON**  
MEELIN BOWEN

**SIGNATURE OF AUTHORIZED AGENT / TITLE** **DATE**  
\* Meelin Bowen 6-23-95

**REQUIRED PERSONAL PROTECTIVE EQUIPMENT**

GLOVES  GOGGLES  RESPIRATOR  HARD HAT

TY-VEK  OTHER

**SPECIAL HANDLING PROCEDURES:**

**WASTE TYPE**

TREATMENT SOIL  
 DISPOSAL SOIL  
 CONSTRUCTION SOIL

SLUDGE  
 NON-FRIABLE ASBESTOS  
 WOOD  
 ASH  
 OTHER

**RECEIVING FACILITY**

**FORWARD INC. LANDFILL**  
9999 SOUTH AUSTIN ROAD  
MANTECA, CALIFORNIA 95336  
(209) 982-4298 PHONE  
(209) 982-1009 FAX

**GENERATING FACILITY**

**NAME** VCI of CALIFORNIA

**ADDRESS**  
153 PERALTA AVE

**CITY STATE ZIP**  
SAN LEANDRO CA. 94577

**PHONE**  
510 568-1234

**SIGNATURE OF AUTHORIZED AGENT OR DRIVER** **DATE**  
\* Steve M. G... 6-23-95

**NOTES:**

**TRUCK NUMBER**  
0227

**END DUMP**  **BOTTOM DUMP**  **TRANSFER**

**ROLL OFF(S)**  **FLAT-BED**  **VAN**  **DRUMS**

**FORWARD INC. LANDFILL**

Forward shall have no obligation to accept the waste if weather or other conditions impair the safe and effective disposal of the waste or if the waste impairs the safe and effective operation of the Landfill. Forward shall use reasonable efforts to promptly notify Disposer of its inability to accept the waste for any reason. If Forward's refusal to accept the waste is based on weather or other site conditions, Forward shall notify the Disposer when site conditions are expected to change such that Forward will be able to accept the waste.

**REMARKS**

**FACILITY TICKET NUMBER**

**SIGNATURE OF AUTHORIZED AGENT** **DATE**  
\* [Signature] 6-23-95

**CUBIC YARDS**  
10

DISPOSAL METHOD	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL					
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL. ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298



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004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALTA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006940	D94
WEIGHMASTER		
DATE IN		TIME IN
06/22/95		10:04
DATE OUT		TIME OUT
06/22/95		10:06

VEHICLE	ROLL OFF
VCI 0227	

REFERENCE	ORIGIN
CMM-4304	JOHNNY TSU LIN

--	--	--

QTY	DESCRIPTION	AMOUNT
10.00	Class II Soil per CU YD	

Manifest # 50201  
Generator JOHNNY TSU LIN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X \_\_\_\_\_

NET AMOUNT
TENDERED
CHANGE





NON-HAZARDOUS WASTE MANIFEST  
WASTE TREATMENT AND DISPOSAL FACILITY

JOB ACCEPTANCE NO.

CMM 4304

TO BE COMPLETED BY THE GENERATOR

GENERATOR John Lin

MAILING ADDRESS 1900 Lewelling Blvd

CITY, STATE, ZIP SAN LEANDRO, CA. 94577

PHONE 510 568-1234

CONTACT PERSON MERLIN BONEN

SIGNATURE OF AUTHORIZED AGENT / TITLE \* Merlin Bonen DATE 6-22-95

REQUIRED PERSONAL PROTECTIVE EQUIPMENT

GLOVES  GOGGLES  RESPIRATOR  HARD HAT

TY-VEK  OTHER

SPECIAL HANDLING PROCEDURES:

WASTE TYPE

TREATMENT SOIL  SLUDGE

DISPOSAL SOIL  NON-FRIABLE ASBESTOS

CONSTRUCTION SOIL  WOOD

OTHER

RECEIVING FACILITY

**FORWARD INC. LANDFILL**

**9999 SOUTH AUSTIN ROAD**

**MANTECA, CALIFORNIA 95336**

**(209) 982-4298 PHONE**

**(209) 982-1009 FAX**

GENERATING FACILITY

1900 Lewelling Blvd

TRANSPORTER  
HAULER MUST COMPLETE

NAME V.C.I of CALIFORNIA

ADDRESS 753 PERALTA AVE.

CITY, STATE, ZIP SAN LEANDRO, CA. 94577

PHONE 510 568-1234

SIGNATURE OF AUTHORIZED AGENT OR DRIVER \* Juan M. Gomez DATE 6-22-95

NOTES:

TRUCK NUMBER 0227

END DUMP  BOTTOM DUMP  TRANSFER

ROLL-OFF(S)  FLAT-BED  VAN  DRUMS

FACILITY REQUIREMENTS

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REMARKS

FACILITY TICKET NUMBER

SIGNATURE OF AUTHORIZED AGENT \* [Signature] DATE 6-22-95

CUBIC YARDS 10

DISPOSAL METHOD	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL	<input checked="" type="checkbox"/>				
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL • ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL • ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298

MANIFEST # 50201



# FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206  
(209) 466-4482 • FAX (209) 465-0631

004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALTA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006951	D94
<b>WEIGHMASTER</b>		
<b>DATE IN</b>		<b>TIME IN</b>
06/22/95		13:14
<b>DATE OUT</b>		<b>TIME OUT</b>
06/22/95		13:17

VEHICLE	ROLL OFF
VCI 0227	

REFERENCE	ORIGIN
CMM-4304	JOHNNY TSU LIN

--

QTY	DESCRIPTION	AMOUNT
10.00	Class II Soil per CU YD	

Manifest # 50202  
Generator JOHNNY TSU LIN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X

<b>NET AMOUNT</b>
<b>TENDERED</b>
<b>CHANGE</b>





NON-HAZARDOUS WASTE MANIFEST  
WASTE TREATMENT AND DISPOSAL FACILITY

JOB ACCEPTANCE NO.

**CAM-4364**

TO BE COMPLETED BY THE GENERATOR

GENERATOR **John Lin**

MAILING ADDRESS  
**1900 Lewelling Blvd**

CITY, STATE, ZIP  
**SAN LEANDRO, CA 94577**

PHONE  
**510 568-1234**

CONTACT PERSON  
**MERLIN BOWEN**

SIGNATURE OF AUTHORIZED AGENT / TITLE  
**\* Merlin Bowen**

DATE  
**6-22-95**

REQUIRED PERSONAL PROTECTIVE EQUIPMENT

GLOVES  GOGGLES  RESPIRATOR  HARD HAT

TY-VEK  OTHER

SPECIAL HANDLING PROCEDURES:

WASTE TYPE

TREATMENT SOIL  SLUDGE

DISPOSAL SOIL  NON-FRIABLE ASBESTOS

CONSTRUCTION SOIL  WOOD

OTHER  ASH

RECEIVING FACILITY

**FORWARD INC. LANDFILL**

**9999 SOUTH AUSTIN ROAD**

**MANTECA, CALIFORNIA 95336**

**(209) 982-4298 PHONE**

**(209) 982-1009 FAX**

GENERATING FACILITY

**1900 LEWELLING BLVD**

**SAN LEANDRO, CA.**

TRANSPORTER  
HAULER MUST COMPLETE

NAME **V.C.I. OF CALIFORNIA**

ADDRESS  
**753 PERALTA AVE.**

CITY, STATE, ZIP  
**SAN LEANDRO, CA. 94577**

PHONE  
**510 568-1234**

SIGNATURE OF AUTHORIZED AGENT OR DRIVER  
**\* Edward M. Evans**

DATE  
**6-22-95**

NOTES:

TRUCK NUMBER

END DUMP  BOTTOM DUMP  TRANSFER

ROLL-OFF(S)  FLAT-BED  VAN  DRUMS

FACILITY REQUIREMENTS

**FORWARD INC. LANDFILL**

Forward shall have no obligation to accept the waste if weather or other conditions impair the safe and effective disposal of the waste or if the waste impairs the safe and effective operation of the Landfill. Forward shall use reasonable efforts to promptly notify Disposer of its inability to accept the waste for any reason. If Forward's refusal to accept the waste is based on weather or other site conditions, Forward shall notify the Disposer when site conditions are expected to change such that Forward will be able to accept the waste.

REMARKS

FACILITY TICKET NUMBER

SIGNATURE OF AUTHORIZED AGENT  
**\* [Signature]**

DATE  
**6-22-95**

CUBIC YARDS  
**10**

DISPOSAL METHOD:	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL	X				
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL. ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298

MANIFEST **50202**





# FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206  
(209) 466-4482 • FAX (209) 465-0631

004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALTA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006922	D94
WEIGHMASTER		
DATE IN		TIME IN
06/21/95		15:33
DATE OUT		TIME OUT
06/21/95		15:34

VEHICLE	ROLL OFF
VCI 0227	

REFERENCE	ORIGIN
GMM-4304	JOHNNY TSU LIN

--	--	--

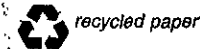
QTY	DESCRIPTION	AMOUNT
10.00	Class II Soil per CU YD	

Manifest # 50200  
Generator JOHNNY TSU LIN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X *Merlin Bowen*

NET AMOUNT
TENDERED
CHANGE





NON-HAZARDOUS WASTE MANIFEST  
WASTE TREATMENT AND DISPOSAL FACILITY

JOB ACCEPTANCE NO.

CMM-4304

TO BE COMPLETED BY THE GENERATOR

GENERATOR  
 John Lin  
 MAILING ADDRESS  
 1900 LEWELLING BLVD  
 CITY, STATE, ZIP  
 SAN LEANDRO, CA. 94577  
 PHONE  
 510 568-1234  
 CONTACT PERSON  
 MERLIN BOWEN  
 SIGNATURE OF AUTHORIZED AGENT / TITLE  
 \* Merlin Bowen  
 DATE  
 6/21/95

REQUIRED PERSONAL PROTECTIVE EQUIPMENT  
 GLOVES  GOGGLES  RESPIRATOR  HARD HAT  
 TY-VEK  OTHER

SPECIAL HANDLING PROCEDURES:

WASTE TYPE  
 TREATMENT SOIL  
 DISPOSAL SOIL  
 CONSTRUCTION SOIL  
 SLUDGE  
 NON-FRIABLE ASBESTOS  
 WOOD  
 ASH  
 OTHER

RECEIVING FACILITY  
 FORWARD INC. LANDFILL  
 9999 SOUTH AUSTIN ROAD  
 MANTECA, CALIFORNIA 95336  
 (209) 982-4298 PHONE  
 (209) 982-1009 FAX

GENERATING FACILITY  
 1900 LEWELLING BLVD

TRANSPORTER  
HAULER MUST COMPLETE

NAME  
 VCI OF CALIFORNIA  
 ADDRESS  
 753 PERALTA AVE.  
 CITY, STATE, ZIP  
 SAN LEANDRO, CA. 94577  
 PHONE  
 510 568-1234  
 SIGNATURE OF AUTHORIZED AGENT OR DRIVER  
 \* Steven M. Elms  
 DATE  
 6/21/95

NOTES:  
 TRUCK NUMBER  
 0227  
 10 wheeler

END DUMP  BOTTOM DUMP  TRANSFER   
 ROLL-OFF(S)  FLAT-BED  VAN  DRUMS

FACILITY REQUIREMENTS

**FORWARD INC. LANDFILL**  
 Forward shall have no obligation to accept the waste if weather or other conditions impair the safe and effective disposal of the waste or if the waste impairs the safe and effective operation of the Landfill. Forward shall use reasonable efforts to promptly notify Disposer of its inability to accept the waste for any reason. If Forward's refusal to accept the waste is based on weather or other site conditions, Forward shall notify the Disposer when site conditions are expected to change such that Forward will be able to accept the waste.  
 REMARKS  
 FACILITY TICKET NUMBER  
 SIGNATURE OF AUTHORIZED AGENT  
 \* Steven M. Elms  
 DATE  
 6-21-95

DISPOSAL METHOD:	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL	X				
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

CUBIC YARDS  
 10

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL • ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298

MANIFEST # 50200



# FORWARD INCORPORATED

P.O. BOX 6336 • STOCKTON, CA 95206  
(209) 466-4482 • FAX (209) 465-0631

004304  
V.C.I. OF CALIFORNIA  
MERLIN BOWEN  
753 PERALIA AVE  
SAN LEANDRO, CA 94579

SITE	TICKET	GRID
01	006921	D94
WEIGHMASTER		
DATE IN	TIME IN	
06/21/95	15:32	
DATE OUT	TIME OUT	
06/21/95	15:33	

VEHICLE	ROLL OFF
VCI 0227	

REFERENCE	ORIGIN
CMM-4304	JOHNNY TSU LJN

--

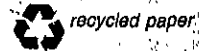
QTY	DESCRIPTION	AMOUNT
10.00	Class 11 Soil per CU YD	

Generator JOHNNY TSU LJN

Schedule 24 hours in advance directly with the landfill.  
Call (209)982-4298 to schedule.  
Drive Safely!!

SIGNATURE X

NET AMOUNT
TENDERED
CHANGE





# FORWARD INCORPORATED

## NON-HAZARDOUS WASTE MANIFEST WASTE TREATMENT AND DISPOSAL FACILITY

JOB ACCEPTANCE NO.

CMM - 4304

TO BE COMPLETED BY THE GENERATOR

GENERATOR John Lin  
 MAILING ADDRESS 1900 LEWELLING BLVD  
 CITY, STATE, ZIP SAN LEANDRO, CA 94577  
 PHONE 510 568-1234  
 CONTACT PERSON Merlin Bowen  
 SIGNATURE OF AUTHORIZED AGENT / TITLE \* Merlin Bowen DATE 6/21/95

REQUIRED PERSONAL PROTECTIVE EQUIPMENT  
 GLOVES  GOGGLES  RESPIRATOR  HARD HAT  
 TY-VEK  OTHER

SPECIAL HANDLING PROCEDURES:

WASTE TYPE

<input type="checkbox"/> TREATMENT SOIL	<input type="checkbox"/> SLUDGE
<input type="checkbox"/> DISPOSAL SOIL	<input type="checkbox"/> NON-FRIABLE ASBESTOS
<input type="checkbox"/> CONSTRUCTION SOIL	<input type="checkbox"/> WOOD
	<input type="checkbox"/> ASH
	<input type="checkbox"/> OTHER

RECEIVING FACILITY

FORWARD INC. LANDFILL  
 9999 SOUTH AUSTIN ROAD  
 MANTECA, CALIFORNIA 95336  
 (209) 982-4298 PHONE  
 (209) 982-1009 FAX

GENERATING FACILITY

TRANSPORTER  
HAULER MUST COMPLETE

NAME ICI OF CALIFORNIA  
 ADDRESS 753 PERALTA AVE.  
 CITY, STATE, ZIP SAN LEANDRO, CA 94577  
 PHONE 510 568-1234  
 SIGNATURE OF AUTHORIZED AGENT OR DRIVER \* Stan M. Elmer DATE 6/21/95

NOTES:

TRUCK NUMBER 0227

END DUMP <input type="checkbox"/>	BOTTOM DUMP <input type="checkbox"/>	TRANSFER <input type="checkbox"/>
ROLL-OFF(S) <input type="checkbox"/>	FLAT-BED <input type="checkbox"/>	VAN <input type="checkbox"/>
		DRUMS <input type="checkbox"/>

FACILITY REQUIREMENTS

**FORWARD INC. LANDFILL**

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REMARKS:

FACILITY TICKET NUMBER

SIGNATURE OF AUTHORIZED AGENT \* [Signature] DATE 6-21-95

CUBIC YARDS 10

DISPOSAL METHOD:	(TO BE COMPLETED BY FORWARD)				
	DISPOSE	BIO	AERATE	STOCKPILE	OTHER
<input checked="" type="checkbox"/> SOIL	X				
<input type="checkbox"/> SLUDGE					
<input type="checkbox"/> NON-FRIABLE ASBESTOS					
<input type="checkbox"/> WOOD					
<input type="checkbox"/> ASH					
<input type="checkbox"/> OTHER					

SCHEDULING MUST BE MADE PRIOR TO 4:00 P.M. THE DAY PRIOR TO EXPECTED ARRIVAL • ANY UNSCHEDULED LOADS ARE SUBJECT TO REFUSAL UPON ARRIVAL. ONGOING DAILY DELIVERIES MUST BE SCHEDULED WITH THE LANDFILL THE DAY BEFORE. TO SCHEDULE CALL (209) 982-4298

MANIFEST # 55605

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Assistant Agency Director

STID 3583

Alameda County CC 4580  
Health Care Services Agency  
Dept. Of Environmental Health  
1131 Harbor Bay Pkwy 2nd Flr.  
Alameda, CA 94502-6577

September 23, 1994

Johnny T. Lin  
Windsor Square Auto Repair  
P.O. Box 4154  
San Leandro, CA 94579

RE: WINDSOR SQUARE AUTO REPAIR, 1900 LEWELLING BOULEVARD, SAN  
LEANDRO

Dear Mr. Lin:

This office is in receipt and has completed review of the August 17, 1994 Century West Engineering Corporation (CWEC) Report of Soil and Ground Water Investigation. The cited report documents the advancement of six (6) soil borings, with the subsequent conversion of five (5) into ground water monitoring wells.

At this time please adhere to the following sampling, monitoring, and reporting schedule:

- o Ground water samples are to be collected from each well following a **quarterly** schedule, beginning the 4th quarter of 1994.

All samples are to be analyzed for total petroleum hydrocarbons as gasoline (TPH-G), and the aromatic fuel constituents benzene, toluene, ethylbenzene, and total xylene isomers (BTEX).

Samples collected from MW-2 are additionally to be analyzed for halogenated volatile organic compounds (HVOC) and semi-volatile organic compounds (SVOC). [Note: Continued sampling for HVOC and SVOC will be dependent upon subsequent analytical results.]

- o Ground water elevations are to be monitored **quarterly**.
- o Technical reports are to be submitted **quarterly** until this case qualifies for site closure.

Mr. Lin  
RE: 1900 Lewelling Blvd.  
September 23, 1994  
Page 2 of 2

The referenced quarterly technical reports must describe the status of the investigation and include, among other elements, the following:

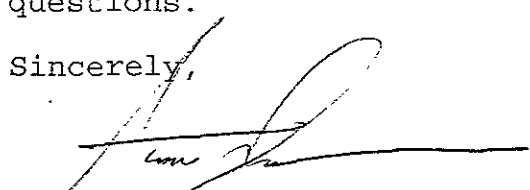
- o Details and results of all work performed during the designated reporting period: records of field observations and data, boring and well construction logs, water level data, chain-of-custody forms, laboratory results for all samples collected and analyzed (including QA/QC data), tabulations of free product thicknesses and dissolved fractions, etc.
- o Status of ground water contamination and characterization
- o Interpretation of results: water level contour maps showing gradients, free and dissolved product plume definition maps for each target compound, geologic cross sections, etc.
- o Recommendations for additional work

All reports must be submitted under seal of a California-registered geologist or civil engineer with the appropriate environmental background.

As was previously indicated in correspondence from this office dated April 11, 1994, please notify this office, by way of submittal of transport and disposal receipts, when the bio-treated soil has been properly disposed.

I may be reached at 510/567-6783, or -6700, should you have any questions.

Sincerely,



Scott O. Seery, CHMM  
Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Director, Environmental Services  
Gil Jensen, Alameda County District Attorney's Office  
Mike Bakaldin, San Leandro Fire Department  
Donna Turcotte, SWRCB  
Robert Bogar, Centurywest Engineering Corp.  
7950 Dublin Blvd., Ste. 203  
Dublin, CA 94568

## STATE WATER RESOURCES CONTROL BOARD

DIVISION OF CLEAN WATER PROGRAMS

2014 T STREET, SUITE 130

P.O. BOX 944212

SACRAMENTO, CALIFORNIA 94244-2120

916/227-4307

916/227-4530 FAX

File  
JUL 21 1994

J. T. Lin  
P. O. Box 4154  
San Leandro, CA 94579

UNDERGROUND STORAGE TANK CLEANUP FUND, CLAIM NO. 003553, FOR SITE ADDRESS: 1900 Lewelling Blvd.,  
San Leandro

The State Water Resources Control Board (SWRCB) takes pleasure in issuing the enclosed Letter of Commitment in an amount not to exceed \$20,000. This Letter of Commitment is based upon our review of the corrective action costs incurred to date and your application received on January 17, 1992 and may be modified by the SWRCB in writing by an amended Letter of Commitment.

The SWRCB will take steps to withdraw this Letter of Commitment after 90 calendar days from the date of this transmittal letter unless you proceed with due diligence with your cleanup effort. This means that you must take positive, concrete steps to ensure that corrective action is proceeding with all due speed. For example, if you have not started your cleanup effort, you must obtain three bids and sign a contract with one of these bidders within 90 calendar days. If your cleanup effort has already started and was delayed, you must resume the expenditure of funds to ensure that your cleanup is proceeding in an expeditious manner. You are reminded that you must comply with all regulatory agency time schedules and requirements. We constantly review the status of all active claims, and failure to proceed with due diligence will be grounds for withdrawal of this Letter of Commitment.

You should read the terms and conditions listed in the Letter of Commitment. Also enclosed you will find:

- A "Reimbursement Request Instructions" package. You should retain this package for future reimbursement requests. Among other information, the package includes instructions for completion of the "Reimbursement Request" form and the "Spreadsheet". These instructions must be followed when seeking reimbursement for corrective action costs incurred after January 1, 1988. Included in these instructions are samples of Reimbursement Request forms and completed Spreadsheets. Within the package also included are:
  - A "Bid Summary Sheet" to document data on bids received.
  - Recommended Minimum Invoice Cost Breakdown.
  - A "Certification of Non-Recovery From Other Sources" which must be returned before any reimbursements can be made.
- "Reimbursement Request" forms which you must use to request reimbursement of costs incurred.
- "Spreadsheet" forms which you must use in conjunction with your Reimbursement Request.
- "Vendor Data Record" (Std. Form 204) which must be completed and returned with your first Reimbursement Request.

If you have any questions regarding the Letter of Commitment or the Reimbursement Request package, please contact Donna L. Turcotte at (916) 227-4532.

Sincerely,

Dave Deaner, Manager  
Underground Storage Tank  
Cleanup Fund Program

Enclosures

cc: California Regional Water Quality  
Control Board, San Francisco Bay Region  
Attn: Steve Morse  
2101 Webster Street, Suite 500  
Oakland, CA 94612

✓ Alameda County EHD  
Attn: Ed Howell  
80 Swan Way, Room 200  
Oakland, CA 94621

# LETTER OF COMMITMENT FOR REIMBURSEMENT OF COSTS

CLAIM NO: 003553

AMENDMENT NO: 0

CLAIMANT: J. T. Lin

BALANCE FORWARD: \$0

CO-PAYEE: None

THIS AMOUNT: \$20,000

CLAIMANT ADDRESS: P. O. Box 4154  
San Leandro, CA 94579

NEW BALANCE: \$20,000

TAX ID / SSA NO.: 555-02-5540

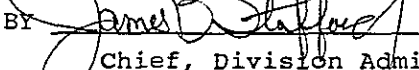
Subject to availability of funds, the State Water Resources Control Board (SWRCB) agrees to reimburse J. T. Lin (Claimant) for eligible corrective action costs at Windsor Square 1900 Lewelling Blvd., San Leandro (Site). The commitment reflected by this Letter is subject to all of the following terms and conditions:

1. Reimbursement shall not exceed \$20,000 unless this amount is subsequently modified in writing by an amended Letter of Commitment.
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 SWRCB, the SWRCB 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 Clean Water Programs.
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 SWRCB. 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 SWRCB's consent.
8. This Letter of Commitment may be withdrawn at any time by the SWRCB if completion of corrective action is not performed with reasonable diligence.

IN WITNESS WHEREOF, this Letter of Commitment has been issued by the SWRCB this 1st day of July, 1994.

STATE WATER RESOURCES CONTROL BOARD

BY   
\_\_\_\_\_  
Manager, Underground Storage Tank Cleanup Fund Program

BY   
\_\_\_\_\_  
Chief, Division Administrative Services

STATE USE :  
CALSTARS CODING :  
0550 - 569.02 - 30530

\$ \_\_\_\_\_





**centurywest**  
ENGINEERING CORPORATION

For FAX Transmittal

June 22, 1994

Mr. Scott Seery  
UST Local Oversight Program  
Alameda County Health Agency  
80 Swan Way, Room 350  
Oakland, CA 94621

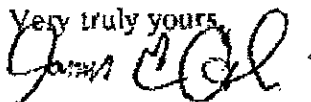
Subject: Notification of Scheduled Well Installation Activities  
Windsor Square Auto Repair UST Site  
1900 Lewelling Drive  
San Leandro, California  
CWEC 20549-001-01  
Alameda County Site ID 3583

Dear Mr. Seery:

In accordance with the approved workplan, Century West Engineering is currently scheduled to conduct well installation activities on Monday and Tuesday, June 27 and 28, 1994. On Wednesday, June 22, 1994, Century West Engineering conducted the following activities: (1) Marked each of the five well locations using white paint (per USA requirements); (2) Notified Underground Services Alert (USA request number 197191); and (3) Submitted Well Permit Application to Alameda County Zone 7 (verbally approved by Mr. Wyman Hong on June 23, 1994). We are scheduled to conduct an underground utilities survey on Saturday, June 25, 1994, and Exploration Geoservices, a State-licensed drilling contractor, is scheduled to begin drilling activities on Monday, June 27, 1994.

As we discussed during our phone conversation on Tuesday, June 21, it is important that Ms. Blessey Torres of the State Water Quality Control Board receive a Notice of Compliance from you before July 1, 1994 so that Mr. Lin can retain his ranking on the UST Cleanup Fund list. We hope that you will help us to meet this deadline, and we look forward to working with you on this important project.

Very truly yours,

  
James E. Gribi  
Registered Geologist  
California No. 5843

JJ-G:cc

c Blessey Torres, SWQCB  
Johnny Lin



LEADING THROUGH EFFECTIVE SOLUTIONS

7950 Dublin Blvd., Suite 203 Dublin, California 94568 Phone: (510) 551-7774 FAX: (510) 551-7776

CENTURY WEST  ENGINEERING

7950 Dublin Boulevard Suite 203  
Dublin, California 94568  
Phone: (510) 551-7774  
Fax: (510) 551-7776

Engineers and Scientists

**FACSIMILE TRANSMITTAL**

Date: 6/23/94 File No.: 569-4757

To: Mr Scott Seery  
Alameda County

From: Jim Gribi

FAX (510) 551-7776

Number of Pages (including this transmittal): 2

Comments:

Drilling schedule per our phone  
conversation on Tuesday.

Thx! -Jim



**STATE WATER RESOURCES CONTROL BOARD**

DIVISION OF CLEAN WATER PROGRAMS  
2014 T STREET, SUITE 180  
P.O. BOX 944212  
SACRAMENTO, CALIFORNIA 94244-2120  
(916) 227-4413  
(916) 227-4530 (FAX)



TRANSMITTAL OF FAX MATERIAL

Date: 4-18-94

To: Scott Selvy

Fax # (510) 569-4757

RE: Johnny T. Lin  
Claim # 3553  
STID # 3583

From: Blessy Torres  
Division of Clean Water Programs  
(916) 227-4535

\*\*\*\*\*

No. of pages 2 (including this sheet)

- For your information
- Per your request
- For your review and comments

REMARKS:

Please sign the attached and return. Thanks for  
sending out the 90-day Hr.

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

STID 3583

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

April 11, 1994

Johnny T. Lin  
Windsor Square Auto Repair  
P.O. Box 4154  
San Leandro, CA 94579

RE: PRELIMINARY SITE ASSESSMENT WORK PLAN

Dear Mr. Lin:

Thank you for the recent submittal of the March 30, 1994 Century West Engineering Corporation (CWEC) Report of Waste Oil UST Soil Excavation and Remediation, and Workplan for Soil and Ground Water Investigation. The cited work plan proposes the advancement of five (5) soil borings, with their subsequent conversion into ground water monitoring wells. This work plan has been accepted with the following addition:

- o A period of no less than 24, and preferably 72, hours shall pass between well development and the first purge/sampling event.
- o Review of historical data reflecting the 1985 fuel UST closure reveals that no (apparent) samples were collected from below the product piping/dispenser areas. Hence, it would appear prudent at this time to evaluate the presence of fuel compounds by way of advancement of (an) additional boring(s) in these areas.

Please advise this office when field work is slated to begin. In addition, please notify this office, by way of submittal of transport and disposal receipts, when the bio-treated soil has been properly disposed.

I may be reached at 510/271-4530 should you have any questions.

Sincerely,

  
Scott O. Seery, CHMM  
Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director  
Gil Jensen, Alameda County District Attorney's Office  
Mike Bakaldin, San Leandro Fire Department  
Blessy Torres, SWRCB



April 8, 1994

Dear Scott Seary,

Here are the C.A.S. numbers for the two compounds you were interested in. I have also included the chemical formula and a common name associated with the compound or a closely related compound.

1-Dotriacontanol     $\text{CH}_3(\text{CH}_2)_{30}\text{CH}_2\text{OH}$     C.A.S. 6624-79-9  
"Dicetyl alcohol"

4-Piperidinone, 2,2,6,6-tetramethyl-     $\text{C}_9\text{H}_{17}\text{ON}$     C.A.S. 826-36-8  
"triacetone amine" = 4-piperidinone, 2,3,6,6-tetramethyl-

If you have any other questions, please do not hesitate to call.

Sincerely,

*Kelley M Wells*  
Chemist



LEADING THROUGH EFFECTIVE SOLUTIONS

Post Office Box 1174 Bend, Oregon 97709

1444 N.W. College Way Bend, Oregon 97701 Phone: (503) 382-6432 FAX: (503) 388-5082

TOTAL P.01

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J. KEARS, Agency Director

STID 3583

March 2, 1994

Johnny T. and Amy Lin  
Windsor Square Auto Repair  
P.O. Box 4154  
San Leandro, CA 94579



HAFAT 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, Room 201  
Oakland, CA 94612  
(415) 771-1100

RE: SB2004 UNDERGROUND STORAGE TANK CLEANUP FUND - 1900  
LEWELLING BLVD., SAN LEANDRO

Dear Mr. and Mrs. Lin:

Representatives from the State Water Resources Control Board (SWRCB), Division of Clean Water Programs, recently evaluated your request for SB2004 funding in context with the Alameda County Health Department's case file for your site. This review was conducted to determine whether or not you are in compliance with the underground storage tank (UST) Corrective Action Regulations, as codified under Article 11 of Title 23, California Code of Regulations (CCR).

The SWRCB staff review determined that you are not in compliance with the referenced regulations. This office has not been the recipient of any reports documenting work occurring at the site since submittal of the October 18, 1990 Environmental Geotechnical Consultants, Inc. (EGC) report documenting activities and sample results associated with the September 1990 waste oil UST closure.

A confirmed unauthorized release from the subject UST was reported. Century West Engineering (CWE) subsequently submitted a work plan, dated January 14, 1991, in which was presented a proposal to overexcavate the UST pit, followed by on-site "bioremediation" of the contaminated, excavated material. To date, no report documenting the results of this work has been submitted to this office.

This issue was previously discussed in correspondence from this office dated June 24, 1993. The cited correspondence requested the submittal of the report documenting the work proposed in the January 14, 1991 CWE work plan within 30 days. The cited correspondence further requested all documents relating to activities occurring at the site since January 1991. In apparent response to the county's request, both Messrs. James Gribi (CWE) and Larry Fresquez contacted me by phone. Mr. Gribi indicated that work had, in fact, been proceeding, albeit at a glacial pace. I requested a status update report. Mr. Gribi indicated that such would be submitted within two weeks. To date, no report has been submitted.

Mr. and Mrs. Lin  
RE: 19000 Lewelling Blvd., San Leandro  
March 2, 1994  
Page 2 of 2

Currently, you are in a state of substantial noncompliance with the provisions of Article 11, 23CCR.

For cases such as yours, the SWRCB is allowing responsible parties **90 calendar days** to complete the tasks necessary to come into compliance. In your case, compliance will be reached when the requested reports are submitted, and once a work plan for a preliminary site assessment (PSA), pursuant to Section 2723 of Article 11, 23CCR, is submitted, approved, and finally implemented.

Once we are certain that compliance has been achieved, we will notify the SWRCB of this fact.

Please bear in mind that funding eligibility may require specific bidding and contracting criteria to be met (e.g., work plans require solicitation of three bids, etc.). Please contact your SWRCB UST fund representative for more case-specific information.

Please call me at 510/271-4530 should you have any additional questions.

Sincerely,



Scott O. Seery, CHMM  
Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director  
Gil Jensen, Alameda County District Attorney's Office  
Mike Bakaldin, San Leandro Fire Department  
Blessy Torres, SWRCB



Scott,

enclosed are copies of Claim application and follow up's including letter sent today.

If you have any questions please call me. Larry Fresquez  
510 352 0798. I talked to you today 7-8-93 about Johnny Lin.



Larry Fresquez

001102 0-11786

July 8, 1993

State Water Resources Control Board  
Division of Clean Water Programs  
2014 T Street, Suite 130  
P.O.Box 944212  
Sacramento, CA 94244-2120

On April 28, 1992, Request for Further Action Form, was sent to your office and to this date we have not heard from you. The request was submitted at the request of Richard Hiett an employee of Alameda County. (Phone: 464-4357)

I am sending you a copy of that form.

Sincerely,

  
Johnny T. Lin

P.O. Box 4154  
San Leandro, CA 94579

State of California  
State Water Resources Control Board  
Division of Clean Water Programs  
Underground Storage Tank Cleanup Fund Program  
2014 T Street, Suite 130  
Mail: P.O. Box 944212  
Sacramento, CA 94244-2120

For State Use:  
Date Received \_\_\_\_\_  
Priority \_\_\_\_\_

**Underground Storage Tank Cleanup Fund  
Request for Further Action**

Instructions: Provide the following information, check the action(s) that you are requesting, attach the appropriate information and return to the UST Cleanup Fund at the above address. (You may request either or both actions)

Claimant Information

Name: Johnny T. Lin Company: \_\_\_\_\_  
Address: P.O. Box 4254, San Leandro, CA 94579  
Telephone: (510) 352-5422

I (We) hereby declare under penalty of perjury that all facts and statements included with this request are true and correct to the best of my (our) knowledge and belief.

Signature: 

Date: 4-27-92

Claim Information

Claim No: 003553

Site Address: 1900 Lewelling Blvd. San Leandro, CA 94579

Action(s) Requested

(xx) Option 1(a) Request for Final Staff Decision. I (We) hereby request a Final Staff Decision regarding the determination that the above claim application is incomplete or ineligible. This request is made pursuant to Section 2814(a) of the UST Cleanup Fund Regulations. I (We) have attached any additional supporting arguments I (we) have.

( ) Option 1(b) Request for consideration of additional documents - Resubmittal of claim. I (We) hereby submit additional documents and/or amended pages which I (we) believe will complete the above claim application. I (We) understand that the claim will be considered for placement on a future priority list. Please review this material and inform me (us) of your determination.

## STATE WATER RESOURCES CONTROL BOARD

## DIVISION OF CLEAN WATER PROGRAMS

2014 T STREET, SUITE 130

P.O. BOX 944212

SACRAMENTO, CA 94244-2120

(916) 739-2475



227-4529

Steve Parada

- 4486

Donna Purcotte

- 4532

Case worker

3553

REGION: 2

JOHNNY T. LIN

PO BX 4154

SAN LEANDRO, CA 94579

APR 16 1992

**UNDERGROUND STORAGE TANK CLEANUP FUND PROGRAM, NOTICE OF INCOMPLETE OR INELIGIBLE CLAIM: CLAIM NUMBER 003533**

As a result of a cursory review by our staff, your claim application to the Underground Storage Tank (UST) Cleanup Fund Program cannot be accepted for the current priority list for the following reason(s):

- Claimant was never the owner or operator of the UST (Sec. 2810.1).
- There was no documentation submitted <sup>removing</sup> of an unauthorized release of petroleum from the UST (Sec. 2811(a)(1) or 2811(b)).
- There was no documentation submitted that claimant complied with applicable requirements to have a permit to own or operate the UST (Sec. 2811(a)(2) or 2811(b)(1) or (2)).
- Claimant is not in compliance with financial responsibility requirements (Sec. 2811(a)(3) or 2811(b)).
- Corrective action was not in accordance with Chapter 6.7 of the Health & Safety Code or was not consistent with any orders, directives, etc. of the regulatory agencies (Sec. 2811(a)(4) and (5) or 2811(b) and(b)(4)).
- Tank is not a qualifying UST (Sec. 2804 and 2810.1).
- Claimant knew of the unauthorized release prior to January 1, 1988 and failed to initiate corrective action on or before June 30, 1988 (Sec. 2810.1(a)(4)).
- Claimant purchased property on which the UST was located and failed to document (1) that the party from whom the property was acquired would have been eligible to submit a claim, or (2) claimant exercised reasonable diligence in determining whether an UST was located on the site and if an UST was known, whether the site was contaminated. (Sec. 2810.1(b)).
- Claim for third-party compensation costs failed to include documentation of a court-approved settlement, final judgement, etc. (Sec. 2811.3(a)).

(over)

STATE USE ONLY: (July 1991)

CLAIM NO. \_\_\_\_\_

DATE REC'D \_\_\_\_\_

PRIORITY \_\_\_\_\_ REGION \_\_\_\_\_

Underground Storage Tank Cleanup Fund  
 CLAIM APPLICATION

This application provides the required information for placement on the UST Cleanup Fund Priority List. Complete and submit this Application with all required attachments to the address in the above left corner. Only one application is to be submitted per cost. Type or print legibly the required information in the applicable sections below. Refer to the application instructions. Attach additional pages as necessary to explain responses.

I. CLAIMANT IDENTIFICATION

A. CLAIMANT NAME <u>Johnny T. Lin</u>		B. CLAIMANT STATUS (CHECK ONE)	
MAILING ADDRESS <u>P.O. Box 4154</u>		<input checked="" type="checkbox"/> INDIVIDUAL	<input type="checkbox"/> LOCAL AGENCY
CITY, STATE <u>San Leandro, CA</u>		<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> CORPORATION
ZIP CODE <u>94579</u>		<input type="checkbox"/> JOINT VENTURE	<input type="checkbox"/> OTHER: _____
TELEPHONE NO. ( ) _____			

C. TAX IDENTIFICATION NO. <u>555-02-5540</u>	D. CONTACT PERSON <u>Johnny T. Lin</u>	TELEPHONE NO. ( <u>510</u> ) <u>352 5422</u>
---	---	---

E. IDENTIFY WHETHER CLAIMANT IS FILING AS  
 (1)  OWNER OF THE TANK(S)      (2)  OPERATOR OF THE TANK(S)      (3)  BOTH THE OWNER AND OPERATOR OF THE TANK(S)

F. IF FILING AS THE OWNER OR OWNER AND OPERATOR OF THE TANK(S)  
 DATE SITE WAS ACQUIRED 8-7-85

DATE SOLD (IF APPLICABLE)	PERSON(S) SOLD TO
PERSON(S) SITE ACQUIRED FROM (IF AFTER 1/1/84)	NAME ADDRESS PHONE #
	<u>Henry Edward Pike</u>
	<u>15367 Elvina Dr., San Leandro, CA 94579 (last known address)</u>

G. IF FILING AS THE OPERATOR (BUT NOT THE OWNER) OF THE TANK(S)  
 DATES OF OPERATION \_\_\_\_\_ TO \_\_\_\_\_

PERSON(S) THAT OWNED TANK(S) DURING PERIOD OF OPERATION	NAME	ADDRESS	PHONE #
FROM TO			

H. IDENTIFY TANK OWNER AND OPERATOR AT TIME OF DISCOVERY OF RELEASE		I. IDENTIFY CURRENT TANK OWNER AND OPERATOR	
1. NAME OF OWNER <u>Johnny T. Lin (claimant)</u>	MAILING ADDRESS <u>P.O. Box 4154</u>	1. NAME OF OWNER <u>Claimant</u>	MAILING ADDRESS _____
CITY, STATE, ZIP CODE <u>San Leandro, CA 94579</u>	TELEPHONE NUMBER <u>510 352-5422 or 352-8598</u>	CITY, STATE, ZIP CODE _____	TELEPHONE NUMBER ( ) _____
2. NAME OF OPERATOR _____	MAILING ADDRESS _____	2. NAME OF OPERATOR _____	MAILING ADDRESS _____
CITY, STATE, ZIP CODE _____	TELEPHONE NUMBER _____	CITY, STATE, ZIP CODE _____	TELEPHONE NUMBER _____

II. STATEMENT OF COSTS

A. ELIGIBLE CORRECTIVE ACTION COSTS INCURRED TO DATE FOR COMPLETED WORK:	(1) \$ <u>13270.00</u>
B. ESTIMATED ELIGIBLE CORRECTIVE ACTION COSTS TO COMPLETE WORK CURRENTLY UNDERWAY: INDICATE PHASE: (1) <input checked="" type="checkbox"/> PHASE I      (2) <input type="checkbox"/> PHASE II      (3) <input type="checkbox"/> PHASE III      (4) <input type="checkbox"/> PHASE IV	(2) \$ <u>5665.00</u>
C. ESTIMATED ELIGIBLE CORRECTIVE ACTION COSTS TO COMPLETE NEXT PHASE: INDICATE PHASE: (5) <input type="checkbox"/> PHASE I      (6) <input type="checkbox"/> PHASE II      (7) <input type="checkbox"/> PHASE III      (8) <input checked="" type="checkbox"/> PHASE IV	(3) \$ <u>75,000.00</u>
D. THIRD PARTY COMPENSATION COSTS FOR PERSONAL INJURY/PROPERTY DAMAGE (Submit certified copy of settlement, final judgement, or arbitration award)	(4) \$ <u>-0-</u>
E. SUBTOTAL	\$ <u>93,935.00</u>
F. DEDUCTIBLE	\$ <u>(10,000)</u>
G. TOTAL COSTS BEING CLAIMED	(5) \$ <u>83,935.00</u>

H. HAVE ESTIMATED COSTS BEEN BID?       YES       NO

IF NO, IN WHAT MANNER WERE COSTS DERIVED Verl's Construction & Century West Engineering say this could depending on contamination up to \$100,000.00

# JOINT CLAIMANT AND CO-PAYEE IDENTIFICATION FORM

STAFF USE ONLY

## III. JOINT CLAIMANT

A. IS THIS CLAIM APPLICATION BEING FILED JOINTLY?  NO - PROCEED TO THE NEXT SECTION  
 YES - PROVIDE THE FOLLOWING INFORMATION FOR EACH JOINT CLAIMANT

<p>B. JOINT CLAIMANT NAME</p> <hr/> <p>MAILING ADDRESS</p> <hr/> <p>CITY, STATE <span style="float: right;">ZIP CODE</span></p> <hr/> <p>TELEPHONE NUMBER ( )</p>	<p>C. JOINT CLAIMANT STATUS (CHECK ONE)</p> <p><input type="checkbox"/> INDIVIDUAL      <input type="checkbox"/> LOCAL AGENCY</p> <p><input type="checkbox"/> PARTNERSHIP      <input type="checkbox"/> CORPORATION</p> <p><input type="checkbox"/> JOINT VENTURE      <input type="checkbox"/> OTHER: _____</p>
---	--

D. TAX IDENTIFICATION NO.	E. CONTACT PERSON
---------------------------	-------------------

F. IF FILING AS THE OWNER OR OWNER AND OPERATOR OF THE TANK(S):

DATE SITE WAS ACQUIRED \_\_\_\_\_

DATE SOLD (IF APPLICABLE) \_\_\_\_\_ PERSON(S) SOLD TO: \_\_\_\_\_

PERSON(S) SITE ACQUIRED FROM (IF AFTER 1/1/84) \_\_\_\_\_

NAME: _____	ADDRESS: _____	PHONE #: _____
_____	_____	_____
_____	_____	_____

G. IF FILING AS THE OPERATOR (BUT NOT THE OWNER) OF THE TANK(S):

DATES OF OPERATION: \_\_\_\_\_ TO \_\_\_\_\_

PERSON(S) THAT OWNED TANK(S) DURING PERIOD OF OPERATION

FROM: _____	TO: _____	NAME: _____	ADDRESS: _____	PHONE #: _____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## IV. CO-PAYEE

A. IS A CO-PAYEE TO BE NAMED IN PAYMENT OF THIS CLAIM?  NO - PROCEED TO THE NEXT PAGE  
 YES - PROVIDE THE FOLLOWING INFORMATION FOR EACH CO-PAYEE

B. CO-PAYEE NAME		
MAILING ADDRESS		
CITY	STATE	ZIP CODE
TELEPHONE NO. ( )	TAX IDENTIFICATION NO.	

### V. CONTAMINATION SITE DESCRIPTION

A. SITE NAME <b>Windsor Square</b>		B. CONTACT PERSON AT SITE <b>Johnny Linn or Larry Fresquez</b>	
SITE ADDRESS <b>1900 Lewelling Blvd.</b>		TELEPHONE NO. <b>510, 352-5422, 352-8598 Or 353-0798</b>	
STREET NO. <b>San Leandro, CA</b>	<b>94579</b>	C. COUNTY <b>Alameda</b>	D. COUNTY CODE <b>09</b>
CITY	STATE	E. BOE (Board of Equalization) NO <b>N/A</b>	

F. ATTACH A SITE MAP DRAWN TO SCALE WHICH INCLUDES A NORTH ARROW AND DISTANCES RELATIVE TO THE NEAREST PUBLIC ROADS.

G. SITE TYPE (CHECK MORE THAN ONE IF APPLICABLE)

COMMERCIAL     RESIDENCE     FARM     OTHER - Please Specify: \_\_\_\_\_

H. DATE RELEASE WAS DISCOVERED <b>7-10-90</b>	I. DATE CORRECTIVE ACTION WAS INITIATED <b>7-14-90</b>	J. HAS CORRECTIVE ACTION BEEN COMPLETED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES - Date Completed: _____
--	---	---

K. IDENTIFY TANK(S) INVOLVED IN CORRECTIVE ACTION (List Additional Tanks on a Separate Sheet)

	STATE I.D. NO. (SWEEPS)	LOCAL AGENCY PERMIT NO.	CAPACITY	SUBSTANCE STORED
TANK 1	<u>None</u>	_____	<u>200 Gal</u>	<u>Waste Oil</u>
TANK 2	_____	_____	_____	_____
TANK 3	_____	_____	_____	_____
TANK 4	_____	_____	_____	_____
TANK 5	_____	_____	_____	_____

L. DESCRIPTION OF TANK(S) USE

RESIDENTIAL MOTOR FUEL     RESIDENTIAL HEATING OIL     COMMERCIAL HEATING OIL  
 AGRICULTURAL MOTOR FUEL     RETAIL SALE     OTHER Waste Motor Oil & Solvents cleaning

M. ARE TANKS PRESENTLY LOCATED ON THIS SITE     YES     NO    IF NO, DATE TANK(S) REMOVED: 10-90

N. PROVIDE A BRIEF DESCRIPTION OF THE BACKGROUND OF THIS CLAIM INCLUDING A DESCRIPTION OF ANY CORRECTIVE ACTION COMPLETED AND/OR UNDERWAY

Owner was not aware of tank being there. Discovered when city requested fee for permit. Since then the tank has been removed and dirt has been taken out and is being treated to lower level of contamination. Tests have been taken and show that level of contamination is getting lower but not low enough to despose of dirt in # 3 dump site.

### VI. REGULATORY AGENCY

A. LOCAL LIST PERMITTING AGENCY <b>City of San Leandro</b>		B. LOCAL AGENCY CODE
C. REGIONAL WATER QUALITY CONTROL BOARD (RWQCB) <b>San Francisco Bay</b>	D. REGION NO. <b>2</b>	E. LEAD AGENCY CASE NO.
F. LEAD AGENCY PROVIDING OVERSIGHT OF CLEANUP RWQCB    LOCAL    JOINT 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/>	LEAD AGENCY CONTACT PERSON <b>Richard Hiatt</b> <b>415 464 4357</b>	
TELEPHONE NUMBER <b>414 464 4357</b>		

## VII. PRIORITY CLASS WORKSHEET

A IF THERE ARE NO JOINT CLAIMANTS PROCEED TO SECTION VIII. WHEN JOINT CLAIMS ARE SUBMITTED THE CLAIM SHALL BE BASED ON THE LOWEST PRIORITY APPROPRIATE FOR ANY JOINT CLAIMANT. LIST PRIMARY CLAIMANT AND ANY JOINT CLAIMANT. IDENTIFY THE APPROPRIATE PRIORITY CLASS FOR ALL JOINT CLAIMANTS.

NAME	OWNER	OPERATOR	DATES OF OWNERSHIP/OPERATION		PRIORITY CLASS			
PRIMARY CLAIMANT	<input type="checkbox"/>	<input type="checkbox"/>	FROM	TO	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D
JOINT CLAIMANT	<input type="checkbox"/>	<input type="checkbox"/>	FROM	TO	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D
JOINT CLAIMANT	<input type="checkbox"/>	<input type="checkbox"/>	FROM	TO	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D
JOINT CLAIMANT	<input type="checkbox"/>	<input type="checkbox"/>	FROM	TO	<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D

B WHERE ANY CLAIMANT IS EITHER THE OWNER OR OPERATOR (BUT NOT BOTH) AT THE TIME OF DISCOVERY OF THE UNAUTHORIZED RELEASE, OR WHERE ANY CLAIMANT IS EITHER THE CURRENT OWNER OR OPERATOR (BUT NOT BOTH), AND WHERE SUCH OPERATOR AND OWNER WOULD BE ELIGIBLE TO SUBMIT A CLAIM TO THE FUND FOR COSTS PAID OR INCURRED BY SUCH OPERATOR OR OWNER, THE CLAIM SUBMITTED BY EITHER SHALL BE BASED ON THE THE LOWEST PRIORITY APPROPRIATE FOR EITHER.

IF ANY CLAIMANT WAS EITHER THE OWNER OR THE OPERATOR (BUT NOT BOTH) OF THE TANK(S) AT THE TIME OF DISCOVERY OF THE UNAUTHORIZED RELEASE, IDENTIFY THE OTHER PERSON(S) AND THEIR APPROPRIATE PRIORITY CLASS.

\_\_\_\_\_  FROM \_\_\_\_\_ TO \_\_\_\_\_  A  B  C  D

IF ANY CLAIMANT IS EITHER THE CURRENT OWNER OR OPERATOR OF THE TANK(S) (BUT NOT BOTH), IDENTIFY THE OTHER PERSON(S) AND THEIR APPROPRIATE PRIORITY CLASS.

\_\_\_\_\_  FROM \_\_\_\_\_ TO \_\_\_\_\_  A  B  C  D

### C. PRIORITY CLASS CLAIMED:

BASED ON CONSIDERATION OF THE PRIORITIES OF PERSON(S) IDENTIFIED IN A OR C ABOVE AND REVIEW OF PROGRAM INFORMATION, PRIORITY CLASS, INDICATE THE PRIORITY CLASS SOUGHT BY THE CLAIMANT FOR THIS CLAIM.

A. RESIDENTIAL OR SMALL HOME HEATING OIL TANK  B. SMALL BUSINESS  C. OTHER BUSINESS  D. ALL OTHER TANK OWNERS AND OPERATORS

## VIII. PRIORITY CLASS DESIGNATION

### A. IF CLAIMING CLASS A CHECK THE APPROPRIATE BOX:

- A1  UNDERGROUND STORAGE TANK ON RESIDENTIALLY ZONED PROPERTY THAT MEETS ALL OF THE FOLLOWING:
- A) CLAIMANT IS OWNER OF UNDERGROUND STORAGE TANK FROM WHICH AN UNAUTHORIZED RELEASE OF PETROLEUM HAS OCCURRED
  - B) TANK IS LOCATED AT THE RESIDENCE OF A PERSON WHEN THE UNAUTHORIZED RELEASE WAS DISCOVERED
  - C) WHEN UNAUTHORIZED RELEASE WAS DISCOVERED PROPERTY WHERE TANK IS LOCATED WAS IMPROVED BY OWNER OCCUPIED SINGLE FAMILY DWELLING OR DUPLEX
  - D) TANK IS LOCATED ON PROPERTY ZONED ONLY FOR RESIDENTIAL USE WHEN UNAUTHORIZED RELEASE WAS DISCOVERED
  - E) TANK WAS NOT USED TO STORE MOTOR VEHICLE FUEL PRIMARILY FOR AGRICULTURAL USE OR FOR RESALE ON OR AFTER JANUARY 1, 1985
- A2  SMALL HOME HEATING OIL TANK THAT MEETS ALL OF THE FOLLOWING:
- A) CLAIM IS OWNER OF UNDERGROUND STORAGE TANK FROM WHICH AN UNAUTHORIZED RELEASE OF HOME HEATING OIL HAS OCCURRED
  - B) TANK IS LOCATED AT THE RESIDENCE OF A PERSON WHEN THE UNAUTHORIZED RELEASE WAS DISCOVERED
  - C) WHEN UNAUTHORIZED RELEASE WAS DISCOVERED PROPERTY WHERE TANK IS LOCATED WAS IMPROVED BY OWNER OCCUPIED SINGLE FAMILY DWELLING OR DUPLEX
  - D) TANK HAS A CAPACITY OF 1,100 GALLONS OR LESS
  - E) TANK IS USED ONLY TO STORE HOME HEATING OIL FOR CONSUMPTIVE USE ON PROPERTY
  - F) TANK IS NOT LOCATED ON PROPERTY USED FOR AGRICULTURAL PURPOSES AFTER JANUARY 1, 1985

NOTE: REFER TO APPLICATION INSTRUCTIONS FOR REQUIRED DOCUMENTATION TO SUPPORT THE ABOVE CLAIMED STATEMENT. THIS DOCUMENTATION MUST BE SUBMITTED AT THE TIME OF APPLICATION.



**VIII. PRIORITY CLASS DESIGNATION (Continued from Page 4)**

**B**  **IF CLAIMING CLASS B - SMALL BUSINESS, CHECK THIS BOX AND COMPLETE THE FOLLOWING:**

<b>B1 BUSINESS NAME</b> Windsor Square <small>PRINCIPAL BUSINESS ADDRESS</small> 1900 Lewelling Blvd.	<b>BUSINESS DESCRIPTION</b> Auto Repair shop	<b>DATES OF BUSINESS OPERATIONS</b> FROM 1985 TO present												
<b>B2</b> IS THE PRINCIPAL OFFICE LOCATED IN CALIFORNIA? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ARE ALL OFFICERS OF THIS BUSINESS DOMICILED IN CALIFORNIA? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS THIS BUSINESS INDEPENDENTLY OWNED AND OPERATED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS THIS BUSINESS DOMINANT STATEWIDE IN ITS FIELD OF OPERATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO owner is leasing site for Auto repair shop.														
<b>B3 TYPE OF BUSINESS</b> <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> MANUFACTURER <input type="checkbox"/> NON-MANUFACTURER		<b>INDUSTRY GROUP/ LICENSE TYPE</b> Gross Lease income \$ 10,800.00												
<b>B4. TYPE OF OWNERSHIP</b> <input checked="" type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER - Please Specify: _____														
<b>B5 AFFILIATED COMPANIES</b> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">NAME</th> <th style="width:33%;">LOCATION</th> <th style="width:33%;">RELATIONSHIP:</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			NAME	LOCATION	RELATIONSHIP:									
NAME	LOCATION	RELATIONSHIP:												
<b>B6 ANNUAL RECEIPTS FOR THREE FISCAL YEARS PER INSTRUCTIONS</b> \$ _____ + \$ _____ + \$ _____ = \$ _____ TOTAL														

**NOTE: REFER TO APPLICATION INSTRUCTIONS FOR REQUIRED DOCUMENTATION TO SUPPORT THE ABOVE CLAIMED STATEMENT. THIS DOCUMENTATION MUST BE SUBMITTED AT THE TIME OF APPLICATION.**

**C**  **IF CLAIMING CLASS C - OTHER BUSINESS CHECK THIS BOX AND COMPLETE THE FOLLOWING:**

<b>C1 BUSINESS NAME</b> _____ <small>PRINCIPAL BUSINESS ADDRESS</small> _____	<b>BUSINESS DESCRIPTION</b> _____	<b>DATES OF BUSINESS OPERATIONS</b> FROM: _____ TO: _____												
<b>C2.</b> IS THE PRINCIPAL OFFICE LOCATED IN CALIFORNIA? <input type="checkbox"/> YES <input type="checkbox"/> NO ARE ALL OFFICERS OF THIS BUSINESS DOMICILED IN CALIFORNIA? <input type="checkbox"/> YES <input type="checkbox"/> NO IS THIS BUSINESS INDEPENDENTLY OWNED AND OPERATED? <input type="checkbox"/> YES <input type="checkbox"/> NO IS THIS BUSINESS DOMINANT STATEWIDE IN ITS FIELD OF OPERATION? <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>NO OF EMPLOYEES</b> _____												
<b>C3 TYPE OF OWNERSHIP</b> <input type="checkbox"/> SOLE PROPRIETOR <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION <input type="checkbox"/> OTHER - Please Specify: _____														
<b>C4 AFFILIATED COMPANIES</b> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:33%;">NAME</th> <th style="width:33%;">LOCATION</th> <th style="width:33%;">RELATIONSHIP</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>			NAME	LOCATION	RELATIONSHIP									
NAME	LOCATION	RELATIONSHIP												

**NOTE: REFER TO APPLICATION INSTRUCTIONS FOR REQUIRED DOCUMENTATION TO SUPPORT THE ABOVE CLAIMED STATEMENT. THIS DOCUMENTATION MUST BE SUBMITTED AT THE TIME OF APPLICATION.**

**D**  **IF CLAIMING CLASS D - ALL OTHER TANK OWNERS/OPERATORS CHECK THIS BOX. NO FURTHER PRIORITY CLASS INFORMATION IS REQUIRED.**

**IX. ELIGIBILITY REQUIREMENTS (Check appropriate box for required documentation attached)**

A. THERE MUST HAVE BEEN AN UNAUTHORIZED RELEASE OF PETROLEUM FROM AN UNDERGROUND STORAGE TANK

Submit documentation of the unauthorized release with this claim application

B. IF CLAIMANT ACQUIRED REAL PROPERTY ON WHICH TANK IS LOCATED AFTER JANUARY 1, 1984, CLAIMANT MUST DOCUMENT THAT REASONABLE DILIGENCE WAS TAKEN TO HAVE DISCOVERED THE TANK AND ANY CONTAMINATION.

Submit documentation requested in instructions

C. CLAIMANT MUST BE IN COMPLIANCE WITH APPLICABLE REQUIREMENTS TO HAVE A PERMIT TO OWN OR OPERATE THE TANK PURSUANT TO SECTION 25284 OF CHAPTER 6.7 OF THE HEALTH AND SAFETY CODE

- 1  Submit a copy of permit(s) issued by the local agency in effect at the time the unauthorized release was discovered and reported; OR
- 2  Submit evidence of having filed an application for the permit by January 1, 1990, OR
- 3  Submit documentation demonstrating that obtaining the required permit was beyond the claimant's reasonable control, or reason that it would be unreasonable or inequitable to require the filing of an application for permits by January 1, 1990.
- 4  Check here if the tank(s) is a "small home heating oil tank" as defined in Section VIII. PRIORITY CLASS DESIGNATION and therefore is exempt from this requirement.

D. CORRECTIVE ACTION MUST BE IN COMPLIANCE WITH APPLICABLE PROVISIONS OF CHAPTER 6.7 OF THE HEALTH AND SAFETY CODE, THE FEDERAL ACT, LOCAL AGENCY ORDERS AND DIRECTIVES, ORDERS AND DIRECTIVES OF THE BOARD OR REGIONAL BOARD, AND THE CORRECTIVE ACTION REGULATIONS IMPLEMENTED IN ARTICLE 11, CHAPTER 16, DIVISION 3, TITLE 23, CALIFORNIA CODE OF REGULATIONS

- 1  For corrective action costs incurred prior to the effective date of the Cleanup Fund regulations submit documentation that corrective action work was consistent with requirements
- 2  For corrective action costs incurred after the effective date of the Cleanup Fund regulations, submit documentation that corrective action work was required or permitted

E. CLAIMANT MUST BE IN COMPLIANCE WITH APPLICABLE REQUIREMENTS TO DEMONSTRATE FINANCIAL RESPONSIBILITY

1. IS CLAIMANT SUBJECT TO THE REQUIREMENT TO DEMONSTRATE FINANCIAL RESPONSIBILITY:

NO

IF "NO", IDENTIFY EXEMPTION OR DEFERRAL (40 CFR PART 280 OF THE FEDERAL REGULATIONS) AND PROCEED TO PG 7  
Tank removed and also under 1100 gal

YES

IF "YES", CONTINUE TO NEXT QUESTION

2. IDENTIFY DATE SPECIFIED IN THE FEDERAL ACT BY WHICH CLAIMANT MUST COMPLY WITH DEMONSTRATING FINANCIAL RESPONSIBILITY AND IF DATE IS IN THE FUTURE OR DEFERRED, PROCEED TO PAGE 7.

- JANUARY 24, 1989 for all petroleum marketing firms owning 1,000 or more underground storage tanks and all other underground storage tank owners who report a tangible net worth of \$20 million or more to the U. S. Securities and Exchange Commission (SEC), Dun and Bradstreet, the Energy Information Administration, or the Rural Electrification Administration
- OCTOBER 26, 1989 for all petroleum marketing firms owning 100 to 999 underground storage tanks
- APRIL 26, 1991 for all petroleum marketing firms owning 13 to 99 underground storage tanks at more than one facility
- DECEMBER 31, 1993 (Recommended EPA Date) for all petroleum underground storage tank owners or operators not described above
- Local governmental entities are not currently subject to a federal compliance date

3. IDENTIFY THE MINIMUM AMOUNT OF FINANCIAL RESPONSIBILITY REQUIRED AS DEFINED BY THE FEDERAL ACT:

\$1 million per occurrence for owners and operators of underground storage tanks either located at a petroleum marketing facility or which handles an average of more than 10,000 gallons of petroleum per month based on annual throughput for the previous calendar year;

OR

\$500,000 per occurrence for all owners and operators not included in the above statement;

AND

\$1 million annual aggregate coverage for owners and operators of 1 to 100 underground storage tanks;

OR

\$2 million annual aggregate coverage for owners and operators of 101 or more underground storage tanks.

4. IDENTIFY THE MECHANISM(S) USED TO DEMONSTRATE FINANCIAL RESPONSIBILITY:

<sup>(1)</sup> TRUST FUND     <sup>(2)</sup> SURETY BOND     <sup>(3)</sup> GUARANTEE     <sup>(4)</sup> SELF INSURANCE     <sup>(5)</sup> LETTER OF CREDIT     <sup>(6)</sup> INSURANCE COVERAGE

<sup>(7)</sup> RISK RETENTION GROUP     <sup>(8)</sup> STATE FUND - If using State Fund, indicate mechanism for providing required \$10,000 coverage

## X. STATEMENTS

A. IDENTIFY ANY OTHER PERSON(S) THAT MAY HAVE FILED A CLAIM AGAINST THE UST CLEANUP FUND FOR CLEANUP OF THE SITE WHICH IS THE SUBJECT OF THIS CLAIM

n/A

NAME

ADDRESS

TELEPHONE NO.

B. IDENTIFY OTHER PERSON(S) WHO HAVE INCURRED COSTS FOR CLEANUP OF THE SITE WHICH IS THE SUBJECT OF THIS CLAIM:

N/A

NAME

ADDRESS

TELEPHONE NO.

C. DO YOU HAVE ANY KNOWLEDGE OF ANY CONTROVERSY (LAWSUITS, ETC.) REGARDING THE SITE THAT IS THE SUBJECT OF THIS CLAIM?

NO

YES - PLEASE EXPLAIN.

## XI. CERTIFICATIONS AND AGREEMENTS

I (WE) HEREBY CERTIFY THAT:

1. I (We) am (are) the owner or operator of an Underground Storage Tank from which there has been an unauthorized release of petroleum for which a claim against the Fund is permissible under Chapter 6.75 of the California Health and Safety Code.
2. Claimant(s) is (are) entitled to submit this claim application for reimbursement from the Fund.
3. All costs claimed herein were incurred after January 1, 1988, are reasonable and necessary, and are eligible for reimbursement from the Fund.
4. Claimant(s) obtained any permits required of the claimant(s) under Chapter 6.7 of the California Health and Safety Code when such permits were required, or claimant(s) had filed substantially complete applications for any permits required of claimant(s) on January 1, 1990, by that date, or if claimant cannot so certify, claimant has submitted documentation of the facts and circumstances which are relied upon to demonstrate that obtaining any required permit was beyond the reasonable control of claimant(s) or that it would be unreasonable or inequitable to require the claimant(s) to have filed an application for such a permit by January 1, 1990.
5. Claimant(s) are in compliance with any applicable financial responsibility requirements contained in Article 3, Chapter 18, Division 3, Title 23, California Code of Regulations (Petroleum Underground Storage Tank Cleanup Fund Regulations).
6. As to all costs claimed which were incurred before the effective date of Cleanup Fund regulations (December 2, 1991), any corrective action taken by claimant(s) was:
  - A. In accordance with applicable provisions of Chapter 6.7 of the California Health and Safety Code and Subchapter IX of Chapter 82 of Title 42 of the United States Code and the Federal Regulations adopted pursuant thereto; and
  - B. Consistent with any oral or written orders, directives, approvals or notification of cleanup responsibility issued by state, local or federal agencies having authority or responsibility over underground storage tanks, and consistent with any applicable waste discharge requirements, state policies for water quality control, and water quality control plans.
7. As to all costs claimed which were incurred on or after the effective date of Cleanup Fund Regulations (December 2, 1991):
  - A. Claimant(s), if subject to the permit requirements of Chapter 6.7 of the California Health and Safety Code, (1) are in compliance with any applicable corrective action requirements established pursuant to Article 4 of Chapter 6.75 of the California Health and Safety Code, including any implementing regulations contained in Article 11, Chapter 16, Division 3, Title 23, California Code of Regulations; and (2) has (have) notified the appropriate local agency or California Regional Water Quality Control Board of the release which is the subject of this claim and has (have) been required or permitted by such agency or agencies to undertake the corrective action for which reimbursement is sought, and claimant(s) is (are) in compliance with the requirements or any orders or directives issued by such agencies.
  - B. Claimant(s), if not subject to the permit requirements of Chapter 6.7 of the California Health and Safety Code, meet the conditions specified in Paragraph 6 above.
8. Claimant(s) did not know of the unauthorized release which is the subject of this claim prior to January 1, 1988, or, if such release was known prior to that date, any required corrective action related to that release was initiated on or before June 30, 1988.
9. Claimant(s), if owner(s) of the site involved, does (do) not know of any facts which would preclude any party from whom the site was acquired from filing a claim for reimbursement against the Fund.

**I (WE) JOINTLY AND SEVERALLY AGREE THAT:**

1. All records pertaining to the claims included in this Claim Application will be retained for a period of at least three years from the date of final payment on the last phase of work reimbursed from the Fund. This three year period of retention shall be extended until completion of any audit in progress at the conclusion of the three year retention period. All such records shall be made available to the State Board, or any designated representative thereof, upon request.
2. All reimbursements made pursuant to this Claim Application are subject to audit by the State Board or any representative thereof. Claimant(s) will reimburse the State for any costs finally disallowed pursuant to such an audit.


**XII. VERIFICATION**

I (WE) HEREBY DECLARE UNDER PENALTY OF PERJURY THAT ALL FACTS AND STATEMENTS SET FORTH AS A PART OF THIS CLAIM APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY (OUR) KNOWLEDGE AND BELIEF.

EXECUTED AT San Leandro, CALIFORNIA

ON THIS 14th DAY OF January, 19 92

**SIGNATURE:**

Johnny T. Lin  
  
CLAIMANT OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
CLAIMANT OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
CLAIMANT OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
CLAIMANT OR AUTHORIZED REPRESENTATIVE

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CLAIMANT OR AUTHORIZED REPRESENTATIVE

\_\_\_\_\_  
CLAIMANT OR AUTHORIZED REPRESENTATIVE

DELIVER COMPLETED CLAIM TO:

OR

MAIL COMPLETED CLAIM APPLICATION TO:

STATE WATER RESOURCES CONTROL BOARD  
DIVISION OF CLEAN WATER PROGRAMS  
UST CLEANUP FUND PROGRAM  
2014 T STREET, SUITE 130  
SACRAMENTO, CA 95814

STATE WATER RESOURCES CONTROL BOARD  
DIVISION OF CLEAN WATER PROGRAMS  
UST CLEANUP FUND PROGRAM  
P.O. BOX 944212  
SACRAMENTO, CA 94244-2120

Page 6 IX documentation:

At the time of purchase I was not aware that there was a waste oil tank in the property. Later approx. July 10, 1990 I discovered that the tank was there. See letter from City of San Leandro dated 7-1-1990, where they ask me for information to acquire permit for tank. Up to that time I didn't know of the tank.

In August 1990 I proceeded to have the tank removed, unaware that the contamination was so widely spread and that the cost could be in the tens of thousands of dollars.

Since 1987 I have leased the property to an individual for the use of auto repair.

City of San Leandro  
Civic Center, 835 E. 14th Street  
San Leandro, California 94577



July 10, 1990

John Yu  
Windsor Square Auto Service  
1900 Lewelling Boulevard  
San Leandro, CA 94579

#### Underground Storage Tanks at 1900 Lewelling

The San Leandro Municipal Code requires operators of underground storage tanks to obtain a permit from the Fire Department. Our records indicate a current permit does not exist for the above referenced facility.

Please complete the enclosed permit application forms and return them to the Fire Department along with permit fees in the amount of \$226.00. Please make the check payable to the City of San Leandro.

In addition, you must submit tank monitoring results for the past year. The attached document, titled "Underground Storage Tank Monitoring Options", summarizes the monitoring options available to you.

If you have ceased operating your underground storage tanks or intend to, you must file a closure plan and remove the tanks. An underground storage tank closure package, containing the required forms and instructions, is available at this office.

The permit application and fees must be submitted by July 31, 1990. If you have any questions, please call me at (415) 577-3331.

*[Handwritten signature]*  
Michael Bakaldin, Haz Mat Coordinator  
San Leandro Fire Department

Enclosures

D:\WP50\UST\1900LEWE.P1

Dave Karp, Mayor



City Council: Ellen M. Corbett; John E. Faria; Bob Glaze;  
Linda Perry; Julian P. Polvorosa; Anthony B. Santos; Dick Randall, City Manager

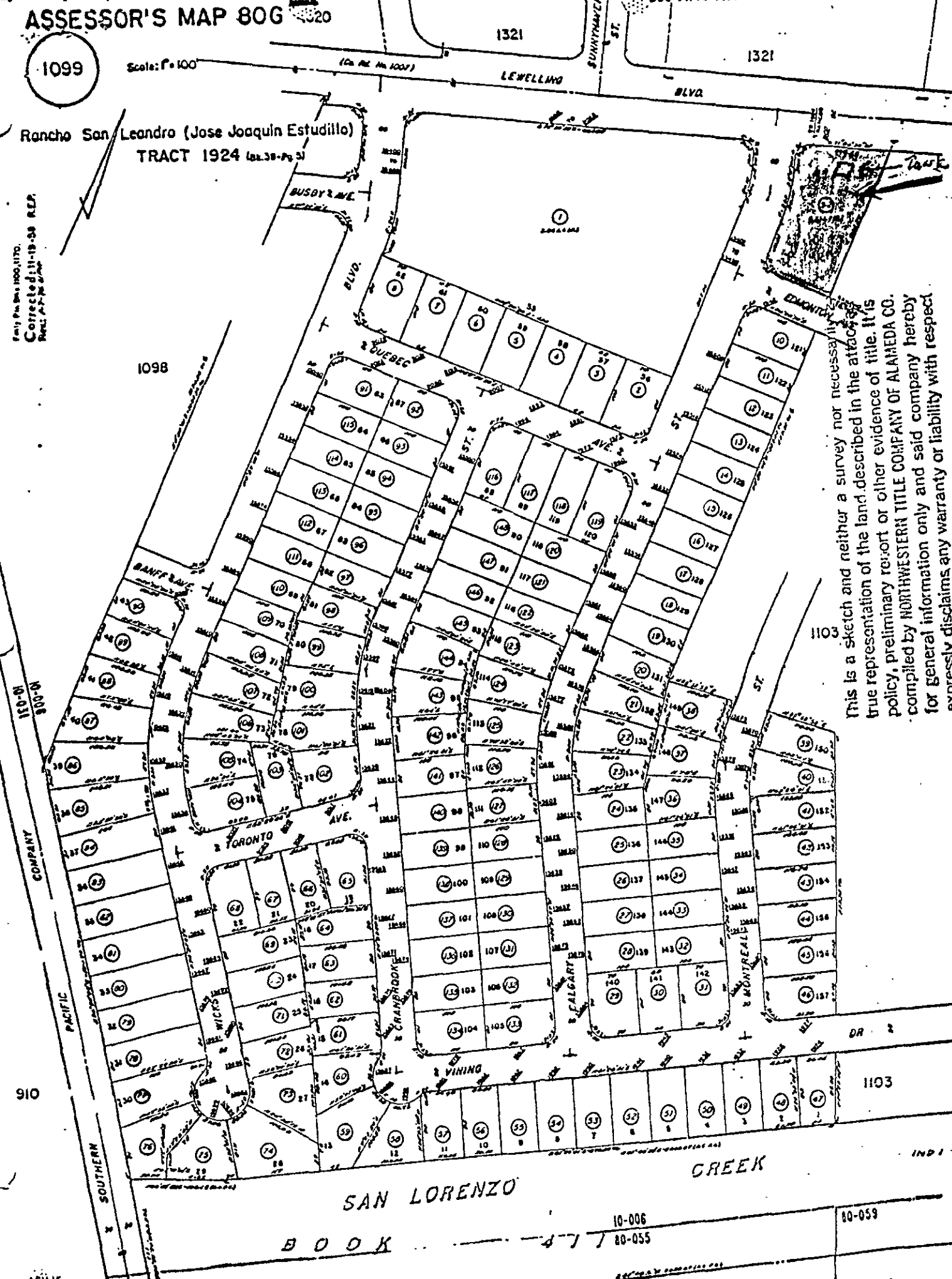
# ASSESSOR'S MAP 80G

1099

Scale: Ft 100

Corrected 11-19-58 R.E.P.  
Map 27-74-58

Rancho San Leandro (Jose Joaquin Estudillo)  
TRACT 1924 (L.S. 38-Pl. 3)



This is a sketch and neither a survey nor necessarily a true representation of the land described in the attached policy, preliminary report or other evidence of title. It is compiled by NORTHWESTERN TITLE COMPANY OF ALAMEDA CO. for general information only and said company hereby expressly disclaims any warranty or liability with respect thereto.

SAN LORENZO CREEK

10-006  
80-055

10-059

ACM 16

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 3583

June 24, 1993

Johnny T. and Amy Lin  
Windsor Square Auto Repair  
P.O. Box 4154  
San Leandro, CA 94579

RE: WINDSOR SQUARE AUTO REPAIR, 1900 LEWELLING BLVD., SAN  
LEANDRO - UNDERGROUND STORAGE TANK LEAK AND ASSESSMENT FILE

Dear Mr. and Mrs. Lin:

This office is currently reviewing the underground storage tank (UST) leak and assessment file for the referenced site. The information presently available in this file appears incomplete. Absent are any reports documenting environmental work occurring at the site since submittal of the January 14, 1991 Century West Engineering proposal which discusses plans for the overexcavation and remediation of impacted soil from the former waste oil UST pit. We have no knowledge whether this work plan was ever implemented.

Please submit all documents relating to activities occurring at the site since January 1991. These documents are due within the next 30 days. Please be advised that this letter constitutes an official request for technical reports pursuant to California Water Code Section 13267(b).

You may contact me at 510/271-4530 should you have any questions. Thank you in advance for your timely attention to this matter.

Sincerely,

  
Scott O. Seery, CHMM  
Senior Hazardous Materials Specialist

cc: Rafat A. Shahid, Assistant Agency Director  
Gil Jensen, Alameda County District Attorney's Office  
Mike Bakaldin, San Leandro Fire Department  
files



6/22

Norma -  
Please assign  
STTD + transfer  
to LOP

DATE: 6/22  
TO : Local Oversight Program  
FROM: Scott  
SUBJ: Transfer of Eligible Local Oversight Case

# 3583

Site name: Windsor Square Auto Service  
Address: 1700 Lewelling Blvd city S. Leandro zip 94579

TO BE ELLIGIBLE FOR LOP A CASE MUST MEET 3 QUALIFICATIONS:

- 1. Number of Tanks: 1 removed?  Y N Date of removal 9-25-90
- 2. Samples received?  Y N Contamination level: > 4500 ppm TOG  
(ppm and type of test)

Contamination should be over 100 ppm TPH to qualify for LOP

- 3. Petroleum Y N Types: Avgas Jet leded unleaded Diesel  
fuel oil waste oil kerosene solvents
- DepRef remaining \$ NA Closed with Candace/Leslie? Y N  
(If no explain why?)

IF YOUR SITE MEETS ALL OF THE ABOVE QUALIFICATIONS YOU SHOULD DO THE FOLLOWING TO TRANSFER THE SITE:

- 1. YOU MUST CLOSE THE DEPOSIT REFUND CASE AT THIS TIME. YOU MUST ACCOUNT FOR ALL TIME YOU HAVE SPENT ON THE CASE AND TURN IN THE ACCOUNT SHEET TO LESLIE. IF THERE ARE FUNDS STILL REMAINING IT IS STILL BETTER TO TRANSFER THE CASE TO LOP AS THE RATE FOR LOP ALLOWS THE ADDITION OF MANAGEMENT AND CLERICAL TIME. DO NOT ATTEMPT TO CONTINUE TO OVERSEE THE SITE SIMPLY BECAUSE THERE ARE FUNDS REMAINING!
- 2. COMPLETE THE A AND B PERMIT APPLICATION FORMS AND GIVE TO CONNIE/ELAINE
- 3. GIVE THE ENTIRE CASE TO THE PROPER LOP STAFF UPSTAIRS FOR THEM TO DO THE REST OF THE TRANSFER AND YOU ARE DONE!

prop. owner  
Johnny T. & Amy Lin  
P.O. Box 4154  
S. Leandro 94579

REPRODUCTIVE TOXICANTS

Aminopterin	54626	July 1, 1987
Chlorcyclizine hydrochloride	82939	July 1, 1987
1,2-Dibromo-3-chloropropane (DBCP)	96128	February 27, 1987
Diethylstilbestrol (DES)	56531	July 1, 1987
Diphenylhydantoin	630933	July 1, 1987
Ethyl alcohol in alcoholic beverages	64175	October 1, 1987
Ethylene oxide	75218	February 27, 1987
Etretinate	54350480	July 1, 1987
Isotretinoin	4759482	July 1, 1987
Lead	---	February 27, 1987
Methyl mercury	---	July 1, 1987
Thalidomide	50351	July 1, 1987
Valproate	99661	July 1, 1987
Warfarin	81812	July 1, 1987

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE.
REPORT DATE Jul 31 10 6 9 2	CASE #	SIGNED: <i>Karl Busche</i> DATE: 7-16-92

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT KARL Busche	PHONE (510) 577-3341	SIGNATURE <i>K. Busche</i>	
	REPRESENTING <input checked="" type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER	COMPANY OR AGENCY NAME Fire Department, SAN LEANDRO		
	ADDRESS 835 E. 14th STREET SAN LEANDRO CITY CA STATE 94577			

RESPONSIBLE PARTY	NAME Johnny Lin <input type="checkbox"/> UNKNOWN	CONTACT PERSON Johnny Lin	PHONE (415) 352-5422
	ADDRESS P.O. Box 4154 STREET CITY SAN LEANDRO STATE CA 94577		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Windsor Square Auto Service	OPERATOR Johnny Lin	PHONE (415) 352-5422	
	ADDRESS 1900 LEWELING BLVD STREET CITY SAN LEANDRO, Alameda COUNTY CA 94579			
	CROSS STREET			

IMPLEMENTING AGENCIES	LOCAL AGENCY Fire Department	AGENCY NAME	CONTACT PERSON M. Bakoldin	PHONE (510) 577-3331
	REGIONAL BOARD Alameda County	CONTACT PERSON Eddy SO.		PHONE (510) 964-4300

SUBSTANCES INVOLVED	(1) NAME waste oil TANK	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2)	<input type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED unknown	HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER		
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input checked="" type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> OTHER		
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE			

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER
--------------	---	--

CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
-----------	--

CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input checked="" type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY
----------------	--

REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS)	<input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT)	<input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS)
	<input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS)	<input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT)	

COMMENTS	(Empty field for additional comments)
----------	---------------------------------------

white -env.health  
 yellow -facility  
 pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

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

## Hazardous Materials Division Inspection Form

Site ID# \_\_\_\_\_ Site Name Johnny Lin Auto Repair Today's Date 1/24/91  
 Site Address 1900 Lowelling Blvd. EPA ID# \_\_\_\_\_  
 City San Leandro Zip 94 Phone \_\_\_\_\_

MAX Amt. Stored > 500lbs/55g/200cf? Y N  
 Hazardous Waste generated per month?  
 \_\_\_\_\_

- Inspection Categories:**
- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
  - II. Business Plans, Acute Hazardous Materials
  - III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

**I.A. GENERATOR (Title 22)**

- \_\_\_ 1. Waste ID \* 66471
- \_\_\_ 2. EPA ID 66472
- \_\_\_ 3. > 90 days 66508
- \_\_\_ 4. Label dates 66508
- \_\_\_ 5. Biennial 66493
- \_\_\_ 6. Records 66492
- \_\_\_ 7. Correct 66484
- \_\_\_ 8. Copy sent 66492
- \_\_\_ 9. Exception 66484
- \_\_\_ 10. Copies Rec'd 66492
- \_\_\_ 11. Treatment 66371
- \_\_\_ 12. On-site Disp. (H.S.&C.) 26189.5
- \_\_\_ 13. Ex Haz. Waste 66570
- \_\_\_ 14. Communications 67121
- \_\_\_ 15. Aisle Space 67124
- \_\_\_ 16. Local Authority 67126
- \_\_\_ 17. Maintenance 67120
- \_\_\_ 18. Training 67105
- \_\_\_ 19. Prepared 67140
- \_\_\_ 20. Name List 67141
- \_\_\_ 21. Copies 67141
- \_\_\_ 22. Emg. Coord. Trng. 67144
- \_\_\_ 23. Condition 67241
- \_\_\_ 24. Compatibility 67242
- \_\_\_ 25. Maintenance 67243
- \_\_\_ 26. Inspection 67244
- \_\_\_ 27. Buffer Zone 67246
- \_\_\_ 28. Tank Inspection 67259
- \_\_\_ 29. Containment 67245
- \_\_\_ 30. Safe Storage 67261
- \_\_\_ 31. Freeboard 67257

**Comments:**

1. Observed soil sampling & screening with ~~haz~~ hnw water. Hot. James E. Gribi of Century West Engineering 551-1174 doing screening. Over excavation between samples.

2:31pm  
 552  
 9'

1:10pm sample 1:21pm sample  
 8' depth 9' depth  
 25 hnw meter reading  
 1:30pm '6

Bldg  
 Johnny  
 Lin  
 Auto  
 Repair

Excavation

Sampler going to Century Testing of Bend, OR.

1:58pm hnw sample  
 ← 1 → and  
 Lab sample  
 labeled "55-1"  
 by J. Gribi

BIO - remediate area

↑  
 N

**I.B. TRANSPORTER (Title 22)**

- \_\_\_ 32. Applic./Insurance 66428
- \_\_\_ 33. Comp. Cert./CHP Inso. 66448
- \_\_\_ 34. Containers 66465
- \_\_\_ 35. Vehicles 66465
- \_\_\_ 36. EPA ID #s 66531
- \_\_\_ 37. Correct 66541
- \_\_\_ 38. HW Delivery 66543
- \_\_\_ 39. Records 66544
- \_\_\_ 40. Name/ Covers 66545
- \_\_\_ 41. Recyclables 66800

Rev 6/88

Contact: James E. Gribi Century West Engineering  
 Title: Project Manager  
 Signature: \_\_\_\_\_  
 Inspector: William F. Faulhaber  
 Signature: \_\_\_\_\_

900 Lewelling  
San Leandro

7950 Dublin Blvd.  
Suite 210  
Dublin, CA 94568  
(415) 551-7774  
FAX (415) 551-7776

Engineers and Scientists

# FACSIMILE TRANSMITTAL

Date: 1/15

File No: 2050700101

To: Bill Faulhaber  
Alameda Co Dept of ENV. Health

415/568-3706

Jim Gribi

776

Pages (including this transmittal): 6

DATE

Please call if you have questions.  
Otherwise I will call you Weds. 1/16.  
Jim

15-91 TUE 11 8

# CENTURY WEST ENGINEERING

January 14, 1991

Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
80 Swan Way, Suite 200  
Oakland, CA 94621

subject: Waste Oil UST Soil Excavation and Remediation  
1900 Lewelling Boulevard Site  
San Leandro, California

Dear Mr. Faulhaber:

Pursuant to our recent phone conversations, Century West is submitting this letter which describes the planned excavation and remediation activities to be carried out at the subject site. We are submitting this letter on behalf of Mr. Johnny Lin, the site owner. The purpose of the activities described in this letter is to remove and remediate on-site hydrocarbon laden soil that was discovered by Veri's Construction, Inc. (VCI) during the recent removal of one waste oil UST at the subject site. Century West will work with VCI to complete this project.

## Background

Our understanding of the subject site is as follows:

- One 200-gallon waste oil underground storage tank (UST) was removed at the subject site by VCI in October 1990. One soil sample was taken of soil below the UST and contained volatile organic compounds, polynuclear aromatics, and chlorinated hydrocarbons.
- Ground water was not encountered during the UST excavation.
- The Alameda County Environmental Health Department was present during UST removal activities and is aware of the level of hydrocarbon compounds found. The Alameda County Environmental Health, acting under Regional Air Quality Control Board, will require that remediation activities be conducted at the site.

Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
January 14, 1991  
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## Approach

The most important step in cleaning up this site is to remove all contaminated soil above ground water. Because contamination from a leaking UST generally moves from the UST down to ground water, removal of the UST and associated contaminated soil above ground water effectively arrests the downward migration of these fuel products. Because of the high level of contaminants in the soil, off-site disposal of these soils would involve hauling the soil to a Class I (hazardous substances) landfill at considerable cost (in excess of \$200 per ton). Therefore, on-site treatment of these soils appears to be the least costly option for remediating the soil.

Because the stockpiled soil on-site appears to contain only hydrocarbon contaminants (based on chemical test results conducted during the UST removal), we believe a process involving aeration and microbial biodegradation can be used to reduce these contaminant levels in the excavated soil. This process is similar to composting and involves mixing the soil with nutrients such as manure, nitrogen, and phosphorus, and allowing naturally occurring hydrocarbon-consuming microbial populations to reduce the hydrocarbon contaminants in the soil to significantly lower levels, possibly to undetectable levels. After the soil is treated by this process, it can either be hauled to a Class II (designated waste) landfill or used to fill the UST excavation.

## Scope of Work

Century West will work closely with Veri's Construction, Inc. (VCI) during the soil excavation and remediation activities. Century West will not be responsible for any site safety or building settling issues or any other construction related issues. In order to satisfactorily complete the excavation and remediation activities, Century West will perform the following tasks:

- Task 1: Regulatory Guidance and Planning. Century West will provide regulatory guidance to Johnny Lin and VCI sufficient to obtain excavation and remediation of accessible contaminated soil. Regulatory guidance will include advice on state and local (i.e. Alameda County Environmental Health Department) regulatory requirements.
- Task 2: Soil Excavation and Remediation Monitoring. During excavation activities, Century West will monitor and record the work progress. In addition to site observation, Century West will monitor organic vapors using

a portable Photoionization Detector (PID). Century West will log each excavation pit, recording the following data: (1) Soil types by Unified Soil Classification; (2) Stratigraphic relationships (i.e. layering) of soil units, wherever possible; (3) Presence or absence of contamination using sight, smell and PID; and (4) Presence or absence of ground water. In addition, Century West will provide photos that document the excavation and remediation activities.

After excavating the UST pit to a maximum of 8 feet by 12 feet by 9 feet deep, Century West will conduct a soil gas survey of the excavation pit using a portable PID. If the soil gas survey indicates the presence of contamination in the excavation, then additional excavation beyond the scope of this proposal may be required and Century West will consult with Mr. Lin. If the soil gas survey indicates that all contamination has been removed, then Century West will collect two soil samples, one at each end of the pit at or near the pit bottom. All soil samples will be collected using State-approved methods.

VCI will mix the excavated soil with manure and nutrients and place it on a 30-foot by 25-foot remediation pad. VCI will construct this remediation pad in the following manner: (1) Visqueen will be spread out on the asphalt parking area; (2) Timbers will be placed around the visqueen as a berm; (3) Approximately 12 tons of clean sand will be spread evenly on the visqueen; (4) The mixture of soil, manure, and nutrients will be spread evenly on top of the sand layer; and (5) Plastic sheeting will be used to cover the remediation pad. During the remediation, the soil will be tilled and sprayed to supply oxygen and water.

The purpose of on-site biodegradation and aeration is to reduce gasoline constituents in the soil to 100 ppm or less. This should enable the excavated soil to be used to backfill the excavation or disposed to a Class II or Class III landfill at least cost. The biodegradation and aeration process is dependant principally on: (1) initial concentrations of hydrocarbon constituents in the soil; (2) indigenous microbial populations in the soil; and (3) ambient weather conditions such as temperature, humidity, and wind speed. Because these factors are not known at this time, the time period required for complete soil remediation can not be predicted. However, for the purposes of this proposal, we will assume that the remediation process will be completed in a three-month period. During the three-month life of the remediation phase, Century



Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
January 14, 1991  
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West will take one soil sample each month, for a total of three samples. These samples will be used to assess the effectiveness of the remediation effort.

- Task 3: Chemical Testing of Soil Samples. During Task 2, Century West will test a total of six soil samples as follows:
  - Two soil samples taken at opposite ends of the excavation pit to verify the level of cleanup will be analyzed for the following constituents:
    1. Total Petroleum Hydrocarbons-Diesel
    2. Total Petroleum Hydrocarbons-Gasoline
    3. Benzene, Toluene, Xylenes and Ethylbenzene
    4. Semivolatile Organic Compounds
    5. Chlorinated Hydrocarbons
  - Two samples of the excavated soil to be remediated. One of these will be taken at the beginning of the remediation process and the other will be taken after the remediation has run for approximately three months. Each of these two samples will be tested for the following constituents:
    1. Total Petroleum Hydrocarbons-Diesel
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  - Two samples of excavated soil. One of these will be taken after the remediation has run for one month and the other will be taken after the remediation has run for two months. Each of these samples will be analyzed for hydrocarbon identification. This analysis is not as comprehensive as the suite of analyses listed above; however, this test will provide key information about the effectiveness of the remediation at a lower cost.
- Task 4: Prepare Report of Findings. Century West will prepare a report that documents the excavation and remediation activities at the subject site. This report will present the analytical results of all soil and water samples analyzed and will summarize the effectiveness of the soil cleanup effort. This report will be prepared for submittal to the Alameda County Environmental Health

Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
January 14, 1991  
Page 5

Department.

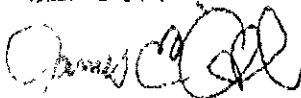
**Project Schedule**

Mr. L. would like to begin this project on Thursday, January 17, 1990. We will contact you prior to conducting excavation of the waste oil UST so that you can be present if you wish. Unless we hear from you beforehand, we will assume that the tasks outlined above meet with your approval.

We appreciate this opportunity to present this approach for your consideration. Please contact us if there are any questions or if additional information is needed.

Very truly yours,

CENTURY WEST ENGINEERING



James E. Gribi  
Staff Geologist



David R. Yogi, Jr., RCE  
Project Manager

JEG/DRY:ct

cc: Veri's Construction, Inc.  
Mr. Johnny Lin

# CENTURY WEST ENGINEERING

January 14, 1991

91 JAN 17 AM 11:29

Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
80 Swan Way, Suite 200  
Oakland, CA 94621

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San Leandro, California

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Ground water was not encountered during the UST excavation.

The Alameda County Environmental Health Department was present during UST removal activities and is aware of the level of hydrocarbon compounds found in the soil. The Alameda County Environmental Health, acting under the direction of the Regional Water Quality Control Board, will require that additional site assessment and remediation be conducted at the site.

Phone call: 1-18-91 11:30 am  
I agreed to send Mr. Gajigas  
OK to overexcavate. I will  
resample soil. County dept  
requires groundwater monitoring  
& documentation on  
imported fill.

copy to owner + CWC  
& Johnny Lin PO Box 4154  
San Leandro CA  
94579

1-24-91 visit  
watched overexcavation  
and sampling. work

called Jim Griebi 2-8-91

VCI Company  
"Bob" was operator of  
back hoe on 1-24-91

Bacteria Culture  
Added by VCI

Pit South Side  
TPHE 200 PPM  
TPHE 600 PPM  
BTEX  
D=19 T=230  
Pit North Side  
TPHE 1-24-91  
TPHE D ND (< 1ppm)  
BTEX ND (ass)  
Halogenated N=ND S=5ppb  
30  
\$240  
\$270 Sem Vol  
\$4700 Ppb dr-n-butyl hydroc  
N 4400 bis-2-ethylhexyl hydroc  
plastic bags  
\$240 Halogenated N=ND S=5ppb  
30  
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Mr. Bill Faulhaber  
Alameda Co. Dept. of Environmental Health  
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January 14, 1991  
Page 3

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Alameda Co. Dept. of Environmental Health  
January 14, 1991  
Page 5

Department.

**Project Schedule**

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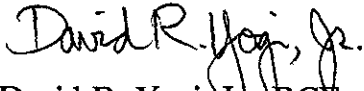
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Very truly yours,

CENTURY WEST ENGINEERING



James E. Gribi  
Staff Geologist



David R. Yogi, Jr., RCE  
Project Manager

JEG/DRY:ct

cc: Verl's Construction, Inc.  
Mr. Johnny Lin

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE.	CASE NO. <b>1410-52</b> REPORT DATE: <b>1st 1st 2d 7d 9d CV</b>
SIGNED: <i>Michael R. Bahaldin</i>		DATE: <b>11/27/94</b>	

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT <b>Michael Bahaldin</b>	PHONE <b>(415) 577-3331</b>	SIGNATURE <i>Michael Bahaldin</i>	
	REPRESENTING <input checked="" type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OTHER	COMPANY OR AGENCY NAME <b>San Leandro F.D.</b>		
	ADDRESS <b>835 E. 14th St. San Leandro CA 94577</b>			

RESPONSIBLE PARTY	NAME <b>Johnny Lin</b> <input type="checkbox"/> UNKNOWN	CONTACT PERSON ←	PHONE <b>(415) 352-5477</b>
	ADDRESS <b>P.O. Box 4154 San Leandro CA 94579</b>		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) <b>Windsor Square</b>	OPERATOR ( )	PHONE ( )	
	ADDRESS <b>1900 Lowelling Blvd. San Leandro CA 94579</b>			
	CROSS STREET <b>Wicks</b>			

IMPLEMENTING AGENCIES	LOCAL AGENCY <b>San Leandro F.D.</b>	CONTACT PERSON <b>M. Bahaldin</b>	PHONE <b>(415) 577-3331</b>
	REGIONAL BOARD <b>San Francisco Bay</b>	CONTACT PERSON <b>S. Luquire</b>	PHONE <b>(415) 464-4222</b>

SUBSTANCES INVOLVED	(1) NAME <b>Waste Oil</b>	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2)	<input type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED <b>1st 10th 1d 8d 9d y 0 y</b>	HOW DISCOVERED <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER
	DATE DISCHARGE BEGAN <input checked="" type="checkbox"/> UNKNOWN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> REMOVE CONTENTS <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> CLOSE TANK <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> CHANGE PROCEDURE <input checked="" type="checkbox"/> OTHER <b>Remove tank</b>
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE	

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER
--------------	---	--

CASE TYPE	CHECK ONE ONLY <input checked="" type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
-----------	--

CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY
----------------	---

REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> VACUUM EXTRACT (VE)	<input type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> OTHER (OT)	<input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> TREATMENT AT HOOKUP (HU)	<input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> VENT SOIL (VS)
-----------------	--	---	--	---

COMMENTS	(Empty space for additional notes)
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white -env.health  
 yellow -facility  
 pink -files

# ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

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

## Hazardous Materials Division Inspection Form

Site ID# \_\_\_\_\_ Site Name Windsor Square Auto Service Today's Date 11/14/90  
 Site Address 1900 Lewelling Blvd. EPA ID# \_\_\_\_\_  
 City San Leandro Zip 94577 Phone \_\_\_\_\_

MAX Amt. Stored > 500lbs/55g/200cf?  Y  N  
 Hazardous Waste generated per month? \_\_\_\_\_

### Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

The marked items represent violations of the Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

### I.A GENERATOR (Title 22)

- |                   |                             |         |
|-------------------|-----------------------------|---------|
| Manifest          | 1. Waste ID                 | * 66471 |
|                   | 2. EPA ID                   | 66472   |
|                   | 3. > 90 days                | 66508   |
|                   | 4. Label dates              | 66508   |
|                   | 5. Biennial                 | 66493   |
| Manifest          | 6. Records                  | 66492   |
|                   | 7. Correct                  | 66484   |
|                   | 8. Copy sent                | 66492   |
|                   | 9. Exception                | 66484   |
|                   | 10. Copies Rec'd            | 66492   |
| Misc.             | 11. Treatment               | 66371   |
|                   | 12. On-site Disp. (H.S.&C.) | 26189.5 |
|                   | 13. Ex Haz. Waste           | 66570   |
| Prevention        | 14. Communications          | 67121   |
|                   | 15. Aisle Space             | 67124   |
|                   | 16. Local Authority         | 67126   |
|                   | 17. Maintenance             | 67120   |
|                   | 18. Training                | 67105   |
| Confil. gency     | 19. Prepared                | 67140   |
|                   | 20. Name List               | 67141   |
|                   | 21. Copies                  | 67141   |
|                   | 22. Emg. Coord. Trng.       | 67144   |
| Containers, Tanks | 23. Condition               | 67241   |
|                   | 24. Compatibility           | 67242   |
|                   | 25. Maintenance             | 67243   |
|                   | 26. Inspection              | 67244   |
|                   | 27. Buffer Zone             | 67246   |
|                   | 28. Tank inspection         | 67259   |
|                   | 29. Containment             | 67245   |
|                   | 30. Safe Storage            | 67261   |
|                   | 31. Freeboard               | 67257   |

### Comments:

1. UST removed. 285 gallon waste oil tank removed Sept. 25-26, 1990. All procedures at time of removal routine. Mike Bakaladin of SLFD observed.  
 2. Pit reportedly left open.  
 3. Observed the following:  
 a) tank pit open, but fenced.  
 b) some oily looking soil near bottom of pit. Could not verify that it was actually soil because of the fence.  
 c) Tank gone.  
 d) Mechanic estimated tank was pulled one month ago.  
 4. EGC & Veris Construction are contractors.  
 5. EGC report (soil) 5ppm oil & grease  
 8ppm xylenes  
 0.2ppm 1,1,1-trichloro.  
 0.2ppm tetrachloroethane  
 15ppm Lead

### I.B TRANSPORTER (Title 22)

- |          |                           |       |
|----------|---------------------------|-------|
| Manifest | 32. Applic./insurance     | 66428 |
|          | 33. Comp. Cert./CHP insp. | 66448 |
|          | 34. Containers            | 66465 |
| Manifest | 35. Vehicles              | 66465 |
|          | 36. EPA ID #s             | 66531 |
|          | 37. Correct               | 66541 |
|          | 38. HW Delivery           | 66543 |
|          | 39. Records               | 66544 |
| Cont'ns  | 40. Name/ Covers          | 66545 |
|          | 41. Recyclables           | 66800 |

rev 6/88

Contact: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Signature: \_\_\_\_\_

Inspector: William F. Faulhaber  
 Signature: William F. Faulhaber



**ENVIRONMENTAL SERVICES**

(DIVISION OF H & H SHIP SERVICE CO., INC.)

CERTIFICATE OF DISPOSAL

OCTOBER 01, 1990

H & H Ship Service Company hereby certifies to VERL'S CONSTRUCTION

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

removed from the WINDSOR SQUARE  
1900 LEWELLING BOULEVARD  
SAN LEANDRO, CALIFORNIA

were transported to H & H Ship Service Company, 220 China Basin St., San Francisco, California 94107.

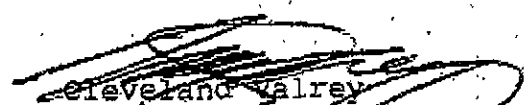
2. The following tank(s), H & H Job Number 6024  
have been steamed cleaned, cut with approximately 2' X 2' holes, rendered harmless and disposed of as scrap metal.

3. Disposal site: SCHNITZER STEEL, OAKLAND, CALIFORNIA.

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

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

Very Truly Yours,

  
Cleveland Valrey  
Operations Coordinator

220 CHINA BASIN • SAN FRANCISCO, CA 94107 • DAY AND NIGHT: 543-4835

CC: S-10000  
MILWAUKEE  
WISCONSIN



**UNIFORM HAZARDOUS WASTE MANIFEST**

1. Generator's US EPA ID No. **CAC00005160000000001** Manifest Document No. **000001**

2. Page 1 of 1 Information in the shaded areas is not required by Federal law.

3. Generator's Name and Mailing Address  
**JOHN LIN**  
**PO BOX 4154, SAN LEANDRO, CALIFORNIA. 94579**

A. State Manifest Document Number **90389056**  
 B. State Generator's ID

4. Generator's Phone (415) **352-8598**

5. Transporter 1 Company Name **H & H Ship Service Company** 6. US EPA ID Number **CAD0004771168**

C. State Transporter's ID **103588**  
 D. Transporter's Phone **(415) 543-4835**  
 E. State Transporter's ID  
 F. Transporter's Phone

7. Transporter 2 Company Name 8. US EPA ID Number

9. Designated Facility Name and Site Address  
**H & H Ship Service Company**  
**220 China Basin Street**  
**San Francisco, CA 94107**

G. State Facility's ID **CAD0004771168**  
 H. Facility's Phone **(415) 543-4835**

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

12. Containers No. Type 13. Total Quantity 14. Unit Wt/Vol 15. Waste No.

a. **RESIDUE WASTE OIL TANK**  
**NON RCRA HAZARDOUS WASTE SOLID**

**0,0,1 T/P 0,0,5,5,0 P** State **512**  
 EPA/Other

b.

State EPA/Other

c.

State EPA/Other

d.

State EPA/Other

J. Additional Descriptions for Materials Listed Above  
**PUMPED OUT 1-550 GALLON WASTE OIL TANK.**  
**TANK INERTED WITH DRY ICE FOR TRANSPORT**

K. Handling Codes for Wastes Listed Above  
 a. **01** b.  
 c. d.

15. Special Handling Instructions and Additional Information  
**APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR JOB SITE: WINDSOR SQUARE**  
**1900 LEWELLING BLVD**  
**JOB # 6024 SAN LEANDRO, CA**

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.  
 If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name **JOHN LIN** Signature **[Signature]** Month Day Year **09, 26, 90**

17. Transporter 1 Acknowledgement of Receipt of Materials  
 Printed/Typed Name **WAYMON H. MC DONALD** Signature **[Signature]** Month Day Year **09, 26, 90**

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 **09, 26, 90**

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802, WITHIN CALIFORNIA CALL 1-800-952-7650