

HK2, INC./SEMCO

1751 LESLIE STREET • SAN MATEO, CA 94402 • (415) 572-8033 • (415) 572-9734 FAX

GENERAL ENGINEERING & ENVIRONMENTAL CONTRACTORS LICENSE No. 719103 (A, B, C57, C61, D40, HAZ, ASB)

October 11, 1996

ref: 96-0234

Juliet Shin
Alameda County
Department of Environmental Health
1131 Harbor Bay Parkway
Alameda, California 94502
(510) 567-6700 phone
(510) 337-9335 fax

re: Home heating oil tank removal at 743 Santa Clara Avenue, Alameda, California.

Dear Ms. Juliet Shin,

Enclosed is the tank removal report for the site referenced above. Please let us know if you have any questions.

Sincerely,

HK2, Inc./SEMCO



Mark Dysert
Environmental Specialist

cc: William Sheehan

ENVIRONMENTAL
PROTECTION

96 OCT 16 PM 12: 58

Tank Removal Report

Site Location:

**743 Santa Clara Avenue
Alameda, California**

Prepared For:

**William Sheehan
1236 Bay Street
Alameda, California 94501
(510) 522-0978**

Submitted To:

**Juliet Shin
Alameda County
Department of Environmental Health
1131 Harbor Bar Parkway, Suite 250
Alameda, California 94502-6577
(510) 567-6700 Phone
(510) 337-9335 Fax**

Prepared By:

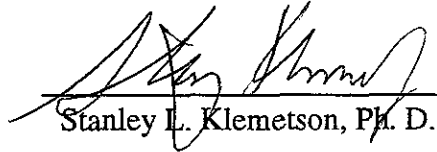
**SEMCO/HK2, Inc.
1751 Leslie Street
San Mateo, California 94402
(415) 572-8033 Phone
(415) 572-9734 Fax**

Job # 96-0234

CERTIFICATION

This report was prepared by HK2, Inc./SEMCO under the professional direction and review of the person whose name and seal are shown below.

The recommendations and professional opinions presented herein, are within the limits prescribed by the client and were prepared in accordance with generally accepted professional engineering and industrial hygiene practices. There is no other warranty either expressed or implied.


Stanley L. Klemetson, Ph. D., P.E.



Tank Removal Report
743 Santa Clara Avenue
Alameda, California 94501

SEMCO/HK2, Inc. was contracted by William Sheehan to remove one (1) home heating oil tank, with a storage capacity of 1500 gallons, from the residential site located at 743 Santa Clara Avenue, Alameda, California. The underground storage tank (UST) was thought to be installed in 1929. This report covers the tank removal and soil sampling activities.

On Monday September 16, 1996 HK2, Inc. removed the concrete surface in order to gain access to the tank. The soil was removed from the top and along one side of the tank and stockpiled on site. The tank was previously filled in place. The tank had to be cut open utilizing a pneumatic cutter in order to gain access to the tank's contents. The tank was filled with concrete and also contained approximately 65 gallons of oil and water. The concrete was removed from the tank and stockpiled on site. The oil and water was pumped into two (2) 55 gallon drums for disposal.

On Tuesday September 17, 1996 the tank was inerted with 50 lbs. of solid carbon dioxide (dry ice) until acceptable levels of oxygen and lower explosive limits were reached to meet safety requirements.

Juliet Shin of Alameda County Department of Environmental Health and Captain McKinley of the Alameda Fire Department were both on site to verify the tank readings witness the tank removal, loading and sampling activities.

The UST showed signs of corrosion and pitting. There was at least two (2) holes noted in the tank approximately 1/4" in size. One hole was noted in the south end of the tank and one hole was noted in the bottom of the tank. The soil was sandy. The excavation was stained with a strong petroleum odor.

The tank was then loaded onto Dexanna Ltd. and transported to Erickson, Inc for disposal under manifest number 95269994.

Three (3) soil-samples were collected. The former tank bottom was at 7' below ground surface (bgs). Sample #1-1500-D@9' WEST was collected from the west end of the excavation at 9' bgs. Sample #2-1500-D@9' EAST was collected from the east end of the excavation at 9' bgs. Sample SP-COMP, a four part composite sample, was collected from the excavated material.

All soil samples were collected in clean brass tubes, which were sealed with Teflon tape, pre-fomed plastic end caps and masking tape. The samples were properly labeled and entered onto a chain of custody and placed in an iced cooler for transportation to North

State Environmental for the analysis of TPH-d and BTEX. Analytical results are presented in the appendix.

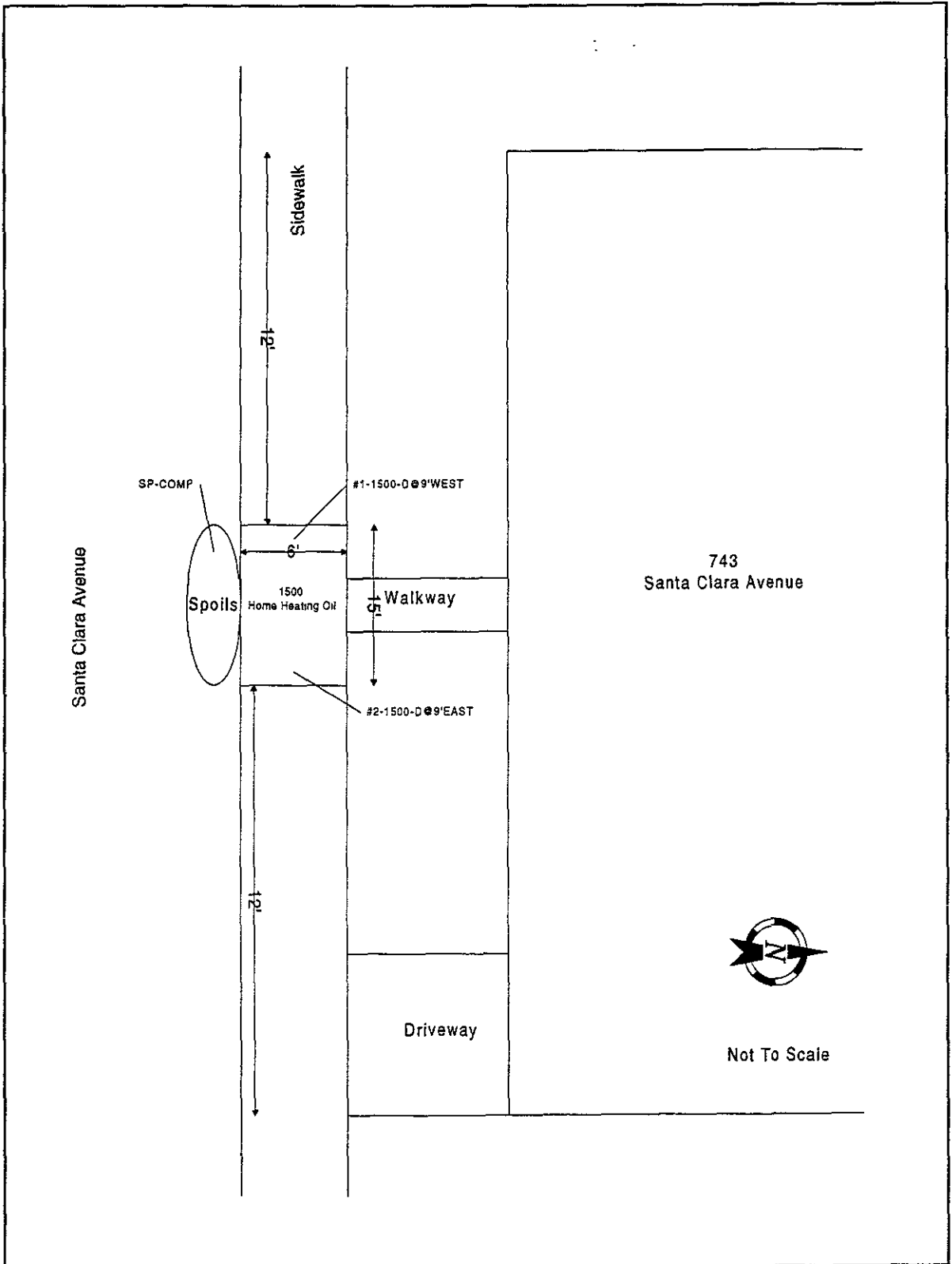
The excavation was lined with visqueen. Excavated material was placed back in the excavation and covered with visqueen. Clean fill material was placed on top of the visqueen and brought up to grade.

On September 20, 1996 a total of 65 gallons of oil and water was removed from the two (2) 55 gallon drums by Evergreen Environmental Services and transported for disposal under manifest number 96178378.

The concrete from the tank was disposed of at Bay Area Soil under a non-hazardous manifest 020020.

An unauthorized leak report was filed with your office on September 24, 1996.

This report was prepared from field technicians worksheets, inspector's field notes and analytical data pertaining to this site.



Site layout and soil sampling locations.

Appendix



North State Environmental Analytical Laboratory

Chain of Custody/Request for Analysis 96-670

(415) 588-9652

Client: <u>HK2, Inc.</u>		Phone: <u>(415) 572-8033</u>		Report to: <u>HK2, Inc.</u>				Turnaround Time			
Mailing Address: <u>1751 Leslie Street San Mateo CA 94402</u>				Billing to: <u>HK2, Inc.</u>				8 Hr <input type="checkbox"/>	24 Hr <input checked="" type="checkbox"/>		
Site Address: <u>743 Santa Clara Ave. Alameda</u>				PO# / Billing Reference: <u>#96-0234</u>				40 Hr <input type="checkbox"/>	5 Days <input type="checkbox"/>		
Sampler: <u>Mark Dysert</u>		Date: <u>9/17/96</u>						Other <input type="checkbox"/>			
Sample ID:	Sample Description	Container # / type	Sampling Time/Date	ANALYSIS REQUESTED							Remarks
				TPH-D	TPH-G	BTEX	O+G				
-1 #1-1500	D 09' WEST SOIL	1 BRASS	9/17 / 12:00	X		X					
-2 #2-1500	D 09' EAST SOIL	1 BRASS	9/17 / 12:15	X		X					
-3 JP-COMP-1	} COMP SOIL	1 BRASS	9/17 / 12:30	X		X				} COMP	
-2		1 BRASS	9/17 12:30	X		X					
-3		1 BRASS	9/17 12:30	X		X					
-4		1 BRASS	9/17 12:30	X		X					
						6 Brass					
Relinquished by: <u>Muel Quint</u>		Date: <u>9/17</u> Time: <u>3:00</u>		Received by: <u>Edward L. Ciment</u>				Yes <input type="checkbox"/> No <input type="checkbox"/>			
Relinquished by: _____		Date: _____ Time: _____		Received by: _____				Were samples Preserved ? <input type="checkbox"/> <u>Yes</u>			
Relinquished by: _____		Date: _____ Time: _____		Received in lab by: _____				In good condition ? <input checked="" type="checkbox"/>			



North State Environmental
Chemical Waste Disposal • Trucking • Consulting

CERTIFICATE OF ANALYSIS

Lab No: 96-670 Date Sampled: 09-17-96
Client: Semco Date Analyzed: 09-18-96
Project: 743 Santa Clara Date Reported: 09-19-96

Benzene, Toluene, Ethylbenzene and Xylenes by Method 8020
Diesel range hydrocarbons by EPA method 8015M

SAMPLE NO	CLIENT ID	ANALYTE	METHOD	RESULT
96-670-01	#1-1500-D @9' WEST SOIL	Benzene	8020	0.017 mg/Kg
		Toluene	8020	0.029 mg/Kg
		Ethylbenzene	8020	0.110 mg/Kg
		Xylenes	8020	0.110 mg/Kg
		Diesel	8015M	4400 mg/Kg
96-670-02	#2-1500-D @9' EAST SOIL	Benzene	8020	ND
		Toluene	8020	0.007 mg/Kg
		Ethylbenzene	8020	0.008 mg/Kg
		Xylenes	8020	0.04 mg/Kg
		Diesel	8015M	18 mg/Kg
96-670-03	SP-COMP 1,2,3,4 SOIL	Benzene	8020	ND
		Toluene	8020	ND
		Ethylbenzene	8020	ND
		Xylenes	8020	ND
		Diesel	8015M	24 mg/Kg

Quality Control/Quality Assurance Summary-Soil

Analyte	Method	Reporting Limit	Blank	MS/MSD Recovery	RPD
Benzene	8020	0.005 mg/Kg	ND	73	15
Toluene	8020	0.005 mg/Kg	ND	95	10
Ethylbenzene	8020	0.005 mg/Kg	ND	108	3
Xylenes	8020	0.010 mg/Kg	ND	83	36
Diesel	8015M	1 mg/Kg	ND	88	1

ELAP Certificate NO: 1753

Reviewed and Approved:


John A. Murphy, Laboratory Director

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 HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM. SIGNED: _____ DATE: _____	
REPORT DATE 09/24/96		CASE # #96-0239			
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Mark Dyser		PHONE (415) 572-8033	SIGNATURE <i>Mark Dyser</i>	
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input checked="" type="checkbox"/> OTHER <u>CONTRACTOR</u>		COMPANY OR AGENCY NAME <u>SEMCO / HK2, Inc.</u>		
	ADDRESS <u>1751 Leslie St. San Mateo CA 94402</u>				
RESPONSIBLE PARTY	NAME William Sheehan <input type="checkbox"/> UNKNOWN		CONTACT PERSON SAME	PHONE (510) 522-0978	
	ADDRESS <u>1236 Bay St. Alameda CA 94501</u>				
SITE LOCATION	FACILITY NAME (IF APPLICABLE) Residence		OPERATOR N/A	PHONE () N/A	
	ADDRESS <u>743 Santa Clara Ave Alameda CA 94501</u>				
	CROSS STREET <u>Page St.</u>				
IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Dept. of Environmental Health		CONTACT PERSON Juliet Shin	PHONE (510) 567-6763	
	REGIONAL BOARD Regional Water Quality Board		CONTACT PERSON Diane Minus	PHONE (510) 286-1255	
SUBSTANCES INVOLVED	(1) NAME Home Heating Oil			QUANTITY LOST (GALLONS) _____ <input type="checkbox"/> UNKNOWN	
	(2) _____ <input type="checkbox"/> UNKNOWN				
DISCOVERY/ABATEMENT	DATE DISCOVERED 09/16/96		HOW DISCOVERED <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <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 checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER _____		
	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 _____		
	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 checked="" 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				
	CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS) <input type="checkbox"/> CAP SITE (CD) <input type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (BT) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input checked="" type="checkbox"/> OTHER (OT) <u>NO ACTION TAKEN</u>				
COMMENTS					

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
 DEPARTMENT OF ENVIRONMENTAL HEALTH
 ENVIRONMENTAL PROTECTION DIVISION
 1131 HARBOR BAY PARKWAY, RM 250
 ALAMEDA, CA 94502-6577
 PHONE # 510/567-6700
 FAX # 510/337-9335

7/23/96
 Project Specialist
 Please comply by adding your comment in red ink. Please notify the office at least one week in advance of their removal.

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Hazardous Materials
 1131 Harbor Bay Parkway, Suite 250
 Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction/abatement.

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

Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspectors. Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

- _____ Removal of Tank(s) and Piping
- _____ Grouting
- _____ Final Inspection

Issuance of a permit to operate, b) permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS

Contact Specialist:

UNDERGROUND TANK CLOSURE PLAN

* * * Complete according to attached instructions * * *

1. Name of Business Confidential
 Business Owner or Contact Person (PRINT) William Sheehan
2. Site Address 743 Santa Clara Avenue
 City Alameda Zip 94501 Phone _____
3. Mailing Address 1236 Bay Street
 City Alameda Zip 94501 Phone 510-522-0978
4. Property Owner William Sheehan
 Business Name (if applicable) _____
 Address 1236 Bay Street
 City, State Alameda Zip 94501
5. Generator name under which tank will be manifested
William Sheehan

EPA ID# under which tank will be manifested CA C001061440

6. Contractor HK2, INC / SEMCO
Address 1751 Leslie Street
City San Mateo, CA 94402 Phone 415-572-8033
License Type A, B, C-6/D40, C-57 HAZ ID# 719103

*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board.

7. Consultant (if applicable) N/A
Address _____
City, State _____ Phone _____

8. Main Contact Person for Investigation (if applicable)
Name Chuck Rippe Title President
Company HK2, INC / SEMCO
Phone 415-572-8033

9. Number of underground tanks being closed with this plan 1
Length of piping being removed under this plan unknown
Total number of underground tanks at this facility (**confirmed with owner or operator) 1

10. State Registered Hazardous Waste Transporters/Facilities (see instructions):

** Underground storage tanks must be handled as hazardous waste **

a) Product/Residual Sludge/Rinsate Transporter
Name Evergreen Environmental EPA I.D. No. CAD 980695761
Hauler License No. 0242 License Exp. Date 7/97
Address 6880 Smith Avenue
City Newark State CA Zip 94560

b) Product/Residual Sludge/Rinsate Disposal Site
Name Evergreen Environmental EPA ID# CAD 980695761
Address 6880 Smith Avenue
City Newark State CA Zip 94560

c) Tank and Piping Transporter

Name Alexanna, LTD EPA I.D. No. CAD 982438.566
Hauler License No. 2883 License Exp. Date 4/30/97
Address 3104 Athens Ct.
City Concord State CA Zip 94519

d) Tank and Piping Disposal Site

Name Ericksen, Inc. EPA I.D. No. CAD 999466392
Address 255 Park Blvd.
City Richmond State CA Zip 94801

11. Sample Collector

Name Chuck Kiper
Company HK2, Inc / SEMCO
Address 1751 Leslie St.
City San Mateo State CA Zip 94402 Phone 415-572-8033

12. Laboratory

Name No State Environmental
Address 90. S. Spruce
City So. San Francisco State CA Zip 94080
State Certification No. 1753

13. Have tanks or pipes leaked in the past? Yes [] No [] Unknown [x]

If yes, describe. _____

4. Describe methods to be used for rendering tank(s) inert:

Negligible, not water cleaning or wash
20 lbs per 1000 gallons dry ice

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

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
1,500	Heating Oil	Soil, one soil sample from beneath each end of tank at minimum Water (if applicable)	2 feet below tanks into Station Soil or @ Soil/water interface

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

Excavated/Stockpiled Soil

Stockpiled Soil Volume (estimated)

Est - 5-10 yds

If soil is to be reused on site, one discrete sample per every 20 cubic yards is required. If soil is to be disposed of off site, one composite sample per every 50 cubic yards is required.

Sampling Plan

Soil Samples Taken from tank excavation will be collected, placed in brass tubes, sealed with Teflon Tape, caps and placed on ice, transported to a State Certified lab under chain of custody and analyzed for the constituents of the tank.

Stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

Will the excavated soil be returned to the excavation immediately after tank removal? [] yes [] no [] unknown

If yes, explain reasoning _____

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from Alameda County. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling operations.

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

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

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

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
Fuel/Heating Oil		TPH D BTX&E TPH AND BTX&E 8260	GCFID (3510) 602, 624 or 8260
		BTEX TPHd	H ₂ O 0.5ppb 50ppb Soil 0.005 to 0.5ppm 1ppm

18. Submit Worker's Compensation Certificate copy

Name of Insurer California Comp

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery.

The written report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The report must contain all information listed in item 22 of the instructions.

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business HK2, INC. / SEMCO,

Name of Individual Rhonda Reames-Kiper

Signature Rhonda Reames-Kiper Date 7/18/96

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business _____

Name of Individual William Sheehan

Signature William Sheehan Date 7/18/96
By Rhonda Reames-Kiper

This Shipping Order Must be legibly filled in, in Ink, in Indelible Pencil, or in Carbon and retained by the Agent.

William Sheehan
743 Santa Clara Ave.

Shipper's No. 706-0234

Carrier

Agent's No. 0976

RECEIVE, subject to the classifications and tariffs in effect on the date of the issue of this Shipping Order,
at Alameda, Calif. 9/17 19 96 from Senco HK²

The property described below, in apparent good order, except as noted (contents and condition of contents of packages unknown) marked, consigned and destined as shown below, which said company (the word company being understood throughout this contract as meaning any person or corporation in possession of the property under the contract) agrees to carry to its usual place of delivery at said destination, if on its own railroad, water line, highway route or routes or within the territory of its highway operations, otherwise to deliver to another carrier on the route to said destination. It is mutually agreed, as to each carrier of all or any of said property over all or any portion of said route to destination, and as to each party at any time interested in all or any of said property that every service to be performed hereunder shall be subject to all the conditions not prohibited by law whether printed or written, herein contained including the conditions on back hereof, which are hereby agreed to by the shipper and accepted for himself and his assigns.

(Mail or street address of consignee—For purposes of notification only.)
Consigned to Erickson, Inc. 255 Parr Blvd.
Destination Richmond, Calif. State of Calif. Zip Code 94801 County of Contra Costa
Routing Dexanna Delivering Carrier Dexanna Vehicle or Car Initial 2 No. T-1

Collect On Delivery.
\$ _____ and remit to: _____ C. O. D. charge to be paid by Shipper Consignee

No. Packages	Description of Articles, Special Marks, and Exceptions	Weight (Sub to Car)	Class or Rate	Check Column
1	Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid. Manifest # 95269994 Tank # 18858 Loading Time: 11:00 to 12:45 = 1 3/4 Hrs.	1500 lbs.		

Subject to Section 7 of conditions, if this shipment is to be delivered to the consignee without recourse on the consignor, the consignor shall sign the following statements
The carrier shall not make delivery of this shipment without payment of freight and all other lawful charges.

(Signature of Consignor)

If charges are to be prepaid, write or stamp here "TO BE PREPAID."

Received \$ _____ to apply to repayment of the charges on the property described hereon

Agent or Cashier

Per _____ (the signature here acknowledges only the amount Prepaid)

If the shipment moves between two ports by a carrier by water the law requires that the bill of lading shall state whether it is "carrier's or shipper's weight" NOTE: Where the rate is dependent on value shippers are required to state specifically in writing the agreed or declared value of the property

The agreed or declared value of the property is hereby specifically stated by the shipper to be not exceeding _____ per

Senco HK² Shipper, Per MWD Dexanna Agent must detach and retain this Shipping Order and must sign the Original Bill of Lading.

Permanent post-office address of shipper,

(This Bill of Lading is to be signed by the shipper and agent of the carrier issuing same)

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

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAC091061440		Manifest Document No. 00976		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address William Sheehan 1336 Bay Street - Alameda, Calif. 94501				A. State Manifest Document Number 95269994		B. State Generator's ID							
4. Generator's Phone 510 532-0978				6. US EPA ID Number CAD932438565		C. State Transporter's ID							
5. Transporter 1 Company Name Dexanna				8. US EPA ID Number		D. Transporter's Phone (510) 687-1292							
7. Transporter 2 Company Name				10. US EPA ID Number		E. State Transporter's ID							
9. Designated Facility Name and Site Address Erickson, Inc. - 255 Parr Blvd. Richmond, California 94801				10. US EPA ID Number CAD009466392		G. State Facility's ID CAD009466392							
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity		14. Unit		I. Waste Number			
a. Waste Empty Storage Tank NON-RCRA Hazardous Waste Solid.				No.		Type		Wt/Vol		State			
				001		T P		9/500		P		512	
												EPA/Other	
												NONE	
J. Additional Descriptions for Materials Listed Above Qty. <u>1</u> Empty Storage Tank # <u>18858</u> . Tank has been inerted with 15 lbs. DRY ICE per 1000 gallons capacity.				K. Handling Codes for Wastes Listed Above		a.		b.		c.			
15. Special Handling Instructions and Additional Information Keep away from sources of ignition. Site Location: <u>743 Santa Clara Ave. - Alameda, Calif.</u> 24 Hr. Contact Name: <u>William Sheehan</u> & Phone # <u>(510) 532-0978</u>													
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 WILLIAM J. SHEEHAN				Signature <i>William J. Sheehan</i>				Month 09		Day 17		Year 96	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name James R. Cox				Signature <i>James R. Cox</i>				Month 09		Day 17		Year 96	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name William J. Sheehan				Signature William J. Sheehan				Month		Day		Year	
19. Discrepancy/Modification Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.													
Printed/Typed Name				Signature				Month		Day		Year	

DO NOT WRITE BELOW THIS LINE.



Evergreen Environmental Services

dedicated to the protection of the environment

To schedule a pickup, call
800-972-5284

7200 Central Ave., Newark, CA EPA# CAD982413262
10712 Vernon Ave., Ontario CA EPA# CAL000027724

Send payment to:
Evergreen
P.O. Box 45987
San Francisco, CA 94145

96-0235
Bill of Lading / Invoice

INVOICE 535392

Date 9/20/96

JOB LOCATION

BILLING INFORMATION

NAME <u>William Sheehan</u>		NAME <u>SEMCO HK 2</u>		CASH <input type="checkbox"/> CHECK <input type="checkbox"/>
ADDRESS <u>510 LINCOLN #243 Santa Clara</u>		ADDRESS <u>1741 LESLIE ST</u>		CUSTOMER CODE NO. <u>NOT GIVEN</u>
CITY <u>Alameda CA</u>	STATE <u>CA</u>	ZIP <u>94501</u>	CO <u>CA</u>	PO# <u>SEMCO6</u>
PHONE NO. <u>510 522-0978</u>		PHONE NO.	PROFILE NO.	CUSTOMER EPA ID NO. <u>CAC001061432</u>

PRODUCT	WASTE CODE	MANIFEST NUMBER	QUANTITY	UNITS	PRICE	AMOUNT
Used oil, Non-RCRA Hazardous Waste, Liquid	Lubricating Industrial CA 221	96178380 <u>96178378</u>	<u>240</u>	Gal		
Used Automotive Antifreeze, Non-RCRA Hazardous Waste, Liquid	CA 134			Gal		
RQ Waste Petroleum Oil NOS Combustible Liquid UN 1270 III (Oil contaminated with halogens)	CA 221 FOU F002			Gal		
Oil & Water, Non-RCRA Hazardous Waste, Liquid	CA 221	<u>96178380</u> <u>96178378</u>	<u>240</u>	Gal		
Waste Solids and Sludges				Gal		
Wash-out				Each		
Drained Used Oil Filters				Drum		
Non-RCRA Hazardous Waste Solids (only debris)	CA 223			Drum		
Empty Drums				Drum		
Transportation			<u>2</u>	Hrs.		
Other:						
Other:						
Other:						
Other:						
Other:						
Other:						
Other:						
Other:						
Other:						
TEST	PASS <input type="checkbox"/>	FAIL <input type="checkbox"/>	PPM	Test		

<input type="checkbox"/> Collection Station	<input type="checkbox"/> Agricultural Source
<input type="checkbox"/> Government Source	<input type="checkbox"/> Industrial Source
<input type="checkbox"/> Marine Source	

NET 7 DAYS TOTAL CHARGES

Accounting Office 510-795-4400 **Please Pay From This Invoice**

TSDF: Evergreen Oil, Inc.
6880 Smith Avenue
Newark, CA 94560
EPA# CAD980887418

I hereby certify that all information submitted in this and all attached documents contains true and accurate descriptions of the waste. All relevant information regarding known or suspected hazards associated with the waste has been disclosed. This further serves as notification that the above liquid wastes are banned from land disposal pursuant to Title 22 Section 66268.7 (a)(10). I also acknowledge that I have read and agree to the terms on the reverse side of this form.

<u>American Vacuum Cameron English</u>	<u>243</u>	<u>William J. Sheehan</u>	<u>William J. Sheehan</u>
DRIVER	ROUTE #	DRIVER SIGNATURE	GENERATOR'S SIGNATURE
			PRINT NAME

MATERIALS MANIFEST

GENERATOR

William Sheehan

Site Address: 743 Santa Clara Ave. - Alameda - Ca.

Mailing _____
Phone :() _____ Contact: _____

TRANSPORTER

Lumco

Address _____

Phone :() _____ Contact: _____

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

Driver Name: X [Signature] Signature _____

Truck No. X #21 Ship Date: _____

Time of Pick-Up: _____ Time of Delivery: _____

Consultant/Owner

Lumco 1422

Address: 1741 Dublin St.

San Mateo - Ca.
Phone :() 800-831-2344 Contact: Chuck

I hereby certify that the above named material is consistent with the information presented in the Waste Characterization Form and Contaminated Soil Description Form, and has been properly described, classified and packaged, and is in proper condition for transport according to applicable regulation.

Name _____ Date: 9-18-96

Recycling Facility

BAY AREA SOIL
2717 GOODRICK AVENUE RICHMOND, CA 94801

RECEIVED BY: R-96 [Signature] DATE: 9-18-96

Control No: R-9685

ACOPY OF THIS SHEET MUST ACCOMPANY EVERY LOAD, AND MUST BE SUBMITTED AT THE GATE FOR ENTRY. ALL LOADS MUST BE SCHEDULED AT LEAST 24 HOURS IN ADVANCE. DELIVERIES MUST BE SCHEDULED ON A DAILY BASIS. ANY UNSCHEDULED LOADS MAY BE REFUSED AT THE GATE.

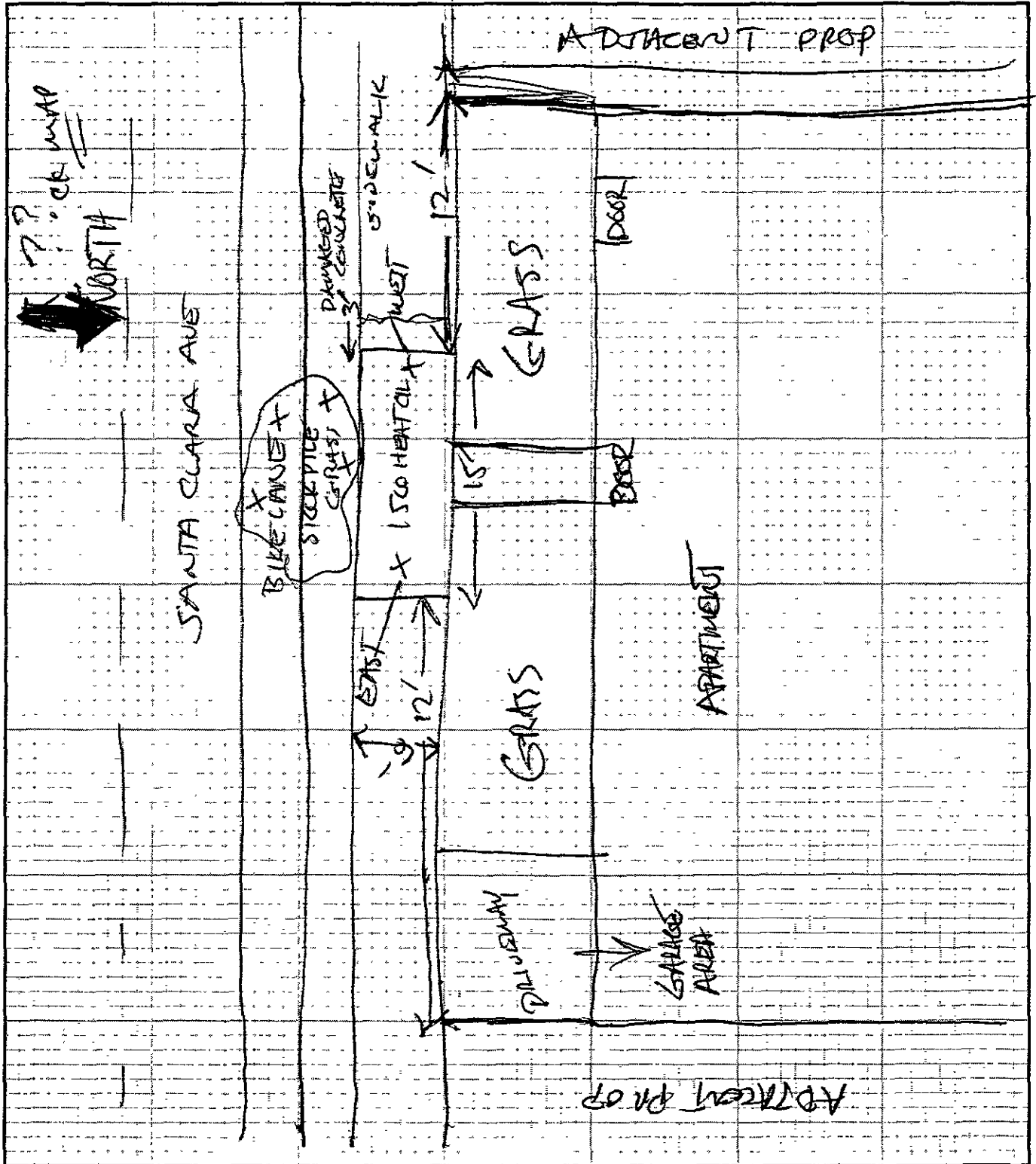
SEMCO
 1741 Leslie Street
 San Mateo, Calif. 94402
 (415) 572-8033

License No. 449864
 A, B, & C-61/D40
 Hazardous Substance Certificate

SITE PLAN

SEMCO
 431 W. Hatch Rd.
 Modesto, Calif. 95351
 (209) 524-9653

SUBMITTED TO:		DESCRIPTION OF JOB:	
Residential / Apartment Bldg.		Job #	96-0234
		Address	743 Santa Clara Ave.
		City	Alameda
		State	
		Phone	
		Date	9/17



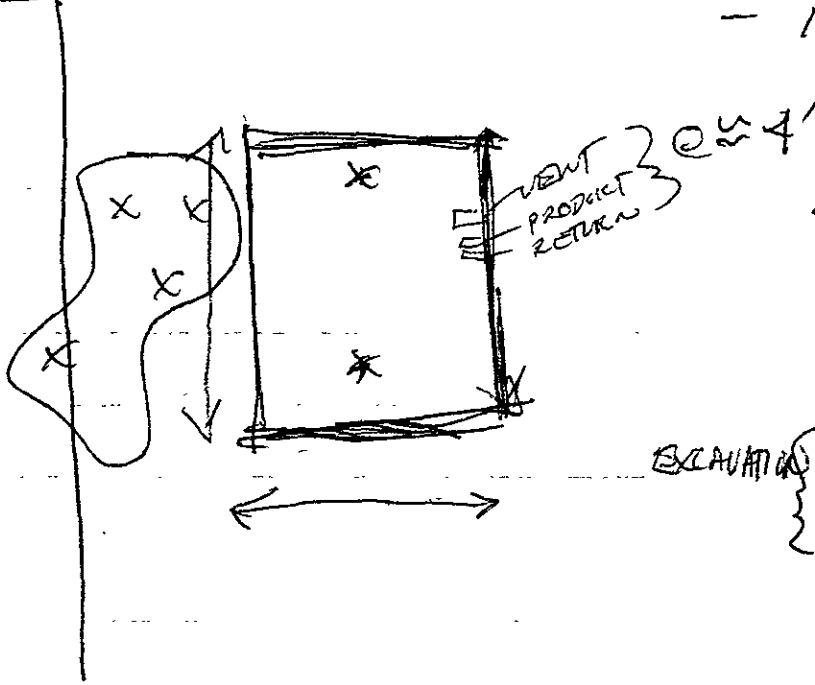
NOTES

9/17
#96-0234

1500 DIESEL

(INSTALLED JUNE 30, 1929)

- 11:00 @ court Juliet St
- 11:30 Begin pull
- 11:55 FIRE Steve McKinley



DEPTH TO TOP OF TANK ≈ 3'-4'
 DEPTH TO BOTTOM OF TANK ≈ 7'
 DEPTH TO VENT ≈ 4'
 PRODUCT ≈ 4'
 RETURN ≈ 4'

EXCAVATION } LENGTH -
 } WIDTH -

TANK SIZE - 1500
 TANK DIM - ?

- SAMPLES:
- #1 - 1500-D @ 9' WEST
 - #2 - 1500-D @ 9' EAST
 - SP-COMP - 1
 - 2
 - 3
 - 4

* ≈ 65 GAL OIL/WATER IN (2) 55 GAL DRUM
 * CONCRETE 25' x 6' + 8' x 3' ENTRANCE
 SIDEWALK

WITH SAW CUTS OR JACK AT SEAMS. ≈ 4' THICK

19/1/96
 white - env. health
 yellow - facility
 pink - files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy.
 Suite 250
 Alameda, CA 94502-6577
 (510) 567-6700

Hazardous Materials Inspection Form

II, III

Site ID # S845 Site Name Residential Today's Date 9/17/96

Site Address 743 Santa Clara
 City Alameda Zip 94 Phone _____

II.A BUSINESS PLANS (Title 19)

- ___ 1. Immediate Reporting 2703
- ___ 2. Bus. Plan Stds. 25503(b)
- ___ 3. RR Cars > 30 days 25503.7
- ___ 4. Inventory Information 25504(a)
- ___ 5. Inventory Complete 2730
- ___ 6. Emergency Response 25504(b)
- ___ 7. Training 25504(c)
- ___ 8. Deficiency 25505(a)
- ___ 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- ___ 10. Registration Form Filed 25533(a)
- ___ 11. Form Complete 25533(b)
- ___ 12. RMPP Contents 25534(c)
- ___ 13. Implement Sch. Req'd? (Y/N)
- ___ 14. OffSite Conseq. Assess. 25524(c)
- ___ 15. Probable Risk Assessment 25534(d)
- ___ 16. Persons Responsible 25534(g)
- ___ 17. Certification 25534(i)
- ___ 18. Exemption Request? (Y/N) 25536(b)
- ___ 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- General
- ___ 1. Permit Application 25284 (H&S)
 - ___ 2. Pipeline Leak Detection 25292 (H&S)
 - ___ 3. Records Maintenance 2712
 - ___ 4. Release Report 2651
 - ___ 5. Closure Plans 2670
- Monitoring for Existing Tanks
- ___ 6. Method
 - 1) Monthly Test
 - 2) Daily Vadose Semi-annual groundwater One time soils
 - 3) Daily Vadose One time soils Annual tank test
 - 4) Monthly Gndwater One time soils
 - 5) Daily Inventory Annual tank testing Cont pipe leak det Vadose/gndwater mon.
 - 6) Daily Inventory Annual tank testing Cont pipe leak det
 - 7) Weekly Tank Gauge Annual tank testing
 - 8) Annual Tank Testing Daily Inventory
 - 9) Other _____
- New Tanks
- ___ 7. Precs Tank Test Date: _____ 2643
 - ___ 8. Inventory Rec. 2644
 - ___ 9. Soil Testing . 2646
 - ___ 10. Ground Water. 2647
 - ___ 11. Monitor Plan 2632
 - ___ 12. Access. Secure 2634
 - ___ 13. Plans Submit Date: _____ 2711
 - ___ 14. As Built Date: _____ 2635

Manifest #: 95269994

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

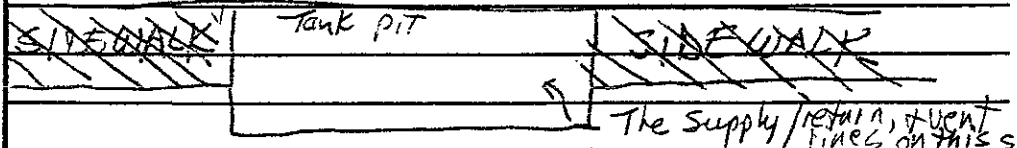
- ___ I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- ___ II. Business Plans, Acute Hazardous Materials
- ___ III. Underground Tanks

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

Slurry & sand
 Arrived at site at ~11:00 AM. According to contractors on site, 90% of UST was filled w/ concrete & there was only ~85 gallons of diesel/water in tank! Odor noted from UST and the inside walls of UST still showed sludgy residual diesel.

Santa Clara Ave.



Corrosion and pitting noted on tank. It appears that this tank was installed in 1929. Holes noted in tank. Tank served apartment complex. Two holes, pen size and ~1/4", noted on south end of tank. Contents of tank was sampled & placed in separate truck. One pen size hole was noted on bottom of north end of tank. Soil sample collected from beneath north

Rev 6/88

Contact: _____
 Title: _____
 Signature: [Signature]

Inspector: Juliet Shier
 Signature: [Signature]

II, III

Ph 2/20

white -env.health
yellow -facility
pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

1131 Harbor Bay Pkwy.
Suite 250
Alameda, CA 94502-6577
(510) 567-6700

Hazardous Materials Inspection Form

II, III

Site ID # 5845 Site Name Residential Today's Date 9/17/96

Site Address 743 Santa Clara
City Alameda Zip 94 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

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

• Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:
 end of tank was collected at ~9' bgs. Soil was sandy, stained, w/ strong odor. Soil sample collected from below south end at 9' bgs was dark, but no staining or odor. (looked rich in organics) One 4-point composite sample collected from stockpiled soil. Tank pit will be lined w/ Visqueen backfilled, + a layer of organics will be placed on top. (backfill material is the excavated material). The contents of tank will be left in truck at site until they obtain results. *[Signature]*

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus Plan Stds. 25503(b)
- 3. RR Cars > 30 days 25503.7
- 4. Inventory Information 25504(a)
- 5. Inventory Complete 2730
- 6. Emergency Response 25504(b)
- 7. Training 25504(c)
- 8. Deficiency 25505(a)
- 9. Modification 25505(b)

II.B ACUTELY HAZ. MATLS

- 10. Registration Form Filed 25533(a)
- 11. Form Complete 25533(b)
- 12. RMPP Contents 25534(c)
- 13. Implement Sch. Req'd? (Y/N)
- 14. OffSite Conseq. Assess. 25524(c)
- 15. Probable Risk Assessment 25534(d)
- 16. Persons Responsible 25534(g)
- 17. Certification 25534(i)
- 18. Exemption Request? (Y/N) 25534(b)
- 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- | | | |
|-------------------------------|---|--|
| General | <input type="checkbox"/> 1. Permit Application 25284 (H&S) | |
| | <input type="checkbox"/> 2. Pipeline Leak Detection 25292 (H&S) | |
| | <input type="checkbox"/> 3. Records Maintenance 2712 | |
| | <input type="checkbox"/> 4. Release Report 2651 | |
| | <input type="checkbox"/> 5. Closure Plans 2670 | |
| <hr/> | | |
| Monitoring for Existing Tanks | <input type="checkbox"/> 6. Method | |
| | 1) Monthly Test | |
| | 2) Daily Vadose
Semi-annual groundwater
One time soils | |
| | 3) Daily Vadose
One time soils
Annual tank test | |
| | 4) Monthly Gndwater
One time soils | |
| | 5) Daily Inventory
Annual tank testing
Cont pipe leak det
Vadose/gndwater mon. | |
| | 6) Daily Inventory
Annual tank testing
Cont pipe leak det | |
| | 7) Weekly Tank Gauge
Annual tank testing | |
| | 8) Annual Tank Testing
Daily inventory | |
| | 9) Other _____ | |
| <hr/> | | |
| New Tanks | <input type="checkbox"/> 7. Precis Tank Test 2643
Date: _____ | |
| | <input type="checkbox"/> 8. Inventory Rec. 2644 | |
| | <input type="checkbox"/> 9. Soil Testing 2646 | |
| | <input type="checkbox"/> 10. Ground Water. 2647 | |
| | <hr/> | |
| | <input type="checkbox"/> 11. Monitor Plan 2632 | |
| | <input type="checkbox"/> 12. Access. Secure 2634 | |
| | <input type="checkbox"/> 13. Plans Submit 2711
Date: _____ | |
| | <input type="checkbox"/> 14. As Built 2635
Date: _____ | |

Rev 6/88

Contact: _____
Title: _____
Signature: mm OLS

Inspector: Juliet Shin
Signature: Juliet Shin

II, III