

ALAMEDA COUNTY
HEALTH CARE SERVICES
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

R0787

Certified Mail # 422 218 094

11/18/93
STID# 2936

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

Notice of Requirement to Reimburse

Art Thompson

557 South Q St.
Livermore, C A 94550

Responsible Party #1
Property Owner

Robert Maas
Rynck Tire & Auto Center
6471 Sierra Ln
Dublin, C A 94596

Responsible Party #2
Contact Person
Contact Company


RyNck Tire Center
1485 W. 1st St
Livermore, CA 94550

SITE

Date First Reported 11/16/93
Substance: Waste Oil
Petroleum: (X)Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of site investigation or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been identified as the party or parties responsible for investigation and cleanup of the above site. YOU ARE HEREBY NOTIFIED that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

Please contact Eva CHU, Hazardous Materials Specialist at this office if you have any questions concerning this matter.


Edgar B. Howell, III, Chief
Contract Project Director

cc: Mike Harper, SWRCB

SWRCB Use:

Add : X Reason: New Case

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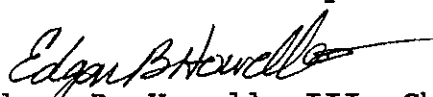
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ALAMEDA COUNTY - DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

R0787

11/18/93

LIST OF RESPONSIBLE PARTIES FOR

<table border="1"><tr><td>SITE</td></tr></table>	SITE	StID: 2936 RyNck Tire Center 1485 W. 1st St Livermore, CA 94550	Date First Reported 11/16/93 Substance: Waste Oil Petroleum (X)Yes
SITE			
Art Thompson 557 South Q St. Livermore, C A 94550		<table border="1"><tr><td>Responsible Party #1 Property Owner</td></tr></table>	Responsible Party #1 Property Owner
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Robert Maas Rynck Tire & Auto Center 6471 Sierra Ln Dublin, C A 94596		<table border="1"><tr><td>Responsible Party #2 Contact Person Contact Company</td></tr></table>	Responsible Party #2 Contact Person Contact Company
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Rick Huseman Goodyear Tires 1800 Merced San Leandro, C A 94577		<table border="1"><tr><td>Responsible Party #3 Contact Person Contact Company</td></tr></table>	Responsible Party #3 Contact Person Contact Company
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San Leandro, C A 94577

Responsible Party #3
Contact Person
Contact Company

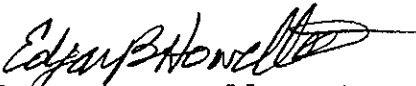
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11/18/93

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SITE

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1485 W. 1st St
Livermore, CA 94550

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Petroleum (X)Yes

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R0787

11/18/93

LIST OF RESPONSIBLE PARTIES FOR

SITE

 StID: 2843
Rynck Tire
1682 1st St
Livermore, CA 94550

Date First Reported 11/17/93
Substance: Waste Oil
Petroleum (X)Yes

Godelieve Vlaminck

3312 E. Farron Ave
Fresno, C A 94596

Responsible Party #1
Property Owner

Robert Maas
Rynck Tire & Auto Center
6471 Sierra Ln
Dublin, C A 94596

Responsible Party #2
Contact Person
Contact Company

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Goodyear Tires
1800 Merced
San Leandro, C A 94577

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Contact Company

SENDER: <ul style="list-style-type: none"> • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece next to the article number. 		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Robert Maas/Rynck RO 787 6471 Sierra Ln Dublin, Ca 94596 STID# 2936 <i>EC</i> <i>Beverly A. [Signature]</i>		4a. Article Number 422 218 094	
5. Signature (Addressee)		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent)		7. Date of Delivery 11/3/90	
		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, October 1990 U.S. GPO: 1990-273-961 **DOMESTIC RETURN RECEIPT**

SENDER: <ul style="list-style-type: none"> • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece next to the article number. 		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: <i>ALOB</i> <i>PAZMAT</i> 93 NOV 33 PM 4:25 RO 787 RICK HUSEMAN Goodyear Tires 1800 Merced St San Leandro, CA 94577 STID# 2936		4a. Article Number P# 442 218 096	
5. Signature (Addressee)		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent)		7. Date of Delivery 12-2-93	
		8. Addressee's Address (Only if requested and fee is paid)	

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