



Certified Mail # P 367 604 305

07/20/92
STID# 86

DEPARTMENT OF ENVIRONMENTAL HEALTH
Hazardous Materials Division
80 Swan Way, Rm. 200
Oakland, CA 94621
(510) 271-4320

Notice of Requirement to Reimburse

Mr. Kurt Miller
Shell Oil Co.
P O Box 5278
Concord Ca 94520-9998

Responsible Party #1
Property Owner

Compliance Analyst
Shell Oil Co
P O Box 2099
Houston, T X 77252

Responsible Party #2
Contact Person
Contact Company

Shell Station
3750 E. - 14th St.
Oakland, CA 94601

SITE

Date First Reported 02/06/91
Substance: Gasoline
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 overseeing removal 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 indentified 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 Barney CHAN, Hazardous Materials Specialist at this office if you have any questions concerning this matter.

for Edgar B. Howell, III
Edgar B. Howell, III, Chief
Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case



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for Edgar B. Howell, III, Chief
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SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) **STIP 86** 2. Restricted Delivery (Extra charge)

3. Article Addressed to: (BC) #86 **ROBOT CL**
 Shell Oil Company
 Attn: Compliance Analyst
 P.O. Box 2099
 Houston, TX 77252 **BC**

4. Article Number
 P 367 604 305

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Address
 X

6. Signature - Agent
 X

7. Date of Delivery
JUL 27 1992

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) **STIP 86** 2. Restricted Delivery (Extra charge)

3. Article Addressed to: (BC) #86
 Shell Oil Company
 Attn: Mr. Kurt Miller
 P.O. Box 5278
 Concord, CA 94520-9998 **BC**

4. Article Number
 P 367 604 304

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Address
 X

6. Signature - Agent
 X **Baker**

7. Date of Delivery
7-28-92

8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT