

92 JUN -5 PM 11:18

4/2/72

TANK CLOSURE REPORT

JOB LOCATION:

ENCINAL HIGH SCHOOL
210 CENTRAL AVE.
ALAMEDA, CALIFORNIA

PREPARED BY:

S E M C O
1741 LESLIE STREET
SAN MATEO, CA 94402
(415) 572-8033

S E M C O
ENVIRONMENTAL CONTRACTORS & GENERAL ENGINEERING
LICENSE # 449864 A, B, C-61/D-40
HAZARDOUS SUBSTANCE CERTIFICATION
1741 LESLIE STREET
SAN MATEO, CALIFORNIA 94402
(415) 572-8033

This tank closure report is submitted to you for your files. SEMCO will document the removal and excavation of the tank from the site. SEMCO will provide sampling locations, site logs where applicable and deliver detailed analytical reports with chain of custody procedures. Finally, SEMCO will supply manifests for the disposal of the tank as well as appropriate gas free certificate / documentation for final disposition of tank.

This property is located at 210 Central Avenue in Alameda.

REMOVAL AND DISPOSAL OF FUEL STORAGE TANK

One underground heating oil tank was removed from this site on April 20, 1992. Tank abandonment was performed by James C. Bateman Petroleum Services, Inc. "dba" SEMCO Environmental Contractors, License # 449864, Classification A, B, C-61/D40, Hazardous Substance Certification.

The tank was of 1500 gallon capacity.

It was determined that the tank was dry before removal procedures were begun. The tank was inerted by washing it with a hot water detergent wash, followed by placing solid carbon dioxide (dry ice) in the tank to eliminate any explosive vapors that may have existed.

The tank was transported off site by Richard Hamilton Trucking and delivered to Erickson Inc., in Richmond for disposal. The tank was transported on manifest # 90710679.

Three soil samples and one water sample were taken. Two of the soil samples were taken at the North and South ends of the excavation and one was taken from the composite spoils pile. One water sample was also collected. The excavated soils were left on site for disposal.

The soil samples were collected with a drive sampler, sealed in brass tubes, labeled, then stored in an iced container for transportation to Superior Analytical. All samples were to be analyzed for TPH-D and BTXE.

Once the analytical was determined, 35 cubic yards of soil was transported and disposed of at Guadalupe Landfill in San Jose. (see attached tags), and the area was restored to its original condition with asphalt.

SEMCO is pleased to present this tank closure report to you for your files. We would, of course, be happy to answer any questions you may have.

APPENDIX

- 1) ANALYTICAL RESULTS
CHAIN OF CUSTODY
SAMPLING LOCATION MAP
- 2) PERMITS
- 3) MANIFESTS
- 4) INSPECTORS SITE LOG (IF APPLICABLE)
- 5) DAILY SAFTEY BREIFING REPORT
SIGNATURE PAGE FROM SITE SAFETY PLAN



Superior Precision Analytical, Inc.

1555 Burke, Unit 1 • San Francisco, California 94124 • (415) 647-2081 / fax (415) 871-7123

C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 54725
CLIENT: SEMCO
CLIENT JOB NO.: 92-0223

DATE RECEIVED: 04/21/92
DATE REPORTED: 04/22/92

ANALYSIS FOR TOTAL PETROLEUM HYDROCARBONS by Modified EPA SW-846 Method 8015

LAB #	Sample Identification	Concentration (mg/kg) Diesel Range
1	#1-N-10'	ND<10
2	#2-S-10'	ND<10
4	#4-COMP	360

mg/kg - parts per million (ppm)
Minimum Detection Limit for Diesel in Soil: 10mg/kg

QAQC Summary:

Daily Standard run at 200mg/L: %DIFF Diesel = <15%
MS/MSD Average Recovery = 102%: Duplicate RPD = 6.9%

Richard Srna, Ph.D.

Cecilia G. Joazeiro (for)
Laboratory Director



Superior Precision Analytical, Inc.

1555 Burke, Unit 1 • San Francisco, California 94124 • (415) 647-2081 / fax (415) 821-7123

C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 54725
CLIENT: SEMCO
CLIENT JOB NO.: 92-0223

DATE RECEIVED: 04/21/92
DATE REPORTED: 04/22/92

ANALYSIS FOR BENZENE, TOLUENE, ETHYL BENZENE & XYLENES
by EPA SW-846 Methods 5030 and 8020

LAB #	Sample Identification		Concentration			
			Benzene	Toluene	Ethyl Benzene	Xylenes
1	#1-N-10'	ug/kg	ND<3	ND<3	ND<3	ND<3
2	#2-S-10'	ug/kg	ND<3	ND<3	ND<3	ND<3
3	#3-H2O	ug/L	ND<0.3	0.5	0.3	2.3
4	#4-COMP	ug/kg	ND<15	ND<15	ND<15	68

ug/kg or ug/L - parts per billion (ppb)
Minimum Detection Limit in Soil: 3 ug/kg
Minimum Detection Limit in Water: 0.3 ug/L

QAQC Summary:

Daily Standard run at 20ug/L: %DIFF 8020 = <15%
MS/MSD Average Recovery = 84%: Duplicate RPD = 1.8%

Richard Srna, Ph.D.

Cecilia G. Joaquin (for)
Laboratory Director



Superior Precision Analytical, Inc.

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C E R T I F I C A T E O F A N A L Y S I S

LABORATORY NO.: 54725
CLIENT: SEMCO
CLIENT JOB NO.: 92-0223

DATE RECEIVED: 04/21/92
DATE REPORTED: 04/22/92

ANALYSIS FOR TOTAL PETROLEUM HYDROCARBONS
by Modified EPA SW-846 Method 8015

LAB #	Sample Identification	Concentration (ug/L) Diesel Range
3	#3-H2O	640

ug/L - parts per billion (ppb)
Minimum Detection Limit for Diesel in Water: 50ug/L

QAQC Summary:

Daily Standard run at 200mg/L: %DIFF Diesel = <15%
MS/MSD Average Recovery = 102%; Duplicate RPD = 6.9%

Richard Srna, Ph.D.

Cecilia G. Joaquin (for)
Laboratory Director

Section I

CHAIN OF CUSTODY AND ANALYSIS REQUEST

LAB NO. _____

Consultant Name SEMCO
Office Location 1741 Leslie Rd. San Mateo, CA 94402
Fax No. (415) 572-9734
Project Manager Chuck Kiper
Phone (415) 572 8033

TURN AROUND TIME
 (Circle One)
 Same Day _____
 24 Hrs _____
 48 Hrs _____
 72 Hrs _____
 5 Day _____

SUPERIOR ANALYTICAL, INC.
 Martinez San Francisco
 415/229-1512 415/647-2081

Send Coolers to : Modesto San Mateo

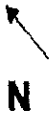
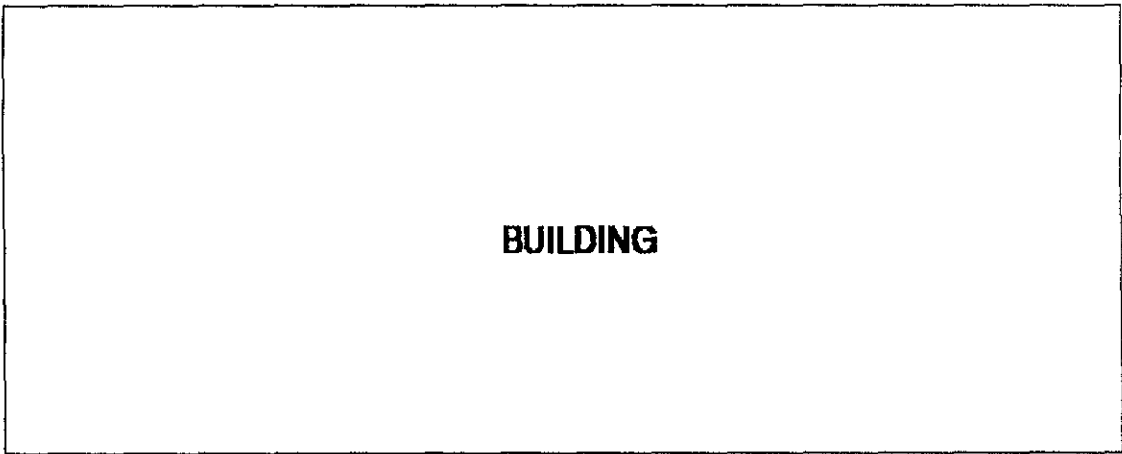
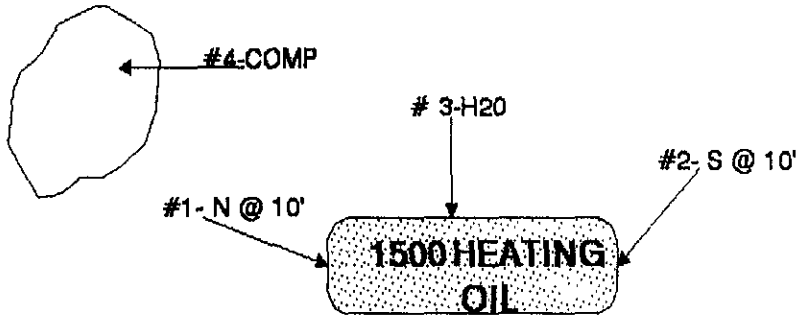
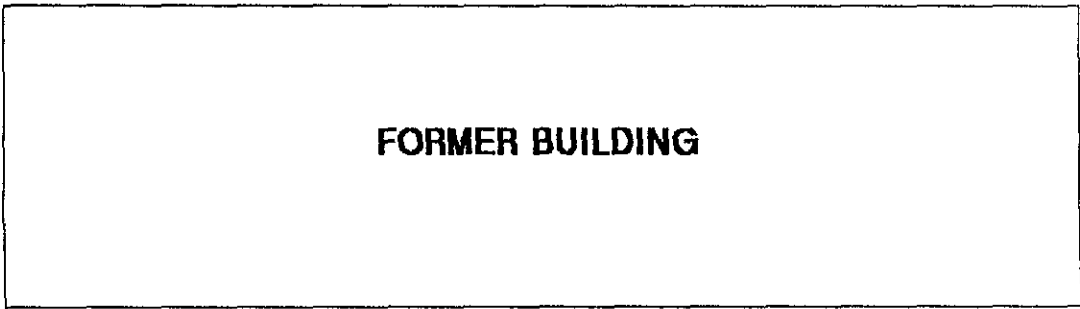
Project No. / P.O. No. 210 Central Ave - 92-0223

Sampler M. TAMBRUN
 Regulatory Agency ALAMEDA INV. HEALTH (CMT. SERV.)

Section II		Analysis Request										Section III		Sample Information		
Sample Identification	S=Soil W=Water Matrix	TPH - G & D	TPH - Low Level D	TPH - G	BTXE	OAG	8010	8240	Metals	Others * Subject to Subcontracting	Date	Time	Containers		Sampling Remarks	
													Quantity	Pres.	Bioremediation	Contamination
1# 1-N-10'	S		X		X						4/21/92	115	1			
2# 2-G-10'	S		X		X						1	120	1			
3# 3-H2O	W		X		X						↓	245	4			
4# 4-COMP	S		X		X						4/21/92	300	4			COMPOSITE
5																
6																
7																
8																
9																
10																
11																
12																

Relinquished by <u>[Signature]</u>	Date/Time <u>4-21-92 1150</u>	Received by _____	Organization _____
Relinquished by _____	Date/Time _____	Received by _____	Organization _____
Relinquished by _____	Date/Time _____	Received by <u>[Signature]</u>	Organization _____

Please Initial _____
 Samples Stored in Ice _____
 Appropriate Containers _____
 Samples Preserved _____
 VOA's without Headpace _____
 Comments _____



NOT TO SCALE

S E M C O

A.U.S.D.
ENCINAL HIGH SCHOOL
210 CENTRAL AVE.
ALAMEDA, CALIFORNIA

THIS CARD MUST BE POSTED ON THE PREMISES AND
PLACED SO AS TO BE SEEN FROM THE STREET

CITY OF ALAMEDA, Building Inspection Office

DATE 4-8-92 VALUATIONS \$ 4000 BLDG. PERMIT # _____ PLMG/MECH PERMIT # 92-5404

FORMS _____
REQUIRED BEFORE POURING CONCRETE

JOB Underground tank removal

ADDRESS 210 Central Ave

OWNER A School Dist.

CONTRACTOR Semco

ROBERT L. WARNICK BY _____
BUILDING OFFICIAL

INTERIOR LATH _____
REQUIRED BEFORE PLASTERING OR TAPING

FINAL GROUND PLUMBING _____

EXTERIOR LATH _____
REQUIRED BEFORE STUCCO

ROUGH ELECTRIC _____

DESIGN REVIEW _____

INSULATION CERTIFICATE _____

TRACT CONDITIONS _____

ROUGH PLUMBING _____

P.U.D. CONDITIONS _____

ROUGH HEATING & VENTILATING _____

FINAL ELECTRIC _____

FINAL - FIRE DEPT. _____

SUB FLOOR _____

FINAL PLUMBING _____

FRAME _____

FINAL HEATING & VENTILATING _____

INSULATION _____

FINAL BUILDING _____

ABOVE APPROVALS REQUIRED BEFORE INTERIOR LATHING OR COVERING

DO NOT CALL FOR FINAL INSPECTION UNTIL OTHER ITEMS HAVE BEEN ISSUED

DO NOT OCCUPY STRUCTURE UNTIL CERTIFICATION OF OCCUPANCY HAS BEEN ISSUED.
FOR CERTIFICATE OF OCCUPANCY TO BE ISSUED, A COPY OF HARD CARD WITH ALL FINALS
NEEDS TO BE FILED WITH THE CENTRAL PERMIT OFFICE.

REMARKS _____

NOTE: ALL INSPECTION REQUESTS ARE REQUIRED 24 HOURS IN ADVANCE.
CALL BETWEEN 8:30 AM - 10:00 AM 748-4564 (BUILDING) or 748-4563 (PLUMBING/MECHANICAL).

Please print or type. Form designed for use on elite (12-pitch typewriter).

78385

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550
 90710679
 GENERATOR
 TRANSPORTER
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD9811683774	Manifest Document No. 11111	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address 210 CENTRAL ALAMEDA UNIFIED School 2200 CENTRAL AV.		A. State Manifest Document Number 90710679		B. State Generator's ID	
4. Generator's Phone (510) 748-4090 ALAMEDA, CA 94501		C. State Transporter's ID		D. Transporter's Phone (909) 570-4400	
5. Transporter 1 Company Name DEKORNA LTD.		8. US EPA ID Number 161A1D19181247115911		E. State Transporter's ID 308784	
7. Transporter 1 Company Name DeKORNA Ltd.		8. US EPA ID Number CAD982438566		F. Transporter's Phone (510) 687-1292	
9. Designated Facility Name and Site Address ERICKSON PARR BLVD. RICHMOND, CA 94801		10. US EPA ID Number 161A1D101019141616131912		G. State Facility's ID 161A1D101019141616131912	
				H. Facility's Phone (510) 235-1393	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. EMPTY WASTE STORAGE TANK NON RCRA HAZARDOUS WASTE SOLID.		001 TIP	01/15700	P	State #512 EPA/Other NONE
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other
J. Additional Descriptions for Materials Listed Above TANK TOED WITH 15 LB DRY ICE PER 1000 GALS CAPACITY PRIOR TO TRANSPORT. # 8513		K. Handling Codes for Wastes Listed Above a. 01 b. c. d.			
15. Special Handling Instructions and Additional Information KEEP AWAY FROM SOURCE OF IGNITION. ALWAYS WEAR HARD HATS AND GLASSES WHEN WORKING AROUND U.S.T.S. OBSERVE PROPER PROCEDURES. NO SMOKING WITHIN 50 FEET OF TANK; 24 HOUR CONTACT; DON Diel AND PHONE ; 510 748-4090					
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 Don Diel		Signature Donald A. Diel		Month Day Year 10/4/92	
17. Transporter 1 Acknowledgement of Receipt of Materials					
Printed/Typed Name James P. Cox		Signature James P. Cox		Month Day Year 10/4/92	
18. Transporter 2 Acknowledgement of Receipt of Materials					
Printed/Typed Name		Signature		Month Day Year	
19. Discrepancy Indication Space 1. No manifest document #.					
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name DANIEL S CARROLL		Signature Daniel S Carroll		Month Day Year 10/4/92	

Do Not Write Below This Line

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE
CERTIFIED SERVICES COMPANY
255 Parr Boulevard • Richmond, California 94801

NO. _____

CUSTOMER SEMCO
JOB NO. 78382

FOR: Erickson, Inc. TANK NO. 8513

LOCATION: Richmond DATE: 04/27/92 TIME: 10:39:15

TEST METHOD Visual Gastech/1314 SMPN LAST PRODUCT FO

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 1500 Gallon Tank CONDITION SAFE FOR FIRE

REMARKS: OXYGEN 20.9%
LOWER EXPLOSIVE LIMIT LESS THAN 0.1%

"ERICKSON INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN
CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS
WASTE FACILITY."

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration that permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

<u><i>K. Hughes</i></u> REPRESENTATIVE	_____ TITLE	<u><i>DK</i></u> INSPECTOR
---	----------------	-------------------------------

print or type. Form designed for use on elite (12-pitch typewriter).

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.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address Alameda Unified School Dist. 220 Central Ave		CAD9181161831774	91516181		A. State Manifest Document Number 91495486
4. Generator's Phone (510) 742-4010 Alameda CA 94501					B. State Generator's ID CAD9181161831774
5. Transporter 1 Company Name Allied Petroleum		6. US EPA ID Number CAD980675128			C. State Transporter's ID 31128
7. Transporter 2 Company Name		8. US EPA ID Number			D. Transporter's Phone (209) 876-8500
9. Designated Facility Name and Site Address Refineries Service 13331 N HWY 33 Patterson CA 95303		10. US EPA ID Number CA1010181311616171218			E. State Transporter's ID CAD980675128
					F. Transporter's Phone (209) 874-4444
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers	13. Total Quantity	14. Unit	15. Waste Number
a. WASTE FULL COMBUSTIBLE LIQUID NOS NA 1993		No. Type		WT/Vol	State 273 EPA/Other
		1 1 1		25 G	State EPA/Other
b.					State EPA/Other
c.					State EPA/Other
d.					State EPA/Other
J. Additional Descriptions for Materials Listed Above SSR WATER AND RINSE SA FUEL		K. Handling Codes for Wastes Listed Above			
		a. b. c. d.			
15. Special Handling Instructions and Additional Information UNDESIGNATED FACILITY EMERGENCY CONTACT # (800) 874-4444 GENERATOR EMERGENCY CONTACT # (510) 742-4010					
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 Donald Diaz		Signature <i>Donald Diaz</i>		Month Day Year 04/12/1992	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Colin Kelly		Signature <i>Colin Kelly</i>		Month Day Year 04/12/1992	
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 Chlorine Service					
Signature <i>John M. ...</i>		Month Day Year 04/19/1992			

DO NOT WRITE BELOW THIS LINE.

Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. CAD981683774		Manifest Document No. 9541610		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address Alameda Unified School Dist 220 Central Ave Alameda CA 94501				A. State Manifest Document Number 91495460		B. State Generator's ID CAD981683774			
4. Generator's Phone (510) 748-4090		6. US EPA ID Number CAD980675128		C. State Transporter's ID 246718-246719		D. Transporter's Phone (209) 576-8500			
5. Transporter 1 Company Name Allied Petroleum		7. Transporter 2 Company Name		E. State Transporter's ID		F. Transporter's Phone			
9. Designated Facility Name and Site Address Refineries Service 13331 N HWY 33 Patterson CA 95363				10. US EPA ID Number CAD083166728		G. State Facility's ID CAD083166728		H. Facility's Phone (800) 874-4444	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)				12. Containers		13. Total Quantity		14. Unit Wt/Vol	
a. WASTE FUEL COMBUSTIBLE LIQUID NOS NA 1993				No. Type 1 TT		11325 G		Waste Number State 223 EPA/Other	
b.								State EPA/Other	
c.								State EPA/Other	
d.								State EPA/Other	
J. Additional Descriptions for Materials Listed Above 50% WATER AND RINSEATE 95% FUEL				K. Handling Codes for Wastes Listed Above a. 01 b. c. d.					
15. Special Handling Instructions USE APPROPRIATE PROTECTIVE GEAR DESIGNATED FACILITY EMERGENCY CONTACT # (800) 874-4444 GENERATOR EMERGENCY CONTACT # (510) 748-4090									
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 DOWARD DIEZ				Signature <i>Doward Diez</i>				Month Day Year 04 12 19 92	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Col. Kella				Signature <i>Col. Kella</i>				Month Day Year 04 12 19 92	
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 GleNN SHIPMAN									
Signature <i>GleNN Shipman</i>				Month Day Year 04 12 19 92					

DO NOT WRITE BELOW THIS LINE.

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

Hazardous Materials Inspection Form

II, III

white -env.health
yellow -facility
pink -files

Site ID # _____ Site Name Encinal H.S. Today's Date 1/21/92

Site Address 210 Central

City Alameda Zip 94501 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: 12:30 - 2:00

On site to witness closure of UST. Upon inspection the tank was inspected for holes and corrosion. Neither were observed as the tank was in excellent and in good shape. Piping is to be stubbed and building foundations capped.

Native material appears to be a clean fine-grained sand w/ occasional shell fragments. This sand is saturated. Some is stained blue. Native material from the south end of the tank was broken the fine sand and ~~gray~~ blue (gray) clay. Because of continual caving of the soil and undermining of the ~~soil~~ no side wall samples could be collected. (Two samples were taken for lead and BTEX analysis to be returned)

Excavated material must be sampled as for soil - one (1) discrete sample per ea 20Yds³ if it is to be placed back into excavation

High level of the excavated soil was observed. No signs of fire or other activity were observed.

- II.A BUSINESS PLANS (Title 19)**
- 1. Immediate Reporting 2703
 - 2. Bus. Plan Sids. 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(d)
 - 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(f)
 - 18. Exemption Request? (Y/N)
 - 19. Trade Secret Requested? 25538

- III. UNDERGROUND TANKS (Title 23)**
- General**
- 1. Permit Application 25284 (H&S)
 - 2. Pipeline Leak Defection 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 Groundwater
 - 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 _____

- 7. Precs Tank Test 2643
 - Date: _____
- 8. Inventory Rec. 2644
- 9. Soil Testing 2646
- 10. Ground Water. 2647

- New Tanks**
- 11. Monitor Plan 2632
 - 12. Access. Secure 2634
 - 13. Plans Submit 2711
 - Date: _____
 - 14. As Built 2635
 - Date: _____

II, III

Contact: _____

Title: _____

Signature: _____

Inspector: S. Keeney

Signature: _____

DAILY SAFETY BRIEFING REPORT

Project # 92-0223 Date 4/20/92 Time 9:00am

Project Name A.U.S.D. Eminal High

Project Location 210 Central Alameda

Client/Address same

Project Activity lock removal

SAFETY TOPICS

CHEMICAL HAZARDS-Benzene, Toluene, Xylene, Ethyl Benzene, Freon, Diesel, Waste Oil, Petroleum Hydrocarbons

PHYSICAL HAZARDS-Open excavation, debris piles, exposed piping, cave-ins, moving equipment, electrical shock

RESPIRATORY PROTECTIVE EQUIPMENT-Half-face respirator with organic vapor cartridges if necessary

SAFETY/PERSONAL PROTECTIVE EQUIPMENT/CLOTHING (List specifically for each activity)- Hard hats, steel toe shoes, safety glasses, uniform shirt, protective gloves

SPECIFIC INSTRUCTIONS-No smoking, eating, drinking, or chewing within 25' of the excavation, wash hands before doing any of the above

HOSPITAL/CLINIC Alameda Hospital PHONE (510) 481-5111

HOSPITAL ADDRESS _____

PARAMEDIC () 911 FIRE DEPT. () 911 POLICE () 911

EMERGENCY PROCEDURES-Treat minor injuries on site, transport victim to hospital if necessary

-ATTENDEES-

NAME (Please Print)

NAME (Signature)

STEPHEN C. MOULIS

Step C. Moulis

Robert Hayes

Robert Hayes

Chuck Kiper


Chuck Kiper

Meeting Conducted By Robert Hayes

Supervisor MIKE TAMBLONI Mike Tambloni

10.0 Signatures & Acknowledgments:

I acknowledge having read and understood the preceding Health & Safety Plan:


Signature _____ Date 2/20/92


Signature _____ Date _____


Signature _____ Date 4/20/92

Signature _____ Date _____


Signature _____ Date 4/20/92

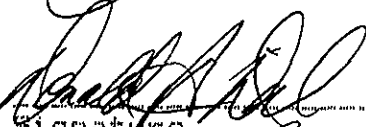
Signature _____ Date _____


Signature _____ Date 4/20/92

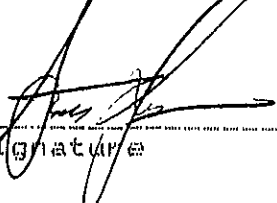
Signature _____ Date _____


Signature _____ Date 4-20-92

Signature _____ Date _____


Signature _____ Date 4-21-92

Signature _____ Date _____


Signature _____ Date 4-21-92

Signature _____ Date _____