## ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY



DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, ASST. AGENCY DIRECTOP

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

#### Certified Mail # P 113 815 302

01/21/93 STID# 2937

### Notice of Requirement to Reimburse

Ed Spencer N/a 880 Columbine Ct. Danville, C A 94526

Livermore Honda 3800 1st Livermore , CA 94550 Responsible Party Property Owner

SITE Substan

Date First Reported 12/22/92

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 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: Sandra Malos, SWRCB

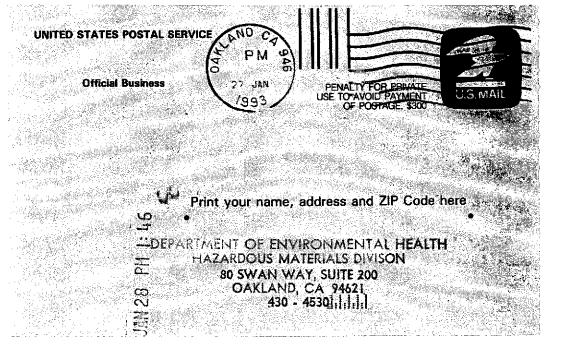
SWRCB Use:

Add: X Reason: New Case

# Receipt for Certified Mail No Insurance Coverage Provided Do not use for International Mail (See Reverse)

(EC) #2937 (See Reverse)

Sent to Ed Spencer Street and No 880 Columbine Ct. PO, State and ZIP Code
Danville CA 94526 Postage \$ Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered PS Form **3800**, June 1991 Return Receipt Showing to Whom, Date, and Addressee's Address TOTAL Postage & Fees \$ Postmark or Date



	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 the	t we can	I also wish to receive the following services (for an extre fee):	
the reve	eturn this card to you.  Attach this form to the front of the mailpiece, or on the back is loss not permit.  Write "Return Receipt Requested" on the mailpiece below the artion the Return Receipt will show to whom the article was delivered as delivered.	f space cle number.	Addressee's Address     Restricted Delivery Consult postmaster for fee.	SCOIL ST
o per	3. Article Addressed to: (EC) #2987		P 113 815 302	
ESS complet	Ed Spencer 880 Columbine Ct. Danville CA 94526	Regis	vice Type stered Insured ified COD ess Mail Return Receipt for	using n
ADDRE	Danville di Violo		of Delivery – 23	you rer
TURN	5. Signature (Address sel		ressee's Address (Only if requested . fee is paid)	nank
Second S	Signstere (higent)  **S Farm 3911, December 1991 & U.S.G.P.O.: 1992-30	7-530 <b>D</b> (	OMESTIC RETURN RECEIPT	