ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY

Certified Mail #

03/19/93

STID# 4448

DAVID J. KEARS, Agency Director

R0971

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

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

Ronald Hothem Pamco 369 Broadway San Francisco

C A 94133

Responsible Party Property Owner

Former Gerber Products 801 - 98th Ave. Oakland , CA 94603

SITE

Date First Reported 09/01/92

E Substance: Diesel 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 The direct and indirect costs of site investigation or storage tanks. remedial action at the above site are funded, in whole or in part, from The above individual(s) or entity(ies) have the Federal Trust Fund. been identified as the party or parties responsible for investigation YOU ARE HEREBY NOTIFIED that pursuant and cleanup of the above site. 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

 Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. Print your name and address on the reverse of this form so that we card to you. Attach this form to the front of the mailpiece, or on the back if space permit. Write "Return Receipt Requested" on the mailpiece below the article The Return Receipt will show to whom the article was delivered and 	does not number. I the date		ceipt Service.
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5.	Signature (Addressee)	Addressee's Address (Only if requested and fee is paid)
6.	Signature (Agent)	