

LOP - RECORD CHANGE REQUEST FORM

printed:  
03/03/97

Mark Out What Needs Changing and Hand to LOP Data Entry  
(Name/Address changes go to Annual Programs Data Entry)

Insp: EC

AGENCY # : 10000      SOURCE OF FUNDS: F      SUBSTANCE: 12034  
 StID : 4111      LOC:  
 SITE NAME: Continental Baking Co.      DATE REPORTED : 12/17/92  
 ADDRESS : 6841 Village Pkwy      DATE CONFIRMED: 12/17/92  
 CITY/ZIP : Dublin 94568      MULTIPLE RPs : N

SITE STATUS

-----  
 CASE TYPE: O    CONTRACT STATUS: 4    PRIOR CODE:2A4    EMERGENCY RESP:  
 RP SEARCH: S      DATE COMPLETED: 03/31/93  
 PRELIMINARY ASMNT: C    DATE UNDERWAY:      DATE COMPLETED: 02/06/95  
 REM INVESTIGATION:    DATE UNDERWAY:      DATE COMPLETED:  
 REMEDIAL ACTION:      DATE UNDERWAY:      DATE COMPLETED:  
 POST REMED ACT MON:    DATE UNDERWAY:      DATE COMPLETED:  
 ENFORCEMENT ACTION TYPE: 1      DATE ENFORCEMENT ACTION TAKEN: 03/31/93  
 LUFT FIELD MANUAL CONSID: 3HSCAWG  
 CASE CLOSED: Y      DATE CASE CLOSED: 03/03/97  
 DATE EXCAVATION STARTED : 12/17/92      REMEDIAL ACTIONS TAKEN: ED

RESPONSIBLE PARTY INFORMATION

-----  
 RP#1-CONTACT NAME: Larry Brown  
 COMPANY NAME: I B C  
 ADDRESS: 1324 Arden Way.  
 CITY/STATE: Sacramento, C A 95815

INSPECTOR VERIFICATION:

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DATA ENTRY INPUT:

Name/Address Changes Only			Case Progress Changes	
ANPPGMS _____	LOP _____	DATE _____	LOP _____	DATE _____

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY  
DAVID J. KEARS, Agency Director



ALAMEDA COUNTY ENV. HEALTH DEPT.  
ENVIRONMENTAL PROTECTION DIVISION  
1131 HARBOR BAY PKWY., #250  
ALAMEDA CA 94502-6577  
(510)567-6700

StID 4111

August 26, 1996

Mr. Larry Brown  
Interstate Brands Corp  
1324 Arden Way  
Sacramento, CA 95815

**RE: Well Decommission at 6841 Village Parkway, Dublin, CA**

Dear Mr. Brown:

This office and the San Francisco RWQCB have reviewed the case closure summary for the above referenced site and concur that no further action related to the underground tank release is required at this time. Before a remedial action completion letter is sent, the onsite monitoring wells, MW-1 through MW-3, should be decommissioned, if they will no longer be monitored. Please notify this office upon completion of well destruction so a closure letter can be issued.

Well destruction permits may be obtained from Alameda County Flood Control and Water Conservation, Zone 7. They can be reached at (510) 484-2600.

If you have any questions, I can be reached at (510) 567-6762.

Sincerely,

eva chu  
Hazardous Materials Specialist

cc: files

LOP - RECORD CHANGE REQUEST FORM

printed:  
07/15/96

Mark Out What Needs Changing and Hand to LOP Data Entry  
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Insp: EC

AGENCY # : 10000      SOURCE OF FUNDS: F      SUBSTANCE: 12034  
 StID : 4111      LOC:  
 SITE NAME: Continental Baking Co.      DATE REPORTED : 12/17/92  
 ADDRESS : 6841 Village Pkwy      DATE CONFIRMED: 12/17/92  
 CITY/ZIP : Dublin      94568      MULTIPLE RPs : N

SITE STATUS

-----  
 CASE TYPE: S      CONTRACT STATUS: 4      PRIOR CODE:2A4      EMERGENCY RESP:  
 RP SEARCH: S      DATE COMPLETED: 03/31/93  
 PRELIMINARY ASMNT:      DATE UNDERWAY:      DATE COMPLETED:  
 REM INVESTIGATION:      DATE UNDERWAY:      DATE COMPLETED:  
 REMEDIAL ACTION:      DATE UNDERWAY:      DATE COMPLETED:  
 POST REMED ACT MON:      DATE UNDERWAY:      DATE COMPLETED:

ENFORCEMENT ACTION TYPE: 1      DATE ENFORCEMENT ACTION TAKEN: 03/31/93  
 LUFT FIELD MANUAL CONSID: 2  
 CASE CLOSED:      DATE CASE CLOSED:  
 DATE EXCAVATION STARTED : 12/17/92      REMEDIAL ACTIONS TAKEN:

RESPONSIBLE PARTY INFORMATION

-----  
 RP#1-CONTACT NAME: Larry Brown  
 COMPANY NAME: I B C  
 ADDRESS: 1324 Arden Way.  
 CITY/STATE: Sacramento, C A 95815

INSPECTOR VERIFICATION:

NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

DATA ENTRY INPUT:

Name/Address Changes Only      Case Progress Changes

ANPNPGMS \_\_\_\_\_ LOP \_\_\_\_\_ DATE \_\_\_\_\_      LOP \_\_\_\_\_ DATE \_\_\_\_\_

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, Director

DEPARTMENT OF ENVIRONMENTAL HEALTH  
Environmental Protection Division  
1131 Harbor Bay Parkway, #250  
Alameda, CA 94502-6577  
(510) 567-6700

StID 4111

July 31, 1995

Mr. Fred Dannecker  
Continental Baking  
1525 Bryant St  
San Francisco, CA 94103

RE: Delineation of Groundwater Plume at 6841 Village Pkwy,  
Dublin, CA 94568

Dear Mr. Dannecker:

I have completed review of Woodward-Clyde's April 1995 Quarterly Groundwater Monitoring Report for the above referenced site. And upon review of the site file, it has been determined that case closure cannot be recommended until it has been demonstrated that residual contamination is not migrating offsite, and that contaminants are naturally bioattenuating.

To conduct this investigation, soil borings can be advanced near the perimeter of the property to collect grab groundwater samples. And, sampling of wells MW-1 and MW-2 should continue, but at a reduced frequency of twice a year. The next sampling event should be in September 1995. Please submit a workplan proposal for the delineation of the contaminant plume to this office within 45 days of the date of this letter, or by September 18, 1995.

If you have any questions, I can be reached at (510) 567-6762.

eva chu  
Hazardous Materials Specialist

cc: Jo Beth Folger, WCC, 500 12th St, Suite 100, Oakland 94607  
files

Larry -  
let's talk and see if we can  
get closure as soon as possible.  
LSC



State of California  
CONTRACTORS STATE LICENSE BOARD



License Number

224353

Entity

CORP

Business Name

PETROLEUM ENGINEERING INC

Classification

Expiration Date

06/30/94

*Handwritten notes:*  
TYPE  
CIP  
C-EN  
D-23

ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY

DAVID J KEARS, Agency Director



RAFAT A SHAHID, ASST AGENCY DIRECTOR

StID 4111

5/13/94

Mr. Fred Dannecker  
Continental Baking  
1525 Bryant Street  
San Francisco, CA 94103

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

**Subject: QMR for 6841 Village Pkwy, Dublin 94568**

Dear Mr. Dannecker:

I have completed review of Woodward-Clyde Consultants' May 1994 Preliminary Investigation and Evaluation Report for the above referenced site. This report summarizes the activities when three monitoring wells were installed around the former tank pit. Groundwater appears to be impacted by the release of fuel products. At this time, groundwater elevation should be measured on a monthly basis. And, groundwater should be sampled on a quarterly basis. The next sampling event should occur in June 1994. Monthly groundwater flow direction should be included in the quarter monitoring report, which is due 45 days after the wells are sampled. This schedule should continue for a year, at which time, the site will be re-evaluated to determine the next course of action.

If you have any questions, I can be reached at (510) 271-4530.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Eva Chu'.

eva chu  
Hazardous Materials Specialist

cc: Jo Beth Folger, WCC, 500 12th St, Suite 100, Oakland 94607  
files

contbake.3

white -env.health  
 yellow -facillty  
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH

80 Swan Way, #200  
 Oakland, CA 94621  
 (415) 271-4320

Hazardous Materials Inspection Form

II, III

Site ID # \_\_\_\_\_ Site Name CBC Today's Date 2/28/94

II.A BUSINESS PLANS (Title 19)

- \_\_\_ 1. Immediate Reporting 2703
- \_\_\_ 2. Bus. Plan Stds. 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)

Site Address 6241 Village Pkwy

City Dublin Zip 94568 Phone \_\_\_\_\_

II.B ACUTELY HAZ. MAT'LS

- \_\_\_ 10. Registration Form Filed 25533(a)
- \_\_\_ 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(i)
- \_\_\_ 18. Exemption Request? (Y/N) 25536(b)
- \_\_\_ 19. Trade Secret Requested? 25538

\_\_\_ 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 MW installation

\* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments:

III. UNDERGROUND TANKS (Title 23)

- General
- \_\_\_ 1. Permit Application 25284 (H&S)
  - \_\_\_ 2. Pipeline Leak Detection 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. Precis 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: \_\_\_\_\_

MW-1

MW-2

MW-3

MW-4 Soil sample from 6.5' silt clay (40% sand) - black-green  
 now black/little stain - sl. odor

11.5' silty clay - sl. odor

15' - sandy clay - no odor - wet.

II, III

Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Inspector: \_\_\_\_\_

Signature: \_\_\_\_\_

ALAMEDA COUNTY  
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

StID 4111

January 12, 1994

Jo Beth Folger  
Woodward-Clyde  
500 12th Street, Suite 100  
Oakland, CA 94607-4014

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

**Subject: Workplan Approval for CBC, 6841 Village Pkwy, Dublin**

Dear Ms. Folger:

I have completed review of Woodward-Clyde's November 1993 Preliminary Site Assessment Work Plan and their January 1994 Revisions to Site Assessment Workplan for the above referenced site. The proposal to advance four soil borings, converting three into groundwater monitoring wells, to determine the extent of soil and/or groundwater contamination is acceptable. Field activities should commence **within 45 days of the date of this letter**. Please notify this office at least 48 hours prior to the start of field work.

If you have any questions, I can be reached at (510) 271-4530.

Sincerely

A handwritten signature in cursive script, appearing to read 'Eva Chu'.

eva chu  
Hazardous Materials Specialist

cc: Fred Dannecker, CBC, 1525 Bryant St., San Francisco 94103  
files

1/11/94

Recommended to Jo Beth to do a  
continue our borings in one of the SB5.

contbake.2



ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY



DAVID J. KEARS, Agency Director

RAFAT A. SHAHID, ASST. AGENCY DIRECTOR

StID 4111

October 6, 1993

Mr. Fred Dannecker  
Continental Baking Co.  
1525 Bryant St.  
San Francisco, CA 94103

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

**Subject: PSA for Continental Baking, 6841 Village Pkwy, Dublin**

Dear Mr. Dannecker:

I have completed review of the case file for the above referenced site. When a 4,000 gallon diesel underground storage tank (UST) was removed from the above referenced site, soil samples taken from native soil beneath the tank exhibited up to 2,200 parts per million total petroleum hydrocarbons as diesel (ppm TPH-D).

Clearly an unauthorized release of petroleum products have occurred from the operation of the former UST. Please complete and return the enclosed UST Unauthorized Release/Contamination Site Report. Also, at this time, an investigation is required to determine the extent of soil and groundwater contamination which may have resulted from this release.

Such an investigation shall be in the form of a **Preliminary Site Assessment**, or PSA. The information gathered by the PSA will be used to determine an appropriate course of action to remediate the site, if deemed necessary. The PSA must be conducted in accordance with the RWQCB Staff Recommendations for the Initial Evaluation and Investigation of Underground Tanks, the State Water Resources Control Board LUFT Field Manual, and Article 11 of Title 23, California Code of Regulations. The major elements of such an investigation are summarized in the attached Appendix A.

The PSA proposal is due **within 45 days** of the date of this letter. Once the proposal is approved, field work should commence within 60 days. A report must be submitted within 45 days after the completion of this phase of work at the site. Subsequent reports are to be submitted quarterly until this site qualifies for RWQCB "sign off." All reports and proposals must be submitted under seal of a California Registered Geologist, Certified Engineering Geologist, or Registered Civil Engineer.

**Please be advised that this is a formal request for technical reports pursuant to Title 23, CCR, Section 2722(c). Any extensions of the stated deadlines, or modifications of the required tasks, must be confirmed in writing by either this agency or the RWQCB.**

Mr. Fred Dannecker  
re: PSA for 6841 Village Pkwy, Dublin  
October 6, 1993

Page 2

Should you have any questions about the content of this letter,  
please contact me at (510) 271-4530.

Sincerely,



eva chu  
Hazardous Materials Specialist

enclosures

cc: files

contbake.1

FACSIMILE TRANSMITTAL SHEET



Woodward-Clyde Consultants  
10370 Old Placerville Road, Suite 104  
Sacramento, California 95827-2505



Telephone: (916) 368-0988  
Facsimile: (916) 368-0967

Date: \_\_\_\_\_

TO: Evz Chu

Telecopier Number: \_\_\_\_\_

Company: \_\_\_\_\_

FROM: Jay Kaminé

RE: Unauthorized Release Report

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Number of pages transmitted (incl. cover sheet) 3

If you do not receive all of these pages or have any problems,  
please call Yvonne at (916) 368-0988.

**Consultants**

Engineering &amp; sciences applied to the earth &amp; its environment

**September 29, 1993**

**Ms. Susan L. Hugo  
Alameda County Health Agency  
Division of Hazardous Materials  
Department of Environmental Health  
80 Swan Way, Room 350  
Oakland, CA 94621**

**Subject: Underground Storage Tank Unauthorized Release Reports for Continental Baking Sites:**

**1010 46th Street, Oakland, CA 94609**

**6841 Village Parkway, Dublin, CA 94568**

**Dear Ms. Hugo:**

Attached are Underground Storage Tank Unauthorized Release Reports for the above two sites. These are being filed by Continental Baking Company after the removal of underground tanks at both sites. Woodward-Clyde is providing environmental engineering consulting services to Continental Baking.

If report forms have already been submitted by your agency for these sites, would you please advise us, and send me a copy of the forms?

Please feel free to phone me at (510) 874-3138 with any questions. I look forward to working with you and thank you for your assistance.

Sincerely,



**Jo Beth Folger**

**Attachments**

**cc: RWQCB, San Francisco Bay Region  
Fred Dannecker, CBC  
Charles Gjersvik, CBC-SL  
Jim Hummert, WCC-SL**

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT			
<b>EMERGENCY</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<b>HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED?</b> <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
<b>REPORT DATE</b> 06 24 1993		<b>CASE #</b> _____	
<b>REPORTED BY</b> NAME OF INDIVIDUAL FILING REPORT: <b>Fred Dannecker</b> PHONE: <b>x260 (415) 552-0950</b>		<b>FOR LOCAL AGENCY USE ONLY</b> I HEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM. SIGNED: <i>[Signature]</i> DATE: _____	
REPRESENTING: <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OTHER		COMPANY OR AGENCY NAME: <b>Continental Baking Company (CBC)</b>	
ADDRESS: <b>1525 Bryant Street, San Francisco, CA 94103</b>			
<b>RESPONSIBLE PARTY</b> NAME: _____ CONTACT PERSON: _____ PHONE: _____ <input type="checkbox"/> UNKNOWN		ADDRESS: _____	
<b>SITE LOCATION</b> FACILITY NAME (IF APPLICABLE): <b>CBC</b> OPERATOR: <b>CBC</b> PHONE: _____ ADDRESS: <b>6841 Village Pkwy, Dublin, Alameda, CA 94568</b> CROSS STREET: <b>Near Dublin Boulevard</b>		LOCAL AGENCY: <b>Alameda County Health Agency</b> CONTACT PERSON: <b>Eva Chu</b> PHONE: <b>(510) 271-4530</b> REGIONAL BOARD: <b>RWQCB, Oakland, CA</b> PHONE: _____	
<b>SUBSTANCES INVOLVED</b> (1) <b>Diesel Fuel</b> QUANTITY LOST (GALLONS): _____ <input checked="" type="checkbox"/> UNKNOWN (2) _____ <input type="checkbox"/> UNKNOWN			
<b>DISCOVERY/ATTENDANCE</b> DATE DISCOVERED: <b>1 2 1 7 9 2</b> HOW DISCOVERED: <input type="checkbox"/> INVENTORY CONTROL <input type="checkbox"/> SUBSURFACE MONITORING <input type="checkbox"/> NUISANCE CONDITIONS <input type="checkbox"/> TANK TEST <input checked="" type="checkbox"/> TANK REMOVAL <input type="checkbox"/> OTHER		DATE DISCHARGE BEGAN: _____ <input checked="" type="checkbox"/> UNKNOWN METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY): <input type="checkbox"/> REMOVE CONTENTS <input checked="" type="checkbox"/> CLOSE TANK & REMOVE <input type="checkbox"/> REPAIR PIPING <input type="checkbox"/> REPAIR TANK <input type="checkbox"/> CLOSE TANK & FILL IN PLACE <input type="checkbox"/> CHANGE PROCEDURE <input type="checkbox"/> REPLACE TANK <input type="checkbox"/> OTHER	
<b>SOURCE/CAUSE</b> <input type="checkbox"/> TANK LEAK <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> PIPING LEAK <input type="checkbox"/> OTHER <input type="checkbox"/> CORROSION <input checked="" type="checkbox"/> UNKNOWN <input type="checkbox"/> OTHER		CAUSE(S): _____	
<b>CASE TYPE</b> <input checked="" type="checkbox"/> UNDETERMINED <input type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)			
<b>CURRENT STATUS</b> CHECK ONE ONLY: <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input checked="" type="checkbox"/> LEAK BEING CONFIRMED <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT UNDERWAY <input type="checkbox"/> POST CLEANUP MONITORING IN PROGRESS <input type="checkbox"/> REMEDIATION PLAN <input type="checkbox"/> CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) <input type="checkbox"/> CLEANUP UNDERWAY			
<b>REMEDIAL ACTION</b> CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS): <input checked="" type="checkbox"/> EXCAVATE & DISPOSE (ED) <input type="checkbox"/> REMOVE FREE PRODUCT (FP) <input type="checkbox"/> ENHANCED BIO DEGRADATION (IT) <input type="checkbox"/> CAP SITE (CO) <input type="checkbox"/> EXCAVATE & TREAT (ET) <input type="checkbox"/> PUMP & TREAT GROUNDWATER (GT) <input type="checkbox"/> REPLACE SUPPLY (RS) <input type="checkbox"/> CONTAINMENT BARRIER (CB) <input type="checkbox"/> NO ACTION REQUIRED (NA) <input type="checkbox"/> TREATMENT AT HOOKUP (HU) <input type="checkbox"/> VENT SOIL (VS) <input type="checkbox"/> VACUUM EXTRACT (VE) <input type="checkbox"/> OTHER (OT)			
<b>COMMENTS</b> _____			

LOP - RECORD CHANGE REQUEST FORM

printed:  
06/23/93

Mark Out What Needs Changing and Hand to LOP Data Entry  
(Name/Address changes go to Annual Programs Data Entry)

AGENCY # : 10000 SOURCE OF FUNDS: F  
StID : 4111  
SITE NAME: Continental Baking Co.  
ADDRESS : 6841 -0 Village Pkwy.  
CITY/ZIP : Dublin 94568

SUBSTANCE: 12034  
DATE REPORTED : 12/17/92  
DATE CONFIRMED: 12/17/92  
MULTIPLE RPs : N

SITE STATUS

CASE TYPE: S	CONTRACT STATUS: 4	EMERGENCY RESP: -0-
RP SEARCH: S		DATE COMPLETED: 03/31/93
PRELIMINARY ASMNT: -	DATE UNDERWAY: -0-	DATE COMPLETED: -0-
REM INVESTIGATION: -	DATE UNDERWAY: -0-	DATE COMPLETED: -0-
REMEDIAL ACTION: -	DATE UNDERWAY: -0-	DATE COMPLETED: -0-
POST REMED ACT MON:-	DATE UNDERWAY: -0-	DATE COMPLETED: -0-

ENFORCEMENT ACTION TYPE: 1 DATE ENFORCEMENT ACTION TAKEN: 03/31/93  
LUFT FIELD MANUAL CONSID: 2  
CASE CLOSED: - DATE CASE CLOSED: -0-  
DATE EXCAVATION STARTED : 12/17/92 REMEDIAL ACTIONS TAKEN: -0-

RESPONSIBLE PARTY INFORMATION

RP#1-CONTACT NAME: Attn. Fred Dannecker  
COMPANY NAME: Continental Baking Co.  
ADDRESS: 1525 Bryant St.  
CITY/STATE: San Francisco, C A 94103

INSPECTOR VERIFICATION:					
NAME _____	SIGNATURE _____	DATE _____			
Name/Address Changes Only			DATA ENTRY INPUT:		
			Case Progress Changes		
ANNPGMS _____	LOP _____	DATE _____	LOP _____	DATE _____	

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



ALAMEDA COUNTY  
HEALTH CARE SERVICES  
AGENCY  
DAVID J. KEARS, Agency Director

STID 4111

DATE: 3/29/93

TO : Local Oversight Program

FROM: EVZ

SUBJ: Transfer of Eligible Oversight Case

Site name: Continental Baking Co.

Address: 6841 Village Parkway City Dublin Zip 94568

Closure plan attached?  Y  N DepRef remaining \$ \_\_\_\_\_

DepRef Project # \_\_\_\_\_ STID #(if any) 4111

Number of Tanks: 1 removed?  Y  N Date of removal 12/17/92

Leak Report filed? Y  N  Date of Discovery 12/17/92

Samples received?  Y  N Contamination: soil

Petroleum Y N Types: Avgas Jet leaded unleaded Diesel  
fuel oil waste oil kerosene solvents

Monitoring wells on site No Monitoring schedule? Y N

LUFT category 1 2 3 \* H S C A R W G O

Briefly describe the following:

Preliminary Assessment \_\_\_\_\_

Remedial Action \_\_\_\_\_

Post Remedial Action Monitoring \_\_\_\_\_

Enforcement Action \_\_\_\_\_

Soil ~~to~~ sample from under tank w/ 2,200 ppm TPH-D

(Parand Co. at Checkerboard Square  
St. Louis Mo 63164)

# Woodward-Clyde Consultants



Engineering & sciences applied to the earth & its environment

93 MAR 12 11:2:13

8 March 1993

Jeff Shapiro  
Alameda County Health Agency  
80 Swan Way, Room 200  
Oakland, California 94621

Regarding: Continental Baking Company  
6841 Village Parkway  
Dublin, California

*Fred Dannecker  
1525 Bryant St.  
SF. 94103  
(415) 552-0950*

Dear Mr. Shapiro:

On behalf of Continental Baking Company (CBC), I writing to inform you and to solicit your comments, if any, of CBC's intent to backfill the excavation at the above-referenced site with "clean," imported fill material and to proceed with site restoration. Although the excavation is fenced, due to health and safety concerns, CBC would like to proceed with backfilling and site restoration as soon as possible. CBC is aware that, depending upon the findings, additional investigation and/or remediation may be necessary at the site. A report of tank removal activities with analytical results is being prepared. This report will include information regarding stockpiled soil disposal and site restoration. As a result, this report will be submitted after site restoration has been completed. ?

Should you have any comments or questions, please do not hesitate to contact me at my direct number, (510) 874 3081. Unless I hear from you before Friday, March 12, 1993, Fred Dannecker of CBC and I will assume that you no comments or objections to CBC's plans to restore the site.

Sincerely,

  
Anita Yan

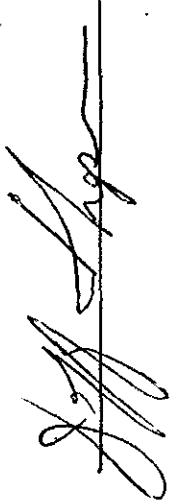
cc: Fred Dannecker  
RWQCB, San Francisco Bay Region  
Casey Duna, PEI

*3/29/93 per Anita Yan. Restoration =  
backfill and disposal of stockpiled  
soil. As of today, pot has been  
backfilled, uncertain if stock-soil  
has been hauled off for disposal.  
Report should be completed w/in 2 weeks*





ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY  
DEPARTMENT OF ENVIRONMENTAL HEALTH  
HAZARDOUS MATERIALS DIVISION  
80 SWAN WAY, ROOM 200  
OAKLAND, CA 94621  
PHONE NO. 510/271-4320



**ACCEPTED**  
DEPARTMENT OF ENVIRONMENTAL HEALTH  
470 - 27th Street, Third Floor  
Oakland, CA 94612  
Telephone: (415) 874-7237

These plans have been reviewed and found to be acceptable and essentially meet the requirements of State and local health laws. Changes to your plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction.

One copy of these accepted plans must be on the job and available to all contractors and craftsmen involved with the removal.

Any change or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspection Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 48 hours prior to the following required inspections:

- Removal of Tank and Piping
- Sampling
- Final Inspection

Issuance of a permit to operate is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

**UNDERGROUND TANK CLOSURE PLAN**

**\* \* \* Complete according to attached instructions \* \* \***

*Approved w/ Red-lined changes  
J/S 12/10/92*

1. Business Name CONTINENTAL BAKING CO  
Business Owner CONTINENTAL BAKING CO
  2. Site Address 6841 VILLAGE PARKWAY  
City DUBLIN CA Zip 94566 Phone 510 829 5744
  3. Mailing Address CONTINENTAL BAKING CO 6841 VILLAGE PARKWAY  
City DUBLIN CA Zip 94566 Phone 510 829 5744
  4. Land Owner CONTINENTAL BAKING CO., 1525 BRYANT ST (415) 552-0950  
Address SAN FRANCISCO City, State CA Zip 94103
  5. Generator name under which tank will be manifested CONTINENTAL BAKING CO
- EPA I.D. No. under which tank will be manifested CAC.000781480

6. Contractor PETROLEUM ENGINEERING INC  
Address 11 W 9TH ST  
City SANTA ROSA CA 95401 Phone 707 545 0360  
License Type\* A,B,SC61,SC10,SC21,D2D# 224358

\*Effective January 1, 1992, Business and Professional Code Section 7058.7 requires prime contractors to also hold Hazardous Waste Certification issued by the State Contractors License Board. Indicate that the certificate has been received, in addition, to holding the appropriate contractors license type.

7. Consultant WOODWARD & CLYDE  
Address 500 12TH ST SUITE 100  
City OAKLAND CA 94607 Phone 510 874 3081

8. Contact Person for Investigation  
Name HAROLD DYE Title OPERATIONS  
Phone 707 545 0360

9. Number of tanks being closed under this plan ONE  
Length of piping being removed under this plan UNKNOWN  
Total number of tanks at facility ONE

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

\*\* Underground tanks are hazardous waste and must be handled \*\*  
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter

Name ERICKSON INC EPA I.D. No CAD009466392  
Hauler License No. 0019 License Exp. Date CURRENT  
Address 255 PARR BLVD  
City RICHMOND State CA Zip 94801

b) Product/Residual Sludge/Rinsate Disposal Site

Name ERICKSON INC EPA I.D. No CAD009466392  
Address 255 PARR BLVD  
City RICHMOND State CA Zip 94801

c) Tank and Piping Transporter

Name ERICKSON INC EPA I.D. No. CAD009466392  
Hauler License No. 0019 License Exp. Date CURRENT  
Address 255 PARR BLVD  
City RICHMOND State CA Zip 94801

d) Tank and Piping Disposal Site

Name erickson incc EPA I.D. No. CAD009466392  
Address 255 PARR BLVD  
City RICHMOND State CA Zip 94801

11. Experienced Sample Collector

Name WOODWARD & CLYDE  
Company WOODWARD & CLYDE  
Address 500 12TH ST SUITE 100  
City OAKLAND State CA Zip 94607 Phone 510 874 3081

12. Laboratory

Name MID PACIFIC  
Address 625 B. CLYDE AVE  
City MOUNTAIN VIEW State CA Zip 94043  
State Certification No. 1206

13. Have tanks or pipes leaked in the past? Yes [ ] No [x]

If yes, describe. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Describe methods to be used for rendering tank inert

TANK TO BE PUMPED FREE OF PRODUCT.

30 LBS OF DRY ICE TO BE USED FOR EACH 1000 GAL. *or enough to cover the tank.*  
OF CAPACITY.

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be plugged.

The Bay Area Air Quality Management District (771-6000), along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of explosion proof combustible gas meters to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas meter on site to verify tank inertness.

15. Tank History and Sampling Information

Tank		Material to be sampled (tank contents, soil, ground-water, etc.)	Location and Depth of Samples
Capacity	Use History (see instructions)		
4,000	DIESEL	TPH D  BTX & E  TPH & BTX & E	IF DRY, COLLECT <i>Minimum 2 Samples</i> SAMPLES AT BOTH ENDS IN NATIVE SOIL. <i>Maximum 2ft into Native soil</i>  IF WATER IS PRESENT, COLLECT 1 OR 2 SAMPLES USING A BAILER.

One soil sample must be collected for every 20 feet of piping that is removed. A ground water sample must be collected should any ground water be present in the excavation.

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (Estimated)  30 YARDS <i>OVER BURDENED SOIL MUST BE PLACED ON 9mil PLASTIC AND COVERED.</i>	Sampling Plan <i>Soil Samples MUST be placed on ice and transported to a Certified Lab w/ proper Chain of Custody</i> (A DISCRETE SAMPLE TO BE TAKEN EVERY 20 <del>YARDS</del> <i>ft</i> of Linear Pipe.)

stockpiled soil must be placed on bermed plastic and must be completely covered by plastic sheeting.

16. Chemical methods and associated detection limits to be used for analyzing samples

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed. See attached Table 2.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
TPD D	GCID	3550	
BTX & E		8020 OR 8240	
TPH & BTK & E		8260	

17. Submit Site Health and Safety Plan (See Instructions)

18. Submit Worker's Compensation Certificate copy

Name of Insurer FAIRMONT INSURANCE CO

19. Submit Plot Plan (See Instructions)

20. Enclose Deposit (See Instructions)

21. Report any leaks or contamination to this office within 5 days of discovery. The report shall be made on an Underground Storage Tank Unauthorized Leak/Contamination Site Report form. (see Instructions)

22. Submit a closure report to this office within 60 days of the tank removal. This report must contain all the information listed in item 22 of the instructions.

I declare that to the best of my knowledge and belief the statements and information provided above are correct and true.

I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin on this project until this plan is approved.

I understand that any changes in design, materials or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

Signature of Contractor

Name (please type) PETROLEUM ENGINEERING INC

Signature *Harold Dye*

Date 11-30-92

Signature of Site Owner or Operator

Name (please type) CONTINENTAL BAKING CO

Signature *Paul J. ...*

Date 12-1-92

## INSTRUCTIONS

### General Instructions

- \* Three (3) copies of this plan plus attachments and deposit must be submitted to this Department.
- \* Any cutting into tanks requires local fire department approval.
- \* One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.
- \* State of California Permit Application Forms A and B are to be submitted to this office. One Form A per site, one Form B for each removed tank.

### Item Specific Instructions

2. SITE ADDRESS  
Address at which closure is taking place.
5. EPA I.D. NO. under which the tanks will be manifested  
EPA I.D. numbers may be obtained from the State Department of Health Services, 916/324-1781.
6. CONTRACTOR  
Prime contractor for the project.
10. STATE REGISTERED HAZARDOUS WASTE TRANSPORTERS/FACILITIES
  - a) All residual liquids and sludges are to be removed from tanks before tanks are inerted.
  - c) Tanks must be hauled as hazardous waste.
  - d) This is the place where tanks will be taken for cleaning.
15. TANK HISTORY AND SAMPLING INFORMATION  
Use History - This information is essential and must be accurate. Include tank installation date, products stored in the tank, and the date when the tank was last used.  
  
Material to be sampled - e.g. water, oil, sludge, soil, etc.  
  
Location and depth of samples - e.g. beneath the tank a maximum of two feet below the native soil/backfill interface, side wall at the high water mark, etc.

16. CHEMICAL METHODS AND ASSOCIATED DETECTION LIMITS

See attached Table 2.

17. SITE HEALTH AND SAFETY PLAN

A site specific Health and Safety plan must be submitted. We advocate the site health and safety plan include the following items, at a minimum:

- a) The name and responsibilities of the site health and safety officer;
- b) An outline of briefings to be held before work each day to appraise employees of site health and safety hazards;
- c) Identification of health and safety hazards of each work task. Include potential fire, explosion, physical, and chemical hazards;
- d) For each hazard, identify the action levels (contaminant concentrations in air) or physical conditions which will trigger changes in work habits to ensure workers are not exposed to unsafe chemical levels or physical conditions;
- e) Description of the work habit changes triggered by the above action levels or physical conditions;
- f) Frequency and types of air and personnel monitoring - along with the environmental sampling techniques and instrumentation - to be used to detect the above action levels. Include instrumentation maintenance and calibration methods and frequencies;
- g) Confined space entry procedures (if applicable);
- h) Decontamination procedures;
- i) Measures to be taken to secure the site, excavation and stockpiled soil during and after work hours (e.g. barricades, caution tape, fencing, trench plates, plastic sheeting, security guards, etc.);
- j) Spill containment/emergency/contingency plan. Be sure to include emergency phone numbers, the location of the phone nearest the site, and directions to the hospital nearest the site;
- k) Documentation that all site workers have received the appropriate OSHA approved trainings and participate in appropriate medical surveillance per 29 CFR 1910.120; and
- l) Page for employees to sign indicating they have read and will comply with the site health and safety plan.

The safety plan must be distributed to all employees and contractors working in hazardous waste operations on site. A complete copy of the site health and safety plan along with any standard operating procedures shall be on site and accessible at all times.



NOTE: These requirements are excerpts from 29 CFR Part 1910.120(b)(4), Hazardous Waste Operations and Emergency Response; Final Rule, March 6, 1989. Safety plans of certain underground tank sites may need to meet the complete requirements of this Rule.

19. PLOT PLAN

The plan should consist of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale;
- b) North Arrow;
- c) Property Lines;
- d) Location of all Structures;
- e) Location of all relevant existing equipment including tanks and piping to be removed and dispensers;
- f) Streets;
- g) Underground conduits, sewers, water lines, utilities;
- h) Existing wells (drinking, monitoring, etc.);
- i) Depth to ground water; and
- j) All existing tanks and piping in addition to the ones being pulled.

20. DEPOSIT

A deposit, payable to Alameda County for the amount indicated on the Alameda County Underground Storage Tank Fee Schedule, must accompany the plans.

21. Blank Unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from our office and from the San Francisco Bay Regional Water Quality Control Board (415/464-1255). Larger quantities may be obtained directly from the State Water Resources Control Board at (916) 739-2421.

22. TANK CLOSURE REPORT

The tank closure report should contain the following information:

- a) General description of the closure activities;
- b) Description of tank, fittings and piping conditions. Indicate tank size and former contents; note any corrosion, pitting, holes, etc.;

- c) Description of the excavation itself. Include the tank and excavation depth, a log of the stratigraphic units encountered within the excavation, a description of root holes or other potential contaminant pathways, the depth to any observed ground water, descriptions and locations of stained or odor-bearing soil, and descriptions of any observed free product or sheen;
- d) Description of sampling methods;
- e) Description of any remedial measures conducted at the time of tank removal;
- f) To-scale figures showing the excavation size and depth, nearby buildings, sample locations and depths, and tank and piping locations. Include a copy of the plot plan prepared for the Tank Closure Plan under item 19;
- g) Chain of custody records;
- h) Copies of signed laboratory reports;
- i) Copies of "TSDF to Generator" Manifests for all hazardous wastes hauled offsite (sludge, rinsate, tanks and piping, contaminated soil, etc.); and
- j) Tabulation of the volume and final destination of all non-manifested contaminated soil hauled offsite.

**TABLE #2**  
**RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR**  
**UNDERGROUND TANK LEAKS**

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u>		<u>WATER ANALYSIS</u>	
Unknown Fuel	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Leaded Gas	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	BTX&E	8020 OR 8240	BTX&E	602 or 624
	TPH AND BTX&E	8260	TOTAL LEAD AA	
	TOTAL LEAD AA			
	-----Optional-----			
	TEL	DHS-LUFT	TEL	DHS-LUFT
	EDB	DHS-AB1803	EDB	DHS-AB1803
Unleaded Gas	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Diesel, Jet Fuel and Kerosene	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Fuel/Heating Oil	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	TPH AND BTX&E	8260		
Chlorinated Solvents	CL HC	8010 or 8240	CL HC	601 or 624
	BTX&E	8020 or 8240	BTX&E	602 or 624
	CL HC AND BTX&E	8260	CL HC AND BTX&E	8260
Non-chlorinated Solvents	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	BTX&E	8020 or 8240	BTX&E	602 or 624
	TPH AND BTX&E	8260	TPH and BTX&E	8260
Waste and Used Oil or Unknown (All analyses must be completed and submitted)	TPH G	GCFID(5030)	TPH G	GCFID(5030)
	TPH D	GCFID(3550)	TPH D	GCFID(3510)
	TPH AND BTX&E	8260		
	O & G	5520 D & F	O & G	5520 C & F
	BTX&E	8020 or 8240	BTX&E	602, 624 or 8260
	CL HC	8010 or 8240	CL HC	601 or 624
	ICAP or AA TO DETECT METALS: Cd, Cr, Pb, Zn, Ni			
	METHOD 8270 FOR SOIL OR WATER TO DETECT:			
	PCB*		PCB	
	PCP*		PCP	
	PNA		PNA	
	CREOSOTE		CREOSOTE	

\* If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)

Reference: Tri-Regional Board Staff Recommendations for Preliminary Evaluation and Investigation of Underground Tank Sites, 10 August 1990

**EXPLANATION FOR TABLE #2: MINIMUM VERIFICATION ANALYSIS**

1. OTHER METHODOLOGIES are continually being developed and as methods are accepted by EPA or DHS, they also can be used.
2. For DRINKING WATER SOURCES, EPA recommends that the 500 series for volatile organics be used in preference to the 600 series because the detection limits are lower and the QA/QC is better.
3. APPROPRIATE STANDARDS for the materials stored in the tank are to be used for all analyses on Table #2. For instance, seasonally, there may be five different jet fuel mixtures to be considered.
4. To AVOID FALSE POSITIVE detection of benzene, benzene-free solvents are to be used.
5. TOTAL PETROLEUM HYDROCARBONS (TPH) as gasoline (G) and diesel (D) ranges (volatile and extractible, respectively) are to be analyzed and characterized by GCFID with a fused capillary column and prepared by EPA method 5030 (purge and trap) for volatile hydrocarbons, or extracted by sonication using 3550 methodology for extractable hydrocarbons. Fused capillary columns are preferred to packed columns; a packed column may be used as a "first cut" with "dirty" samples or once the hydrocarbons have been characterized and proper QA/QC is followed.
6. TETRAETHYL LEAD (TEL) analysis may be required if total lead is detected unless the determination is made that the total lead concentration is geogenic (naturally occurring).
7. CHLORINATED HYDROCARBONS (CL HC) AND BENZENE, TOLUENE, XYLENE AND ETHYLBENZENE (BTX&E) are analyzed in soil by EPA methods 8010 and 8020 respectively, (or 8240) and in water, 601 and 602, respectively (or 624).
8. OIL AND GREASE (O & G) may be used when heavy, straight chain hydrocarbons may be present. Infrared analysis by method 418.1 may also be acceptable for O & G if proper standards are used. Standard Methods" 17th Edition, 1989, has changed the 503 series to 5520.
9. PRACTICAL QUANTITATION REPORTING LIMITS are influenced by matrix problems and laboratory QA/QC procedures. Following are the Practical Quantitation Reporting Limits:

	<u>SOIL PPM</u>	<u>WATER PPB</u>
TPH G	1.0	50.0
TPH D	1.0	50.0
BTX&E	0.005	0.5
O & G	50.0	5,000.0

Based upon a Regional Board survey of Department of Health Services Certified Laboratories, the Practical Quantitation Reporting Limits are attainable by a majority of laboratories with the exception of diesel fuel in soils. The Diesel Practical Quantitation Reporting Limits, shown by the survey, are:

ROUTINE	MODIFIED PROTOCOL
≤ 10 ppm (42%)	≤ 10 ppm (10%)
≤ 5 ppm (19%)	≤ 5 ppm (21%)
≤ 1 ppm (35%)	≤ 1 ppm (60%)

When the Practical Quantitation Reporting Limits are not achievable, an explanation of the problem is to be submitted on the laboratory data sheets.

10. LABORATORY DATA SHEETS are to be signed and submitted and include the laboratory's assessment of the condition of the samples on receipt including temperature, suitable container type, air bubbles present/absent in VOA bottles, proper preservation, etc. The sheets are to include the dates sampled, submitted, prepared for analysis, and analyzed.
11. IF PEAKS ARE FOUND, when running samples, that do not conform to the standard, laboratories are to report the peaks, including any unknown complex mixtures that elute at times varying from the standards. Recognizing that these mixtures may be contrary to the standard, they may not be readily identified; however, they are to be reported. At the discretion of the LIA or Regional Board the following information is to be contained in the laboratory report:

The relative retention time for the unknown peak(s) relative to the reference peak in the standard, copies of the chromatogram(s), the type of column used, initial temperature, temperature program is C/minute, and the final temperature.

12. REPORTING LIMITS FOR TPH are: gasoline standard ≤ 20 carbon atoms, diesel and jet fuel (kerosene) standard ≤ 50 carbon atoms. It is not necessary to continue the chromatography beyond the limit, standard, or EPA/DHS method protocol (whichever time is greater).

#### EPILOGUE

ADDITIVES: Major oil companies are being encouraged or required by the federal government to reformulate gasoline as cleaner burning fuels to reduce air emissions. MTBE (Methyl-tertiary butyl ether), ETHANOL (ethyl alcohol), and other chemicals may be added to reformulate gasolines to increase the oxygen content in the fuel and thereby decrease undesirable emissions (about four percent with MTBE). MTBE and ethanol are, for practical purposes, soluble in water. The removal from the water column will be difficult. Other compounds are being added by the oil companies for various purposes. The refinements for detection and analysis for all of these additives are still being worked out. If you have any questions about the methodology, please call your Regional Board representative.

GENERAL CONTRACTORS  
11 WEST NINTH STREET

LICENSE NO. 224358  
SANTA ROSA, CA. 95401

PHONE (707) 545-0360  
FAX (707) 545-7068

DATE	12 4 92	JOB NO.	B4991/3
ATTENTION	FRED DANNECKER		
RE:	COUNTY HAZARDOUS MATERIALS		
	DECLARATION OF REFUND		
	RECIPIENT FORMS		

TO CONTINENTAL BAKING CO  
1525 BRYANT ST  
SAN FRANCISCO CA 94103

WE ARE SENDING YOU  Attached  Under separate cover via \_\_\_\_\_ the following items:

- Shop drawings       Prints       Plans       Samples       Specifications  
 Copy of letter       Change order       \_\_\_\_\_

COPIES	DATE	NO.	DESCRIPTION
2			FORMS FOR REFUND DESIGNATION FORMS
			FOR ALAMEDA COUNTY SITES., DUBLIN AND OAKLAND.

THESE ARE TRANSMITTED as checked below:

- For approval       Approved as submitted       Resubmit \_\_\_\_\_ copies for approval  
 For your use       Approved as noted       Submit \_\_\_\_\_ copies for distribution  
 As requested       Returned for corrections       Return \_\_\_\_\_ corrected prints  
 For review and comment       \_\_\_\_\_  
 FOR BIDS DUE \_\_\_\_\_ 19 \_\_\_\_\_  PRINTS RETURNED AFTER LOAN TO US

REMARKS FRED, WE AS THE CONTRACTOR ARE OBLIGATED TO SECURE PERMITS FOR  
BOTH SITE IN ALAMEDA COUNTY. THEIR FEES ARE SET UP BASED ON THE  
AMOUNT OF TANKS TO BE REMOVED. THIS IS A FORM THAT I HAVE TO HAVE  
COMPLETED IN ORDER SHOULD THERE BE ANY REFUND FOR OVERPAYMENT IT WOULD  
DESIGNATE WE THE CONTRACTOR WHO PAID THE ORGINAL FEE WOULD BE THE  
RECIPIENT.

PLEASE SIGN AND FORWARD TO ALAMEDA COUNTY HEALTH, OAKLAND.

ANY QUESTIONS PLEASE CALL ME

COPY TO \_\_\_\_\_

SIGNED: *Thanks*  
*Harold Dye*

ALAMEDA COUNTY HAZARDOUS MATERIALS DIVISION  
Declaration of Site Account Refund Recipient

DEC 9 1992

SITE OWNER FILLS OUT PER SITE  
-- OPTIONAL --

The property owner will use this form to designate someone other than him- or her- self to receive any refund due at the completion of all deposit/refund projects at the site listed below. In the absence of this form, the property owner will receive any refund. Only one person at any one time may be designated to receive any refund.

SITE NUMBER/ADDRESS:

PROPERTY OWNER

Site Number

CONTINENTAL BAKING CO

Company Name

CONTINENTAL BAKING CO

Owner's Name

6841 VILAGE PARKWAY

Street Address

1525 BRYANT ST

Owner's Address

DUBLIN CA

City

94566

Zip Code

SAN FRANCISCO CA 94103

Owner's City

State

Zip

I designate the following person to receive any refund due at the completion of all deposit/refund projects:

PETROLEUM ENGINEERING INC

Name

11 W. 9TH ST

Street Address

SANTA ROSA CA 95401

City / Zip

*Continental Baking Co.*  
Property Owner Signature

Date

12-8-92

CONTINENTAL BAKING CO

Property Owner Name

RETURN FORM TO: Alameda County, Hazardous Materials Div.  
80 Swan Way, Rm 200  
Oakland, CA 94621-1439  
Phone: (510) 271-4320

ALAMEDA COUNTY HAZARDOUS MATERIALS DIVISION  
Acknowledgement of Refund Recipient for Site Account

DEPOSITOR FILLS OUT PER SITE

-- REQUIRED --

The depositor will use this form to acknowledge that the property owner or his or her designee will receive any refund due at the completion of all deposit/refund projects at the site listed below.

SITE NUMBER/ADDRESS:

REFUND RECIPIENT-PROPERTY OWNER

_____ Site Number		_____		
_____ Company Name		_____ Owner's Name		
_____ Street Address		_____ Owner's Address		
_____ City	_____ Zip Code	_____ Owner's City	_____ State	_____ Zip

I have read the description of the project Deposit/Refund Procedure, and have had an opportunity to ask questions about it. I understand that regardless of who deposits money into the site account, any deposit money remaining at the completion of all projects being conducted at this site will be refunded solely to the property owner or his or her designee.

_____ Signature of Depositor	_____ Date
_____ Depositor Name	
_____ Company Name	
_____ Street Address	
_____ City / Zip	

RETURN FORM TO: Alameda County, Hazardous Materials Div.  
80 Swan Way, Rm 200  
Oakland, CA 94621-1439  
Phone: (510) 271-4320



white -env.health  
 yellow -facility  
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH  
 Hazardous Materials Inspection Form

80 Swan Way, #200  
 Oakland, CA 94621  
 (415) 271-4320

II, III

Site ID # \_\_\_\_\_ Site Name Continental Baking Co Today's Date 1/17/92

Site Address 6841 Village Pkwy.  
 City Dublin Zip 94 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:

TANK Removal  
CHRIS FRANCHETTI - Foreman; Anita YAN  
UEL-  
1-4,000 GALLON DIESEL TANK - Removed Fill  
SHOWS Signs of HEAVY Hydrocarbon Contamination.  
HEAVY TO MODERATE DIESEL odor DETECTED. Vent Pipe FOUND  
ON-SITE. I AM REQUESTING a SOIL TEST FOR  
Tetraethyl Lead Be RUN FOR each SOIL Sample Taken  
THE TANK IS WRAPPED in TAR AND Fiberglass  
NO HOLES DETECTED in Tank.  
TP1 - Depth 10'6" (TPH-D)  
TP2 - Depth 10' (BTEX)  
organic Pb  
Visual Contamination is evident along the SIDEWALLS.  
THE FILL HAS VISUAL signs of Contamination.

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus. Plan Stds. 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. MAT'L'S

- 10. Registration Form Filed 25533(a)
- 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) 25536(b)
- 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- |                               |  |
|-------------------------------|--|
| General                       | <input type="checkbox"/> 1. Permit Application 25284 (H&S)                                 |
|                               | <input type="checkbox"/> 2. Pipeline Leak Detection 25292 (H&S)                            |
|                               | <input type="checkbox"/> 3. Records Maintenance 2712                                       |
|                               | <input type="checkbox"/> 4. Release Report 2651  |
|                               | <input type="checkbox"/> 5. Closure Plans 2670   |
| Monitoring for Existing Tanks | <input type="checkbox"/> 6. Method   |
|                               | 1) Monthly Test  |
|                               | 2) Daily Vadose<br>Semi-annual groundwater<br>One time soils                               |
|                               | 3) Daily Vadose<br>One time soils<br>Annual tank test                                      |
|                               | 4) Monthly Groundwater<br>One time soils   |
|                               | 5) Daily Inventory<br>Annual tank testing<br>Cont pipe leak det<br>Vadose/groundwater mon. |
|                               | 6) Daily Inventory<br>Annual tank testing<br>Cont pipe leak det                            |
|                               | 7) Weekly Tank Gauge<br>Annual tank testing  |
|                               | 8) Annual Tank Testing<br>Daily Inventory  |
|                               | 9) Other _____   |
| New Tanks                     | <input type="checkbox"/> 7. Precs Tank Test 2643   |
|                               | Date: _____  |
|                               | <input type="checkbox"/> 8. Inventory Rec. 2644  |
|                               | <input type="checkbox"/> 9. Soil Testing 2646  |
|                               | <input type="checkbox"/> 10. Ground Water. 2647  |
|                               | <input type="checkbox"/> 11. Monitor Plan 2632   |
|                               | <input type="checkbox"/> 12. Access. Secure 2634   |
|                               | <input type="checkbox"/> 13. Plans Submit 2711   |
|                               | Date: _____  |
|                               | <input type="checkbox"/> 14. As Built 2635   |
| Date: _____                   |  |

Contact: Chris Franchetti's  
 Title: Foreman  
 Signature: [Signature]

Inspector: Jeff Shapiro  
 Signature: [Signature]

II, III

ANNUAL  
**PERMIT**

**Permit Issued To**

(Insert Employer's Name, Address and Telephone No.)

BKH Excavators  
 5 West Ninth Street  
 Santa Rosa CA 95401

No. \_\_\_\_\_

Date January 14, 1992

Region 1 - San Francisco

District 5 - Santa Rosa

Tel. 707-576-2388

Type of Permit Trenching and Excavation

Pursuant to Labor Code Sections 6500 and 6502, this Permit is issued to the above-named employer for the projects described below.

State Contractor's License Number 498540		Permit Valid through December 31, 1992		
Description of Project	Location Address	City and County	Anticipated Dates	
			Starting	Completion
various	various	various	various	various

**This Permit is issued upon the following conditions:**

1. That the work is performed by the same employer. If this is an annual permit the appropriate District Office shall be notified, in writing, of dates and location of job site prior to commencement.
2. That employer will comply with all occupational safety and health standards or orders applicable to the above projects, and any other lawful orders of the Division.
3. That if any unforeseen condition causes deviation from the plans or statements contained in the Permit Application Form the employer will notify the Division immediately.
4. Any variation from the specification and assertions of the Permit Application Form or violation of safety orders may be cause to revoke the permit.
5. This permit shall be posted at or near each place of employment as provided in 8 CAC 341.4.

Received From Dye		Received By Bethel	
<input type="checkbox"/> Cash	Amount 100	Date 1-14-92	
<input checked="" type="checkbox"/> Check			

Investigated by \_\_\_\_\_ Safety Engr. Date

Approved by Paul S. Budak 1/14/92  
 Dist. Manager Date



# CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

01/07/92

**PRODUCER**  
**Woodruff-Sawyer & Co.**  
 220 Bush Street  
 7th Floor  
 San Francisco, CA 94104

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

### COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A** Fairmont Insurance Co.

COMPANY LETTER **B**

COMPANY LETTER **C**

COMPANY LETTER **D**

COMPANY LETTER **E**

**INSURED**  
**Petroleum Engineering, Inc.**  
 11 West 9th Street  
 Santa Rosa, CA 95401

F2

**COVERAGES**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	<b>GENERAL LIABILITY</b>				GENERAL AGGREGATE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$
	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				PERSONAL & ADV. INJURY \$
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$
					FIRE DAMAGE (Any one fire) \$
					MED. EXPENSE (Any one person) \$
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input type="checkbox"/> HIRED AUTOS				
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE \$
<b>A</b>	<b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b>	<b>WCP80563920</b>	<b>01/01/92</b>	<b>01/01/93</b>	STATUTORY LIMITS
					EACH ACCIDENT \$ <b>1,000,000</b>
					DISEASE—POLICY LIMIT \$ <b>1,000,000</b>
					DISEASE—EACH EMPLOYEE \$ <b>1,000,000</b>
	<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**  
 As respects: All California Operations

**CERTIFICATE HOLDER**  
 County of Alameda  
 80 Swan Way  
 Oakland, CA 94621

**CANCELLATION**  
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



*Building Quality*



## HAZARDOUS SUBSTANCES REMOVAL AND REMEDIAL ACTIONS CERTIFICATION

Pursuant to the provisions of Section 7058.7 of the Business and Professions Code, the Registrar of Contractors does hereby certify that the following qualifying person has successfully completed the hazardous substances removal and remedial actions examination.



Qualifier: DAVID LEWIS LAMPI

License No.: 224358

Namestyle: PETROLEUM ENGINEERING INC

WITNESS my hand and official seal this  
24th day of DECEMBER 1991

*David R. Phillips*  
Registrar of Contractors

131.36 (2/91)

This certification is the property of the Registrar of Contractors, is not transferable, and shall be returned to the Registrar upon demand when suspended, revoked, or invalidated for any reason.

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