DAVID J. KEARS, Agency Director



State Water Resources Control Board
Division of Clean Water Programs
UST Local Oversight Program
RAFAT A. SHAHID, Assistant Agency Director

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

Certified Mail # P 367 604 704

AGENCY

03/03/92 STID# 3735

Notice of Requirement to Reimburse

SITE

George Haywood

834 Blossom Way Hayward, Ca 94541

George Haywood 834 Blossom Way Hayward , CA 94541 Responsible Party Property Owner

Date First Reported 05/15/91

Substance: Gasoline Petroleum: (X) Yes

The federal Petroleum Leaking Underground Storage Tank Trust Fund (Federal Trust Fund) provides funding to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The legislature has authorized funds to pay the local and state agency administrative and oversight costs associated with the cleanup of releases from underground storage tanks. The direct and indirect costs of overseeing removal or remedial action at the above site are funded, in whole or in part, from the Federal Trust Fund. The above individual(s) or entity(ies) have been indentified as the party or parties responsible for investigation and cleanup of the above site. YOU ARE HEREBY NOTIFIED that pursuant to Title 42 of the United States Code, Section 6991b(h)(6) and Sections 25297.1 and 25360 of the California Health and Safety Code, the above Responsible Party or Parties must reimburse the State Water Resources Control Board not more than 150 percent of the total amount of site specific oversight costs actually incurred while overseeing the cleanup of the above underground storage tank site, and the above Responsible Party or Parties must make full payment of such costs within 30 days of receipt of a detailed invoice from the State Water Resources Control Board.

If you have any questions concerning this matter please contact Thomas Peacock, Supervising Hazardous Material Specialist, at this office.

Edgar B. Howell, III, Chief Contract Project Director

cc: Sandra Malos, SWRCB

SWRCB Use:

Add: X Reason: New Case

*\$*5

## P 367 604 704

## RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

≿U.S.G.P.O. 1989-234-555	Sent to George Haywood Street and No 834 Blossom Way		
P.0	P O , State and ZIP Code		
S	Hayward, CA 9454	1	
Li	Postage	S	(5
	Certified Fee		X
	Special Delivery Fee		ריין
	Restricted Delivery Fee		Q
•	Return Receipt showing to whom and Date Delivered		0/2
1986	Return Receipt showing to whom, Date, and Address of Delivery		V,
June,	TOTAL Postage and Fees	52.Z	9
PS Form 3800, June 1985	Postmark or Date 3.13.	92 41	M

SENDER: Complete items 1 and 2 when additional 3 and 4.  Put your address in the "RETURN TO" Space on the rever card from being returned to you. The return receipt fee will p to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1.   Show to whom delivered, date, and addressee's ad (Extra charge)	rse side. Failure to do this will prevent this rovide you the name of the person delivered g services are available. Consult postmaster ted.
George Haywood 834 Blossom Way Hayward, CA 94541	4. Article Number  Type of Service:  Registered Insured COD Express Mail Return Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Adent X 7. Date of Delivery 3-17-52	8. Addressee's Address (ONLY if requested and fee paid)