

Sellens Consulting LLC

5031 Lourina Court
Fair Oaks, CA 95628

Phone: (916) 966-8502
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Email: msellens@sbcglobal.net

February 11, 2006

Mr. Jerry Wickham
Alameda County Health Care Services
Environmental Health Services
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

Subject: Underground Storage Tank Investigation at the Alameda County Fairgrounds in Pleasanton, California. Case # RO0002591

Dear Mr. Wickham:

Your letter of August 29, 2006, responded to the "Site Investigation Report", of August 14, 2006, that presented the activities and results of the subsurface investigation conducted at the subject site. In your letter you presented two technical comments that needed to be addressed, prior to case closure being considered addressed. The technical comments and responses are presented below.

Comment 1: ***Fairground Water Supply Wells.** In our correspondence dated March 7, 2006, we previously requested information on water supply wells on the Fairground property. Please show the locations of these wells on site maps and provide construction details to indicate the depth intervals over which these wells extract groundwater. In addition, please provide analytical data collected from the periodic testing of these wells.*

Response 1: On the Fairgrounds property, there are two water supply wells, (1) Main Well and (2) Auxiliary Well. The location of these wells is shown in Figure 1. The majority of the water used for irrigation, sanitation, and drinking purposes at the Alameda County Fairgrounds, is obtained from the "Main Well", located on the Fairgrounds golf course, in the eastern portion of the Fairgrounds.

The "Main Well" is a 12-inch diameter well, approximately 500 feet deep, with steel casing, and extracts water from a deep of 218 feet bgs and below. The extraction volume is dependant on the time of year, for example, the average daily extraction volume in February 2006 was 101,210 gallons per day (gpd), compared to 366,360 gpd in July 2006. As the "Main Well" is used as a drinking water supply well it is tested on a monthly basis for bacteria, No bacteria-related or other contaminants, i.e. metals, or water quality issues have ever been reported in the drinking water. All water quality analytical results are

submitted to the Department of Health Services-Office of Drinking Water (DHS). In addition, in May 1998 and June 1999, tetrachloroethylene (PCE), at levels below the state drinking water standard was reported, so in December 2000, the Fairgrounds voluntarily discontinued use of the Main Well. During the period December 2000 and July 2001, the majority of the Fairgrounds water was supplied by the City of Pleasanton. In July 2001, the Fairgrounds installed a GAC filtration system. Since the installation of the filtration system the water being processed by the system has been analyzed to determine the concentrations of volatile organic compounds (VOC), with the emphasis on PCE entering the system, ensure no PCE is entering the Fairgrounds water distribution system, and monitor any breakthrough of the GAC system. Since the installation of the filtration systems, influent and effluent sampling have been conducted on a quarterly basis, along with the occasional sampling between the two GAC canisters of the system. This analysis is in addition to that required and supplied to DHS. No other contaminants, including petroleum hydrocarbons, have ever been reported in water from the well. The historical analytical results for the PCE, along with flow rates, are summarized in Table 1.

The "Auxiliary Well" is used to back-up the "Main Well", particularly during the summer months. It also supplies water to the barn area and the satellite watering facility. The "Auxiliary Well" is a approximately 300 feet deep, fully cased, and extracts water from a deep of 210 feet bgs and below. The extraction volume is dependant on the time of year, for example, the average daily extraction volume in February 2006 is 16,665 gallons per day (gpd), compared to 194,890 gpd in July 2006.

As the Auxiliary Well is used as a drinking water source it is tested as required by State law, with the results submitted to DHS. To date, no contaminants of concern have been reported from the well. This includes bacteria, metals, volatile organic compounds, and general water chemistry/quality. The frequency of these analyses are varied, i.e. bacteria conducted monthly, and VOC conducted every two years (last tested 6/28/06)

Comment 2: ***Geotracker Submittal.*** *A review of the SWRCB Geotracker website indicates that no data or reports have been submitted to Geotracker for your site. Pursuant to CCR Section 2729 and 2729.1, beginning September 1, 2001, all analytical data, including monitoring well samples, submitted in a report to a regulatory agency as part of the LUFT program, must be transmitted electronically to the SWRCB Geotracker website via the internet.*

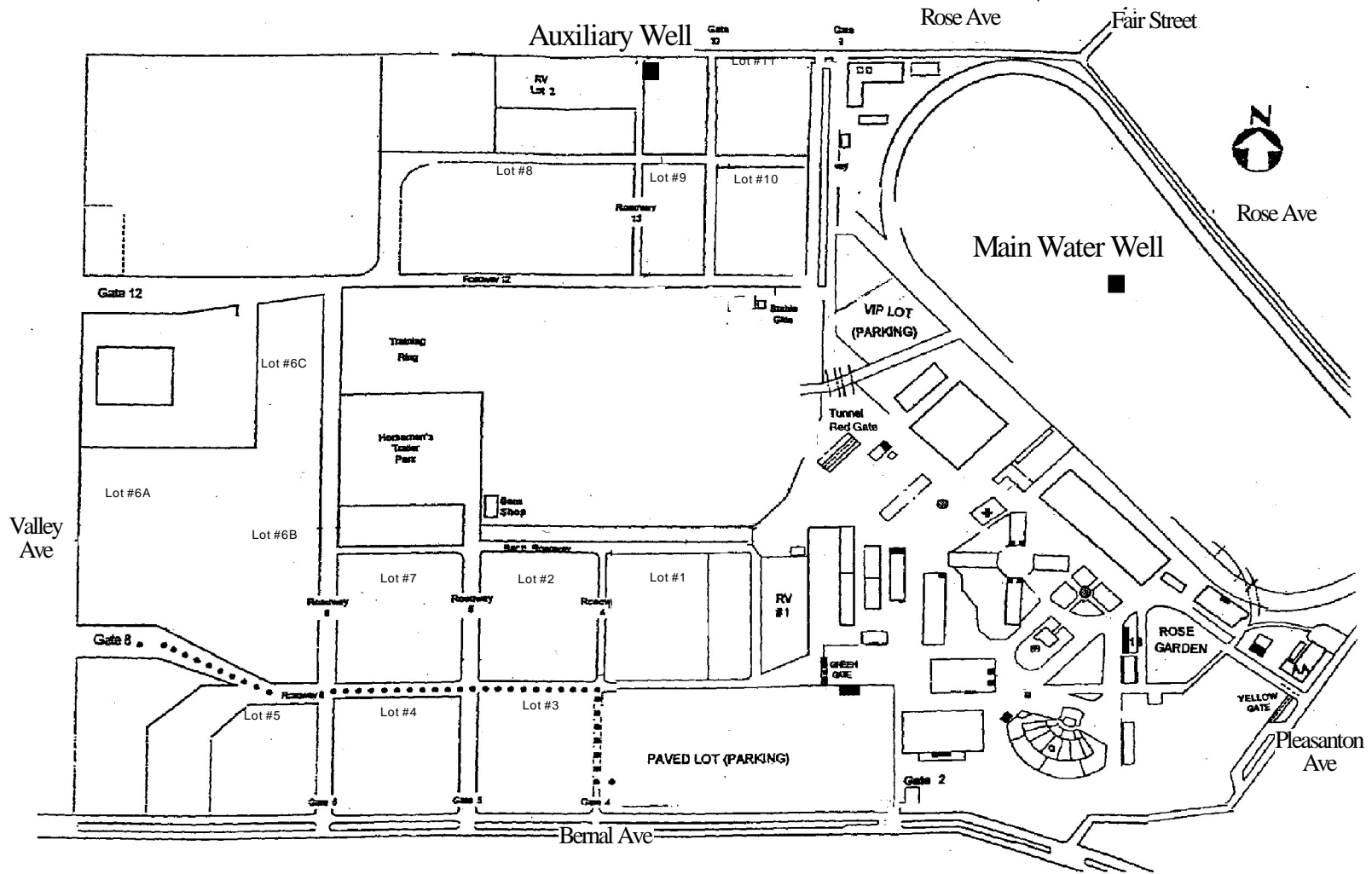
Response 2: A Geotracker account has been set-up for the Alameda County Fairgrounds UST program. It is our understanding that the required data has been submitted to the site.

With the submittal of this information, it is our understanding that procedure of case closure can progress. However, in the meantime, if you require any additional information, please do not hesitate to contact either myself at the letterhead address directly.

Sincerely

Michael Sellens, REA, RG
Project Manager

cc. Ed Johnson, Alameda County Fairgrounds, 4501 Pleasanton Avenue,
Pleasanton, California 94566



Location of Alameda County Fairground Water Supply Wells

Figure 1

Not to Scale

Alameda County Fair Association
 4501 Pleasanton Avenue
 Pleasanton, California 94566

**Sellens
 Consulting**

Table 1
Removal of PCE from Main Well
Table 1: Groundwater Extraction and PCE Removal from Main Well
Alameda County Fair
Pleasanton, California

Date	MeterReading	Volume (gallons)	Cum. Volume (gallons)	Period Volume (Liters)	Inf/PCE ug/L	Betw/PCE ug/L	Eff/PCE ug/L	PCE Removed (grams)	Cum PCE Removed (grams)	Cum PCE Removed (pounds)
12/2/2000					5.2					
Filtration System Installed and Operation Commenced										
7/7/2001	280131850	0	0	0						0
7/14/2001	281984100	1852250	1852250	7010766.25	3.2		<0.5	22.43	22.43	0.05
8/3/2001	288765050	6780950	8633200	25665895.75	3.4		<0.5	87.26	109.70	0.24
10/22/2001	316347300	27582250	36215450	104398816.3	3.1		<0.5	323.64	433.33	0.96
11/26/2001	321344450	4997150	41212600	18914212.75	5.4		<0.5	102.14	535.47	1.18
3/8/2002	331094400	9749950	50962550	36903560.75	5.6	<0.5	<0.5	206.66	742.13	1.64
5/23/2002	345683100	14588700	65551250	55218229.5	4.1	<0.5	<0.5	226.39	968.53	2.14
7/29/2002	380579600	34896500	100447750	132083252.5	7.5	-	<0.5	990.62	1959.15	4.32
9/30/2002	403135800	22556200	123003950	85375217	5.9	-	<0.5	503.71	2462.86	5.43
1/7/2003	418096300	14960500	136112200	56625492.5	20	<0.5	<0.5	1132.51	3595.37	7.93
8/18/2003	479284000	61187700	190518950	231595444.5	7.2		<0.5	1667.49	5262.86	11.60
12/15/2003	509368650	30084650	193021350	113870400.3	30		<0.5	3416.11	8678.97	19.14
5/4/2004	526919000	17550350	205574550	66428074.75	25	<0.5	<0.5	1660.70	10339.68	22.80
8/10/2005	628257100	101338100	297162700	383564708.5	19	<0.5	<0.5	7287.73	17627.40	38.87
10/18/2005	659930200	31673100	314247100	119882683.5	16		<0.5	1918.12	19545.53	43.10
1/18/2006	675169150	15238950	294589550	57679425.75	0.25	<0.5	<0.5	14.42	19559.95	43.13
4/19/2006	684051350	8882200	280915550	33619127	5.6		<0.5	188.27	19748.21	43.54
7/27/2006	719058800	35007450	300962500	132503198.3	0.25		<0.5	33.13	19781.34	43.62
10/24/2006	743897500	24838700	264613500	94014479.5	11	<0.5	<0.5	1034.16	20815.50	45.90

Wickham, Jerry, Env. Health

To: Michael Sellens**Subject:** RE: RO0002591, Report Upload

Michael,

This report was received by ACEH. Please upload this report as well as the August 14, 2006 Site Investigation Report in pdf format to the Geotracker website.

Regards,

Jerry Wickham

Alameda County Environmental Health

1131 Harbor Bay Parkway

Alameda, CA 94502-6577

510-567-6791 phone

510-337-9335 fax

jerry.wickham@acgov.org

From: Michael Sellens [mailto:msellens@sbcglobal.net]**Sent:** Thursday, March 29, 2007 9:08 PM**To:** dehloptoxic, Env. Health**Cc:** Wickham, Jerry, Env. Health**Subject:** RE: RO0002591, Report Upload

Sorry about the delay, but I think I have just reloaded this file.

Michael Sellens

"dehloptoxic, Env. Health" <dehloptoxic@acgov.org> wrote:

Good Morning Michael,

I am afraid I was unable to find the document you are referring to. Please resubmit the document and I will process it as soon as possible. Thank you and have a great day.

From: Michael Sellens [mailto:msellens@sbcglobal.net]**Sent:** Monday, February 12, 2007 10:25 AM**To:** dehloptoxic, Env. Health**Cc:** Wickham, Jerry, Env. Health**Subject:** RO0002591, Report Upload

File added to ftp site.

Michael Sellens

RO2591

Wickham, Jerry, Env. Health

From: Wickham, Jerry, Env. Health
Sent: Wednesday, September 06, 2006 4:56 PM
To: 'ed@alamedacountyfair.com'
Subject: RO2591 Analytical data for water supply wells

Mr. Johnson

Linda Hearne of your office requested more specific information regarding the analytical data from water supply wells that Alameda County Environmental Health requested in our August 29, 2006 correspondence. Please submit all analytical data from the Fairground water supply wells over the past three years for volatile organic compounds, fuel oxygenates (including MTBE), and total petroleum hydrocarbons.

Regards,
Jerry Wickham
Hazardous Materials Specialist
Alameda County Environmental Health
1131 Harbor Bay Parkway
Suite 250
Alameda, CA 94502-6577
510-567-6791 phone
510-337-9335 Fax
jerry.wickham@acgov.org

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY

DAVID J. KEARS, Agency Director

ENVIRONMENTAL HEALTH SERVICES

ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

August 29, 2006

Mr. Ed Johnson
Alameda County Fairgrounds
4501 Pleasanton Avenue
Pleasanton, CA 94566

County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

Subject: Fuel Leak Case No. [REDACTED] 2691, Alameda County Fairgrounds, 4501 Pleasanton Avenue, Pleasanton, CA

Dear Mr. Johnson:

Alameda County Environmental Health (ACEH) has reviewed the case file for the above-referenced site and the report entitled "Site Investigation Report," dated August 14, 2006. The Site Investigation Report presents results from one soil boring advanced at the site to investigate the extent of soil contamination in the area of the former UST and dispenser and determine whether groundwater quality has been affected. The report concluded that the low levels of petroleum hydrocarbons detected during UST removal have not migrated to groundwater and requested site closure. The site will be reviewed for possible case closure provided that you address the two technical comments below.

We request that you address the technical comments below, perform the proposed work, and send us the reports described below.

TECHNICAL COMMENTS

1. **Fairgrounds Water Supply Wells.** In our correspondence dated March 7, 2006, we previously requested information on water supply wells present on Fairgrounds property. Please show the locations of these wells on site maps and provide construction details to indicate the depth intervals over which these wells extract groundwater. In addition, please provide analytical data collected from the periodic testing of these wells. Please submit this information by **October 15, 2006**.
2. **Geotracker Submittals.** A review of the SWRCB Geotracker website indicates that no data or reports have been submitted to Geotracker for your site. Pursuant to CCR Sections 2729 and 2729.1, beginning September 1, 2001, all analytical data, including monitoring well samples, submitted in a report to a regulatory agency as part of the LUFT program, must be transmitted electronically to the SWRCB Geotracker website via the internet. Additionally, beginning January 1, 2002, all permanent monitoring points utilized to collect groundwater samples (i.e. monitoring wells) and submitted in a report to a regulatory agency, must be

surveyed (top of casing) to mean sea level and latitude and longitude accurate to within 1-meter accuracy, using NAD 83, and transmitted electronically to the SWRCB Geotracker website. Beginning July 1, 2005, electronic submittal of a complete copy of all reports is required in Geotracker (in PDF format). In order to remain in regulatory compliance, please upload **by October 15, 2006**, all analytical data (collected on or after September 1, 2001) and a copy, in PDF format, of all reports prepared after July 1, 2005.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Jerry Wickham), according to the following schedule:

- **October 15, 2006** – Requested Information on Fairgrounds Water Supply Wells

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

ELECTRONIC SUBMITTAL OF REPORTS

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

Submission of reports to the Alameda County ftp site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. Submission of reports to the Geotracker website does not fulfill the requirement to submit documents to the Alameda County ftp site. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitor wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all necessary reports was required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover

Mr. Ed Johnson
August 29, 2006
Page 3

letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

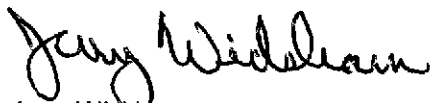
Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 567-6791.

Sincerely,



Jerry Wickham
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Colleen Winey, QIC 80201
Zone 7 Water Agency
100 North Canyons Parkway
Livermore, CA 94551

Donna Drogos, ACEH
Jerry Wickham, ACEH
File

Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC)	ISSUE DATE: July 5, 2005
	REVISION DATE: May 31, 2006
	PREVIOUS REVISIONS: October 31, 2005, December 16, 2005
SECTION: Miscellaneous Administrative Topics & Procedures	SUBJECT: Electronic Report Upload (ftp) Instructions

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities.

REQUIREMENTS

- Entire report including cover letter must be submitted to the ftp site as a **single portable document format (PDF) with no password protection**. (Please do not submit reports as attachments to electronic mail.)
- It is **preferable** that reports be converted to PDF format from their original format, (e.g., Microsoft Word) rather than scanned.
- Signature pages and perjury statements **must** be included and have either original or electronic signature.
- **Do not password protect the document**. Once indexed and inserted into the correct electronic case file, the document will be secured in compliance with the County's current security standards and a password. **Documents with password protection will not be accepted.**
- Each page in the PDF document should be rotated in the direction that will make it easiest to read on a computer monitor.
- Reports must be named and saved using the following naming convention:
RO#_Report Name_Year-Month-Date (e.g., RO#5555_WorkPlan_2005-06-14)

Additional Recommendations

- A separate copy of the tables in the document should be submitted by e-mail to your Caseworker in **Excel** format. These are for use by assigned Caseworker only.

Submission Instructions

- 1) Obtain User Name and Password:
 - a) Contact the Alameda County Environmental Health Department to obtain a User Name and Password to upload files to the ftp site.
 - i) Send an e-mail to dehloptoxic@acgov.org
or
 - ii) Send a fax on company letterhead to (510) 337-9335, to the attention of: **ftp Site Coordinator**.
 - b) In the subject line of your request, be sure to include "**ftp PASSWORD REQUEST**" and in the body of your request, include the **Contact Information, Site Addresses, and the Case Numbers (RO# available in Geotracker) you will be posting for.**
- 2) Upload Files to the ftp Site
 - a) Using Internet Explorer (IE4+), go to <ftp://alcoftp1.acgov.org>
 - (i) Note: Netscape and Firefox browsers will not open the FTP site.
 - b) Click on File, then on Login As.
 - c) Enter your User Name and Password. (Note: Both are Case Sensitive.)
 - d) Open "My Computer" on your computer and navigate to the file(s) you wish to upload to the ftp site.
 - e) With both "My Computer" and the ftp site open in separate windows, drag and drop the file(s) from "My Computer" to the ftp window.
- 3) Send E-mail Notifications to the Environmental Cleanup Oversight Programs
 - a) Send email to dehloptoxic@acgov.org notify us that you have placed a report on our ftp site.
 - b) Copy your Caseworker on the e-mail. Your Caseworker's e-mail address is the entire first name then a period and entire last name at acgov.org. (e.g., firstname.lastname@acgov.org)
 - c) The subject line of the e-mail must start with the RO# followed by **Report Upload**. (e.g., Subject: RO1234 Report Upload)

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY

DAVID J. KEARS, Agency Director



7

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

March 7, 2006

Mr. Ed Johnson
Alameda County Fairgrounds
4501 Pleasanton Avenue
Pleasanton, CA 94566

County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

Subject: Fuel Leak Case No. [REDACTED] Alameda County Fairgrounds, 4501 Pleasanton Avenue, Pleasanton, CA – Work Plan Approval

Dear Mr. Johnson:

Alameda County Environmental Health (ACEH) has reviewed the case file for the above-referenced site and the work plan entitled "Underground Storage Tank Investigation at the Alameda County Fairgrounds in Pleasanton, California," dated February 28, 2006. The Work Plan describes a scope of work to collect soil and groundwater samples from one soil boring adjacent to the former underground storage tanks (USTs) and dispensers. ACEH concurs with the proposed scope of work described in the Work Plan provided that the technical comments below are addressed.

We request that you address the technical comments below, perform the proposed work, and send us the reports described below. Please provide 72-hour advance written notification to this office (e-mail preferred to jerry.wickham@accgov.org) prior to the start of field activities.

TECHNICAL COMMENTS

- Laboratory Analysis.** ACEH concurs with the laboratory analysis proposed for the soil samples. ACEH also concurs that the groundwater sample be analyzed for total petroleum hydrocarbons as gasoline and BTEX (benzene, toluene, ethylbenzene, and xylenes) by EPA Method 8021 or similar. ACEH requests that the groundwater sample also be analyzed for MTBE, TBA, TAME, ETBE, DIPE, ethanol, 1,2-dichloroethane, and ethylene dibromide by EPA Method 8260B.
- Fairgrounds Water Supply Wells.** Based on discussions with Mr. Ed Johnson of the Alameda County Fairgrounds, we understand that water supply wells are present on the Fairgrounds property. Please show the locations of these wells on site maps and provide construction details in the Site Investigation Report requested below, to indicate the depth intervals over which these wells extract groundwater. In addition, please provide analytical

data collected from the periodic testing of these wells. This information is to be provided in the Soil and Groundwater Investigation Report requested below.

3. **Correction to Reported Concentration of Tert-butyl Alcohol in Soil.** The maximum concentration of tert butyl-alcohol (TBA) detected in soil during the 2003 tank removal was 200 micrograms per kilogram (parts per billion) rather than 200 milligrams per kilogram (parts per million) as indicated in previous ACEH correspondence dated December 14, 2005.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Jerry Wickham), according to the following schedule:

- **July 18, 2006 – Site Investigation Report**

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

ELECTRONIC SUBMITTAL OF REPORTS

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

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In order to facilitate electronic correspondence, we request that you provide up to date electronic mail addresses for all responsible and interested parties. Please provide current electronic mail addresses and notify us of future changes to electronic mail addresses by sending an electronic mail message to me at jerry.wickham@acgov.org.

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

UNDERGROUND STORAGE TANK CLEANUP FUND

Please note that delays in investigation, later reports, or enforcement actions may result in your becoming ineligible to receive grant money from the state's Underground Storage Tank Cleanup Fund (Senate Bill 2004) to reimburse you for the cost of cleanup.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 567-6791.

Sincerely,



Jerry Wickham
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

Mr. Ed Johnson
March 7, 2006
Page 4

cc: Matt Katen, QIC 80201
Zone 7 Water Agency
100 North Canyons Parkway
Livermore, CA 94551

Donna Drogos, ACEH
Jerry Wickham, ACEH
File

RO2591

Wickham, Jerry, Env. Health

From: Wickham, Jerry, Env. Health
Sent: Friday, January 13, 2006 12:10 PM
To: 'ed@alamedacountyfair.com'
Subject: Schedule extension

Mr. Johnson,

Based on our discussions today, I agree that the schedule for submittal of a work plan for case RO2591 (Alameda County Fairgrounds) is extended by 30 days to March 31, 2006. Please call me with any questions.

Regards,

Jerry Wickham
Hazardous Materials Specialist
Alameda County Environmental Health
1131 Harbor Bay Parkway
Suite 250
Alameda, CA 94502-6577
510-567-6791 phone
510-337-9335 Fax
jerry.wickham@acgov.org

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



7

ENVIRONMENTAL HEALTH SERVICES

ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

January 10, 2006

Mr. Ed Johnson
Alameda County Fairgrounds
4501 Pleasanton Avenue
Pleasanton, CA 94566

County Administrator
County of Alameda
1221 Oak Street #536
Oakland, CA 94612

Subject: Fuel Leak Case No. **BC030001**, Alameda County Fairgrounds, 4501 Pleasanton Avenue, Pleasanton, CA – Request for Work Plan

Dear Mr. Johnson:

I am the caseworker recently assigned to your case. Please send future correspondence or inquiries regarding this case to my attention. Alameda County Environmental Health (ACEH) staff has reviewed the case file for the above referenced site and correspondence dated August 22, 2003, which describes removal of one 2,000-gallon gasoline UST. Total petroleum hydrocarbons as gasoline (TPHg) and tert-butyl alcohol were detected in soil at concentrations of 26 and 200 milligrams per kilogram (mg/kg), respectively.

The site is within the Livermore-Amador Valley, which is an area where groundwater is actively used as a drinking water supply. Groundwater within the Livermore-Amador Groundwater Basin constitutes a valuable current and future resource. We request that you conduct an investigation to assess the extent of soil contamination and whether groundwater at the site has been impacted. Please submit a work plan detailing your proposal to define the extent of soil and groundwater contamination by **February 28, 2006**. This report is being requested pursuant to the Regional Water Quality Control Board's (Regional Board) authority under Section 13267 of the California Water Code.

TECHNICAL REPORT REQUEST

Please submit technical reports to Alameda County Environmental Health (Attention: Mr. Jerry Wickham), according to the following schedule:

- **February 28, 2006** – Work Plan for Site Assessment

These reports are being requested pursuant to California Health and Safety Code Section 25296.10. 23 CCR Sections 2652 through 2654, and 2721 through 2728 outline the responsibilities of a responsible party in response to an unauthorized release from a petroleum UST system, and require your compliance with this request.

ELECTRONIC SUBMITTAL OF REPORTS

Effective **January 31, 2006**, the Alameda County Environmental Cleanup Oversight Programs (LOP and SLIC) require submission of all reports in electronic form to the county's ftp site. Paper copies of reports will no longer be accepted. The electronic copy replaces the paper copy and will be used for all public information requests, regulatory review, and compliance/enforcement activities. Instructions for submission of electronic documents to the Alameda County Environmental Cleanup Oversight Program ftp site are provided on the attached "Electronic Report Upload (ftp) Instructions." Please do not submit reports as attachments to electronic mail.

Submission of reports to the Alameda County ftp site is an addition to existing requirements for electronic submittal of information to the State Water Resources Control Board (SWRCB) Geotracker website. Submission of reports to the Geotracker website does not fulfill the requirement to submit documents to the Alameda County ftp site. In September 2004, the SWRCB adopted regulations that require electronic submittal of information for groundwater cleanup programs. For several years, responsible parties for cleanup of leaks from underground storage tanks (USTs) have been required to submit groundwater analytical data, surveyed locations of monitor wells, and other data to the Geotracker database over the Internet. Beginning July 1, 2005, electronic submittal of a complete copy of all necessary reports was required in Geotracker (in PDF format). Please visit the SWRCB website for more information on these requirements (http://www.swrcb.ca.gov/ust/cleanup/electronic_reporting).

In order to facilitate electronic correspondence, we request that you provide up to date electronic mail addresses for all responsible and interested parties. Please provide current electronic mail addresses and notify us of future changes to electronic mail addresses by sending an electronic mail message to me at jerry.wickham@acgov.org.

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

PROFESSIONAL CERTIFICATION & CONCLUSIONS/RECOMMENDATIONS

The California Business and Professions Code (Sections 6735, 6835, and 7835.1) requires that work plans and technical or implementation reports containing geologic or engineering evaluations and/or judgments be performed under the direction of an appropriately registered or certified professional. For your submittal to be considered a valid technical report, you are to present site specific data, data interpretations, and recommendations prepared by an appropriately licensed professional and include the professional registration stamp, signature, and statement of professional certification. Please ensure all that all technical reports submitted for this fuel leak case meet this requirement.

LANDOWNER NOTIFICATION REQUIREMENTS

Pursuant to California Health & Safety Code Section 25297.15, the active or primary responsible party for a fuel leak case must inform all current property owners of the site of cleanup actions or requests for closure. Furthermore, ACEH may not consider any cleanup proposals or requests for case closure without assurance that this notification requirement has been met. Additionally, the active or primary responsible party is required to forward to ACEH a complete mailing list of all record fee title holders to the site. If you have not already submitted a list of record fee title owners in response to the Notice of Responsibility we require that you submit a complete mailing list of all record fee title owners of the site, which states, at a minimum, the following:

A. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that the following is a complete list of current record fee title owners and their mailing addresses for the above site:*

- OR -

B. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that I am the sole landowner for the above site.*

(Note: Complete item A if there are multiple site landowners. If you are the sole site landowner, skip item A and complete item B.)

In the future, for you to meet these requirements when submitting cleanup proposals or requests for case closure, ACEH requires that you:

1. Notify all current record owners of fee title to the site of any cleanup proposals or requests for case closure;
2. Submit a letter to ACEH which certifies that the notification requirement in 25297.15(a) of the Health and Safety Code has been met;
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4. Update your mailing list of all record fee title holders, and repeat the process outlined above prior to submittal of any additional *Corrective Action Plan* or your *Request for Case Closure*.

Your written certification to ACEH (Item 2 above) must state, at a minimum, the following:

A. *In accordance with Section 25297.15(a) of the Health & Safety Code, I, (name of primary responsible party), certify that I have notified all responsible landowners of the enclosed proposed action. (Check space for applicable proposed action(s)):*

cleanup proposal (Corrective Action Plan)

request for case closure

local agency intention to make a determination that no further action is required

local agency intention to issue a closure letter

- OR -

B. *In accordance with section 25297.15(a) of Chapter 6.7 of the Health & Safety Code, I, (name of primary responsible party), certify that I am the sole landowner for the above site.*

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UNDERGROUND STORAGE TANK CLEANUP FUND

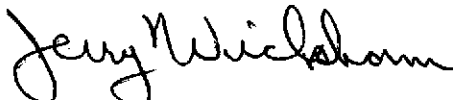
Please be aware that you may be eligible for reimbursement of the costs of investigation from the California Underground Storage Tank Cleanup Fund (Fund). In some cases, a deductible amount may apply. If you believe you meet the eligibility requirements, I strongly encourage you to call the Fund for an application.

AGENCY OVERSIGHT

If it appears as though significant delays are occurring or reports are not submitted as requested, we will consider referring your case to the Regional Board or other appropriate agency, including the County District Attorney, for possible enforcement actions. California Health and Safety Code, Section 25299.76 authorizes enforcement including administrative action or monetary penalties of up to \$10,000 per day for each day of violation.

If you have any questions, please call me at (510) 567-6791.

Sincerely,



Jerry Wickham
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Colleen Winey, QIC 80201
Zone 7 Water Agency
100 North Canyons Parkway
Livermore, CA 94551

Danielle Stefani
Livermore-Pleasanton Fire Department
3560 Nevada Street
Pleasanton, CA 94566

Donna Drogos, ACEH
Jerry Wickham, ACEH
File

ALAMEDA COUNTY
HEALTH CARE SERVICES

AGENCY
DAVID J. KEARS, Agency Director



7

ENVIRONMENTAL HEALTH SERVICES
ENVIRONMENTAL PROTECTION
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

December 14, 2005

Mr. Ed Johnson
Alameda County Fairgrounds
4501 Pleasanton Avenue
Pleasanton, CA 94566

Subject: Fuel Leak Case No. [REDACTED], Alameda County Fairgrounds, 4501 Pleasanton Avenue, Pleasanton, CA – Request for Work Plan

Dear Mr. Johnson:

I am the caseworker recently assigned to your case. Please send future correspondence or inquiries regarding this case to my attention. Alameda County Environmental Health (ACEH) staff has reviewed the case file for the above referenced site and correspondence dated August 22, 2003, which describes removal of one 2,000-gallon gasoline UST. Total petroleum hydrocarbons as gasoline (TPHg) and tert-butyl alcohol were detected in soil at concentrations of 26 and 200 milligrams per kilogram (mg/kg), respectively.

The site is within the Livermore-Amador Valley, which is an area where groundwater is actively used as a drinking water supply. Groundwater within the Livermore-Amador Groundwater Basin constitutes a valuable current and future resource. We request that you conduct an investigation to assess the extent of soil contamination and whether groundwater at the site has been impacted. Please submit a work plan detailing your proposal to define the extent of soil and groundwater contamination by **February 28, 2006**. This report is being requested pursuant to the Regional Water Quality Control Board's (Regional Board) authority under Section 13267 of the California Water Code.

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In order to facilitate electronic correspondence, we request that you provide up to date electronic mail addresses for all responsible and interested parties. Please provide current electronic mail addresses and notify us of future changes to electronic mail addresses by sending an electronic mail message to me at jerry.wickham@acgov.org.

PERJURY STATEMENT

All work plans, technical reports, or technical documents submitted to ACEH must be accompanied by a cover letter from the responsible party that states, at a minimum, the following: "I declare, under penalty of perjury, that the information and/or recommendations contained in the attached document or report is true and correct to the best of my knowledge." This letter must be signed by an officer or legally authorized representative of your company. Please include a cover letter satisfying these requirements with all future reports and technical documents submitted for this fuel leak case.

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request for case closure

local agency intention to make a determination that no further action is required

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If you have any questions, please call me at (510) 567-6791.

Sincerely,



Jerry Wickham
Hazardous Materials Specialist

Enclosure: ACEH Electronic Report Upload (ftp) Instructions

cc: Colleen Winey, QIC 80201
Zone 7 Water Agency
100 North Canyons Parkway
Livermore, CA 94551

Danielle Stefani
Livermore-Pleasanton Fire Department
3560 Nevada Street
Pleasanton, CA 94566

Donna Drogos, ACEH
Jerry Wickham, ACEH
File

Alameda County CUPA Program
Contaminated Site Case Transfer Form

Referral To:

Date	September 23, 2003
Agency	Alameda County Environmental Health, 1131 Harbor Bay Parkway, Alameda, CA 94502
Attention	Donna L. Drogos, LOP/SLIC Program Manager

Site Information:

Site Responsible Party(s)	
Site Name	Alameda County Fairgrounds
Site Address	4501 Pleasanton Avenue Pleasanton
Site Phone	925 426-7624
Site Contractor/Consultant (if available)	Reinholdt Engineering Construction
Site DBA	

Site Conditions:

UST			
USTs removed? # removed: <u>1</u> Date removed: <u>8-05-03</u>	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>
Contents (circle): <u>gasoline</u> diesel waste oil heating oil solvents kerosene stoddard solvent other (specify) _____	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Observations of system (holes, leaks)?	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>
Observed contamination (free product, smell, soil/water discoloration)?	Yes	<input checked="" type="checkbox"/>	No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination? o Highest Concentration Detected in Soil Contaminant (specify) <u>TPH G</u> Concentration <u>26</u> ppm o Highest Concentration Detected in Water Contaminant (specify) <u>na</u> Concentration _____ ppb	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Unauthorized Release Form filed?	Yes	<input type="checkbox"/>	No <input checked="" type="checkbox"/>
Future intended use if known? Specify <u>no change</u>	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
NON-UST			
Former industrial use?	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination? o Highest Concentration Detected in Soil Contaminant (specify) _____ Concentration _____ ppm o Highest Concentration Detected in Water Contaminant (specify) _____ Concentration _____ ppb	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
Future intended use if known? Specify _____	Yes	<input type="checkbox"/>	No <input type="checkbox"/>
<i>If available, attach pertinent reports</i>			

Transferred as: LOP SLIC

Level of Update requested: distribution list all meetings all site visits closure sign off all the above

Transfer requested by Inspector: Robert Weston Date: September 23, 2003

Transfer accepted by (ACEH): _____ Date: _____

ALAMEDA COUNTY ALAMEDA COUNTY FAIR

UST
PAGE
3

September 11, 2003

Alameda County Health Agency
Department of Environmental Health
1131 Harbor Bay Parkway
Alameda, CA. 94502

Dear Robert Weston,

As per our conversation today regarding the small volume of soil from the removal of the underground storage tank, you stated that you and Ron Locatelli from the Bay Air Quality Control have both agreed on the following:

- The contaminated soil is located in back of hole.
- Since we have a low level of contamination and small volume of soil we are able to aerate.
- We need to place the soil on either concrete or asphalt to aerate.
- We are to distribute the soil approximately 6" or 7" thick, rotor till compose or peat moss in the soil twice and then we are to leave the soil expose for about a two weeks.
- After two weeks we are to call Robert Weston. At that time he will come out and re-evaluate the soil to see if it can distribute onto the grounds. No re-sampling of the soil will be required.
- We should use base rock to backfill first so the whole will not collapse.
- The good soil can be dumped back into the ditch as of now.

If you have any questions please let me know.

Sincerely,

Linda Hearne, Compliance/Training Specialist

8-14-03

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	FOR LOCAL AGENCY USE ONLY 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.	
REPORT DATE 08/11/03	CASE #	SIGNED <i>[Signature]</i>	DATE 08/22/03

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Darin Reinholdt	PHONE 1925 689-8406	SIGNATURE Darin Reinholdt
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> REGIONAL BOARD <input checked="" type="checkbox"/> OTHER <u>contractor</u>	COMPANY OR AGENCY NAME Reinholdt Engineering Const.	
ADDRESS 4943 Laurel Dr. Concord, CA 94526			

RESPONSIBLE PARTY	NAME Alameda County Fairgrounds <input type="checkbox"/> UNKNOWN	CONTACT PERSON Ed Johnson	PHONE 1925 426-7624
	ADDRESS 4501 Pleasanton Ave. Pleasanton, CA 94566		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Alameda County Fairgrounds	OPERATOR Ed Johnson	PHONE 1925 426-7624
	ADDRESS 4501 Pleasanton Ave. Pleasanton, Contra Costa 94566		
	CROSS STREET Bernal Ave.		

IMPLEMENTING AGENCIES	LOCAL AGENCY Alameda County Health Svcs.	AGENCY NAME	CONTACT PERSON Robert Weston	PHONE 1510 567-6781
	REGIONAL BOARD			PHONE ()

SUBSTANCES INVOLVED	(1) NAME Gasoline	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> UNKNOWN
	(2) NAME Ethylbenzene, Xylenes	<input type="checkbox"/> UNKNOWN

DISCOVERY/ABATEMENT	DATE DISCOVERED 08/05/03	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 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 checked="" type="checkbox"/> OTHER <u>Remove pump</u>
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE	

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> TANK LEAK <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> OTHER <u>pump leak</u> <input type="checkbox"/> PIPING LEAK	CAUSE(S) <input type="checkbox"/> OVERFILL <input type="checkbox"/> RUPTURE/FAILURE <input type="checkbox"/> SPILL <input type="checkbox"/> CORROSION <input type="checkbox"/> UNKNOWN <input checked="" type="checkbox"/> OTHER <u>age</u>
--------------	---	---

CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> UNDETERMINED <input checked="" type="checkbox"/> SOIL ONLY <input type="checkbox"/> GROUNDWATER <input type="checkbox"/> DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
-----------	--

CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> NO ACTION TAKEN <input type="checkbox"/> PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED <input type="checkbox"/> POLLUTION CHARACTERIZATION <input 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 checked="" type="checkbox"/> CLEANUP UNDERWAY
----------------	--

REMEDIAL ACTION	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 (CD) <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)
-----------------	---

COMMENTS	
----------	--

8-14-03

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT

EMERGENCY YES NO HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? YES NO

FOR LOCAL AGENCY USE ONLY
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.

REPORT DATE: 8/11/03 CASE #:
 SIGNED: [Signature] DATE: 8/22/03

REPORTED BY: NAME OF INDIVIDUAL FILING REPORT: Darin Reinholdt PHONE: (727) 687-8406 SIGNATURE: [Signature]
 REPRESENTING: LOCAL AGENCY OWNER/OPERATOR REGIONAL BOARD OTHER Contractor COMPANY OR AGENCY NAME: Reinholdt Engineering Const.
 ADDRESS: 4743 Laurel Dr Concord CITY STATE: NC 27021 ZIP

RESPONSIBLE PARTY: NAME: Alameda County Fire/Grout UNKNOWN CONTACT PERSON: [Name] PHONE: (415) 426-7624
 ADDRESS: 4501 Mountain Ave Pleasanton CITY STATE: CA 94566 ZIP

SITE LOCATION: FACILITY NAME (IF APPLICABLE): Alameda County Fire/Grout OPERATOR: [Name] PHONE: (415) 426-7624
 ADDRESS: 4501 Mountain Ave Pleasanton CITY COUNTY: CA 94566 ZIP
 CROSS STREET: 3rd St

IMPLEMENTING AGENCIES: LOCAL AGENCY: Alameda County Fire/Grout AGENCY NAME: [Name] CONTACT PERSON: [Name] PHONE: () 47-0771
 REGIONAL BOARD: [Name] PHONE: ()

SUBSTANCES INVOLVED: (1) [Name] QUANTITY LOST (GALLONS): UNKNOWN
 (2) [Name] QUANTITY LOST (GALLONS): UNKNOWN

DISCOVERY/ABATEMENT: DATE DISCOVERED: 8/11/03 HOW DISCOVERED: INVENTORY CONTROL SUBSURFACE MONITORING NUISANCE CONDITIONS
 TANK TEST TANK REMOVAL OTHER
 DATE DISCHARGE BEGAN: [Date] UNKNOWN METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY):
 REMOVE CONTENTS CLOSE TANK & REMOVE REPAIR PIPING
 REPAIR TANK CLOSE TANK & FILL IN PLACE CHANGE PROCEDURE
 REPLACE TANK OTHER [Other]

SOURCE/CAUSE: SOURCE OF DISCHARGE: TANK LEAK UNKNOWN OTHER [Other]
 PIPING LEAK CAUSE(S): OVERFILL RUPTURE/FAILURE SPILL
 CORROSION UNKNOWN OTHER [Other]

CASE TYPE: CHECK ONE ONLY UNDETERMINED SOIL ONLY GROUNDWATER DRINKING WATER - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)

CURRENT STATUS: CHECK ONE ONLY NO ACTION TAKEN PRELIMINARY SITE ASSESSMENT WORKPLAN SUBMITTED POLLUTION CHARACTERIZATION
 LEAK BEING CONFIRMED PRELIMINARY SITE ASSESSMENT UNDERWAY POST CLEANUP MONITORING IN PROGRESS
 REMEDIATION PLAN CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) CLEANUP UNDERWAY

REMEDIAL ACTION: CHECK APPROPRIATE ACTION(S) (SEE BACK FOR DETAILS): EXCAVATE & DISPOSE (ED) REMOVE FREE PRODUCT (FP) ENHANCED BIO DEGRADATION (IT)
 CAP SITE (CD) EXCAVATE & TREAT (ET) PUMP & TREAT GROUNDWATER (GT) REPLACE SUPPLY (RS)
 CONTAINMENT BARRIER (CB) NO ACTION REQUIRED (NA) TREATMENT AT HOOKUP (HU) VENT SOIL (VS)
 VACUUM EXTRACT (VE) OTHER (OT)

COMMENTS:

UNDERGROUND STORAGE TANK CLOSURE/REMOVAL FIELD INSPECTION REPORT

Facility Name: ALAMEDA CO. FAIR GROUNDS	STID:	Date: 8-5-03
Facility Address: 4501 Pleasanton Ave, Pleasanton, CA	Contact on site: ED JOHNSON	
Inspector: ROBERT WESTON	Contractor/Consultant: DAREN JOHNSON	

General Requirements	Yes	No	N/A
Approved closure plan on site.	✓		
Changes to approved plan noted.			✓
Residuals properly stored/transported.	✓		
Receipt for adequate dry ice noted.	✓		

General Requirements	Yes	No	N/A
Site Safety Plan properly signed.	✓		
40B:C fire extinguisher on site.	✓		
"No Smoking" signs posted.	✓		
Gas detector challenged by inspector.			✓

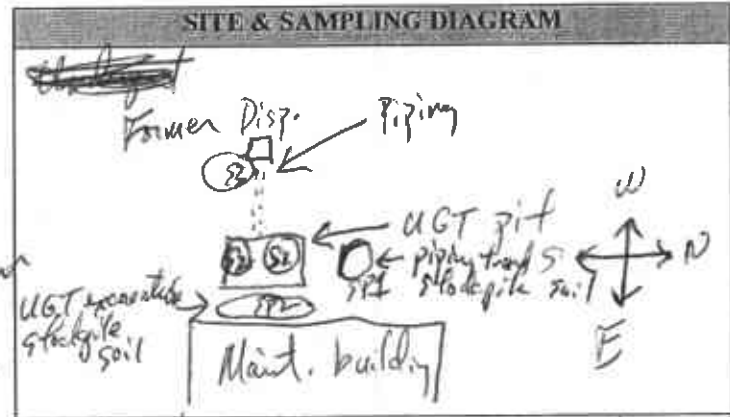
Tank Observations	T #1	T #2	T #3	T #4
Tank Capacity (gallons)	2000			
Material last stored	GAS			
Dry ice used (pounds)	501			
Combustible gas concentration as %LEL. (Note time & sampling point)				
(1) 8/5 @ 1:35 pm	1.0			
(2)				
(3)				
Oxygen concentration as % volume. (Note time & sampling point)				
(1) 8/5 @ 1:35 pm	21.0			
(2)				
(3)				
Tank Material	STEEL			
Wrapping/Coating, if any	NONE			
Obvious holes?	NO			

Tank Observations	T #1	T #2	T #3	T #4
Obvious corrosion?	No			
Obvious odors from tank?	No			
Seams intact?	Yes			
Tank bed backfill material	Yes			
Obvious discoloration?	No			
Obvious odors ex tank bed?	No			
Water in excavation?	No			
Sheen/product on water?	NA			
Tank tagged by transporter?	No			
Tank wrapped for transport?	No			
Tank plugged w/ vent cap?	Yes			
Date/time tank hauled off?	8/5 3:20 PM			
No. of soil samples taken?	2			
Depth of soil samples (ft. bgs)	41.5'			

Piping Removal	Yes	No	N/A
All piping removed hauled off w/ tanks?	✓		
Obvious holes on pipes?		✓	
Obvious odors from pipes?		✓	
Obvious soil discoloration in piping trench?	✓	✓	
Obvious odors from piping trench?	✓	✓	
Water in piping trench?		✓	
Number & depth of soil samples from piping trench?		2' & 5'	
Number & depth of water samples from piping trench?		NA	

General Observations	Yes	No	N/A
Leak from any tank suspected?		✓	
"Leak Report" form given to the operator?		✓	
Obviously contaminated soil excavated?	✓		
Soil stockpile sampled?	✓		
Stockpile lined AND covered?	✓		
Water in excavation sampled?			✓
Number/depth of water samples taken?		NA	
All samples properly preserved for transport?	✓		

Additional Observations	Yes	No	N/A
Soil/water sampling protocols acceptable?	✓		
Sampling "chain of custody" noted?	✓		
Tank pit filled in or covered?	left open	✓	
Tank pit fenced or barricaded?	✓		
Transporter a registered HW hauler?	✓		
Uniform HW Manifest completed?	✓		
Contractor/Consultant reminded of complete UST Removal Report due within 30 days?	✓		
Date/Time removal/closure operations completed?		8/5/03, 4:30 pm	
OT hours or additional charges due from contractor?			

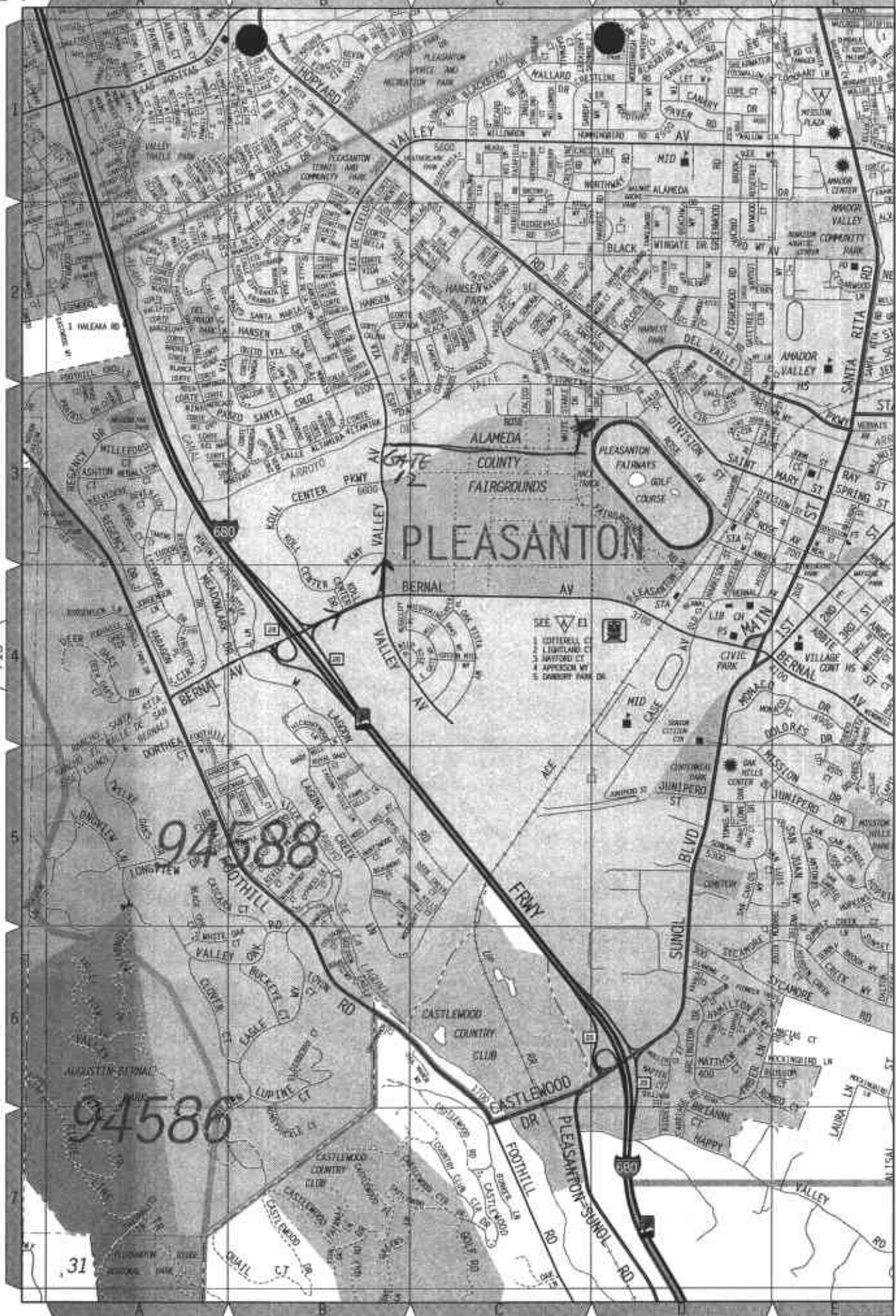


Notes/Comments: Underground piping was wrapped. There was no corrosion, rust or leaks in UGT. Empty piping around tank. Inspected soil from piping trench excavated from stockpile soil from tank excavation. Soil samples taken under both ends of tank, under digger, stockpile soil from tank excavation & piping trench. **Note:** Piping trench (over)

Was over excavated to a depth of 5' and a ~~confirmatory sample~~
~~was taken~~ (No odor or discoloration noted at this depth)

Soil Samples:

- S-1 ~~under digester~~ (North end of tank)
- S-2 South end of tank
- S-3 Under digester
- SP-1 ~~SP-1~~ Piping trench stockpile soil
- SP-2 ~~SP-2~~ UGT excavation stockpile soil



SEE 713 MAP

SEE 734 MAP

0 .125 .25 .375 .5 miles 1 in. = 1900 ft.





ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
ENVIRONMENTAL HEALTH SERVICES
1131 HARBOR BAY PARKWAY, RM 250
ALAMEDA, CA 94502-6577
PHONE # 510/567-670

Alameda County

JUN 25 2003

Environmental Health

ACCEPTED

Underground Storage Tank Closure Permit Application
Alameda County Division of Hazardous Materials
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now referred for issuance of any required building permits for construction/destruction.

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

Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspectors Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

Removal of Tank(s) and Piping
 Sampling
 Final Inspection

Issuance of a) permit to operate, b) permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

Contact Specialist

Robert Weston
Accepted JUNE 26, 2003

See attached Table 2 for contaminate analysis

UNDERGROUND TANK CLOSURE PLAN

* * * Complete plan according to attached instructions * * *

- Name of Business Alameda County Fairgrounds Association
Business Owner or Contact Person (PRINT) Linda Hearne
- Site Address 4501 Pleasanton Ave.
City Pleasanton Zip 94566 Phone 925-426-7656
- Mailing Address same
City _____ Zip _____ Phone _____
- Property Owner same
Business Name (if applicable) _____
Address _____
City, State _____ Zip _____
- Generator name under which tank will be manifested
Alameda County Fairgrounds Association
EPA ID# under which tank will be manifested CA 921112587

06-25-2003



SR0004640

THE
OFFICE OF THE
ATTORNEY GENERAL
STATE OF NEW YORK
ALBANY

IN SENATE,
January 12, 1910.
REPORT
OF THE
COMMISSIONERS OF THE
LAND OFFICE,
IN ANSWER TO A
RESOLUTION PASSED
BY THE SENATE
MAY 15, 1909.
ALBANY:
JAMES B. WOODWARD, STATE
PRINTING OFFICE, 1910.

COMMISSIONERS OF THE
LAND OFFICE,
ALBANY, N. Y.

c) Tank and Piping Transporter

CAD 982030173 (hauling)

Name ECL EPA I.D. No. CAD 009 466 392 (site)

Hauler License No. 1533 License Exp. Date 3/30/04

Address 255 Parr Blvd.

city Richmond State CA zip 94801

d) Tank and Piping Disposal Site

Name ECL EPA I.D. No. CAD 009 466 392

Address 255 Parr Blvd.

city Richmond State CA zip 94801

11. Sample Collector

Name Darin Reinholdt

Company Reinholdt Engineering Construction

Address 4943 Laurel Dr.

city Concord State CA zip 94521 Phone 925-689-8406

12. Laboratory

Name McCampbell Analytical

Address 110 2nd Ave. So, # D7

city Pacheco State CA zip 94553

State Certification No. 1644

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

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

- 1. Remove residual fuel.
- 2. Triple rinse/pump tank interior w/water.
- 3. Introduce dry ice @ 30 lbs./1000 gal. min.

6. Contractor Reinholdt Engineering Construction
 Address P.O. Box 271943
 City Concord Phone 925-689-8406
 License Type A, HAZ ID# 671177
7. Consultant (if applicable) _____
 Address _____
 City, State _____ Phone _____
8. Main Contact Person for Investigation (if applicable)
 Name Darin Reinholdt Title Contractor
 Company REC
 Phone 925-689-8406
9. Number of underground tanks being closed with this plan 1
 Length of piping being removed under this plan 12'
 Total number of underground tanks at this facility (**confirmed with owner or operator) 1
10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

a) Product/Residual Sludge/Rinsate Transporter
 Name Clearwater Environ. EPA I.D. No. CAR 000 007 013
 Hauler License No DTSC 3515 License Exp. Date 12/31/03
 Address P.O. Box 7420
 City Fremont State CA Zip 94537-7420

b) Product/Residual Sludge/Rinsate Disposal Site
 Name Alviso Independent^{Oil} EPA ID# CAL 000 161 743
 Address 5002 Archer St.
 City ALVISO State CA Zip _____

Before tanks are pumped out and inerted, all associated piping must be flushed back into the tank(s). All accessible piping must then be removed. Inaccessible piping must be permanently plugged using grout.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to have a functional combustible gas indicator on-site to verify that the tank(s) is inerted.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
2000	Installed in the 1980's and used to refuel company vehicles and agricultural equipment. Is currently in use.	Soil Groundwater (if encountered)	In native soil at least 2' below tank, at each end or stained area. Also beneath piping and/or pump. From tank pit near interface.

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

Excavated/Stockpiled Soil

Stockpiled Soil Volume
(estimated)

10 - 20 yds³

Sampling Plan

collect samples from
four locations to be
composited by laboratory
for single sample analyses.
For stockpiles 50 yds³ ≥ .

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

Will the excavated soil be returned to the excavation immediately after tank removal? yes no unknown

If yes, explain reasoning _____

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from this office. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling activities.

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.

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

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
Gasoline	soil/water: 5030B	soil: 8021B/8015 water: 8021B/8015	soil: 1 ppm water: 50 ppb
BTEX	↓	↓	soil: .005 ppm water: .5 ppb
MTBE			soil: .05 ppm water: 5 ppb

18. Submit Worker's Compensation Certificate copy

Name of Insurer Exempt

19. Submit Plot Plan ***** (See Instructions) *****

20. Enclose Deposit (See Instructions)

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

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

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one-B form for each UST to be removed) (mark box 8 for "tank removed" in the upper right hand corner)

I declare that to the best of my knowledge and belief that 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 approval from the Environmental Protection Division 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.

CONTRACTOR INFORMATION

Name of Business Reinholdt Engineering Construction

Name of Individual Darin Reinholdt

Signature Darin Reinholdt Date 5/30/03

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business Alameda County Fairgrounds Assoc.

Name of Individual E. B. Johnson

Signature E. B. Johnson Date 6-5-03



DARIN REINHOLDT
REINHOLDT ENG. CONSTRUCTION
925-689-8406
4943 Laurel Dr
Concord, CA 94521

3938

90-78/1211

6/23/03

DATE

Pay to the order of Alameda County Health Svcs \$ 750.00
seven hundred, fifty 00/100 DOLLARS



Concord Office
1969 DIAMOND BLVD
CONCORD, CA 94520
1-800-438-2265

FOR ACFA UST removal

Darin Reinholdt

⑆ 121100782⑆ 3938 132017641⑆

UNDERGROUND STORAGE TANKS - FACILITY

(one page per site) Page 1 of 3

TYPE OF ACTION (Check one item only) 1. NEW SITE PERMIT 3. RENEWAL PERMIT 5. CHANGE OF INFORMATION specify change local use only 7. PERMANENTLY CLOSED SITE 8. TANK REMOVED 2. DISTRIBUTOR 4. AMENDED PERMIT 6. TEMPORARY SITE CLOSURE

I. FACILITY / SITE INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) 3 FACILITY ID# 400
 Alameda County Fairgrounds Assoc.
 NEAREST CROSS STREET 401 Bernal Ave.
 FACILITY OWNER TYPE 1. CORPORATION 2. INDIVIDUAL 3. PARTNERSHIP 4. LOCAL AGENCY/DISTRICT* 5. COUNTY AGENCY* 6. STATE AGENCY* 7. FEDERAL AGENCY* 402
 BUSINESS TYPE 1. GAS STATION 2. DISTRIBUTOR 3. FARM 4. PROCESSOR 5. COMMERCIAL 6. OTHER 403
 TOTAL NUMBER OF TANKS REMAINING AT SITE 404 0
 Is facility on Indian Reservation or trustlands? Yes No 405
 *If owner of UST is a public agency: name of supervisor of division, section or office which operates the UST (This is the contact person for the tank records.) 406

II. PROPERTY OWNER INFORMATION

PROPERTY OWNER NAME 407 Alameda County Fairgrounds Association PHONE 408 925-426-7656
 MAILING OR STREET ADDRESS 409 4501 Pleasanton Ave.
 CITY 410 Pleasanton STATE 411 CA ZIP CODE 412 94566
 PROPERTY OWNER TYPE 1. CORPORATION 2. INDIVIDUAL 3. PARTNERSHIP 4. LOCAL AGENCY / DISTRICT 5. COUNTY AGENCY 6. STATE AGENCY 7. FEDERAL AGENCY 413

III. TANK OWNER INFORMATION

TANK OWNER NAME 414 Alameda County Fairgrounds Assoc. PHONE 415 925-426-7656
 MAILING OR STREET ADDRESS 416 4501 Pleasanton Ave.
 CITY 417 Pleasanton STATE 418 CA ZIP CODE 419 94566
 TANK OWNER TYPE 1. CORPORATION 2. INDIVIDUAL 3. PARTNERSHIP 4. LOCAL AGENCY / DISTRICT 5. COUNTY AGENCY 6. STATE AGENCY 7. FEDERAL AGENCY 420

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER

TY (TK) HQ 44- 001 0 05 Call (916) 322-9669 if questions arise 421

V. PETROLEUM UST FINANCIAL RESPONSIBILITY

INDICATE METHOD(S) 1. SELF-INSURED 2. GUARANTEE 3. INSURANCE 4. SURETY BOND 5. LETTER OF CREDIT 6. EXEMPTION 7. STATE FUND 8. STATE FUND & CFO LETTER 9. STATE FUND & CD 10. LOCAL GOVT MECHANISM 99. OTHER: 422

VI. LEGAL NOTIFICATION AND MAILING ADDRESS

Check one box to indicate which address should be used for legal notifications and mailing. Legal notifications and mailings will be sent to the tank owner unless box 1 or 2 is checked. 1. FACILITY 2. PROPERTY OWNER 3. TANK OWNER 423

VII. APPLICANT SIGNATURE

Certification - I certify that the information provided herein is true and accurate to the best of my knowledge.
 SIGNATURE OF APPLICANT 424 Darin Reinholdt DATE 4/16/03 PHONE 425 925-689-8406
 NAME OF APPLICANT (print) 426 Darin Reinholdt TITLE OF APPLICANT 427 Contractor/Agent for owner
 STATE UST FACILITY NUMBER (For local use only) 428 1998 UPGRADE CERTIFICATE NUMBER (For local use only) 429

UST - Facility

Formerly SWRCB Form A.

Complete the UST - Facility page for all new permits, permit changes or any facility information changes. This page must be submitted within 30 days of permit or facility information changes, unless approval is required before making any changes.

Submit one UST - Facility page per facility, regardless of the number of tanks located at the site. This form is completed by either the permit applicant or the local agency underground tank inspector. As part of the application, the tank owner must submit a scaled facility plot plan to the local agency showing the location of the USTs with respect to buildings and landmarks [23 CCR 2711 (a)(8)], a description of the tank and piping leak detection monitoring program [23 CCR 2711 (a)(9)], and, for tanks containing petroleum, documentation showing compliance with state financial responsibility requirements [23 CCR 2711 (a)(11)].

Refer to 23 CCR 2711 for state UST information and permit application requirements.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.) Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the CUPA. This is the unique number which identifies your facility.
3. BUSINESS NAME - Enter the full legal name of the business.
400. TYPE OF ACTION - Check the reason the page is being completed. CHECK ONE ITEM ONLY.
401. NEAREST CROSS STREET - Enter the name of the cross street nearest to the site of the tank.
402. FACILITY OWNER TYPE - Check the type of business ownership.
403. BUSINESS TYPE - Check the type of business.
404. TOTAL NUMBER OF TANKS REMAINING AT SITE - Indicate the number of tanks remaining on the site after the requested action.
405. INDIAN OR TRUST LAND - Check whether or not the facility is located on an Indian reservation or other trust lands.
406. PUBLIC AGENCY SUPERVISOR NAME - If the facility owner is a public agency, enter the name of the supervisor for the division, section or office which operates the UST. This person must have access to the tank records.
407. PROPERTY OWNER NAME - Complete items 407- 412 for the property owner, unless all items are the same as the Owner Information (items 111-116) on the Business Owner/Operator Identification page (OES Form 2730). If the same, write "SAME AS SITE" in this section.
408. PROPERTY OWNER PHONE
409. PROPERTY OWNER MAILING OR STREET ADDRESS
410. PROPERTY OWNER CITY
411. PROPERTY OWNER STATE
412. PROPERTY OWNER ZIP CODE
413. PROPERTY OWNER TYPE - Check the type of property ownership.
414. TANK OWNER NAME - Complete items 414- 419 for the tank owner., unless all items are the same as the Owner Information (items 111-116) on the Business Owner/Operator Identification page (OES Form 2730). If the same, write "SAME AS SITE" in this section.
415. TANK OWNER PHONE
416. TANK OWNER MAILING OR STREET ADDRESS
417. TANK OWNER CITY
418. TANK OWNER STATE
419. TANK OWNER ZIP CODE
420. TANK OWNER TYPE - Check the type of tank ownership.
421. BOE NUMBER - Enter your Board of Equalization (BOE) UST storage fee account number. This fee applies to regulated USTs storing petroleum products. This is required before your permit application can be processed. If you do not have an account number with the BOE or if you have any questions regarding the fee or exemptions, please call the BOE at (916) 322-9669 or write to the BOE at: Board of Equalization, Fuel Taxes Division, P.O. Box 942879, Sacramento, CA 94279-0030.
422. PETROLEUM UST FINANCIAL RESPONSIBILITY CODE - Check the method(s) used by the owner and/or operator in meeting the Federal and State financial responsibility requirements. CHECK ALL THAT APPLY. If the method is not listed, check "other" and enter the method(s). USTs owned by any Federal or State agency and non-petroleum USTs are exempt from this requirement.
423. LEGAL NOTIFICATION AND MAILING ADDRESS - Indicate the address to which legal notifications and mailings should be sent. The legal notifications and mailings will be sent to the tank owner unless the facility (box 1) or the property owner (box 2) is checked.
SIGNATURE OF APPLICANT - The business owner/operator of the tank facility, or officially designated representative of the owner/operator, shall sign in the space provided. This signature certifies that the signer believes that all the information submitted is accurate and complete.
424. DATE CERTIFIED - Enter the date that the page was signed.
425. APPLICANT PHONE - Enter the phone number of the applicant (person certifying).
426. APPLICANT NAME - Enter the full printed name of the person signing the page.
427. APPLICANT TITLE - Enter the title of the person signing the page.
428. STATE UST FACILITY NUMBER - Leave this blank. This number is assigned by the CUPA as follows: the number is composed of the two digit county number, the three digit jurisdiction number, and a six digit facility number. The facility number must be the same as shown in item 1.
429. 1998 UPGRADE CERTIFICATE NUMBER - Leave this blank. This number is assigned by the CUPA.

UNDERGROUND STORAGE TANKS - TANK PAGE 1

(two pages per tank)

Page 2 of 3

TYPE OF ACTION 1 NEW SITE PERMIT 4 AMENDED PERMIT 5 CHANGE OF INFORMATION 6 TEMPORARY SITE CLOSURE
 (Check one item only) 7 PERMANENTLY CLOSED ON SITE 8 TANK REMOVED 430
 3 RENEWAL PERMIT (Specify reason - for local use only) (Specify reason - for local use only)

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) Alameda County Fairgrounds Asso. FACILITY ID: _____

LOCATION WITHIN SITE (Optional) Near maintenance facility

I. TANK DESCRIPTION (A scaled plot plan with the location of the UST system including buildings and landmarks shall be submitted to the local agency.)

TANK ID # 1 432 TANK MANUFACTURER Modern Welding 433 COMPARTMENTALIZED TANK Yes No 434
 If "Yes", complete one page for each compartment.

DATE INSTALLED (YEAR/MO) 1980's 435 TANK CAPACITY IN GALLONS 2000 436 NUMBER OF COMPARTMENTS 1 437

ADDITIONAL DESCRIPTION (For local use only) 438

II. TANK CONTENTS

TANK USE 439 PETROLEUM TYPE 440
 1. MOTOR VEHICLE FUEL (If marked complete Petroleum Type) 1a. REGULAR UNLEADED 2. LEADED 5. JET FUEL
 2. NON-FUEL PETROLEUM 1b. PREMIUM UNLEADED 3. DIESEL 6. AVIATION FUEL
 3. CHEMICAL PRODUCT 1c. MIDGRADE UNLEADED 4. GASOHOL 99. OTHER.....
 4. HAZARDOUS WASTE (Includes Used Oil) COMMON NAME (from Hazardous Materials Inventory page) 441 CAS# (from Hazardous Materials Inventory page) 442
 95. UNKNOWN

III. TANK CONSTRUCTION

TYPE OF TANK (Check one item only) 1. SINGLE WALL 3. SINGLE WALL WITH EXTERIOR MEMBRANE LINER 5. SINGLE WALL WITH INTERNAL BLADDER SYSTEM 443
 2. DOUBLE WALL 4. SINGLE WALL IN VAULT 95. UNKNOWN
 99. OTHER.....

TANK MATERIAL - primary tank (Check one item only) 1. BARE STEEL 3. FIBERGLASS / PLASTIC 5. CONCRETE 95. UNKNOWN 444
 2. STAINLESS STEEL 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) 8. FRP COMPTIBLE W/100% METHANOL 99. OTHER.....

TANK MATERIAL - secondary tank (Check one item only) 1. BARE STEEL 3. FIBERGLASS / PLASTIC 5. CONCRETE 95. UNKNOWN 445
 2. STAINLESS STEEL 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) 10. COATED STEEL 8. FRP COMPTIBLE W/100% METHANOL 99. OTHER.....

TANK INTERIOR LINING (Check one item only) 1. RUBBER LINED 3. EPOXY LINING 5. GLASS LINING 95. UNKNOWN 446 DATE INSTALLED 447
 2. ALKYD LINING 4. PHENOLIC LINING 6 UNLINED 99 OTHER..... (For local use only)

OTHER CORROSION PROTECTION IF APPLICABLE (Check one item only) 1 MANUFACTURED CATHODIC PROTECTION 3 FIBERGLASS REINFORCED PLASTIC 95 UNKNOWN 448
 2 SACRIFICIAL ANODE 4 IMPRESSED CURRENT 99 OTHER (For local use only)

SPILL AND OVERFILL (Check all that apply) YEAR INSTALLED 450 TYPE (local use only) 451 OVERFILL PROTECTION EQUIPMENT: YEAR INSTALLED 452
 1 SPILL CONTAINMENT 1998 1 ALARM 3 FILL TUBE SHUT OFF VALVE
 2 DROP TUBE 1998 2 BALL FLOAT 4 EXEMPT
 3 STRIKER PLATE 1980's?

IV. TANK LEAK DETECTION (A description of the monitoring program shall be submitted to the local agency.)

IF SINGLE WALL TANK (Check all that apply) 453 IF DOUBLE WALL TANK OR TANK WITH BLADDER (Check one item only) 454
 1 VISUAL (EXPOSED PORTION ONLY) 5 MANUAL TANK GAUGING (MTG) 1 VISUAL (SINGLE WALL IN VAULT ONLY)
 2 AUTOMATIC TANK GAUGING (ATG) 6 VADOSE ZONE 2 CONTINUOUS INTERSTITIAL MONITORING
 3 CONTINUOUS ATG 7 GROUNDWATER 3 MANUAL MONITORING
 4 STATISTICAL INVENTORY RECONCILIATION (SIR) BIENNIAL TANK TESTING 8 TANK TESTING
 99 OTHER.....

IV. TANK CLOSURE INFORMATION / PERMANENT CLOSURE IN PLACE

ESTIMATED DATE LAST USED (YR/MO/DAY) 455 May 25, 2003 ESTIMATED QUANTITY OF SUBSTANCE REMAINING 456 4 - 20 gallons TANK FILLED WITH INERT MATERIAL? 457 Yes No

Formerly SWRCB Form B

Complete the UST - Tank pages for each tank for all new permits, permit changes, closures and/or any other tank information change. This page must be submitted within 30 days of permit or facility information changes, unless approval is required before making any changes. For compartmentalized tanks, each compartment is considered a separate tank and requires completion of separate tank pages.

Refer to 23 CCR §2711 for state UST information and permit application requirements.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the CUPA. This is the unique number which identifies your facility.
3. BUSINESS NAME - Enter the full legal name of the business.
430. TYPE OF ACTION - Check the reason the page is being completed. For amended permits and change of information, include a short statement to direct the inspector to the amendment or changed information.
431. LOCATION WITHIN SITE - Enter the location of the tank within the site.
432. TANK ID NUMBER - Enter the owner's tank ID number. This is a unique number used to identify the tank. It may be assigned by the owner or by the CUPA.
433. TANK MANUFACTURER - Enter the name of the company that manufactured the tank.
434. COMPARTMENTALIZED TANK - Check whether or not the tank is compartmentalized. Each compartment is considered a separate tank and requires the completion of separate tank pages.
435. DATE TANK INSTALLED - Enter the year and month the tank was installed.
436. TANK CAPACITY - Enter the tank capacity in gallons.
437. NUMBER OF TANK COMPARTMENTS - If the tank is compartmentalized, enter the number of compartments.
438. ADDITIONAL DESCRIPTION - Use this space for additional tank or location description.
439. TANK USE - Check the substance stored. If MOTOR VEHICLE FUEL, check box 1 and complete item 440, PETROLEUM TYPE.
440. PETROLEUM TYPE - If box 1 is checked in item 439, check the type of fuel.
441. COMMON NAME - For substances that are not motor vehicle fuels (box 1 is NOT checked in item 439), enter the common name of the substance stored in the tank.
442. CAS # - For substances that are not motor vehicle fuels (box 1 is NOT checked in item 439), enter the CAS (Chemical Abstract Service) number. This is the same as the CAS # in item 209 on the Hazardous Materials Inventory - Chemical Description page.
143. TYPE OF TANK - Check the type of tank construction. If type of tank is not listed, check Aother= and enter type.
444. TANK MATERIAL (PRIMARY TANK) - Check the construction material of the tank that comes into immediate contact on its inner surface with the hazardous substance being contained. If the tank is lined do not reference the lining material in this item. Indicate the type of lining material in item 446. If type of tank material is not listed, check Aother= and enter material.
445. TANK MATERIAL (SECONDARY TANK) - Check the construction material of the tank that provides the level of containment external to, and separate from, the primary containment. If type of tank material is not listed, check Aother= and enter material.
446. TANK INTERIOR LINING OR COATING - If applicable, check the construction material of the interior lining or coating of the tank. If type of interior lining or coating is not listed, check Aother= and enter type.
447. DATE TANK INTERIOR LINING INSTALLED - If applicable, enter the date the tank interior lining was installed. This is to assist the CUPA to develop an inspection schedule.
448. OTHER TANK CORROSION PROTECTION - If applicable, check the other tank corrosion protection method used. If other corrosion protection method is not listed, check Aother= and enter method.
449. DATE TANK CORROSION PROTECTION INSTALLED - If applicable, enter the date the tank corrosion protection method was installed. This is to assist the CUPA to develop an inspection schedule.
450. YEAR SPILL AND OVERFILL INSTALLED - Check the appropriate box and enter the year in which spill containment, drop tube, and/or striker plate was installed. CHECK ALL THAT APPLY.
451. TYPE OF SPILL PROTECTION - Enter the type of spill containment, drop tube, and/or striker plate. FOR CUPA USE ONLY.
452. YEAR OVERFILL PROTECTION EQUIPMENT INSTALLED - Check the appropriate box and enter the year in which overfill protection was installed or whether there is an exemption from overfill protection. CHECK ALL THAT APPLY, unless tank is exempt.
453. TANK LEAK DETECTION (SINGLE WALL) - For single walled tanks, check the leak detection system(s) used to comply with the monitoring requirements for the tank. CHECK ALL THAT APPLY. If leak detection system is not listed, check Aother= and enter system.
454. TANK LEAK DETECTION (DOUBLE WALL) - For double walled tanks or tanks with bladder, check the leak detection system(s) used to comply with the monitoring requirements for the tank. CHECK ONE ITEM ONLY.
455. ESTIMATED DATE LAST USED - For closure in place, enter the date the tank was last used.
456. ESTIMATED QUANTITY OF SUBSTANCE REMAINING IN TANK - For closure in place, enter the estimated quantity of hazardous substance remaining in the tank (in gallons).
457. TANK FILLED WITH INERT MATERIAL - For closure in place, check whether or not the tank was filled with an inert material prior to closure.

ATTACHMENTS -

1. Provide a scaled plot plan with the location of the UST system, including buildings and landmarks.
2. Provide a description of the monitoring program.

UNDERGROUND STORAGE TANKS - TANK PAGE 2

VI. PIPING CONSTRUCTION (Check all that apply)

Page 3 of 3

UNDERGROUND PIPING				ABOVEGROUND PIPING				
SYSTEM TYPE	<input type="checkbox"/> 1. PRESSURE	<input checked="" type="checkbox"/> 2. SUCTION	<input type="checkbox"/> 3. GRAVITY	458	<input type="checkbox"/> 1. PRESSURE	<input type="checkbox"/> 2. SUCTION	<input type="checkbox"/> 3. GRAVITY	459
CONSTRUCTION	<input type="checkbox"/> 1. SINGLE WALL	<input type="checkbox"/> 3. LINED TRENCH	<input type="checkbox"/> 99. OTHER	460	<input type="checkbox"/> 1. SINGLE WALL	<input type="checkbox"/> 95. UNKNOWN		462
MANUFACTURER	<input checked="" type="checkbox"/> 2. DOUBLE WALL	<input type="checkbox"/> 95. UNKNOWN			<input type="checkbox"/> 2. DOUBLE WALL	<input type="checkbox"/> 99. OTHER		463
	MANUFACTURER: Ameron & Unknown (steel)			461	MANUFACTURER:			463
<input checked="" type="checkbox"/> 1. BARE STEEL	<input type="checkbox"/> 6. FRP COMPATIBLE w/100% METHANOL	<input type="checkbox"/> 1. BARE STEEL			<input type="checkbox"/> 6. FRP COMPATIBLE w/100% METHANOL			
<input type="checkbox"/> 2. STAINLESS STEEL	<input type="checkbox"/> 7. GALVANIZED STEEL	<input type="checkbox"/> 2. STAINLESS STEEL			<input type="checkbox"/> 7. GALVANIZED STEEL			
<input type="checkbox"/> 3. PLASTIC COMPATIBLE w/ CONTENTS	<input type="checkbox"/> Unknown	<input type="checkbox"/> 3. PLASTIC COMPATIBLE w/ CONTENTS			<input type="checkbox"/> 8. FLEXIBLE (HDPE)		<input type="checkbox"/> 99. OTHER	
<input checked="" type="checkbox"/> 4. FIBERGLASS	<input type="checkbox"/> 99. Other	<input type="checkbox"/> 4. FIBERGLASS			<input type="checkbox"/> 9. CATHODIC PROTECTION			
<input type="checkbox"/> 5. STEEL w/COATING	<input type="checkbox"/> 8. FLEXIBLE (HDPE)	<input type="checkbox"/> 5. STEEL w/COATING			<input type="checkbox"/> 95. UNKNOWN		465	
<input type="checkbox"/> 9. CATHODIC PROTECTION	464							

VII. PIPING LEAK DETECTION (Check all that apply) (A description of the monitoring program shall be submitted to the local agency.)


UNDERGROUND PIPING		ABOVEGROUND PIPING	
SINGLE WALL PIPING 466		SINGLE WALL PIPING 467	
PRESSURIZED PIPING (Check all that apply):		PRESSURIZED PIPING (Check all that apply):	
<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS.		<input type="checkbox"/> 1. ELECTRONIC LINE LEAK DETECTOR 3.0 GPH TEST WITH AUTO PUMP SHUT OFF FOR LEAK, SYSTEM FAILURE, AND SYSTEM DISCONNECTION + AUDIBLE AND VISUAL ALARMS.	
<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST		<input type="checkbox"/> 2. MONTHLY 0.2 GPH TEST	
<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1GPH)		<input type="checkbox"/> 3. ANNUAL INTEGRITY TEST (0.1GPH)	
CONVENTIONAL SUCTION SYSTEMS		CONVENTIONAL SUCTION SYSTEMS (Check all that apply)	
<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PUMPING SYSTEM + TRIENNIAL PIPING INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 5. DAILY VISUAL MONITORING OF PIPING AND PUMPING SYSTEM	
SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING):		SAFE SUCTION SYSTEMS (NO VALVES IN BELOW GROUND PIPING):	
<input type="checkbox"/> 7. SELF MONITORING		<input type="checkbox"/> 7. SELF MONITORING	
GRAVITY FLOW		GRAVITY FLOW (Check all that apply):	
<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 8. DAILY VISUAL MONITORING	
		<input type="checkbox"/> 9. BIENNIAL INTEGRITY TEST (0.1 GPH)	
SECONDARILY CONTAINED PIPING		SECONDARILY CONTAINED PIPING	
PRESSURIZED PIPING (Check all that apply):		PRESSURIZED PIPING (Check all that apply):	
10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (Check one)		10. CONTINUOUS TURBINE SUMP SENSOR WITH AUDIBLE AND VISUAL ALARMS AND (Check one)	
<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS		<input type="checkbox"/> a. AUTO PUMP SHUT OFF WHEN A LEAK OCCURS	
<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION		<input type="checkbox"/> b. AUTO PUMP SHUT OFF FOR LEAKS, SYSTEM FAILURE AND SYSTEM DISCONNECTION	
<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF		<input type="checkbox"/> c. NO AUTO PUMP SHUT OFF	
<input type="checkbox"/> 11. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITH FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 11. AUTOMATIC LEAK DETECTOR	
<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 12. ANNUAL INTEGRITY TEST (0.1 GPH)	
SUCTION/GRAVITY SYSTEM		SUCTION/GRAVITY SYSTEM	
<input checked="" type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 13. CONTINUOUS SUMP SENSOR + AUDIBLE AND VISUAL ALARMS	
EMERGENCY GENERATORS ONLY (Check all that apply)		EMERGENCY GENERATORS ONLY (Check all that apply)	
<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS		<input type="checkbox"/> 14. CONTINUOUS SUMP SENSOR WITHOUT AUTO PUMP SHUT OFF + AUDIBLE AND VISUAL ALARMS	
<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST) WITHOUT FLOW SHUT OFF OR RESTRICTION		<input type="checkbox"/> 15. AUTOMATIC LINE LEAK DETECTOR (3.0 GPH TEST)	
<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)		<input type="checkbox"/> 16. ANNUAL INTEGRITY TEST (0.1 GPH)	
<input type="checkbox"/> 17. DAILY VISUAL CHECK		<input type="checkbox"/> 17. DAILY VISUAL CHECK	

VIII. DISPENSER CONTAINMENT

DISPENSER CONTAINMENT	<input type="checkbox"/> 1. FLOAT MECHANISM THAT SHUTS OFF SHEAR VALVE	<input type="checkbox"/> 4. DAILY VISUAL CHECK
DATE INSTALLED	<input type="checkbox"/> 2. CONTINUOUS DISPENSER PAN SENSOR + AUDIBLE AND VISUAL ALARMS	<input type="checkbox"/> 5. TRENCH LINER / MONITORING
.....	<input type="checkbox"/> 3. CONTINUOUS DISPENSER PAN SENSOR WITH AUTO SHUT OFF FOR DISPENSER + AUDIBLE AND VISUAL ALARMS	<input checked="" type="checkbox"/> 6. NONE

IX. OWNER/OPERATOR SIGNATURE

I certify that the information provided herein is true and accurate to the best of my knowledge.

SIGNATURE OF OWNER/OPERATOR	DATE	470
	11/29/03	
NAME OF OWNER/OPERATOR (print)	TITLE OF OWNER/OPERATOR	472
ED JOHNSON	MANAGER WASTE OIL	

Permit Number (For local use only)	473	Permit Approved (For local use only)	Permit Expiration Date (For local use only)	475
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(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

- 458. PIPING SYSTEM TYPE (UNDERGROUND) - For items 458 and 459, check the tank=s piping system information. CHECK ALL THAT APPLY.
 - 459. PIPING SYSTEM TYPE (ABOVEGROUND)
 - 460. PIPING CONSTRUCTION (UNDERGROUND) - Check the tank=s piping construction information. CHECK ALL THAT APPLY.
 - 461. PIPING MANUFACTURER (UNDERGROUND) - Enter the name of the piping manufacturer.
 - 462. PIPING CONSTRUCTION (ABOVEGROUND) - Check the tank=s piping construction information. CHECK ALL THAT APPLY.
 - 463. PIPING MANUFACTURER (ABOVEGROUND) - Enter the name of the piping manufacturer.
 - 464. PIPING MATERIAL AND CORROSION PROTECTION (UNDERGROUND) - For items 464 and 465, check the tank=s piping material and corrosion protection.
 - 465. PIPING MATERIAL AND CORROSION PROTECTION (ABOVEGROUND)
 - 466. PIPING LEAK DETECTION (UNDERGROUND) - For items 466 and 467, check the leak detection system(s) used to comply with the monitoring requirements for the piping.
 - 467. PIPING LEAK DETECTION (ABOVEGROUND)
 - 468. DATE DISPENSER CONTAINMENT INSTALLED - If applicable, enter the date that dispenser containment was installed.
 - 469. DISPENSER CONTAINMENT TYPE - Check the type of dispenser containment monitoring system.
- SIGNATURE OF OWNER/OPERATOR - The owner or agent of the owner shall sign in the space provided. This signature certifies that the signer believes that all the information submitted is true and accurate.
- 470. DATE CERTIFIED - Enter the date the page was signed.
 - 471. OWNER/ OPERATOR NAME - Print the name of signatory.
 - 472. OWNER/ OPERATOR TITLE - Enter the title of the person signing the page.
 - 473. PERMIT NUMBER - Leave this blank, this number is assigned by the CUPA.
 - 474. PERMIT APPROVED BY - Leave this blank, this is the name of the person approving the permit.
 - 475. PERMIT EXPIRATION DATE - Leave this blank, this is completed by the CUPA.

SITE SAFETY PLAN

UNDERGROUND STORAGE TANK REMOVAL

Alameda County Fairgrounds Association
4501 Pleasanton Ave., Pleasanton, Ca.

INTRODUCTION

This site safety plan has been prepared pursuant to the Reinholdt Engineering Construction (REC) Health and Safety Program. It addresses the activities associated with excavation and flammable liquids handling and will be implemented during all field related activities. The project consists of the removal of a 2,000 gallon underground gasoline storage tank and it's residual contents. Compliance with this site safety plan (SSP) is required of all tank removal personnel. The requirements and parameters of this SSP will be subject to modification as warranted by existing site conditions or as work progresses. However, no changes will be made without the prior approval of the Project Safety Officer.

PROJECT SAFETY OFFICER

The Project Safety Officer has overall responsibility for the development, coordination and implementation of the SSP. The Project Safety Officer will also be responsible for field implementation of the SSP. This will include communicating the site-specific requirements to all site personnel and third parties, and assuring compliance with the REC Health and Safety Program.

REINHOLDT ENGINEERING CONSTRUCTION AND SUBCONTRACTORS

All tank removal personnel will be responsible for reading, understanding, signing and complying with these SSP requirements.

HAZARD SUMMARY

Major potential hazards to personal safety at the site include:

A. Physical injury

Exposure to this type of injury can occur while working around heavy equipment during field operations; e.g., excavation and backfilling work.

B. Explosion and fire

Gasoline is highly flammable. Ignition and heat sources of any kind; e.g., engines, impact sparking and heat or arc from inappropriate equipment or instrumentation pose a serious fire or explosion hazard. "No smoking" signs will be placed around the work area and smoking or open flames will not be allowed within fifty feet. Underground compressed natural gas lines will be located prior to work.

C. Inhalation, ingestion or absorption of toxic vapors, dusts or liquids associated with petroleum hydrocarbons and organic chemicals

Gasoline vapors in high concentrations (>300 parts per million (ppm)) can cause eye, nose and throat irritation, headaches and dizziness. Skin contact and/or absorption of gasoline may result in irritation and dermatitis. Contact with specific toxic petroleum hydrocarbon and organic chemical substances such as the following volatile organic compounds (VOC): benzene, toluene, ethylbenzene and xylenes (BTEX) may seriously affect an individual's health. Benzene is a suspected human carcinogen and along with toluene and xylenes can cause damage to the liver, kidneys and central nervous system. Ethylbenzene is also known to be a skin irritant in both vapor and liquid forms.

D. Electrical shock or electrocution from buried or overhead power lines

All known underground circuits near the excavation will be disconnected prior to work. Equipment will not be operated within ten feet of overhead power lines.

HAZARD ASSESSMENT

Consistent efforts will be made throughout the project to evaluate the chemical and physical hazards described above. Explosion, fire and VOC exposure hazards will be evaluated via an air monitoring program. Electrical shock, hearing damage, physical damage and heat stress will be minimized through a hazard reduction program.

AIR MONITORING PROGRAM

A. Fire and explosion

A direct-reading, portable GasTech GT-200 combustible gas indicator (GCI) (calibrated to nitrogen and methane), which measures VOC concentrations in parts per million (ppm) and lower explosive limit (LEL), will be used to evaluate possible formations of flammable atmospheres around the work area. Periodic measurements will also be collected in any confined areas that may accumulate combustible vapors.

B. Exposure to VOC

Airborne concentrations of VOC will be monitored with the CGI as described above from the top of the excavation.

HAZARD REDUCTION PROGRAM

General Measures and Procedures

The excavation will be surrounded by temporary fencing until backfilling is completed. Access to work area will be limited by the Project Safety Officer to essential personnel. Excavated soil will be stockpiled on a non-permiable surface near the excavation or, if allowed, placed temporarily in the excavation pending soil sample results. Underground utilities will be identified by Underground Service Alert prior to commencement of work. Power circuits and pipelines will be shut down, locked and tagged as appropriate.

A. Flammable atmospheres

In the event that the CGI readings collected exceed 10% of the LEL of gasoline (11,000 ppm), work will be suspended. Monitoring will be continued as necessary to isolate the area of concern and some or all of the following environmental controls will be implemented as appropriate:

B. Airborne toxic chemicals

Workers will be required to wear half-face, air purifying respirators with organic vapor cartridges under the following circumstances:

1. if the worker is exposed throughout the day to VOC vapors exceeding the permissible exposure level (time weighted average) (PEL-TWA) for gasoline (300 ppm).
2. if the worker is exposed at any time to VOC vapors exceeding the permissible exposure level (short term exposure limit) (PEL-STEL) for gasoline (500 ppm).

Similar precautions will be taken with regard to other toxic chemicals such as BTEX components. If VOC vapors exceed 1000 ppm, full-face, air purifying respirators with organic vapor canisters will be worn.

C. Physical contact with contaminated soil

Workers coming in direct contact with contaminated soil for sampling purposes, will be required to wear protective gloves and/or protective clothing to prevent skin contact.

D. Physical hazards

Accidents will be prevented by personal protective equipment, engineering controls and the exercise of reasonable caution during work activities.

E. Noise exposure

All workers entering high-noise areas will be required to wear hearing protection (ear plugs or muffs).

F. Heat stress

Workers will be provided beverages, shaded rest areas and breaks, as needed, to prevent heat stress.

GENERAL MEASURES AND PROCEDURES

SAFETY INSPECTIONS

Walk-trough safety inspections of the work area will be conducted daily before the start of work and as conditions change. The results of these surveys will be communicated to work crews during "tailgate safety meetings." The safety procedures and the day's planned operations will be discussed at these sessions.

PERSONAL PROTECTIVE EQUIPMENT

Field personnel involved in the site excavation will be required to be prepared with the following personal protective equipment:

- * Hard hat
- * Air purifying respirator with organic vapor cartridges and dust/mist filters
- * Safety glasses with side shields or splash goggles
- * Tyvek coveralls or other suitable clothing
- * Chemical-resistant gloves
- * Steel toe boots
- * Hearing protection

EMERGENCY RESPONSE

The Project Safety Officer will have controlling authority during an emergency. Emergency response organizations and contacts are listed at the end of this plan.

GENERAL SAFETY REQUIREMENTS

The following requirements will also be observed:

1. The Project Safety Officer has the authority to correct unsafe site conditions. All accidents, injuries and potentially unsafe working conditions shall be reported to the Project Safety Officer immediately.
2. Eating, smoking and drinking will be allowed only in designated off-site areas. Site personnel will wash their hands and face thoroughly as necessary prior to eating or drinking.
3. Respirators will be cleaned, sanitized, inspected and maintained by workers before and after each use.
4. Fire extinguishers will be on-site for use on equipment or small fires only.
5. An adequately stocked first aid kit will be on-site at all times during work activities.

Practical engineering information, experience and accepted practices will be employed as necessary to control any and all aspects of site safety while carrying out the proposed work.

LIST OF KEY PERSONNEL

Project Safety Officer: Darin Reinholdt
Mobile phone #925-250-6184

Contractor: Reinholdt Engineering Construction
Office phone #925-689-8406

Site tenant: Alameda County Fairgrounds Association
Contact: Ed Johnson
Daytime phone #925-426-7624

Local authority: Alameda County Health Services Dept.
Contact: Robert Weston
Daytime phone #510-567-6781

EMERGENCY TELEPHONE NUMBERS

911	Police, Fire, Ambulance & Hazmat Response
800-258-6492	Hazardous Waste Hotline (California DHS)
800-342-9293	Poison Control Hotline
925-447-7000	Valley Memorial Hospital

HOSPITAL ROUTE:

Exit facility and turn right on Pleasanton Ave., then left onto Bernal Ave., then left on First St. which becomes Stanley Blvd. Take Stanley Blvd. eastward to 1111 Stanley Blvd., Livermore.

TANK REMOVAL PERSONNEL:

I have read and understand the site safety plan and agree to comply with all it's provisions:

Name (print) Signature

Company Date

Name (print) Signature

Company Date

Name (print) Signature

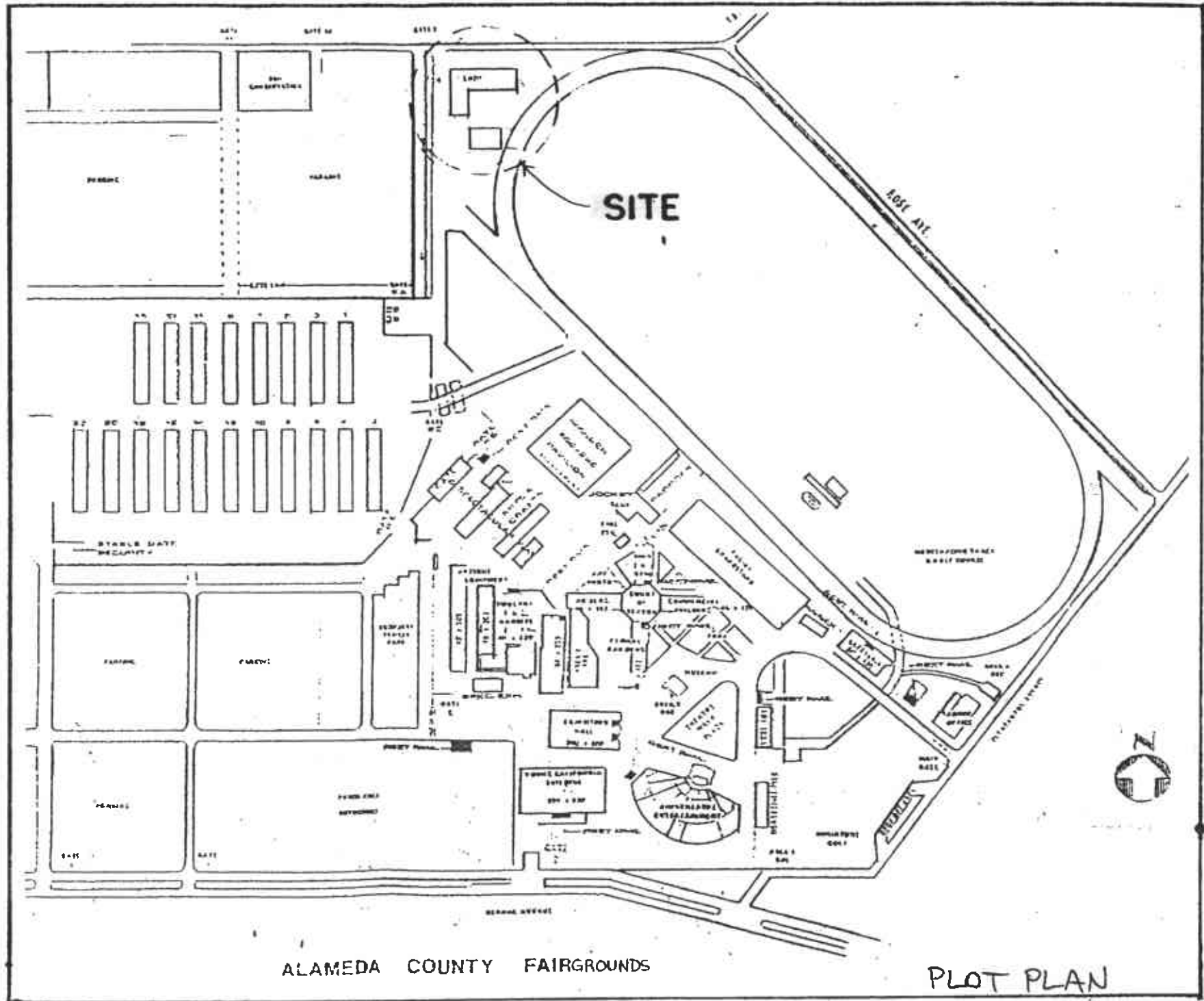
Company Date

Name (print) Signature

Company Date

Name (print) Signature

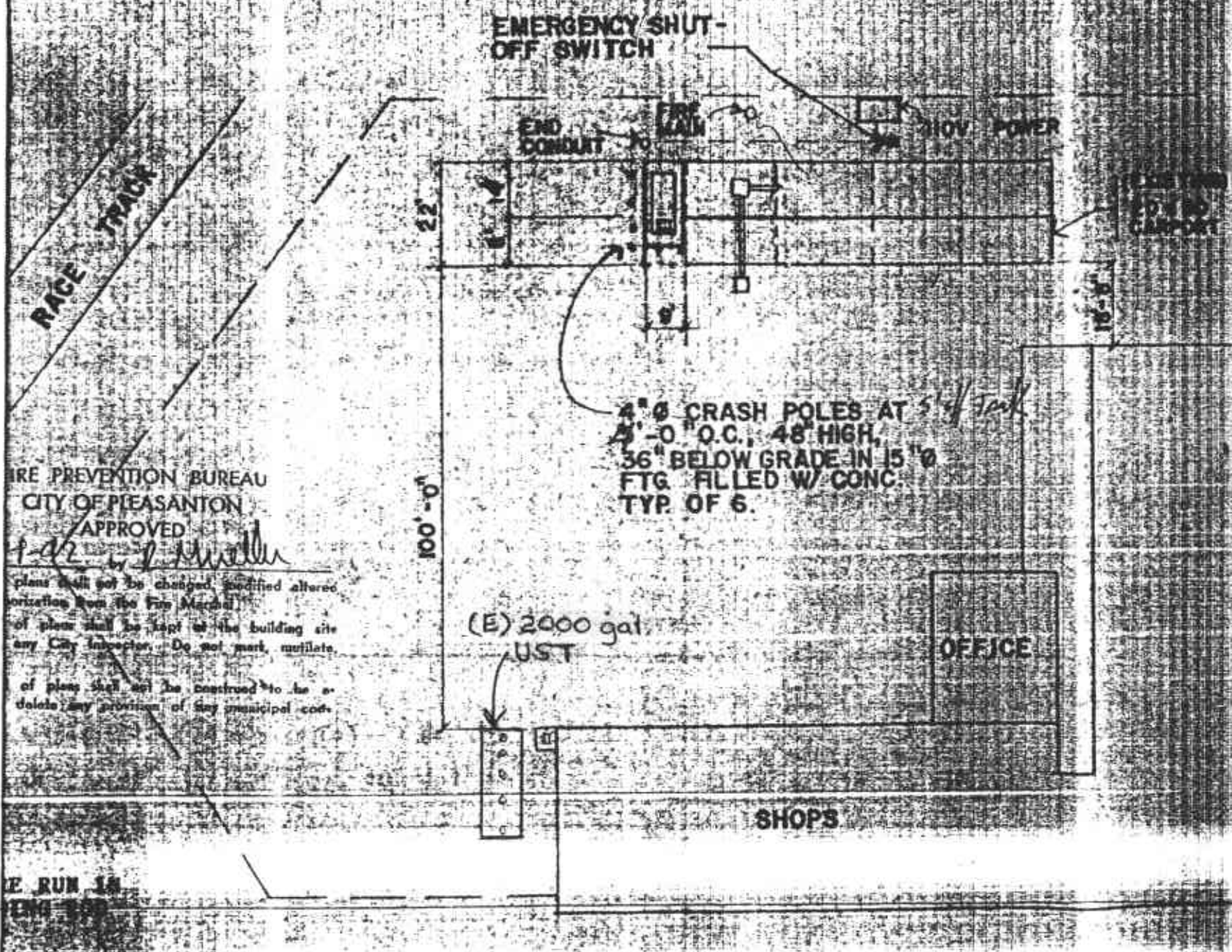
Company Date



ALAMEDA COUNTY FAIRGROUNDS

PLOT PLAN

AREA PLAN



FIRE PREVENTION BUREAU
CITY OF PLEASANTON
APPROVED
[Signature]

plans shall not be changed, modified altered
or otherwise from the Fire Marshal
of plans shall be kept at the building site
any City Inspector. Do not mark, mutilate,
of plans shall not be construed to be a
delete any provision of any municipal code.

E RUN IN
ING, AND

RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR UNDERGROUND TANK LEAKS

For Use by Unidocs Member Agencies or where approved by your Local Jurisdiction

TABLE #2
REVISED 1 MARCH 1999

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u> (SW-846 METHOD)		<u>WATER ANALYSIS</u> (Water/Waste Water Method)	
Gasoline (Leaded and Unleaded)	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and		524.2/624 (8260) for water	
	TOTAL LEAD	AA	TOTAL LEAD	AA
	Organic Lead	-Optional- DHS-LUFT	Organic Lead	DHS-LUFT
Unknown Fuel	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and		524.2/624 (8260) for water	
	TOTAL LEAD	AA	TOTAL LEAD	AA
Diesel, Jet Fuel, Kerosene, and Fuel/Heating Oil	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and		524.2/624 (8260) for water	
	TOTAL LEAD	AA	TOTAL LEAD	AA
	Organic Lead	-Optional- DHS-LUFT	Organic Lead	DHS-LUFT
Chlorinated Solvents	CL HC	8260	CL HC	524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
Nonchlorinated Solvents	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
Waste, Used, or Unknown Oil	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	O&G	9070	O&G	418.1
	BTEX	8260	BTEX	524.2/624 (8260)
	CL HC	8260	CL HC	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and		524.2/624 (8260) for water	
	METALS (Cd, Cr, Pb, Ni, Zn) by ICAP or AA for soil water			
	PCB*, PCP*, PNA, CREOSOTE by 8270 for soil and		524/625 (8270) for water	
	If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)			

NOTES:

1. 8021 replaces old methods 8020 and 8010
2. 8260 replaces old method 8240
3. Reference: Table B-1 in Appendix B of "Expedited Site Assessment Tools for Underground Storage Tank Sites: A Guide for Regulators" (EPA 510-B-97-001).



STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM A

COMPLETE THIS FORM FOR EACH FACILITY/SITE

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input checked="" type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS - (MUST BE COMPLETED)

DBA OR FACILITY NAME ALAMEDA COUNTY FAIR ASSOCIATION		NAME OF OPERATOR [Signature]		
ADDRESS 4501 PLEASANTON AVENUE		NEAREST CROSS STREET	PARCEL # (OPTIONAL)	
CITY NAME PLEASANTON		STATE CA	ZIP CODE 94566	SITE PHONE # WITH AREA CODE (510)426-7600
<input checked="" type="checkbox"/> BOX TO INDICATE <input type="checkbox"/> CORPORATION <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> LOCAL-AGENCY DISTRICTS <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> FEDERAL-AGENCY				
TYPE OF BUSINESS		<input type="checkbox"/> 1 GAS STATION	<input type="checkbox"/> 2 DISTRIBUTOR	<input type="checkbox"/> 3 FARM
		<input type="checkbox"/> 4 PROCESSOR	<input checked="" type="checkbox"/> 5 OTHER	<input type="checkbox"/> IF INDIAN RESERVATION OR TRUST LANDS
			# OF TANKS AT SITE 4	E.P.A. I.D. # (optional)

EMERGENCY CONTACT PERSON (PRIMARY)

EMERGENCY CONTACT PERSON (SECONDARY) - optional

DAYS: NAME (LAST, FIRST) ED JOHNSON	PHONE # WITH AREA CODE (510)426-7624	DAYS: NAME (LAST, FIRST) CHRIS HALL	PHONE # WITH AREA CODE (510)426-7516
NIGHTS: NAME (LAST, FIRST) ED JOHNSON	PHONE # WITH AREA CODE (510)462-0602	NIGHTS: NAME (LAST, FIRST) CHRIS HALL	PHONE # WITH AREA CODE (510)625-4487

II. PROPERTY OWNER INFORMATION - (MUST BE COMPLETED)

NAME COUNTY OF ALAMEDA		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 4501 PLEASANTON AVENUE		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME PLEASANTON		STATE CA	ZIP CODE 94566	PHONE # WITH AREA CODE (510)426-7600

III. TANK OWNER INFORMATION - (MUST BE COMPLETED)

NAME OF OWNER COUNTY OF ALAMEDA		CARE OF ADDRESS INFORMATION		
MAILING OR STREET ADDRESS 4501 PLEASANTON AVENUE		<input checked="" type="checkbox"/> box to indicate <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> LOCAL-AGENCY <input type="checkbox"/> STATE-AGENCY <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> COUNTY-AGENCY <input type="checkbox"/> FEDERAL-AGENCY		
CITY NAME PLEASANTON		STATE CA	ZIP CODE 94566	PHONE # WITH AREA CODE (510)426-7600

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER - Call (916) 323-9555 if questions arise.

TY (TK) HQ 44-001005

V. PETROLEUM UST FINANCIAL RESPONSIBILITY - (MUST BE COMPLETED) - IDENTIFY THE METHOD(S) USED

<input checked="" type="checkbox"/> box to indicate	<input type="checkbox"/> 1 SELF-INSURED	<input type="checkbox"/> 2 GUARANTEE	<input checked="" type="checkbox"/> 3 INSURANCE	<input type="checkbox"/> 4 SURETY BOND
	<input type="checkbox"/> 5 LETTER OF CREDIT	<input type="checkbox"/> 6 EXEMPTION	<input type="checkbox"/> 99 OTHER	

VI. LEGAL NOTIFICATION AND BILLING ADDRESS Legal notification and billing will be sent to the tank owner unless box I or II is checked.

CHECK ONE BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR LEGAL NOTIFICATIONS AND BILLING: I. II. III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) PETER BAILEY [Signature]	APPLICANT'S TITLE SECRETARY-MANAGER	DATE 1/19/95
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LOCAL AGENCY USE ONLY

COUNTY # 01	JURISDICTION # 006	FACILITY # 02497
LOCATION CODE - OPTIONAL	CENSUS TRACT # - OPTIONAL	SUPVISOR - DISTRICT CODE - OPTIONAL

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input checked="" type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: **ALAMEDA COUNTY FAIR MAINTENANCE YARD**

I. TANK DESCRIPTION COMPLETE ALL ITEMS -- SPECIFY IF UNKNOWN

A. OWNER'S TANK I. D. #	B. MANUFACTURED BY:
C. DATE INSTALLED (MO/DAY/YEAR) 1986	D. TANK CAPACITY IN GALLONS: 2,000

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input type="checkbox"/> 1 PRODUCT	C. <input checked="" type="checkbox"/> 1a REGULAR UNLEADED	<input type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED					C. A. S. #:

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D

A. TYPE OF SYSTEM	<input checked="" type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input type="checkbox"/> 95 UNKNOWN
	<input type="checkbox"/> 2 SINGLE WALL	<input checked="" type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank)	<input checked="" type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING
	<input checked="" type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
	IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES <input checked="" type="checkbox"/> NO		
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input checked="" type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
			<input type="checkbox"/> 99 OTHER

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A <input checked="" type="checkbox"/> 1 SUCTION	A U <input type="checkbox"/> 2 PRESSURE	A U <input type="checkbox"/> 3 GRAVITY	A U <input type="checkbox"/> 99 OTHER
B. CONSTRUCTION	A U <input type="checkbox"/> 1 SINGLE WALL	A <input checked="" type="checkbox"/> 2 DOUBLE WALL	A U <input type="checkbox"/> 3 LINED TRENCH	A U <input type="checkbox"/> 95 UNKNOWN
				A U <input type="checkbox"/> 99 OTHER
C. MATERIAL AND CORROSION PROTECTION	A <input checked="" type="checkbox"/> 1 BARE STEEL	A U <input type="checkbox"/> 2 STAINLESS STEEL	A U <input type="checkbox"/> 3 POLYVINYL CHLORIDE (PVC)	A U <input type="checkbox"/> 4 FIBERGLASS PIPE
	A U <input type="checkbox"/> 5 ALUMINUM	A U <input type="checkbox"/> 6 CONCRETE	A U <input type="checkbox"/> 7 STEEL W/ COATING	A U <input type="checkbox"/> 8 100% METHANOL COMPATIBLE W/FRP
	A U <input type="checkbox"/> 9 GALVANIZED STEEL	A U <input type="checkbox"/> 10 CATHODIC PROTECTION	A U <input type="checkbox"/> 95 UNKNOWN	A U <input type="checkbox"/> 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input checked="" type="checkbox"/> 99 OTHER Electrical

V. TANK LEAK DETECTION

<input checked="" type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VAPOR MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input checked="" type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING _____ GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input type="checkbox"/>
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT.

APPLICANT'S NAME (PRINTED & SIGNATURE) PETER BAILEY	DATE 1/19/95
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LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
	01	006	024971	000001
PERMIT NUMBER 95-006	PERMIT APPROVED BY/DATE 1/1/95	PERMIT EXPIRATION DATE 12/31/99		

STATE OF CALIFORNIA
STATE WATER RESOURCES CONTROL BOARD
UNDERGROUND STORAGE TANK PERMIT APPLICATION - FORM B



COMPLETE A SEPARATE FORM FOR EACH TANK SYSTEM.

MARK ONLY ONE ITEM	<input type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input checked="" type="checkbox"/> 8 TANK REMOVED

DBA OR FACILITY NAME WHERE TANK IS INSTALLED: **ALAMEDA COUNTY FAIRGROUNDS**

I. TANK DESCRIPTION COMPLETE ALL ITEMS -- SPECIFY IF UNKNOWN

A. OWNER'S TANK I.D. #	B. MANUFACTURED BY:
C. DATE INSTALLED (MO/DAY/YEAR)	D. TANK CAPACITY IN GALLONS: 1000

II. TANK CONTENTS IF A-1 IS MARKED, COMPLETE ITEM C.

A. <input type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 4 OIL	B. <input type="checkbox"/> 1 PRODUCT	C. <input type="checkbox"/> 1a REGULAR UNLEADED	<input checked="" type="checkbox"/> 3 DIESEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 2 PETROLEUM	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 1b PREMIUM UNLEADED	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 7 METHANOL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 2 LEADED	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D. BELOW)
D. IF (A.1) IS NOT MARKED, ENTER NAME OF SUBSTANCE STORED				C. A. S. #:	

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOXES A, B, AND C, AND ALL THAT APPLIES IN BOX D

A. TYPE OF SYSTEM	<input type="checkbox"/> 1 DOUBLE WALL	<input type="checkbox"/> 3 SINGLE WALL WITH EXTERIOR LINER	<input type="checkbox"/> 95 UNKNOWN
	<input checked="" type="checkbox"/> 2 SINGLE WALL	<input type="checkbox"/> 4 SECONDARY CONTAINMENT (VAULTED TANK)	<input type="checkbox"/> 99 OTHER
B. TANK MATERIAL (Primary Tank)	<input checked="" type="checkbox"/> 1 BARE STEEL	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 95 UNKNOWN
	IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? YES ___ NO ___		<input type="checkbox"/> 4 PHENOLIC LINING
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 COATING	<input type="checkbox"/> 3 VINYL WRAP
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
		<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND OR U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A <input checked="" type="checkbox"/> 1 SUCTION	A U <input type="checkbox"/> 2 PRESSURE	A U <input type="checkbox"/> 3 GRAVITY	A U <input type="checkbox"/> 99 OTHER
B. CONSTRUCTION	A <input checked="" type="checkbox"/> 1 SINGLE WALL	A U <input type="checkbox"/> 2 DOUBLE WALL	A U <input type="checkbox"/> 3 LINED TRENCH	A U <input type="checkbox"/> 95 UNKNOWN
C. MATERIAL AND CORROSION PROTECTION	A <input checked="" type="checkbox"/> 1 BARE STEEL	A U <input type="checkbox"/> 2 STAINLESS STEEL	A U <input type="checkbox"/> 3 POLYVINYL CHLORIDE (PVC)	A U <input type="checkbox"/> 4 FIBERGLASS PIPE
	A U <input type="checkbox"/> 5 ALUMINUM	A U <input type="checkbox"/> 6 CONCRETE	A U <input type="checkbox"/> 7 STEEL W/ COATING	A U <input type="checkbox"/> 8 100% METHANOL COMPATIBLE W/FRP
	A U <input type="checkbox"/> 9 GALVANIZED STEEL	A U <input type="checkbox"/> 10 CATHODIC PROTECTION	A U <input type="checkbox"/> 95 UNKNOWN	A U <input type="checkbox"/> 99 OTHER
D. LEAK DETECTION	<input type="checkbox"/> 1 AUTOMATIC LINE LEAK DETECTOR	<input type="checkbox"/> 2 LINE TIGHTNESS TESTING	<input type="checkbox"/> 3 INTERSTITIAL MONITORING	<input type="checkbox"/> 99 OTHER

V. TANK LEAK DETECTION

<input type="checkbox"/> 1 VISUAL CHECK	<input type="checkbox"/> 2 INVENTORY RECONCILIATION	<input type="checkbox"/> 3 VAPOR MONITORING	<input type="checkbox"/> 4 AUTOMATIC TANK GAUGING	<input type="checkbox"/> 5 GROUND WATER MONITORING
<input type="checkbox"/> 6 TANK TESTING	<input type="checkbox"/> 7 INTERSTITIAL MONITORING	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

VI. TANK CLOSURE INFORMATION

1. ESTIMATED DATE LAST USED (MO/DAY/YR) 1-1-91	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING >100 GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? YES <input type="checkbox"/> NO <input type="checkbox"/>
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT

APPLICANT'S NAME (PRINTED & SIGNATURE) <i>Christy R. Hall</i>	DATE 1-27-95
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LOCAL AGENCY USE ONLY THE STATE I.D. NUMBER IS COMPOSED OF THE FOUR NUMBERS BELOW

STATE I.D.#	COUNTY #	JURISDICTION #	FACILITY #	TANK #
	01	006	024971	000002
PERMIT NUMBER	PERMIT APPROVED BY/DATE	PERMIT EXPIRATION DATE		

STATE OF CALIFORNIA

WATER RESOURCES CONTROL BOARD



FORM 'A':
SITE

UNDERGROUND STORAGE TANK PROGRAM
FACILITY/SITE, INFORMATION and/or PERMIT APPLICATION
COMPLETE THIS FORM FOR EACH FACILITY/SITE

No 38669

MARK ONLY ONE ITEM	<input checked="" type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED SITE
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS — (MUST BE COMPLETED)

FACILITY/SITE NAME Alameda County Fair Association		CARE OF ADDRESS INFORMATION			
ADDRESS 4501 Pleasanton Avenue		NEAREST CROSS STREET		<input checked="" type="checkbox"/> Box to indicate CORPORATION INDIVIDUAL <input type="checkbox"/> PARTNERSHIP LOCAL-AGENCY COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY FEDERAL-AGENCY	
CITY NAME Pleasanton		STATE CA	ZIP CODE 94566	SITE PHONE #, WITH AREA CODE (415) 847-7500	
TYPE OF BUSINESS: <input type="checkbox"/> 1 GAS STATION <input type="checkbox"/> 2 DISTRIBUTOR <input type="checkbox"/> 3 FARM <input type="checkbox"/> 4 PROCESSOR <input checked="" type="checkbox"/> 5 OTHER		<input checked="" type="checkbox"/> Box if INDIAN RESERVATION or TRUST LANDS <input type="checkbox"/> EPA ID #		# of TANKs AT THIS SITE 2	
EMERGENCY CONTACT PERSON (PRIMARY)			EMERGENCY CONTACT PERSON (SECONDARY)		
DAYS: NAME (LAST, FIRST) Ed Johnson		PHONE # WITH AREA CODE (415) 857-7516		DAYS: NAME (LAST, FIRST) Dave Freeman	
NIGHTS: NAME (LAST, FIRST) Ed Johnson		PHONE # WITH AREA CODE (415) 462-0602		NIGHTS: NAME (LAST, FIRST) Dave Freeman	
		PHONE # WITH AREA CODE (415) 847-7518		PHONE # WITH AREA CODE (415) 449-0215	

II. PROPERTY OWNER INFORMATION & ADDRESS — (MUST BE COMPLETED)

NAME County of Alameda		CARE OF ADDRESS INFORMATION			
MAILING or STREET ADDRESS 4501 Pleasanton Avenue		<input checked="" type="checkbox"/> Box to indicate CORPORATION INDIVIDUAL <input type="checkbox"/> PARTNERSHIP LOCAL-AGENCY COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY FEDERAL-AGENCY			
CITY NAME Pleasanton		STATE CA	ZIP CODE 94566	PHONE #, WITH AREA CODE (415) 847-7500	

III. TANK OWNER INFORMATION & ADDRESS — (MUST BE COMPLETED)

NAME County of Alameda		CARE OF ADDRESS INFORMATION			
MAILING or STREET ADDRESS 4501 Pleasanton Avenue		<input checked="" type="checkbox"/> Box to indicate CORPORATION INDIVIDUAL <input type="checkbox"/> PARTNERSHIP LOCAL-AGENCY COUNTY-AGENCY <input type="checkbox"/> STATE-AGENCY FEDERAL-AGENCY			
CITY NAME Pleasanton		STATE CA	ZIP CODE 94566	PHONE #, WITH AREA CODE (415) 847-7500	

IV. LEGAL NOTIFICATION AND BILLING ADDRESS

CHECK ONE (1) BOX INDICATING WHICH ABOVE ADDRESS SHOULD BE USED FOR BOTH LEGAL NOTIFICATION AND BILLING: I. II. III.

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT.

APPLICANT'S NAME (PRINTED & SIGNATURE) <i>Alu Bailey</i>	DATE 1/11/91
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LOCAL AGENCY USE ONLY

COUNTY #	JURISDICTION #	AGENCY #	FACILITY ID #	# of TANKs at SITE
CURRENT LOCAL AGENCY FACILITY ID #			APPROVED BY NAME	PHONE # WITH AREA CODE
PERMIT NUMBER	PERMIT APPROVAL DATE		PERMIT EXPIRATION DATE	
LOCATION CODE	CENSUS TRACT #	SUPERVISOR-DISTRICT CODE	BUSINESS PLAN FILED YES <input type="checkbox"/> NO <input type="checkbox"/>	DATE FILED
CHECK #	PERMIT AMOUNT	SURCHARGE AMOUNT	FEE CODE	RECEIPT # BY:

THIS FORM MUST BE ACCOMPANIED BY AT LEAST (1) OR MORE TANK PERMIT FORM 'B' APPLICATION(S), UNLESS THIS IS A CHANGE OF SITE INFORMATION ONLY.



FORM 'B':
TANK

UNDERGROUND STORAGE TANK PROGRAM
TANK PERMIT APPLICATION INFORMATION

COMPLETE A SEPARATE FORM WITH THE FOLLOWING INFORMATION FOR EACH TANK.

MARK ONLY ONE ITEM	<input checked="" type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 3 RENEWAL PERMIT	<input type="checkbox"/> 5 CHANGE OF INFORMATION	<input type="checkbox"/> 7 PERMANENTLY CLOSED TANK
	<input type="checkbox"/> 2 INTERIM PERMIT	<input type="checkbox"/> 4 AMENDED PERMIT	<input type="checkbox"/> 6 TEMPORARY TANK CLOSURE	<input type="checkbox"/> 8 TANK REMOVED

FACILITY/SITE NAME WHERE TANK IS INSTALLED: _____ FARM TANK - YES NO

I. TANK DESCRIPTION COMPLETE ALL ITEMS - IF UNKNOWN -- SO SPECIFY

A. OWNERS TANK ID #	B. MANUFACTURED BY:
C. YEAR INSTALLED 1986	D. TANK CAPACITY IN GALLONS: 2000

II. TANK CONTENTS IF (A.1), IS MARKED, COMPLETE ITEM C. IF (A.1), IS NOT MARKED, COMPLETE ITEM D.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 2 PETROLEUM	B. <input type="checkbox"/> 1 PRODUCT <input type="checkbox"/> 2 WASTE	C. <input type="checkbox"/> 1 UNLEADED	<input checked="" type="checkbox"/> 2 LEADED	<input type="checkbox"/> 3 DIESEL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 4 OIL		<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 5 HAZARDOUS	<input type="checkbox"/> 80 EMPTY <input type="checkbox"/> 95 UNKNOWN		<input type="checkbox"/> 7 METHANOL	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D, BELOW)	
D. IF NOT MOTOR VEHICLE FUEL, ENTER NAME OF HAZARDOUS SUBSTANCE STORED & C.A.S. #					C.A.S. #:

xIII. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOX A, B, C, & D

A. TYPE OF SYSTEM	<input checked="" type="checkbox"/> 1 DOUBLE WALLED	<input type="checkbox"/> 3 SINGLE WALLED WITH EXTERIOR LINER	<input type="checkbox"/> 95 UNKNOWN
	<input type="checkbox"/> 2 SINGLE WALLED	<input type="checkbox"/> 4 SECONDARY CONTAINMENT	<input type="checkbox"/> 99 OTHER
B. TANK MATERIAL	<input checked="" type="checkbox"/> 1 STEEL/IRON	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS
	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM
	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING
	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input type="checkbox"/> 4 PHENOLIC LINING
	<input type="checkbox"/> IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL?		<input checked="" type="checkbox"/> 95 UNKNOWN
			<input type="checkbox"/> 99 OTHER
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 TAR OR ASPHALT	<input type="checkbox"/> 3 VINYL WRAP
	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC
		<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND, U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A <input checked="" type="checkbox"/> 1 SUCTION	A U <input type="checkbox"/> 2 PRESSURE	A U <input type="checkbox"/> 3 GRAVITY	A U <input type="checkbox"/> 99 OTHER
B. CONSTRUCTION	A U <input checked="" type="checkbox"/> 1 SINGLE WALLED	A U <input type="checkbox"/> 2 DOUBLE WALLED	A U <input type="checkbox"/> 3 LINED TRENCH	A U <input type="checkbox"/> 95 UNKNOWN
C. MATERIAL	A U <input checked="" type="checkbox"/> 1 STEEL/IRON	A U <input type="checkbox"/> 2 STAINLESS STEEL	A U <input type="checkbox"/> 3 POLYVINYL CHLORIDE (PVC)	A U <input type="checkbox"/> 4 FIBERGLASS PIPE
	A U <input type="checkbox"/> 5 ALUMINUM	A U <input type="checkbox"/> 6 CONCRETE	A U <input type="checkbox"/> 7 STEEL CLAD W/FRP	A U <input type="checkbox"/> 8 100% METHANOL COMPATIBLE FRP
	A U <input type="checkbox"/> 9 GALVANIZED STEEL	A U <input type="checkbox"/> 95 UNKNOWN	A U <input type="checkbox"/> 99 OTHER	

V. LEAK DETECTION SYSTEM CIRCLE P FOR PRIMARY, OR S FOR SECONDARY, A PRIMARY LEAK DETECTION SYSTEM MUST BE CIRCLED.

<input checked="" type="checkbox"/> 1 VISUAL CHECK	P S <input type="checkbox"/> 2 INVENTORY RECONCILIATION	P S <input type="checkbox"/> 3 VADOSE WELLS	P S <input type="checkbox"/> 4 ELECTRONIC MONITOR	P S <input type="checkbox"/> 5 GROUND WATER MONITORING WELLS
P S <input type="checkbox"/> 6 PRECISION TESTING	P S <input type="checkbox"/> 7 PRESSURE TESTING	P S <input type="checkbox"/> 91 NONE	P S <input type="checkbox"/> 95 UNKNOWN	P S <input type="checkbox"/> 99 OTHER

VI. INFORMATION ON TANK PERMANENTLY CLOSED IN PLACE

1. ESTIMATED DATE LAST USED (MO/YR) <input checked="" type="checkbox"/> X	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING IN GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> YES <input type="checkbox"/> NO
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT.

APPLICANT'S NAME (PRINTED & SIGNATURE)

Steve Bradley

DATE

11/11/91

LOCAL AGENCY USE ONLY

COUNTY #	JURISDICTION #	AGENCY #	FACILITY ID #	TANK ID #

CURRENT LOCAL AGENCY FACILITY ID # _____ APPROVED BY NAME _____ PHONE # WITH AREA CODE _____

PERMIT NUMBER	PERMIT APPROVAL DATE	PERMIT EXPIRATION DATE
CHECK #	PERMIT AMOUNT	SURCHARGE AMT.
	FEE CODE	RECEIPT #
	BY:	

NO 11874

STATE OF CALIFORNIA WATER RESOURCES CONTROL BOARD

FORM 'B': TANK

UNDERGROUND STORAGE TANK PROGRAM TANK PERMIT APPLICATION INFORMATION

COMPLETE A SEPARATE FORM WITH THE FOLLOWING INFORMATION FOR EACH TANK.



- MARK ONLY ONE ITEM
- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> 1 NEW PERMIT | <input type="checkbox"/> 3 RENEWAL PERMIT | <input type="checkbox"/> 5 CHANGE OF INFORMATION | <input type="checkbox"/> 7 PERMANENTLY CLOSED TANK |
| <input type="checkbox"/> 2 INTERIM PERMIT | <input type="checkbox"/> 4 AMENDED PERMIT | <input type="checkbox"/> 6 TEMPORARY TANK CLOSURE | <input type="checkbox"/> 8 TANK REMOVED |

FACILITY/SITE NAME WHERE TANK IS INSTALLED: Alameda County Fairgrounds FARM TANK - YES NO

I. TANK DESCRIPTION COMPLETE ALL ITEMS - IF UNKNOWN - SO SPECIFY

A. OWNERS TANK ID #	B. MANUFACTURED BY:
C. YEAR INSTALLED 1986	D. TANK CAPACITY IN GALLONS: 1000

II. TANK CONTENTS IF (A.1), IS MARKED, COMPLETE ITEM C. IF (A.1), IS NOT MARKED, COMPLETE ITEM D.

A. <input checked="" type="checkbox"/> 1 MOTOR VEHICLE FUEL	<input type="checkbox"/> 2 PETROLEUM	B. <input type="checkbox"/> 1 PRODUCT	C. <input type="checkbox"/> 1 UNLEADED	<input type="checkbox"/> 2 LEADED	<input checked="" type="checkbox"/> 3 DIESEL
<input type="checkbox"/> 3 CHEMICAL PRODUCT	<input type="checkbox"/> 4 OIL	<input type="checkbox"/> 2 WASTE	<input type="checkbox"/> 4 GASAHOL	<input type="checkbox"/> 5 JET FUEL	<input type="checkbox"/> 6 AVIATION GAS
<input type="checkbox"/> 5 HAZARDOUS	<input type="checkbox"/> 80 EMPTY	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 7 METHANOL	<input type="checkbox"/> 99 OTHER (DESCRIBE IN ITEM D, BELOW)	

D. IF NOT MOTOR VEHICLE FUEL, ENTER NAME OF HAZARDOUS SUBSTANCE STORED & C.A.S. # C.A.S. #:

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOX A, B, C, & D

A. TYPE OF SYSTEM	<input checked="" type="checkbox"/> 1 DOUBLE WALLED	<input type="checkbox"/> 2 SINGLE WALLED	<input type="checkbox"/> 3 SINGLE WALLED WITH EXTERIOR LINER	<input type="checkbox"/> 4 SECONDARY CONTAINMENT	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER						
B. TANK MATERIAL	<input checked="" type="checkbox"/> 1 STEEL/IRON	<input type="checkbox"/> 2 STAINLESS STEEL	<input type="checkbox"/> 3 FIBERGLASS	<input type="checkbox"/> 4 STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC	<input type="checkbox"/> 5 CONCRETE	<input type="checkbox"/> 6 POLYVINYL CHLORIDE	<input type="checkbox"/> 7 ALUMINUM	<input type="checkbox"/> 8 100% METHANOL COMPATIBLE FRP	<input type="checkbox"/> 9 BRONZE	<input type="checkbox"/> 10 GALVANIZED STEEL	<input type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER
C. INTERIOR LINING	<input type="checkbox"/> 1 RUBBER LINED	<input type="checkbox"/> 2 ALKYD LINING	<input type="checkbox"/> 3 EPOXY LINING	<input type="checkbox"/> 4 PHENOLIC LINING	<input type="checkbox"/> 5 GLASS LINING	<input type="checkbox"/> 6 UNLINED	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER	IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? <input type="checkbox"/> YES <input type="checkbox"/> NO			
D. CORROSION PROTECTION	<input type="checkbox"/> 1 POLYETHYLENE WRAP	<input type="checkbox"/> 2 TAR OR ASPHALT	<input type="checkbox"/> 3 VINYL WRAP	<input type="checkbox"/> 4 FIBERGLASS REINFORCED PLASTIC	<input type="checkbox"/> 5 CATHODIC PROTECTION	<input type="checkbox"/> 91 NONE	<input checked="" type="checkbox"/> 95 UNKNOWN	<input type="checkbox"/> 99 OTHER				

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND, U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	<input checked="" type="checkbox"/> A 1 SUCTION	<input type="checkbox"/> A U 2 PRESSURE	<input type="checkbox"/> A U 3 GRAVITY	<input type="checkbox"/> A U 99 OTHER							
B. CONSTRUCTION	<input checked="" type="checkbox"/> U 1 SINGLE WALLED	<input type="checkbox"/> A U 2 DOUBLE WALLED	<input type="checkbox"/> A U 3 LINED TRENCH	<input type="checkbox"/> A U 95 UNKNOWN	<input type="checkbox"/> A U 99 OTHER						
C. MATERIAL	<input checked="" type="checkbox"/> A 1 STEEL/IRON	<input type="checkbox"/> A U 2 STAINLESS STEEL	<input type="checkbox"/> A U 3 POLYVINYL CHLORIDE (PVC)	<input type="checkbox"/> A U 4 FIBERGLASS PIPE	<input type="checkbox"/> A U 5 ALUMINUM	<input type="checkbox"/> A U 6 CONCRETE	<input type="checkbox"/> A U 7 STEEL CLAD W/FRP	<input type="checkbox"/> A U 8 100% METHANOL COMPATIBLE FRP	<input type="checkbox"/> A U 9 GALVANIZED STEEL	<input type="checkbox"/> A U 95 UNKNOWN	<input type="checkbox"/> A U 99 OTHER

V. LEAK DETECTION SYSTEM CIRCLE P FOR PRIMARY, OR S FOR SECONDARY, A PRIMARY LEAK DETECTION SYSTEM MUST BE CIRCLED.

<input checked="" type="checkbox"/> P 1 VISUAL CHECK	<input type="checkbox"/> P S 2 INVENTORY RECONCILIATION	<input type="checkbox"/> P S 3 VADOSE WELLS	<input type="checkbox"/> P S 4 ELECTRONIC MONITOR	<input type="checkbox"/> P S 5 GROUND WATER MONITORING WELLS
<input type="checkbox"/> P S 6 PRECISION TESTING	<input type="checkbox"/> P S 7 PRESSURE TESTING	<input type="checkbox"/> P S 91 NONE	<input type="checkbox"/> P S 95 UNKNOWN	<input type="checkbox"/> P S 99 OTHER

VI. INFORMATION ON TANK PERMANENTLY CLOSED IN PLACE

1. ESTIMATED DATE LAST USED (MO/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING IN GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> YES <input type="checkbox"/> NO
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT.

APPLICANT'S NAME (PRINTED & SIGNATURE) <i>John Bailey</i>	DATE 1/11/91
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LOCAL AGENCY USE ONLY

COUNTY #	JURISDICTION #	AGENCY #	FACILITY ID #	TANK ID #	
CURRENT LOCAL AGENCY FACILITY ID #	APPROVED BY NAME	PHONE # WITH AREA CODE			
PERMIT NUMBER	PERMIT APPROVAL DATE	PERMIT EXPIRATION DATE			
CHECK #	PERMIT AMOUNT	SURCHARGE AMT.	FEE CODE	RECEIPT #	BY:

NO 11874