

ALAMEDA COUNTY
HEALTH CARE SERVICES



AGENCY
DAVID J. KEARS, Agency Director

7

Certified Mail # 7002 2030 0006 9574 1013
August 17, 2005

ENVIRONMENTAL HEAL
ENVIRONMENTAL PROTECTI
1131 Harbor Bay Parkway, Suit
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

CALL SHELL
DENIS BROWN
& REQUEST
GRASP
REPORT FOR
SITE SENT
TO JERRY

NOTICE OF RESPONSIBILITY

Case ID: [REDACTED]

Site Name & Address:

SHELL
1801 SANTA RITA RD
PLEASANTON, CA 94566

Responsible Party:

DENIS BROWN
SHELL OIL PRODUCTS US
20945 S WILMINGTON AVE
CARSON, CA 90810

Release Information:

Date First Reported: **12/20/02**
Substance Code: **8006619**

Substance: *Gasoline-Automotive (motor gasoline and additives), leaded & unleaded*

Funding for Oversight:

LOPF LOP Federal Fund

Multiple RPs?: **No**

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter (Remedial Action Completion Certification). For purposes of implementing section 25297.15, this agency has identified SHELL OIL PRODUCTS US as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency, within 20 calendar days of receipt of this notice, which identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5650.

Pursuant to section 25299.37(c)(7) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact this office for further information about the designation process.

Please contact your caseworker Jerry Wickham, at this office at (510) 567-6791 if you have questions regarding your site.

for ARIU LEVI, Chief
Contract Project Director

Date: 08/18/05

Circle One: Add Delete Change
Reason: **New Case**

cc: Jenniffer Jordan, SWRCB
D. Drogos, J. Wickham

Report #6705

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Denis Brown
Shell Oil Products US
20945 S Wilmington Ave.
Carson, CA 90810

PS Form 3800, June 2002 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
IF RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

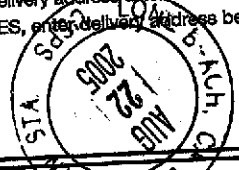
Denis Brown
Shell Oil Products US
20945 S Wilmington Ave.
Carson, CA 90810

ADDRESSEE: COMPLETE THIS SECTION

A. Signature Agent
 Denis Brown Addressee

B. Received by (Printed Name) Yes
Denis Brown C. Date of Delivery No

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No



3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7002 2030 0006 9574 1013
 (Transfer from service if)