

202921

CITY OF OAKLAND FIRE DEPARTMENT  
Office Of Emergency Services  
1605 Martin Luther King Jr. Way, Oakland, CA 94612

Hazardous Materials Program

Contaminated Site Case Transfer Form

RECEIVED  
NOV 2 2007  
ENVIRONMENTAL HEALTH SERVICES

Referral To:

Date	10/31/07
Agency	Alameda County Environmental Health, 1131 Harbor Bay Parkway, Alameda, CA 94502
Attention	Donna L. Drogos, LOP/SLIC Program Manager

Site Information:

Site Address	387 Orange Street, Oakland, Ca 94610
Site Phone	(51)644-3123
Site Contractor/Consultant (if available)	Stellar Environmental/ Steven Bittman
Site DBA	NA

Site Conditions:

<b>UST</b>	
USTs removed? Yes # removed: NA Date removed: August 27, 2007	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
Contents (circle): gasoline diesel waste oil heating oil solvents kerosene stoddard solvent other (specify) _____	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
Observations of system (holes, leaks)?	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
Observed contamination (free product, smell, soil/ discoloration)? NA	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
Detectable concentrations of soil and/or groundwater contamination? o Highest Concentration Detected in Soil Contaminant (specify): NA	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
o Highest Concentration Detected in Water TEH = Extractable hydrocarbon Contaminant (specify): TPH <sub>b</sub> Concentration: 2400 mg/kg TEH <sub>d</sub>	
Unauthorized Release Form filed? The site was previously reported to the RWQCB	Yes <input type="checkbox"/> No <input checked="" type="radio"/>
Future intended use if known? Specify: Unknown	Yes <input checked="" type="radio"/> No <input type="checkbox"/>
<b>NON-UST</b>	
Former industrial use? NA	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	Yes <input type="checkbox"/> No <input type="checkbox"/>
o Highest Concentration Detected in Water Contaminant (specify) _____ Concentration _____ ppb	
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: [Signature] Date: 11/09/07

Transfer accepted by (ACEH): [Signature] Date: 11/09/07

ALREADY A CASE 202921, FROM OFD ON 04/25/06

**STELLAR ENVIRONMENTAL SOLUTIONS, INC.**

2198 Sixth Street  
Berkeley, CA 94710  
Telephone: (510) 644-3123  
Fax (510) 644-3859

Alameda County

SEP 24 2007

Environmental Health

**fax**

To: Ms. Donna Drogos

Fax #: 510-337-9335

From: Henry Pietropaoli- Stellar Environmental Solutions

Date: September 24, 2007

Subject: **UST Unauthorized Release Contamination Site Report  
385 to 387 Orange Street, Oakland, CA**

Pages: (including this cover sheet) 2


NOTES: Dear Ms Drogos,

I need to submit a UST Unauthorized Release Report signed by a Alameda County Environmental Health Services (ACEHS) as an attachment to the UST Cleanup Fund application that I am preparing for this site. The site has already been assigned ACEHS Fuel Leak Case Number RO0002921. We removed the UST on 8/27/07 and will be submitting the removal report to ACEHS soon along with this form included in the appendices.

Our caseworker, Steve Plunkett is out of the office and so I was hoping you could sign this form and fax it back to me.

If you have any questions, please contact me at (510) 644-3123

Thank you,

  
Henry Pietropaoli

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT			
<b>EMERGENCY</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>REPORT DATE</b> 9/13/2007		<b>CASE #</b> _____	
<b>FOR LOCAL AGENCY USE ONLY</b> I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25100.7 OF THE HEALTH AND SAFETY CODE.			
SIGNED: <i>[Signature]</i>		DATE: 09/25/07	
REPORTED BY	<b>NAME OF INDIVIDUAL FILING REPORT</b> Henry Pietropaoli		<b>PHONE</b> (510) 644-3123
	<b>REPRESENTING</b> <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> REGIONAL BOARD <input checked="" type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> OTHER		<b>SIGNATURE</b> <i>[Signature]</i>
	<b>COMPANY OR AGENCY NAME</b> Stellar Environmental Solutions		<b>ADDRESS</b> 2198 Sixth Street <small>STREET</small>
Berkeley <small>CITY</small>		CA <small>STATE</small>	94710 <small>ZIP</small>
RESPONSIBLE PARTY	<b>NAME</b> Estate of David Ulibarri <input type="checkbox"/> Unknown		<b>CONTACT PERSON</b> Mary Kranz
	<b>ADDRESS</b> 10106 Coronado Avenue NE <small>STREET</small>		Albuquerque <small>CITY</small>
NM <small>STATE</small>		87122 <small>ZIP</small>	
SITE LOCATION	<b>FACILITY NAME (IF APPLICABLE)</b> Residential Building		<b>OPERATOR</b> _____
	<b>ADDRESS</b> 387 Orange Street <small>STREET</small>		Oakland <small>CITY</small>
	Pearl Street <small>CROSS STREET</small>		Alameda <small>COUNTY</small>
94610 <small>ZIP</small>		_____	
IMPLEMENTING AGENCIES	<b>LOCAL AGENCY AGENCY NAME</b> Oakland Fire Department		<b>PHONE</b> (510) 238-2396
	<b>REGIONAL BOARD</b> _____		<b>PHONE</b> ( )
SUBSTANCES INVOLVED	(1) <b>NAME</b> Heating Oil		<b>QUANTITY LOST (GALLONS)</b> <input checked="" type="checkbox"/> Unknown
	(2) _____		<input type="checkbox"/> Unknown
DISCOVERY/ABATEMENT	<b>DATE DISCOVERED</b> 3/14/2006		<b>HOW DISCOVERED</b> <input type="checkbox"/> Tank Test <input type="checkbox"/> Tank Removal <input type="checkbox"/> Nuisance Conditions <input type="checkbox"/> Inventory Control <input checked="" type="checkbox"/> Subsurface Monitoring <input type="checkbox"/> Other
	<b>DATE DISCHARGE BEGAN</b> _____		<b>METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY)</b> <input checked="" type="checkbox"/> Remove Contents <input checked="" type="checkbox"/> Close Tank <input type="checkbox"/> Repair Tank <input type="checkbox"/> Change Procedure <input type="checkbox"/> Replace Tank <input type="checkbox"/> Other <input type="checkbox"/> Repair Piping
	<b>HAS DISCHARGE BEEN STOPPED?</b> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE _____		<input checked="" type="checkbox"/> UNKNOWN
SOURCE/ CAUSE	<b>SOURCE OF DISCHARGE</b> <input checked="" type="checkbox"/> Tank Leak <input checked="" type="checkbox"/> Piping Leak <input type="checkbox"/> Unknown <input type="checkbox"/> Other		<b>CAUSE(S)</b> <input type="checkbox"/> Overfill <input checked="" type="checkbox"/> Corrosion <input type="checkbox"/> Rupture/Failure <input type="checkbox"/> Unknown <input type="checkbox"/> Spill <input type="checkbox"/> Other
	<b>CHECK ONE ONLY</b> <input type="checkbox"/> Undetermined <input type="checkbox"/> Soil Only <input checked="" type="checkbox"/> Groundwater <input type="checkbox"/> Drinking Water - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)		
CURRENT STATUS	<b>CHECK ONE ONLY</b> <input type="checkbox"/> No Action Taken <input type="checkbox"/> Case Closed (Cleanup Completed or Unnecessary) <input type="checkbox"/> Leak Being Confirmed <input type="checkbox"/> Pollution Characterization <input type="checkbox"/> Remediation Plan <input type="checkbox"/> Post Cleanup Monitoring in Progress <input type="checkbox"/> Preliminary Site Assessment Workplan Submitted <input type="checkbox"/> Cleanup Underway <input checked="" type="checkbox"/> Preliminary Site Assessment Underway		
	<b>CHECK APPROPRIATE ACTION(S)</b> <input type="checkbox"/> Cap Site (CD) <input type="checkbox"/> Excavate & Treat (ET) <input type="checkbox"/> Treatment At Hookup (HU) <input type="checkbox"/> Other <input type="checkbox"/> Contamination Barrier (CB) <input type="checkbox"/> No Action Required (NA) <input type="checkbox"/> Enhanced Bio Degradation (IT) <input type="checkbox"/> Vacuum Extract (VE) <input type="checkbox"/> Remove Free Product (FP) <input type="checkbox"/> Replace Supply (RS) <input checked="" type="checkbox"/> Excavate & Dispose (ED) <input type="checkbox"/> Pump & Treat Groundwater (GT) <input type="checkbox"/> Vent Soil (VS)		
COMMENTS	One 1,000 gallon heating ust removed. Impacted soil from tank excavation bottom was excavated to 15 feet and disposed. Soil sampes from excavation bottom contained up to 85 ppm TEHd, 8.8 ppm TVHg, and 110 ppm TVHmo. Groundwater is known to be affected from samples collected via adjacent borings before tank was removed. Monitoring/pump & treat needed.		