JP 1763

UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION SITE REPORT						
EMI	RIGENCY HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED?	FOR LOCAL AGENCY USE ONLY				
	YES X NO YES X NO	I HEREBY OF RITEY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM				
_	ORT DATE CASE #			12/29/12		
1,	2 1 3 30 4 4	SIGNED.		DATE		
	NAME OF INDIVIDUAL FILING REPORT PHONE		16			
0 84		COMPANY OR AGENCY NAME	1	12/13/04		
REPORTED	REPRESENTING X OWNER/OPERATOR REGIONAL BOARD LOCAL AGENCY OTHER	Clorox Services Co.				
Ä	AODRESS	OZOTON BETVICES OF.				
	7200 Johnson Dr.	Pleasanton,Ca 94	4588	ATE 719		
9	NAME	CONTACT PERSON		PHONE ZIP		
RESPONSIBLE PARTY	Clorox Services Co. UNKNOWN	Chet Green		(925) 425-6624		
PA	ADDRESS					
E	Same street	спу	ST	ATÉ ZIP		
	FACILITY NAME (IF APPLICABLE)	OPERATOR		PHONE		
SE	Clorox Services Co.	Chet Green	<u></u>	(925) 425-6624		
SITE LOCATION	7280 JohnsonDr. Pleasanton,Ca	9458 <u>8</u>	7			
SIE SIE	STREET CROSS STREET	CITY		DUNTY ZIP		
1	Stoneridge Drive		4 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
9	LOCAL AGENCY AGENCY NAME	CONTACT PERSON	6	PHONE		
PLEMENTH	Livermore/Pleasanton Fire Dept.	John Rigter	6 Q	(925) 454-2337		
MPLEMENTING	REGIONAL BOARD State Water Resource Control Board		(Table)	PHONE 4016 > 261 - 5050		
		00110	<u>े े ॐ</u>	(916) 341-5250		
SUBSTANCES	DieselFuel	2940		uantity lost (gallons) 1g/kg 🗀 unknown		
ATS.	27.11g/ kg					
3 ₹				UNKNOWN		
E	DATE DISCOVERED HOW DISCOVERED	FACE	E MONITORING	NUISANCE CONDITIONS		
WABATEMENT	0 ml 4 ml 1 pl 9 pl 0 vl 4 v	· · ·				
7A8A	DATE DISCHARGE BEGAN METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY)					
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DISCOVE	HAS DISCHARGE BEEN STOPPED ? REPAIR TANK CLOSE TANK & FILL IN PLACE CHANGE PROCEDUS YES NO IF YES, DATE 0 4 1 6 10 14 1 16 10 14 17 16 10 16 16 16 16 16 16					
\vdash	SAME OF DECIMENT	/	· · · · · · · · · · · · · · · · · · ·			
SOURCE	TANKLEAK X UNKNOWN ON	/ERFILL RUPTURE/FA	MLURE	SPILL		
ర్జ్ క	PIPING LEAK OTHER C	DRROSION X UNKNOWN		отнея		
CASE	CHECK ONE ONLY					
35		DRINKING WATER - (CHECK ONLY II	F WATER WELLS	HAVE ACTUALLY BEEN AFFECTED)		
 -	CHECK ONE ONLY TY NO ACTION TAKEN PRELIMINARY SITE ASSESSMENT	THOOPIN AN OLIVIATION	BOLLITION OLIVE	ACTEDITATION		
CURRENT	X NO ACTION TAKEN					
당	REMEDIATION PLAN CASE CLOSED (CLEANUP COMPLETED OR UNNECESSARY) CLEANUP UNDERWAY					
	CHECK APPROPRIATE ACTION(S) EXCAVATE & DISPOSE (ED	REMOVE FREE PRODUCT (I	FP)	ENHANCED BIO DEGRADATION (IT		
3 8	CAP SITE (CD) EXCAVATE & TREAT (ET) PUMP & TREAT GROUNDWATER (GT) REPLACE SUPPLY (RS)					
REMEDIAL	CONTAINMENT BARRIER (CB) NO ACTION REQUIRED (NA) TREATMENT AT HOPHUE E IV EED SOIL (VS)					
	VACUUM EXTRACT (VE) X OTHER (OT) UST removed on April 16, 2004					
go		DE	C 2 0 200	4		
COMMENTS		eine i	PREVEN	TION		
18		FIRE	L U 🖰 A 1 1			
	1					

INSTRUCTIONS

EMERGENCY

Indicate whether emergency response personnel and equipment were involved at any time. If no, a Hazardous Material Incident Report should be filed with the State Office of Emergency Services (OES) at 2800 Meadowsiew Road. Sucramento, CA 95832. Copics of the OES report form may be obtained at your local underground storage tank permitting agency. Indicate whether the OES report has been filed as of the date of this report.

LOCAL AGENCY ONLY

To avoid duplicate notification pursuant to Health and Safety code Section 25180.5, a government employee should sign and date the form in this block. A signature here <u>does</u> not mean that the loak has been determined to pose a significant threat to human health or safety, only that notification procedures have been followed if required.

REPORTED BY

Luter your name, telephone number, and address. Indicate which party you epresent and provide company or agency name.

RESPONSIBLE PARTY

Enter name, telephone number, contact person, and address of the party responsible for the leak. The responsible party would normally be the tank owner.

SITE LOCATION

Enter information regarding the tank facility. At a minimum, you must provide the facility name and full address.

IMPLEMENTING AGENCIES

Enter names of the local agency and Regional Water Quality Control Board involved.

SUBSTANCES INVOLVED

Enter the name and quantity lost of the hazardous substance involved. Room is provided for information on two substances if appropriate. If more than two substances leaked, list the two of most concern for cleanup.

DISCOVERY/ABATEMENT

Provide information regarding the discovery and abatement of the leak.

SOURCE/CAUSE

indicate source(s) of lesk. Check box(es) indicating cause of leak.

CASE TYPE

Indicate the case type category for this leak. Check one box only. Case type is based on the most sensitive resource affected. For example, if both soil and ground water have been affected, case type will be "Ground Water". Indicate "Drinking Water" only if one or more municipal or domestic water wells have actually been affected. A "Ground Water" designation does not imply that the affected water cannot be, or is not, used for drinking water, but only that water wells have not yet been affected. It is understood that case type may change upon further investigation.

CURRENT STATUS

Indicate the category which best describes the current status of the case. Check one box only. The response should be relative to the case type. For example, if case type is "Ground Water", then "Current Status" should refer to the status of the ground water investigation or cleanup, as opposed to that of soil. Descriptions of options follow:

No Action Taken - No action has been taken by responsible party beyond initial report of leak.

Leak Raing Confirmed - Leak suspected at site, but has not been confirmed. Freliminary Site Assessment Workplan Submitted - workplan/proposel requested of/submitted by responsible party to determine whether ground water has been, or will be, impacted as a result of the release. Preliminary Site Assessment Underway - implementation of workplan. Pollution Characterization - responsible party is in the process of fully defining the extent of contamination in soil and ground water and assessing impacts on surface and/or ground water.

Remediation Plan - remediation plan submitted evaluating long term remediation options. Froposal and implementation schedule for appropriate remediation options also submitted.

Cleanup Underway - implementation of remediation plan.

Post Cleanup Monitoring in Progress - periodic ground water or other monitoring at site, as necessary, to verify and/or evaluate effectiveness of remedial activities.

Case Closed - regional board and local agency in concurrence that no further work is necessary at the site.

IMPORTANT: THE INFORMATION PROVIDED ON THIS FORM IS INTENDED FOR GENERAL STATISTICAL PURPOSES ONLY AND IS NOT TO BE CONSTRUED AS REPRESENTING THE OFFICIAL POSITION OF ANY GOVERNMENTAL AGENCY

REMEDIAL ACTION

Indicate which action have been used to cleanup or ramediate the leak. Descriptions of options follow:

Cap Site - install horizontal impermeable layer to reduce rainfall infiltration.

Containment Barrier - install vertical dike to block horizontal movement of contaminant.

Excavate and Dispose - remove contaminated soil and dispose in approved site.

Excavate and Treat - remove contaminated soil and treat (includes spreading or land farming).

Remove Free Froduct - remove floating product from water table.

Pump and Treat Groundwater - generally employed to remove dissolved contaminants.

Enhanced Biodegradation - use of any available technology to promote bacterial decomposition of contaminants.

Replace Supply - provide alternative water supply to affected parties.

Treatment at Hookup - install water treatment devices at each dwelling or other place of use.

<u>Vacuum Extract</u> - use pumps or blowers to draw air through soil.

<u>Vent Soil</u> - bore holes in soil to allow volatilization of contaminants.

<u>No Action Required</u> - incident is minor, requiring no remedial action.

COMMENTS - Use this space to elaborate on any aspects of the incident.

SIGNATURE - Sign the form in the space provided.

DISTRIBUTION

If the form is completed by the tank owner or his agent, retain the last copy and forward the remaining copies intact to your local tank permitting agency for distribution.

- 1. Original Local Tank Permitting Agency
- 2. Regional Water Quality Control Board
- Local Health Officer and County Board of Supervisors or their designes to receive Proposition 65 notifications.
- 4. Owner/responsible party.

	UNDERGROUND STORAGE TANK UNAUTHO			,,,	*** OI ! E ! ! E! O!!!
EME	RGENCY HAS STATE OFFICE OF EMERGENCY SERVE		FOR LOCAL AGENCY USE ONLY		
YES X NO			THEREBY CERTIFY THAT I HAVE DISTRIBUTED THIS INFORMATION ACCORDING TO THE		
REPORT DATE CASE #			DISTRIBUTION SHOWN ON THE INSTRUCTION SHEET ON THE BACK PAGE OF THIS FORM		
1,	2 4 1 43 0 4 4	1	ASGNED COMPANY	- - 1	6 02/14/65 DATE
	NAME OF INDIVIOUAL FILING REPORT	PHONE	TTT TT STORYGONE STORY	SIGNATURE	ing (managagagagagagagagagagagagagagagagagaga
λ8 (Chet Green	(925) 425-6624	CH	12/13/04
HTEO	REPRESENTING OWNER/OPERATOR REGIONAL E	BOARD	COMPANY OR AGENCY NAME		
REPORTED	LOCAL AGENCY OTHER		Clorox Services Co.		
α.	7200 Johnson Dr. STREET		Pleasanton, Ca 94588 STATE ZIP CONTACT PERSON PHONE (925) \$25-6624		
E.	NAME Chorox Services Co. ADDRESS Same FACILITY NAME (IF APPLICABLE) Clorox Services Co.	OUD	CONTACT PERSON		PHONE ZIP
AESPONSIBLE PARTY	Chorox Services Co.	NOWN:	V Chet Green		(925) \$25-6624
PA	ADDRESS ENVIOR	904	··		
崔	Same STREET STREET		CITY		STATE 710
	PACIETY NAME (IF APPLICABLE)	Q/fh	OPERATOR		PHONE ZIP
Ŏ.		***/	Chet Green	·	(925) 425-6624
SITE LOCATION	ADDRESS 7280 JohnsonDr. Pleasanton.	C-	0/500		
ΠEυ	7280 JohnsonDr. Pleasanton,	,ca	94588 		COUNTY ZIP
S					
æ	Stoneridge Drive LOCAL AGENCY NAME				
ES	Livermore/Pleasanton Fire Dept.		CONTACTPERSON John Rigter	·	PHONE (454 2227
화양					(925) 454-2337
品質	REGIONAL BOARD				1
IMPLEMENTING AGENCIES	State Water Resource Control Board				PHONE (916) 341-5250
	State Water Resource Control Board	AME			(916) 341-5250
	State Water Resource Control Board	AME			1
	State Water Resource Control Board	AME			(916) 341-5250
SUBSTANCES IMPLEM INVOLVED AGEN	State Water Resource Control Board (i) DieselFuel (2)	AME			(916) 341-5250
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CASE SOURCE/ DISCOVERY/ABATEMENT SUBSTANCES TYPE CAUSE INVOLVED	State Water Resource Control Board (1) DieselFuel (2) DATE DISCOVERED OM 4 M 1 D D OM 4 TANK TEST X DATE DISCHARGE BEGAN MM D D Y M X UNKNOWN HAS DISCHARGE BEEN STOPPED ? X YES NO IF YES, DATE OM 4 D ON DOWN SOURCE OF DISCHARGE TANK LEAK X UNKNOWN PIPING LEAK OTHER CHECK ONE ONLY UNDETERMINED X SOIL ONLY GROUNDWA CHECK ONE ONLY X NO ACTION TAKEN PRELIMINARY SITE ASSE REMEDIATION PLAN CASE CLOSED (CLEANUF CHECK APPROPRIATE ACTION(S) PRES MOK FOR OSTALES CAP SITE (CD) EXCAVATE & TREA	TANK TANK Y 4 Y AUSE(S) OVE COP ATER CSSMENT (CSSMENT) CSSMENT	REMOVAL METHOD USED TO STOP X REMOVE CONTENT REPAIR TANK REPLACE TANK ERFILL RROSION DRINKING WATER - (WORKPLAN SUBMITTED UNDERWAY TED OR UNNECESSARY) REMOVE FR PUMP & TRE TREATMENT	SUBSURFACE MONITORING OTHER DISCHARGE (CHECK ALL THAT AS IX CLOSE TANK & FELL IN POTHER RUPTURE/FARLURE UNKNOWN CHECK ONLY IF WATER WELLS POLLUTION CHAF POST CLEANUP IN CLEANUP IN CLEANUP IN CLEANUP UNDER EE PRODUCT (FP) AT GROUNDWATER (GT) AT HOOKUP (HU)	(916) 341-5250 OUANTITY LOST (GALLONS) ING/kg UNKNOWN UNKNOWN NUISANCE CONDITIONS APPLY) REPAIR PIPING PLACE CHANGE PROCEDURE SPILL OTHER HAVE ACTUALLY BEEN AFFECTED) RACTERIZATION MONITORING IN PROGRESS WAY ENHANCED BIO DEGRADATION (IT)
CURRENT CASE SOURCE DISCOVERY/ABATEMENT BUSANCES INVOLVED	State Water Resource Control Board (1) DieselFuel (2) DATE DISCOVERED OM 4 M 1 D D OM 4 TANK TEST X DATE DISCHARGE BEGAN M D D W X UNKNOWN HAS DISCHARGE BEEN STOPPED ? X YES NO IF YES, DATE OM 4 M 1 D 6 D C SOURCE OF DISCHARGE TANK LEAK X UNKNOWN PIPING LEAK OTHER CHECK ONE ONLY UNDETERMINED X SOIL ONLY GROUNDWA CHECK ONE ONLY X NO ACTION TAKEN PRELIMINARY SITE ASSE REMEDIATION PLAN CASE CLOSED (CLEANUP CHECK APPROPRIATE ACTION(S) CEE BACK FOR DETALBY CHECK APPROPRIATE ACTION(S) CEE BACK FOR DETALBY CHECK APPROPRIATE ACTION(S) CEC BACK FOR DETALBY CAP SITE (CD) EXCAVATE & TREA	TANK TANK Y 4 Y AUSE(S) OVE COP ATER CSSMENT (CSSMENT) CSSMENT	REMOVAL METHOD USED TO STOP X REMOVE CONTENT REPAIR TANK REPLACE TANK RROSION DRINKING WATER - (WORKPLAN SUBMITTED UNDERWAY TED OR UNNECESSARY) REMOVE FR PUMP & TRE	SUBSURFACE MONITORING OTHER DISCHARGE (CHECK ALL THAT AS IX CLOSE TANK & FELL IN POTHER RUPTURE/FARLURE UNKNOWN CHECK ONLY IF WATER WELLS POLLUTION CHAF POST CLEANUP IN CLEANUP IN CLEANUP IN CLEANUP UNDER EE PRODUCT (FP) AT GROUNDWATER (GT) AT HOOKUP (HU)	(916) 341-5250 OUANTITY LOST (GALLONS) ING/kg UNKNOWN UNKNOWN NUISANCE CONDITIONS APPLY) REPAIR PIPING CHANGE PROCEDURE SPILL OTHER HAVE ACTUALLY BEEN AFFECTED) RECTERIZATION MONITORING IN PROGRESS WAY ENHANCED BIO DEGRADATION (IT) REPLACE SUPPLY (RS)
REMEDIAL CURRENT CASE SOURCE/ DISCOVERY/ABATEMENT SUBSTANCES ACTION STATUS TYPE CAUSE	State Water Resource Control Board (1) DieselFuel (2) DATE DISCOVERED OM 4 M 1 D D OM 4 TANK TEST X DATE DISCHARGE BEGAN MM D D Y M X UNKNOWN HAS DISCHARGE BEEN STOPPED ? X YES NO IF YES, DATE OM 4 D ON DOWN SOURCE OF DISCHARGE TANK LEAK X UNKNOWN PIPING LEAK OTHER CHECK ONE ONLY UNDETERMINED X SOIL ONLY GROUNDWA CHECK ONE ONLY X NO ACTION TAKEN PRELIMINARY SITE ASSE REMEDIATION PLAN CASE CLOSED (CLEANUF CHECK APPROPRIATE ACTION(S) PRES MOK FOR OSTALES CAP SITE (CD) EXCAVATE & TREA	TANK TANK Y 4 Y AUSE(S) OVE COP ATER CSSMENT (CSSMENT) CSSMENT	REMOVAL METHOD USED TO STOP X REMOVE CONTENT REPAIR TANK REPLACE TANK ERFILL RROSION DRINKING WATER - (WORKPLAN SUBMITTED UNDERWAY TED OR UNNECESSARY) REMOVE FR PUMP & TRE TREATMENT	SUBSURFACE MONITORING OTHER DISCHARGE (CHECK ALL THAT AS IX CLOSE TANK & FELL IN POTHER RUPTURE/FARLURE UNKNOWN CHECK ONLY IF WATER WELLS POLLUTION CHAF POST CLEANUP IN CLEANUP IN CLEANUP IN CLEANUP UNDER EE PRODUCT (FP) AT GROUNDWATER (GT) AT HOOKUP (HU)	(916) 341-5250 OUANTITY LOST (GALLONS) ING/kg UNKNOWN UNKNOWN NUISANCE CONDITIONS APPLY) REPAIR PIPING CHANGE PROCEDURE SPILL OTHER HAVE ACTUALLY BEEN AFFECTED) RECTERIZATION MONITORING IN PROGRESS WAY ENHANCED BIO DEGRADATION (IT) REPLACE SUPPLY (RS)
CURRENT CASE SOURCE DISCOVERY/ABATEMENT BUSANCES INVOLVED	State Water Resource Control Board (1) DieselFuel (2) DATE DISCOVERED OM 4 M 1 D D OM 4 TANK TEST X DATE DISCHARGE BEGAN MM D D Y M X UNKNOWN HAS DISCHARGE BEEN STOPPED ? X YES NO IF YES, DATE OM 4 D ON DOWN SOURCE OF DISCHARGE TANK LEAK X UNKNOWN PIPING LEAK OTHER CHECK ONE ONLY UNDETERMINED X SOIL ONLY GROUNDWA CHECK ONE ONLY X NO ACTION TAKEN PRELIMINARY SITE ASSE REMEDIATION PLAN CASE CLOSED (CLEANUF CHECK APPROPRIATE ACTION(S) PRES MOK FOR OSTALES CAP SITE (CD) EXCAVATE & TREA	TANK TANK Y 4 Y AUSE(S) OVE COP ATER CSSMENT (CSSMENT) CSSMENT	REMOVAL METHOD USED TO STOP X REMOVE CONTENT REPAIR TANK REPLACE TANK ERFILL RROSION DRINKING WATER - (WORKPLAN SUBMITTED UNDERWAY TED OR UNNECESSARY) REMOVE FR PUMP & TRE TREATMENT	SUBSURFACE MONITORING OTHER DISCHARGE (CHECK ALL THAT AS IX CLOSE TANK & FELL IN POTHER RUPTURE/FARLURE UNKNOWN CHECK ONLY IF WATER WELLS POLLUTION CHAF POST CLEANUP IN CLEANUP IN CLEANUP IN CLEANUP UNDER EE PRODUCT (FP) AT GROUNDWATER (GT) AT HOOKUP (HU)	(916) 341-5250 OUANTITY LOST (GALLONS) ING/kg UNKNOWN UNKNOWN NUISANCE CONDITIONS APPLY) REPAIR PIPING CHANGE PROCEDURE SPILL OTHER HAVE ACTUALLY BEEN AFFECTED) RECTERIZATION MONITORING IN PROGRESS WAY ENHANCED BIO DEGRADATION (IT) REPLACE SUPPLY (RS)