

S E M C O
ENVIRONMENTAL CONTRACTORS & GENERAL ENGINEERING
1741 LESLIE STREET
SAN MATEO, CALIFORNIA 94402 ALCO
HAZMAT

94 DEC -2 PM 3:24

December 1, 1994

Susan Hugo
Alameda County
Environmental Health Department
1131 Harbor Bay Parkway, Suite # 250
Alameda, California 94502

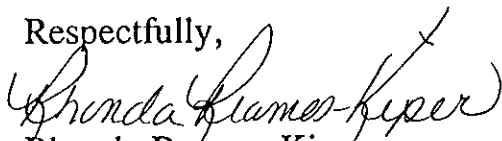
Re: Tank Removal Report, 3623 Adeline Street, Emeryville

Dear Susan:

Please find enclosed, a copy of the tank removal report for the above mentioned address.

If you have any questions, please give me a call.

Respectfully,


Rhonda Reames-Kiper
SEMCO-SAN MATEO

cc: Scott Barde, Owens Financial Group
File

License # 449864
A,B, C-61/D40
Hazardous Substances Certification

(800) 831-2344
(415) 572-8033
(415) 572-9734 FAX

**TANK REMOVAL
ACTIVITY REPORT**

**3623 ADELINE STREET
OAKLAND, CALIFORNIA**

Prepared for:

**OWENS FINANCIAL GROUP, INC.
P.O. BOX 2308
WALNUT CREEK, CALIFORNIA 94595**

Submitted to:

**COUNTY OF ALAMEDA
ENVIRONMENTAL HEALTH DEPARTMENT
1131 HARBOR BAY PARKWAY, SUITE 250
ALAMEDA, CALIFORNIA 94502
(510) 567-6700**

Prepared by:

**SEMCO
1741 LESLIE STREET
SAN MATEO, CALIFORNIA 94402
(415) 572-8033**

**JOB # 94-3949
NOVEMBER 1994**

SCOPE OF WORK

The scope of work included the removal of one (1) 8000 gallon gasoline tank. The tank was located at the property owned by Owens Financial Group, Inc. This report covers the tank removal and related soil sampling.

SITE DESCRIPTION

This site is a commercial property, located in Alameda County at 3623 Adeline Street, Oakland, California. The tank was located in the South Eastern section of the property.

PROJECT DESCRIPTION

On November 1, 1994, SEMCO arrived on site for the tank removal. The tank was accessed by excavating the soil above and along one side. The soil was stockpiled on site.

A total of 55 gallons of water was removed from the tank prior to it's removal and was transported for disposal by Evergreen Environmental under manifest number 92859957. The tank was inerted by placing solid carbon dioxide (dry ice) inside, until acceptable levels of Oxygen and Lower Explosive Limits were reached for a safe removal.

Susan Hugo of Alameda County Environmental Health Department and George Warren of Emeryville Fire Dept were on site to verify the tank readings and to witness the removal, loading and sampling activities. The tank appeared to be in good condition with no holes. The soil appeared to be clean and free of odor or discoloration.

The tank was identified with number 14816 and placed on RHT's truck for transportation to and disposal at Erickson, Inc., Richmond, under manifest number 92863873.

SAMPLING

Samples were collected from each end of the excavation and discrete samples were collected from the stockpiled soil. Additionally, a sample was collected from beneath the pump dispenser. All samples were collected in clean brass tubes, which were sealed with Teflon tape, pre-formed plastic end caps and masking tape. The samples were labeled, entered onto a chain of custody and placed in an iced cooler for transportation to Geo Analytical in Modesto for the analysis of Total Petroleum Hydrocarbons as Gasoline (TPH-G), Benzene, Toluene, Ethyl Benzene and Xylenes (BTEX), and Lead. Analytical results demonstrated non detectable levels of TPH-G and BTEX, and minimal amounts of lead in the NE corner and the stockpiled soil. The pit was backfilled with the stockpiled soil and the remainder of the excavation with approved fill material.

On behalf of the property owner, we would like to request that this site be consider for closure and no further work required.

This report was prepared from informational worksheets, inspector's field notes and analytical data pertaining to this site.



SITE LOCATION MAP

APPENDIX

TANK REMOVAL ANALYTICAL

3623 ADELINE STREET, EMERYVILLE, CALIFORNIA

NOVEMBER 1, 1994

SAMPLE ID	DEPTH	TPH (G)	B	T	EB	X	LEAD
#1-NE-PIT	13'6"	ND	ND	ND	ND	ND	6 PPM
#2-DISCRETE 20 YD COMP 3:25	NA	ND	ND	ND	ND	ND	29 PPM
#3-DISCRETE 20 YD COMP 3:30	NA	ND	ND	ND	ND	ND	8 PPM
#4-SW-PIT	13'	ND	ND	ND	ND	ND	ND
#5-PUMP ISLAND	2'	ND	ND	ND	ND	ND	8 PPM



GeoAnalytical Laboratories, Inc.

1031 Kansas Avenue
Modesto, CA 95351

Phone (209) 572-0900
FAX (209) 572-0916

SEMCO

NOV 12 1994

received

CERTIFICATE OF ANALYSIS

TEPH

Report # F306-02
Semco
1741 Leslie Road
San Mateo CA 94402

Date: 11/04/94
Date Received: 11/02/94
Date Started: 11/03/94
Date Completed: 11/03/94

Project Name: Owens Financial

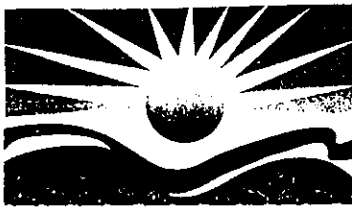
Project # 94-3949

Sample ID	Lab ID	Detection Limit	Method	Analyte	Results	Units mg/Kg
N.E. 13'6 Depth Pit	F22521	5.0	3550 LUFT	Kerosene	ND	
		5.0		Diesel	ND	
		50		Motor Oil	ND	
Discreet 20 yd Comp 3:25	F22522	5.0	3550 LUFT	Kerosene	ND	
		5.0		Diesel	ND	
		50		Motor Oil	ND	
Discreet 20 yd Comp 3:30	F22523	5.0	3550 LUFT	Kerosene	ND	
		5.0		Diesel	ND	
		50		Motor Oil	ND	
S.W. 13' Depth Pit	F22524	5.0	3550 LUFT	Kerosene	ND	
		5.0		Diesel	ND	
		50		Motor Oil	ND	
Pump Island Depth 2'	F22525	5.0	3550 LUFT	Kerosene	ND	
		5.0		Diesel	ND	
		50		Motor Oil	ND	

Richard Sereno
Richard Sereno
Chemist

Certification # E757

Donna Allsup
Donna Allsup
Laboratory Director



GeoAnalytical Laboratories, Inc.

1031 Kansas Avenue
Modesto, CA 95351

Phone (209) 572-0900
FAX (209) 572-0916

SEMCO
NOV 12 1994
RECEIVED

CERTIFICATE OF ANALYSIS

BTEX & Gas

Report # F306-02
Semco
1741 Leslie Road
San Mateo CA 94402

Date: 11/07/94
Date Received: 11/02/94
Date Started: 11/04/94
Date Completed: 11/07/94

Project Name: Owens Financial

Project # 94-3949

Sample ID	Lab ID	Detection Limit	Method	Analyte	Results	Units
N.E. 13'6 Depth Pit	F22521	5.0	8020	Benzene	ND	µg/Kg
		5.0		Toluene	ND	
		5.0		Ethyl Benzene	ND	
		5.0		Total Xylenes	ND	
		2.5		5030/LUFT	Gasoline	
Discreet 20 yd Comp 3:25	F22522	5.0	8020	Benzene	ND	µg/Kg
		5.0		Toluene	ND	
		5.0		Ethyl Benzene	ND	
		5.0		Total Xylenes	ND	
		2.5		5030/LUFT	Gasoline	
Discreet 20 yd Comp 3:30	F22523	5.0	8020	Benzene	ND	µg/Kg
		5.0		Toluene	ND	
		5.0		Ethyl Benzene	ND	
		5.0		Total Xylenes	ND	
		2.5		5030/LUFT	Gasoline	
S.W. 13' Depth Pit	F22524	5.0	8020	Benzene	ND	µg/Kg
		5.0		Toluene	ND	
		5.0		Ethyl Benzene	ND	
		5.0		Total Xylenes	ND	
		2.5		5030/LUFT	Gasoline	
Pump Island Depth 2'	F22525	5.0	8020	Benzene	ND	µg/Kg
		5.0		Toluene	ND	
		5.0		Ethyl Benzene	ND	
		5.0		Total Xylenes	ND	
		2.5		5030/LUFT	Gasoline	

Richard Meissner
Chemist

Certification # E757

Donna Allsup
Laboratory Director



GeoAnalytical Laboratories, Inc.

1031 Kansas Avenue
Modesto, CA 95351

Phone (209) 572-0900
FAX (209) 572-0916

SEMCO
NOV 12 1994
RECEIVED

CERTIFICATE OF ANALYSIS

Report # F306-02

Semco
1741 Leslie Road
San Mateo CA 94402

Date: 11/07/94

Date Received: 11/02/94

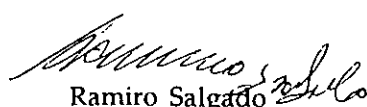
Date Started: 11/02/94

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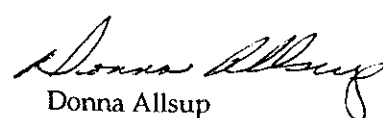
Project Name: Owens Financial

Project # 94-3949

Sample ID	Lab ID	Detection Limit	Method	Analyte	Results	Units mg/Kg
N.E. 13'6 Depth Pit	F22521	5.0	7420	Lead	6	
Discreet 20 yd Comp 3:25	F22522	5.0	7420	Lead	29	
Discreet 20 yd Comp 3:30	F22523	5.0	7420	Lead	8	
S.W. 13' Depth Pit	F22524	5.0	7420	Lead	ND	
Pump Island Depth 2'	F22525	5.0	7420	Lead	8	


Ramiro Salgado
Chemist

Certification # E757


Donna Allsup
Laboratory Director

LAB NO. F306-02

CHAIN OF CUSTODY AND ANALYSIS REQUEST

Section I

Consultant Name SEMCO
 Office Location 1741 Leslie Rd. San Mateo, CA 94402
 Fax No. (415) 572-9734
 Project Manager CHUCK ROPER
 Phone (415) 572 8033

TURN AROUND TIME
 (Circle One)
 Same Day
 24 Hrs
 48 Hrs
 72 Hrs
 5 Day

SEMCO ANALYTICAL
1051 SANJAS AVE
MODESTO, CA 95351

Send Coolers to: Modesto San Mateo
 Project No. / P.O. No. 04-3049 OWENS FINANCIAL Regulatory Agency ALAMEDA COUNTY (SUSAN HUNG)
 Sampler STEVEN R WADE / SEMCO

Section II

Analysis Request

Section III

Sample Information

Sample Identification	Matrix S=Soil A=Air W=Water	TPH - G & D	TPH - Low Level D	TPH - G	BTXE	O&G	8010	8240	Metals	Others * Subject to Subcontracting	Date	Time	Quantity	Containers		Bioremediation <input type="checkbox"/>	Contamination <input type="checkbox"/>	Sampling Remarks
														Prep.	Prog.			
1 NE. 13'6" DEPTH PIT S	S	X			X					TOTAL LEAD	11/01	3:15	1	ICE			F22521	
2 DISCREET 20yd Camp	S	X			X						11/01	3:25	1	"			F22522	
3 DISCREET 20yd Camp	S	X			X						11/01	3:30	1	"			F22523	
4 SW. 13' DEPTH PIT S	S	X			X						11/01	3:40	1	"			F22524	
5 RAMP ISLAND BERTH'S S	S	X			X						11/01	3:55	1	"			F22525	
6																		
7																		
8																		
9																		
10																		
11																		
12																		

Relinquished by <u>Steven R Wade</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 6:15 AM</u>	Organization <u>SEMCO</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 2:30 PM</u>	Organization <u>SEMCO</u>
Relinquished by <u>[Signature]</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 2:50 PM</u>	Organization <u>SEMCO</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 2:50 PM</u>	Organization <u>SEMCO</u>
Relinquished by <u>[Signature]</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 2:50 PM</u>	Organization <u>SEMCO</u>	Received by <u>[Signature]</u>	Date/Time <u>11/02/94 2:50 PM</u>	Organization <u>SEMCO</u>

Please Initial _____
 Samples Stored in Ios _____
 Appropriate Containers _____
 Samples Preserved _____
 VOA's without Headpace _____
 Comments _____

ENTIRE PROPERTY IS BORDERED BY A FENCE

36TH STREET

SIDEWALK

100'

90'

#5-PUMP ISLAND-
DEPTH-2'

#3-DISCRETE-20 YD-COMP

#2-DISCRETE-20 YD COMP

#1-N.E.-13'6" DEPTH-PIT

#4-S.W.-13' DEPTH PIT

SIDEWALK

ADELINE ST

S E M C O

N →

3623 ADELINE ST.
EMERYVILLE

NOT TO SCALE

Project Specialist (print) SUSAN L. HEDGO

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

80 SWAN WAY, ROOM 200

OAKLAND, CA 94621

PHONE NO. 415/271-4320

ACCEPTED

DEPARTMENT OF ENVIRONMENTAL HEALTH
470 27th Street, Third Floor
Oakland, CA 94612
Telephone: (415) 576-2037

There have been reviewed and found to be acceptable. It is recommended that the applicant comply with the following conditions to your plan, identified by the Department of Environmental Health and State and local health care agencies. A permit will not be issued for issuance of this permit until all conditions are met for issuance.

Contractors and employees involved with the project must be on the job and working at all times.

The Department of Environmental Health and local health care agencies will be notified of the project and the results of the inspection. The Department of Environmental Health will be notified of the results of the inspection.

Removal of Tank and Piping

Sampling

Final inspection

Issuance of a permit to operate is dependent on compliance with accepted plans and all applicable laws and regulations.

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS.

Please note change made on page 4 of 5

*Susan L. Hedgo
9/21/94*

UNDERGROUND TANK CLOSURE PLAN

*** Complete according to attached instructions ***

- Business Name Embassador Property
Business Owner Owens Financial Group, Inc.
 - Site Address 3623 Adeline Street
City Emeryville Zip 94608 Phone -
 - Mailing Address P.O. Box 2308
City Walnut Creek Zip 94595 Phone (510) 935-3840
 - Land Owner Owens Financial Group, Inc.
Address P.O. Box 2308 Walnut Creek City, State CA Zip 94595
 - Generator name under which tank will be manifested Owens Financial Group, Inc.
- EPA I.D. No. under which tank will be manifested CAC 000926640

6. Contractor SEMCO
Address 1741 Leslie Street
City San Mateo, CA 94402 Phone (415) 572-8033
License Type A.B. & C-61/D-40 ID# 449864 ✓
HAZ MAT

7. Consultant N/A
Address _____
City _____ Phone _____

8. Contact Person for Investigation
Name Chuck Kiper Title Vice-President
Phone (415) 572-8033

9. Number of tanks being closed under this plan 1
Length of piping being removed under this plan undetermined
Total number of tanks at facility 1

10. State Registered Hazardous Waste Transporters/Facilities (see instructions).

** Underground tanks are hazardous waste and must be handled **
as hazardous waste

a) Product/Residual Sludge/Rinsate Transporter

Name Allied Petroleum EPA I.D. No. CAL 000112314
Hauler License No. 1168 License Exp. Date 4/30/95
Address 1217 7TH Street
City Modesto State CA Zip 95351

b) Product/Residual Sludge/Rinsate Disposal Site

Name Refineriies Services EPA I.D. No. CAD083166728
Address 13331 West Highway 33
City Patterson State CA Zip 95363

c) Tank and Piping Transporter

Name RHT Trucking EPA I.D. No. CAL 000112413
Hauler License No. 2753 License Exp. Date 4/30/95
Address 1217 7TH Street
City Modesto State CA Zip 95351

d) Tank and Piping Disposal Site

Name Erickson EPA I.D. No. CAD009466392
Address 255 Parr Blvd.
City Richmond State CA Zip 94801

11. Experienced Sample Collector

Name Chuck Kiper
Company SEMCO
Address 1741 Leslie Street
City San Mateo State CA Zip 94402 Phone (415)572-8033

12. Laboratory

Name Superior Analytical
Address 1555 Burke Unit I
City San Francisco State CA Zip 94124
State Certification No. 1332 & 319

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

If yes, describe. _____

14. Describe methods to be used for rendering tank inert

High pressure hot water detergent wash.

20 lbs. per 1000 gallons dry ice.

Before tanks are pumped out and inerted, all associated piping must be flushed out into the tanks. All accessible associated piping must then be removed. Inaccessible piping must be plugged.

The Bay Area Air Quality Management District (771-6000), along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of explosion proof combustible gas meters to verify tank inertness. It is the contractor's responsibility to bring a working combustible gas meter on site to verify tank inertness.

15. Tank History and Sampling Information

Tank		Material to be sampled (tank contents, soil, ground-water, etc.)	Location and Depth of Samples
Capacity	Use History (see instructions)		
8000	Gasoline	soil/water if encountered	2 ft. below tank in native soil <i>One soil sample must be collected from each end of the tank no deeper than 2 ft into the native soil.</i>

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

* *Soil sample must be collected underneath the dispenser*
rev 12/90

Excavated/Stockpiled Soil	
<p>Stockpiled Soil Volume (Estimated)</p> <p>Anywhere from approx. 25 to 100 cy</p>	<p>Sampling Plan</p> <p>Soil samples taken from the tank excavation will be collected, placed in brass tubes, sealed with foil, Teflon caps, sealed with approved tape, placed on ice, transported to state certified lab under chain of custody and analyzed for constituents of tank.</p>

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

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.

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or Other Analysis Method Number	Method Detection Limit
<p>Unleaded Gas</p> <p><i>15</i></p>	<p>TPH G GCFID(5030)</p> <p>BTX&E 8020 or 8240</p> <p>TPH AND BTX&E 8260</p> <p><i>AA</i></p>	<p>TPH G</p> <p>BTX&E</p>	<p>GCFID(5030)</p> <p>602, 624 or 8260</p> <p><i>1. soil (100 ppm)</i></p> <p><i>air (50 ppb)</i></p> <p><i>soil (100 ppm)</i></p> <p><i>water (0.5 ppb)</i></p>

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

18. Submit Worker's Compensation Certificate copy

Name of Insurer GOLDEN EAGLE INSURANCE COMPANY

19. Submit Plot Plan (See Instructions)

20. Enclose Deposit (See Instructions)

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

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

I declare that to the best of my knowledge and belief 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 an approval from the Department of Environmental Health 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.

Signature of Contractor

Name (please type) Chuck Kiper

Signature *Chuck Kiper*

Date 9-7-94

Signature of Site Owner or Operator

X Name (please type) OWENS FINANCIAL GROUP, INC BY: SCOTT P. JARDE, VP

X Signature *Scott Jarde VP*

X Date 9-7-94

SEMCO
OCT 11 1994
RECEIVED

CITY OF EMERYVILLE
FIRE DEPARTMENT
6303 HOLLIS STREET
EMERYVILLE, CA., 94608
(510) 596-3750

FIRE DEPARTMENT
USE ONLY

94-106
(PERMIT NUMBER)

APPLICATION AND PERMIT

THIS APPLICATION IS YOUR PERMIT WHEN PROPERLY FILLED OUT,
SIGNED, VALIDATED AND FEES PAID.

ADDRESS: 1741 Leslie Street, San Mateo
BUSINESS NAME: SEMCO
CONTACT PERSON: Chuck Kiper
TELEPHONE NUMBER: (415) 572-8033

DESCRIPTION OF OPERATION: Remove 1-8000 gallon
underground gasoline tank at 3623
Adeline Street in Emeryville.

APPLICANT READ AND SIGN BELOW:

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT
THE INFORMATION GIVEN IS TRUE AND CORRECT. I AGREE TO
COMPLY WITH ALL LOCAL ORDINANCES AND STATE LAWS THAT
RELATE TO THIS PERMIT. I HEREBY AUTHORIZE REPRESENTATIVES
OF THE CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY TO
VERIFY COMPLIANCE WITH THE CONDITIONS OF THIS PERMIT, AT
ANY REASONABLE TIME.

Building Owner
 Business Operator: Semco Bonne Titus
Date of Application: _____

Application Received:
Date: 9/25/94 Signed: JW

Permit Issued:
Date: 10/6/94 Signed: JW

EFD Permit Type(s):
(see reverse)

Expiration Date:
6 mos. from issue date

TOTAL FEES DUE: 125.00

MAKE CHECK PAYABLE TO THE CITY
OF EMERYVILLE.

FEES ARE ESTABLISHED THRU THE
CITY OF EMERYVILLE MASTER FEE
SCHEDULE ADOPTED JUNE 1, 1993.
COPY AVAILABLE ON REQUEST.

Occupancy Group/Division:
(per UBC Table 5A)

OCCUPANCY TYPE:
Commercial Assembly
Industrial Educational
Residential H-class
Other Specify: _____

THIS PERMIT MUST BE AVAILABLE FOR INSPECTION AT ALL TIMES

REVOCAION OF PERMIT

THE CHIEF IS AUTHORIZED TO SUSPEND/REVOKE A PERMIT WHEN THE CHIEF HAS
DETERMINED THAT SECTION 4.107, 1991 UFC HAS BEEN VIOLATED.

POSTING OF PERMIT

PERMIT(S) SHALL BE KEPT ON THE PREMISES DESIGNATED AT ALL TIMES AND
SHALL BE AVAILABLE FOR INSPECTION AT ANY TIME BY ANY PERSON(S) WHO
ARE AUTHORIZED BY THE CHIEF OF THE EMERYVILLE FIRE DEPARTMENT.

DATE	INSPECTION NOTES/COMMENTS	INSPECTOR
10/6	permit issued (CK# 9670) EFD requires min. 48 hour notice	JW

white -env.health
 yellow -facillity
 pink -files

ALAMEDA COUNTY, DEPARTMENT OF ENVIRONMENTAL HEALTH
 Hazardous Materials Inspection Form

80 Swan Way, #200
 Oakland, CA 94621
 (415) 271-4320

II, III

II.A BUSINESS PLANS (Title 19)

- 1. Immediate Reporting 2703
- 2. Bus. Plan Stds. 25503(b)
- 3. RR Cars > 30 days 25503.7
- 4. Inventory Information 25504(a)
- 5. Inventory Complete 2730
- 6. Emergency Response 25504(b)
- 7. Training 25504(c)
- 8. Deficiency 25505(a)
- 9. Modification 25505(b)

II.B ACUTELY HAZ MATLS

- 10. Registration Form Filed 25533(a)
- 11. Form Complete 25533(b)
- 12. RMPP Contents 25534(c)
- 13. Implement Sch. Req'd? (Y/N)
- 14. OffSite Conseq. Assess. 25524(c)
- 15. Probable Rsk Assessment 25534(d)
- 16. Persons Responsible 25534(g)
- 17. Certification 25534(i)
- 18. Exemption Request? (Y/N) 25536(b)
- 19. Trade Secret Requested? 25538

III. UNDERGROUND TANKS (Title 23)

- | | |
|-------------------------------|---|
| General | <input type="checkbox"/> 1. Permit Application 25284 (H&S) |
| | <input type="checkbox"/> 2. Pipeline Leak Defection 25292 (H&S) |
| | <input type="checkbox"/> 3. Records Maintenance 2712 |
| | <input type="checkbox"/> 4. Release Report 2651 |
| | <input type="checkbox"/> 5. Closure Plans 2670 |
| | <input type="checkbox"/> 6. Method |
| | 1) Monthly Test |
| | 2) Daily Vadose |
| | Semi-annual groundwater |
| | One time soils |
| Monitoring for Existing Tanks | 3) Daily Vadose |
| | One time soils |
| | Annual tank test |
| | 4) Monthly Gndwater |
| | One time soils |
| | 5) Daily Inventory |
| | Annual tank testing |
| | Cont pipe leak det |
| | Vadose/gndwater mon. |
| | 6) Daily Inventory |
| Annual tank testing | |
| Cont pipe leak det | |
| 7) Weekly tank Gauge | |
| Annual tank tising | |
| 8) Annual Tank Testing | |
| Daily inventory | |
| 9) Other _____ | |
| New Tanks | <input type="checkbox"/> 7. Precs Tank Test 2643 |
| | Date: _____ |
| | <input type="checkbox"/> 8. Inventory Rec. 2644 |
| | <input type="checkbox"/> 9. Soil Testing . 2646 |
| | <input type="checkbox"/> 10. Ground Water. 2647 |
| | <input type="checkbox"/> 11. Monitor Plan 2632 |
| | <input type="checkbox"/> 12. Access. Secure 2634 |
| | <input type="checkbox"/> 13. Plans Submit 2711 |
| | Date: _____ |
| | <input type="checkbox"/> 14. As Built 2635 |
| Date: _____ | |

Site ID # _____ Site Name EMBASSADOR PROPERTIES Today's Date 11/1/94
 Site Address 3623 ADELINE STREET
 City Emeryville Zip 94608 Phone _____

MAX AMT stored > 500 lbs, 55 gal., 200 cft.?

Inspection Categories:

- I. Haz. Mat/Waste GENERATOR/TRANSPORTER
- II. Business Plans, Acute Hazardous Materials
- III. Underground Tanks

* Calif. Administration Code (CAC) or the Health & Safety Code (HS&C)

Comments: RHT - Tank's hauler # 438828 #1p. 4As

1 - 8,000 gallon, steel tank

LEL = 0 . O2 = 9%

George Warren - Fire Dept on site

- tank coated with tar. no obvious hole

- some rusting/pitting visible seams of tank end

- product stored in the tank - unknown

tank's manifest = # 92863873 ✓

Stockpiled soil characterized for re-use at site (1 sample / 2500 lbs)

On soil sample ^{collected} near tank head of the tank

(13 ft bags NE & 13 ft bags NW sample)

Analyze samples for TPHs, diesel, BTEX

& total lead

- soil appeared to be tight clay

- the soil sample collected underneath the

- Re-use of stockpiled soil must be approved by this office.

- Stockpiled soil must be covered with

visqueen & tank excavation must be secured.

II, III

Contact: _____

Title: _____

Signature: Steve White/GM

Inspector: _____

Signature: Susan L. Hugo

92863873
 IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA, CALL 1-800-852-7550
 GENERATOR
 FACILITY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. <i>C1A1C1D1D1D1Q1Z1W1W141D</i>		Manifest Document No. <i>61318713</i>		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address <i>Owens Financial Group PO BOX 308 Walnut Creek CA 94505</i>		4. Generator's Phone <i>(910) 935-3840</i>		6. US EPA ID Number		State ID No.		<i>92863873</i>	
5. Transporter 1 Company Name <i>RICH HAMILTON TRUCKING</i>		7. Transporter 2 Company Name		8. US EPA ID Number		EPA Transporter ID		<i>438823</i>	
9. Designated Facility Name and Site Address <i>ERICKSON, INC. 255 PARR BLVD. RICHMOND, CA 94801</i>		10. US EPA ID Number <i>C1A1D1D1D1Q1416161912</i>		EPA Facility ID		State Facility ID		<i>(209) 578-4100</i>	
11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity		14. Unit		15. Waste Number	
a. <i>WASTE EMPTY STORAGE TANK WM NON RCRA HAZARDOUS XXXX WASTE SXXX SOLID.</i>		No. <i>091</i> Type <i>T P</i>		<i>08900</i>		<i>P</i>		<i>512</i>	
b.								EPA/ONS	
c.								EPA/ONS	
d.								EPA/ONS	
16. Additional Descriptions for Materials Listed Above <i>QTY 1 EMPTY STORAGE TANK(S) #14816 TANK(S) HAVE BEEN INERTED WITH 15 LBS DRY ICE UPR 1000 GAL CAPACITY</i>		K. Handling Codes for Wastes Listed Above <i>01</i>							
15. Special Handling Instructions and Additional Information <i>KEEP AWAY FROM SOURCES OF IGNITION. ALWAYS WEAR HARD HATS WHEN WORKING AROUND U.S.T's 24 HR. CONTACT NAME Scott Barde & PHONE 910-935-3840 Site location: 3623 Adelina Street, Emeryville</i>									
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and international laws. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name <i>SCOTT P. BARDE</i>		Signature <i>[Signature]</i>		Month		Day		Year	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name <i>LARRY FARRIESSEN</i>		Signature <i>[Signature]</i>		Month <i>11</i>		Day <i>01</i>		Year <i>94</i>	
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature		Month		Day		Year	
19. Discrepancy Indication Space <i>16. DATE 11/01/94</i>									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Printed/Typed Name <i>DAVID SITO</i>		Signature <i>[Signature]</i>		Month <i>11</i>		Day <i>01</i>		Year <i>94</i>	

DO NOT WRITE BELOW THIS LINE.

SEMCO
NOV 29 1994

DAY OR NIGHT
TELEPHONE
(510) 235-1393

CERTIFICATE CERTIFIED SERVICES COMPANY

255 Parr Boulevard • Richmond, California 94801

NO. 20063

CUSTOMER
SEMCO - II
JOB NO.
064361

FOR: ERICKSON, INC. TANK NO. 14816

SEMCO
NOV 29 1994
received

LOCATION: RICHMOND DATE: 94/11/07 TIME: 08:06

TEST METHOD VISUAL GASTECH/1314 SMPN LAST PRODUCT LG

This is to certify that I have personally determined that this tank is in accordance with the American Petroleum Institute and have found the condition to be in accordance with its assigned designation. This certificate is based on conditions existing at the time the inspection herein set forth was completed and is issued subject to compliance with all qualifications and instructions.

TANK SIZE 8000 GALLON TANK CONDITION SAFE FOR FIRE

REMARKS: ~~OXYGEN 20.9% LOWER EXPLOSIVE LIMIT LESS THAN 0.1%~~
~~ERICKSON, INC. HEREBY CERTIFIES THAT THE ABOVE NUMBERED TANK HAS BEEN CUT OPEN, PROCESSED, AND THEREFORE DESTROYED AT OUR PERMITTED HAZARDOUS WASTE FACILITY.~~
~~ERICKSON, INC. HAS THE APPROPRIATE PERMITS FOR, AND HAS ACCEPTED THE TANK SHIPPED TO US FOR PROCESSING.~~

In the event of any physical or atmospheric changes affecting the gas-free conditions of the above tanks, or if in any doubt, immediately stop all hot work and contact the undersigned. This permit is valid for 24 hours if no physical or atmospheric changes occur.

STANDARD SAFETY DESIGNATION

SAFE FOR MEN: Means that in the compartment or space so designated (a) The oxygen content of the atmosphere is at least 19.5 percent by volume; and that (b) Toxic materials in the atmosphere are within permissible concentrations; and (c) In the judgment of the Inspector, the residues are not capable of producing toxic materials under existing atmospheric conditions while maintained as directed on the Inspector's certificate.

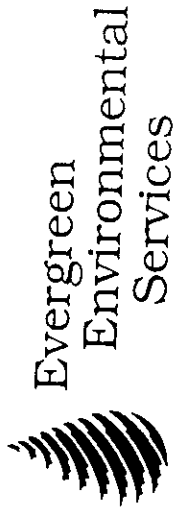
SAFE FOR FIRE: Means that in the compartment so designated (a) The concentration of flammable materials in the atmosphere is below 10 percent of the lower explosive limit; and that (b) In the judgment of the Inspector, the residues are not capable of producing a higher concentration that permitted under existing atmospheric conditions in the presence of fire and while maintained as directed on the Inspector's certificate, and further, (c) All adjacent spaces have either been cleaned sufficiently to prevent the spread of fire, are satisfactorily inerted, or in the case of fuel tanks, have been treated as deemed necessary by the Inspector.

The undersigned representative acknowledges receipt of this certificate and understands the conditions and limitations under which it was issued.

[Signature]
REPRESENTATIVE

TITLE

[Signature]
INSPECTOR



6880 Smith Ave., Newark, CA 94560
 (800) 972-5284 EPA ID# CAD 980695761

A DIVISION OF CALIFORNIA OIL RECYCLERS, INC.
Bill of Lading / Invoice
 396720

Send payment to:
 Evergreen
 P.O. Box 45987
 San Francisco, CA 94145

CUSTOMER NAME: Owen's Finance Group ADDRESS: 3623 ADELIXE ST CITY: Emeryville CA 94 STATE: CO ZIP: CO		BILLING INFORMATION NAME: SEMCO ADDRESS: 1741 LESLIE ST CITY: S. MARCO CA 94010 STATE: CA ZIP: 00		DATE: 11-14-94 CASH <input type="checkbox"/> CHECK # 394-3949 CUSTOMER NO. 3945 PHONE NO. (510) 522-8033
PRODUCT USED OIL, NON-RCRA HAZARDOUS WASTE LIQUID NON-RCRA HAZARDOUS WASTE LIQUID (AUTOMOTIVE ANTIFREEZE) (OIL & WATER) ASTE PETROLEUM OIL COMBUSTIBLE LIQUID UN1270 III		MANIFEST # 92859957 GALLONS 55	PRICE AMOUNT	TOTAL CHARGES
TEST PASS <input type="checkbox"/> FAIL <input type="checkbox"/> PPM		CRUSHED <input type="checkbox"/> UNCRUSHED <input type="checkbox"/> EMPTY <input type="checkbox"/>		
OTHER:		CRUSHED <input type="checkbox"/> UNCRUSHED <input type="checkbox"/> EMPTY <input type="checkbox"/>		
<input type="checkbox"/> Collection Station <input type="checkbox"/> Agricultural Source <input type="checkbox"/> Industrial Source		<input type="checkbox"/> Government Source <input type="checkbox"/> Marine Source		

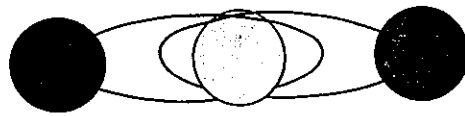
I certify that the information and amounts shown above are true and correct and that the used oil provided to Evergreen Environmental Services meets the definition of used oil pursuant to California Health & Safety Code, Section 25260.1, unless otherwise noted. This further serves as notification that the above waste is banned from land disposal pursuant to Section 66268.7(1) of Title 22. I also acknowledge that I have read and agree to the terms and conditions set forth on the reverse side of this form.

TSDF: EVERGREEN OIL, INC. (510) 795-4400
 6880 Smith Avenue EPA ID# CAD 980887418
 Newark, California 94560

PLEASE PAY FROM THIS INVOICE

DRIVER: *[Signature]* ROUTE # 8
 DRIVER SIGNATURE

[Signature]
 GENERATOR'S SIGNATURE



Abel Carbonic

CUSTOMER NUMBER	PURCHASE ORDER NO.	DATE	DELIVERY NUMBER
Owens Financial OAKLAND		11/1/94	9-934886
BY ACCEPTING THIS ORDER, CUSTOMER AGREES TO ALL OF THE TERMS AND CONDITIONS SET FORTH HEREIN, INCLUDING THOSE PRINTED ON THE REVERSE SIDE.			
NAME		ACCEPTED BY:	
SEMCO		Randy	
SHIPPED TO			
20 SOLID	21 HALF	22 SLICES	23 ROCKS
UNIT	DESCRIPTION	24 AIRPORT	29 WET ICE
10	DRY ICE ORM-A	UN1845	CODE
	PELLETS		23
			500

JOB SITE SURVEY - EVALUATION

1) UTILITIES

a) Underground

1: Is area marked for USA: YES: NO: _____
2: Are utilities marked: YES: NO: _____

b) Utilities overhead

1: Are any present: YES: NO: _____
2: Will ay affect work: YES: NO: _____
3: If any- define: ONLY CRANE FROM CURB OR 10 WHEELER

2) TRAFFIC PATTERN

a) Excavated soils impact: YES: _____ NO:
1: If yes, is alternate area available, if so, describe: _____

b) Imported Backfill impact: YES: NO: _____
1: If yes describe alternate area available: NA

3) TRUCK ACCESS

a) 10 wheel dump: _____
b) 18 wheel dump: _____
c) Transfer Dump: _____ } From St.

4) RAINY WEATHER CONDITION

a) Are downspouts, gutters, etc., in area of excavation
YES: _____ NO:
If yes, describe method of diversion: _____

b) Gutter, curblin intrusion: YES: _____ NO:
If yes, describe method of diversion: _____

c) Surface runoff or sheetflow: YES: _____ NO:
If yes, describe method of diversion: _____

5) IF CONTAMINATION IS PRESENT, DETERMINE GROUNDWATER DEPTH:

a) Any nearby creeks, canals or sloughs: YES: _____ NO:
If yes, describe where in relation to work and approximate depth to H2O: _____

b) Ground water monitoring wells on neighboring properties:
YES: _____ NO: 35th
If yes, what is the street address and facility name: _____

c) Is there a private well on subject property: YES _____ NO
If yes, give exact location of well: _____

6) SOIL CONSISTENCY

a) Clayey: YES NO _____
b) Sand: YES NO _____ Backfill
c) Silty sand: YES _____ NO _____
d) Bay mud: YES _____ NO _____
e) Rocky: YES _____ NO _____
f) Describe any or other soil conditions: _____

DAILY SAFETY BRIEFING REPORT

PROJECT # 94-3949 DATE 11/01/94 TIME 8:15 AM
PROJECT NAME Owens Financial Group, Inc.
PROJECT LOCATION PO Box 308 / 3023 Adeline St Emeryville
CLIENT/ADDRESS Walnut Creek
PROJECT ACTIVITY Tank Removal

SAFETY TOPICS

CHEMICAL HAZARDS: Benzene, Toluene, Xylene, Ethyl Benzene, Freon, Diesel, Waste Oil, Petroleum Hydrocarbons.

PHYSICAL HAZARDS: Open excavation, debris piles, exposed piping, cave-ins, moving equipment, electrical shock.

RESPIRATORY PROTECTIVE EQUIPMENT: Half-face respirator with organic vapor cartridges if necessary.

SAFETY/PERSONAL PROTECTIVE EQUIPMENT/CLOTHING: (List specifically for each activity) - Hard hats, steel toe shoes, safety glasses, uniform shirt, protective gloves.

SPECIFIC INSTRUCTIONS: No smoking, eating, drinking, or chewing within 25' of the excavation, wash hands before doing any of the above.

HOSPITAL/CLINIC Alta Bates Hospital PHONE 510 940 0337

HOSPITAL ADDRESS 3001 Colby Street, Berkeley

PARAMEDIC 911 FIRE DEPT. 911 POLICE 911

EMERGENCY PROCEDURES: Treat minor injuries on site, transport victim to hospital if necessary.

ATTENDEES

NAME (Please Print)

NAME (Signature)

STEVEN RUWAD
[Signature]

[Signature]
[Signature]

MEETING CONDUCTED BY Steven Ruwad

SUPERVISOR CHUCK KIPER