

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 AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25190.7 OF THE HEALTH AND SAFETY CODE.
REPORT DATE 10/3/2008	CASE # 202993	SIGNED <i>[Signature]</i> DATE 2/20/09

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT David Lambert	PHONE (972) 437-4100	SIGNATURE <i>[Signature]</i>
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OWNER/OPERATOR <input checked="" type="checkbox"/> OTHER	COMPANY OR AGENCY NAME ADR Environmental Group, Inc.	
	ADDRESS 1760 Creekside Oaks Drive, Ste. 120 Sacramento CA 95833 STREET CITY STATE ZIP		

RESPONSIBLE PARTY	NAME Stockridge/BHV Emerald Place Land Co., LLC <input type="checkbox"/>	CONTACT PERSON L. Gerald Hunt	PHONE (925) 314-2700
	ADDRESS 390 Rialroad Avenue, Ste. 200 Danville CA 94526 STREET CITY STATE ZIP		

SITE LOCATION	FACILITY NAME (IF APPLICABLE) Future Green on Park Place	OPERATOR NA	PHONE ()
	ADDRESS APN 986-0033-002 Dublin Alameda 94568 STREET CITY COUNTY ZIP		
	CROSS STREET SEC Martinelli Way & Arnold Road		

IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Dep't of Environmental Health	PHONE (510) 567-6781
	REGIONAL BOARD SAN FRANCISCO BAY REGIONAL WATER QUALITY CONTROL BOARD	PHONE (510) 622-2342

SUBSTANCES INVOLVED	(1) NAME Hydrocarbons	QUANTITY LOST (GALLONS) <input checked="" type="checkbox"/> Unknown
	(2)	<input type="checkbox"/> Unknown

DISCOVERY/ABATEMENT	DATE DISCOVERED 10/2/2008	HOW DISCOVERED <input type="checkbox"/> Tank Test <input checked="" type="checkbox"/> Tank Removal <input type="checkbox"/> Nuisance Conditions <input type="checkbox"/> Inventory Control <input type="checkbox"/> Subsurface Monitoring <input type="checkbox"/> Other
	DATE DISCHARGE BEGAN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <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
	HAS DISCHARGE BEEN STOPPED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF YES, DATE 10/2/2008	<input checked="" type="checkbox"/> UNKNOWN

SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> Tank Leak <input type="checkbox"/> Piping Leak <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Other	CAUSE(S) <input type="checkbox"/> Overfill <input type="checkbox"/> Corrosion <input type="checkbox"/> Rupture/Failure <input checked="" type="checkbox"/> Unknown <input type="checkbox"/> Spill <input type="checkbox"/> Other
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CASE TYPE	CHECK ONE ONLY <input checked="" type="checkbox"/> Undetermined <input type="checkbox"/> Soil Only <input type="checkbox"/> Groundwater <input type="checkbox"/> Drinking Water - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)
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CURRENT STATUS	CHECK ONE ONLY <input type="checkbox"/> No Action Taken <input checked="" type="checkbox"/> Leak Being Confirmed <input type="checkbox"/> Remediation Plan <input type="checkbox"/> Preliminary Site Assessment Workplan Submitted <input type="checkbox"/> Preliminary Site Assessment Underway <input type="checkbox"/> Case Closed (Cleanup Completed or Unnecessary) <input type="checkbox"/> Pollution Characterization <input type="checkbox"/> Post Cleanup Monitoring in Progress <input type="checkbox"/> Cleanup Underway
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REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) <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)
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COMMENTS	Hydrocarbon odor and staining encountered during removal of UST. Source of leak not apparent.
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