

90 NOV 21 PM 12: 54

THE ENVIRONMENTAL CONSTRUCTION CO.

259 Kinney Drive
San Jose, Ca. 95112-4433

DATE 26 March 1990.

Mr. Paul Baca

~~Hickson's Auto Repair~~

~~1111 San Pablo Ave.~~

~~Albany, Ca. 94706~~

SUBJECT: UNDERGROUND TANK REMOVAL
1111 San Pablo Ave.
Albany, Ca. 94706

Dear Mr. Paul Baca

On February 27, 1990 THE ENVIRONMENTAL CONSTRUCTION CO. removed one underground storage tank from the subject property located at 1111 San Pablo Avenue. The scope of the work included: completion and submission of the tank closure permits as required by the Albany Fire Department; providing for the excavation and removal of the tank and known piping; performing the inspection of the tank and piping; collection of the appropriate samples from the excavation; and providing for the proper disposal of the tank. This report will summarize the history of the tank, the procedures and results of the inspection, subsurface sampling method, and laboratory testing results.

TANK HISTORY AND CONTENTS:

It is the understanding of THE ENVIRONMENTAL CONSTRUCTION CO. that the age of the subject tank and piping is unknown, and that no known as-built plans exist. Prior to the excavation, it was reported by you to be made of steel with a 550-gallon capacity, and that it contained waste oil.

TANK AND PIPING REMOVAL: (FIELD OBSERVATIONS)

On February 27, 1990 the tank was exposed for excavation. Mr. Larry Seto of the County of Alameda was present to witness the excavation and removal of the tank, piping, backfill material, and the sampling procedures. Prior to the removal of the tank approximately 50 pounds of dry ice was added to the tank to purge them of all volatile gases. Once the tanks were inert, Mr. Seto granted permission to excavate and remove the tank. During the removal of the tank, THE ENVIRONMENTAL CONSTRUCTION CO. personnel observed no free product in the excavation nor did the backfill material appear to be stained. Upon removal of the tank, it was found that there was no evidence of leakage.

The backfill material continued down to an approximate depth of 8 feet below surface grade in pit area. At this point excavation was stopped.

On February 27, 1990 the piping associated with the tank was exposed for excavation. Excavation of the product-line piping revealed no straining of the backfill material. Visual inspection revealed that the piping appeared to be intact with no obvious evidence of holes.

The tank and removed piping were transported by a state licensed hazardous waste hauler, H&H Ship Service, and taken to Levin Metal Corporation located in Richmond, California, to be recycled (See attachment 3).

SAMPLING AND LABORATORY RESULTS:

As per instruction of Larry Seto, on February 27, 1990, **THE ENVIRONMENTAL CONSTRUCTION CO.** recovered 1 soil sample approximately 8 feet below surface grade in native soil sample method used was the grab sample method. A clean 6-inch by 2 1/2-inch brass tube was driven into a bucket of material recovered by a backhoe. The soil samples were designated as SS-I, Immediately upon the recovery of the samples, the ends of the brass tube were sealed with aluminum foil and plastic caps, which were in turn secured with aluminized tape and then the samples were placed in ice for transport to Anametrix Inc. 1961 Concourse Drive, Suit E, San Jose, California 95131. As per request the laboratory analysis are to test for Total Petroleum Hydrocarbon (TPH) and Benzene, Ethyl Benzene, Toluene, and Xylene (BTEX) Total Oil and Grease (TOG) as shown in Appendix 4.

The results of the laboratory analysis are shown in attachment 4 of this report. All samples are below the reporting limits.

THE ENVIRONMENTAL CONSTRUCTION CO. is pleased to have been of service to you on this project. To comply with State and local environmental laws, **THE ENVIRONMENTAL CONSTRUCTION CO.** recommends that a copy of this report be sent to the Albany Fire Department The Alameda County Environmental Health, Regional Water Quality Board, located in Oakland California, as soon as possible. If you have any questions, please feel free to give me a call at (408) 997-1505.

Sincerely yours,

Robert J. Whitman
President, **THE ENVIRONMENTAL CONSTRUCTION Co.**

The Environmental Construction Company

... WORKING TOWARDS A CLEANER ENVIRONMENT

Job name: Nicksons Auto Repair

November 25, 1989

Thank you,

Very truly yours,

THE ENVIRONMENTAL CONSTRUCTION CO.

Robert J. Whitman
President, **THE ENVIRONMENTAL CONSTRUCTION CO.**

- Attachments:
1. Site Map
 2. Closure permits
 3. Hazardous waste manifest
for the tank, piping,
and product.
 4. Laboratory results and
chain of custody.

Copies: Addressee (3)

Job # 191

(N) →

#1111 San Pablo Ave

NICLSON'S
AUTO Repair
Albany, CALIF

↑
~ 100 yds
↓

Parking Lot

Repair Bay

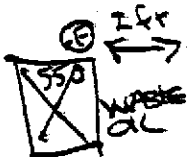
Office PAUL
BACA

Repair Shop

SKED ↓

Steel

lines
PVC



Exit

WASTE
AL

Generator

Flare line

Job # 191

Site MAP

NICLSON'S Auto Repair
1111 San Pablo Ave
Albany, Ca. 94706

JOB# 191

Fee # 333.00

(1) tank

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

80 SWAN WAY, ROOM 200
OAKLAND, CA 94621
PHONE NO. 415/274-4320

Per Pull -
Feb 27, 1990
Tue @ 2:00pm

365661
333
2/19/90

ACCEPTED

DEPARTMENT OF ENVIRONMENTAL HEALTH
470 - 27th Street, Third Floor
Oakland, CA 94612
Telephone: (415) 556-7237

These plans have been reviewed and found to be acceptable and essentially meet the requirements of State and local health laws. Changes to our laws indicated by this Department are to occur in compliance with State and local laws. The project proposed health is now released for issuance of any required building permits for construction.

One copy of these corrected plans must be on the job and available to all contractors and craftsmen involved with the removal.

All changes or alterations of these plans and specifications must be submitted to the Department and to the Fire and Building departments. They must be determined such changes meet the requirements of State and local laws. Notify this Department at least 48 hours prior to the following required inspections:

- _____ Removal of Tank and Piping
- _____ Sampling
- _____ Final Inspection

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

THERE IS A FINANCIAL PENALTY FOR NON-COMPLIANCE WITH THESE INSPECTIONS.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

1. Business Name NICKSON'S AUTO REPAIR
Business owner MR. PAUL BACA
2. Site Address 1111 SAN PABLO AVENUE
city ALBANY, CA. zip 94706 phone (415) 526-2737
3. Mailing Address SAME AS ABOVE
city _____ zip _____ phone _____
4. Land owner MR PAUL BACA
Address 1111 SAN PABLO AVE. city, state SAN PABLO, CA. zip 94706
5. EPA I.D. No. CAC000246097
6. Contractor THE ENVIRONMENTAL CONSTRUCTION COMPANY
Address 259 KINNEY DRIVE
city SAN JOSE, CA. 95112-4433 phone (408) 997-1505
license type C61/D40 ID# #578789
7. consultant NA Groundwater Tech
Address 4080 - C Pike Ln
city Concord phone 415-685-2852

Per Jackie Miller
2-21-90

8. contact person for investigation

Name MR. ROBERT J. WILLMAN title PRESIDENT/OWNER

Phone (408) 997-1505

9. total No. of tanks at facility (1) 550 gal.

10. Have permit applications for all tanks been submitted to this office? Yes No

11. state registered hazardous waste transporters/facilities

a) product/waste transporter

Name H & H SHIP SERVICE EPA ID# No: CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA zip 94107

b) rinseate transporter

Name H & H SHIP SERVICE EPA ID# No: CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA zip 94107

c) tank transporter

Name H & H SHIP SERVICE EPA ID# No: CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA zip 94107

d) tank disposal site

Name H & H SHIP SERVICE EPA ID# No: CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA zip 94107

e) contaminated soil transporter

Name R. BAUERLE TRUCKING EPA ID# No: CA0980585780

Address 1468 OAK CANYON PLACE

city SAN JOSE, state CA zip 95120

Robert Whitman

12. Sample collector

Name ~~ROBERT J. WHITMAN (TECC)~~ ... Groundwater Tech. } for Sophia Miller 4/1/90
Company THE ENVIRONMENTAL CONSTRUCTION COMPANY - (TECC)
Address 259 KINNEY DRIVE 4080 - C Pike Ln
City SAN JOSE, Concord state CA. zip 95112-4433 phone (408) 997-1505

13. Sampling information for each tank or area

Tank or Area		Material sampled	Location & depth
Capacity	Historic Contents (past 5 years)		
(1) 550 gal.	15 years old-waste oil.	soil + ground water if present	At backfill/native soil interface into two feet of the native soil.

14. Have tanks or pipes leaked in the past? Yes () No (X)
if yes, describe. _____

15. NFPA methods used for rendering tank inert? Yes (X) No ()
if yes, describe: 1.5 lbs. DRY ICE per 100 gal. capacity.

An explosion proof combustible gas meter shall be used to verify tank inertness. GASTECH METER - MODEL NO. #1314.

16. Laboratories

Name (GTEL) GROUNDWATER TECHNOLOGY ENVIRONMENTAL LABORATORY
Address 4080-G PIKE LANE
City CONCORD, State CA. Zip 94520
State certification No. #194

17. Chemical Methods to be used for Analyzing Samples

Contaminant Sought	EPA, DMS, or Other Sample Preparation Method Number	EPA, DMS, or other Analysis Number
TPH TOG VOC		

18. Submit site safety plan

19. Workman's compensation: yes [x] No []

 copy of certificate enclosed? yes [x] No []

 Name of insurer SUPERIOR NATIONAL INSURANCE CO.

20. Plot plan submitted? yes [X] No []

21. Deposit enclosed? Yes [X] No []

22. Please forward to this office the following information within 60 days after receipt of sample results:

a) Chain of custody sheets

b) Original signed Laboratory Reports

c) TSD to generator copies of wastes shipped and received

d) Attachment A summarizing laboratory results


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.

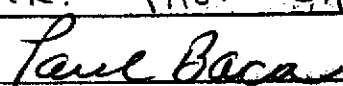
i understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel and safety.

i will notify the Department of Environmental Health at least two (2) working days (48 hours) after approval of this closure plan in advance to schedule any required inspections. 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.

Signature of contractor

Name (please type) Mr. Robert J. Whitman - President/owner
Signature 
date February 5, 1990

Signature of site owner or operator

Name (please type) MR. PAUL BACA
Signature 
date 2/9/90

**HAZARDOUS WASTE MANIFEST
FOR THE
TANK, PIPING, AND PRODUCT
CERTIFICATE OF DISPOSAL**

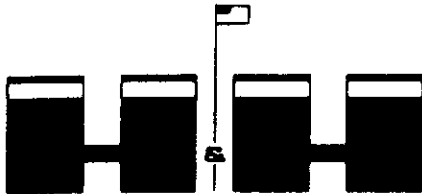
Please print or type. (Form designed for use on elite 12-pitch typewriter).

90008095
 IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-952-7333
 Job #3622

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A C 0 0 0 2 4 6 0 9 7 0 0 0 0 1		Manifest Document No. 1		2. Page 1 of 1		Information in the shaded areas is not required by Federal law.					
3. Generator's Name and Mailing Address NICKSONS AUTO REPAIR 1111 San Pablo Avenue, Albany, CA 94706						A. State Manifest Document Number 90008095							
4. Generator's Phone (415) 526-2737						B. State Generator's ID							
5. Transporter 1 Company Name H & H Ship Service Company			6. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8			C. State Transporter's ID 103589		D. Transporter's Phone (415) 543-4835					
7. Transporter 2 Company Name						8. US EPA ID Number		E. State Transporter's ID					
9. Designated Facility Name and Site Address H & H Ship Service Company 220 China Basin Street San Francisco, CA 94107						10. US EPA ID Number C A D 0 0 4 7 7 1 1 6 8			G. State Facility's ID C A D 0 0 4 7 7 1 1 6 8				
						H. Facility's Phone (415) 543-4835							
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity		14. Unit		1. Waste No.	
a. RESIDUE WASTE OIL TANK (CALIFORNIA ONLY REGULATED WASTE) b. c. d.						No.		Type				State 512	
						0 0 1		T P		0 0 5 5 0 P		EPA/Other	
												State	
												EPA/Other	
												State	
J. Additional Descriptions for Materials Listed Above PUMPED OUT 550 gallon tank last containing waste oil. Tank inerted with dry ice for transport.						K. Handling Codes for Wastes Listed Above							
						a. 01		b.					
15. Special Handling Instructions and Additional Information APPROPRIATE PROTECTIVE CLOTHING AND RESPIRATOR.													
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this 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 international and national government regulations. 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 PAUL BAENA			Signature <i>Paul Baena</i>			Month Day Year 0 2 2 7 9 0							
17. Transporter 1 Acknowledgement of Receipt of Materials													
Printed/Typed Name ROBERT V. PETRUCCI			Signature <i>Robert V. Petrucci</i>			Month Day Year 0 2 2 7 9 0							
18. Transporter 2 Acknowledgement of Receipt of Materials													
Printed/Typed Name			Signature			Month Day Year							
19. Discrepancy Indication Space													
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.													
Printed/Typed Name Cleveland Valdez			Signature <i>Cleveland Valdez</i>			Month Day Year 0 2 2 7 9 0							

Do Not Write Below This Line

White: TDS SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Sacramento, CA 95812



ENVIRONMENTAL SERVICES
(DIVISION OF H&H SHIP SERVICE CO., INC.)

CERTIFICATE OF DISPOSAL

MARCH 2, 1990

H & H Ship Service Company hereby certifies to **THE ENVIRONMENTAL CONSTRUCTION**
that: -----

1. The storage tank(s), size(s) **ONE (1) 550 GALS.**

removed from the **NICKSONS AUTO REPAIR**

facility at **1111 SAN PABLO AVENUE**

ALBANY, CALIFORNIA

were transported to H & H Ship Service Company, 220 China Basin St., San Francisco, California 94107.

2. The following tank(s), H & H Job Number **3620**

have been steamed cleaned, cut with approximately 2' X 2' holes, rendered harmless and disposed of as scrap metal.
3. Disposal site: **LEVIN METALS CORPORATION, RICHMOND, CALIFORNIA.**

4. The foregoing method of destruction/disposal is suitable for the materials involved, and fully complies with all applicable regulatory and permit requirements.
5. Should you require further information, please call (415) 543-4835.

Very Truly Yours,


Cleveland Valrey
Operations Coordinator

220 CHINA BASIN, SAN FRANCISCO, CA 94107 • DAY AND NIGHT: 543-4835



**LABORATORY RESULTS
AND
CHAIN OF CUSTODY**

ANAMETRIX INC

Environmental & Analytical Chemistry
1961 Concourse Drive, Suite E, San Jose, CA 95131
(408) 432-8192 • Fax (408) 432-8198



REPORT

Mack Baker
The Environmental Construction Co.
259 Kinney Drive
San Jose, CA 95112-4433

March 14, 1990
Anamatrix W.O.#: 9003036
Date Received : 03/02/90
Project Number : 191

Dear Mr. Baker:

Your samples have been received for analysis. The REPORT SUMMARY lists your sample identifications and the analytical methods you requested. The following sections are included in this report: RESULTS and QUALITY ASSURANCE.

NOTE: Amounts reported are net values, i.e. corrected for method blank contamination.

If there is any more that we can do, please give us a call. Thank you for using ANAMETRIX, INC.

Sincerely,



Terry Cooke
TPH Supervisor

TC/dm

REPORT SUMMARY
ANAMETRIX, INC. (408) 432-8192

Client	: The Environmental Construction Co.	Anametrix W.O.#:	9003036
Address	: 259 Kinney Drive	Date Received	: 03/02/90
		Purchase Order#:	N/A
City	: San Jose, CA 95112-4433	Project No.	: 191
Attn.	: Mack Baker	Date Released	: 03/14/90

Anametrix I.D.	Sample I.D.	Matrix	Date Sampled	Method	Date Extract	Date Analyzed	Inst I.D.
RESULTS							
9003036-01	SS-1	SOIL	02/28/90	TPH	03/10/90	03/12/90	N/A
QUALITY ASSURANCE (QA)							
9003036-01	SS-1	SOIL	02/28/90	SPIKE	03/10/90	03/12/90	N/A

ANALYSIS DATA SHEET - PETROLEUM HYDROCARBON COMPOUNDS
ANAMETRIX, INC. (408) 432-8192

Sample I.D. : 191 SS-1
 Matrix : SOIL
 Date sampled : 02/28/90
 Date anl.BTEX: 03/12/90
 Date ext.TPHd: N/A
 Date anl.TPHd: N/A

Anamatrix I.D. : 9003036-01
 Analyst : CB
 Supervisor : TC
 Date released : 03/14/90
 Date ext. TOG : 03/10/90
 Date anl. TOG : 03/10/90

CAS #	Compound Name	Reporting Limit (ug/kg)	Amount Found (ug/kg)
71-43-2	Benzene	5	ND
108-88-3	Toluene	5	ND
100-41-4	Ethylbenzene	5	ND
1330-20-7	Total Xylenes	5	ND
	Total Oil & Grease	30000	ND

ND - Not detected at or above the practical quantitation limit for the method.

TOG - Total Oil & Grease is determined by Standard Method 503E.

BTEX - Benzene, Toluene, Ethylbenzene, and Total Xylenes are determined by modified EPA 8020.

All testing procedures follow California Department of Health Services (Cal-DHS) approved methods.

BTEX MATRIX SPIKE REPORT
 EPA METHOD 5030 WITH GC/PID
 ANAMETRIX, INC. (408) 432-8192

Sample I.D. : 191 SS-1
 Matrix : SOIL
 Date Sampled : 02-28-90
 Date Analyzed : 03-12-90

Anametrix I.D.: 9003036-01
 Analyst : CB
 Supervisor : TC
 Date Released : 03-14-90

COMPOUND	SPIKE AMT. (ug/Kg)	MS (ug/Kg)	REC MS	MSD (ug/Kg)	REC MSD	RPD	%REC LIMITS
Benzene	10	10	100%	11	110%	10%	50-150
Toluene	10	10	100%	10	100%	0%	50-150
Ethylbenzene	10	10	100%	11	110%	10%	50-150
M+P-Xylenes	6.7	6.4	96%	6.9	103%	8%	50-150
O-Xylene	3.3	3.2	97%	3.2	97%	0%	50-150

Fee # 333.00
(1) tank

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

2/21/90
Please refer to address
ACCEPTED on 2/23/90 #15417
C.R.

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION

Underground Storage Tanks (USTs) are subject to the following requirements:
1. All USTs must be installed in accordance with the following specifications:
a. USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
b. USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
c. USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
2. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
3. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
4. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
5. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
6. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
7. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
8. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
9. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.
10. All USTs must be installed in a concrete or steel tank with a minimum thickness of 1/2 inch.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

1. Business Name NICKSON'S AUTO REPAIR
Business Owner MR. PAUL BACA
2. Site Address 1111 SAN PABLO AVENUE
city ALBANY, CA. zip 94706 phone (415) 526-2737
3. Mailing Address SAME AS ABOVE
city _____ zip _____ phone _____
4. Land owner MR PAUL BACA
Address 1111 SAN PABLO AVE. city, state SAN PABLO, CA. zip 94706
5. EPA I.D. No. CAC000246097
6. Contractor THE ENVIRONMENTAL CONSTRUCTION COMPANY
Address 259 KINNEY DRIVE
city SAN JOSE, CA. zip 95112-4433 phone (408) 997-1505
license type C61/D40 id# #578789
7. consultant N/A
Address _____
city _____ phone _____

8. contact person for investigation

Name MR. ROBERT J. WILLMAN title PRESIDENT/OWNER

phone (408) 997-1505

9. total No. of tanks at facility (1) 550 gal.

10. Have permit applications for all tanks been submitted to this office? Yes No

11. state registered hazardous waste transporters/facilities

a) product/waste transporter

Name H & H SHIP SERVICE EPA I.D. No. CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA, zip 94107

b) rinseate transporter

Name H & H SHIP SERVICE EPA I.D. No. CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA, zip 94107

c) tank transporter

Name H & H SHIP SERVICE EPA I.D. No. CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA, zip 94107

d) tank disposal site

Name H & H SHIP SERVICE EPA I.D. No. CA00004771168

Address 220 CHINA BASIN

city SAN FRANCISCO, state CA, zip 94107

e) contaminated soil transporter

Name R. BAUERLE TRUCKING EPA I.D. No. CA0980585780

Address 1468 OAK CANYON PLACE

city SAN JOSE, state CA, zip 95120

12. Sample collector

Name ROBERT J. WHITMAN - (TECC)
 company THE ENVIRONMENTAL CONSTRUCTION COMPANY - (TECC)
 Address 259 KINNEY DRIVE
 city SAN JOSE, state CA. zip 95112-4435 phone (408) 997-1505

13. Sampling information for each tank or area

Tank or Area		Material sampled	Location & depth
Capacity	Historic Contents (past 5 years)		
(1) 550 gal.	15 years old-waste oil.	soil & groundwater if present	At soil/backfill interface about 2' of the native soil

14. Have tanks or pipes leaked in the past? Yes () No (X)

if yes, describe. _____

15. NFPA methods used for rendering tank inert? Yes (X) No ()

if yes, describe. 1.5 lbs. DRY ICE per 100 gal. capacity.

An explosion proof combustible gas meter shall be used to verify tank inertness. GASTECH METER - MODEL NO. #1314.

16. Laboratories

Name (GTCL) GROUNDWATER TECHNOLOGY ENVIRONMENTAL LABORATORY
 Address 4080-G PIKE LANE
 city CONCORD, state CA. zip 94520
 state certification No. #194

17. Chemical Methods to be used for Analyzing Samples

Contaminant Sought	EPA, DHS, or Other Sample Preparation Method Number	EPA, DHS, or other Analysis Number
TPH TOG VOC		

18. Submit Site Safety Plan

19. Workman's Compensation: Yes [X] No []

Copy of certificate enclosed? Yes [X] No []

Name of insurer SUPERIOR NATIONAL INSURANCE CO.

20. Plot Plan submitted? Yes [X] No []

21. Deposit enclosed? Yes [X] No []

22. Please forward to this office the following information within 60 days after receipt of sample results:

- a) Chain of custody sheets
- b) Original signed Laboratory Reports
- c) TSD to generator copies of wastes shipped and received
- d) Attachment A summarizing laboratory results

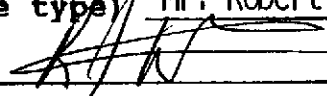
I declare that to the best of my knowledge and belief the statements and information provided above are correct and true. I understand that information in addition to that provided above may be needed in order to obtain an approval from the Department of Environmental Health and that no work is to begin 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 and safety.

I will notify the Department of Environmental Health at least two (2) working days (48 hours) after approval of this closure plan in advance to schedule any required inspections. 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.

Signature of Contractor

Name (please type) Mr. Robert J. Whitman - President/owner
Signature 
Date February 5, 1990

Signature of Site owner or Operator

Name (please type) MR. PAUL BACA
Signature 
Date 02/09/90

NOTES:

1. Any changes in this document must be approved by this department.
2. Any leaks discovered must be submitted to this office on an underground storage tank unauthorized leak/contamination site report form within 5 days of its discovery.
3. Three (3) copies of this plan must be submitted to this Department. One copy must be at the construction site at all times.
4. After approval of plan, notification of at least two (2) working days (48 hours) must be given to this Department prior to removal of tank(s).
5. A copy of your approved plan must be sent to the landowner.
6. Triple rinse means that:
 - a) Final rinse must contain less than 100 ppm of gasoline (EPA method 8020 for soil, or EPA method 602 for water) or Diesel (EPA method 418.1). Other methods for halogenated volatile organics (EPA method 8010 for soil, EPA method 601 for water) may be required. The composition of the final rinse must be demonstrated by an original or facsimile report from a laboratory certified for the above analyses.
 - b) Tank interior is shown to be free from deposits or residues upon a visual examination of tank interior.
 - c) Tank should be labelled as "triple rinsed; laboratory certified analysis available upon request" with the name and address of the contractor.

if all the above requirements cannot be met, the tank must be transported as a hazardous waste.

7. Any cutting into tanks requires local fire department approval.

UNDERGROUND TANK CLOSURE/MODIFICATION PLANS

ATTACHMENT A

SAMPLING RESULTS

Tank or Area	Contaminant	Location & depth	Results (specify units)

INSTRUCTIONS

- 2. SITE ADDRESS**
Address at which closure or modification is taking place.
- 5. EPA I.D. NO.**
This number may be obtained from the state Department of Health Services, 916/324-1781.
- 6. CONTRACTOR**
Prime contractor for the project.
- 7. OTHER**
List professional consultants here.
- 12. SAMPLE COLLECTOR**
Persons who are collecting samples.
- 13. SAMPLING INFORMATION**
Historic contents - the principal product(s) used in the last 5 years.

Material sampled - i.e., water, oil, sludge, soil, etc.
- 16. LABORATORIES**
Laboratories used for chemical and geotechnical analyses.
- 17. CHEMICAL METHODS:**
All sample collection methods and analyses should conform to EPA or DHS methods.

Contaminant - Specify the chemical to be analyzed.

Sample Preparation Method Number - The means used to prepare the sample prior to analyses - i.e., digestion techniques, solvent extraction, etc. Specify number of method and reference if not an EPA or DHS method.

Analysis Method Number - The means used to analyze the sample - i.e., GC, GC-MS, AA, etc. Specify number of method and reference if not a DHS or EPA method.
- NOTE!**
Method Numbers are available from certified laboratories.
- 18. SITE SAFETY PLAN**
A plan outlining protective equipment and additional specialized personnel in the event that significant amount of hazardous materials are found. The plan should consider the availability of respirators, respirator cartridges, self-contained breathing apparatus (SCBA) and industrial hygienists.

19. ATTACH COPY OF WORKMAN'S COMPENSATION

20. PLOT PLAN

The plan should consists of a scaled view of the facility at which the tank(s) are located and should include the following information:

- a) Scale
- b) North Arrow
- c) Property Line
- d) Location of all Structures
- e) Location of all relevant existing equipment including tanks and piping to be removed
- f) Streets
- g) Underground conduits, sewers, water lines, utilities
- h) Existing wells (drinking, monitoring, etc.)
- i) Depth to ground water
- j) All existing tanks in addition to the ones being pulled

rev. 9/88
mam

BUSINESS TAX CERTIFICATE

CITY OF OAKLAND



The issuing of a Business tax Certificate is for revenue purpose only. It does not relieve the taxpayer from the responsibility of complying with the requirements of any other department of the City of Oakland and or any other ordinance, law or regulation of the City of Oakland, State of California, or any other governmental agency.

EXPIRES

DECEMBER 31, 1989

PLEASE READ REVERSE SIDE

ACCOUNT NUMBER

438309

BUSINESS NAME

THE ENVIRONMENTAL CONSTRUCTION COMPANY

ADDRESS

6479 CRYSTAL SPRINGS DR.

SAN JOSE

CA 95120 - 0000

KIND OF BUSINESS

MISCELLANEOUS TRADE CONTRACTORS

*— Renewed —
until March 31, 1990*



State of California
Department of Consumer Affairs
CONTRACTORS STATE LICENSE BOARD



License Number

578789

Entity

INDIV

Name/Name(s)

ENVIRONMENTAL
CONSTRUCTION COMPANY THE

Classification(s)

C61/D40

Expiration Date

10/31/91

Job # 191

(N) →

#1111 San Pablo Ave

NICKSON'S
AUTO Repair
Albany, CALIF

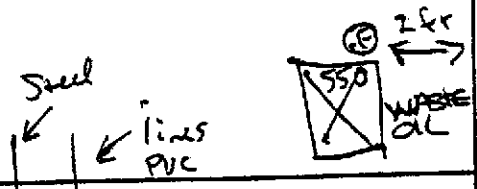
Repair Barn

Parking Lot

Office PAUL
BACA

steel ↓

Replate Shop



Gehmann

Flare line

Job # 191 ● Site MAP

NICKSON'S Auto Repair
1111 San Pablo Ave
Albany, Ca. 94706

ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)
11/17/89

PRODUCER
ANDRINI AND COMPANY
 120 WEST 20TH AVENUE
 SAN MATEO, CA 94403
 (415) 573-1111

INSURED
ROBERT WHITMAN
 DBA: THE ENVIRONMENTAL
 CONSTRUCTION COMPANY
 6478 CRYSTAL SPRING DRIVE
 SAN JOSE, CA 95120

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** SUPERIOR NATIONAL INSURANCE CO.
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

COVERAGES
 THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. **AT INCEPTION**

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS	
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR OWNERS & CONTRACTORS PRO	WCN12706-B	11/14/89	11/14/90	GENERAL AGGREGATE	0
					PRODUCTS COMPLETED AGGREGATE	0
	PERSONAL & ADVERTISING INJURY				0	
	EACH OCCURRENCE				0	
	FIRE DAMAGE (Any one fire)				0	
	MEDICAL EXPENSE (Any one person)				0	
	COMBINED SINGLE LIMIT				0	
	BODILY INJURY (per person)				0	
	BODILY INJURY (per accident)				0	
	PROPERTY DAMAGE				0	
OTHER						
	EXCESS LIABILITY OTHER THAN UMBRELLA FORM WORKERS COMPENSATION AND EMPLOYERS LIABILITY					
					STATUTORY 1,000 (EACH ACCIDENT) 1,000 (DISEASE - POLICY LIMIT) 1,000 (DISEASE - EACH EMPLOYEE)	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS
 AS RESPECTS: ALL OPERATIONS OF THE NAMED INSURED, #191
 - Nickson's Auto Repair - 111 San Pablo Ave. Albany, Ca. 94706

ALAMEDA HEALTH CARE SERVICE
 80 SWAN WAY, RM. 200
 OAKLAND, CA 94621

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Timothy J. [Signature]

THE ENVIRONMENTAL CONSTRUCTION COMPANY

259 KINNEY DRIVE

SAN JOSE, CA. 95112-4433

(408) 997-1505

SITE AND SAFETY
PLAN

PROJECT NAME: NICKSON'S AUTO REPAIR

PROJECT NUMBER: #191

First aid equipment is located on site inside the Environmental Construction Company truck. Notify the Project Manager and Site Safety Officer about the situation immediately after emergency procedures are implemented.

EMERGENCY TELEPHONE NUMBERS:

Local Police: 911
State Police: 911
Fire: 911
Ambulance: 911

MEDICAL:

Nearest Hospital: ALTA BATES Hospital - Berkeley, Ca.
Telephone: (415) 540-1667

Directions to: "Crosses Hospital is in Berkeley"
- Alta Bates Hospital -
3001 Colby Street, Berkeley, Ca.

SITE SAFETY SUMMARY

Back-up Hospital:

Telephone:

Directions to: N/A

Poison Control Center: (415) 476-2845 1-800-535-0525

Emergency Environmental:

National Response Center: 1-800-424-8802

(U.S., EPA (24-hours hotline)

Regional EPA office:

916-324-1781

ENCOUNTERING EMERGENCY SITUATIONS

Personnel encountering a hazardous situation shall instruct others on site to evacuate the vicinity immediately and call the Project Manager, the Site Safety Office, or, in their absence, the Regional Health and Safety Manager for instructions.

The site must not be re-entered until the situation has been corrected.

PROCEDURES FOR INJURY

1. Call for ambulance/medical assistance, if necessary. Notify the receiving hospital of the nature of physical injury or chemical overexposure.
2. Notify the Project Manager and Site Safety officer. If the injury is minor, proceed to administer first aid and notify the Site Safety Officer.

EMERGENCY TREATMENT

In all cases if chemical overexposure, follow standard procedures for poison management, first aid, and, if applicable, cardiopulmonary resuscitation. When transporting an injured person to a hospital, bring this site safety plan to assist medical personnel with diagnosis and treatment. Four different routes of exposure and their respective first aid/poison management procedures are outlined below:

1. INGESTION

CALL THE POISON CONTROL CENTER AT: (415) 476-2845
or 911 FOR INSTRUCTIONS.

DECONTAMINATION PROCEDURES

All operations conducted at this site have the potential to contaminate field equipment and personnel protective equipment (PPE). To prevent the transfer of any contamination to vehicles, administrative area and other personnel, the following procedures must be followed.

1. Whenever possible, field equipment should be decontaminated with a solution of Alconox or Green Soap and thoroughly rinsed with water prior to leaving the site. This must be done outside a 25-foot radius of any work area. In situations where it is not possible to decontaminate field equipment on site, double-bag each piece of equipment and transport back to home base for immediate decontamination in designated area.
2. Disposable PPE (for example, Tyvek suits and inner latex gloves) must be bagged and disposed of at the site. Non-disposable PPE (such as respirators and outer gloves) must be individually bagged, transported back to the home base and properly decontaminated with a solution of Alconox or Green Soap (available at most hardware stores).

EXCAVATION

Any excavation (or trench) must be supported or tested for wall stability if it is over six feet in depth and requires entry. The excavated area must be surrounded by fence, barricaded or otherwise protected. The excavated area should also be lighted at night with electrically-powered lights or reflectors. When necessary, it is the responsibility of the subcontractor to shore or ramp excavations in accordance with government regulations.

EXCAVATION HAZARDS

The most serious and common hazard from working in an excavation is a cave-in. The following safety rules should be followed to prevent any mishaps:

1. Inspect soil stability before and after tank removal.
2. Keep soil at least 2 feet from the edge of an excavation.
3. guard excavation 5 feet deep or more (or any shallower excavation with unstable soil conditions), into which workers will enter, by a shoring system, sloping the ground or other equivalent methods.
4. Support heavy equipment properly.

OTHER HAZARDS

The following rules should be applied to prevent injury or accidents:

1. Avoid standing on top of the tank (slippery or rusty surface)
2. Use proper, not undersized equipment to remove the tank.
3. Secure the tank at an assigned location after extraction.

ON SITE SAFETY EQUIPMENT:

2- ROLLS VISQUEEN
2- RESPIRATORS
2- FIRE EXTINGUISHERS
2- 55 GALLON DRUMS
2- BAGS ABSORB
1- 5 GALLON BUCKET
CAUTION SIGNS
NO SMOKING SIGNS
CAUTION TAPE
BARRICADES
FENCE
HARD HATS

JOB PROJECT MANAGER: Mr. Mack Baker II -(TECC)

DRAFT

UNDERGROUND TANK HANDLING GUIDELINES

The following are various steps used in the location, excavation, removal, cleaning and handling of underground tanks, which includes the contents, residue and tank disposition.

1. No on-site work shall be initiated until all necessary permits have been obtained and in evidence at the site. Tank owners must obtain the generator's U.S. EPA identification number. Any hazardous waste removed from the site must be transported by a registered transporter using certified vehicles and containers.
2. Identify the location and size of the tank. When available and obtainable, plot plans or site drawings can be obtained either from the owner's records or from local fire department, building or engineering department records.
3. Should documents not indicate the tank size, "stick" the tank to determine the bottom depth. Use only a non-sparking probe, such as aluminum, wood or plastic. The upper limit of the tank's diameter can also be determined. Using the inside diameter, the size of volume of the tank can be estimated. This will also indicate the depth of cover above the actual tank.
4. Prior to large equipment moving to the tank location, observe ingress and egress including any overhead wiring and other possible obstructions relative to safety, persons and equipment.
5. All tanks shall be checked for flammability. Use a combustible gas indicator or "sniffer" and log the time and LEL (lower explosion limit) on job paperwork. If contents are unknown, a sample should be drawn and subjected to analysis for constituency. Only trained personnel will perform this operation.
6. All electricity, supply lines, and like items known to be associated with the tank shall be "locked out" or disconnected. All vent line piping shall be left intact until the tank is ready to be abandoned in place or removed. Barriers, colored tape and signs shall be installed and any source of ignition shall be at least 25' away from the excavation.

7. Remove all possible remaining liquid via the use of an appropriate vacuum truck and hoses(s). Observe grounding and bonding procedures. The liquid, if hazardous, must be transported to an appropriate reclaiming, recycling or TSD facility. Manifesting procedures must be followed.
 8. Carbon Dioxide (CO₂) shall be used to displace the interior tank atmosphere. If bottled CO₂ gas is used, it shall be at least one pound per cubic foot of tank volume in sufficient quantity for continuous flow during the procedures. If dry ice (CO₂) is used and inserted in fill opening, remove fill line "drop tube" and/or sleeve from interior of tank prior to inserting dry ice. It shall be at the rate of 15 pounds of dry ice per 1000 gallons of tank capacity. A fire agency inspector may wish to be on-site to observe either procedure subject to jurisdictional regulations.
 9. Begin the excavation in cooperation with owner and all local agencies and expose top of tank. Identify all piping associated and relating to the tank. Continuous supervision must be maintained during all operations.
 10. If tank(s) is to be removed and transported as hazardous waste, remove fill line drop tube and inert tank with dry ice (CO₂). Remove product lines, vent lines, electrical lines intank pumps, etc., making observations of any possible leaks. Plug all tank openings preferably with a pliable material such as paper, cloth or rags prior to placement of tank(s) on a flat bed trailer or other appropriate equipment. Assist in preparation of uniform hazardous waste manifest and transport the tank(s) to recognized TSD facility.
-
11. For cleaning tank on site, recheck flammability and LEL. Readings and time are to be logged on job paperwork.
 12. Air purgings to the tank shall begin whenever the tank's atmosphere is found within its explosive range. Continue purgings until readings are at or below 20% of the LEL of the contents of the tank. This is 80% below the LEL. This can be accomplished using an air compressor and a venturi unit or air eductor. Electrical bonding is to be observed. Log readings and time on job paperwork.

CONFIDENTIAL

13. Install vacuum hose with vacuum truck and follow bonding procedure. If necessary, evacuate the atmosphere from the tank as described in number 12 above. Continuous air purging may be necessary.
14. Begin waterblasting or high pressure washing the tank interior walls and bottom, using a suitable detergent if necessary. Loose scale, sludge and rinse water are removed and deposited in the vacuum truck. When the sludge and other debris have been removed, and the LEL reading is 0%, the washing may cease. Log readings and time on job paperwork.
15. Should there be no installed manhole in the tank, a pneumatic cold cutting tool will cut a manhole at the appropriate location. Use only beryllium or approved non-sparking tools. The minimum sized hole will be 24" x 24". Confined space safety procedures shall be followed.
16. All interior rinse water and sludge, if hazardous, shall be manifested and transported to a fully approved and permitted TSD facility.
17. Remove the cleaned tank from the excavation in the presence of required agency representation who will inspect the bottom of the excavation from which the tank was removed for any possible leak residue and record the observations. Remove excess soil from tank exterior.
18. A certified Marine Chemist or similarly qualified person shall inspect the tank and issue a "certificate" stating that the tank is "safe for hot work". At this point the tank can be considered as non-hazardous.
19. Apply an identification number and the date that corresponds to the "certification" with a can of spray paint to the tank exterior. The certification must be kept with the tank. This can be accomplished by affixing the certificate to the tank with tape or by other means. Log this certification in the job paperwork.
20. Load and secure the tank(s) on appropriate transporting equipment and remove from premises. The cleansed tank(s) can then be transported with their respective certifications for material recycling or salvage.

NOTE: The stated certificate "safe for hot work" is usually valid only at the time of issuance and should not be construed as valid for any extended period of time unless so indicated. Should hot work or torch cutting be applied at a later time, retesting of the tank is suggested for safety.

21. Regulatory agencies may require soil samples to be removed from the open excavation and tested for hazardous constituents. When soil samples are analyzed, results may be requested to be forwarded to the fire inspector who is responsible for the district where the tank is abandoned or removed.
22. Should additional soil, dirt or hazardous debris require removal, it shall be done in a safe manner, manifested, transported in certified containers and receipted at the appropriate facility.
23. Should the excavation be left open, security of the site will be maintained.
24. Should site require backfilling, compaction and grading, this will be done in accordance with local building ordinances, or owner's specifications. This can be done only after the regulatory agency(s) acknowledge that the site or excavation is free of contamination.

NOTE: Underground tanks can be abandoned in place subject to site specific circumstances. This condition is dictated by local fire, building and related agency codes and regulations.

STATE OF CALIFORNIA

WATER RESOURCES CONTROL BOARD

FORM 2
SITE

UNDERGROUND STORAGE TANK PERMIT
FACILITY/SITE IDENTIFICATION AND PERMIT APPLICATION

COMPLETE THIS FORM FOR EACH FACILITY/SITE

NAME OF TANK ONE (PER)	<input checked="" type="checkbox"/> 1 NEW PERMIT	<input type="checkbox"/> 2 RENEWAL PERMIT	<input type="checkbox"/> 3 CHANGE OF INFORMATION	<input type="checkbox"/> 4 PERMIT TRANSFER
	<input type="checkbox"/> 5 UNDERGROUND	<input type="checkbox"/> 6 UNGRADED PERMIT	<input type="checkbox"/> 7 TEMPORARY SITE CLOSURE	

I. FACILITY/SITE INFORMATION & ADDRESS -- (MUST BE COMPLETED)

FACILITY/SITE NAME NICKSON'S BEAKE SPACE		CARE OF ADDRESS INFORMATION		
ADDRESS 1111 SAN PABLO AVE.		NEAREST CROSS STREET DARTMOUTH		
CITY NAME ALBANY		STATE CA	ZIP CODE 94706	CITY PHONE NUMBER 415 521 2787
TYPE OF BUSINESS <input type="checkbox"/> 1 OFFICE <input type="checkbox"/> 2 DISTRIBUTION <input type="checkbox"/> 3 STORAGE <input checked="" type="checkbox"/> 4 PROCESSOR <input type="checkbox"/> 5 OTHER		EPA ID # None		
EMERGENCY CONTACT PERSON (PRIMARY) NAME (LAST, FIRST) BACA, Paul		EMERGENCY CONTACT PERSON NAME (LAST, FIRST) STEVE WILSON, STEVE		
PHONE NUMBER (AREA CODE) 415 526 8791		PHONE NUMBER (AREA CODE) 415 526 8791		

II. PROPERTY OWNER INFORMATION & ADDRESS -- (MUST BE COMPLETED)

NAME PAUL BACA		CARE OF ADDRESS INFORMATION		
MAILING OF STREET ADDRESS 201 SAN CARLOS		<input checked="" type="checkbox"/> Box to Indicate CORPORATION <input type="checkbox"/> INDIVIDUAL		
CITY NAME EL CERRILLO		STATE Ca	ZIP CODE 94530	CITY PHONE NUMBER 415 521 2787

III. TANK OWNER INFORMATION & ADDRESS -- (MUST BE COMPLETED)

NAME Same as site		CARE OF ADDRESS INFORMATION		
MAILING OF STREET ADDRESS		<input checked="" type="checkbox"/> Box to Indicate CORPORATION <input type="checkbox"/> INDIVIDUAL		
CITY NAME		STATE	ZIP CODE	CITY PHONE NUMBER

IV. LEGAL NOTIFICATION AND BILLING ADDRESS

CHECK ONE (1) INDICATING WHETHER ABOVE ADDRESS SHOULD BE USED FOR BOTH LEGAL NOTIFICATION AND BILLING: YES NO

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE

APPLICANT'S NAME (PRINTED & SIGNATURE) Paul Baca	DATE Oct 10 87
--	--------------------------

LOCAL AGENCY USE ONLY

COUNTY #	JURISDICTION #	AGENCY #	FACILITY ID #	PERMIT NUMBER
CURRENT LOCAL AGENCY PERMIT #		APPROVED BY (NAME)		
PERMIT NUMBER	PERMIT APPROVAL DATE	PERMIT EXPIRATION DATE		
LOCAL AGENCY CODE	OWNER TRACT #	SUPERVISOR DISTRICT CODE	BUSINESS PLAN FILED	
CHECK \$	PERMIT AMOUNT	SUPERVISOR AMOUNT	FEE CODE	RECEIVED \$

THIS FORM MUST BE COMPLETED BY AT LEAST TWO (2) TANK PERMIT FORM 'B' APPLICANTS, UNLESS THIS IS A PERMIT TRANSFER

LOCAL AGENCY COPY

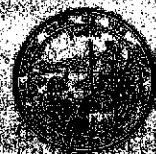
STATE OF CALIFORNIA

WATER RESOURCES CONTROL BOARD

FORM 97 TANK

UNDERGROUND STORAGE TANK PROGRAM TANK PERMIT APPLICATION INFORMATION

COMPLETE A SEPARATE FORM WITH THE FOLLOWING INFORMATION FOR EACH TANK



MARK ONLY ONE ITEM	<input checked="" type="checkbox"/> 1. NEW PERMIT	<input type="checkbox"/> 2. RENEWAL PERMIT	<input type="checkbox"/> 5. CHANGE OF INFORMATION	<input type="checkbox"/> 7. PERMIT RENEWAL (CLOSED TANK)
	<input type="checkbox"/> 3. INTERIM PERMIT	<input type="checkbox"/> 4. AMENDED PERMIT	<input type="checkbox"/> 6. TEMPORARY TANK CLOSURE	<input type="checkbox"/> 8. UNDETERMINED

FACILITY/SITE NAME WHERE TANK IS INSTALLED: ANDERSON'S BACKB SEC FARM TRAIL - 151 NO.

I. TANK DESCRIPTION COMPLETE ALL ITEMS - IF UNKNOWN - SO SPECIFY

A. OWNER'S TANK ID #	B. MANUFACTURED BY
C. YEAR INSTALLED <u>1975</u>	D. TANK CAPACITY IN GALLONS <u>500</u>

II. TANK CONTENTS IF (A.1.) IS MARKED, COMPLETE ITEM C. IF (A.1.) IS NOT MARKED, COMPLETE ITEM D.

A. <input type="checkbox"/> 1. MOTOR VEHICLE FUEL <input type="checkbox"/> 2. PETROLEUM <input type="checkbox"/> 3. CHEMICAL PRODUCT <input checked="" type="checkbox"/> 4. OIL <input type="checkbox"/> 5. HAZARDOUS <input type="checkbox"/> 99. EMPTY <input type="checkbox"/> 99. UNKNOWN		B. <input type="checkbox"/> 1. PRODUCT <input type="checkbox"/> 2. WASTE		C. <input type="checkbox"/> 1. UNLEADED <input type="checkbox"/> 2. LEADED <input type="checkbox"/> 3. DIESEL <input type="checkbox"/> 4. GASOLINE <input type="checkbox"/> 5. JET FUEL <input type="checkbox"/> 6. KEROSENE <input type="checkbox"/> 7. METHANOL <input type="checkbox"/> 99. OTHER (SPECIFY BELOW)	
D. IF NOT MOTOR VEHICLE FUEL, PUT THE NAME OF HAZARDOUS SUBSTANCE STORED: <u>CL-2</u>					

III. TANK CONSTRUCTION MARK ONE ITEM ONLY IN BOX A, B, C, & D

A. TYPE OF SYSTEM	<input type="checkbox"/> 1. DOUBLE WALLED	<input type="checkbox"/> 2. SINGLE WALLED WITH EXTERIOR LINING	<input checked="" type="checkbox"/> 95. UNKNOWN
	<input type="checkbox"/> 3. SINGLE WALLED	<input type="checkbox"/> 4. SECONDARY CONTAINMENT	<input type="checkbox"/> 99. OTHER
B. TANK MATERIAL	<input type="checkbox"/> 1. STEEL/IRON	<input type="checkbox"/> 2. STAINLESS STEEL	<input type="checkbox"/> 3. FIBERGLASS
	<input type="checkbox"/> 4. CONCRETE	<input type="checkbox"/> 5. POLYVINYL CHLORIDE	<input type="checkbox"/> 6. ALUMINUM
	<input type="checkbox"/> 7. BRONZE	<input type="checkbox"/> 8. GALVANIZED STEEL	<input checked="" type="checkbox"/> 95. UNKNOWN
			<input type="checkbox"/> 99. OTHER
C. INTERIOR LINING	<input type="checkbox"/> 1. RUBBER LINED	<input type="checkbox"/> 2. ALKALY LINED	<input type="checkbox"/> 3. EPOXY LINED
	<input type="checkbox"/> 4. GLASS LINED	<input type="checkbox"/> 5. UNLINED	<input type="checkbox"/> 6. PHENOLIC LINED
	<input type="checkbox"/> 7. IS LINING MATERIAL COMPATIBLE WITH 100% METHANOL? <input type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> 95. UNKNOWN
			<input type="checkbox"/> 99. OTHER
D. CORROSION PROTECTION	<input type="checkbox"/> 1. POLYETHYLENE WAX	<input type="checkbox"/> 2. TAR OR ASPHALT	<input type="checkbox"/> 3. VINYL WAX
	<input type="checkbox"/> 4. CATHODIC PROTECTION	<input type="checkbox"/> 5. NONE	<input checked="" type="checkbox"/> 95. UNKNOWN
			<input type="checkbox"/> 99. OTHER

IV. PIPING INFORMATION CIRCLE A IF ABOVE GROUND, U IF UNDERGROUND, BOTH IF APPLICABLE

A. SYSTEM TYPE	A U 1. SUCTION	A U 2. PRESSURE	A U 3. GRAVITY	A U 91. NONE	A U 95. UNKNOWN	A U 99. OTHER
B. CONSTRUCTION	A U 1. SINGLE WALLED	A U 2. DOUBLE WALLED	A U 3. LINED TRENCH	A U 91. NONE	A U 95. UNKNOWN	A U 99. OTHER
C. MATERIAL	A U 1. STEEL/IRON	A U 2. STAINLESS STEEL	A U 3. POLYVINYL CHLORIDE (PVC)	A U 4. FIBERGLASS	A U 91. NONE	A U 95. UNKNOWN
	A U 5. ALUMINUM	A U 6. CONCRETE	A U 7. STEEL GLAD W/FRP	A U 8. 100% METHANOL COMPATIBLE FRP		
	A U 9. GALVANIZED STEEL	A U 95. UNKNOWN	A U 99. OTHER			

V. LEAK DETECTION SYSTEM CIRCLE P FOR PRIMARY OR S FOR SECONDARY, A PRIMARY LEAK DETECTION SYSTEM MUST BE CIRCLED

P S 9. PRECISION TESTING	P S 7. PRESSURE TESTING	P S 91. NONE	P S 95. UNKNOWN	P S 99. OTHER
--------------------------	-------------------------	--------------	-----------------	---------------

VI. INFORMATION ON TANK PERMANENTLY CLOSED IN PLACE

1. ESTIMATED DATE LAST USED (MO/YR)	2. ESTIMATED QUANTITY OF SUBSTANCE REMAINING IN GALLONS	3. WAS TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> YES <input type="checkbox"/> NO
-------------------------------------	---	--

THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY, AND TO THE BEST OF MY KNOWLEDGE, IS TRUE AND CORRECT.

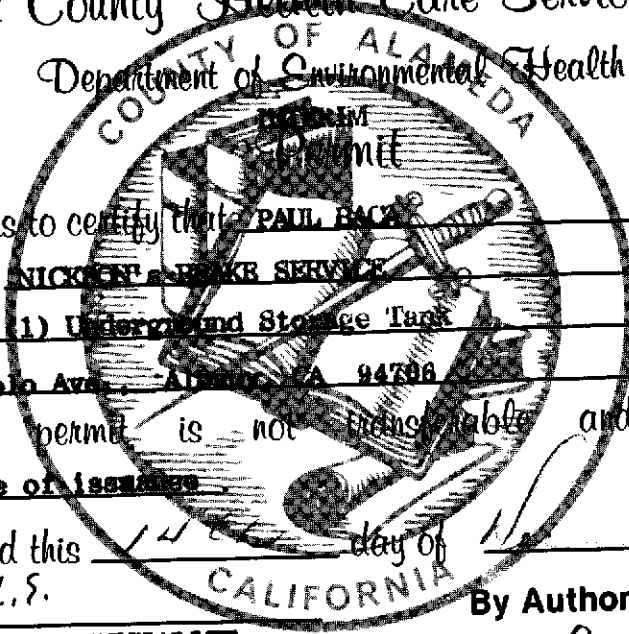
APPLICANT'S NAME (PRINTED & SIGNATURE) PAUL BACA DATE 10-16-83

LOCAL AGENCY USE ONLY

COUNTY #	JURISDICTION #	AGENCY #	FACILITY ID #
CURRENT LOCAL AGENCY EMBLITY IS #	APPROVED BY NAME	PHONE #	WORKING COPY
PERMIT NUMBER	PERMIT APPROVAL DATE	PERMIT EXPIRATION DATE	
CHECK #	PERMIT AMOUNT	PURCHASE AMT.	FEE CODE

Alameda County Health Care Services Agency

Department of Environmental Health



This is to certify that PAUL BAKER,
doing business as NICKEN'S SHOE SERVICE, is permitted
to operate One (1) Underground Storage Tank
at 1111 San Pablo Ave., Alameda, CA 94706

This permit is not transferable and is good until
6 Months from date of issuance

Issued this 14 day of Nov., 1989
C.S.

HAZARDOUS MATERIAL SPECIALIST

By Authority of
County Health Officer

400-WA-2-3/87

Santamarian
TRDK Re mo ds 2/21/90