

COUNTY OF ALAMEDA UNDERGROUND TANK SYSTEM CLOSURE INSPECTION REPORT

For Use By the County of Alameda, Environmental Health

Facility Name: Piedmont USD Contractor's name: Golden Gate Tank Removal Inc
 Address: 1800 Oakland Ave City: Piedmont Zip: 94611
 Project Contact: Tim Hallen Phone No.: 415-559-0499

Tank ID No.					
Size	1500 GALLONS				
Construction Material	Steel				
Single/Double Wall					
Backfill Type	Sandy/silty soil				
Oxygen <10%	NA				
LEL <20%	NA				
Tank Condition	No obvious holes or breaches. observed on N-end of UST				
Soil/Groundwater Condition	sandy/silty soil - no odors observed				
Soil Sample Depth	~ 8' bgs				
Number and Description of Soil/Groundwater Samples (Indicate Sample Locations on Site Plan.)	1- 8' bgs S-end of UST 1- 8' bgs N-end of UST				

Disposition of Tank Contents: Will be taken ashw by Cleanwater NA
 Piping: Rinsed/Tested/Capped. Rinsate: Shipped on Manifest. NA
 Tank & Piping Transport: Shipped on Manifest; Transporter Name Same as on Application. Transported by GCTR as non-haz
 Sampling: Evidence Tape; Chain of Custody; Samples Refrigerated; Pipeline Samples Taken Yes, No (If no, explain why in Comments.)
 Soil: Soil Stored on Bermed Plastic & Covered; Soil Returned to Excavation. - after analysis/confirm assumed Site Plan: Attached.

Comments/Special Conditions: 4 discreet samples to be composited into 1 by lab

Please submit Tank Removal report to AEDPH, attn: Robert Weston w/ 30 days.

Inspector: Barney Chan Agency: AEDPH Date: 7/30/09 Start Time: 1100 Stop Time:

Signature of Contractor/Authorized Agent: [Signature] Date: 7/30/09 Page 1 of 2

ALAMEDA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH
Certified Unified Program Agency (CUPA)

INSPECTION REPORT SUMMARY / SUMMARY OF VIOLATIONS
NARRATIVE

Facility Name:	Piedmont Unified School District - Tank Removal
Facility Address:	1800 Oakland Ave Piedmont

	<p>Oakland Ave</p> <p>Bonita Ave</p> <p>Highland Ave</p> <p>Stockpile ~ 30 x 5 x 3 = 15 cu yd 27</p> <p>Onsite: Ramil Arcia - Sampler Proj manager Jack McCubbin C: 925-766-2634 Millennium Consulting (925-807-6700)</p> <p>Contractor: Pete Palmer - Villa Construction Tom / J. Alexander - Golden Gate Tank Removal 415-512-0555</p> <p>~ 1500 gal steel UST - diesel/heating fuel tank filled w/ concrete Concrete is piled on us queen next to UST + in a lined storage bin Concrete will be hauled as haz waste by Clearwater Env. UST hauled on flat bed of Golden Gate truck - deemed non-haz by contractor - No odors in sample collected from bottom of pit ~ 7.5' bgs Bedrock encountered @ ~ 8.5'</p> <p>Splice 1 - South end - 8' bgs - brown sandy/gravel - no odors obs. Splice 2 - North end - " " " " " " " " " " " "</p> <p>4 discrete Stockpile splices to be composited into 1 by lab also taken</p>

Date of Inspection	Inspector	Signature of Facility Representative
7/30/09	BChan	

ATTN: Mr. Robert Weston
Alameda County Environmental Health Services
1131 Harbor Bay Parkway, Room 250
Alameda, CA 94502-6577
510-567-6700

Health Permit Application
Underground Tank Removal

ACCEPTED

Underground Storage Tank Closure Permit Application
Alameda County Division of Hazardous Materials
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577

1800 Oakland Avenue
Piedmont, California 94611

July 28, 2009

These closure/removal plans have been received and found to be acceptable and essentially meet the requirements of State and Local Health Laws. Changes to your closure plans indicated by this Department are to assure compliance with State and local laws. The project proposed herein is now released for issuance of any required building permits for construction/destruction.

Golden Gate Tank Removal, Inc.
3730 Mission Street
San Francisco, California 94110

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

Any changes or alterations of these plans and specifications must be submitted to this this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws.

Notify this Department at least 72 hours prior to the following required inspections:

Project # 9098

- Removal of Tank(s) and Piping
- Sampling
- Final Inspection

Issuance of a) permit to operate, b) permanent site closure, is dependent on compliance with accepted plans and all applicable laws and regulations.

***THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:**

Contact Specialist:

Bamey Chan
510-520-3250

ALAMEDA COUNTY HEALTH CARE SERVICES AGENCY
ENVIRONMENTAL HEALTH SERVICES
1131 HARBOR BAY PARKWAY, RM 250
ALAMEDA, CA 94502-6577
PHONE # 510/567-6700

UNDERGROUND TANK CLOSURE PLAN

* * * Complete plan according to attached instructions * * *

1. Name of Business Golden Gate Tank Removal, Inc.
Business Owner or Contact Person (PRINT) Joshua Alexander
2. Site Address 1800 Oakland Ave.
city Piedmont zip 94611 Phone (510)594-2608
3. Mailing Address 3730 Mission Street
city San Francisco zip 94110 Phone (415) 512-1555
4. Property Owner Piedmont Unified School District
Business Name (if applicable) _____
Address 760 Magnolia Ave.
city, state Piedmont CA zip 94611
5. Generator name under which tank will be manifested
Piedmont Unified School District
EPA ID# under which tank will be manifested C A C 0 0 2 6 4 2 6 8 2

6. Contractor Golden Gate Tank Removal, Inc.
Address 3730 Mission Street
city San Francisco Phone (415) 512-1555
License Type A C-8 HAZ ID# 616521

7. Consultant (if applicable) _____
Address _____
City, State _____ Phone _____

8. Main Contact Person for Investigation (if applicable)
Name Joshua Alexander Title Project Manager
Company Golden Gate Tank Removal, Inc.
Phone (415) 512-1555

9. Number of underground tanks being closed with this plan 1 (one)
Length of piping being removed under this plan up to 15 feet
Total number of underground tanks at this facility (**confirmed with owner or operator) 1 (to be removed)

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

**** Underground storage tanks must be handled as hazardous waste ****

a) Product/Residual Sludge/Rinsate Transporter

Name Uniwaste, Inc. EPA I.D. No. CAL000317320
Hauler License No. 4919 License Exp. Date 03/31/2009
Address P.O. Box 2404
City Union City State CA Zip _____

b) Product/Residual Sludge/Rinsate Disposal Site

Name Clearwater Environmental EPA ID# NVD982358483
Address 2430 Almond Drive
City Silver Springs State NV Zip 89429

c) Tank and Piping Transporter ^{WE INTEND TO DISPOSE & TRANSPORT THIS AS NON HAZ, IF NOT}

Name Ecology Control Industries EPA I.D. No. CAD 009 466 392
Hauler License No. 1533 License Exp. Date 04/06/2017
Address 255 Parr Road
City Richmond State CA Zip 94801

d) Tank and Piping Disposal Site ^{WE INTEND TO DISPOSE & TRANSPORT THIS AS NON HAZ, IF NOT}

Name Ecology Control Industries EPA I.D. No. CAD 009 466 392
Address 255 Parr Road
City Richmond State CA Zip 94801

11. Sample Collector

Name Joshua Alexander
Company Golden Gate Tank Removal, Inc.
Address 3730 Mission Street
City San Francisco State CA Zip 94110 Phone (415) 512-1555

12. Laboratory

Name Accutest Laboratories
Address 3334 Victor court
City Santa Clara State CA Zip 95054
State Certification No. 2346

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

If yes, describe. _____

14. Describe methods to be used for rendering tank(s) inert:

removal of product, purge, introduce dry ice to reduce vapors
flush lines and triple rinse with water, if necessary
pump to vacuum truck, steam clean tank

Before tanks are pumped out and inerted, all associated piping must be flushed back into the tank(s). All accessible piping must then be removed. Inaccessible piping must be permanently plugged using grout.

The Bay Area Air Quality Management District, 415/771-6000, along with local Fire and Building Departments, must also be contacted for tank removal permits. Fire departments typically require the use of a combustible gas indicator to verify tank inertness. It is the contractor's responsibility to have a functional combustible gas indicator on-site to verify that the tank(s) is inerted.

15. Tank History and Sampling Information *** (see instructions) ***

Tank		Material to be sampled (tank contents, soil, groundwater)	Location and Depth of Samples
Capacity	Use History include date last used (estimated)		
1500 Gallons	unknown	soil samples & water if present	1. stockpile 2. north/ east end of excavation 3. south/west end of excavation bottom of tank- max 15 feet

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

Excavated/Stockpiled Soil	
Stockpiled Soil Volume (estimated) <h1>10-20 yards</h1>	Sampling Plan 4 point composite for every 50 cubic yards or 4 point composite for every 20 cubic yards

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

Will the excavated soil be returned to the excavation immediately after tank removal? yes no unknown

If yes, explain reasoning _____

If unknown at this point in time, please be aware that excavated soil may not be returned to the excavation without prior approval from this office. This means that the contractor, consultant, or responsible party must communicate with the Specialist IN ADVANCE of backfilling activities.

16. Chemical methods and associated detection limits to be used for analyzing sample(s):

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits shall be followed.

See Table 2, Recommended Minimum Verification Analyses for Underground Tank Leaks.

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
Benzene	8021B	SW8020F	0.005 PPM
Toluene	8021B	SW8020F	0.005 PPM
Ethylbenzene	8021B	SW8020F	0.005 PPM
Xylenes	8021 B	SW8020F	0.010 PPM
MTBE	8015M/8021B	SW8020F	0.005 PPM
TPH-D	8015M	CATFH	1.0 PPM

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

18. Submit copy of Worker's Compensation Certificate

Name of Insurer State Fund Compensation Insurance

19. Submit Plot Plan (See Instructions)

20. Enclose Fee (See Instructions)

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

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

23. Submit State (Underground Storage Tank Permit Application) Forms A and B (one-B form for each UST to be removed) (mark box 8 for "Tank Removed" in the upper right hand corner, if applicable).

I declare that to the best of my knowledge and belief that 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 approval from the Environmental Protection Division 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.

CONTRACTOR INFORMATION

Name of Business Golden Gate Tank Removal, Inc.
Name of Individual Annette Chen - Project Coordinator
Signature  Annette Chen Digitally signed by Annette Chen
DN: cn=Annette Chen, c=US
Date: 2009.07.28 09:17:10 -0700 Date 7/28/09

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business Piedmont Unified School District (care of GGTR)
Name of Individual Piedmont Unified School District
Signature  Annette Chen Digitally signed by Annette Chen
DN: cn=Annette Chen, c=US
Date: 2009.07.28 09:18:15 -0700 On Behave of Owner Date 7/28/09

ALAMEDA COUNTY ENVIRONMENTAL PROTECTION DIVISION

DECLARATION OF SITE ACCOUNT REFUND RECIPIENT

There may be excess funds remaining in the Site Account at the completion of this project. The PAYOR (person or company that issues the check) will use this form to predesignate another party to receive any funds refunded at the completion of this project. In the absence of this form, the PAYOR will receive the refund.

SITE INFORMATION:

Site ID Number
(if known)

Name of Site

1800 Oakland Ave.

Street Address

Piedmont CA 94611

City, State & Zip Code

I designate the following person or business to receive any refund due at the completion of all deposit/refund projects:

Golden Gate Tank Removal, Inc.

Name

3730 Mission Street

Street Address

San Francisco CA 94110

City, State & Zip Code

Signature of Payor

7/28/09

Date

Name of Payor
(PLEASE PRINT CLEARLY)

Golden Gate Tank Removal, Inc.
Company Name of Payor

RETURN FORM TO:

*County of Alameda, Environmental Protection
1131 Harbor Bay Parkway, Rm 250
Alameda CA 94502-6577
Phone#(510) 567-6700*

RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR UNDERGROUND TANK LEAKS

For Use by Unkdocs Member Agencies or where approved by your Local Jurisdiction

TABLE #2
REVISED 1 MARCH 1999

HYDROCARBON LEAK	SOIL ANALYSIS (SW-846 METHOD)		WATER ANALYSIS (Water/Waste Water Method)	
Gasoline (Leaded and Unleaded)	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and 524.2/624 (8260) for water			
	TOTAL LEAD	AA	TOTAL LEAD	AA
		-- Optional --		
	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
Unknown Fuel	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and 524.2/624 (8260) for water			
	TOTAL LEAD	AA	TOTAL LEAD	AA
	-- Optional --			
	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
Diesel, Jet Fuel, Kerosene, and Fuel/Heating Oil	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and 524.2-624 (8260) for water			
Chlorinated Solvents	CL HC	8260	CL HC	524.2/624 (8260)
	BTEX	8060 or 8021	BTEX	524.2/624 (8260) or 524.2/602 (8021)
Non-chlorinated Solvents	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8060 or 8021	BTEX	524.2/624 (8260) or 524.2/602 (8021)
Waste, Used, or Unknown Oil	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	O&G	8070	O&G	418.1
	BTEX	8260	BTEX	524.2/624 (8260)
	CL HC	8260	CL HC	524.2/624 (8260)
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, and TBA by 8260 for soil and 524.2/624 (8260) for water			
	METALS (Cd, Cr, Pb, Ni, Zn) by ICAP or AA for soil and water			
PCB*, PCP*, PNA, CREOSOTE by 8270 for soil and 524/625 (8270) for water				
* If found, analyze for dibenzofurans (PCBs) or dioxins (PCP)				

NOTES:

1. 8021 replaces old methods 8020 and 8010
2. 8260 replaces old method 8240
3. Reference: Table B-1 in Appendix B of "Expedited Site Assessment Tools for Underground Storage Tank Sites: A Guide for Regulators" (EPA 510-B-87-001)

UNDERGROUND STORAGE TANKS - FACILITY

(one page per site) Page ____ of ____

TYPE OF ACTION 1. NEW SITE PERMIT 3. RENEWAL PERMIT 5. CHANGE OF INFORMATION 7. PERMANENTLY CLOSED SITE
 (Check one item only) 4. AMENDED PERMIT specify change local use only _____ 8. TANK REMOVED
 6. TEMPORARY SITE CLOSURE 400

I. FACILITY / SITE INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) 3 FACILITY ID# _____ 1
Piedmont Unified School District

NEAREST CROSS STREET 401 **Bonita Ave.** FACILITY OWNER TYPE 4. LOCAL AGENCY/DISTRICT*
 1. CORPORATION 5. COUNTY AGENCY*
 BUSINESS TYPE 1. GAS STATION 2. DISTRIBUTOR 3. FARM 4. PROCESSOR 5. COMMERCIAL 6. OTHER 403 2. INDIVIDUAL 3. PARTNERSHIP 7. FEDERAL AGENCY* 402

TOTAL NUMBER OF TANKS REMAINING AT SITE 404 **1 (one)** Is facility on Indian Reservation or trustlands? Yes No 405
 *If owner of UST is a public agency: name of supervisor of division, section or office which operates the UST (This is the contact person for the tank records.) 406

II. PROPERTY OWNER INFORMATION

PROPERTY OWNER NAME 407 **Piedmont Unified School District** PHONE 408 **410-594-2608**

MAILING OR STREET ADDRESS 409 **760 Magnolia Ave.**

CITY 410 **Piedmont** STATE 411 **CA** ZIP CODE 412 **94611**

PROPERTY OWNER TYPE 1. CORPORATION 2. INDIVIDUAL 3. PARTNERSHIP 4. LOCAL AGENCY / DISTRICT 5. COUNTY AGENCY 6. STATE AGENCY 7. FEDERAL AGENCY 413

III. TANK OWNER INFORMATION

TANK OWNER NAME 414 _____ PHONE 415 _____

MAILING OR STREET ADDRESS 416 _____

CITY 417 _____ STATE 418 _____ ZIP CODE 419 _____

TANK OWNER TYPE 1. CORPORATION 2. INDIVIDUAL 3. PARTNERSHIP 4. LOCAL AGENCY / DISTRICT 5. COUNTY AGENCY 6. STATE AGENCY 7. FEDERAL AGENCY 420

IV. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER

TY (TK) HQ 44- _____ Call (916) 322-9669 if questions arise 421

V. PETROLEUM UST FINANCIAL RESPONSIBILITY


INDICATE METHOD(S) 1. SELF-INSURED 2. GUARANTEE 3. INSURANCE 4. SURETY BOND 5. LETTER OF CREDIT 6. EXEMPTION 7. STATE FUND 8. STATE FUND & CFO LETTER 9. STATE FUND & CD 10. LOCAL GOVT MECHANISM 99. OTHER: 422

VI. LEGAL NOTIFICATION AND MAILING ADDRESS

Check one box to indicate which address should be used for legal notifications and mailing. Legal notifications and mailings will be sent to the tank owner unless box 1 or 2 is checked. 1. FACILITY 2. PROPERTY OWNER 3. TANK OWNER 423

VII. APPLICANT SIGNATURE

Certification - I certify that the information provided herein is true and accurate to the best of my knowledge.

SIGNATURE OF APPLICANT  **Annette Chen** DATE 424 **7/28/09** PHONE 425 _____

NAME OF APPLICANT (print) 426 _____ TITLE OF APPLICANT 427 _____

STATE UST FACILITY NUMBER (For local use only) 428 _____ 1998 UPGRADE CERTIFICATE NUMBER (For local use only) 429 _____

UNIFIED PROGRAM CONSOLIDATED FORM

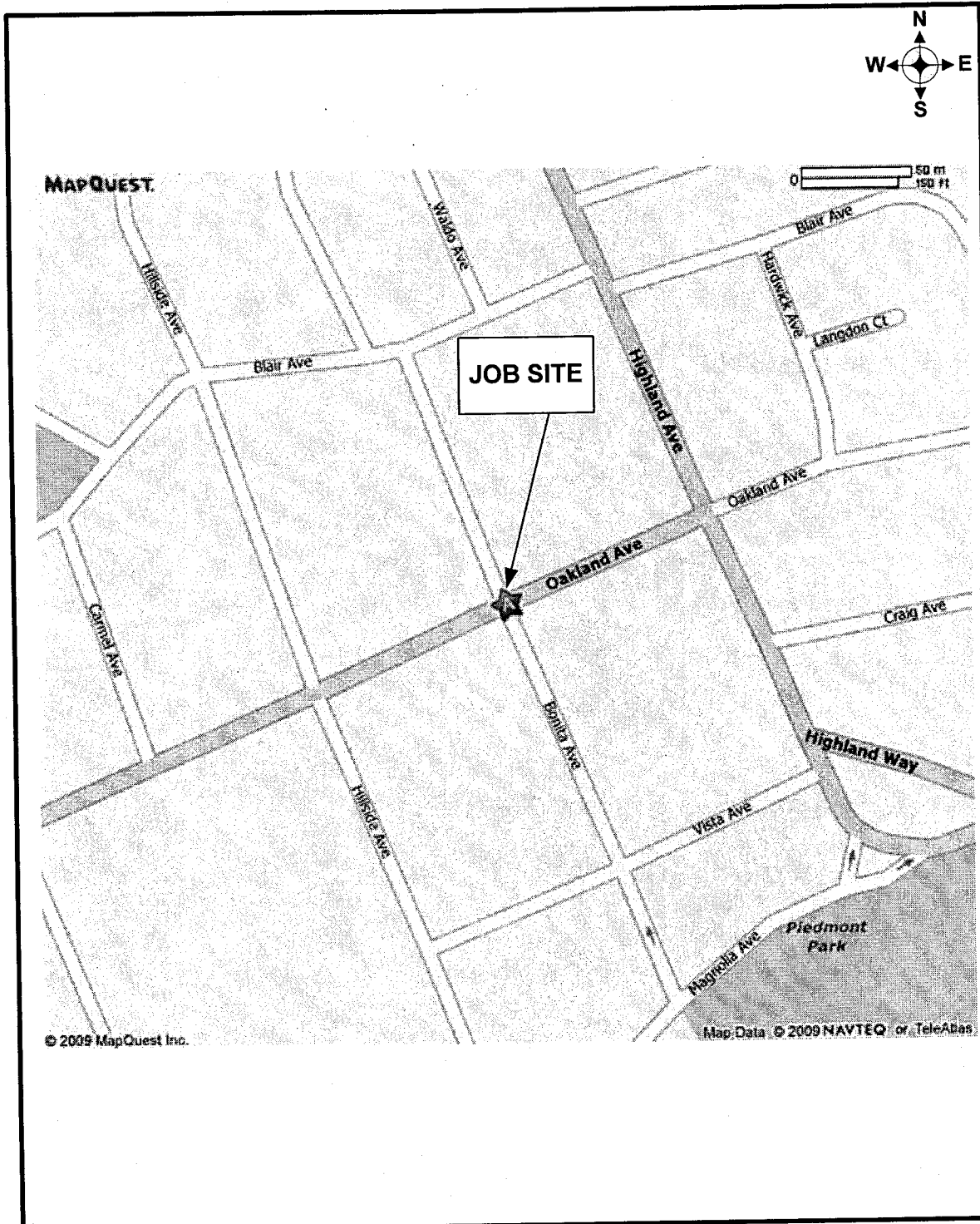
TANKS

UNDERGROUND STORAGE TANKS – TANK PAGE 1

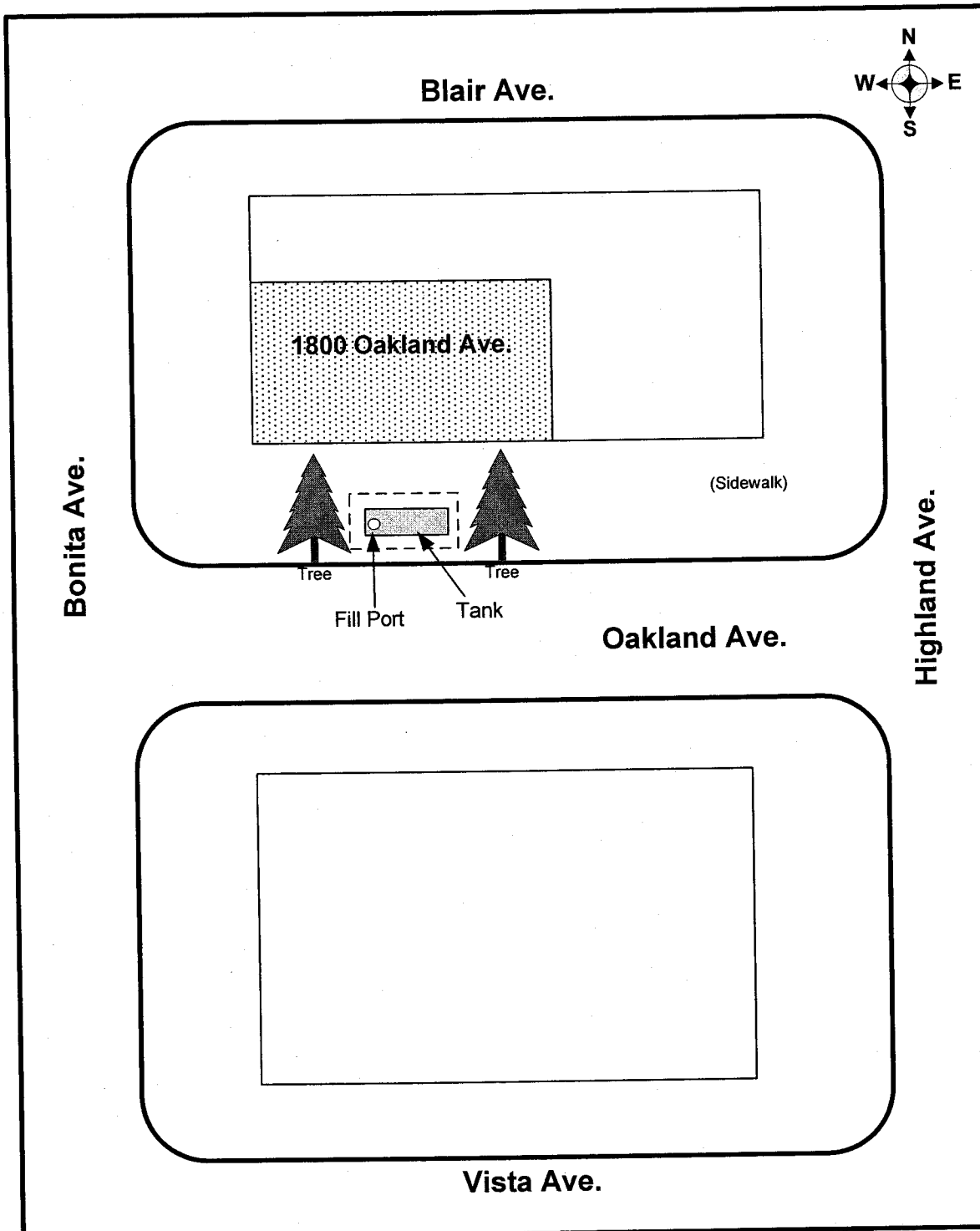
(two pages per tank)

Page ___ of ___

TYPE OF ACTION <input type="checkbox"/> 1 NEW SITE PERMIT <input type="checkbox"/> 4 AMENDED PERMIT <input type="checkbox"/> 5 CHANGE OF INFORMATION <input type="checkbox"/> 6 TEMPORARY SITE CLOSURE (Check one item only)			<input type="checkbox"/> 7 PERMANENTLY CLOSED ON SITE		
<input type="checkbox"/> 3 RENEWAL PERMIT (Specify reason – for local use only)			<input checked="" type="checkbox"/> 8 TANK REMOVED		
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) Piedmont Unified School District			FACILITY ID: _____		
LOCATION WITHIN SITE (Optional) 1800 Oakland Ave., Piedmont, CA					431
I. TANK DESCRIPTION (A scaled plot plan with the location of the UST system including buildings and landmarks shall be submitted to the local agency.)					
TANK ID # Unknown		TANK MANUFACTURER Unknown		COMPARTMENTALIZED TANK <input type="checkbox"/> Yes <input type="checkbox"/> No	
DATE INSTALLED (YEAR/MO) Unknown		TANK CAPACITY IN GALLONS 1500 gallon		NUMBER OF COMPARTMENTS One	
ADDITIONAL DESCRIPTION (For local use only)					
II. TANK CONTENTS					
TANK USE <input checked="" type="checkbox"/> 1. MOTOR VEHICLE FUEL (If marked complete Petroleum Type) <input type="checkbox"/> 2. NON-FUEL PETROLEUM <input type="checkbox"/> 3. CHEMICAL PRODUCT <input type="checkbox"/> 4. HAZARDOUS WASTE (Includes Used Oil) <input type="checkbox"/> 95. UNKNOWN		PETROLEUM TYPE <input type="checkbox"/> 1a. REGULAR UNLEADED <input type="checkbox"/> 2. LEADED <input type="checkbox"/> 5. JET FUEL <input type="checkbox"/> 1b. PREMIUM UNLEADED <input type="checkbox"/> 3. DIESEL <input type="checkbox"/> 6. AVIATION FUEL <input type="checkbox"/> 1c. MIDGRADE UNLEADED <input type="checkbox"/> 4. GASOHOL <input checked="" type="checkbox"/> 99. OTHER		COMMON NAME (from Hazardous Materials Inventory page) Diesel	
		CASH# (from Hazardous Materials Inventory page)			
III. TANK CONSTRUCTION					
TYPE OF TANK <input checked="" type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 3. SINGLE WALL WITH EXTERIOR MEMBRANE LINER <input type="checkbox"/> 5. SINGLE WALL WITH INTERNAL BLADDER SYSTEM <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 4. SINGLE WALL IN VAULT <input type="checkbox"/> 95. UNKNOWN		DATE INSTALLED			
TANK MATERIAL – primary tank <input checked="" type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 5. CONCRETE <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 2. STAINLESS STEEL <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 8. FRP COMPITBLE W/100% METHANOL <input type="checkbox"/> 99. OTHER		DATE INSTALLED			
TANK MATERIAL – secondary tank <input type="checkbox"/> 1. BARE STEEL <input type="checkbox"/> 3. FIBERGLASS / PLASTIC <input type="checkbox"/> 5. CONCRETE <input checked="" type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 2. STAINLESS STEEL <input type="checkbox"/> 4. STEEL CLAD W/FIBERGLASS REINFORCED PLASTIC (FRP) <input type="checkbox"/> 8. FRP COMPITBLE W/100% METHANOL <input type="checkbox"/> 99. OTHER <input type="checkbox"/> 10. COATED STEEL <input type="checkbox"/> 5. CONCRETE		DATE INSTALLED			
TANK INTERIOR LINING <input type="checkbox"/> 1. RUBBER LINED <input type="checkbox"/> 3. EPOXY LINING <input type="checkbox"/> 5. GLASS LINING <input checked="" type="checkbox"/> 95. UNKNOWN		DATE INSTALLED			
OR COATING <input type="checkbox"/> 2. ALKYD LINING <input type="checkbox"/> 4. PHENOLIC LINING <input type="checkbox"/> 6. UNLINED <input type="checkbox"/> 99 OTHER		(For local use only)			
OTHER CORROSION PROTECTION <input type="checkbox"/> 1 MANUFACTURED CATHODIC PROTECTION <input type="checkbox"/> 3 FIBERGLASS REINFORCED PLASTIC <input checked="" type="checkbox"/> 95 UNKNOWN <input type="checkbox"/> 2 SACRIFICIAL ANODE <input type="checkbox"/> 4 IMPRESSED CURRENT <input type="checkbox"/> 99 OTHER		DATE INSTALLED			
SPILL AND OVERFILL <input type="checkbox"/> 1 SPILL CONTAINMENT <input type="checkbox"/> 2 DROP TUBE <input type="checkbox"/> 3 STRIKER PLATE		YEAR INSTALLED TYPE (local use only)		OVERFILL PROTECTION EQUIPMENT: YEAR INSTALLED <input type="checkbox"/> 1 ALARM <input type="checkbox"/> 3 FILL TUBE SHUT OFF VALVE <input type="checkbox"/> 2 BALL FLOAT <input type="checkbox"/> 4 EXEMPT	
IV. TANK LEAK DETECTION (A description of the monitoring program shall be submitted to the local agency.)					
IF SINGLE WALL TANK (Check all that apply) <input type="checkbox"/> 1 VISUAL (EXPOSED PORTION ONLY) <input type="checkbox"/> 5 MANUAL TANK GAUGING (MTG) <input type="checkbox"/> 2 AUTOMATIC TANK GAUGING (ATG) <input type="checkbox"/> 6 VADOSE ZONE <input type="checkbox"/> 3 CONTINUOUS ATG <input type="checkbox"/> 7 GROUNDWATER <input type="checkbox"/> 4 STATISTICAL INVENTORY RECONCILIATION (SIR) BIENNIAL TANK TESTING <input type="checkbox"/> 8 TANK TESTING <input type="checkbox"/> 99 OTHER			IF DOUBLE WALL TANK OR TANK WITH BLADDER (Check one item only) <input type="checkbox"/> 1 VISUAL (SINGLE WALL IN VAULT ONLY) <input type="checkbox"/> 2 CONTINUOUS INTERSTITIAL MONITORING <input type="checkbox"/> 3 MANUAL MONITORING		
IV. TANK CLOSURE INFORMATION / PERMANENT CLOSURE IN PLACE					
ESTIMATED DATE LAST USED (YR/MO/DAY) Unknown		ESTIMATED QUANTITY OF SUBSTANCE REMAINING Unknown gallons		TANK FILLED WITH INERT MATERIAL? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	



<p>GOLDEN GATE TANK REMOVAL, INC. 3730 Mission Street San Francisco, CA 94110 Ph (415) 512-1555 Fx (415) 512-0964</p>	<p>VICINITY MAP 1800 Oakland Avenue Piedmont, CA 94611</p>		
<p>GGTR Project No.9098</p>	<p>Drawing By: AC</p>	<p>July 2009</p>	<p>Figure 1</p>



GOLDEN GATE TANK REMOVAL, INC. 3730 Mission Street San Francisco, CA 94110 Ph (415) 512-1555 Fx (415) 512-0964		Site Drawing 1800 Oakland Avenue Piedmont, CA 94611	
GGTR Project No. 9098	Drawing By: AC	July 2009	Figure 2