

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

**ACCEPTED**

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

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.

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 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:

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

Issuance of a permit to operate, by permittee 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

Robert Weston  
1-12-2012  
No liquid allowed to be placed in the tank at any time prior to removal

**UNDERGROUND TANK CLOSURE PLAN**

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

- Name of Business Golden Gate Tank Removal, Inc.  
Business Owner or Contact Person (PRINT) Tim Hallen
- Site Address 4845 Proctor Rd.  
City Castro Valley Zip 94546 Phone (912) 313-4366
- Mailing Address 1455 Yosemite Avenue  
City San Francisco Zip 94124 Phone (415) 512-1555
- Property Owner Christopher Giese  
Business Name (if applicable) \_\_\_\_\_  
Address 4301 W William Cannon Dr., #B150 Ste 240  
City, State Austin TX Zip 78749
- Generator name under which tank will be manifested  
Christopher Giese

EPA ID# under which tank will be manifested CAC002683164

SR0020047

1

6. Contractor Golden Gate Tank Removal, Inc.

Address 1455 Yosemite Avenue

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 Tim Hallen 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 Big Sky Environmental Solutions EPA I.D. No. CAL000346010

Hauler License No. 5840 2012/08/31 BIG SKY ENVIRONMENTAL SOLUTIONS

Address 401 WEST CHANNEL DR

City BENICIA CA 94510  
510.541.2128  
SOLANO

b) Product/Residual Sludge/Rinsate Disposal Site

Name DK Dixon EPA ID# CAT080012602

Address 7300 Chevron Way

City Dixon State CA zip 95620

c) Tank and Piping Transporter

Name Golden Gate Tank Removal, Inc. (Dispose & Transport as Non Haz) EPA I.D. No. \_\_\_\_\_  
Hauler License No. \_\_\_\_\_ License Exp. Date \_\_\_\_\_  
Address 1455 Yosemite Avenue  
City San Francisco State CA Zip 94124

d) Tank and Piping Disposal Site

Name Circosta Scrap Metal EPA I.D. No. CAD983650797  
Address 1801 Evans Ave.  
City San Francisco State CA Zip 94124

11. Sample Collector

Name Tim Hallen  
Company Golden Gate Tank Removal, Inc.  
Address 1455 Yosemite Avenue  
City San Francisco State CA Zip 94124 Phone (415) 512-1555

12. Laboratory

Name Accutest Laboratories  
Address 2105 Lundy Ave.  
City San Jose State CA Zip 95131  
State Certification No. 08258

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  
if necessary  
pump to vacuum truck, ~

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)		
750 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.

**TABLE #2**  
REVISED 21 NOVEMBER 2003

**RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR  
UNDERGROUND TANK LEAKS**

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u> (SW-846 METHOD)		<u>WATER ANALYSIS</u> (Water/Waste Water Method)	
<b>Gasoline (Leaded and Unleaded)</b>	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, TBA, and EtOH by 8260 for soil and 524.2/624 (8260) for water			
	TOTAL LEAD	AA	TOTAL LEAD	AA
		--Optional--		
<b>Unknown Fuel</b>	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
	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, TBA, and EtOH by 8260 for soil and 524.2/624 (8260) for water			
<b>Diesel, Jet Fuel, Kerosene, and Fuel/Heating Oil</b>	TOTAL LEAD	AA	TOTAL LEAD	AA
		--Optional--		
	Organic Lead	DHS-LUFT	Organic Lead	DHS-LUFT
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260	BTEX	524.2/624 (8260)
<b>Chlorinated Solvents</b>	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, TBA, and EtOH by 8260 for soil and 524.2/624 (8260) for water			
	CL HC	8260	CL HC	524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
<b>Non-chlorinated Solvents</b>	1,4-Dioxane	8270M	1,4-Dioxane	8270M
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
<b>Waste, Used, or Unknown Oil</b>	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	O&G	9070	O&G	418.1
	BTEX	8260	BTEX	524.2/624 (8260)
	CL HC	8260	CL HC	524.2/624 (8260)
	1,4-Dioxane	8270M	1,4-Dioxane	8270M
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, TBA, and EtOH by 8260 for soil and 524.2/624 (8260) for water			
	METALS (Cd, Cr, Pb, Ni, Zn) by ICAP or AA for soil 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-97-001).

SEE TABLE 2 ATTACHED

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).

# HAZARDOUS WASTE TANK CLOSURE CERTIFICATION

### I. FACILITY IDENTIFICATION

<b>BUSINESS NAME</b> (Same as FACILITY NAME or DBA - Doing Business As) <span style="float:right">3</span>	<b>FACILITY ID#</b>										1

<b>TANK OWNER NAME</b>	740
------------------------	-----

<b>TANK OWNER ADDRESS</b>	741
---------------------------	-----

TANK OWNER CITY <span style="float:right">742</span>	STATE <span style="float:right">743</span>	ZIP CODE <span style="float:right">744</span>
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### II. TANK CLOSURE INFORMATION

TANK INTERIOR ATMOSPHERE READINGS	Tank ID # <small>(Attach additional copies of this page for more than three tanks)</small>		Concentration of Flammable Vapor			Concentration of Oxygen		
			Top	Center	Bottom	Top	Center	Bottom
			746a	746b	746c	747a	747b	747c
1	745							
2	748							
3	751							

### III. CERTIFICATION

On examination of the tank, I certify the tank is visually free from product, sludge, scale (thin, flaky residual of tank contents), rinseate and debris. I further certify that the information provided herein is true and accurate to the best of my knowledge.

<b>SIGNATURE OF CERTIFIER</b>	<b>STATUS OR AFFILIATION OF CERTIFYING PERSON</b>				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:95%;"><b>NAME OF CERTIFIER</b> (Print) <span style="float:right">754</span></td> <td rowspan="2">                 Certifier is a representative of the CUPA, authorized agency, or LIA: <span style="float:right">760</span>  <input type="checkbox"/> Yes    <input type="checkbox"/> No                  Name of CUPA, authorized agency, or LIA: <span style="float:right">761</span>                   If certifier is other than CUPA / LIA check appropriate box below: <span style="float:right">762</span>   <input type="checkbox"/> a. Certified Industrial Hygienist (CIH)  <input type="checkbox"/> b. Certified Safety Professional (CSP)  <input type="checkbox"/> c. Certified Marine Chemist (CMC)  <input type="checkbox"/> d. Registered Environmental Health Specialist (REHS)  <input type="checkbox"/> e. Professional Engineer (PE)  <input type="checkbox"/> f. Class II Registered Environmental Assessor  <input type="checkbox"/> g. Contractors' State License Board licensed contractor (with hazardous substance removal certification)             </td> </tr> <tr> <td style="width:95%;"><b>TITLE OF CERTIFIER</b> <span style="float:right">755</span></td> </tr> </table>	<b>NAME OF CERTIFIER</b> (Print) <span style="float:right">754</span>	Certifier is a representative of the CUPA, authorized agency, or LIA: <span style="float:right">760</span> <input type="checkbox"/> Yes <input type="checkbox"/> No Name of CUPA, authorized agency, or LIA: <span style="float:right">761</span>  If certifier is other than CUPA / LIA check appropriate box below: <span style="float:right">762</span>  <input type="checkbox"/> a. Certified Industrial Hygienist (CIH) <input type="checkbox"/> b. Certified Safety Professional (CSP) <input type="checkbox"/> c. Certified Marine Chemist (CMC) <input type="checkbox"/> d. Registered Environmental Health Specialist (REHS) <input type="checkbox"/> e. Professional Engineer (PE) <input type="checkbox"/> f. Class II Registered Environmental Assessor <input type="checkbox"/> g. Contractors' State License Board licensed contractor (with hazardous substance removal certification)	<b>TITLE OF CERTIFIER</b> <span style="float:right">755</span>		
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<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:95%;"><b>ADDRESS</b> <span style="float:right">756</span></td> </tr> <tr> <td style="width:95%;"><b>CITY</b> <span style="float:right">757</span></td> </tr> <tr> <td style="width:95%;"><b>PHONE</b> <span style="float:right">758</span></td> </tr> <tr> <td><b>DATE</b> <span style="float:right">759</span>      <b>CERTIFICATION TIME</b></td> </tr> </table>	<b>ADDRESS</b> <span style="float:right">756</span>	<b>CITY</b> <span style="float:right">757</span>	<b>PHONE</b> <span style="float:right">758</span>	<b>DATE</b> <span style="float:right">759</span> <b>CERTIFICATION TIME</b>	
<b>ADDRESS</b> <span style="float:right">756</span>					
<b>CITY</b> <span style="float:right">757</span>					
<b>PHONE</b> <span style="float:right">758</span>					
<b>DATE</b> <span style="float:right">759</span> <b>CERTIFICATION TIME</b>					

<b>TANK PREVIOUSLY HELD FLAMMABLE OR COMBUSTIBLE MATERIALS</b>	763
(If yes, the tank interior atmosphere shall be re-checked with a combustible gas indicator prior to work being conducted on the tank.) <span style="float:right"><input type="checkbox"/> Yes    <input type="checkbox"/> No</span>	

<b>CERTIFIER'S TANK MANAGEMENT INSTRUCTIONS FOR SCRAP DEALER, DISPOSAL FACILITY, ETC:</b>	764

A copy of this certificate shall accompany the tank to the recycling / disposal facility and be provided to the CUPA. If there is no CUPA, copies shall be submitted to the LIA and authorized agency; owner / operator of the tank system; removal contractor; and the recycling / disposal facility.



## Hazardous Waste Tank Closure Certification

Complete and submit this page prior to initiating any cleaning, cutting, dismantling, or excavation of a tank system that meets the conditions below:

- Any tank system that previously held a hazardous material or a hazardous waste, that is identified as a hazardous waste, and that is destined to be disposed, reclaimed or closed in place.
- This does not apply to tank systems regulated under a hazardous waste facility permit, other than permit by rule (PBR), or to tank systems regulated under a grant of interim status, nor to a tank system or any portion thereof, that meets the definition of scrap metal in 22 CCR §66260.10 and is excluded from regulation pursuant to 22 CCR §66261.6(a)(3)(B).

Refer to 22 CCR §67383.3 and 23 CCR §2672 for disposal requirements for tank systems.

(Note: the numbering of the instructions follows the data element numbers that are on the UPCF pages. These data element numbers are used for electronic submission and are the same as the numbering used in 27 CCR, Appendix C, the Business Section of the Unified Program Data Dictionary.)

Please number all pages of your submittal. This helps your CUPA or local agency identify whether the submittal is complete and if any pages are separated.

1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the CUPA. This is the unique number which identifies your facility.
3. BUSINESS NAME - Enter the full legal name of the business.

740. TANK OWNER NAME - Complete items 740-744, unless all items are the same as the Business Owner information (items 111-116) on the Business Owner/Operator Identification page  
741. TANK OWNER ADDRESS  
742. TANK OWNER CITY (OES Form 2730). If the same, write "SAME AS SITE" across this section  
743. TANK OWNER STATE  
744. TANK OWNER ZIP CODE

745. TANK ID NUMBER 1-3 - Enter up to three owner's tank ID numbers. This is a unique number used by the owner to identify the tank. If more than three tanks are being closed, complete additional copies of this page. (Enter additional tank numbers in 748 and 751.)

746. CONCENTRATION OF FLAMMABLE VAPOR 1-3 - Enter three interior flammable vapor levels for each tank being closed, taken at the top, center, and bottom of the tank. (For more than one tank, enter additional tank readings in 749 and 752.)

747. CONCENTRATION OF OXYGEN 1-3 - Enter three interior oxygen levels for each tank being closed, taken at the top, center, and bottom of the tank. (For more than one tank, enter additional tank readings in 750 and 753).

SIGNATURE - The business owner or officer of the company who is authorized to make decisions for the facility and who has operational control, shall sign in the space provided.

754. CERTIFIER NAME - Enter the full printed name of the person signing the page.

755. CERTIFIER TITLE - Enter the title of the person signing the page.

756. CERTIFIER ADDRESS - Enter the address of the person signing the page.

757. CERTIFIER CITY - Enter the city for the signer's address.

758. CERTIFIER PHONE - Enter the phone number for the person signing the page.

759. DATE CERTIFIED - Enter the date that the document was signed. Enter the time that the readings were taken.

760. CERTIFIER REPRESENTS LOCAL AGENCY - Check "Yes" if the person certifying the tank is a representative of the CUPA, authorized agency, or LIA, check "No" if not.

761. NAME OF LOCAL AGENCY - Enter the name of the local agency represented by the person certifying the tank.

762. AFFILIATION OF CERTIFYING PERSON - Check the certification, license, or organization which the certifier holds or to which the certifying person belongs, if not a CUPA/ LIA.

763. TANK HELD FLAMMABLE OR COMBUSTIBLE MATERIALS - Check "Yes" if the tank held flammable or combustible materials, check "No" if not.

764. MANAGEMENT INSTRUCTIONS - Provide tank management instructions to the scrap dealer, disposal facility, etc., in this space.

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.

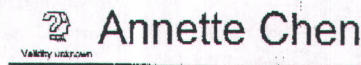
I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner 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  Digitally signed by Annette Chen  
DN: cn=Annette Chen, o=US  
Date: 2010.08.08 09:29:29 -0700 Date 1/6/2012

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)

Name of Business \_\_\_\_\_

Name of Individual Christopher Giese

Signature  Date 1/6/2012

**TABLE #2**  
REVISED 21 NOVEMBER 2003

**RECOMMENDED MINIMUM VERIFICATION ANALYSES FOR  
UNDERGROUND TANK LEAKS**

<u>HYDROCARBON LEAK</u>	<u>SOIL ANALYSIS</u> (SW-846 METHOD)		<u>WATER ANALYSIS</u> (Water/Waste Water Method)	
<b>Gasoline (Leaded and Unleaded)</b>	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, TBA, and EtOH	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
<b>Unknown Fuel</b>	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, TBA, and EtOH	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
<b>Diesel, Jet Fuel, Kerosene, and Fuel/Heating Oil</b>	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, TBA, and EtOH	8260 for soil and 524.2/624 (8260) for water		
<b>Chlorinated Solvents</b>	CL HC	8260	CL HC	524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
	1,4-Dioxane	8270M	1,4-Dioxane	8270M
<b>Non-chlorinated Solvents</b>	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	BTEX	8260 or 8021	BTEX	524.2/624 (8260) or 502.2/602 (8021)
<b>Waste, Used, or Unknown Oil</b>	TPHG	8015M or 8260	TPHG	8015M or 524.2/624 (8260)
	TPHD	8015M or 8260	TPHD	8015M or 524.2/624 (8260)
	O&G	9070	O&G	418.1
	BTEX	8260	BTEX	524.2/624 (8260)
	CL HC	8260	CL HC	524.2/624 (8260)
	1,4-Dioxane	8270M	1,4-Dioxane	8270M
	EDB and EDC	8260	EDB and EDC	524.2/624 (8260)
	MTBE, TAME, ETBE, DIPE, TBA, and EtOH	8260 for soil and 524.2/624 (8260) for water		
	METALS (Cd, Cr, Pb, Ni, Zn)	by ICAP or AA for soil 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:**

- 8021 replaces old methods 8020 and 8010
- 8260 replaces old method 8240
- Reference: Table B-1 in Appendix B of "Expedited Site Assessment Tools for Underground Storage Tank Sites: A Guide for Regulators" (EPA 510-B-97-001).



## Department of Toxic Substances Control

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DTSC: HWTS Reports

HWTS EPA ID Profile

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- [Change Password](#)
- [Frequently Asked Questions](#)

EPA ID: CAT080012602 Name: D K DIXON  
 Status: ACTIVE Inactive Date: Contact: ROSEMARY DOMINO  
 County: SOLANO SIC: 562119 Record Entered: 1982-07-23 Last updated: 2011-10-05

[Help](#)

	Name	Address	City	State	ZIP	Phone
Location	D K DIXON	7300 CHEVRON WAY	DIXON	CA	956200000	
Mailing		7300 CHEVRON WAY	DIXON	CA	956200000	
Owner	ROSEMARY DOMINO	7300 CHEVRON WAY	DIXON	CA	956200000	9093560245
Oper/Contact	ROSEMARY DOMINO	7300 CHEVRON WAY	DIXON	CA	956200000	7076936008

Based ONLY upon EPA ID: CAT080012602:

Calif. Manifests?	Out-of-State Manifests?	Transporter Registration?	Toxic Release Inventory Data?	Calsites Data?
<a href="#">YES</a>	<a href="#">YES</a>	<a href="#">INACTIVE</a>	NO	NO

Calif. Manifest Counts and Total Tonnage					
m = Manifest Count t=Total Tonnage					
Ship Year	Generator	Trans. 1	Trans. 2	TSDF	Alt. TSDF
1996	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>	<a href="#">1 (m)</a> <a href="#">5.85200 (t)</a>	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>
1997	<a href="#">203 (m)</a> <a href="#">5,103.94778 (t)</a>	<a href="#">25 (m)</a> <a href="#">371.72960 (t)</a>	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>	<a href="#">802 (m)</a> <a href="#">4,380.67990 (t)</a>	<a href="#">203 (m)</a> <a href="#">405.68800 (t)</a>
1998	<a href="#">237 (m)</a> <a href="#">4,976.25725 (t)</a>	<a href="#">150 (m)</a> <a href="#">85.58560 (t)</a>	<a href="#">6 (m)</a> <a href="#">3.79000 (t)</a>	<a href="#">888 (m)</a> <a href="#">4,764.64870 (t)</a>	<a href="#">413 (m)</a> <a href="#">1,949.71700 (t)</a>
1999	<a href="#">251 (m)</a> <a href="#">5,370.51660 (t)</a>	<a href="#">99 (m)</a> <a href="#">65.48900 (t)</a>	<a href="#">4 (m)</a> <a href="#">1.66800 (t)</a>	<a href="#">1,310 (m)</a> <a href="#">5,414.74970 (t)</a>	<a href="#">908 (m)</a> <a href="#">3,803.48260 (t)</a>
2000	<a href="#">399 (m)</a> <a href="#">8,769.46360 (t)</a>	<a href="#">5 (m)</a> <a href="#">2.42100 (t)</a>	<a href="#">0 (m)</a> <a href="#">0.00000 (t)</a>	<a href="#">1,978 (m)</a> <a href="#">9,236.01520 (t)</a>	<a href="#">1,690 (m)</a> <a href="#">7,966.75070 (t)</a>
2001	<a href="#">391 (m)</a> <a href="#">8,649.29180 (t)</a>	<a href="#">6 (m)</a> <a href="#">4.99950 (t)</a>	<a href="#">9 (m)</a> <a href="#">7.90400 (t)</a>	<a href="#">2,055 (m)</a> <a href="#">9,169.76070 (t)</a>	<a href="#">1,237 (m)</a> <a href="#">5,967.73630 (t)</a>
2002	<a href="#">375 (m)</a> <a href="#">7,752.81790 (t)</a>	<a href="#">4 (m)</a> <a href="#">5.64300 (t)</a>	<a href="#">4 (m)</a> <a href="#">13.55840 (t)</a>	<a href="#">1,893 (m)</a> <a href="#">8,387.68619 (t)</a>	<a href="#">196 (m)</a> <a href="#">778.88780 (t)</a>



**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**

**4845 Proctor Road  
Castro Valley, CA 94546**

**SR0020047**

JANUARY 10, 2012

**January 6, 2012**

**Golden Gate Tank Removal, Inc.  
1455 Yosemite Avenue  
San Francisco, California 94124**

**Project # 9263**

**ENVIRONMENTAL HEALTH  
PAID**

**JAN 10 2012**

**BY:**

*[Handwritten signature]*

*[Handwritten initials]*

*[Handwritten notes]*

**UNIFIED PROGRAM CONSOLIDATED FORM  
UNDERGROUND STORAGE TANK  
OPERATING PERMIT APPLICATION – FACILITY INFORMATION**  
(One form per facility)

TYPE OF ACTION     1. NEW PERMIT     5. CHANGE OF INFORMATION     7. PERMANENT FACILITY CLOSURE    400.  
(Check one item only)     3. RENEWAL PERMIT     6. TEMPORARY FACILITY CLOSURE     9. TRANSFER PERMIT

**I. FACILITY INFORMATION**

TOTAL NUMBER OF USTs AT FACILITY    404.    FACILITY ID#    1.  
**1 (One)**    (Agency Use Only)

BUSINESS NAME (Same as Facility Name or DBA – Doing Business As)    3.  
**4845 Proctor Rd.**

BUSINESS SITE ADDRESS    103.    CITY    104.  
**4845 Proctor Rd.**    **Castro Valley**

FACILITY TYPE     1. MOTOR VEHICLE FUELING     2. FUEL DISTRIBUTION    403.    Is the facility located on Indian Reservation or Trust lands?     1. Yes     2. No    405.  
 3. FARM     4. PROCESSOR     6. OTHER

**II. PROPERTY OWNER INFORMATION**

PROPERTY OWNER NAME    407.    PHONE    408.  
**Christopher Giese**    **( 510 ) 317-4837**

MAILING ADDRESS    409.  
**4301 W William Cannon Dr., #B150, Ste 240**

CITY    410.    STATE    411.    ZIP CODE    412.  
**Austin**    **TX**    **78749**

**III. TANK OPERATOR INFORMATION**

TANK OPERATOR NAME    428-1.    PHONE    428-2.  
**Same as #2**    (    )

MAILING ADDRESS    428-3.

CITY    428-4.    STATE    428-5.    ZIP CODE    428-6.

**IV. TANK OWNER INFORMATION**

TANK OWNER NAME    414.    PHONE    415.  
**Same as #2**    (    )

MAILING ADDRESS    416.

CITY    417.    STATE    418.    ZIP CODE    419.

OWNER TYPE:     4. LOCAL AGENCY/DISTRICT     5. COUNTY AGENCY     6. STATE AGENCY    420.  
 7. FEDERAL AGENCY     8. NON-GOVERNMENT

**V. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER**

TY (TK) HQ 44-    Call the State Board of Equalization, Fuel Tax Division, if there are questions.    421.

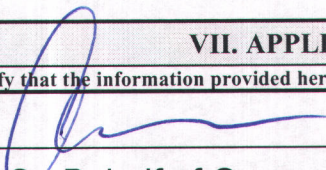
**VI. PERMIT HOLDER INFORMATION**

Issue permit and send legal notifications and mailings to:     1. FACILITY OWNER     4. TANK OPERATOR    423.  
 3. TANK OWNER     5. FACILITY OPERATOR

SUPERVISOR OF DIVISION, SECTION, OR OFFICE (Required for Public Agencies Only)    406.

**VII. APPLICANT SIGNATURE**

**CERTIFICATION: I certify that the information provided herein is true, accurate, and in full compliance with legal requirements.**

APPLICANT SIGNATURE    DATE    424.    PHONE    425.  
    **1/6/12**    **( 415 ) 512-1555**

APPLICANT NAME (print)    426.    APPLICANT TITLE    427.  
**Annette Chen - On Behalf of Owner**    **Project Coordinator**

**UNIFIED PROGRAM CONSOLIDATED FORM  
UNDERGROUND STORAGE TANK  
OPERATING PERMIT APPLICATION – TANK INFORMATION** (One form per UST)

TYPE OF ACTION (Check one item only. For a UST closure or removal, complete only this section and Sections I, II, III, IV, and IX below) 430.  
 1. NEW PERMIT  3. RENEWAL PERMIT  5. CHANGE OF INFORMATION  
 6. TEMPORARY UST CLOSURE  7. UST PERMANENT CLOSURE ON SITE  8. UST REMOVAL

DATE UST PERMANENTLY CLOSED: 430a. \_\_\_\_\_ DATE EXISTING UST DISCOVERED: 3/18/10 430b.

**I. FACILITY INFORMATION**

FACILITY ID # (Agency Use Only) \_\_\_\_\_ 1.  
 BUSINESS NAME (Same as Facility Name or DBA – Doing Business As) 4845 Proctor Rd. 3.  
 BUSINESS SITE ADDRESS 4845 Proctor Rd. 103. CITY Castro Valley 104.

**II. TANK DESCRIPTION**

TANK ID # Unknown 432. TANK MANUFACTURER Unknown 433. TANK CONFIGURATION: THIS TANK IS 434.  
 1. A STAND-ALONE TANK Complete one page for each  
 2. ONE IN A COMPARTMENTED UNIT compartment in the unit.  
 DATE UST SYSTEM INSTALLED Unknown 435. TANK CAPACITY IN GALLONS 750 gallons *At Risk* 436. NUMBER OF COMPARTMENTS IN THE UNIT One 437.

**III. TANK USE AND CONTENTS**

TANK USE  1a. MOTOR VEHICLE FUELING  1b. MARINA FUELING  1c. AVIATION FUELING 439.  
 3. CHEMICAL PRODUCT STORAGE  4. HAZARDOUS WASTE (Includes Used Oil)  5. EMERGENCY GENERATOR FUEL [HSC §25281.5(c)] 439a.  
 6. OTHER GENERATOR FUEL  95. UNKNOWN  99. OTHER (Specify): Gasoline 439a.  
 CONTENTS PETROLEUM:  1a. REGULAR UNLEADED  1c. MIDGRADE UNLEADED  1b. PREMIUM UNLEADED 440.  
 3. DIESEL  5. JET FUEL  6. AVIATION GAS  
 8. PETROLEUM BLEND FUEL  9. OTHER PETROLEUM (Specify): Gasoline 440a.  
 NON-PETROLEUM:  7. USED OIL  10. ETHANOL 440b.  
 11. OTHER NON-PETROLEUM (Specify): \_\_\_\_\_

**IV. TANK CONSTRUCTION**

TYPE OF TANK  1. SINGLE WALL  2. DOUBLE WALL  95. UNKNOWN 443.  
 PRIMARY CONTAINMENT  1. STEEL  3. FIBERGLASS  6. INTERNAL BLADDER 444.  
 7. STEEL + INTERNAL LINING  95. UNKNOWN  99. OTHER (Specify): \_\_\_\_\_ 444a.  
 SECONDARY CONTAINMENT  1. STEEL  3. FIBERGLASS  6. EXTERIOR MEMBRANE LINER  7. JACKETED 445.  
 90. NONE  95. UNKNOWN  99. OTHER (Specify): \_\_\_\_\_ 445a.  
 OVERFILL PREVENTION  1. AUDIBLE & VISUAL ALARMS  2. BALL FLOAT  3. FILL TUBE SHUT-OFF VALVE 452.  
 4. TANK MEETS REQUIREMENTS FOR EXEMPTION FROM OVERFILL PREVENTION EQUIPMENT

**V. PRODUCT / WASTE PIPING CONSTRUCTION**

PIPING CONSTRUCTION  1. SINGLE WALL  2. DOUBLE WALL  99. OTHER 460.  
 SYSTEM TYPE  1. PRESSURE  2. GRAVITY  3. CONVENTIONAL SUCTION  4. SAFE SUCTION [23 CCR §2636(a)(3)] 458.  
 PRIMARY CONTAINMENT  1. STEEL  4. FIBERGLASS  8. FLEXIBLE  10. RIGID PLASTIC 464a.  
 90. NONE  95. UNKNOWN  99. OTHER (Specify): \_\_\_\_\_  
 SECONDARY CONTAINMENT  1. STEEL  4. FIBERGLASS  8. FLEXIBLE  10. RIGID PLASTIC 464b.  
 90. NONE  95. UNKNOWN  99. OTHER (Specify): \_\_\_\_\_ 464c.  
 PIPING/TURBINE CONTAINMENT SUMP TYPE  1. SINGLE WALL  2. DOUBLE WALL  90. NONE 464d.

**VI. VENT, VAPOR RECOVERY (VR) AND RISER / FILL PIPE PIPING CONSTRUCTION**

VENT PRIMARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464e.  
 VENT SECONDARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464f.  
 VR PRIMARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464g.  
 VR SECONDARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464h.  
 VENT PIPING TRANSITION SUMP TYPE  1. SINGLE WALL  2. DOUBLE WALL  90. NONE 464i.  
 RISER PRIMARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464j.  
 RISER SECONDARY CONTAINMENT  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  90. NONE  99. OTHER (Specify): \_\_\_\_\_ 464k.  
 FILL COMPONENTS INSTALLED  1. SPILL BUCKET  3. STRIKER PLATE/BOTTOM PROTECTOR  4. CONTAINMENT SUMP 451a-c.

**VII. UNDER DISPENSER CONTAINMENT (UDC)**

CONSTRUCTION TYPE  1. SINGLE WALL  2. DOUBLE WALL  3. NO DISPENSERS  90. NONE 469a.  
 CONSTRUCTION MATERIAL  1. STEEL  4. FIBERGLASS  10. RIGID PLASTIC  99. OTHER (Specify) 469b.  
 469c.

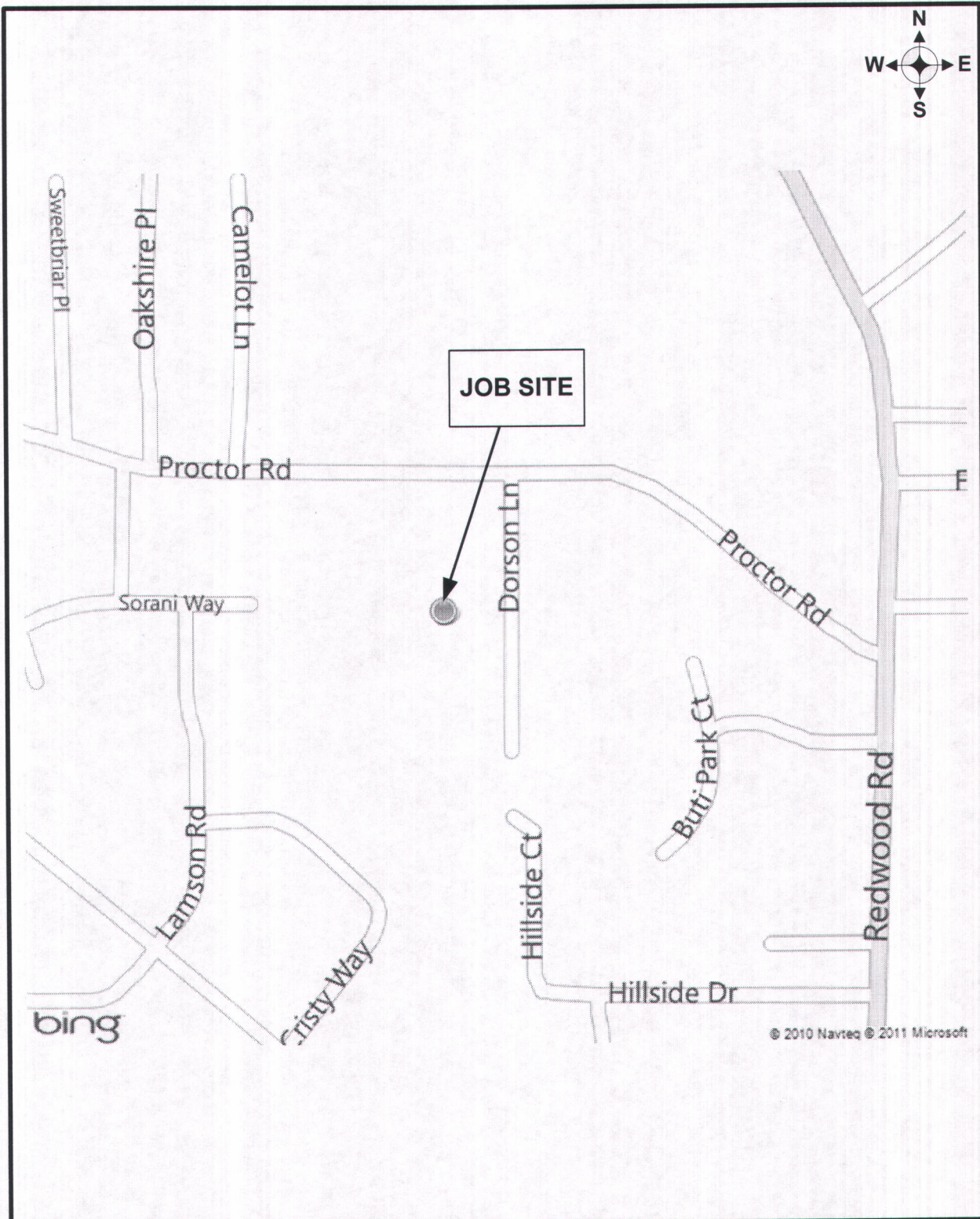
**VIII. CORROSION PROTECTION**

STEEL COMPONENT PROTECTION  2. SACRIFICIAL ANODE(S)  4. IMPRESSED CURRENT  6. ISOLATION 448.

**IX. APPLICANT SIGNATURE**

CERTIFICATION: I certify that this UST system is compatible with the hazardous substance stored and that the information provided herein is true, accurate, and in full compliance with legal requirements.

APPLICANT SIGNATURE \_\_\_\_\_ DATE 1/6/12 470.  
 APPLICANT NAME (print) Annette Chen - On Behalf of Owner 471. APPLICANT TITLE Project Coordinator 472.



**GOLDEN GATE TANK REMOVAL, INC.**  
 1455 Yosemite Avenue  
 San Francisco, CA 94124  
 Ph (415) 512-1555 Fx (415) 512-0964

**VICINITY MAP**  
 4845 Proctor Road  
 Castro Valley, CA 94546

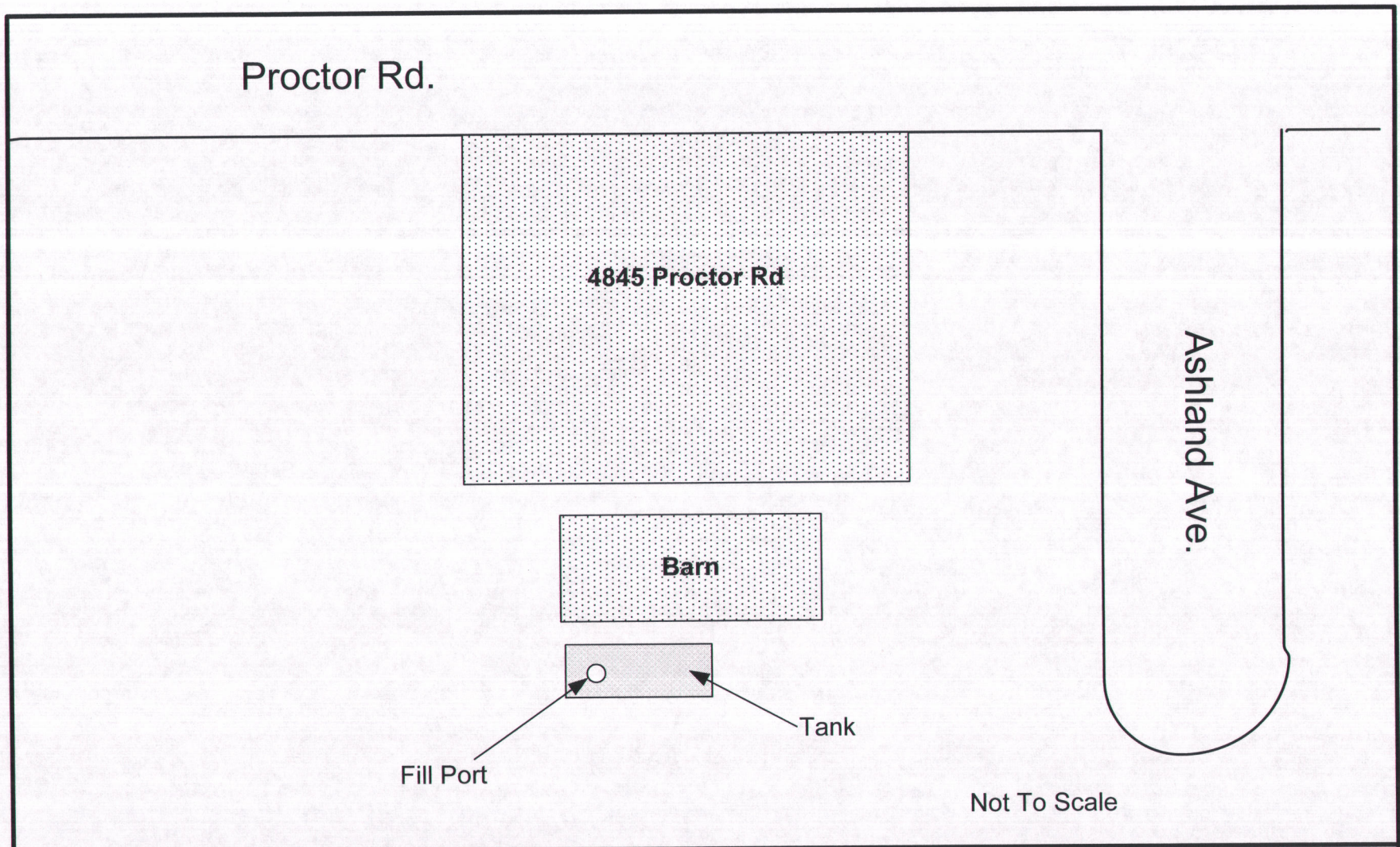
GGTR Project No.9263

Drawing By: AC

January 2012

Figure 1





**GOLDEN GATE TANK REMOVAL, INC.**  
 1455 Yosemite Avenue  
 San Francisco, California 94124  
 Phone (415) 512-1555 Fax (415) 512-0964

**Site Drawing**  
 4845 Proctor Road  
 Castro Valley, California 94546

GGTR Proj. No. 9263

Figure By:AC

January 2012

**Figure 2**