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## UNDERGROUND STORAGE TANK

### CLOSURE REPORT

1607 2<sup>nd</sup> Avenue  
Oakland, CA 94606  
Job No. 9464  
December 11, 2014

Prepared For:

1607 2<sup>nd</sup> Avenue, LLC  
4096 Piedmont Avenue, #150  
Oakland, CA 94611



Tim Hallen

Registered Environmental Assessor 08006

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COVER SHEET

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## 1. SITE LOCATION

The subject multi-unit residential property is located at 1607 2<sup>nd</sup> Avenue, at the northeast corner of the intersection of 2nd Avenue and East 16<sup>th</sup> Street in Oakland, California. Figure 1 attached shows the general site location.

## 2. SITE HISTORY

One underground storage tank (UST) containing heating oil was located beneath the sidewalk along the East 16<sup>th</sup> Street frontage of the property. The tank had a capacity of approximately 1500 gallons, measuring approximately 10 feet in length by 5 feet in diameter, and was constructed of single wall bare steel. The fill port was located at the east end of the tank. The age of the tank is unknown. The owner had no prior knowledge of the tank nor is there any indication of previous site investigation activities. The approximate location of the tank as well as nearby streets is shown on the attached Figure 2.

## 3. TANK REMOVAL

In October 2014, Golden Gate Tank Removal, Inc. (GGTR) applied for and obtained permits for the tank removal activities from the City of Oakland Fire Department (OFD) and City of Oakland Planning and Building Department (OPB). A copy of this agency permit is included as an attachment.

On November 13, 2014, GGTR mobilized its equipment and began work on the project. The concrete sidewalk covering the tank was removed and disposed of at a local recycler. The overburden soil covering the tank was removed and stockpiled on visqueen sheeting adjacent to the tank excavation. Field measurements indicated that the bottom of the tank was 9 feet below grade (fbg) surface. The subsurface product piping extending between the top of the tank to the remote fill port located adjacent to the interior foundation wall of the building structure were cut at each end, drained of any residual product and removed from the excavation area. Exposed vent lines and fill pipes were removed; product lines were cut and plugged.

As part of the removal operations, GGTR contracted NRC Environmental Services to pump the residual product from the tank and piping into a vacuum tanker truck. GGTR then washed the interior of the tank with 180-degree water using a 3,000-psi pressure washer. A non-toxic enzyme was used to break down thick oil deposits. GGTR scraped the residual oil sludge from interior sidewalls of the UST and utilized absorbent material to absorb any residual fluid. GGTR then removed the oily sludge and spent absorbent from the UST and transferred the waste directly into a 55-gallon storage drum. After a third washing, NRC, on November 17, 2014, removed the wash and rinse water from the tank and transported the Non-RCRA Hazardous Waste Liquid (totaling 1,550 Gallons) under Uniform Hazardous Waste Manifest No. 012319005JJK to the Riverbank Oil Transfer, LLC facility in Riverbank, California. A copy of the liquid waste manifest is included as an attachment

On November 17, 2014, OFD Inspector Sheryl Skillern tested the lower explosive limit (LEL) and oxygen (O<sub>2</sub>) levels in the tank with a Cannonball 3 combustible gas meter. The LEL and O<sub>2</sub> levels were 0% and 20.07%, respectively.

On November 18, 2014, as directed by Inspector Sheryl Skillern of the OFD, GGTR removed the tank from the excavation. After a visual inspection, the tank was loaded into a truck and transported as scrap metal to Circosta Iron & Metal, Inc. in San Francisco, California. A copy of

the Certificate of Disposal and Circosta Scrap Metal Recycling Receipt are attached. Figure 3 depicts photographs of the tank removal activities.

#### **4. TANK AND SOIL CONDITION**

The tank was found to be in poor condition with visible holes. Soil discoloration and hydrocarbon odors were observed in the tank overburden soil and/or in the soil beneath the tank. Soil observed during the UST removal was predominantly clay. No groundwater was observed in the excavation during tank removal activities. An Underground Storage Tank Unauthorized Release (Leak) / Contamination Site Report was required by the SFDPH due to holes observed in the tank. A copy of this report is included as an attachment.

#### **5. TANK SAMPLING**

On November 18, 2014, under the direction of Sheryl Skillern of the OFD, GGTR collected one four-point composite soil sample from the stockpiled overburden and two discrete soil samples from the former tank excavation. The composite sample was labeled 9464-SP and the discrete samples were labeled 9464-E11' and 9464-W11'. Soil sample 9464-E11' and 9464-W11' were collected 2 feet below the respective east and west ends of the tank bottom at approximately 11 feet below grade. All samples were transported to Accutest Laboratories (State ELAP Certification #08258) under formal chain-of-custody protocol for the required analyses. Figure 2 depicts the approximate soil sample locations.

#### **6. TANK SAMPLE ANALYSIS**

All samples were analyzed for Total Petroleum Hydrocarbons (TPH) as TPH (C10-C28) by EPA Method SW846 8015B M, and Benzene, Toluene, Ethyl Benzene, Total Xylenes (BTEX), Naphthalene by EPA Method SW846 8260B. Additionally, the stockpile composite sample was analyzed for Total Lead by Method SW846 6010B.

A summary of the analytical results is included in the Table provided by Accutest Northern California, Inc. A copy of the laboratory certificate of analysis and chain of custody form is included as an attachment.

#### **7. WASTE MANAGEMENT & SOIL DISPOSAL**

Because of elevated concentration of TPH in the composite soil sample 9464-SP, GGTR was required by the OFD to dispose of the excavated overburden stockpile soil. The soil was profiled for disposal acceptance at the Keller Canyon Landfill Facility located in Pittsburg, California.

On December 4, 2014, GGTR contacted Poli Trucking to transport and dispose of 18.25 tons of impacted soil and GGTR transported 3.68 tons of impacted soil under Non-Hazardous Waste Manifest No. 42121420705 to the Keller Canyon Landfill facility in Pittsburg, California. Copies of the solid waste manifests and associated weight tags are included as attachments.

On December 10, 2014, GGTR contracted Big Sky Environmental Solutions to transport one 55-gallon drum of waste solid (oil absorbent) under Uniform Hazardous Waste Manifest No. 013012484JJK to the US Ecology landfill in Beatty, Nevada. A copy of waste manifest is included as an attachment.

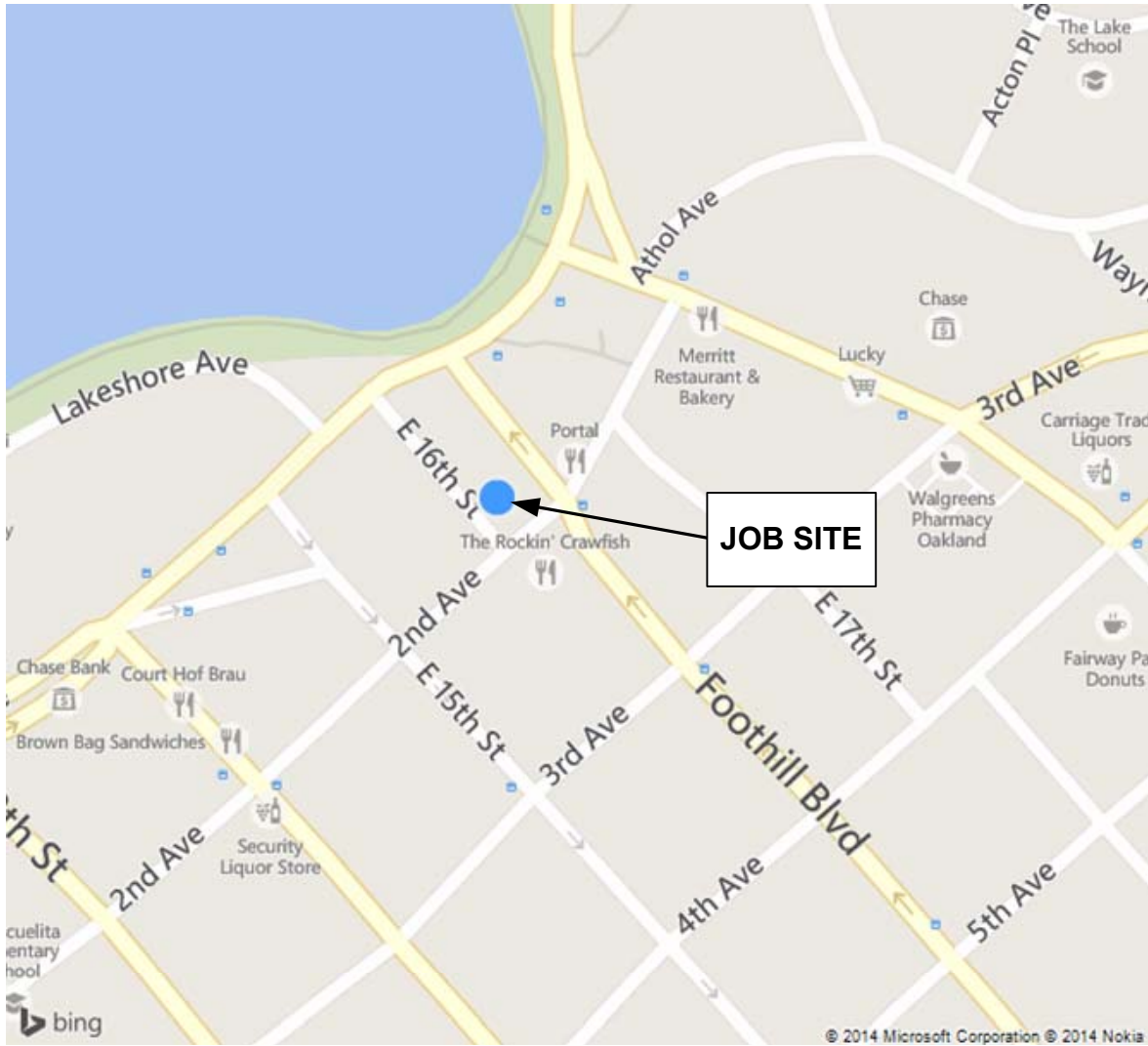
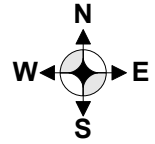
## **8. SITE RESTORATION**

On December 2, 2014, GGTR backfilled the excavation with the clean imported material. The soil was placed in 12” lifts and compacted using a jumping jack compactor. The sidewalk was subsequently replaced in conformance with OPB requirements.

## **9. FINDINGS / RECOMMENDATION**

There were visible holes in the tank, as well as visual evidence of contamination in the soil beneath the tank. Following OFD approval, the impacted overburden soil was removed, property profiled and transported for disposal to Keller Canyon Landfill Facility. The contents of the tank were disposed of according to all applicable regulations. Groundwater was not encountered in the excavation during the tank removal or sampling activities. The analytical results from the State Certified Laboratory following the tank removal and remedial activities were non-detect to insignificant and acceptable by the OFD; therefore, GGTR recommends no further action at the site.

# FIGURES



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

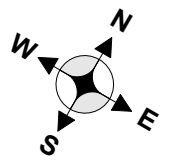
**VICINITY MAP**  
1607 2<sup>nd</sup> Avenue  
Oakland, CA 94606

GGTR Project No.9464

Drawing By: AC

October 2014

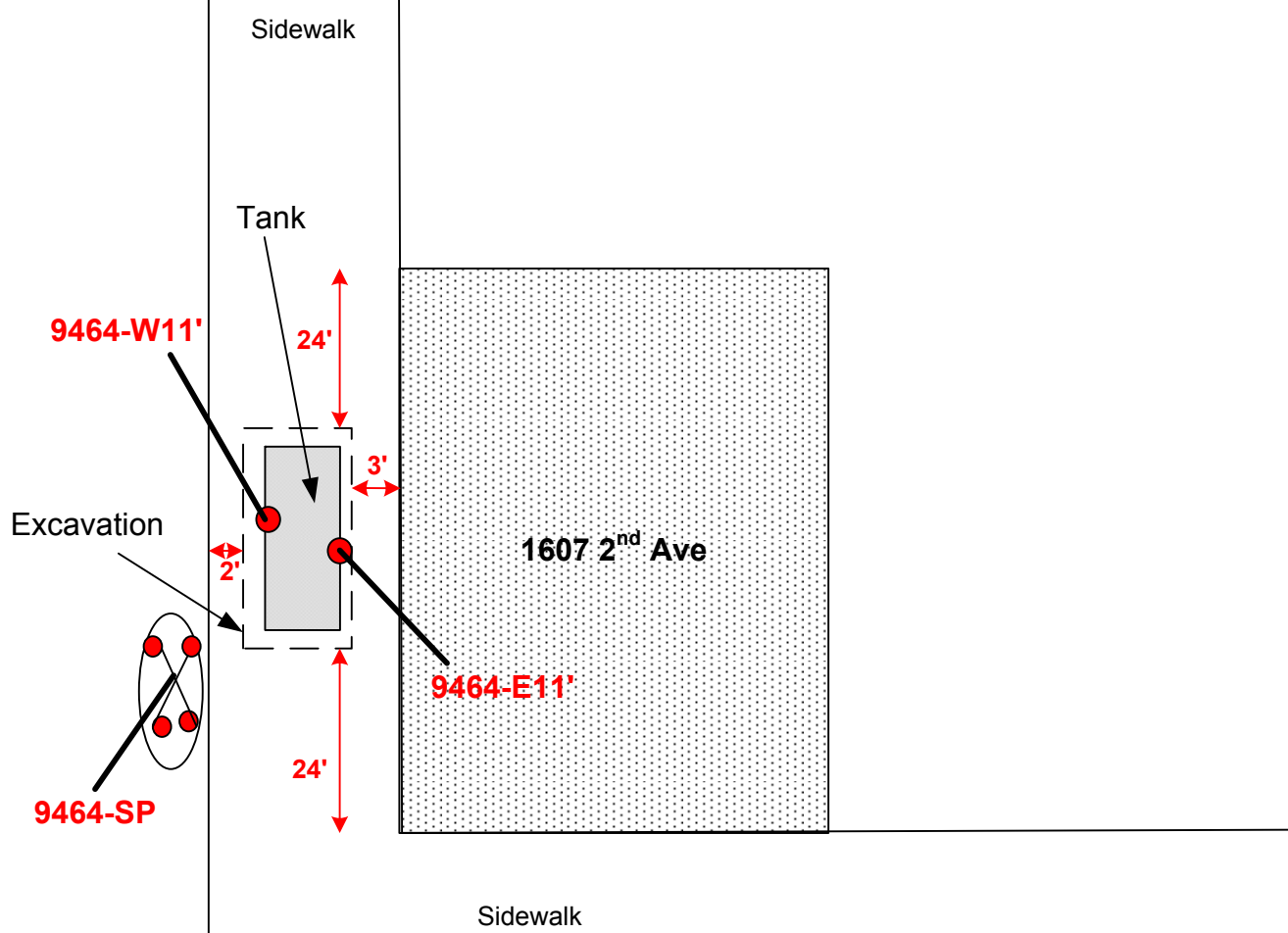
Figure 1



Lakeshore Ave.

E 16<sup>th</sup> St.

Foothill Blvd.



2<sup>nd</sup> Ave.

Not To Scale

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

**Site Drawing**  
1607 2<sup>nd</sup> Avenue  
Oakland, CA 94606

GGTR Project No. 9464

Drawing By: AC

December 2014

Figure 2





**UST READY TO REMOVED  
FROM EXCAVATION**

**TANK REMOVAL IN PROCESS**



**TANK READY TO BE  
TRANSPORTED FOR DISPOSAL**

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

**UST REMOVAL**  
1607 2<sup>nd</sup> Avenue  
Oakland, CA 94606

GGTR Project No. 9464

Drawing By: AC

December 2014

Figure 3

# TABLE



<b>Accutest Northern California, Inc.</b>		<b>Nov 20, 2014 23:04 pm</b>			
<b>Job Number:</b>	<b>C37203</b>				
<b>Account:</b>	<b>Golden Gate Tank Removal</b>				
<b>Project:</b>	<b>1607 2nd Avenue - Oakland, CA</b>				
<b>Project Number:</b>	<b>9464</b>				
				<b>Legend:</b>	<b>Hit</b>
<b>Client Sample ID:</b>		<b>9464-E11'</b>	<b>9464-SP</b>	<b>9464-W11'</b>	
<b>Lab Sample ID:</b>		<b>C37203-1</b>	<b>C37203-3</b>	<b>C37203-2</b>	
<b>Date Sampled:</b>		<b>11/18/2014</b>	<b>11/18/2014</b>	<b>11/18/2014</b>	
<b>Matrix:</b>		<b>Soil</b>	<b>Soil</b>	<b>Soil</b>	
<b>GC/MS Volatiles (SW846 8260B)</b>					
Benzene	ug/kg	ND (0.50)	ND (20)	ND (0.50)	
Toluene	ug/kg	ND (0.50)	ND (20)	ND (0.50)	
Ethylbenzene	ug/kg	ND (0.50)	ND (20)	ND (0.50)	
Xylene (total)	ug/kg	ND (1.0)	ND (40)	ND (1.0)	
Naphthalene	ug/kg	ND (1.0)	345	8.7	
<b>GC Semi-volatiles (SW846 8015B M)</b>					
TPH (C10-C28)	mg/kg	0.922 J	307	2.14 J	
<b>Metals Analysis</b>					
Lead	mg/kg	-	5.7	-	

# **ATTACHMENTS**

**ANALYTICAL REPORT**  
**CERTIFICATE OF TANK DISPOSAL**  
**SCRAP METAL RECYCLING RECEIPT**  
**LIQUID WASTE MANIFEST**  
**UST UNAUTHORIZED RELEASE (LEAK) / CONTAMINATION REPORT**  
**HAZARDOUS WASTE TANK CLOSURE CERTIFICATION**  
**PERMITS**

**Technical Report for**

**Golden Gate Tank Removal**

1607 2nd Avenue - Oakland, CA

9464

Accutest Job Number: C37203

Sampling Date: 11/18/14

**Report to:**

Golden Gate Tank Removal  
1455 Yosemite Avenue  
San Francisco, CA 94124  
Data@ggtr.com; b.wheeler@ggtr.com;  
annettechen@ggtr.com; tim@ggtr.com;  
ATTN: Tim Hallen

Total number of pages in report: **34**



Test results contained within this data package meet the requirements of the National Environmental Laboratory Accreditation Program and/or state specific certification programs as applicable.



**James J. Rhudy**  
Lab Director

**Client Service contact: Tony Vega 408-588-0200**

Certifications: CA (ELAP 2910) AK (UST-092) AZ (AZ0762) NV (CA00150) OR (CA300006) WA (C925)  
DoD ELAP (L-A-B L2242)

This report shall not be reproduced, except in its entirety, without the written approval of Accutest Laboratories.  
Test results relate only to samples analyzed.

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## Sample Summary

Golden Gate Tank Removal

Job No: C37203

1607 2nd Avenue - Oakland, CA

Project No: 9464

Sample Number	Collected Date	Time By	Received	Matrix Code	Type	Client Sample ID
C37203-1	11/18/14	14:45 AM	11/18/14	SO	Soil	9464-E11'
C37203-2	11/18/14	15:20 AM	11/18/14	SO	Soil	9464-W11'
C37203-3	11/18/14	14:15 AM	11/18/14	SO	Soil	9464-SP

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Soil samples reported on a dry weight basis unless otherwise indicated on result page.

## Summary of Hits

**Job Number:** C37203  
**Account:** Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA  
**Collected:** 11/18/14

2

Lab Sample ID	Client Sample ID	Result/ Qual	RL	MDL	Units	Method
<b>C37203-1</b>	<b>9464-E11'</b>					
TPH (C10-C28)		0.922 J	3.3	0.83	mg/kg	SW846 8015B M
<b>C37203-2</b>	<b>9464-W11'</b>					
Naphthalene		8.7	5.0	1.0	ug/kg	SW846 8260B
TPH (C10-C28)		2.14 J	3.3	0.83	mg/kg	SW846 8015B M
<b>C37203-3</b>	<b>9464-SP</b>					
Naphthalene		345	200	40	ug/kg	SW846 8260B
TPH (C10-C28)		307	33	8.3	mg/kg	SW846 8015B M
Lead		5.7	1.7		mg/kg	SW846 6010B



Sample Results

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Report of Analysis

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# Report of Analysis

<b>Client Sample ID:</b> 9464-E11'		<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-1		<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil		<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8260B		
<b>Project:</b> 1607 2nd Avenue - Oakland, CA		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L37183.D	1	11/18/14	XB	n/a	n/a	VL1124
Run #2							

Run #	Initial Weight
Run #1	5.00 g
Run #2	

### Purgeable Aromatics

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	5.0	0.50	ug/kg	
108-88-3	Toluene	ND	5.0	0.50	ug/kg	
100-41-4	Ethylbenzene	ND	5.0	0.50	ug/kg	
1330-20-7	Xylene (total)	ND	10	1.0	ug/kg	
91-20-3	Naphthalene	ND	5.0	1.0	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	97%		70-130%
2037-26-5	Toluene-D8	100%		70-130%
460-00-4	4-Bromofluorobenzene	97%		70-130%

(a) All results reported on a wet weight basis.

ND = Not detected      MDL = Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

31  
3

<b>Client Sample ID:</b> 9464-E11'	<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-1	<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8015B M SW846 3550B	
<b>Project:</b> 1607 2nd Avenue - Oakland, CA	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	HH319115.D	1	11/19/14	AG	11/19/14	OP11229	GHH1407
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

**TPH Extractable**

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	0.922	3.3	0.83	mg/kg	J
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
630-01-3	Hexacosane	89%		37-122%		

(a) All results reported on a wet weight basis.

---

ND = Not detected      MDL = Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

32  
3

<b>Client Sample ID:</b> 9464-W11'	<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-2	<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8260B	
<b>Project:</b> 1607 2nd Avenue - Oakland, CA	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L37184.D	1	11/18/14	XB	n/a	n/a	VL1124
Run #2							

Run #	Initial Weight
Run #1	5.00 g
Run #2	

**Purgeable Aromatics**

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	5.0	0.50	ug/kg	
108-88-3	Toluene	ND	5.0	0.50	ug/kg	
100-41-4	Ethylbenzene	ND	5.0	0.50	ug/kg	
1330-20-7	Xylene (total)	ND	10	1.0	ug/kg	
91-20-3	Naphthalene	8.7	5.0	1.0	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	97%		70-130%
2037-26-5	Toluene-D8	101%		70-130%
460-00-4	4-Bromofluorobenzene	100%		70-130%

(a) All results reported on a wet weight basis.

---

ND = Not detected      MDL = Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

## Report of Analysis

32  
3

<b>Client Sample ID:</b> 9464-W11'	<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-2	<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8015B M SW846 3550B	
<b>Project:</b> 1607 2nd Avenue - Oakland, CA	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	HH319118.D	1	11/19/14	AG	11/19/14	OP11229	GHH1407
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.2 g	1.0 ml
Run #2		

**TPH Extractable**

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	2.14	3.3	0.83	mg/kg	J
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
630-01-3	Hexacosane	89%		37-122%		

(a) All results reported on a wet weight basis.

---

ND = Not detected      MDL = Method Detection Limit      J = Indicates an estimated value  
 RL = Reporting Limit      B = Indicates analyte found in associated method blank  
 E = Indicates value exceeds calibration range      N = Indicates presumptive evidence of a compound

# Report of Analysis

<b>Client Sample ID:</b> 9464-SP		<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-3		<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil		<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8260B		
<b>Project:</b> 1607 2nd Avenue - Oakland, CA		

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	L37230.D	1	11/19/14	XB	n/a	n/a	VL1125
Run #2							

Run #	Initial Weight	Final Volume	Methanol Aliquot
Run #1	6.24 g	5.0 ml	100 ul
Run #2			

### Purgeable Aromatics

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	200	20	ug/kg	
108-88-3	Toluene	ND	200	20	ug/kg	
100-41-4	Ethylbenzene	ND	200	20	ug/kg	
1330-20-7	Xylene (total)	ND	400	40	ug/kg	
91-20-3	Naphthalene	345	200	40	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	90%		70-130%
2037-26-5	Toluene-D8	100%		70-130%
460-00-4	4-Bromofluorobenzene	99%		70-130%

(a) All results reported on a wet weight basis.

ND = Not detected      MDL = Method Detection Limit  
 RL = Reporting Limit  
 E = Indicates value exceeds calibration range

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> 9464-SP	<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-3	<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Method:</b> SW846 8015B M SW846 3550B	
<b>Project:</b> 1607 2nd Avenue - Oakland, CA	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	HH319145.D	10	11/20/14	AG	11/19/14	OP11229	GHH1408
Run #2							

Run #	Initial Weight	Final Volume
Run #1	30.1 g	1.0 ml
Run #2		

**TPH Extractable**

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	307	33	8.3	mg/kg	
CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits		
630-01-3	Hexacosane	91%		37-122%		

(a) All results reported on a wet weight basis.

ND = Not detected      MDL = Method Detection Limit  
 RL = Reporting Limit

J = Indicates an estimated value  
 B = Indicates analyte found in associated method blank  
 N = Indicates presumptive evidence of a compound

## Report of Analysis

<b>Client Sample ID:</b> 9464-SP	<b>Date Sampled:</b> 11/18/14
<b>Lab Sample ID:</b> C37203-3	<b>Date Received:</b> 11/18/14
<b>Matrix:</b> SO - Soil	<b>Percent Solids:</b> n/a <sup>a</sup>
<b>Project:</b> 1607 2nd Avenue - Oakland, CA	

### Metals Analysis

Analyte	Result	RL	Units	DF	Prep	Analyzed By	Method	Prep Method
Lead	5.7	1.7	mg/kg	1	11/19/14	11/19/14 RS	SW846 6010B <sup>1</sup>	SW846 3050B <sup>2</sup>

(1) Instrument QC Batch: MA4410

(2) Prep QC Batch: MP8693

(a) All results reported on a wet weight basis.

---

RL = Reporting Limit



Misc. Forms

---

Custody Documents and Other Forms

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Includes the following where applicable:

- Chain of Custody



# ACCUTEST<sup>®</sup>

LABORATORIES

## CHAIN OF CUSTODY

2105 Lundy Ave, San Jose, CA 95131  
(408) 588-0200 FAX: (408) 588-0201

FED-EX Tracking #	Bottle Order Control #
Accutest Quote #	Accutest NC Job #: <b>C37203</b>

Client / Reporting Information		Project Information	
Company Name <b>Golden Gate Tank Removal, Inc.</b>	Project Name:		
Address <b>1455 Yosemite Ave.</b>	Street <b>1607 2nd Ave.</b>		
City <b>San Francisco CA 94124</b>	City <b>Oakland CA</b>		
Project Contact: <b>Tom Hallen</b>	Project # <b>9464</b>		
Phone # <b>415-512-1555</b>	EMAIL: <b>achen@ggtr.com</b>		
Sampler's Name <b>ASCENSION MORA</b>	Client Purchase Order #		

Requested Analysis	Matrix Codes
<b>XXTPH XXBIEX XXNAPHTHALENE TOTAL LEAD</b>	WW- Wastewater
	GW- Ground Water
	SW- Surface Water
	SO- Soil
	OI- Oil
	WP- Wipe
	LIG- Non aqueous Liquid
	AIR
	DW- Drinking Water (Perchlorate Only)
	LAB USE ONLY

Accutest Sample ID	Sample ID / Field Point / Point of Collection	Date	Time	Sampled by	Matrix	# of bottles	Number of preserved Bottles													
							1	2	3	4	5	6	7	8	9	10				
1	9464-E11'	11/8/14	2:45 AM	Soil		1														
2	9464-W11'	=	3:20 AM	Soil		1														
3	9464-SP	=	9:15 AM	Soil		4														

Turnaround Time (Business days)	Approved By/ Date:	<input type="checkbox"/> Commercial "A" - Results only <input type="checkbox"/> Commercial "B" - Results with QC summaries <input type="checkbox"/> Commercial "B+" - Results, QC, and chromatograms <input type="checkbox"/> FULL1 - Level 4 data package <input type="checkbox"/> EDF for Geotracker <input type="checkbox"/> EDD Format Provide EDF Global ID: _____ Provide EDF Logcode: _____
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Comments/Remarks

**7 DAY**

Emergency T/A data available VIA Lablink					
Sample Custody must be documented below each time samples change possession, including courier delivery.					
Relinquished by Sampler: <b>Ascension Mora</b>	Date/Time: <b>11-18-14</b>	Received By: <b>[Signature]</b>	Relinquished By: <b>[Signature]</b>	Date/Time: <b>11/18/14 1618</b>	Received By: <b>[Signature]</b>
Relinquished by:	Date/Time:	Received By:	Relinquished By:	Date/Time:	Received By:
3		3	4		4
Relinquished by:	Date/Time:	Received By:	Custody Seal #	Appropriate Bottle / Pres. Y/N	Headspace Y/N
6		5		Labels match Coc? Y/N	Separate Receiving Check List used: Y/N
					Cooler Temp. <b>2.0/2.0</b>

4.1  
4



### Accutest Laboratories Sample Receipt Summary

Accutest Job Number: C37203      Client: GOLDEN GATE TANK REMOVAL      Project: 1607 2ND AVE  
 Date / Time Received: 11/18/2014 4:18:00 PM      Delivery Method: Accutest Courier      Airbill #'s:

Cooler Temps (Initial/Adjusted): #1: (2/2):

#### Cooler Security

- |                           | Y or N                   |                                     |                       | Y or N                              |                          |
|---------------------------|--------------------------|-------------------------------------|-----------------------|-------------------------------------|--------------------------|
| 1. Custody Seals Present: | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. COC Present:       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Custody Seals Intact:  | <input type="checkbox"/> | <input type="checkbox"/>            | 4. Smpl Dates/Time OK | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

#### Cooler Temperature

- |                              | Y or N                              |                          |
|------------------------------|-------------------------------------|--------------------------|
| 1. Temp criteria achieved:   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Cooler temp verification: | <u>IR1;</u>                         |                          |
| 3. Cooler media:             | <u>Ice (Bag)</u>                    |                          |
| 4. No. Coolers:              | <u>1</u>                            |                          |

#### Quality Control Preservation

- |                                 | Y                                   | or                       | N                                   | N/A |
|---------------------------------|-------------------------------------|--------------------------|-------------------------------------|-----|
| 1. Trip Blank present / cooler: | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |     |
| 2. Trip Blank listed on COC:    | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |     |
| 3. Samples preserved properly:  | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                     |     |
| 4. VOCs headspace free:         | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |     |

#### Sample Integrity - Documentation

- |  | Y                                   | or                       | N |
|--|-------------------------------------|--------------------------|---|
| 1. Sample labels present on bottles:   | <input checked="" type="checkbox"/> | <input type="checkbox"/> |   |
| 2. Container labeling complete:        | <input checked="" type="checkbox"/> | <input type="checkbox"/> |   |
| 3. Sample container label / COC agree: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |   |

#### Sample Integrity - Condition

- |                                  | Y                                   | or                       | N |
|----------------------------------|-------------------------------------|--------------------------|---|
| 1. Sample recvd within HT:       | <input checked="" type="checkbox"/> | <input type="checkbox"/> |   |
| 2. All containers accounted for: | <input checked="" type="checkbox"/> | <input type="checkbox"/> |   |
| 3. Condition of sample:          | <u>Intact</u>                       |                          |   |

#### Sample Integrity - Instructions

- |  | Y                                   | or                                  | N | N/A                                 |
|--|-------------------------------------|-------------------------------------|---|-------------------------------------|
| 1. Analysis requested is clear:            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |   |                                     |
| 2. Bottles received for unspecified tests: | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |   |                                     |
| 3. Sufficient volume recvd for analysis:   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |   |                                     |
| 4. Compositing instructions clear:         | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |   | <input type="checkbox"/>            |
| 5. Filtering instructions clear:           | <input type="checkbox"/>            | <input type="checkbox"/>            |   | <input checked="" type="checkbox"/> |

Comments

## GC/MS Volatiles

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5

### QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

## Method Blank Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1124-MB	L37175.D	1	11/18/14	XB	n/a	n/a	VL1124

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-1, C37203-2

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	5.0	0.50	ug/kg	
100-41-4	Ethylbenzene	ND	5.0	0.50	ug/kg	
91-20-3	Naphthalene	ND	5.0	1.0	ug/kg	
108-88-3	Toluene	ND	5.0	0.50	ug/kg	
1330-20-7	Xylene (total)	ND	10	1.0	ug/kg	

CAS No.	Surrogate Recoveries	Limits
1868-53-7	Dibromofluoromethane	92% 70-130%
2037-26-5	Toluene-D8	101% 70-130%
460-00-4	4-Bromofluorobenzene	100% 70-130%

## Method Blank Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1125-MB	L37212.D	1	11/19/14	XB	n/a	n/a	VL1125

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-3

CAS No.	Compound	Result	RL	MDL	Units	Q
71-43-2	Benzene	ND	5.0	0.50	ug/kg	
100-41-4	Ethylbenzene	ND	5.0	0.50	ug/kg	
91-20-3	Naphthalene	ND	5.0	1.0	ug/kg	
108-88-3	Toluene	ND	5.0	0.50	ug/kg	
1330-20-7	Xylene (total)	ND	10	1.0	ug/kg	

CAS No.	Surrogate Recoveries	Limits
1868-53-7	Dibromofluoromethane	97% 70-130%
2037-26-5	Toluene-D8	100% 70-130%
460-00-4	4-Bromofluorobenzene	90% 70-130%

# Blank Spike/Blank Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1124-BS	L37171.D	1	11/18/14	XB	n/a	n/a	VL1124
VL1124-BSD	L37173.D	1	11/18/14	XB	n/a	n/a	VL1124

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-1, C37203-2

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	BSD ug/kg	BSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	40	42.2	106	38.5	96	9	81-119/20
100-41-4	Ethylbenzene	40	40.1	100	37.4	94	7	80-119/21
91-20-3	Naphthalene	40	37.2	93	35.5	89	5	78-125/23
108-88-3	Toluene	40	39.8	100	37.9	95	5	80-117/21
1330-20-7	Xylene (total)	120	121	101	113	94	7	81-122/22

CAS No.	Surrogate Recoveries	BSP	BSD	Limits
1868-53-7	Dibromofluoromethane	96%	96%	70-130%
2037-26-5	Toluene-D8	98%	98%	70-130%
460-00-4	4-Bromofluorobenzene	102%	101%	70-130%

\* = Outside of Control Limits.

5.2.1  
 5

# Blank Spike/Blank Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1125-BS	L37208.D	1	11/19/14	XB	n/a	n/a	VL1125
VL1125-BSD	L37210.D	1	11/19/14	XB	n/a	n/a	VL1125

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-3

CAS No.	Compound	Spike ug/kg	BSP ug/kg	BSP %	BSD ug/kg	BSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	40	43.4	109	41.7	104	4	81-119/20
100-41-4	Ethylbenzene	40	42.9	107	41.5	104	3	80-119/21
91-20-3	Naphthalene	40	39.1	98	37.0	93	6	78-125/23
108-88-3	Toluene	40	43.5	109	41.6	104	4	80-117/21
1330-20-7	Xylene (total)	120	129	108	124	103	4	81-122/22

CAS No.	Surrogate Recoveries	BSP	BSD	Limits
1868-53-7	Dibromofluoromethane	104%	96%	70-130%
2037-26-5	Toluene-D8	101%	99%	70-130%
460-00-4	4-Bromofluorobenzene	102%	99%	70-130%

\* = Outside of Control Limits.

5.2.2  
 5



# Laboratory Control Sample Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1124-LCS	L37174.D	1	11/18/14	XB	n/a	n/a	VL1124

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-1, C37203-2

CAS No.	Compound	Spike ug/kg	LCS ug/kg	LCS %	Limits
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CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	91%	70-130%
2037-26-5	Toluene-D8	99%	70-130%
460-00-4	4-Bromofluorobenzene	100%	70-130%

\* = Outside of Control Limits.

# Laboratory Control Sample Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
VL1125-LCS	L37211.D	1	11/19/14	XB	n/a	n/a	VL1125

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-3

CAS No.	Compound	Spike ug/kg	LCS ug/kg	LCS %	Limits
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CAS No.	Surrogate Recoveries	BSP	Limits
1868-53-7	Dibromofluoromethane	95%	70-130%
2037-26-5	Toluene-D8	100%	70-130%
460-00-4	4-Bromofluorobenzene	95%	70-130%

\* = Outside of Control Limits.

# Matrix Spike/Matrix Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
C37143-2MS	L37192.D	1	11/19/14	XB	n/a	n/a	VL1124
C37143-2MSD	L37193.D	1	11/19/14	XB	n/a	n/a	VL1124
C37143-2	L37178.D	1	11/18/14	XB	n/a	n/a	VL1124

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-1, C37203-2

CAS No.	Compound	C37143-2 ug/kg	Spike Q ug/kg	MS ug/kg	MS %	Spike ug/kg	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	ND	39.3	32.7	83	39.4	33.9	86	4	81-119/20
100-41-4	Ethylbenzene	ND	39.3	31.4	80	39.4	33.2	84	6	80-119/21
91-20-3	Naphthalene	ND	39.3	29.0	74* a	39.4	30.9	78	6	78-125/23
108-88-3	Toluene	ND	39.3	31.9	81	39.4	33.6	85	5	80-117/21
1330-20-7	Xylene (total)	ND	118	93.8	80* a	118	99.1	84	5	81-122/22

CAS No.	Surrogate Recoveries	MS	MSD	C37143-2	Limits
1868-53-7	Dibromofluoromethane	99%	100%	98%	70-130%
2037-26-5	Toluene-D8	98%	100%	101%	70-130%
460-00-4	4-Bromofluorobenzene	101%	100%	96%	70-130%

(a) Outside laboratory control limits.

\* = Outside of Control Limits.

5.4.1  
**5**

# Matrix Spike/Matrix Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
C37207-1MS	L37228.D	1	11/19/14	XB	n/a	n/a	VL1125
C37207-1MSD	L37229.D	1	11/19/14	XB	n/a	n/a	VL1125
C37207-1	L37213.D	1	11/19/14	XB	n/a	n/a	VL1125

The QC reported here applies to the following samples:

Method: SW846 8260B

C37203-3

CAS No.	Compound	C37207-1 ug/kg	Spike Q ug/kg	MS ug/kg	MS %	Spike ug/kg	MSD ug/kg	MSD %	RPD	Limits Rec/RPD
71-43-2	Benzene	4.9 U	40	21.8	55* a	39.2	25.2	64* a	14	81-119/20
100-41-4	Ethylbenzene	4.9 U	40	20.2	51* a	39.2	24.0	61* a	17	80-119/21
91-20-3	Naphthalene	4.9 U	40	18.1	45* a	39.2	19.5	50* a	7	78-125/23
108-88-3	Toluene	4.9 U	40	20.5	51* a	39.2	24.0	61* a	16	80-117/21
1330-20-7	Xylene (total)	9.7 U	120	59.3	49* a	118	70.2	60* a	17	81-122/22

CAS No.	Surrogate Recoveries	MS	MSD	C37207-1	Limits
1868-53-7	Dibromofluoromethane	98%	98%	98%	70-130%
2037-26-5	Toluene-D8	97%	97%	103%	70-130%
460-00-4	4-Bromofluorobenzene	101%	101%	95%	70-130%

(a) Outside control limits due to matrix interference.

\* = Outside of Control Limits.

5.4.2  
**5**

## GC Semi-volatiles

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### QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Blank Spike Summaries
- Matrix Spike and Duplicate Summaries

# Method Blank Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP11229-MB	HH319148.D	1	11/20/14	AG	11/19/14	OP11229	GHH1408

The QC reported here applies to the following samples:

Method: SW846 8015B M

C37203-1, C37203-2, C37203-3

CAS No.	Compound	Result	RL	MDL	Units	Q
	TPH (C10-C28)	ND	3.3	0.83	mg/kg	

CAS No.	Surrogate Recoveries	Limits
630-01-3	Hexacosane	90% 37-122%

# Blank Spike/Blank Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP11229-BS	HH319146.D	1	11/20/14	AG	11/19/14	OP11229	GHH1408
OP11229-BSD	HH319147.D	1	11/20/14	AG	11/19/14	OP11229	GHH1408

The QC reported here applies to the following samples:

Method: SW846 8015B M

C37203-1, C37203-2, C37203-3

CAS No.	Compound	Spike mg/kg	BSP mg/kg	BSP %	BSD mg/kg	BSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	33.3	27.4	82	26.7	80	3	39-102/29

CAS No.	Surrogate Recoveries	BSP	BSD	Limits
630-01-3	Hexacosane	93%	92%	37-122%

\* = Outside of Control Limits.

# Matrix Spike/Matrix Spike Duplicate Summary

**Job Number:** C37203  
**Account:** GGTRCASF Golden Gate Tank Removal  
**Project:** 1607 2nd Avenue - Oakland, CA

Sample	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
OP11229-MS	HH319121.D	3	11/19/14	AG	11/19/14	OP11229	GHH1407
OP11229-MSD	HH319122.D	3	11/19/14	AG	11/19/14	OP11229	GHH1407
C37205-1	HH319120.D	1	11/19/14	AG	11/19/14	OP11229	GHH1407

The QC reported here applies to the following samples:

Method: SW846 8015B M

C37203-1, C37203-2, C37203-3

CAS No.	Compound	C37205-1 mg/kg	Spike mg/kg	MS mg/kg	MS %	Spike mg/kg	MSD mg/kg	MSD %	RPD	Limits Rec/RPD
	TPH (C10-C28)	11.0	33.1	26.5	47	33.1	38.9	84	38* a	39-102/29

CAS No.	Surrogate Recoveries	MS	MSD	C37205-1	Limits
630-01-3	Hexacosane	83%	84%	87%	37-122%

(a) Spike recovery indicates possible matrix interference and/or sample nonhomogeneity.

\* = Outside of Control Limits.



## Metals Analysis

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## QC Data Summaries

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Includes the following where applicable:

- Method Blank Summaries
- Matrix Spike and Duplicate Summaries
- Blank Spike and Lab Control Sample Summaries
- Serial Dilution Summaries

BLANK RESULTS SUMMARY  
Part 2 - Method Blanks

Login Number: C37203  
Account: GGTRCASF - Golden Gate Tank Removal  
Project: 1607 2nd Avenue - Oakland, CA

QC Batch ID: MP8693  
Matrix Type: SOLID

Methods: SW846 6010B  
Units: mg/kg

Prep Date: 11/18/14

Metal	RL	IDL	MDL	MB raw	final
Aluminum	20	1.3	2		
Antimony	2.0	.07	.087		
Arsenic	2.0	.07	.07		
Barium	20	.04	.035		
Beryllium	1.0	.02	.012		
Boron	10	.09	.2		
Cadmium	1.0	.02	.015		
Calcium	500	.71	7.6		
Chromium	1.0	.03	.054		
Cobalt	1.0	.02	.022		
Copper	2.5	.12	.19		
Iron	20	.64	1.6		
Lead	2.0	.07	.054	0.070	<2.0
Magnesium	500	2.7	1.5		
Manganese	1.5	.01	.054		
Molybdenum	2.0	.02	.024		
Nickel	1.0	.02	.024		
Potassium	1000	1.8	1.3		
Selenium	2.0	.18	.23		
Silicon		.12			
Silver	1.0	.03	.044		
Sodium	1000	1.5	4.8		
Strontium	1.0	.02	.017		
Thallium	2.0	.05	.073		
Tin	50	.02	.41		
Titanium	1.0	.04	.079		
Vanadium	1.0	.03	.025		
Zinc	2.0	.03	.098		

Associated samples MP8693: C37203-3

Results < IDL are shown as zero for calculation purposes  
(\* ) Outside of QC limits  
(anr) Analyte not requested

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: C37203  
 Account: GGTRCASF - Golden Gate Tank Removal  
 Project: 1607 2nd Avenue - Oakland, CA

QC Batch ID: MP8693  
 Matrix Type: SOLID

Methods: SW846 6010B  
 Units: mg/kg

Prep Date: 11/18/14

Metal	C37153-1 Original MS	Spike/lot MPIR5		% Rec	QC Limits
Aluminum					
Antimony	anr				
Arsenic	anr				
Barium	anr				
Beryllium	anr				
Boron					
Cadmium	anr				
Calcium					
Chromium	anr				
Cobalt	anr				
Copper	anr				
Iron					
Lead	10.8	48.5	44.2	85.2	75-125
Magnesium					
Manganese					
Molybdenum	anr				
Nickel	anr				
Potassium					
Selenium	anr				
Silicon					
Silver	anr				
Sodium					
Strontium					
Thallium	anr				
Tin					
Titanium					
Vanadium	anr				
Zinc	anr				

Associated samples MP8693: C37203-3

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

7.1.2  
7

MATRIX SPIKE AND DUPLICATE RESULTS SUMMARY

Login Number: C37203  
 Account: GGTRCASF - Golden Gate Tank Removal  
 Project: 1607 2nd Avenue - Oakland, CA

QC Batch ID: MP8693  
 Matrix Type: SOLID

Methods: SW846 6010B  
 Units: mg/kg

Prep Date: 11/18/14

Metal	C37153-1 Original MSD	SpikeLot MPIR5	% Rec	MSD RPD	QC Limit
Aluminum					
Antimony	anr				
Arsenic	anr				
Barium	anr				
Beryllium	anr				
Boron					
Cadmium	anr				
Calcium					
Chromium	anr				
Cobalt	anr				
Copper	anr				
Iron					
Lead	10.8	49.5	45.5	85.1	2.0 20
Magnesium					
Manganese					
Molybdenum	anr				
Nickel	anr				
Potassium					
Selenium	anr				
Silicon					
Silver	anr				
Sodium					
Strontium					
Thallium	anr				
Tin					
Titanium					
Vanadium	anr				
Zinc	anr				

Associated samples MP8693: C37203-3

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (N) Matrix Spike Rec. outside of QC limits  
 (anr) Analyte not requested

7.1.2  
7

SPIKE BLANK AND LAB CONTROL SAMPLE SUMMARY

Login Number: C37203  
 Account: GGTRCASF - Golden Gate Tank Removal  
 Project: 1607 2nd Avenue - Oakland, CA

QC Batch ID: MP8693  
 Matrix Type: SOLID

Methods: SW846 6010B  
 Units: mg/kg

Prep Date: 11/18/14

Metal	BSP Result	Spikelot MPIR5	% Rec	QC Limits
Aluminum				
Antimony	anr			
Arsenic	anr			
Barium	anr			
Beryllium	anr			
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt	anr			
Copper	anr			
Iron				
Lead	44.6	50	89.2	80-120
Magnesium				
Manganese				
Molybdenum	anr			
Nickel	anr			
Potassium				
Selenium	anr			
Silicon				
Silver	anr			
Sodium				
Strontium				
Thallium	anr			
Tin				
Titanium				
Vanadium	anr			
Zinc	anr			

Associated samples MP8693: C37203-3

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

7.1.3  
7

SERIAL DILUTION RESULTS SUMMARY

Login Number: C37203  
 Account: GGTRCASF - Golden Gate Tank Removal  
 Project: 1607 2nd Avenue - Oakland, CA

QC Batch ID: MP8693  
 Matrix Type: SOLID

Methods: SW846 6010B  
 Units: ug/l

Prep Date: 11/18/14

Metal	C37153-1 Original	SDL 1:5	%DIF	QC Limits
Aluminum				
Antimony	anr			
Arsenic	anr			
Barium	anr			
Beryllium	anr			
Boron				
Cadmium	anr			
Calcium				
Chromium	anr			
Cobalt	anr			
Copper	anr			
Iron				
Lead	119	111	7.3	0-10
Magnesium				
Manganese				
Molybdenum	anr			
Nickel	anr			
Potassium				
Selenium	anr			
Silicon				
Silver	anr			
Sodium				
Strontium				
Thallium	anr			
Tin				
Titanium				
Vanadium	anr			
Zinc	anr			

Associated samples MP8693: C37203-3

Results < IDL are shown as zero for calculation purposes  
 (\*) Outside of QC limits  
 (anr) Analyte not requested

7.1.4  
7



## CERTIFICATE OF DISPOSAL

DATE: November 18, 2014

PROJECT NUMBER: 9464

PROJECT ADDRESS: 1607 2<sup>nd</sup> Avenue, Oakland, CA 94606

TANK SIZE: 1,500 gallons

ORIGINAL TANK CONTENTS: Heating Oil

---

Golden Gate Tank Removal, Inc. hereby issues CERTIFICATION that:

- This tank was cleaned by triple rinsing and allowable for disposal as scrap metal.
- The Oxygen content of the Tank was 20.07%
- The Lower Explosive Limit was 0%.
- The above tank was rendered harmless by cutting and disposed of as scrap metal at Circosta Iron and Metal, Inc.
- The above method of tank destruction is suitable for the materials involved and is accepted by the City of Oakland as an appropriate disposal method.

---

Copies of the analytical certificate the chain-of-custody and the scrap metal receipt are attached to this Certification. If there are any questions regarding this tank, please contact this office.

Golden Gate Tank Removal, Inc.

Circosta Iron and Metal Company Inc.

415-282-8568  
 1801 Evans Avenue  
 San Francisco CA 94124

RC2707

Tick#	104918	By Sam	7:05:12 AM	11/21/2014
<u>Gross</u>	<u>Tare</u>	<u>Net Lbs</u>	<u>Price</u>	<u>Amount</u>
HMS - HMS #1			(SC=\$150.00)	
10,720.00	8,940.00	1,780.00	150.00	133.50
Amt (Before Tax)				133.50
Sales Tax (0.08%)				0.00
Amt (After Tax)				\$133.50
			Ticket Total	133.50
* ONE HUNDRED THIRTY-THREE AND 50 / 100				
<u>Date</u>	<u>Mode</u>	<u>Trn #</u>		<u>Amount</u>
11/21/2014	Cash			133.50
Print Name: ASCENSION MORA				

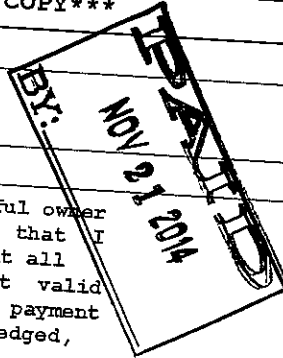
\*\*\*CUSTOMER COPY\*\*\*

Address: 728 CAMPBELL ST  
 City/ST/Zip: OAKLAND/CA/94607

State of issuance:

I hereby state that I'm the lawful owner of the material described heron, that I have a right to sell same, that all REDEMPTION material is in fact valid REDEMPTION material and that for payment received in full, hereby acknowledged,

Circosta Iron and Metal Company Inc.



X

You must return this receipt 3 days or later to receive money. THANK YOU!



<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>CAC002789205</b>	2. Page 1 of <b>1</b>	3. Emergency Response Phone <b>NRC 810-740-1300</b>	4. Manifest Tracking Number <b>012319005 JJK</b>		
5. Generator's Name and Mailing Address <b>1607 2ND AVE, LLC 4005 PIEDMONT AVE #100 OAKLAND CA 94611</b>			Generator's Site Address (if different than mailing address) <b>At ALBERT TUNO 1607 2ND AVE, LLC 1607 2ND AVE OAKLAND CA 94608</b>				
Generator's Phone: <b>510 928-1026</b>			U.S. EPA ID Number <b>CAR000030114</b>				
6. Transporter 1 Company Name <b>NRC ENVIRONMENTAL SERVICES INC.</b>			U.S. EPA ID Number				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address <b>Riverbank CA Transfer, LLC 5500 Claus Road, Bldg. 11 Riverbank CA 95367</b>			U.S. EPA ID Number <b>CAL000180818</b>				
Facility's Phone: <b>209 868-8181</b>							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
1.	<b>NON-FLAMMABLE LIQUID (ONLY WATER)</b>	<b>001</b>	<b>TT</b>	<b>1,550</b>	<b>9</b>	<b>228</b>	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information <b>WEAR PROTECTIVE EQUIPMENT, JOB/POS 07024 NRC ENVIRONMENTAL SERVICES: 1605 FERRY POINT, ALAMEDA, CA 94501</b>							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name <b>ADAM R</b>			Signature <i>[Signature]</i>		Month <b>11</b>	Day <b>17</b>	Year <b>19</b>
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name <b>John Conzoni</b>			Signature <i>[Signature]</i>		Month <b>11</b>	Day <b>17</b>	Year <b>19</b>
Transporter 2 Printed/Typed Name			Signature		Month	Day	Year
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____							
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name <b>RICH KESTRO</b>			Signature <i>[Signature]</i>		Month <b>11</b>	Day <b>18</b>	Year <b>19</b>

GENERATOR

TRANSPORTER INT'L

DESIGNATED FACILITY

<b>UNIFORM HAZARDOUS WASTE MANIFEST</b>		1. Generator ID Number <b>CAG00278205-002787295</b>		2. Page 1 of <b>1</b>		3. Emergency Response Phone <b>510-541-2128</b>		4. Manifest Tracking Number <b>013012484 JJK</b>			
		5. Generator's Name and Mailing Address <b>1807 2nd Ave LLC 4098 Piedmont Ave #150 Oakland, CA 94611</b>						Generator's Site Address (if different than mailing address) <b>1807 2nd Ave Oakland, CA 94608</b>			
6. Transporter 1 Company Name <b>BIG SKY ENVIRONMENTAL SOLUTIONS</b>						U.S. EPA ID Number <b>CAL 000348010</b>					
7. Transporter 2 Company Name						U.S. EPA ID Number					
8. Designated Facility Name and Site Address <b>DK Dixon 7300 Chevron Way Dixon CA 95820</b>						U.S. EPA ID Number <b>CAT 080012802</b>					
Facility's Phone: <b>707-893-8668</b>						<i>US Ecology (707) 259-7743 Highway 99 11 miles South of Beatty, NV 89003</i>					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1.	<b>Non RCRA HAZARDOUS WASTE, LIQUID (City Water)</b>			No.	Type					
		<i>solid</i>			<b>001</b>	<b>DM</b>	<b>200</b>	<b>2</b>	<b>223-12</b>		
						<b>FF</b>		<b>02</b>	<b>352</b>		
	2.										
3.											
4.											
14. Special Handling Instructions and Additional Information  <b>WEAR PPE ERGM171</b> <span style="float: right;"><b>EMERGENCY CONTACT JEFF RHODES</b></span>											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name						Signature			Month Day Year		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
17. Transporter Acknowledgment of Receipt of Materials											
Transporter 1 Printed/Typed Name <b>Jeff Rhodes</b>						Signature			Month Day Year		
Transporter 2 Printed/Typed Name						Signature			Month Day Year		
18. Discrepancy											
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____											
18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1.			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name						Signature			Month Day Year		

# UNDERGROUND STORAGE TANK UNAUTHORIZED RELEASE (LEAK)/ CONTAMINATION SITE REPORT

EMERGENCY <input type="checkbox"/> Yes <input type="checkbox"/> No		HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>FOR LOCAL AGENCY USE ONLY</b> I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25180.7 OF THE HEALTH AND SAFETY CODE.	
REPORT DATE		CASE #			
REPORTED BY	NAME OF INDIVIDUAL FILING REPORT		PHONE		SIGNATURE
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OWNER/OPERATOR <input type="checkbox"/> OTHER...		COMPANY OR AGENCY NAME		
	ADDRESS  STREET CITY STATE ZIP				
RESPONSIBLE PARTY	NAME  <input type="checkbox"/> Unknown				PHONE
	ADDRESS  STREET CITY STATE ZIP				
SITE LOCATION	FACILITY NAME (IF APPLICABLE)		OPERATOR		PHONE
	ADDRESS  STREET CITY COUNTY ZIP				
	CROSS STREET				
IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME			PHONE	
	REGIONAL BOARD			PHONE	
SUBSTANCES INVOLVED	(1) NAME			QUANTITY LOST (GALLONS) _____ <input type="checkbox"/> Unknown	
	(2)			_____ <input type="checkbox"/> Unknown	
DISCOVERY/ABATEMENT	DATE DISCOVERED		HOW DISCOVERED <input type="checkbox"/> Tank Test <input type="checkbox"/> Tank Removal <input type="checkbox"/> Nuisance Conditions <input type="checkbox"/> Inventory Control <input type="checkbox"/> Subsurface Monitoring <input checked="" type="checkbox"/> Other...		
	DATE DISCHARGE BEGAN  <input type="checkbox"/> Unknown		METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input type="checkbox"/> Remove Contents <input type="checkbox"/> Close Tank <input type="checkbox"/> Repair Tank <input type="checkbox"/> Change Procedure <input type="checkbox"/> Replace Tank <input type="checkbox"/> Other... <input type="checkbox"/> Repair Piping		
	HAS DISCHARGE BEEN STOPPED? <input type="checkbox"/> Yes <input type="checkbox"/> No		IF YES, DATE		
SOURCE/ CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> Tank Leak <input type="checkbox"/> Piping Leak <input type="checkbox"/> Unknown <input type="checkbox"/> Other...		CAUSE(S) <input type="checkbox"/> Overfill <input type="checkbox"/> Corrosion <input type="checkbox"/> Rupture/Failure <input type="checkbox"/> Unknown <input type="checkbox"/> Spill <input type="checkbox"/> Other...		
	CHECK ONE ONLY <input type="checkbox"/> Undetermined <input type="checkbox"/> Soil Only <input type="checkbox"/> Groundwater <input type="checkbox"/> Drinking Water    - (CHECK ONLY IF WATER WELLS HAVE ACTUALLY BEEN AFFECTED)				
CURRENT STATUS	CHECK ONE ONLY				
	<input type="checkbox"/> No Action Taken <input type="checkbox"/> Leak Being Confirmed <input type="checkbox"/> Remediation Plan <input type="checkbox"/> Preliminary Site Assessment Workplan Submitted <input type="checkbox"/> Preliminary Site Assessment Underway		<input type="checkbox"/> Case Closed (Cleanup Completed or Unnecessary) <input type="checkbox"/> Pollution Characterization <input type="checkbox"/> Post Cleanup Monitoring in Progress <input type="checkbox"/> Cleanup Underway		
REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S)				
	<input type="checkbox"/> Cap Site (CD) <input type="checkbox"/> Contamination Barrier (CB) <input type="checkbox"/> Vacuum Extract (VE) <input type="checkbox"/> Excavate & Dispose (ED)		<input type="checkbox"/> Excavate & Treat (ET) <input type="checkbox"/> No Action Required (NA) <input type="checkbox"/> Remove Free Product (FP) <input type="checkbox"/> Pump & Treat Groundwater (GT)		<input type="checkbox"/> Treatment at Hookup (HU) <input type="checkbox"/> Enhanced Bio Degradation (IT) <input type="checkbox"/> Replace Supply (RS) <input type="checkbox"/> Vent Soil (VS)
COMMENTS					



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is NOT asbestos waste, complete Sections I, II and III

## I. GENERATOR (Generator completes (a-r))

a. Generator's US EPA ID Number N/A		b. Manifest Document Number		c. Page 1 of 1	
d. Generator's Name and Location: 1607 2 <sup>nd</sup> Ave. LLC 1607 2 <sup>nd</sup> Avenue Oakland, CA 94606 f. Phone: 510-928-1026			e. Generator's Mailing Address: 1607 2 <sup>nd</sup> Ave. LLC 4096 Piedmont Ave., #150 Oakland, CA 94611 g. Phone: 510-928-1026		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description		m. Containers No. Type	n. Total Quantity
42121420705	11/20/2015	Soil			cy
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions, I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Annette Chen			q. Signature 		r. Date 10/4/14

## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: F.A. Poli Trucking			# 61		
b. Phone: 773-251-0903			LIC #		
c. Driver Name (Print) I Hrozowski		d. Signature 		e. Date 12-4-14	

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-g)

a. Disposal Facility and Site Address: Keller Canyon Landfill 901 Bailey Road Pittsburg, CA 94585 b. Phone: 925-458-9800		c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) Felipe Gomez		f. Signature 	
		g. Date 12-4-14	

## IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable			
OPERATOR'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 governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			

<b>SITE</b>	KELLER CANYON LANDFILL
	Pittsburg, CA 925-458-9800
<b>CUSTOMER</b>	674678 Golden Gate Tank Removal, Inc. 1455 Yosemite Ave San Francisco, CA 94124 42121420705

<b>SITE</b>	<b>TICKET #</b>	<b>CELL</b>
01	988326	
<b>WEIGHMASTER</b>		
Felipe C.		
<b>DATE/TIME IN</b>	<b>DATE/TIME OUT</b>	
12-04-2014 2:08 pm	12-4-2014 3:20 pm	
<b>VEHICLE</b>	<b>CONTAINER</b>	
FAP61		
<b>REFERENCE</b>	INVOICE	
<b>BILL OF LADING</b>		

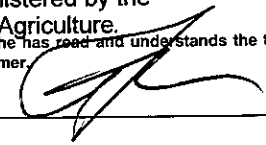
SCALE IN	GROSS WEIGHT	40,300	NET TONS	9.38	
SCALE OUT	TARE WEIGHT	21,540	NET WEIGHT	18,760	INBOUND

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
10.00	YD	TRACKING QTY				
9.38	TN	SW-BENEFICIAL REUSE OAKLAND				
1.00		ENVIRONMENTAL FEE 1				
1.00		FUEL RECOVERY FEE				

**WEIGHMASTER CERTIFICATE** - This is to certify that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food & Agriculture.

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

<b>NET AMOUNT</b>
TENDERED
CHANGE
CHECK#

SIGNATURE 



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV  
If waste is NOT asbestos waste, complete Sections I, II and III

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number N/A		b. Manifest Document Number		c. Page 1 of 1	
d. Generator's Name and Location: 1607 2 <sup>nd</sup> Ave. LLC 1607 2 <sup>nd</sup> Avenue Oakland, CA 94606 f. Phone: 510-928-1026			e. Generator's Mailing Address: 1607 2 <sup>nd</sup> Ave. LLC 4096 Piedmont Ave., #150 Oakland, CA 94611 g. Phone: 510-928-1026		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
42121420705	11/20/2015	Soil			CY
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Annette Chen		q. Signature 		r. Date 12/4/14	

## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: Poli Trucking 114 S. Maple S. San Francisco		
b. Phone: 650 589 7529 Truck # 61 Lic. # 6330361		
c. Driver Name (Print) T Hronowski	d. Signature 	e. Date 12.4.14

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-g)

a. Disposal Facility and Site Address: Keller Canyon Landfill 901 Bailey Road Pittsburg, CA 94585 b. Phone: 925-458-9800	c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.		
e. Name of Authorized Agent (Print) Felix Campa	f. Signature 	g. Date 12-4-14

## IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:	b. Responsible Agency Name and Address:
b. Phone:	d. Phone:
e. Special Handling Instructions and Additional Information:	
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both % Friable % Non-Friable	
OPERATOR'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 governmental regulations.	
g. Operator's Name and Title (Print)	i. Date
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both	

KELLER CANYON LANDFILL

Pittsburg, CA 925-458-9800

CUSTOMER  
674678  
Golden Gate Tank Removal, Inc.  
1455 Yosemite Ave  
San Francisco, CA 94124  
42121420705

SITE 01	TICKET # 98249	CELL
WEIGHMASTER Felipe C.		
DATE/TIME IN 12-04-2014 10:37 am	DATE/TIME OUT 12-4-2014 12:03 pm	
VEHICLE FAP61	CONTAINER	
REFERENCE	INVOICE	
BILL OF LADING		

SCALE IN	GROSS WEIGHT	39,280	NET TONS	8.87
SCALE OUT	TARE WEIGHT	21,540	NET WEIGHT	17,740

INBOUND

QTY	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
10.00	YD	TRACKING QTY				
8.87	TN	SW-BENEFICIAL REUSE				
1.00		ENVIRONMENTAL FEE 1				
1.00		FUEL RECOVERY FEE				
		OAKLAND				

**WEIGHMASTER CERTIFICATE** - This is to certify that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food & Agriculture.

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

NET AMOUNT
TENDERED
CHANGE
CHECK#

SIGNATURE



# NON-HAZARDOUS SPECIAL WASTE & ASBESTOS MANIFEST

If waste is asbestos waste, complete Sections I, II, III and IV  
 If waste is NOT asbestos waste, complete Sections I, II and III

## I. GENERATOR (Generator completes Ia-r)

a. Generator's US EPA ID Number N/A		b. Manifest Document Number		c. Page 1 of 1	
d. Generator's Name and Location: 1607 2 <sup>nd</sup> Ave. LLC 1607 2 <sup>nd</sup> Avenue Oakland, CA 94606 f. Phone: 510-928-1026			e. Generator's Mailing Address: 1607 2 <sup>nd</sup> Ave. LLC 4096 Piedmont Ave., #150 Oakland, CA 94611 g. Phone: 510-928-1026		
If owner of the generating facility differs from the generator, provide:					
h. Owner's Name:			i. Owner's Phone No.:		
j. Waste Profile #	k. Exp. Date	l. Waste Shipping Name and Description	m. Containers No.	n. Total Quantity	o. Unit Wt/Vol
42121420705	11/20/2015	Soil			CY
GENERATOR'S CERTIFICATION: I hereby certify that the above named material is not a hazardous waste as defined by 40 CFR 261 or any applicable state law, has been properly described, classified and packaged, and is in proper condition for transportation according to applicable regulations; AND, if this waste is a treatment residue of a previously restricted hazardous waste subject to the Land Disposal Restrictions. I certify and warrant that the waste has been treated in accordance with the requirements of 40 CFR 268 and is no longer a hazardous waste as defined by 40 CFR 261.					
p. Generator Authorized Agent Name (Print) Annette Que			q. Signature <i>[Signature]</i>		r. Date 12/5/14

## II. TRANSPORTER (Generator completes IIa-b and Transporter completes IIc-e)

a. Transporter's Name and Address: 1501 R 1455 ROSEMITE AVE SF 94124 TRUCK# 101 LIC. PLATE # 8K6E189		b. Phone: 415 512-1555
c. Driver Name (Print) JULIAN MALDONADO	d. Signature <i>[Signature]</i>	e. Date 12-5-14

## III. DESTINATION (Generator complete IIIa-c and Destination Site completes III d-g)

a. Disposal Facility and Site Address: Keller Canyon Landfill 901 Bailey Road Pittsburg, CA 94565 b. Phone: 925-458-9800		c. US EPA Number	d. Discrepancy Indication Space:
I hereby certify that the above named material has been accepted and to the best of my knowledge the foregoing is true and accurate.			
e. Name of Authorized Agent (Print) <i>[Signature]</i>		f. Signature <i>[Signature]</i>	g. Date 12-5-14

## IV. ASBESTOS (Generator completes IVa-f and Operator complete IVg-i)

a. Operator's Name and Address:		c. Responsible Agency Name and Address:	
b. Phone:		d. Phone:	
e. Special Handling Instructions and Additional Information:			
f. <input type="checkbox"/> Friable <input type="checkbox"/> Non-Friable <input type="checkbox"/> Both		% Friable % Non-Friable	
OPERATOR'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 governmental regulations.			
g. Operator's Name and Title (Print)		h. Signature	
		i. Date	
*Operator refers to the company which owns, leases, operates, controls, or supervises the facility being demolished or renovated, or the demolition or renovation operation or both			



SITE	KELLER CANYON LANDFILL	
	Pittsburg, CA	925-458-9800
CUSTOMER	674678 Golden Gate Tank Removal, Inc. 1455 Yosemite Ave San Francisco, CA 94124 42121420705	

SITE	TICKET #	CELL
01	988370	
WEIGHMASTER Felipe C.		
DATE/TIME IN	8:01 am	DATE/TIME OUT 8:01 am
12-05-2014		12-5-2014
VEHICLE	CONTAINER	
GGTR101		
REFERENCE	INVOICE	
BILL OF LADING		

SCALE IN	GROSS WEIGHT	16,300	NET TONS	3.68	
TARE OUT	TARE WEIGHT	8,940	NET WEIGHT	7,360	INBOUND

QTY.	UNIT	DESCRIPTION	RATE	EXTENSION	TAX	TOTAL
5.00	YD	TRACKING QTY				
3.68	TN	SW-BENEFICIAL REUSE OAKLAND				
1.00		ENVIRONMENTAL FEE 1				
1.00		FUEL RECOVERY FEE				

**WEIGHMASTER CERTIFICATE** - This is to certify that the following described commodity was weighed, measured, or counted by a weighmaster, whose signature is on this certificate, who is a recognized authority of accuracy, as prescribed by Chapter 7 (commencing with Section 12700) of Division 5 of the California Business and Professions Code, administered by the Division of Measurement Standards of the California Department of Food & Agriculture.

The undersigned individual signing this document on behalf of Customer acknowledges that he or she has read and understands the terms and conditions on the reverse side and that he or she has the authority to sign this document on behalf of the customer.

NET AMOUNT
TENDERED
CHANGE
CHECK#

SIGNATURE

**UNIFIED PROGRAM CONSOLIDATED FORM  
HAZARDOUS WASTE  
HAZARDOUS WASTE TANK CLOSURE CERTIFICATION**

Page      of     

**I. FACILITY IDENTIFICATION**

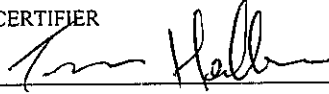
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) <sup>3.</sup> 1607 2 <sup>nd</sup> Avenue, Oakland, CA	FACILITY ID# <span style="float: right;">1.</span> _____
TANK OWNER NAME <span style="float: right;">740.</span> 1607 2 <sup>nd</sup> Ave. LLC	
TANK OWNER ADDRESS <span style="float: right;">741.</span> 4096 Piedmont Avenue, #150	
TANK OWNER CITY <span style="float: right;">742.</span> <b>Oakland</b>	STATE <span style="float: right;">743.</span> <b>CA</b>
ZIP CODE <span style="float: right;">744.</span> <b>94611</b>	

**II. TANK CLOSURE INFORMATION**

TANK INTERIOR ATMOSPHERE READINGS	Tank ID # (Attach additional copies of this page for more than three tanks)	Concentration of Flammable Vapor			Concentration of Oxygen		
		Top	Center	Bottom	Top	Center	Bottom
1	9464 <sup>745.</sup>	0% <sup>746a.</sup>	0% <sup>746b.</sup>	0% <sup>746c.</sup>	20.07% <sup>747a.</sup>	20.07% <sup>747b.</sup>	20.07% <sup>747c.</sup>
2	<sup>748.</sup>	<sup>749a.</sup>	<sup>749b.</sup>	<sup>749c.</sup>	<sup>750a.</sup>	<sup>750b.</sup>	<sup>750c.</sup>
3	<sup>751.</sup>	<sup>752a.</sup>	<sup>752b.</sup>	<sup>752c.</sup>	<sup>753a.</sup>	<sup>753b.</sup>	<sup>753c.</sup>

**III. CERTIFICATION**

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

SIGNATURE OF CERTIFIER 	STATUS OR AFFILIATION OF CERTIFYING PERSON <span style="float: right;">760.</span> Certifier is a representative of the CUPA, authorized agency, or LIA: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NAME OF CERTIFIER (Print) <sup>754.</sup> Tim Haller	Name of CUPA, authorized agency, or LIA: <span style="float: right;">761.</span> _____
TITLE OF CERTIFIER <sup>755.</sup> Project Manager	If certifier is other than CUPA / LIA check appropriate box below: <span style="float: right;">762.</span>
ADDRESS <sup>756.</sup> 1455 Yosemite Avenue	<input type="checkbox"/> a. Certified Industrial Hygienist (CIH)
CITY <sup>757.</sup> San Francisco	<input type="checkbox"/> b. Certified Safety Professional (CSP)
PHONE <sup>758.</sup> 415-512-1555	<input type="checkbox"/> c. Certified Marine Chemist (CMC)
DATE <sup>759.</sup>	<input type="checkbox"/> d. Registered Environmental Health Specialist (REHS)
CERTIFICATION TIME	<input type="checkbox"/> e. Professional Engineer (PE)
	<input type="checkbox"/> f. Class II Registered Environmental Assessor
	<input checked="" type="checkbox"/> g. Contractors' State License Board licensed contractor (with hazardous substance removal certification)

TANK PREVIOUSLY HELD FLAMMABLE OR COMBUSTIBLE MATERIALS 763.  
 (If yes, the tank interior atmosphere shall be re-checked with a combustible gas indicator prior to work being conducted on the tank.)  Yes     No

CERTIFIER'S TANK MANAGEMENT INSTRUCTIONS FOR SCRAP DEALER, DISPOSAL FACILITY, ETC.: 764.  
 Clean to bare metal . Treat as scrap.

A copy of this certificate shall accompany the tank to the recycling/disposal facility and be provided to the agency overseeing tank closure (i.e. CUPA or other authorized local agency); the owner and/or operator of the tank system; and the tank removal contractor.

Permits for which no major inspection has been approved within 180 days shall expire by limitation. No refund more than 180 days after expiration or final.



# CITY OF OAKLAND

250 FRANK H. OGAWA PLAZA ■ 2ND FLOOR ■ OAKLAND, CA 94612

Planning and Building Department  
www.oaklandnet.com

PH: 510-238-3891  
FAX: 510-238-2263  
TDD: 510-238-3254

**Permit No:** X1402570      Excavation  
**Job Site:** 1607 2ND AVE  
**Parcel No:** 020 018200300  
**District:**  
**Project Description:** Remove UG storage tank in SIDEWALK AREA ONLY.  
FIRE MARSHAL review required. 3rd FLOOR.  
Call PWA INSPECTION prior to start: 510-238-3651. 4th FLOOR.

**Filed Date:** 10/14/2014

**Schedule Inspection by calling:** 510-238-3444

**Related Permits:**

	<u>Name</u>	<u>Applicant</u>	<u>Address</u>	<u>Phone</u>	<u>License #</u>
<b>Owner:</b>	1607 2ND AVENUE LLC		4096 PIEDMONT AVE OAKLAND, CA		
<b>Contractor:</b>	GOLDEN GATE TANK REMOVAL INC	X	1455 YOSEMITE AVENUE SAN FRANCISCO, CA	(415) 512-1555	616521

**PERMIT DETAILS: Building/Public Infrastructure/Excavation/NA**

**General Information**

Excavation Type: Private Party	Special Paving Detail Required:	Tree Removal Involved:
Date Street Last Resurfaced:		Holiday Restriction (Nov 1 - Jan 1):
Worker's Compensation Company Name:		Limited Operation Area (7AM-9AM) And (4PM-6PM):
Worker's Compensation Policy #:		

**Key Dates**

Approximate Start Date:  
Approximate End Date:

**TOTAL FEES TO BE PAID AT FILING: \$436.05**

Application Fee	\$71.00	Excavation - Private Party Type	\$309.00	Records Management Fee	\$36.10
Technology Enhancement Fee	\$19.95				

Plans Checked By \_\_\_\_\_ Date \_\_\_\_\_

Permit Issued By \_\_\_\_\_ Date \_\_\_\_\_

Finalized By \_\_\_\_\_ Date \_\_\_\_\_

**FIELD COPY**



Permit No: X1402570

Parcel No: 020 018200300

Job Site: 1607 2ND AVE

Page 2 of 2

**LICENSED CONTRACTOR'S DECLARATION**

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

**CONSTRUCTION LENDING AGENCY DECLARATION**

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 8172, Civil Code).

Lender's Name \_\_\_\_\_

Branch Designation \_\_\_\_\_

Lender's Address \_\_\_\_\_

**WORKERS' COMPENSATION DECLARATION**

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

**HAZARDOUS MATERIALS DECLARATION**

I hereby affirm that the intended occupancy  WILL  WILL NOT use, handle or store any hazardous, or acutely hazardous, materials. (Checking "WILL" acknowledges that Sections 25505, 25533, and 25534 of the Health and Safety Code, as well as filing instructions were made available to you).

I HEREBY CERTIFY THE FOLLOWING: That I have read this document; that the above information is correct; and that I have truthfully affirmed all applicable declarations contained in this document. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

I hereby agree to save, defend, indemnify and keep harmless the City of Oakland and its officials, officers, employees, representatives, agents, and volunteers from all actions, claims, demands, litigation, or proceedings, including those for attorneys' fees, against the City in consequence of the granting of this permit or from the use or occupancy of the public right-of-way, public easement, or any sidewalk, street or sub-sidewalk or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted I further certify that I am the owner of the property involved in this permit or that I am fully authorized by the owner to access the property and perform the work authorized by this permit.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Contractor, or  Contractor's Agent Date \_\_\_\_\_

NOTICE: No activities related to the approved work, including storage/use of materials, is allowed within the public right-of-way without an encroachment permit. Dust control measures shall be used throughout all phases of construction.



Attention: City of Oakland

**Underground Tank Removal Application**

**1607 2ND AVENUE  
OAKLAND, CA 94606**

October 10, 2014

**GOLDEN GATE TANK REMOVAL, INC.  
1455 YOSEMITE AVENUE  
SAN FRANCISCO, CALIFORNIA 94124**

REVIEWED AND APPROVED OAKLAND FIRE DEPARTMENT BY: <i>[Signature]</i> TITLE: <i>Senior HAZ-MAT Insp</i> DATE: <i>10/30/14</i> ALL INSPECTIONS REQUIRE 48 HOURS NOTICE
--

**PROJECT # 9464**

**City of Oakland, Fire Department, Office of Emergency Services  
Hazardous Materials Program  
APPLICATION FOR UNDERGROUND TANK REMOVAL**

<b>FACILITY</b>	<b>Project Contact &amp; Phone #</b> Tim Hallen (415) 512-1555														
	<b>Facility Name</b> 1607 2nd Avenue		<b>Phone#</b> 510-928-1026												
	<b>Address</b> 1607 2nd Avenue														
	<b>Cross Street</b> E 16th Street														
	<b>Owner/Operator</b> 1607 2nd Ave. LLC		<b>Phone #</b> 510-928-1026												
	<b>CONTRACTOR</b>	<b>Contractor Name</b> Golden Gate Tank Removal, Inc.		<b>Phone #</b> (415) 512-1555											
<b>Contractor Address</b> 1455 Yosemite Ave. <b>CA License #</b> 616521		<b>Class</b> A-Haz, C-8													
<b>Hazardous Waste Certified:</b> (Qualifying license category <u>A-Haz, C-8</u> ) Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		<b>Workers Comp#</b> 1947693-14													
<b>City of Oakland Business Tax License #</b> 1307584		<b>Permit #</b>													
<b>Does this site have a leaking UST (or did it have a leaking tank system?)</b> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>															
<b>State Tank ID#</b>		<b>Tank Size</b>	<b>Material That Was Stored</b>	<b>Proposed Removal Date</b>											
39- 1 (one)		1500 Gallons	Heating Oil	A.S.A.P.											
39-															
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			<table border="1" style="width:100%;"> <tr> <td align="center" colspan="2"><b>REVIEWED AND APPROVED</b></td> </tr> <tr> <td align="center" colspan="2"><b>OAKLAND FIRE DEPARTMENT</b></td> </tr> <tr> <td>BY: <u>[Signature]</u></td> <td></td> </tr> <tr> <td>TITLE: <u>Senior Haz Mat Insp</u></td> <td></td> </tr> <tr> <td>DATE: <u>10/30/14</u></td> <td></td> </tr> <tr> <td align="center" colspan="2"><b>ALL INSPECTIONS REQUIRE 48 HOURS NOTICE</b></td> </tr> </table>	<b>REVIEWED AND APPROVED</b>		<b>OAKLAND FIRE DEPARTMENT</b>		BY: <u>[Signature]</u>		TITLE: <u>Senior Haz Mat Insp</u>		DATE: <u>10/30/14</u>		<b>ALL INSPECTIONS REQUIRE 48 HOURS NOTICE</b>	
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BY: <u>[Signature]</u>															
TITLE: <u>Senior Haz Mat Insp</u>															
DATE: <u>10/30/14</u>															
<b>ALL INSPECTIONS REQUIRE 48 HOURS NOTICE</b>															
<b>TANKS</b>	<p align="center"> <input type="checkbox"/> APPROVED      <input type="checkbox"/> APPROVED WITH CONDITION(S)      <input type="checkbox"/> DISAPPROVED         </p>														
	<b>PLAN REVIEWER'S SIGNATURE</b>		<b>DATE OF APPROVAL</b>												
<b>PLAN</b>	<p><b>APPLICANT MUST PERFORM ALL WORK IN ACCORDANCE WITH CITY OF OAKLAND ORDINANCES, STATE LAWS, AND RULES AND REGULATIONS OF THE CITY OF OAKLAND FIRE SERVICES AGENCY. OWNER OR LICENSED AGENT'S SIGNATURE CERTIFIES THE FOLLOWING: I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS INSTALLATION PLAN IS ISSUED, I SHALL NOT EMPLOY ANY PERSON IN SUCH A MANNER AS TO BECOME SUBJECT TO WORKER'S COMPENSATION LAWS OF CALIFORNIA. CONTRACTOR'S HIRING OR SUBCONTRACTING SIGNATURE CERTIFIES THE FOLLOWING: I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS INSTALLATION PLAN IS ISSUED, I SHALL EMPLOY PERSONS SUBJECT TO WORKER'S COMPENSATION LAWS OF CALIFORNIA.</b></p>														
	<b>APPLICANT'S SIGNATURE</b> <u>[Signature]</u>		<b>TITLE:</b> Project Coordinator <b>DATE:</b> 10/10/14												

CITY OF OAKLAND  
FIRE PREVENTION BUREAU  
250 Frank Ogawa Plaza, Ste. 3341  
OAKLAND, CALIFORNIA 94612-2032  
(510) 238-3851

APPLICATION for PERMIT to INSTALL, REMOVE or REPAIR TANKS  
In the CITY OF OAKLAND

Request Submittal Date: 10/10/14

PLEASE CIRCLE APPROPRIATE ACTIONS: Application is hereby made for permit to:

(a) Remove (b) Install (c) Repair (d) Modify (e) Abandon/Close in Place **A**

(a) Gasoline (b) Fuel oil (c) Diesel (d) Heating Oil tank(s) and excavate, commencing:

(a) four feet inside the curb line\*; (b) inside the property line; (c) aboveground; (d) underground tank(s)  
\*inside curb line, please attach copy of sidewalk/excavation permit from PLANNING AND BUILDING

on the side of E 16th Street (St.) Ave. feet of St./Ave.

Site Address: 1607 2nd Ave., Oakland, CA 94606 Present storage Heating Oil

Owner: 1607 2nd Ave. LLC Address 4096 Piedmont Ave #150 Phone 510-928-1026  
Oakland CA 94611

Applicant: Golden Gate Tank Removal, Inc. Address 1455 Yosemite Ave. Phone (415) 512-1555  
San Francisco CA 94124

Sidewalk surface to be disturbed  X Number of Tanks 1 (one) Capacity 1500 Gallons ea.

Remarks \_\_\_\_\_

Signature \_\_\_\_\_

PLEASE ATTACH/SUBMIT: (All applicants must have a City Business License Permit)

- (2) Copies of Closure Plans for underground tank removal(s)
- (2) Sets of plans and (1) copy of specifications for above ground tank removal
- (2) Sets of plans and (2) sets of application packets for underground tank installation/modifications
- (2) Sets of plans for aboveground tank installation and specifications
- copy or prepare to show Planning and Building approval for aboveground tank removal and tank repair

NOTE: FOR TANK INSTALLATION PLEASE SUBMIT THIS APPLICATION FORM ALONG WITH A APPLICATION FOR PERMIT TO OPERATE, MAINTAIN OR STORE

FOR OFFICE USE ONLY

Permit No. \_\_\_\_\_  
Copies to: Electrical Inspection

rev:05/98

Amt. Recv'd \_\_\_\_\_  
Ck# \_\_\_\_\_  
Receipt# \_\_\_\_\_

REVIEWED AND APPROVED  
OAKLAND FIRE DEPARTMENT  
Rec'd by: \_\_\_\_\_  
BY: \_\_\_\_\_  
TITLE: \_\_\_\_\_  
DATE: 10/30/14

ALL INSPECTIONS REQUIRE  
48 HOURS NOTICE

INDICATE THE RESPONSIBLE PARTY TO BE BILLED FOR ADDITIONAL FSA/OES STAFF TIME EXPENDED BEYOND THE HOURS COVERED BY THE INITIAL DEPOSIT AMOUNT. THE PARTY MUST ACKNOWLEDGE THIS RESPONSIBILITY FOR THE ADDITIONAL BILLING BY SIGNATURE AND DATE BELOW.

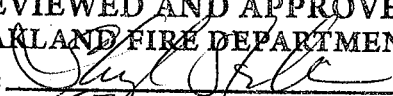
NAME 1607 2nd Ave. LLC

MAILING ADDRESS 4096 Piedmont Ave #150 Oakland CA 94611  
STREET CITY, STATE, ZIP

DAY PHONE NUMBER 510-928-1026  
area code phone #

SIGNATURE  -agent for the owner

DATE 10/10/14

REVIEWED AND APPROVED  
OAKLAND FIRE DEPARTMENT  
BY:   
TITLE: Senior Hazmat Inspector  
DATE: 10/30/14  
ALL INSPECTIONS REQUIRE  
48 HOURS NOTICE



**CITY OF OAKLAND**  
**Fire Department**  
**Fire Prevention Bureau**  
**Hazardous Materials Program**  
**250 Frank H. Ogawa Plaza, Ste. 3341**  
**Oakland, CA 94612-2032**

**UNDERGROUND TANK CLOSURE PLAN**  
(Complete according to instructions)

- 1) Name of Business 1607 2nd Avenue  
Business Owner or Contact Person (PRINT) 1607 2nd Ave. LLC
- 2) Site Address 1607 2nd Avenue  
City Oakland Zip 94606 Phone 510-928-1026
- 3) Mailing Address 4096 Piedmont Ave #150  
City Oakland Zip 94612 Phone 510-928-1026
- 4) Property Owner 1607 2nd Ave. LLC  
Business Name (if applicable) \_\_\_\_\_  
Address 4096 Piedmont Ave #150  
City, State Oakland CA Zip 94611
- 5) Generator name under which tank will be manifested  
1607 2nd Ave. LLC

EPA ID Under which tank will be manifested CAC-002-789-295

<b>REVIEWED AND APPROVED</b> <b>OAKLAND FIRE DEPARTMENT</b> BY: <u>[Signature]</u> TITLE: <u>SENIOR HAZ MAT INS</u> DATE: <u>4/30/14</u> <b>ALL INSPECTIONS REQUIRE</b> <b>48 HOURS NOTICE</b>
--

6) Contractor Golden Gate Tank Removal, Inc.  
Address 1455 Yosemite Ave.  
City San Francisco Phone (415) 512-1555  
License Type A-Haz, C-8 IDS 616521

Effective January 1, 1992, Business and Professional Code Section 7058.7 require contractors to also hold Hazardous Waste certification issued by the State Contractor License Board

7) Consultant (if applicable) n/a  
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) (Confirmed with owner operator)

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 NRC Environmental Services EPA I.D. NO. CAR000030114  
Hauler License No. 114013 License Exp. Date 3/31/2014  
Address 1605 Ferry Point  
City Alameda State CA Zip 94501

b) Product/Residual Sludge/Rinsate Disposal Site  
Name Evergreen Oil, Inc. EPA ID No. CAD980887418  
Address 6880 Smith Ave.  
City Newark State CA

REVIEWED AND APPROVED OAKLAND FIRE DEPARTMENT BY: <u>[Signature]</u> TITLE: <u>San Francisco Haz Mat Insp</u> DATE: <u>10/30/14</u> ALL INSPECTIONS REQUIRE 48 HOURS NOTICE
---

c) Tank and Piping Transporter

Name Golden Gate Tank Removal, Inc. (Dispose & Transport as Non Haz) EPA I.D. No. \_\_\_\_\_

c) Hauler License No. \_\_\_\_\_ License Exp. Date \_\_\_\_\_

Address 1455 Yosemite Ave.

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 Ave.

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 95054

State Certification No. 08258

13) Have tanks or pipes leaked in the past Yes  No  Unknown

If yes, describe \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

REVIEWED AND APPROVED  
OAKLAND FIRE DEPARTMENT  
BY: [Signature]  
TITLE: Senior HAZ MAT Insp.  
DATE: 10/30/19  
ALL INSPECTIONS REQUIRE  
48 HOURS NOTICE

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

All existing material in tank will be removed. Tank will then be triple rinsed to removal residual material. After triple rinsing, the tank will be purged

of vapors using dry ice at a ratio of 25lbs per 1, 1000 gallon tank volume. Immediately prior to removal the tank will be tested for LEL and % O2.

The LEL must be within 10% of LEL for material previously contained in tank and oxygen should be not exceed 5%.

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

The Bay Area Air Quality Management District, 415/771-6000 must also be contacted for tank removal permit.

The use of a combustible gas indicator to verify tank inertness is required. It is the contractor's responsibility to bring a working combustible gas indicator on-site to verify that the tank is inert. Note: you may be required to recalibrate the combustible gas indicator on site, to show that it is working properly.

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	unknown	soil, groundwater if present	<p>Sample will be taken at each end of tank at each end of tank at a depth of 2' into native soil and from stockpile.</p> <ol style="list-style-type: none"> <li>1. stockpile</li> <li>2. north/or east end of excavation</li> <li>3. south/or west end of excavation</li> <li>4. bottom of tank (max of 15feet)</li> </ol>

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

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**EXCAVATED/STOCKPILED SOIL**

<b>Stockpiled Soil volume (estimated)</b>  20 yards	<b>Sampling Plan</b> 4 point composite for every 50 cubic yards or 4 point composite for every 20 cubic yards
---	---

Stockpiled soil must be placed on beamed 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 no be returned to the excavation without prior approval from Fire Services Agency, Office of Emergency Services. This means that the contractor, consultant, or responsible party must communicate with the Hazardous Materials Inspector **IN ADVANCE** of backfilling operations.

16. Chemical methods and associated detection limits to be used for analyzing samples:

The Tri-Regional Board recommended minimum verification analyses and practical quantitation reporting limits should be followed.  
See attached Table 2.

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

Contaminant Sought	EPA or Other Sample Preparation Method Number	EPA or Other Analysis Method Number	Method Detection Limit
Benzene	8260B	SW846	0.005 ppm
Toluene	8260B	SW846	0.005 ppm
Ethylbenzene	8260B	SW846	0.005 ppm
Xylenes	8260B	SW846	0.010 ppm
TPH	8015B M	SW846	1.0 ppm
Naphthalene	8260B	SW846	

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18. Submit Workers Compensation Certificate copy

Name of Insurer State Compensation Insurance Fund

19. Submit Plot Plan **\*\*\*(Be Instructions)\*\*\***

20. Enclose Permit fee (See Instructions)

21. Report any 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, (ULR) form.

22. Submit a closure report to this office within 60 days of the tank removal. The 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)

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 proved above, may be needed in order to obtain approval from the Hazardous Materials 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 age and that this responsibility is not shared nor assumed by the City of Oakland.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Inspector 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 \_\_\_\_\_

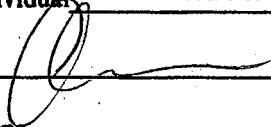
Date 10/10/14

REVIEWED AND APPROVED
OAKLAND FIRE DEPARTMENT
BY: <u>[Signature]</u>
TITLE: <u>SENIOR HAZ MAT INS</u>
DATE: <u>10/30/14</u>
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**PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Circle one)**

Name of Business 1607 2nd Avenue

Name of Individual 1607 2nd Ave. LLC

Signature  -agent for the owner Date 10/10/14

**General Instructions**

- Three (3) copies of this plan plus attachments and permit must be submitted to this Department.
- Any cutting into tanks requires Fire Services Agency approval.
- One complete copy of your approved plan must be at the construction site at all times; a copy of your approved plan must also be sent to the landowner.
- State of California Permit Application Forms A and B are to submit to this office One Form A per site, one Form B for each removed tank.

**Line Item Specific Instructions**

**2. SITE ADDRESS**

Address at which closure is taking place.

**5. EPA I.D. NO. - under which the tanks will be manifested**

EPA I.D. numbers may be obtained from the State Department of Toxic Substances Control, 916/324-1781

**6. CONTRACTOR**

Prime contractor for the project.

**10. STATE REGISTERED HAZARDOUS WASTE TRANSPORTERS/FACILITIES**

- a) All residual liquids and sludges are to be removed from tanks before tanks are inerted.
- c) Tanks must be hauled as hazardous waste.
- d) This is the place where tanks will be taken for cleaning.

**15) TANK HISTORY AND SAMPLING INFORMATION**

Use History - This information is essential and must be accurate. Include tank installation date, products stored in the tank, and the date when the tank was last used.

Material to be sampled - e.g. water, oil, sludge, soil, etc.

Location and depth of samples - e.g. beneath the tank a maximum of two feet below the native soil/backfill interface, side wall at the trig} water mark, etc.

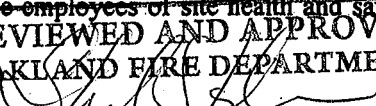
**16) CHEMICAL METHODS AND ASSOCIATED DETECTION LIMITS**

See attached Table 2.

**17) SITE HEALTH AND SAFETY PLAN**

A site specific Health and Safety plan must be submitted. We advocate the site health and safety plan include the following items, at a minimum:

- a) The name and responsibilities of the site health and safety officer.
- b) An outline of briefings to be held before work each day to appraise employees of site health and safety hazards;

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- c) Identification of health and safety hazards of each work task. Include potential fire, explosion, physical, and chemical hazards;

#### SITE HEALTH AND SAFETY PLAN

- d) For each hazard, identify the action levels (contaminant concentrations in air) or physical conditions;
  - e) Description of the work habit changes triggered by the above action levels or physical conditions;
  - f) Frequency and types of air and personnel monitoring - along with the environmental sampling techniques and instrumentation - to be used to detect the above action levels. Include instrumentation maintenance and calibration methods and frequencies;
  - h) Confined space entry procedures-(if applicable);
  - g) Decontamination procedures;
  - l) Measures to be taken to secure the site, excavation and stockpiled soils during and after work hour (e.g. barricades, caution tape, fencing, trench plates, plastic sheeting, security guard, etc.);
  - j) Spill containment/emergency/contingency plan. Be sure to include emergency phone numbers, the location of the phone nearest the site, and directions to the hospital near the site;
  - k) Documentation that all site workers have received the appropriate ASIA approved training and participate medical surveillance per 29 CFR 1910.120;
- l) A page for employees to sign acknowledging that they have read and will comply with the site health and safety plan.

The safety plan must be distributed to all employees and contractors working in hazardous waste operations on site. A complete copy of the site health and safety plan along with any standard operating procedures shall be on site and accessible at all times.

Hazardous Waste Operations and Emergency Response; Final Rule, March 6, 1989; Safety plans of certain underground tank sites may need to meet the complete requirements of this Rule.

#### 19) PLOT PLAN

The plan should consist 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 Lines;
- d) Location of all structures;
- e) Location of all relevant existing equipment including tanks and piping to be removed and dispensers;
- f) Streets;
- g) Underground conduits, sewers water lines utilities;
- h) Existing wells; drinking monitoring, etc;
- l) Depth to ground water; and
- j) All existing tank(s) and piping in addition to the tank(s) being removed.

#### 20) PERMIT FEE

A check payable to the City of Oakland for the amount indicated must accompany the plans.

- 21) Blank unauthorized Leak/Contamination Site Report forms may be obtained in limited quantities from this office or from the San Francisco Regional Water Quality Control Board (510) 286-1255. Large quantities may be directly from the State Water Resources Control Board at (916) 739-2421.

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22) TANK CLOSURE REPORT

The Tank Closure reports: General description of the closure activities, indicate;

- a) Description of tank, fittings and piping conditions. Size and former contents; note any corrosion, pitting, holes;
- b) Description of the excavation itself. Include tank and excavation depth, a log of the stratigraphic units encountered within the excavation, a description of root holes or other potential pathways the depth to any observed ground water, locations of stained or odor-bearing oil, and descriptions of any observed free product or sheen;
- c) Detailed description of sampling methods., i.e. - backhoe bucket, drive sampler, bailer, bottles (s), sleeves;
- d) Description of any remedial measures conducted at the time of tank removal;
- e) To-scale figures showing the excavation size and depth, nearby buildings, sample locations and depths, and tank and piping locations include a copy of the plot plan prepared for the Tank Closure-plan under item #19;
- f) Chain of custody records;
- g) Copies of signed laboratory reports;
- h) Copies of TSDf to Generator Manifests for all hazardous wastes hauled offsite (sludge, Rinsate, tanks and piping, contaminated soil, etc), and
- i) Documentation of the disposal of/and volume and final destination all non-manifested contaminated soil disposed offsite.

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**SITE SAFETY PLAN  
UNDERGROUND TANK REMOVAL**

REVIEWED AND APPROVED  
OAKLAND FIRE DEPARTMENT  
BY: *[Signature]*  
TITLE: *Site Safety Plan*  
DATE: *10/30/14*  
ALL INSPECTIONS REQUIRE  
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1607 2<sup>ND</sup> AVENUE  
OAKLAND, CA 94606

OCTOBER 10, 2014

**GOLDEN GATE TANK REMOVAL, INC.  
1455 YOSEMITE STREET  
SAN FRANCISCO, CALIFORNIA 94124**

**PROJECT # 9464**