ALAMEDA COUNTY HEALTH CARE SERVICES



ALEX BRISCOE, Agency Director



ENVIRONMENTAL HEALTH DEPARTMENT
OFFICE OF THE DIRECTOR
1131 HARBOR BAY PARKWAY
ALAMEDA, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335

Certified Mail #: 7011 3500 0003 1848 48

August 11, 2015

NOTICE OF RESPONSIBILITY

Site Name & Address:

CHESTNUT SQUARE 1625 CHESTNUT STREET LIVERMORE, CA 94551 ____

RO0003179

Local ID: Related ID:

NA

RWQCB ID:

NA

Global ID:

T10000007202

Responsible Party:

Date First Reported:

06/03/2015

Substance:

Gasoline, Diesel Fuel

PAYLESS DRUG STORES NORTHWEST, INC. C/O PROP. ACCTG. #4066

9275 SW PEYTON LANE WILSONVILLE, OR 97070

Funding for Oversight: LOPS - LOP State Fund

Multiple RPs?: Yes

Pursuant to sections 25297.1 and 25297.15 of the Health and Safety Code, you are hereby notified that the above site has been placed in the Local Oversight Program and the individual(s) or entity(ies) shown above, or on the attached list, has (have) been identified as the party(ies) responsible for investigation and cleanup of the above site. Section 25297.15 further requires the primary or active Responsible Party to notify all current record owners of fee title before the local agency considers cleanup or site closure proposals or issues a closure letter. For purposes of implementing section 25297.15, this agency has identified the City of Livermore as the primary or active Responsible Party. It is the responsibility of the primary or active Responsible Party to submit a letter to this agency, within 20 calendar days of receipt of this notice that identifies all current record owners of fee title. It is also the responsibility of the primary or active Responsible Party to certify to the local agency that the required notifications have been made at the time a cleanup or site closure proposal is made or before the local agency makes a determination that no further action is required. If property ownership changes in the future, you must notify this local agency within 20 calendar days from when you are informed of the change.

Any action or inaction by this local agency associated with corrective action, including responsible party identification, is subject to petition to the State Water Resources Control Board. Petitions must be filed within 30 days from the date of the action/inaction. To obtain petition procedures, please FAX your request to the State Water Board at (916) 341-5808 or telephone (916) 341-5752.

Pursuant to section 25296.10(c)(6) of the Health and Safety Code, a responsible party may request the designation of an administering agency when required to conduct corrective action. Please contact this office for further information about the designation process.

Please contact your caseworker, Jerry Wickham, at this office at (510) 567-6791 if you have questions regarding your site.

RONALD BROWDER, Acting Director

Contract Project Director

Action: New case

Reason: New case

Attachment A: Responsible Parties Data Sheet

cc: GeoTracker, eFile



HEALTH CARE SERVICES AGENCY

ALAMEDA COUNTY

1131 Harbor Bay Parkway, Suite 250

Alameda, CA 94502-6577

8772818000 T

PAYLESS DRUS STORES NORTHWEST, INC. C/O PROP. ACCTG: #4066

9275 SV NIXIE WILSON

RETURN TO SENDER
DELIVERABLE AS ADDRESSED
UNABLE TO FORMARD

14.1 8.76

恐行的

about the control of いて、 なみれないのななのいし

002179