

ALAMEDA COUNTY
 DEPARTMENT OF ENVIRONMENTAL HEALTH
 1131 HARBOR BAY PARKWAY
 ALAMEDA, CA 94502-6577
 PHONE (510) 567-6700

ACCEPTED

Underground Storage Tank Closure Permit Application
 Alameda County Division of Hazardous Materials
 1131 Harbor Bay Parkway, Suite 200
 Alameda, CA 94502-6577

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

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

Any changes or alterations of these plans and specifications must be submitted to this Department and to the Fire and Building Inspections Department to determine if such changes meet the requirements of State and local laws. Notify this Department at least 72 hours prior to the following required inspections:

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

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

THERE IS A FINANCIAL PENALTY FOR NOT OBTAINING THESE INSPECTIONS:

Contact Specialist:



Barbara Jakub
 barbara.jakub@acgov.org
 510-567-6737

Approved 1/19/2016

UNDERGROUND STORAGE TANK CLOSURE PLAN

*** Complete closure plan according to instructions ***

1. Name of Business 378 Grand Avenue
 Business Owner or Contact Person (PRINT) 378 Grand Avenue, LLC.
2. Site Address 378 Grand Avenue
 City, State Oakland, CA Zip 94610 Phone 510-540-5982
3. Mailing Address 2295 San Pablo Avenue
 City, State Oakland, CA Zip 94702 Phone 510-540-5982
4. Property Owner 378 Grand Avenue, LLC
 Business Name (if applicable) _____
 Address 2295 San Pablo Avenue
 City, State Oakland, CA Zip 94610 Phone 510-540-5982
5. Generator name under which tank will be manifested
378 Grand Avenue, LLC

FPA ID No. under which tank(s) will be manifested

CAC002840269

January 14, 2016- amended
SR0029144

c) Tank and Piping Transporter

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

Hauler License No. _____ License Exp. Date _____

d) Tank and Piping Disposal Site

Name Circosta Scrap Metal EPA I.D. No. CAD983650797

Address 1801 Evans Ave.

City, State San Francisco, CA Zip 94124

11. Sample Collector

Name Brent Wheeler/Ascension Mora

Company Golden Gate Tank Removal, Inc.

Address 1480 Carroll Avenue

City, State San Francisco, CA Zip 94124 Phone 415-512-1555

12. Laboratory

Name _____

Company Accutest Laboratories, Inc.

Address 2105 Lundy Avenue

City, State San Jose, CA Zip 95131

State Certification No. ELAP 2910

13. Have tank(s) or piping leaked in the past? Yes [] No [] Unknown [X]

If yes, describe: _____

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

Flush lines and triple rinse with water, if necessary

Removal of residual product and pressure wash tank interior

Dispose of residual product & rinsate under haz waste manifest

Certify tank as clean and non hazardous

Collect soil samples from beneath each end of tank and provide required analysis

Upon approval fill tank with approved sand /slurry mix.

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

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

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

If yes, explain reasoning _____

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

I declare that to the best of my knowledge and belief that the statements and information provided above are correct and true.

I understand that information, in addition to that provided above, may be needed in order to obtain approval from the Environmental Protection Division and that no work is to begin on this project until this plan has been approved.

I understand that any changes in design, materials, or equipment will void this plan if prior approval is not obtained.

I understand that all work performed during this project will be done in compliance with all applicable OSHA (Occupational Safety and Health Administration) requirements concerning personnel health and safety. I understand that site and worker safety are solely the responsibility of the property owner or his agent and that this responsibility is not shared nor assumed by the County of Alameda.

Once I have received my stamped, accepted closure plan, I will contact the project Hazardous Materials Specialist at least three working days in advance of site work to schedule the required inspections.

CONTRACTOR INFORMATION

Name of Business Golden Gate Tank Removal, Inc.

Name of Individual Gina Wee - Project Coordinator

Signature 

Date 01/08/2016
~~12/08/2015~~

PROPERTY OWNER OR MOST RECENT TANK OPERATOR (Check one)

Name of Business 378 Grand Avenue, LLC

Name of Individual Yuval Bobrovitch

Signature 

Date 12/08/15



Central
Bode
Westside

a U.S. CONCRETE COMPANY

CENTRAL CONCRETE SUPPLY CO., INC.

MAIN OFFICE:
755 Stockton Avenue,
San Jose, CA 95126
1-866-404-1000

TICKET NUMBER



WARNING: IRRITATION TO THE SKIN AND EYES: Contains Portland Cement. Wear rubber boots and gloves. PROLONGED CONTACT MAY CAUSE BURNS. Avoid contact with eyes and prolonged contact with skin. In case of contact with skin or eyes, flush thoroughly with water. If irritation persists, get medical attention. KEEP CHILDREN AWAY.

CONCRETE IS A PERISHABLE COMMODITY AND BECOMES THE PROPERTY OF THE PURCHASER UPON LEAVING THE PLANT. ANY CHANGES OR CANCELLATION OF ORIGINAL INSTRUCTIONS MUST BE TELEPHONED TO THE OFFICE BEFORE LOADING STARTS.

WE DO NOT GUARANTEE FINISHED RESULTS OBTAINED FROM THE LOAD OF CONCRETE AS MANY IMPORTANT FACTORS AFFECTING THE ULTIMATE QUALITY OF THE COMPLETED JOB ARE OUT OF OUR CONTROL. We do not warrant that the concrete can be used in any particular environment or soil conditions or that the concrete is fit for any particular use. Selection of the mix design and/or application of the mix design parameters are solely the responsibility of the Customer, and we assume no liability therefor.

PLEASE NOTE: THIS LOAD OF CONCRETE IS PRODUCED IN ACCORDANCE WITH STANDARD SPECIFICATIONS FOR READY MIX CONCRETE ASTM. ANY DEFECTING MATERIALS, IMPROPER FINISHING AND LACK OF CURING WILL CAUSE DAMAGE OR A DECREASE IN STRENGTH.

NOTICE: MY SIGNATURE BELOW INDICATES THAT I HAVE READ THE HEALTH WARNING NOTICE AND SUPPLIER WILL NOT BE RESPONSIBLE FOR ANY DAMAGE CAUSED WHEN DELIVERING INSIDE CURB LINE AND AGREE TO THE TERMS AND CONDITIONS ON REVERSE SIDE. TIME IN EXCESS OF FREE TIME WILL BE CHARGED AT CURRENT DELAY RATE. ALL C.O.D. DELIVERIES MUST BE PAID IN ADVANCE AND LOAD ACCEPTED BY SIGNING THIS DELIVERY TICKET BEFORE DEPARTING.

LOAD RECEIVED BY: *[Signature]*

PROPERTY DAMAGE RELEASE (TO BE SIGNED IF DELIVERY TO BE MADE INSIDE CURB LINE)

Dear Customer - The size and weight of this truck could cause damage to the premises and/or adjacent property if this load is placed where you desire. It is our wish to help you in every way that we can, but in order to do this we are requesting that you sign this RELEASE relieving this supplier and its affiliates from any responsibility from damage that may occur to the premises and/or adjacent property, buildings, sidewalks, drive-ways, curbs, etc., due to the delivery of this material, and that you also agree to help the driver remove mud from the wheels of his vehicle so that it will not litter the public street. Further, as additional consideration, the undersigned agrees to indemnify and hold harmless the driver of this truck and this supplier and its affiliates for any and all damage to the premises and/or adjacent property which may be claimed by anyone to have arisen out of delivery of this order.

SIGNED: X

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 and Agriculture.

WATER ADDED AT CUSTOMER REQUEST
EXCESSIVE WATER IS DETRIMENTAL
TO CONCRETE PERFORMANCE.

REQUESTOR'S NAME

FULL LOAD	1/4 LOAD	1/2 LOAD	3/4 LOAD
(GALLONS)	(GALLONS)	(GALLONS)	(GALLONS)

TEST RESULTS
SLUMP CONC. TEMP. AIR%

CYLINDERS TAKEN: YES NO

NAME OF TESTING LAB:

CUSTOMER GOLDEN GATE TANK REMOVAL	CUSTOMER CODE 1200280	DELIVERY ADDRESS 150 17TH ST, OAKLAND
PROJECT NAME	PROJECT CODE	
CUSTOMER P.O. #	SPECIAL INSTRUCTIONS XS-MADISON	
CUSTOMER JOB ID # 9475		RETURNED CONCRETE

LOAD QUANTITY	ORDERED QTY	CUMULATIVE QTY	PRODUCT ID	DESCRIPTION	UNIT PRICE	EXTENDED PRICE
1.00 yd	8	8	923100EX	3 5% SLURRY		
1.00 ea	0		EFUEL06	FUEL06 *2006 FUEL SURC		
1.00 ea	0		EENV12	964 *ENVIRONMENTAL		
* YD = CUBIC YARD				930	*SHORTLOAD	

BATCH TIME 12:14	LEAVE PLANT	ARRIVE JOB	BEGIN POUR	FINISH POUR	LEAVE JOB	ARRIVE AT PLANT	USAGE CODE	SUB TOTAL
TOTAL WAIT TIME	PREVIOUS TRUCK	LOAD #	SLUMP	MAP PAGE	TIME DUE ON JOB	TAX RATE	TAX	
DATE 07/16/15	ORDER # 1075	PLANT	TRUCK # 1197	DELIVERY PROFESSIONAL	12:43	ORDER GRAND TOTAL	TOTAL	
DRUM REV. AT PLANT	DRUM REV. START	DRUM REV. FINISH	DEPUTY WEIGHMASTER ROBERT JENSEN	WEIGHMASTER CERTIFICATE # 14013796				

Material	Description	Design Qty	Required	Batched	% Var	% Moisture	% TotNet	Actual
CUCEN25	C150 TYPE II/V	211 LB	211 LB	230 LB	+ 9.00%			
CLFASH	C610 Type F Ash	71 LB	71 LB	75 LB	5.63%			
ALC30A	BLEND SAND	2612 LB	2747 LB	2780 LB	1.21%	5.60%	A	5.60%
XUE12	C 260 AER	3.95 OZ	3.95 OZ	4.00 OZ	1.27%			18 g!
WATER	WATER	5A g!						
C-1502	WATERB3	1.0 sg	29.9 g!	30.7 g!	+ 2.71%			29.2 g!
Actual	New Batches: 1			Manual	12:15:05			
Lead Total:	3241 lb	Design 1.598	Water/Cement 1.478 T	Design	54.0 g!			
Slump:	8.00 in	Water in Truck: 8.0 g!	Adjust Water: 0.0 g!	/ Load	Tris Water: -8.0 g!			Actual 46.9 g! To Add: 7.1 g!



January 8, 2016

Job# 9550

ALAMEDA COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
ATTN: BARBARA JAKUB
1131 HARBOR BAY PARKWAY
ALAMEDA, CA 94502-6577

SUBJECT: 378 Grand Avenue, Oakland, CA 94610

Dear Ms. Jakub:

This letter is to amend our Alameda County Department of Environmental Health Permit (SR0029144) for closure in place of one underground storage tank (UST) at the subject property address.

During preparations for the tank removal, it was discovered that the tank is underneath a utility pole. Removal of this tank would not be safe. Photo showing the job site with the proximity of the tank to the street light pole is attached along with the revised application form.

If you have any questions regarding this matter, please contact our Project Manager Tim Hallen at (415) 512-1555.

Thank you for your attention to this matter.

Gina Wee
Golden Gate Tank Removal, Inc.

Tank
Location



GOLDEN GATE TANK REMOVAL, INC.
1480 Carroll Avenue
San Francisco, CA 94124
Ph (415) 512-1555 Fx (415) 512-0964

Figure 2.1
Utility Pole (Street Light) on top of the UST

GGTR Project No. 9550

By: EJ

January 2016

Figure 2.1

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

TYPE OF ACTION (Check one item only For an UST permanent closure or removal, complete only this section and Sections I, II, III, IV, and IX below) 430

1 NEW PERMIT 3 RENEWAL PERMIT 5 CHANGE OF INFORMATION

6 TEMPORARY UST CLOSURE 7 UST PERMANENT CLOSURE ON SITE 8 UST REMOVAL

DATE UST PERMANENTLY CLOSED 430a _____ DATE EXISTING UST DISCOVERED: 430b _____

I. FACILITY INFORMATION

FACILITY ID # (Agency Use Only) _____

BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) 3
378 Grand Avenue

BUSINESS SITE ADDRESS 103 CITY 104
378 Grand Avenue Oakland

II. TANK DESCRIPTION

TANK ID # unknown 432 TANK MANUFACTURER 433 unknown 434
TANK CONFIGURATION: THIS TANK IS
 1 A STAND-ALONE TANK
 2 ONE IN A COMPARTMENTED UNIT
Complete one page for each compartment in the unit

DATE UST SYSTEM INSTALLED 435 unknown 436 TANK CAPACITY IN GALLONS 436 1500
NUMBER OF COMPARTMENTS IN THE UNIT 437
one

III. TANK USE AND CONTENTS

TANK USE 1a MOTOR VEHICLE FUELING 1b MARINA FUELING 1c AVIATION FUELING 439
 3 CHEMICAL PRODUCT STORAGE 4 HAZARDOUS WASTE (Includes Used Oil) 5. EMERGENCY GENERATOR FUEL [HSC §25281 5(e)]
 6 OTHER GENERATOR FUEL 95 UNKNOWN 99 OTHER (Specify): 439a

CONTENTS PETROLEUM: 1a REGULAR UNLEADED 1c MIDGRADE UNLEADED 1b PREMIUM UNLEADED 440
 3 DIESEL 5 JET FUEL 6 AVIATION GAS
 8 PETROLEUM BLEND FUEL 9 OTHER PETROLEUM (Specify): 440a

NON-PETROLEUM: 7 USED OIL 10 ETHANOL 440b
 11. OTHER NON-PETROLEUM (Specify): 440b

IV. TANK CONSTRUCTION

TYPE OF TANK 1 SINGLE WALL 2 DOUBLE WALL 95 UNKNOWN 443

PRIMARY CONTAINMENT 1 STEEL 3 FIBERGLASS 6 INTERNAL BLADDER 444
 7 STEEL + INTERNAL LINING 95 UNKNOWN 99 OTHER (Specify): 444a

SECONDARY CONTAINMENT 1 STEEL 3 FIBERGLASS 6 EXTERIOR MEMBRANE LINER 7 JACKETED 445
 90 NONE 95 UNKNOWN 99 OTHER (Specify): 445a

OVERFILL PREVENTION 1 AUDIBLE & VISUAL ALARMS 2 BALL FLOAT 3 FILL TUBE SHUT-OFF VALVE 452
 4 TANK MEETS REQUIREMENTS FOR EXEMPTION FROM OVERFILL PREVENTION EQUIPMENT

V. PRODUCT / WASTE PIPING CONSTRUCTION

PIPING CONSTRUCTION 1 SINGLE-WALLED 2 DOUBLE-WALLED 99 OTHER 460

SYSTEM TYPE 1 PRESSURE 2 GRAVITY 3 CONVENTIONAL SUCTION 4. SAFE SUCTION [23 CCR §2636(a)(3)] 458
 90. NONE 95. UNKNOWN 8 FLEXIBLE 10 RIGID PLASTIC 464

SECONDARY CONTAINMENT 1. STEEL 4. FIBERGLASS 8 FLEXIBLE 10 RIGID PLASTIC 464b
 90. NONE 95 UNKNOWN 99 OTHER (Specify): 464c

PIPING/TURBINE CONTAINMENT SUMP TYPE 1. SINGLE WALL 2 DOUBLE WALL 90 NONE 464d

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

VENT PRIMARY CONTAINMENT 1. STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464e
 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464f

VENT SECONDARY CONTAINMENT 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464g
VR PRIMARY CONTAINMENT 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464h

VR SECONDARY CONTAINMENT 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464i
VENT PIPING TRANSITION SUMP TYPE 1 SINGLE WALL 2 DOUBLE WALL 90. NONE 464j

RISER PRIMARY CONTAINMENT 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464k
RISER SECONDARY CONTAINMENT 1 STEEL 4 FIBERGLASS 10 RIGID PLASTIC 90 NONE 99 OTHER (Specify) 464l

FILL COMPONENTS INSTALLED 1 SPILL BUCKET 3 STRIKER PLATE/BOTTOM PROTECTOR 4 CONTAINMENT SUMP 451a-c

VII. UNDER DISPENSER CONTAINMENT (UDC)

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

VIII. CORROSION PROTECTION

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

IX. APPLICANT SIGNATURE

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

APPLICANT SIGNATURE  DATE 1/8/2016 470

APPLICANT NAME (print) Gina Wee, Golden Gate Tank Removal, Inc. on behalf of owner 471 APPLICANT TITLE Project Coordinator 472

Hazardous Waste Tank Closure Certification

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

- Any tank system that previously held a hazardous material or a hazardous waste, that is identified as a hazardous waste, and that is destined to be disposed, reclaimed or closed in place
- This does not apply to tank systems regulated under a hazardous waste facility permit, other than permit by rule (PBR), or to tank systems regulated under a grant of interim status, nor to a tank system or any portion thereof, that meets the definition of scrap metal in 22 CCR §66260 10 and is excluded from regulation pursuant to 22 CCR §66261.6(a)(3)(B)

Refer to 22 CCR §67383 3 and 23 CCR §2672 for disposal requirements for tank systems

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

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

1. FACILITY ID NUMBER - Leave this blank. This number is assigned by the CUPA. This is the unique number which identifies your facility

3. BUSINESS NAME - Enter the full legal name of the business.

- 740 TANK OWNER NAME -
- 741 TANK OWNER ADDRESS
- 742 TANK OWNER CITY
- 743 TANK OWNER STATE
- 744 TANK OWNER ZIP CODE

Complete items 740-744, unless all items are the same as the Business Owner information (items 111-116) on the Business Owner/Operator Identification page (OES Form 2730). If the same, write "SAME AS SITE" across this section

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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



GOLDEN GATE TANK REMOVAL, INC.
1480 Carroll Avenue
San Francisco, CA 94124
Ph (415) 512-1555 Fx (415) 512-0964

VICINITY MAP
378 Grand Avenue
Oakland, CA 94610

GGTR Project No.9550

Drawing By: GW

December 2015

Figure 1



CERTIFICATE OF LIABILITY INSURANCE

GOLDE-6

OP ID: TF

DATE (MM/DD/YYYY)

09/29/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER CAL Insurance & Associates Inc License #0241094 2311 Taraval Street San Francisco, CA 94116-2253 Scott Hauge	CONTACT NAME: Scott New Business	
	PHONE (A/C, No, Ext): 415-661-6500	FAX (A/C, No): 415-661-2254
E-MAIL ADDRESS: info@cal-insure.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: State Compensation Ins. Fund		35076
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED **Golden Gate Tank Removal, Inc.**
1480 Carroll Ave
San Francisco, CA 94124

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INBR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR YWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y <input type="checkbox"/> N	<input type="checkbox"/> N/A	1947693-14	10/01/2015	10/01/2016	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E L EACH ACCIDENT \$ 1,000,000 E L DISEASE - EA EMPLOYEE \$ 1,000,000 E L DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

EVIDENC

Sample Certificate of Insurance for Evidence Purposes Only

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

SITE HAZARD INFORMATION

PLEASE PROVIDE THE FOLLOWING INFORMATION FOR THE SITE

Owners Name: 378 Grand Avenue, LLC.
Site Address: 378 Grand Avenue
Oakland, CA
Directions to Site: Cross Street: Staten Avenue

Consultant On Site: Golden Gate Tank Removal, Inc. Phone number: 415/512-1555
Site Safety Officer: Tim Hallen Phone Number: 415/512-1555
Type of Facility: Commercial Mobile Number: 415/559-0499
Site Activities: [] Drilling [] construction x Tank Excavation [] Soil Excavation
[] Work in Traffic Area [] Groundwater Extraction [] Vapor Extraction [] Above Ground Remediation
[] Other:

Hazardous Substances

Table with 3 columns: Name (CAS#), Expected Concentration, Health Affects. Row 1: Diesel, Minimal, Nausea, Dizziness.

Physical Hazards

x Noise x Excavations/Trenches
x Traffic [] Other:
x Underground Hazards
[] Overhead Lines
Potential Explosions and Fire hazards:

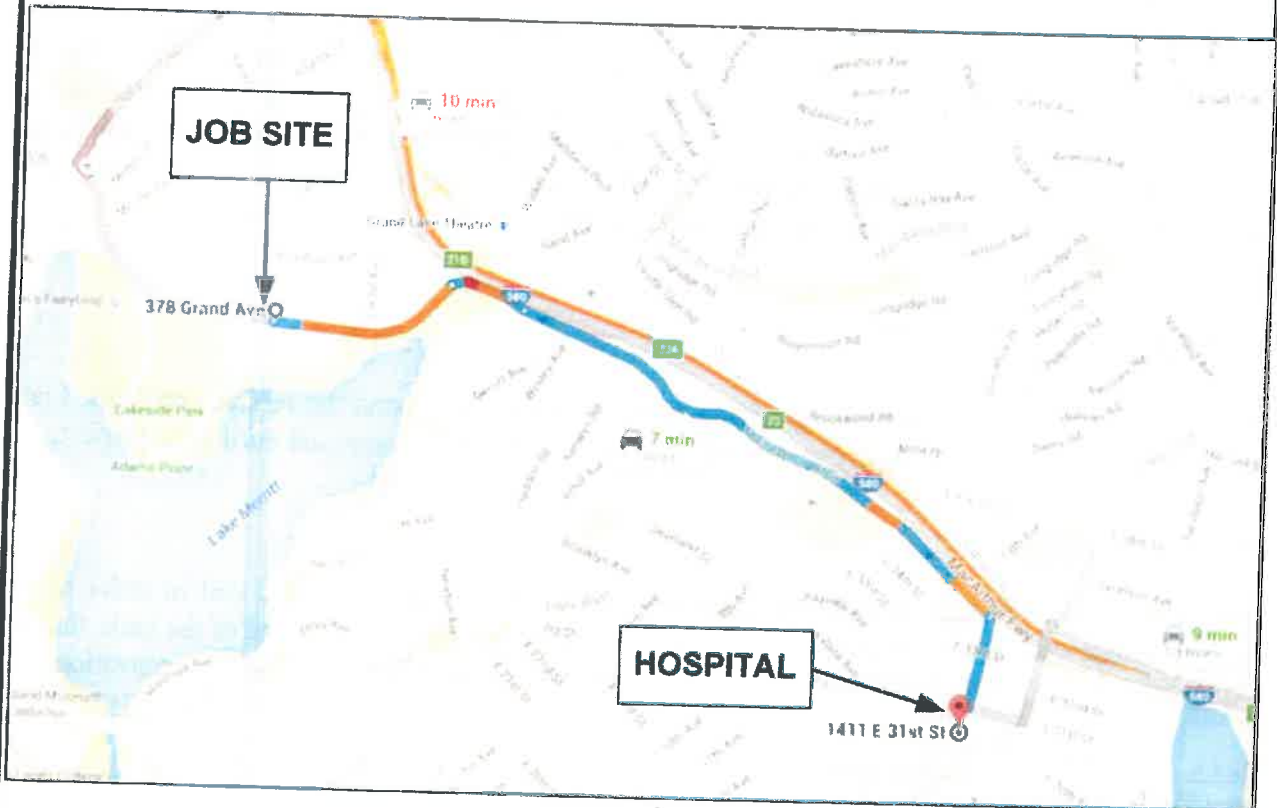
Level of Protection Equipment

[] A [] B [] C X D X See Personal Protective Equipment

Personal Protective Equipment

R = Required A = As Needed

- R Hard Hat
A Safety Boots
R Orange Vest
A Hearing Protection
Tyvek Coveralls
A Safety Eye wear (Type)
A Respirator (Type) 1/2 Face
A Filter (Type) Carbon
A Gloves (Type) Leather
Other



7 min (1.7 miles)
Head east on Grand Ave toward Staten Ave 0.4 mi
Turn right onto MacArthur Blvd 0.1 mi
Slight right to stay on MacArthur Blvd 1.0 mi
Turn right onto Stuart St 0.2 mi
Turn right onto E 31st St
Destination will be on the left 23 ft

GOLDEN GATE TANK REMOVAL, INC.
1480 Carroll Avenue
San Francisco, CA 94124
Ph (415) 512-1555 Fx (415) 512-0964

HOSPITAL MAP
Highland General Hospital
1411 E 31st Street
Oakland, CA
(510) 437-4800

GGTR Project No.9550

Drawing By: GW

December 2015

Figure H

The SSO is responsible for assisting the PM with on-site implementation of site safety plan. The SSO may suspend work anytime he/she determines that the provisions of the site safety plan are inadequate to ensure worker safety and inform the PM and HSO of individuals whose on-site behavior jeopardizes their health and safety or the health and safety of others.

4.0 HAZARD EVALUATION/CRITERIA

Chemical

The general types of chemical hazards associated with this project are exposure to various chemical substances, including but not limited to, petroleum hydrocarbon liquids and vapors, caustic and acidic mists, liquids and solids. Exposure to elevated levels of hydrocarbon vapors presents potential health risks that need to be properly controlled. Work practices and methods will be monitored to limit exposures. Where elevated exposures persist, respiratory protection will be the primary control method to protect personnel from inhalation of hydrocarbon vapors.

Physical

The general types of physical hazards associated with this project are:

- Mechanical hazards: swinging objects, machinery, etc.,
- Physical lifting, shoveling, climbing (ladder), etc.,
- Electrical hazards: buried cables and overhead power lines,
- Thermal hazards: heat stress, and heat exhaustion
- Acoustical hazards: excessive noise created by machinery.

Flammability

The general types of flammable hazards associated with this project are fire hazards: natural gas and product lines, flammable petroleum hydrocarbons, and motor driven equipment.

Petroleum distillate fuels passes two intrinsic hazardous properties, namely, flammability and toxicity. The flammable property of the oil and fuels presents a far greater hazard to field personnel than toxicity because it is difficult to protect against and can result in catastrophic consequences. Being Flammable, the vapors of volatile components of crude oil and the fuels can be explosive when confined.

Eliminating any one of the three factors needed to produce combustion can minimize the probability of fire and explosion. Two of the factors, ignition source and vapor concentration, can be controlled in many cases. Prohibiting open fires and smoking on-site, installing spark arrestors on engines and turning off engines when lei is approached can control ignition. Introducing dry ice (solid carbon dioxide) in the tank can reduce vapor concentrations in the headspace; the carbon dioxide gas will displace the combustible vapors.

5.0 HEALTH AND SAFETY DIRECTIVES

Site-Specific Safety Briefing

danger and forbidding entry must be placed around the perimeter if the areas are accessible to the public. Trenches and other large holes must be guarded with wooded or metal barricades spaced no further than 20 feet apart and connected with yellow caution tape. The barricades must be placed no less than two feet from the edge of the excavation or hole.

Entry to hazardous areas shall be limited to individuals who must work in those areas. Unofficial visitors must not be permitted to enter hazardous areas while work in those areas is in progress.

Official visitors should be discouraged from entering hazardous areas, but may be allowed to enter only if they agree to abide by the safety officer and are informed of the potential dangers that could be encountered in the areas.

Decontamination

Field decontamination of personnel and equipment is not required except when contamination is obvious (visual or by odor). Recommended de-contamination procedures follow:

Personnel

Gasoline, heating oil, diesel and oil should be removed from skin using a mild detergent and water. Hot water is more effective than cold. Liquid dishwashing detergent is more effective than hand soap. If weathered to an asphaltic condition, mechanics waterless hand cleaner is recommended for initial cleaning followed by detergent and water.

Equipment

Gloves, respirators, hard-hats, boots and goggles should be cleaned as described under personnel. However, if boots do not become clean after washing with detergent and water, they should be cleaned with a strong solution of trisodium phosphate and hot water. If this fails, clean with diesel oil followed by detergent and water to remove diesel oil.

Sampling equipment, augers, vehicle undercarriages, and tires should be steamed cleaned. The steam cleaner is a convenient source of hot water for personnel and protective equipment cleaning.

6.0 SAFETY AND HEALTH TRAINING

Each individual on the job site should have been or is preparing to attend the 40 hr. Hazardous Materials Handling Course as required by the California Occupational Safety and Health Association. In addition, the HSO conducts BI-weekly health and safety meetings.

Each morning before fieldwork begins, all field personnel, including subcontractor employees, must attend the site-specific safety briefing at their work site to receive assignments and safety procedures.

7.0 RECORD KEEPING REQUIREMENT

The following record keeping requirements will be maintained in the program file indefinitely. The particular organization responsible for these records is also listed.

employees to drink water.

When the temperature equals or exceeds 95 °F or during a heat wave, the PROJECT MANAGER will increase the number of water breaks, and will remind workers throughout the work shift to drink water. During employee training, the importance of frequent drinking of water will be stressed.

Procedures for Access to Shade include but are not limited to the following:

Note: Follow the general guidance provided above, under the Provisions for Water (identify the person assigned the task and list the specific tasks that have to be carried out).

Each CREW LEADER will bring ONE shade structures to the site, to accommodate at least 25 percent of the employees on the shift and either chairs, benches, sheets, towels or any other items to allow employees to sit and rest without contacting the bare ground. However, chairs, benches, etc. are not required for acceptable sources of shade such as trees.

The CREW LEADER will ensure that shade structures are opened and placed as close as practical to the workers, when the temperature equals or exceeds 85°F. When the temperature is below 85°F, the shade structures will be brought to the site, but will be opened and set in place upon worker(s) request.

Note: The interior of a vehicle may not be used to provide shade unless the vehicle is air-conditioned and the air conditioner is on.

The CREW LEADER will point out the daily location of the shade structures to the workers as well as allow and encourage employees to take a 5 min cool-down rest in the shade, when they feel the need to do so to protect themselves from overheating.

The CREW LEADER will ensure that the shade structures are relocated to follow along with the crew and double-check that they are as close as practical to the employees, so that access to shade is provided at all times.

In situations where trees or other vegetation are used to provide shade (such as in orchards), the CREW LEADER will evaluate the thickness and shape of the shaded area (given the changing angles of the sun during the entire shift), before assuming that sufficient shadow is being cast to protect employees.

In situations where it is not safe to provide shade (example winds of more than 40 mph), the PROJECT MANAGER will document how this determination was made, and what steps will be taken to provide shade upon request.

Procedures for Monitoring the Weather include but are not limited to:

Prior to each workday, the PROJECT MANAGER will review the forecasted temperature and humidity for the worksite and compare it against the National Weather service Heat Index to:

1. evaluate the risk level for heat illness.
2. determine when it will be necessary to make modifications to the work schedule (such as stopping work early, rescheduling the job, working at night or during the cooler hours of the day, increasing the number of water and rest breaks).

The CREW LEADER will be responsible for using a thermometer at the jobsite and checking

During a heat wave or heat spike (e.g., a sudden increase in daytime temperature of 9 degrees or more), the work day will be cut short (example 12 PM), will be rescheduled (example conducted at night or during cooler hours) or if possible cease for the day.

For new employees, the CREW LEADER will try to find ways to lessen the intensity of the employees work during a two-week break-in period (such as scheduling slower paced, less physically demanding work during the hot parts of the day and the heaviest work activities during the cooler parts of the day (early-morning or evening)). Steps taken to lessen the intensity of the workload for new employees will be documented.

The CREW LEADER will be extra-vigilant with new employees and stay alert to the presence of heat related symptoms.

The CREW LEADER will assign new employees a "buddy" or experienced coworker to watch each other closely for discomfort or symptoms of heat illness.

During a heat wave, the CREW LEADER will observe all employees closely (or maintain frequent communication via phone or radio) and be on the look out for possible symptoms of heat illness.

Procedures for Emergency Response include but are not limited to:

Prior to assigning a crew to a particular worksite, the PROJECT MANAGER will provide workers and the foreman a map along with clear and precise directions (such as streets or road names, distinguishing features and distances to major roads) of the site, to avoid a delay of emergency medical services.

Prior to assigning a crew to a particular worksite, the PROJECT MANAGER will ensure that a qualified, appropriately trained and equipped person will be available at the site, to render first aid if necessary.

All foremen and supervisors will carry cell phones or other means of communication, to ensure that emergency medical services can be called and check that these are functional at the worksite prior to each shift.

When an employee is showing symptoms of possible heat illness, CREW LEADER will take immediate steps to keep the stricken employee cool and comfortable once emergency service responders have been called (to reduce the progression to more serious illness).

Handling a Sick Employee:

When an employee displays possible signs or symptoms of heat illness, a trained first aid worker or supervisor will check the sick employee and determine whether resting in the shade and drinking cool water will suffice or if emergency service providers will need to be called.

Do not leave a sick worker alone in the shade, as he or she can take a turn for the worse!

When an employee displays possible signs or symptoms of heat illness and no trained first aid worker or supervisor is available at the site, call emergency service providers.

Call emergency service providers immediately if an employee displays signs or symptoms of heat illness (loss of consciousness, incoherent speech, convulsions, red and hot face), does not look OK or does not get better after drinking cool water and resting in the shade. While the ambulance is in route, initiate first aid (cool the worker: place in the shade, remove excess layers of clothing, place ice pack in the armpits and groin area and fan the victim). Do not let a sick worker leave the site,

Dry Ice Safety

First Aid

If you do get a burn from dry ice, frozen tissues should be flooded/soaked with tepid water. Don't use hot water. See a doctor if the skin blisters or comes off. If the burn is only red it will heal in time as any other burn.

Apply antibiotic ointment such as Neosporin™ or generic equivalent to prevent infection.

Bandage only if the burned skin area needs to be protected.

Caution:

Keep dry ice away from children if they cannot be closely supervised at all times.

Always handle dry ice with care. It is extremely cold at -109.3°F or -78.5°C . If touched very briefly dry ice may not harm skin, but contact with the skin for more than a second will freeze cells and can cause injury similar to a burn.

Wear hand protection whenever touching dry ice. An oven mitt or thick folded towel will work.

Do

Store dry ice in a thermally insulated container. The thicker the insulation, the slower it will sublime – turn into carbon dioxide gas (CO_2).

If dry ice has been in a closed auto, van, room, or walk-in, open the doors and allow adequate ventilation before entering.

If you drive with dry ice in an enclosed vehicle, be sure to have proper ventilation.

Leave area containing dry ice if you start to pant or breathe quickly.

Remember that CO_2 is heavier than air and will accumulate in low spaces.

Keep proper air ventilation wherever dry ice is stored.

Don't

Do not enter closed storage areas that have had, or now have, dry ice before airing the space out completely.

Do not store dry ice in a completely airtight container. The sublimation of dry ice to CO_2 gas will cause any airtight container to expand and possibly rupture or explode.

Do not store dry ice in unventilated rooms, cellars, autos or boat holds.

The sublimated CO_2 gas will sink to low areas and replace oxygenated air.

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

EMERGENCY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HAS STATE OFFICE OF EMERGENCY SERVICES REPORT BEEN FILED? <input type="checkbox"/> Yes <input type="checkbox"/> No	FOR LOCAL AGENCY USE ONLY 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 1/26/16	CASE #	

REPORTED BY	NAME OF INDIVIDUAL FILING REPORT Gina Wee	PHONE (415) 512-1555	SIGNATURE 	
	REPRESENTING <input type="checkbox"/> LOCAL AGENCY <input type="checkbox"/> REGIONAL BOARD <input type="checkbox"/> OWNER/OPERATOR <input checked="" type="checkbox"/> OTHER... contractor	COMPANY OR AGENCY NAME Golden Gate Tank Removal, Inc.		
ADDRESS 1480 Carroll Avenue San Francisco CA 94124				

RESPONSIBLE PARTY	NAME 378 Grand Avenue, LLC <input type="checkbox"/> Unknown	PHONE 510-540-5982		
	ADDRESS 2295 San Pablo Avenue Berkeley CA 94702			

SITE LOCATION	FACILITY NAME (IF APPLICABLE)	OPERATOR	PHONE	
	ADDRESS 378 Grand Avenue Oakland Alameda 94610			
	CROSS STREET Staten Avenue			

IMPLEMENTING AGENCIES	LOCAL AGENCY AGENCY NAME Alameda County Environmental Health -Barbara Jakub	PHONE 510-567-6737
	REGIONAL BOARD	PHONE

SUBSTANCES INVOLVED	NAME Diesel	QUANTITY LOST (GALLONS)	<input checked="" type="checkbox"/> Unknown
			<input type="checkbox"/> Unknown

DISCOVERY/ABATEMENT	DATE DISCOVERED 1/26/16	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... Tank Cleaning
	DATE DISCHARGE BEGAN	METHOD USED TO STOP DISCHARGE (CHECK ALL THAT APPLY) <input checked="" type="checkbox"/> Unknown <input checked="" type="checkbox"/> Remove Contents <input type="checkbox"/> Close Tank & Removed <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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No 01/26/16 IF YES, DATE	

SOURCE/CAUSE	SOURCE OF DISCHARGE <input type="checkbox"/> Tank Leak <input type="checkbox"/> Piping Leak <input checked="" 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...

CASE TYPE	CHECK ONE ONLY <input type="checkbox"/> Undetermined <input checked="" 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"/> Case Closed (Cleanup Completed or Unnecessary) <input checked="" type="checkbox"/> Leak Being Confirmed <input type="checkbox"/> Pollution Characterization <input type="checkbox"/> Remediation Plan <input type="checkbox"/> Post Cleanup Monitoring in Progress <input type="checkbox"/> Preliminary Site Assessment Workplan Submitted <input type="checkbox"/> Cleanup Underway <input type="checkbox"/> Preliminary Site Assessment Underway

REMEDIAL ACTION	CHECK APPROPRIATE ACTION(S) <input type="checkbox"/> Cap Site (CD) <input type="checkbox"/> Excavate & Treat (ET) <input type="checkbox"/> Treatment at Hookup (HU) <input checked="" type="checkbox"/> Other... Dispose <input type="checkbox"/> Contamination Barrier (CB) <input type="checkbox"/> No Action Required (NA) <input type="checkbox"/> Enhanced Bio Degradation (IT) <input type="checkbox"/> Vacuum Extract (VE) <input type="checkbox"/> Remove Free Product (FP) <input type="checkbox"/> Replace Supply (RS) <input type="checkbox"/> Excavate & Dispose (ED) <input type="checkbox"/> Pump & Treat Groundwater (GT) <input type="checkbox"/> Vent Soil (VS)

COMMENTS	Holes found in the tank
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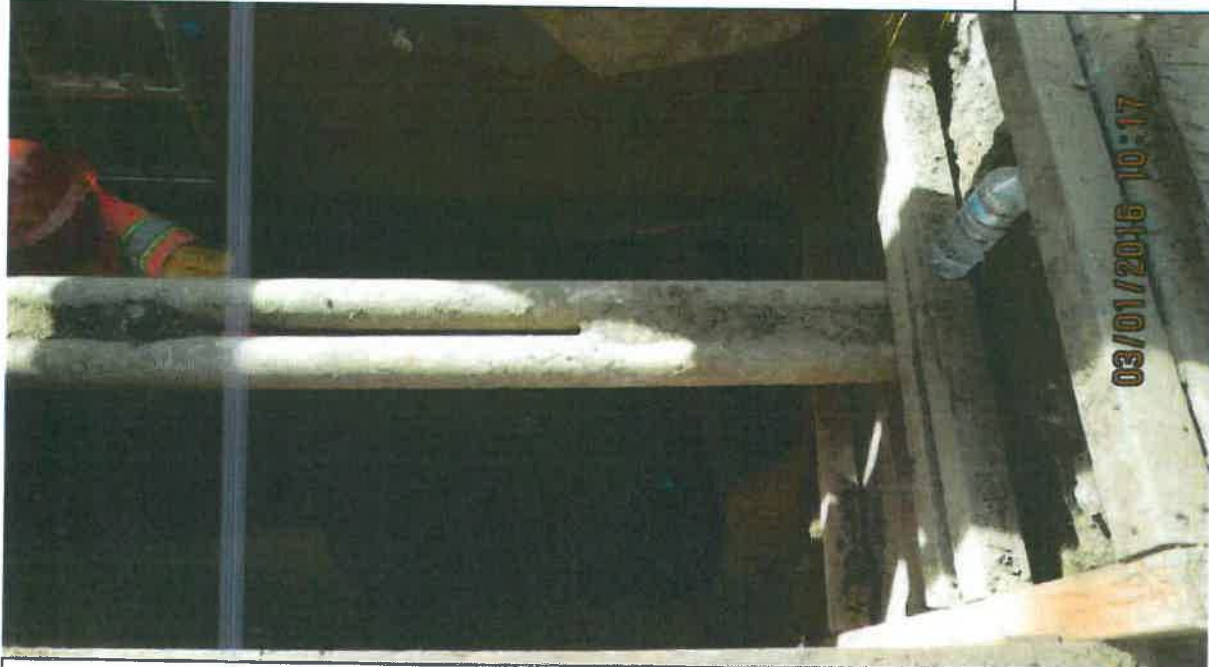
SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



ALAMEDA COUNTY
ENVIRONMENTAL HEALTH DEPARTMENT
Certified Unified Program Agency (CUPA)
1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335



DESCRIPTION: TANK PIT	Photo # 1 of 43
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DESCRIPTION: VIEW OF SHORING AND ELECTRICAL LINE	Photo # 2 of 43
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SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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DESCRIPTION: REMOVAL OF CUT PORTIONS OF TANK

Photo # 5 of 43



DESCRIPTION: VIEW OF WHAT IS BELIEVED TO BE PRODUCT, RETURN, AND VENT PIPING

Photo # 6 of 43

SRO029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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DESCRIPTION: VENT PIPE

Photo # 9 of 43



DESCRIPTION: PORTION OF TANK REMOVAL

Photo # 10 of 43

SRO029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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DESCRIPTION: SOUTH WALL SOIL SAMPLE BEING COLLECTED ~8.5 FEET	Photo # 13 of 43
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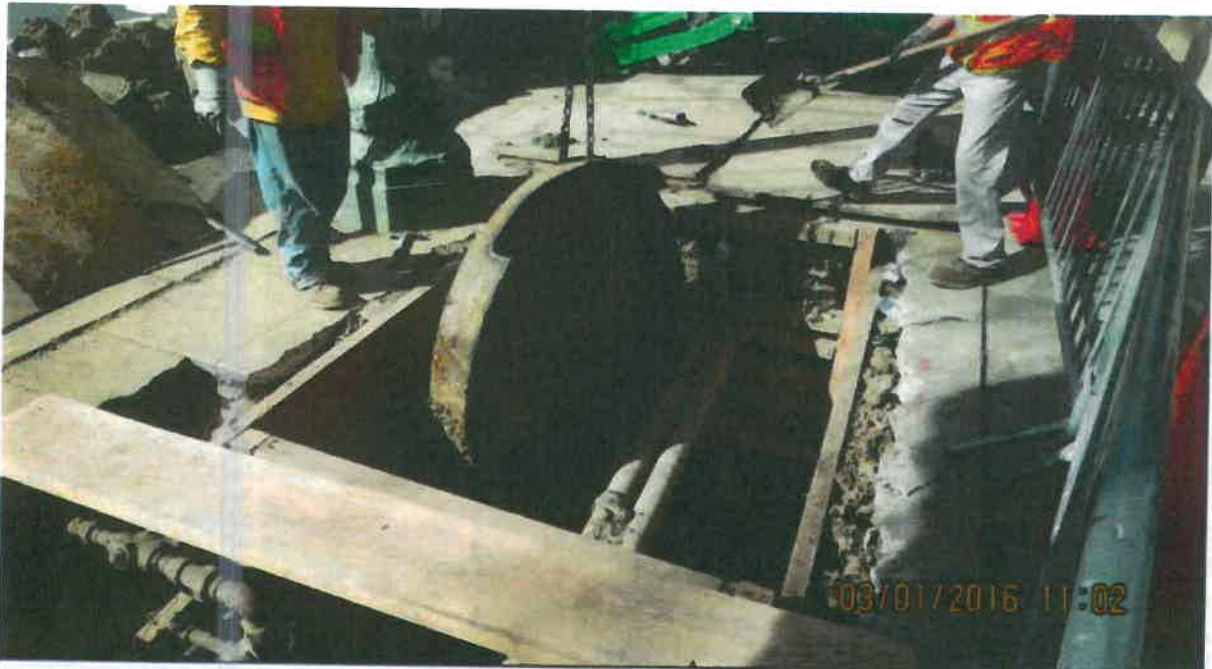


DESCRIPTION: SOUTH WALL SOIL SAMPLE BEING COLLECTED	Photo # 14 of 43
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SRO029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



ALAMEDA COUNTY
ENVIRONMENTAL HEALTH DEPARTMENT
Certified Unified Program Agency (CUPA)
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Alameda, CA 94502-6577
(510) 567-6700
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DESCRIPTION: REMOVING MORE OF THE TANK

Photo # 17 of 43



DESCRIPTION: REMOVING MORE OF THE TANK

Photo # 18 of 43

SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



ALAMEDA COUNTY
ENVIRONMENTAL HEALTH DEPARTMENT
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1131 Harbor Bay Parkway, Suite 250
Alameda, CA 94502-6577
(510) 567-6700
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DESCRIPTION: EAST END WALL SOIL SAMPLE BEING COLLECTED	Photo # 21 of 43
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DESCRIPTION: EAST END WALL SOIL SAMPLE BEING COLLECTED	Photo # 22 of 43
--	------------------

SRO029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



ALAMEDA COUNTY
ENVIRONMENTAL HEALTH DEPARTMENT
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Alameda, CA 94502-6577
(510) 567-6700
FAX (510) 337-9335



DESCRIPTION: OVER-EXCAVATING PROCESS	Photo # 25 of 43
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DESCRIPTION: OVER-EXCAVATING PROCESS - VIEW OF SOIL	Photo # 26 of 43
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SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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(510) 567-6700
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DESCRIPTION: SOIL SAMPLE COLLECTED AFTER OVER-EXCAVATING

Photo # 29 of 43



DESCRIPTION: VIEW OF TANK PIT DURING OVER-EXCAVATING PROCESS

Photo # 30 of 43

SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



ALAMEDA COUNTY
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(510) 567-6700
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03/01/2016 14:38

DESCRIPTION: VIEW OF TANK PIT AFTER OVER-EXCAVATING	Photo # 33 of 43
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03/01/2016 14:39

DESCRIPTION: VIEW OF TANK PIT AFTER OVER-EXCAVATING	Photo # 34 of 43
---	------------------

SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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DESCRIPTION: REMOVING LAST PORTION OF TANK LEFT IN PIT

Photo # 37 of 43



DESCRIPTION: VIEW OF WEST END WALL AFTER REMOVING REST OF TANK

Photo # 38 of 43

SR0029144 Program Photo Log
Name: GOLDEN GATE TANK REMOVAL
Address: 378 GRAND AVENUE
OAKLAND, CA 94610
Date: 03/01/2015
Photo Taken by: KEVIN HOM



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03/01/2016 16:03

DESCRIPTION: HOLES IN TANK

Photo # 41 of 43



03/01/2016 16:03

DESCRIPTION: HOLES IN TANK – MADE DURING REMOVAL

Photo # 42 of 43

Jakub, Barbara, Env. Health

From: Jakub, Barbara, Env. Health
Sent: Thursday, January 28, 2016 11:51 AM
To: 'b.wheeler@ggtr.com'
Cc: Tim Hallen; Gina Wee; ascensionmora@ggtr.com
Subject: RE: Accutest e-Hardcopy 2.0 Report C43826: 378 Grand Avenue - Oakland, CA, sampled on 01/26/2016

Brent,

You have approval to close the tank using a slurry (CDF). Ensure that the stockpile is removed and not reused.

Sincerely,

Barbara Jakub

From: b.wheeler@ggtr.com [mailto:b.wheeler@ggtr.com]
Sent: Thursday, January 28, 2016 10:41 AM
To: Jakub, Barbara, Env. Health <barbara.jakub@acgov.org>
Cc: Tim Hallen <tim@ggtr.com>; Gina Wee <gina.wee@ggtr.com>; ascensionmora@ggtr.com
Subject: Fw: Accutest e-Hardcopy 2.0 Report C43826: 378 Grand Avenue - Oakland, CA, sampled on 01/26/2016

Hi Barbara,

Please see tabulated data below and attached laboratory analytical report presenting results for the discrete and stockpile composite samples collected during the 1/26/16 UST confirmation sampling activities at the subject property in Oakland, CA. The discrete confirmation soil samples collected beneath the east (9550-E-11.5) and west (9550-W-11.5) ends of the UST at 11.5 feet below grade surface (2' beneath the UST bottom) contained elevated concentrations of TPH as diesel at 852 and 646 mg/kg, respectively, and non detectable concentrations of BTEX, MTBE and Naphthalene. The stockpile composite sample contained an insignificant concentration of TPH-diesel (44.9 mg/kg) and non detectable BTEX, MTBE and Naphthalene.

As you well know, due to the existing utility pole overlying the west end of the UST, we have proposed closure of the UST by slurry filling the tank in place, which we have tentatively scheduled for 2/3/16. Please inform us if the ACDEH approves the proposed UST abandonment (in place) at this time.

Thank you for your assistance with this project. Please contact us with any questions.

Regards,

Brent

*Brent Wheeler
Golden Gate Environmental, Inc.
Golden Gate Tank Removal, Inc.
1480 Carroll Avenue
San Francisco, CA 94124*

Lab Sample ID:	C43826-1	C43826-2	C43826-3
Date Sampled:	01/26/2016	01/26/2016	01/26/2016
Matrix:	Soil	Soil	Soil

GC/MS Volatiles (SW846 8260B)

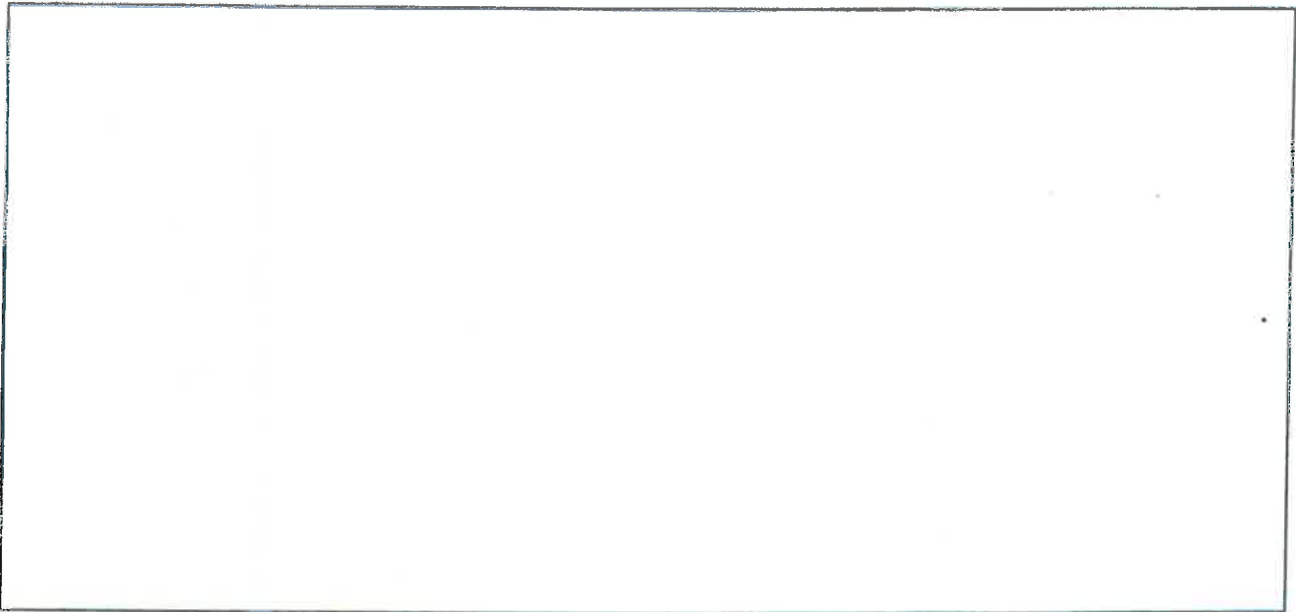
Benzene	ug/kg	ND (0.50)	ND (0.49)	ND (18)
Toluene	ug/kg	ND (0.50)	ND (0.49)	ND (18)
Ethylbenzene	ug/kg	ND (0.50)	ND (0.49)	ND (18)
Xylene (total)	ug/kg	ND (0.99)	ND (0.98)	ND (35)
Methyl Tert Butyl Ether	ug/kg	ND (0.99)	ND (0.98)	ND (35)
Naphthalene	ug/kg	ND (0.99)	ND (0.98)	ND (35)

GC Semi-volatiles (SW846 8015B M)

TPH (C10-C28)	mg/kg	646	852	44.9
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ALAMEDA COUNTY
DEPARTMENT OF ENVIRONMENTAL HEALTH
1131 HARBOR BAY PARKWAY
ALAMEDA, CA 94502-6577
PHONE (510) 567-6700

CK 28703
AR 349262
IN 198185



UNDERGROUND STORAGE TANK CLOSURE PLAN
*** Complete closure plan according to instructions ***

1. Name of Business 378 Grand Avenue
Business Owner or Contact Person (PRINT) 378 Grand Avenue, LLC.
2. Site Address 378 Grand Avenue
City, State Oakland, CA Zip 94610 Phone 510-540-5982
3. Mailing Address 2295 San Pablo Avenue
City, State Oakland, CA Zip 94702 Phone 510-540-5982
4. Property Owner 378 Grand Avenue, LLC
Business Name (if applicable) _____
Address 2295 San Pablo Avenue
City, State Oakland, CA Zip 94610 Phone 510-540-5982
5. Generator name under which tank will be manifested
378 Grand Avenue, LLC

EPA I.D. No. under which tank(s) will be manifested

CAC002840269
ENVIRONMENTAL HEALTH
PAID

Report of Analysis

Client Sample ID: 9550 W-11.5	Date Sampled: 01/26/16
Lab Sample ID: C43826-1	Date Received: 01/26/16
Matrix: SO - Soil	Percent Solids: n/a ^a
Method: SW846 8260B	
Project: 378 Grand Avenue - Oakland, CA	

Run #	File ID	DF	Analyzed	By	Prep Date	Prep Batch	Analytical Batch
Run #1	M58340.D	1	01/26/16	XB	n/a	n/a	VM1751
Run #2							

Run #	Initial Weight
Run #1	5.04 g
Run #2	

Purgeable Aromatics, MTBE, Naphthalene

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	9.9	0.99	ug/kg	
1634-04-4	Methyl Tert Butyl Ether	ND	5.0	0.99	ug/kg	
91-20-3	Naphthalene	ND	5.0	0.99	ug/kg	

CAS No.	Surrogate Recoveries	Run# 1	Run# 2	Limits
1868-53-7	Dibromofluoromethane	104%		70-130%
2037-26-5	Toluene-D8	97%		70-130%
460-00-4	4-Bromofluorobenzene	109%		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