24000 AVILA RD.
LAGNA NIGL CA 92677
949-279-4521 ART
949-322-1434 JOYCE

MAY 11, 2017 7:02 AM

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

----- SENSOR ALARM -----
L 1:PIPE SUMP
PIPING SUMP
FUEL ALARM
MAY 11, 2017 7:18 AM

----- SENSOR ALARM -----
L 3:ANNULAR SPACE
ANNULAR SPACE
FUEL ALARM
MAY 11, 2017 7:10 AM

24000 AVILA RD.
LAGNA NIGL CA 92677
949-279-4521 ART
949-322-1434 JOYCE

MAY 11, 2017 7:22 AM

SYSTEM STATUS REPORT

ALL FUNCTIONS NORMAL

----- SENSOR ALARM -----
L 2:FILL SUMP
PIPING SUMP
FUEL ALARM
MAY 11, 2017 7:18 AM

Spill Bucket Testing Report Form

This form is intended for use by contractors performing annual testing of UST spill containment structures. The completed form and printouts from tests (if applicable), should be provided to the facility owner/operator for submittal to the local regulatory agency.

1. FACILITY INFORMATION

Facility Name:	Chet Holifield Federal Building.	Date of Testing:	5-11-17
Facility Address:	24000 Avila Rd. Laguna Niguel, CA 92577		
Facility Contact:	Art Zandi	Phone:	949-279-4521
Date Local Agency Was Notified of Testing :	5-1-17		
Name of Local Agency Inspector *(if present during testing)*:	Bri Dewey		

2. TESTING CONTRACTOR INFORMATION

Company Name:	CALIFORNIA HAZARDOUS, INC.
Technician Conducting Test:	Brian Halfwassen
Credentials[1]:	☒ CSLB Contractor ☒ ICC Service Tech. ☐ SWRCB Tank Tester ☐ Other *(Specify)* _____
License Number(s): 734854	ICC#: 5006847-UT

3. SPILL BUCKET TESTING INFORMATION

Test Method Used:	☒ Hydrostatic	☐ Vacuum	☐ Other	
Test Equipment Used: Tape Measure			Equipment Resolution: 1/16"	
Identify Spill Bucket *(By Tank Number, Stored Product, etc.)*	**Diesel Fill**			
Bucket Installation Type:	☐ Direct Bury ☒ Contained in Sump	☐ Direct Bury ☐ Contained in Sump	☐ Direct Bury ☐ Contained in Sump	☐ Direct Bury ☐ Contained in Sump
Bucket Diameter:	11"			
Bucket Depth:	16"			
Wait time between applying vacuum/water and start of test:	15 Minutes			
Test Start Time (T_I):	7:45am			
Initial Reading (R_I):	14.5"			
Test End Time (T_F):	8:45am			
Final Reading (R_F):	14.5"			
Test Duration ($T_F - T_I$):	1 Hour			
Change in Reading ($R_F - R_I$):	0			
Pass/Fail Threshold or Criteria:	Any Visible Drop			
Test Result:	☒ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

CERTIFICATION OF TECHNICIAN RESPONSIBLE FOR CONDUCTING THIS TESTING

I hereby certify that all the information contained in this report is true, accurate, and in full compliance with legal requirements.

Technician's Signature: _____ Date 5-11-17

[1] State laws and regulations do not currently require testing to be performed by a qualified contractor. However, local requirements may be more stringent.

Secondary Containment Testing Report Form

This form is intended for use by contractors performing periodic testing of UST secondary containment systems. Use the appropriate pages of this form to report results for all components tested. The completed form, written test procedures, and printouts from tests (if applicable), should be provided to the facility owner/operator for submittal to the local regulatory agency.

1. FACILITY INFORMATION

Facility Name:	Chet Holifield Federal Building	Date of Testing:	5-11-17
Facility Address:	24000 Avila Rd. Laguna Niguel, CA 92577		
Facility Contact:	Art Zandi	Phone:	949-279-4521
Date Local Agency Was Notified of Testing :	5-1-17		
Name of Local Agency Inspector *(if present during testing)*:	Bri Dewey		

2. TESTING CONTRACTOR INFORMATION

Company Name:	CA. HAZARDOUS SERVICES,INC		
Technician Conducting Test:	Brian Halfwassen		
Credentials:	☒ CSLB Licensed Contractor	☐ SWRCB Licensed Tank Tester	
License Number:	734854	ICC Technician# 5006847-UT	

Manufacturer Training

Manufacturer	Component(s)	Date Training Expires
INCON	STS SUMP TESTER	10-21-17

3. SUMMARY OF TEST RESULTS

Component	Pass	Fail	Not Tested	Repairs Made	Component	Pass	Fail	Not Tested	Repairs Made
Piping Sump	☒	☐	☐	☐		☐	☐	☐	☐
Fill Sump	☒	☐	☐	☐		☐	☐	☐	☐
Supply Line Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Return Line Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Vent Line Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Annular	☐	☐	☒	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐

If hydrostatic testing was performed, describe what was done with the water after completion of tests:

Test water pumped into 4-55 gallon drums and left on site.

CERTIFICATION OF TECHNICIAN RESPONSIBLE FOR CONDUCTING THIS TESTING

To the best of my knowledge, the facts stated in this document are accurate and in full compliance with legal requirements

Technician's Signature: _____ Date: 5-11-17

4. TANK ANNULAR TESTING

Test Method Developed By:	☐ Tank Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*		
Test Method Used:	☐ Pressure ☒ Vacuum ☐ Hydrostatic ☐ Other *(Specify)*		
Test Equipment Used: 0-30 In Hg Vacuum Gauge		Equipment Resolution: 0.5% of span	

	Diesel			
Is Tank Exempt From Testing?[1]	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Tank Capacity:				
Tank Material:				
Tank Manufacturer:				
Product Stored:				
Wait time between applying pressure/vacuum/water and starting test:				
Test Start Time:				
Initial Reading (R_I):				
Test End Time:				
Final Reading (R_F):				
Test Duration:				
Change In Reading (R_F-R_I):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**
Was sensor removed for testing?	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

This is a wet annular. No testing required.

[1] Secondary containment systems where the continuous monitoring automatically monitors both the primary and secondary containment, such as systems that are hydrostatically monitored or under constant vacuum, are exempt from periodic containment testing. {California Code of Regulations, Title 23, Section 2637(a)(6)}

5. SECONDARY PIPE TESTING

Test Method Developed By:	☐ Piping Manufacturer	☒ Industry Standard	☐ Professional Engineer
	☐ Other *(Specify)*		
Test Method Used:	☒ Pressure	☐ Vacuum	☐ Hydrostatic
	☐ Other *(Specify)*		
Test Equipment Used: 0-15 PSI Pressure Gauge		Equipment Resolution: 0.5% of span	

	Supply	Return	Vent	
Piping Material:	FRP	FRP	FRP	
Piping Manufacturer:	Smith	Smith	Smith	
Piping Diameter:	3"	3"	3"	
Length of Piping Run:	30'	30'	30'	
Product Stored:	Diesel	Diesel	Diesel	
Method and location of piping-run isolation:	Test Boot Piping Sump	Test Boot Piping Sump	Test Boot Piping Sump	
Wait time between applying pressure/vacuum/water and starting test:	15 Minutes	15 Minutes	15 Minutes	
Test Start Time:	7:30am	7:30am	7:35am	
Initial Reading (R_I):	5.1	5.1	5.0	
Test End Time:	8:30am	8:30am	8:35am	
Final Reading (R_F):	5.1	5.1	5.0	
Test Duration:	1 Hour	1 Hour	1 Hour	
Change in Reading (R_F-R_I):	0	0	0	
Pass/Fail Threshold or Criteria:	Any Visible Drop	Anny Visible Drop	Any Visible Drop	
Test Result:	☒ **Pass** ☐ **Fail** ☐ **N/A**	☒ **Pass** ☐ **Fail** ☐ **N/A**	☒ **Pass** ☐ **Fail** ☐ **N/A**	☐ **Pass** ☐ **Fail** ☐ **N/A**

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

6. PIPING SUMP TESTING

Test Method Developed By:	☐ Sump Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*		
Test Method Used:	☐ Pressure ☐ Vacuum ☒ Hydrostatic ☐ Other *(Specify)*		
Test Equipment Used: INCON STS		Equipment Resolution: .0001 inches	

	Piping			
Sump Diameter:	42"			
Sump Depth:	76"			
Sump Material:	Fiberglass			
Height from Tank Top to Top of Highest Piping Penetration:	22"			
Height from Tank Top to Lowest Electrical Penetration:	25"			
Condition of sump prior to testing:	Good			
Portion of Sump Tested[1]	4" Above Highest Penetration			
Does turbine shut down when sump sensor detects liquid (both product and water)?*	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Turbine shutdown response time	NA			
Is system programmed for fail-safe shutdown?*	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was fail-safe verified to be operational?*	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Wait time between applying pressure/vacuum/water and starting test:	15 Minutes			
Test Start Time:	9:05am/9:21am			
Initial Reading (R_I):	5.9066/5.9063			
Test End Time:	9:20am/9:36am			
Final Reading (R_F):	5.9063/5.9064			
Test Duration:	2-15 Minute Tests			
Change In Reading (R_F-R_I):	0.0003/0.0001			
Pass/Fail Threshold or Criteria:	0.002/0.002			
Test Result:	☒ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**
Was sensor removed for testing?	☒ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☒ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

The sensor was properly replaced but not verified functional after testing.

[1] If the entire depth of the sump is not tested, specify how much was tested. If the answer to any of the questions indicated with an asterisk (*) is "NO" or "NA", the entire sump must be tested. (See SWRCB LG-160)

CHET HOLIFIELD #3
24000 AVILA RD
LAGUNA NIGUEL
92677

05/11/2017 9:20 AM

SUMP LEAK TEST REPORT

FILL

TEST STARTED	9:05 AM
TEST STARTED	05/11/2017
BEGIN LEVEL	3.9895 IN
END TIME	9:20 AM
END DATE	05/11/2017
END LEVEL	3.9895 IN
LEAK THRESHOLD	0.002 IN
TEST RESULT	PASSED

PIPING

TEST STARTED	9:05 AM
TEST STARTED	05/11/2017
BEGIN LEVEL	5.9066 IN
END TIME	9:20 AM
END DATE	05/11/2017
END LEVEL	5.9063 IN
LEAK THRESHOLD	0.002 IN
TEST RESULT	PASSED

CHET HOLIFIELD #3
24000 AVILA RD
LAGUNA NIGUEL
92677

05/11/2017 9:36 AM

SUMP LEAK TEST REPORT

FILL

TEST STARTED	9:21 AM
TEST STARTED	05/11/2017
BEGIN LEVEL	3.9894 IN
END TIME	9:36 AM
END DATE	05/11/2017
END LEVEL	3.9894 IN
LEAK THRESHOLD	0.002 IN
TEST RESULT	PASSED

PIPING

TEST STARTED	9:21 AM
TEST STARTED	05/11/2017
BEGIN LEVEL	5.9063 IN
END TIME	9:36 AM
END DATE	05/11/2017
END LEVEL	5.9064 IN
LEAK THRESHOLD	0.002 IN
TEST RESULT	PASSED

7. FILL RISER CONTAINMENT SUMP TESTING

Facility is Not Equipped With Fill Riser Containment Sumps ☐				
Fill Riser Containment Sumps are Present, but were Not Tested ☐				
Test Method Developed By:	☐ Sump Manufacturer ☐ Other *(Specify)*	☒ Industry Standard	☐ Professional Engineer	
Test Method Used:	☐ Pressure ☐ Other *(Specify)*	☐ Vacuum	☒ Hydrostatic	
Test Equipment Used: INCON STS			Equipment Resolution:.0001 inches	

	Fill			
Sump Diameter:	42"			
Sump Depth:	84"			
Height from Tank Top to Top of Highest Piping Penetration:	No Piping Penetration			
Height from Tank Top to Lowest Electrical Penetration:	18"			
Condition of sump prior to testing:	Good			
Portion of Sump Tested	4" Above Highest Penetration			
Sump Material:	Fiberglass			
Wait time between applying pressure/vacuum/water and starting test:	15 Minutes			
Test Start Time:	9:05am/9:21am			
Initial Reading (R_I):	3.9895/3.9894			
Test End Time:	9:20am/9:36am			
Final Reading (R_F):	3.9895/3.9894			
Test Duration:	2-15 Minute Tests			
Change in Reading (R_F-R_I):	0.0000/0.0000			
Pass/Fail Threshold or Criteria:	0.002/0.002			
Test Result:	☒ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**
Is there a sensor in the sump?	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Does the sensor alarm when either product or water is detected?	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor removed for testing?	☒ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☒ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

The sensor was properly replaced but not verified functional after testing.

MONITORING SYSTEM CERTIFICATION

For Use By All Jurisdictions Within the State of California
Authority Cited: Chapter 6.7, Health and Safety Code; Chapter 16, Division 3, Title 23, California Code of Regulations

This form must be used to document testing and servicing of monitoring equipment. A separate certification or report must be prepared for each monitoring system control panel by the technician who performs the work. A copy of this form must be provided to the tank system owner/operator. The owner/operator must submit a copy of this form to the local agency regulating UST systems within 30 days of test date.

A. General Information

Facility Name: Chet Holyfield Federal Building Bldg. No.
Site Address: 24000 Avila Rd. City: Laguna Niguel Zip: 92577
Facility Contact Person: Art Zandi Phone: 949-279-4521
Make/Model of Monitoring System: Veeder Root TLS 300c Date of Testing/Servicing: 4-29-16

B. Inventory of Equipment Tested/Certified

Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: Diesel	Model	Tank ID:	Model
☒ In-Tank Gauging Probe.	847390-104/722026	☐ In-Tank Gauging Probe.	
☒ Annular Space or Vault Sensor.	794380-301/No #	☐ Annular Space or Vault Sensor.	
☒ Piping Sump / Trench Sensor(s).	794380-208/884394	☐ Piping Sump / Trench Sensor(s).	
☒ Fill Sump Sensor(s).	794380-208/511996	☐ Fill Sump Sensor(s).	
☐ Mechanical Line Leak Detector.		☐ Mechanical Line Leak Detector.	
☐ Electronic Line Leak Detector.		☐ Electronic Line Leak Detector.	
☒ Tank Overfill / High-Level Sensor.	Drop Tube	☐ Tank Overfill / High-Level Sensor.	
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	
Tank ID:		**Tank ID:**	
☐ In-Tank Gauging Probe.		☐ In-Tank Gauging Probe.	
☐ Annular Space or Vault Sensor.		☐ Annular Space or Vault Sensor.	
☐ Piping Sump / Trench Sensor(s).		☐ Piping Sump / Trench Sensor(s).	
☐ Fill Sump Sensor(s).		☐ Fill Sump Sensor(s).	
☐ Mechanical Line Leak Detector.		☐ Mechanical Line Leak Detector.	
☐ Electronic Line Leak Detector.		☐ Electronic Line Leak Detector.	
☐ Tank Overfill / High-Level Sensor.		☐ Tank Overfill / High-Level Sensor.	
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	

Dispenser ID:	Model	Dispenser ID:	Model
☐ Dispenser Containment Sensor(s).		☐ Dispenser Containment Sensor(s).	
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).		☐ Dispenser Containment Sensor(s).	
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).		☐ Dispenser Containment Sensor(s).	
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification

- I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is information (e.g. manufacturers' checklists) necessary to verify that this information is correct and a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; *(check all that apply)*: ☒ **System set-up** ☒ **Alarm history report**

Technician Name (print): Brian Halfwassen Signature: [signature]
Certification No.: A24602 License. No.: 734854
Testing Company Name: California Hazardous Services, Inc. Phone: (714) 434-9995
Site Address: 2205 S. Yale St. Santa Ana, CA 92704 Date of Testing/Servicing: 4-29-16

D. Results of Testing/Servicing

Software Version Installed: 424.01

Complete the following checklist:

☒ Yes	☐ No*	Is the audible alarm operational?
☒ Yes	☐ No*	Is the visual alarm operational?
☒ Yes	☐ No*	Were all sensors visually inspected, functionally tested, and confirmed operational?
☒ Yes	☐ No*	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
☐ Yes	☐ No* ☒ N/A	If alarms are relayed to a remote monitoring station, is all communications equipment (e.g. modem) operational?
☐ Yes	☐ No* ☒ N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? *(Check all that apply)* ☐ Sump/Trench Sensors; ☐ Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks and sensor failure/disconnection? ☐ Yes ☐ No
☐ Yes	☐ No* ☒ N/A	For tank systems that utilize the monitoring system as the primary tank overfill warning device (i.e. no mechanical overfill prevention valve is installed), is the overfill warning alarm visible and audible at the tank fill point(s) and operating properly? If so, at what percent of tank capacity does the alarm trigger? %
☐ Yes*	☒ No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
☐ Yes*	☒ No	Was liquid found inside any secondary containment systems designed as dry systems? *(Check all that apply)* ☐ Product ☐ Water If yes, describe causes in Section E, below.
☒ Yes	☐ No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
☒ Yes	☐ No*	Is all monitoring equipment operational per manufacturer's specifications?

*** In Section E below, describe how and when these deficiencies were or will be corrected.**

E. Comments: There is a overfill valve on the drop tube.

F. In-Tank Gauging / SIR Equipment:

☒ Check this box if tank gauging is used only for inventory control.
☐ Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

Complete the following checklist:

☐ Yes	☐ No*	Has all input wiring been inspected for proper entry and termination, including testing for ground faults?
☐ Yes	☐ No*	Were all tank gauging probes visually inspected for damage and residue buildup?
☐ Yes	☐ No*	Was accuracy of system product level readings tested?
☐ Yes	☐ No*	Was accuracy of system water level readings tested?
☐ Yes	☐ No*	Were all probes reinstalled properly?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

G. Line Leak Detectors (LLD):

☒ Check this box if LLDs are not installed.

Complete the following checklist:

☐ Yes	☐ No* ☐ N/A	For equipment start-up or annual equipment certification, was a leak simulated to verify LLD performance? *(Check all that apply)* Simulated leak rate: ☐ 3 g.p.h. ☐ 0.1 g.p.h. ☐ 0.2 g.p.h.
☐ Yes	☐ No*	Were all LLDs confirmed operational and accurate within regulatory requirements?
☐ Yes	☐ No*	Was the testing apparatus properly calibrated?
☐ Yes	☐ No* ☐ N/A	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

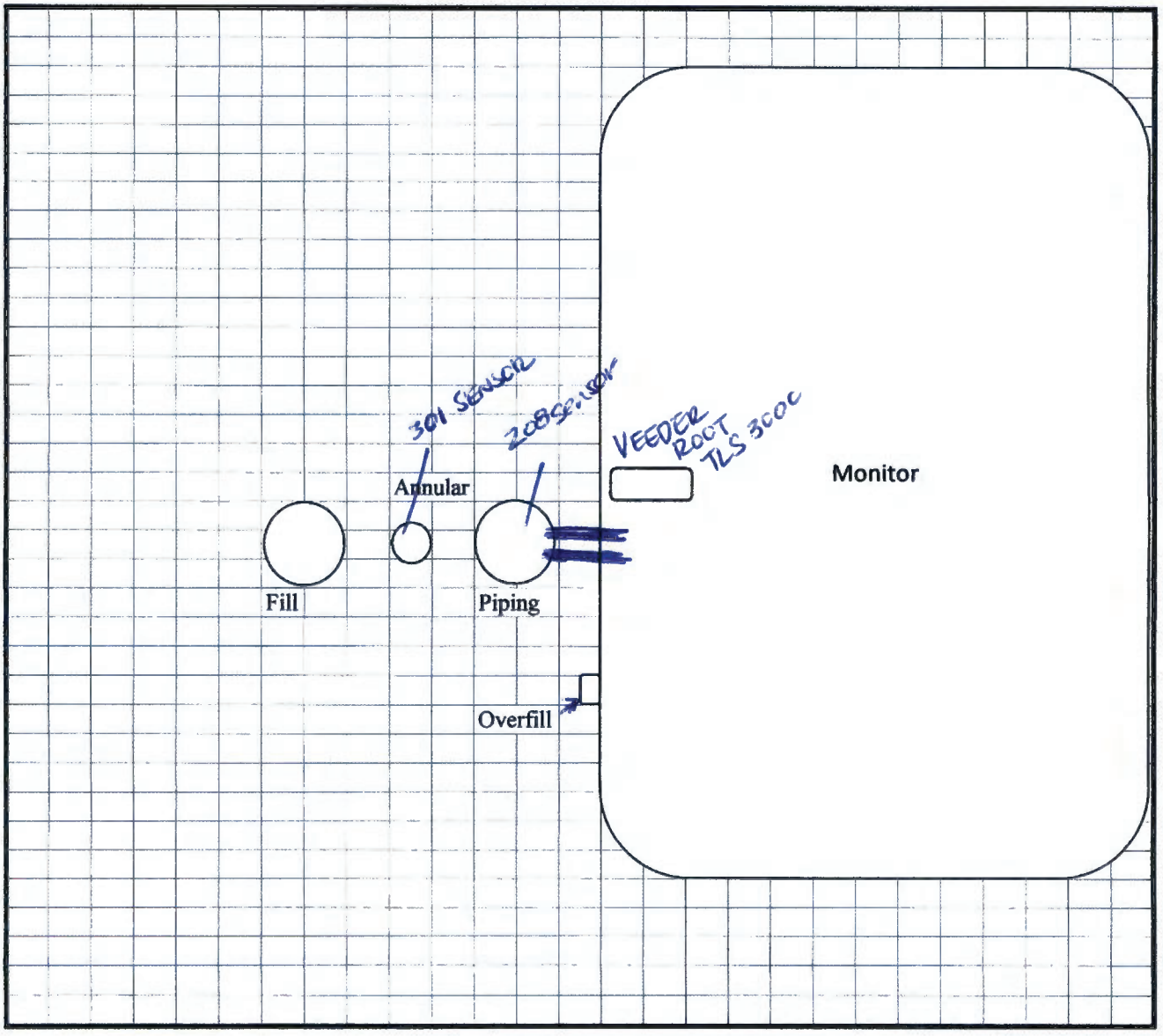
H. Comments:

Suction system no leak detector.

UST Monitoring Site Plan

Date: 4/29/2016

Site Location: AMB Engineering (Chet Holifield Federal Bldg)
24000 Avila Rd.
Laguna Niguel, CA 92577



INSTRUCTIONS

If you already have a diagram that shows all required information, you may include it, rather than this page, with your Monitoring System Certification. On your site plan, show the general layout of tanks and piping. Clearly identify locations of the following equipment, if installed; monitoring system control panels; snesors monitoring tank annular spaces, sumps, dispenser pans, spill containers, or other secondary containment areas; mechanical or electronic line leak detectors; and in-tank liquid level probes (if used for leak detection). In the space provided, note the date this Site Plan was prepared.

MONITORING SYSTEM CERTIFICATION

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Authority Cited: Chapter 6.7, Health and Safety Code; Chapter 16, Division 3, Title 23, California Code of Regulations

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A. General Information

Facility Name: Chet Holyfield Federal Building Bldg. No. ______
Site Address: 24000 Avila Rd. City: Laguna Niguel Zip: 92577
Facility Contact Person: Art Zandi Phone: 949-279-4521
Make/Model of Monitoring System: Veeder Root TLS 300c Date of Testing/Servicing: 6-22-15

B. Inventory of Equipment Tested/Certified

Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: Diesel		Tank ID:	
☒ In-Tank Gauging Probe.	Model: 847390-104/722026	☐ In-Tank Gauging Probe.	Model:
☒ Annular Space or Vault Sensor.	Model: 794380-301/No #	☐ Annular Space or Vault Sensor.	Model:
☒ Piping Sump / Trench Sensor(s).	Model: 794380-208/884394	☐ Piping Sump / Trench Sensor(s).	Model:
☒ Fill Sump Sensor(s).	Model: 794380-208/511996	☐ Fill Sump Sensor(s).	Model:
☐ Mechanical Line Leak Detector.	Model:	☐ Mechanical Line Leak Detector.	Model:
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☒ Tank Overfill / High-Level Sensor.	Model: Drop Tube	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	
Tank ID:		**Tank ID:**	
☐ In-Tank Gauging Probe.	Model:	☐ In-Tank Gauging Probe.	Model:
☐ Annular Space or Vault Sensor.	Model:	☐ Annular Space or Vault Sensor.	Model:
☐ Piping Sump / Trench Sensor(s).	Model:	☐ Piping Sump / Trench Sensor(s).	Model:
☐ Fill Sump Sensor(s).	Model:	☐ Fill Sump Sensor(s).	Model:
☐ Mechanical Line Leak Detector.	Model:	☐ Mechanical Line Leak Detector.	Model:
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☐ Tank Overfill / High-Level Sensor.	Model:	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	

Dispenser ID:		Dispenser ID:	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification

- I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is information (e.g. manufacturers' checklists) necessary to verify that this information is correct and a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; *(check all that apply)*: ☒ System set-up ☒ Alarm history report

Technician Name (print): Brian Halfwassen Signature: [signature]
Certification No.: A24602 License. No.: 734854
Testing Company Name: California Hazardous Services, Inc. Phone: (714) 434-9995
Site Address: 2205 S. Yale St. Santa Ana, CA 92704 Date of Testing/Servicing: 6-22-15

D. Results of Testing/Servicing

Software Version Installed: 424.01

Complete the following checklist:

☒ Yes	☐ No*	Is the audible alarm operational?
☒ Yes	☐ No*	Is the visual alarm operational?
☒ Yes	☐ No*	Were all sensors visually inspected, functionally tested, and confirmed operational?
☒ Yes	☐ No*	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
☐ Yes	☐ No* ☒ N/A	If alarms are relayed to a remote monitoring station, is all communications equipment (e.g. modem) operational?
☐ Yes	☐ No* ☒ N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? *(Check all that apply)* ☐ Sump/Trench Sensors; ☐ Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks and sensor failure/disconnection? ☐ Yes ☐ No
☐ Yes	☐ No* ☒ N/A	For tank systems that utilize the monitoring system as the primary tank overfill warning device (i.e. no mechanical overfill prevention valve is installed), is the overfill warning alarm visible and audible at the tank fill point(s) and operating properly? If so, at what percent of tank capacity does the alarm trigger? %
☐ Yes*	☒ No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
☒ Yes*	☐ No	Was liquid found inside any secondary containment systems designed as dry systems? *(Check all that apply)* ☒ Product ☐ Water If yes, describe causes in Section E, below.
☒ Yes	☐ No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
☒ Yes	☐ No*	Is all monitoring equipment operational per manufacturer's specifications?

*** In Section E below, describe how and when these deficiencies were or will be corrected.**

E. Comments: There was a small amount of diesel in the piping sump. We wiped it out.

F. In-Tank Gauging / SIR Equipment:

☒ Check this box if tank gauging is used only for inventory control.
☐ Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

Complete the following checklist:

☐ Yes	☐ No*	Has all input wiring been inspected for proper entry and termination, including testing for ground faults?
☐ Yes	☐ No*	Were all tank gauging probes visually inspected for damage and residue buildup?
☐ Yes	☐ No*	Was accuracy of system product level readings tested?
☐ Yes	☐ No*	Was accuracy of system water level readings tested?
☐ Yes	☐ No*	Were all probes reinstalled properly?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

G. Line Leak Detectors (LLD):

☒ Check this box if LLDs are not installed.

Complete the following checklist:

☐ Yes	☐ No* ☐ N/A	For equipment start-up or annual equipment certification, was a leak simulated to verify LLD performance? *(Check all that apply)* Simulated leak rate: ☐ 3 g.p.h. ☐ 0.1 g.p.h. ☐ 0.2 g.p.h.
☐ Yes	☐ No*	Were all LLDs confirmed operational and accurate within regulatory requirements?
☐ Yes	☐ No*	Was the testing apparatus properly calibrated?
☐ Yes	☐ No* ☐ N/A	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

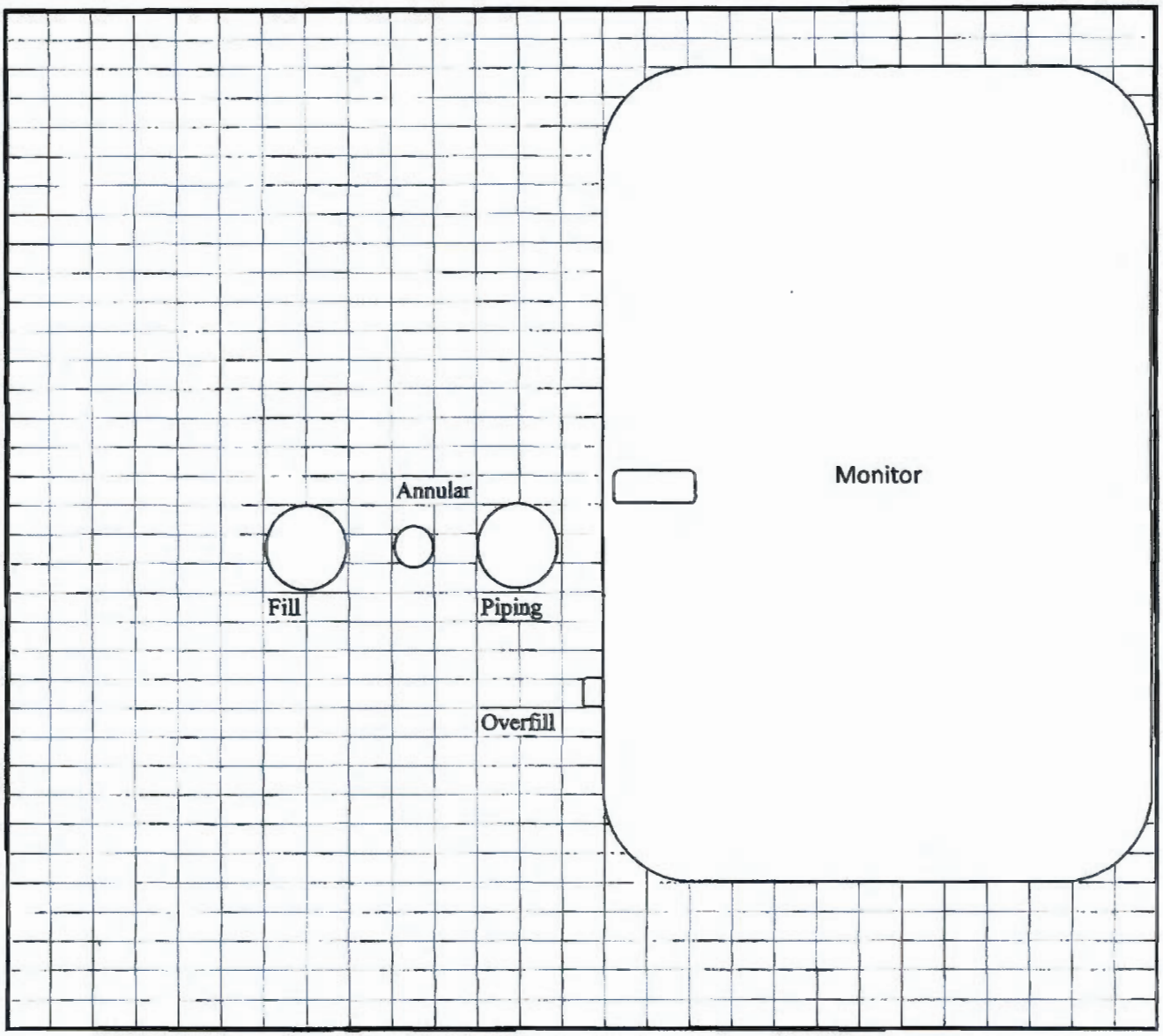
H. Comments:

Suction system no leak detector.

UST Monitoring Site Plan

Date: **6/22/2015**

Site Location: **AMB Engineering (Chet Holifield Federal Bldg)**
24000 Avila Rd.
Laguna Niguel, CA **92577**



INSTRUCTIONS

If you already have a diagram that shows all required information, you may include it, rather than this page, with your Monitoring System Certification. On your site plan, show the general layout of tanks and piping. Clearly identify locations of the following equipment, if installed; monitoring system control panels; snesors monitoring tank annular spaces, sumps, dispenser pans, spill containers, or other secondary containment areas; mechanical or electronic line leak detectors; and in-tank liquid level probes (if used for leak detection). In the space provided, note the date this Site Plan was prepared.

Secondary Containment Testing Report Form

This form is intended for use by contractors performing periodic testing of UST secondary containment systems. Use the appropriate pages of this form to report results for all components tested. The completed form, written test procedures, and printouts from tests (if applicable), should be provided to the facility owner/operator for submittal to the local regulatory agency.

1. FACILITY INFORMATION

Facility Name:	**Chet Holifield Federal Building**	Date of Testing:	**5/7/14**
Facility Address:	**24000 Avila Rd., Laguna Niguel, Ca 92677**		
Facility Contact:	**Art Zandi**	Phone:	**949-643-1027**
Date Local Agency Was Notified of Testing :	**4/29/14**		
Name of Local Agency Inspector *(if present during testing)*:	**None**		

2. TESTING CONTRACTOR INFORMATION

Company Name:	CA. HAZARDOUS SERVICES,INC		
Technician Conducting Test:	**Frank Newsom**		
Credentials:	☒ CSLB Licensed Contractor	☐ SWRCB Licensed Tank Tester	
License Number:	734854	ICC Technician#8166900-UT	

Manufacturer Training

Manufacturer	Component(s)	Date Training Expires
INCON	STS SUMP TESTER	9-20-15

3. SUMMARY OF TEST RESULTS

Component	Pass	Fail	Not Tested	Repairs Made	Component	Pass	Fail	Not Tested	Repairs Made
Piping Sump	☒	☐	☐	☐		☐	☐	☐	☐
Fill Sump	☒	☐	☐	☐		☐	☐	☐	☐
Vent Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Supply Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Return Secondary	☒	☐	☐	☐		☐	☐	☐	☐
Annular	☐	☐	☒	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐
	☐	☐	☐	☐		☐	☐	☐	☐

If hydrostatic testing was performed, describe what was done with the water after completion of tests:

Water Pumped Into 3-55 gallon Drums left on site.

CERTIFICATION OF TECHNICIAN RESPONSIBLE FOR CONDUCTING THIS TESTING

To the best of my knowledge, the facts stated in this document are accurate and in full compliance with legal requirements

Technician's Signature: _____ Date: 5/7/14

4. TANK ANNULAR TESTING

Test Method Developed By:	☐ Tank Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*		
Test Method Used:	☐ Pressure ☒ Vacuum ☐ Hydrostatic ☐ Other *(Specify)*		
Test Equipment Used: 0-30 In Hg Vacuum Gauge		Equipment Resolution: 0.5% of span	

	Diesel			
Is Tank Exempt From Testing?[1]	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Tank Capacity:				
Tank Material:				
Tank Manufacturer:				
Product Stored:				
Wait time between applying pressure/vacuum/water and starting test:				
Test Start Time:				
Initial Reading (R_I):				
Test End Time:				
Final Reading (R_F):				
Test Duration:				
Change in Reading (R_F-R_I):				
Pass/Fail Threshold or Criteria:				
Test Result:	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**
Was sensor removed for testing?	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Liquid filled annular. No test required.

[1] Secondary containment systems where the continuous monitoring automatically monitors both the primary and secondary containment, such as systems that are hydrostatically monitored or under constant vacuum, are exempt from periodic containment testing. {California Code of Regulations, Title 23, Section 2637(a)(6)}

5. SECONDARY PIPE TESTING

Test Method Developed By:	☐ Piping Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*		
Test Method Used:	☒ Pressure ☐ Vacuum ☐ Hydrostatic ☐ Other *(Specify)*		
Test Equipment Used: 0-15 PSI Pressure Gauge		Equipment Resolution: 0.5% of span	

	Vent	Supply	Return	
Piping Material:	Fiberglass	Fiberglass	Fiberglass	
Piping Manufacturer:	Smith	Smith	Smith	
Piping Diameter:	3"	3"	3"	
Length of Piping Run:	30'	30'	30'	
Product Stored:	Diesel	Diesel	Diesel	
Method and location of piping-run isolation:	Test Boot in Piping Sump	Test Boot in Piping Sump	Test Boot in Piping Sump	
Wait time between applying pressure/vacuum/water and starting test:	15 Minutes	15 Minutes	15 Minutes	
Test Start Time:	10:00am	10:00am	10:00am	
Initial Reading (R_I):	5 PSI	5 PSI	5 PSI	
Test End Time:	11:00am	11:00am	11:00am	
Final Reading (R_F):	5 PSI	5 PSI	5 PSI	
Test Duration:	1 Hour	1 Hour	1 Hour	
Change in Reading (R_F-R_I):	0	0	0	
Pass/Fail Threshold or Criteria:	0	0	0	
Test Result:	☒ Pass ☐ Fail ☐ N/A	☒ Pass ☐ Fail ☐ N/A	☒ Pass ☐ Fail ☐ N/A	☐ Pass ☐ Fail ☐ N/A

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

6. PIPING SUMP TESTING

Test Method Developed By:	☐ Sump Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*		
Test Method Used:	☐ Pressure ☐ Vacuum ☒ Hydrostatic ☐ Other *(Specify)*		
Test Equipment Used: INCON STS		Equipment Resolution: .0001 inches	

	Piping			
Sump Diameter:	42"			
Sump Depth:	76"			
Sump Material:	Fiberglass			
Height from Tank Top to Top of Highest Piping Penetration:	22"			
Height from Tank Top to Lowest Electrical Penetration:	25"			
Condition of sump prior to testing:	Good			
Portion of Sump Tested[1]	2" Above all Penetrations			
Does turbine shut down when sump sensor detects liquid (both product and water)?*	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Turbine shutdown response time	NA			
Is system programmed for fail-safe shutdown?*	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was fail-safe verified to be operational?*	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Wait time between applying pressure/vacuum/water and starting test:	15 Minutes			
Test Start Time:	10:18am/10:33am			
Initial Reading (R_I):	3.6822/3.6831			
Test End Time:	10:33am/10:48am			
Final Reading (R_F):	3.6833/3.6819			
Test Duration:	15 X 2			
Change in Reading (R_F-R_I):	0.0011/0.0012			
Pass/Fail Threshold or Criteria:	0.002			
Test Result:	☒ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Was sensor removed for testing?	☒ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☒ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Sensor reinstalled at lowest point but not verified functional.

[1] If the entire depth of the sump is not tested, specify how much was tested. If the answer to any of the questions indicated with an asterisk (*) is "NO" or "NA", the entire sump must be tested. (See SWRCB LG-160)

7. FILL RISER CONTAINMENT SUMP TESTING

Facility is Not Equipped With Fill Riser Containment Sumps ☐				
Fill Riser Containment Sumps are Present, but were Not Tested ☐				
Test Method Developed By:	☐ Sump Manufacturer ☒ Industry Standard ☐ Professional Engineer ☐ Other *(Specify)*			
Test Method Used:	☐ Pressure ☐ Vacuum ☒ Hydrostatic ☐ Other *(Specify)*			
Test Equipment Used: INCON STS			Equipment Resolution:.0001 inches	
	Fill			
Sump Diameter:	**42"**			
Sump Depth:	**84"**			
Height from Tank Top to Top of Highest Piping Penetration:	**No Piping Penetrations**			
Height from Tank Top to Lowest Electrical Penetration:	**18"**			
Condition of sump prior to testing:	**Good**			
Portion of Sump Tested	**2" Above all Penetrations**			
Sump Material:	**Fiberglass**			
Wait time between applying pressure/vacuum/water and starting test:	**15 Minutes**			
Test Start Time:	**10:18am/10:33am**			
Initial Reading (R_I):	**2.6046/2.6042**			
Test End Time:	**10:33am/10:48am**			
Final Reading (R_F):	**2.6034/2.6040**			
Test Duration:	**15 X 2**			
Change in Reading (R_F-R_I):	**0.0012/0.0002**			
Pass/Fail Threshold or Criteria:	**0.002**			
Test Result:	☒ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**	☐ **Pass** ☐ **Fail**
Is there a sensor in the sump?	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Does the sensor alarm when either product or water is detected?	☐ Yes ☐ No ☒ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor removed for testing?	☒ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Was sensor properly replaced and verified functional after testing?	☐ Yes ☒ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA

Comments – *(include information on repairs made prior to testing, and recommended follow-up for failed tests)*

Sensor reinstalled at lowest point but not verified functional.

EZY 3 LOCATOR PLUS — FINAL REPORT

DATE:	4/28/2014
TOTAL TANK VOL.	3,918
PRODUCT VOL.	2,786
ULLAGE VOL.	1,132
PRODUCT TYPE:	Diesel

LOCATION: :Chet Holyfield Federal Building
24000 Avila Rd.
Laguna Niguel, CA 92577

TANK # 1

THE ACOUSTIC CHARACTERISTIC OF A LEAK REVEALS

[XXXX] **TIGHT TANK**
THIS UNDERGROUND STORAGE TANK **PASSES** THE CRITERIA SET FORTH BY THE U.S. EPA.

[ ] **ULLAGE (DRY) PORTION LEAK**
THIS UNDERGROUND STORAGE TANK **FAILS** THE CRITERIA SET FORTH BY THE U.S. EPA.

[ ] **BELOW PRODUCT LEVEL (WET) PORTION LEAK**
THIS UNDERGROUND STORAGE TANK **FAILS** THE CRITERIA SET FORTH BY THE U.S. EPA.

WATER SENSOR INDICATES:
(CHECK ONLY ONE)

NO WATER INTRUSION	WATER INTRUSION	NOT APPLICABLE
XXXXXXXX		

OPERATOR NAME: PRINT/	Brian Halfwassen
SIGNATURE:	
CERTIFICATION #	72-1069 **EXPIRATION:** 1/26/2015
TESTING FIRM:	CALIFORNIA HAZARDOUS SERVICES
ADDRESS:	2205 S. Yale St. Santa Ana, CA 9 92704
TELEPHONE #	(714) 434-9995

EZY 3 LOCATOR PLUS

PRESSURE CALCULATION & WATER SENSOR CALIBRATION DATA SHEET

DATE:	4/28/14
TOTAL TANK VOL.	3,918
PRODUCT VOL.	2,786
ULLAGE VOL.	1,132
PRODUCT TYPE	Diesel

LOCATION :Chet Holifield Federal Building
24000 Avila Rd.
Laguna Niguel, CA 92577

TANK # 1

PRESSURE SENSOR CALCULATION

48" INCHES OF PRODUCT	X	0.031 WGT OF PRODUCT	=	1.488	PSI(1)
.85" INCHES OF WATER IN TANK	X	0.036	=	0.03	PSI(2)
LINE 1 + LINE 2 = TOTAL POSITIVE HEAD PRESSURE IN TANK			=	1.518	PSI(3)
48" INCHES OF WATER OUTSIDE TANK	X	0.049	=	2.352	PSI(4)
TOTAL HEAD PRESSURE MINUS OUTSIDE WATER PRESSURE			=	-0.834	PSI(5)
ALWAYS ADD 0.5				-0.334	PSI(6)
Note:IF LINE 6 IS LESS THAN .5 PSI LINE 7 SHALL BE .5 PSI			=	0.5	PSI(7)

TEST PRESSURE	TIME	PRESSURE
BLOWER STARTED:	11:02am	
TEST PRESSURE REACHED:	11:06am	0.55
BLOWER TURNED OFF:	11:11am	0.55
TEST BEGUN:	11:12am	0.55
TEST ENDED:	11:16am	0.54

DEPTH OF GROUNDWATER:
BY: Wet Annular
WHERE: Wet Annular

WATER SENSOR CALCULATION

ADDED: 30 (CAL#1) 30 (CAL#2) 30 (CAL#3)

AVERAGE: 30

WATER INTRUSION TEST PERIOD: BEGAN: 11:17 ENDED: 11:27

CALCULATION FOR TEST PERIOD:

30 (AVE. CAL.) / 3780 = 0.0079 ("A"FACTOR) / .05 = 10:00 (TIME OF TEST:)

TECH: Brian Halfwassen

SIGNATURE:

LIC: # 03-1532

CERT. # 72-1069

HORNER EZY CHEK PRODUCT LINE TEST

LOCATION:	Chet Holyfield Federal Building
ADDRESS:	24000 Avila Rd.
CITY,STATE:	Laguna Niguel, CA 92577
APPLIED PRESSURE:	7 PSI
TECHNICIAN:	Brian Halfwassen
DATE:	4/28/2014
LIC# /CERT#	03-1532/72-1069

M/T	TIME	DATA	+/-	GPL	RES	GPH	
T	12:20pm	75		0.0037	0	0	
T	12:35pm	75	0	0.0037	0	0	
T	12:50pm	75	0	0.0037	0	0	
T				0.0037	0	0	
T				0.0037	0	0	
T				0.0037	0	0	
T				0.0037	0	0	**LINE 1** Diesel
T				0.0037	0	0	GPH 0
T				0.0037	0	0	PASS XXXXXX
T				0.0037	0	0	FAIL

M/T	TIME	DATA	+/-	GPL	RES	GPH	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
T				0.0037	0	0	**LINE 2**
T				0.0037	0	0	0
T				0.0037	0	0	PASS XXXXXX
T				0.0037	0	0	FAIL

M/T	TIME	DATA	+/-	GPL	RES	GPH	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
M				0.0037	0	0	
T				0.0037	0	0	**LINE 3**
T				0.0037	0	0	GPH 0
T				0.0037	0	0	PASS XXXXXX
T				0.0037	0	0	FAIL

MONITORING SYSTEM CERTIFICATION

For Use By All Jurisdictions Within the State of California
Authority Cited: Chapter 6.7, Health and Safety Code; Chapter 16, Division 3, Title 23, California Code of Regulations

This form must be used to document testing and servicing of monitoring equipment. A separate certification or report must be prepared for each monitoring system control panel by the technician who performs the work. A copy of this form must be provided to the tank system owner/operator. The owner/operator must submit a copy of this form to the local agency regulating UST systems within 30 days of test date.

A. General Information

Facility Name: Chet Holyfield Federal Building Bldg. No.
Site Address: 24000 Avila Rd. City: Laguna Niguel Zip: 92577
Facility Contact Person: Art Zandi Phone: 949-279-4521
Make/Model of Monitoring System: Veeder Root TLS 300c Date of Testing/Servicing: 4-28-14

B. Inventory of Equipment Tested/Certified

Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: Diesel		**Tank ID:**	
☒ In-Tank Gauging Probe.	Model: 847390-104/722026	☐ In-Tank Gauging Probe.	Model:
☒ Annular Space or Vault Sensor.	Model: 794380-301/No #	☐ Annular Space or Vault Sensor.	Model:
☒ Piping Sump / Trench Sensor(s).	Model: 794380-208/884394	☐ Piping Sump / Trench Sensor(s).	Model:
☒ Fill Sump Sensor(s).	Model: 794380-208/511996	☐ Fill Sump Sensor(s).	Model:
☐ Mechanical Line Leak Detector.	Model:	☐ Mechanical Line Leak Detector.	Model:
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☒ Tank Overfill / High-Level Sensor.	Model: Drop Tube	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	
Tank ID:		**Tank ID:**	
☐ In-Tank Gauging Probe.	Model:	☐ In-Tank Gauging Probe.	Model:
☐ Annular Space or Vault Sensor.	Model:	☐ Annular Space or Vault Sensor.	Model:
☐ Piping Sump / Trench Sensor(s).	Model:	☐ Piping Sump / Trench Sensor(s).	Model:
☐ Fill Sump Sensor(s).	Model:	☐ Fill Sump Sensor(s).	Model:
☐ Mechanical Line Leak Detector.	Model:	☐ Mechanical Line Leak Detector.	Model:
☐ Electronic Line Leak Detector.	Model:	☐ Electronic Line Leak Detector.	Model:
☐ Tank Overfill / High-Level Sensor.	Model:	☐ Tank Overfill / High-Level Sensor.	Model:
☐ Other (specify equipment type and model in Section E on Page 2).		☐ Other (specify equipment type and model in Section E on Page 2).	

Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	
Dispenser ID:		**Dispenser ID:**	
☐ Dispenser Containment Sensor(s).	Model:	☐ Dispenser Containment Sensor(s).	Model:
☐ Shear Valve(s).		☐ Shear Valve(s).	
☐ Dispenser Containment Float(s) and Chain(s).		☐ Dispenser Containment Float(s) and Chain(s).	

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification - I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is information (e.g. manufacturers' checklists) necessary to verify that this information is correct and a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; *(check all that apply)*: ☒ System set-up ☒ Alarm history report

Technician Name (print): Brian Halfwassen Signature:
Certification No.: A24602 License. No.: 734854
Testing Company Name: California Hazardous Services, Inc. Phone: (714) 434-9995
Site Address: 2205 S. Yale St. Santa Ana, CA 92704 Date of Testing/Servicing: 4-28-14

D. Results of Testing/Servicing

Software Version Installed: 424.01

Complete the following checklist:

☒ Yes	☐ No*	Is the audible alarm operational?
☒ Yes	☐ No*	Is the visual alarm operational?
☒ Yes	☐ No*	Were all sensors visually inspected, functionally tested, and confirmed operational?
☒ Yes	☐ No*	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
☐ Yes	☐ No* ☒ N/A	If alarms are relayed to a remote monitoring station, is all communications equipment (e.g. modem) operational?
☐ Yes	☐ No* ☒ N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? *(Check all that apply)* ☐ Sump/Trench Sensors; ☐ Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks and sensor failure/disconnection? ☐ Yes ☐ No
☐ Yes	☐ No* ☒ N/A	For tank systems that utilize the monitoring system as the primary tank overfill warning device (i.e. no mechanical overfill prevention valve is installed), is the overfill warning alarm visible and audible at the tank fill point(s) and operating properly? If so, at what percent of tank capacity does the alarm trigger? %
☐ Yes*	☒ No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
☐ Yes*	☒ No	Was liquid found inside any secondary containment systems designed as dry systems? *(Check all that apply)* ☐ Product ☐ Water If yes, describe causes in Section E, below.
☒ Yes	☐ No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
☒ Yes	☐ No*	Is all monitoring equipment operational per manufacturer's specifications?

*** In Section E below, describe how and when these deficiencies were or will be corrected.**

E. Comments:

F. In-Tank Gauging / SIR Equipment:

☒ Check this box if tank gauging is used only for inventory control.
☐ Check this box if no tank gauging or SIR equipment is installed.

This section must be completed if in-tank gauging equipment is used to perform leak detection monitoring.

Complete the following checklist:

☐ Yes	☐ No*	Has all input wiring been inspected for proper entry and termination, including testing for ground faults?
☐ Yes	☐ No*	Were all tank gauging probes visually inspected for damage and residue buildup?
☐ Yes	☐ No*	Was accuracy of system product level readings tested?
☐ Yes	☐ No*	Was accuracy of system water level readings tested?
☐ Yes	☐ No*	Were all probes reinstalled properly?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

G. Line Leak Detectors (LLD):

☒ Check this box if LLDs are not installed.

Complete the following checklist:

☐ Yes	☐ No* ☐ N/A	For equipment start-up or annual equipment certification, was a leak simulated to verify LLD performance? *(Check all that apply)* Simulated leak rate: ☐ 3 g.p.h. ☐ 0.1 g.p.h. ☐ 0.2 g.p.h.
☐ Yes	☐ No*	Were all LLDs confirmed operational and accurate within regulatory requirements?
☐ Yes	☐ No*	Was the testing apparatus properly calibrated?
☐ Yes	☐ No* ☐ N/A	For mechanical LLDs, does the LLD restrict product flow if it detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if the LLD detects a leak?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system is disabled or disconnected?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, does the turbine automatically shut off if any portion of the monitoring system malfunctions or fails a test?
☐ Yes	☐ No* ☐ N/A	For electronic LLDs, have all accessible wiring connections been visually inspected?
☐ Yes	☐ No*	Were all items on the equipment manufacturer's maintenance checklist completed?

*** In the Section H, below, describe how and when these deficiencies were or will be corrected.**

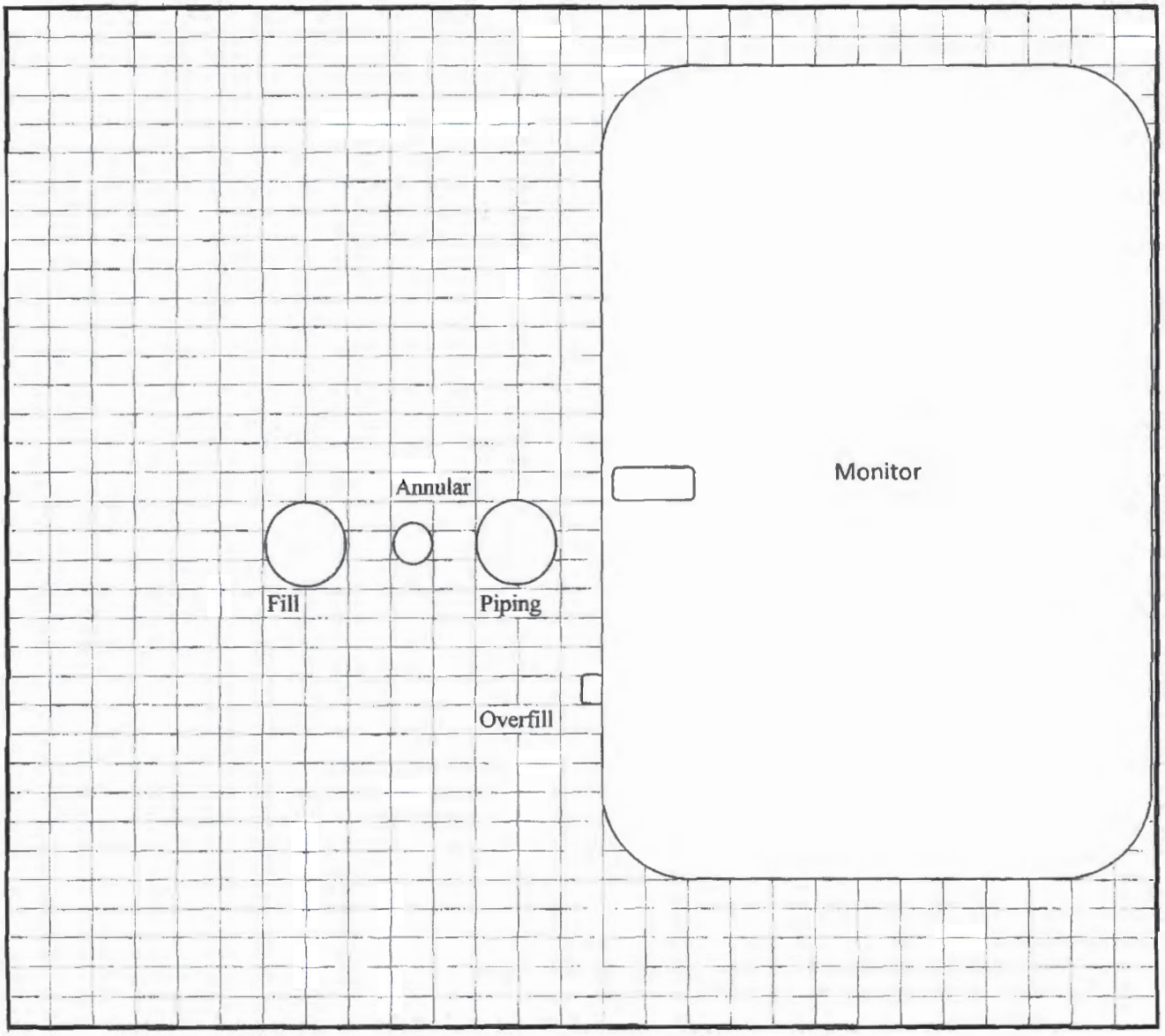
H. Comments:

Suction system no leak detector.

UST Monitoring Site Plan

Date: 4/28/2014

Site Location: AMB Engineering (Chet Holifield Federal Bldg)
24000 Avila Rd.
Laguna Niguel, CA 92577



INSTRUCTIONS

If you already have a diagram that shows all required information, you may include it, rather than this page, with your Monitoring System Certification. On your site plan, show the general layout of tanks and piping. Clearly identify locations of the following equipment, if installed; monitoring system control panels; snesors monitoring tank annular spaces, sumps, dispenser pans, spill containers, or other secondary containment areas; mechanical or electronic line leak detectors; and in-tank liquid level probes (if used for leak detection). In the space provided, note the date this Site Plan was prepared.

INSPECTION REPORT

C[illegible]y of Orange, Health Care Agency, Environ[illegible]al Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/30/2017
Reinspection Date: N/A

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**REINSPECTION - OFF-SITE**
Bri Dewey, REHS
HAZARDOUS WASTE SPECIALIST III
(657) 622-9434
6:30-9:00 a.m.

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

OPENING COMMENTS

Received and reviewed monitoring certification results from testing on 5/11/2017. All components passed at that time.

Received and reviewed SB989 testing from testing done on 5/11/17. Sumps and lines passed at that time.

SIGNATURE(S) OF ACKNOWLEDGEMENT

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

NAME:
TITLE:

Signing for the receipt of the above report is not an admission of the facts of the violations set forth herein.

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/11/2017
Reinspection Date: N/A

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**
Bri Dewey, REHS
HAZARDOUS WASTE SPECIALIST III
(657) 622-9434
6:30-9:00 a.m.

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

THE ITEMS NOTED BELOW WERE OBSERVED DURING COURSE OF THE SITE VISIT. ANY VIOLATIONS OBSERVED MUST BE CORRECTED

OPENING COMMENTS

Routine inspection conducted this date in regards to underground storage tank, consent to enter, inspect and take photographs was given by –Ardeshir Zandi

Monitoring system certification was conducted at this time. Brian Halfwassen, Cal Haz performed the monitor cert.
Ensure submittal of monitor cert test results within 30 days.

Tester provided the following certifications: ICC Tech exp 7/16/17,
Veeder-Root tech exp 6/4/17

Number of UST's -1
Sensor types -209 and 301

The Veeder-Root monitoring panel showed all functions normal. Sensors and sumps in good order this date.

The following documents were available for review:

CUPA Business Activities form, CUPA Business Owner / Operator Identification form
CUPA UST Facility Information form, CUPA UST Tank Information forms, CUPA UST monitoring plan, CUPA UST response plan,
Monitoring site map are available on-site.
SB989 test results dated 5/7/2014
Monitor Cert test results dated 4/29/16
DO reports
Financial responsibility statement not required
DO Statement showing Tim Hamm exp 7/16/17
Employee Training is current

Please log into your CERS account and update all UST forms within 30 days.

Please submit the monitoring system certification results within 30 days.

This facility is required and has been notified to electronically submit UST, DO and CFR forms within 30 days of this inspection.

A copy of this report was e-mailed

VIOLATIONS OBSERVED

I205 - Owner/Operator has tested and certified leak detection equipment annually Failure to certify leak detection equipment every 12 months and/or submit monitoring system certification to the CUPA within 30 days of the testing event. 23 CCR 16 2638
The monitor certification was due on or before 4/29/2016. Remember to schedule all future monitor certs within the allowable legal times. The violation was abated at the time of inspection.

I506 - Secondary containment testing conducted every 36 months in accordance with requirements Failure to conduct secondary containment testing at the required interval. 23 CCR 16 2637
The SB989 testing was due by 5/7/2017, it was performed this date. The violation was abated at the time of inspection. Please remember to schedule testing on or prior to the required dates.

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
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(714) 433-6000
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PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID:	FA0023992
Inspection Date:	05/11/2017
Reinspection Date:	N/A

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

Signing for the receipt of the above report is not an admission of the facts of the violations set forth herein.

INSPECTION REPORT

Cou[illegible]f Orange, Health Care Agency, Environme[illegible] Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 06/02/2016
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

Received report for a UST system monitoring certification performed on 4-29-16. All monitoring equipment operational per manufacturer's specifications.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT
County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
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PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 04/29/2016
Reinspection Date: 05/29/2016

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

THE ITEMS NOTED BELOW WERE OBSERVED DURING COURSE OF THE SITE VISIT. ANY VIOLATIONS OBSERVED MUST BE CORRECTED

I481 - Facility has a valid Permit to Operate from the CUPA Failure to obtain and maintain a valid operation permit from the CUPA. 23 CCR 16 2712(i); HSC 6.7 25284

Facility is currently operating the underground storage tank (UST) without a permit. The UST submittal (via CERS) has been declined the last four times. Refer to the inspector comments (on the submittal that was not accepted on 10-1-15) and modify the forms accordingly. Re submit after modifications have been performed.

On site for a routine compliance inspection. Brian Halfwassen of Cal Haz currently performing a UST system monitoring certification. Current ICC and Veeder-Root certifications provided.

Facility consists of one 4000 gallon diesel tank leading to a day tank in the generator room.

Both sumps were free of liquid. Sensors (208s) were located at the low areas of both sumps. Tank annular is liquid filled. Sensor is a "single" 301 which appears to be properly located.

Facility is exempt from certification of financial responsibility.

SB 989 testing valid through 5-7-17.

Reviewed monthly designated operator inspection reports. One fuel alarm documented during the past 12 months. Documentation for corrective action available for review. Employee training by the designated operator provided to six employees on 11-13-15.

COPY MAILED TO OWNER AND/OR FACILITY OPERATOR

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
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PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 10/01/2015
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

Reviewed and declined submittal in CERS. The UST Tank Information/Monitoring Plan needs to be modified. There are a few blank or incorrect fields filled out on the tank information page. Specifically, No overfill protection or protection corrosion is listed. Construction information for the piping secondary, piping containment sump and riser is blank. UDC construction type is listed as single wall. There is no UDC. leave this blank.

The monitoring procedure must be completed in the user defined fields (cannot accept a copy of a "hand filled out" monitoring form).

Re submit after modifications have been performed.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

Co..., of Orange, Health Care Agency, Environm I Health
1241 EAST DYER ROAD, SUITE 120
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(714) 433-6000
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PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 07/20/2015
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

Received results for a UST monitoring certification performed on 6-22-15. All monitoring equipment operational per manufacturer's specifications.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

Cour f Orange, Health Care Agency, Environme Health
1241 EAST DYER ROAD, SUITE 120
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INSPECTION REPORT

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 07/09/2015
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**
L Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Reviewed and declined submittal in CERS. The UST tank and monitoring page were basically blank. Fill out the information that is requested on the forms.

Also the actual UST response plan and designated operator forms need to be filled out. We cannot accept copies of old/previous forms.

Please complete these forms and re submit.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

Co of Orange, Health Care Agency, Environr al Health
1241 EAST DYER ROAD, SUITE 120
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PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 06/22/2015
Reinspection Date: 07/22/2015

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**
Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

THE ITEMS NOTED BELOW WERE OBSERVED DURING COURSE OF THE SITE VISIT. ANY VIOLATIONS OBSERVED MUST BE CORRECTED

I582 - UST Operating Permit Application for Facility information and Tank information submitted/maintained Failure to prepare, maintain, and submit an accurate CUPA UST Operating Permit Application. 23 CCR 16 2711; HSC 6.7 25286(a)

CUPA UST forms need to be submitted electronically. Spoke with the contact listed on the business owner/operator identification form (Samantha). Explained what forms need to be submitted.

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

On site for a routine compliance inspection. Brian Halfwassen of Cal Haz currently performing a UST system monitoring certification. Current ICC and Veeder-Root certifications provided.

Facility consists of one 4000 gallon diesel tank leading to a day tank in the generator room.

Both sumps were free of liquid. Sensors (208s) were located at the low areas of both sumps. Tank annular is liquid filled. Sensor is a "single" 301 which appears to be properly located.

Facility is exempt from certification of financial responsibility.

SB 989 testing valid through 5-7-17.

> Declined CERS submittal on 6-10-15. Need to resubmit completely filled out UST facility page, tank and monitoring pages, leak response plan, plot plan and designated operator forms. * A permit to operate will not be renewed on 7-1-15 unless these are submitted and complete.

Reviewed monthly designated operator inspection reports. One fuel alarm documented during the past 12 months (4-12-15). Documentation for corrective action available for review. Employee training by the designated operator provided to six employees on 11-14-14.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

Coui f Orange, Health Care Agency, Environme Health

1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 06/10/2015
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**
L Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Reviewed and declined submittal in CERS. Please address the following:

Applicant certification is blank on the application page.

Several items are missing on the tank page including information regarding overfill, piping and sump secondary construction and vent/vapor/riser information.

Most of the required information on the monitoring plan is missing.

Leak response plan, plot plan and designated operator forms were not submitted.

* Resubmit after the above items have been added.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT
Cour f Orange, Health Care Agency, Environme Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 04/29/2015
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**
L Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Reviewed and declined UST submittal in CERS. UST facility page is missing the applicant certification.

Tank page and monitoring page are missing required information. Many boxes were left blank.

Still need to submit leak response plan, plot plan and designated operator information pages.

* Resubmit after modifications and additions have been performed.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT
Coui f Orange, Health Care Agency, Environme Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 10/29/2014
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**
L Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Received SB 989 testing results. All five tested components passed on 5-7-14 (liquid filled annular). Deleted violation TF02. No violations noted at this time.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

Co of Orange, Health Care Agency, Environm ıl Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/19/2014
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
Received reports for the following:

> Monitoring system certification performed on 4-28-14. All monitoring equipment operational per manufacturer's specifications.

> Primary tank and and product line integrity testing performed on 4-28-14. Both components passed.

> Secondary containment testing performed on 5-7-14. All tested components passed.

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT
County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 04/28/2014
Reinspection Date: 05/28/2014

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

THE ITEMS NOTED BELOW WERE OBSERVED DURING COURSE OF THE SITE VISIT. ANY VIOLATIONS OBSERVED MUST BE CORRECTED

TF02 - TANK Secondary containment systems have not been tested every 3 years. (CA Code of Regulations 2637(a))

SB-14 testing performed and passed on 8-12-10. * Triennial testing was due again on 8-12-13.

Provide current testing results/report to Health Care Agency. If testing has not been performed within the past 36 months, immediately schedule the testing and provide results/report to health Care Agency within 30 days.

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
On site for a routine compliance inspection. Brian Halfwassen of Cal Haz currently performing a UST system monitoring certification. Current ICC and Veeder-Root certifications provided. Primary tank and product line integrity testing also to be performed today. Tank testing license provided.

Facility consists of one 4000 gallon diesel tank leading to a day tank in the generator room.

Both sumps were free of liquid. Sensors (208s) were located at the low areas of both sumps. Tank annular is liquid filled. Sensor is a "single" 301 which appears to be properly located.

CUPA forms submitted and available for review in the binder kept on site.

Facility is exempt from certification of financial responsibility.

Reviewed monthly designated operator inspection reports. No alarms documented during the past 12 months. Five employees provided UST training by the designated operator on 11-8-13.

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____

Signature _____ Date _____

INSPECTION REPORT

Co of Orange, Health Care Agency, Environm l Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 07/01/2013
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COMMENTS

ZZZ9 - INSPECTOR COMMENTS

Received report for monitor certification performed on 6-24-13. Monitoring equipment operational per manufacturer's specifications.

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

I declare that I have examined and received a copy of this inspection report.

Print Name and Title

Signature Date

INSPECTION REPORT

Co of Orange, Health Care Agency, Environ al Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 06/24/2013
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Lance Malis
HAZARDOUS WASTE SPECIALIST III
(714) 640-7122
lmalis@ochca.com

COMMENTS

ZZZ9 - INSPECTOR COMMENTS

On site for a compliance inspection. Frank Newsom of Cal-Haz currently performing a UST system monitor inspection. Current Veeder-Root and ICC certifications provided.

Facility consists of one diesel tank for a back up generator. Tank annular is liquid filled. Both sumps were free of liquid. Sensors were located at the low area of both sumps.

Designated operator inspection reports reviewed for the past 12 months. One alarm recorded in June of 2012. * Corrective action documentation was not included with the reports. Make sure follow-up comments and/or corrective action documentation for fuel alarms are kept with the designated operator inspection reports. Training provided to employees on 10-22-12. Training log reviewed on site (5 employees).

Monitoring procedure kept on site and available for review (5-4-10).

Secondary containment testing due August 12th of this year.

> Make sure a copy of the report for today's certification is provided to Health Care Agency.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title Rick Norwood ENGINEER

Signature

Date 6/24/13

INSPECTION REPORT

Co[illegible] of Orange, Health Care Agency, Environm[illegible] Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 06/01/2012
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Joyce Krall, REHS
HAZARDOUS WASTE SPECIALIST III
(714) 433-6236
jkrall@ochca.com

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
This Agency received the facility's UST monitoring system certification and spill bucket testing report for activities conducted on 5-4-12. All tested components passed.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title

Signature

COPY MAILED TO OWNER
AND/OR
FACILITY OPERATOR

Date

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120
SANTA ANA, CA 92705-5611
(714) 433-6000
ochealthinfo.com/eh

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/04/2012
Reinspection Date: 06/03/2012

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINISTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Joyce Krall, REHS
HAZARDOUS WASTE SPECIALIST III
(714) 433-6236
jkrall@ochca.com

THE ITEMS NOTED BELOW WERE OBSERVED DURING COURSE OF THE SITE VISIT. ANY VIOLATIONS OBSERVED MUST BE CORRECTED

TO04 - TANK Monitoring system is not operational. (CA Code of Regulations 2632(c)(2))
Piping sump sensor failed testing. While on site, the testing technician replaced the failed sensor and tested the new. The new sensor passed testing. Violation was abated.

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
On site to conduct a routine UST inspection and witness the annual UST monitoring system certification. The testing technician was Brian Halfwassen of CA Hazardous Services. His testing credentials were reviewed and were current.

Monitoring System Certification:

UST sensors (UST annular, fill sump, piping sump) tested and passed. Alarms responded.
UST has flapper valve for overfill protection.
Fill bucket located within sump was tested 1-2-12 and passed.

Routine inspection:

The UST documentation maintained on site and available for review included: valid UST operating permit, UST monitoring plan, UST response plan, designated UST operator (DO) monthly inspection reports, DO facility employee training records, UST test records, and UST monitoring plot plan.

The DO conducting the monthly inspections was Tom Ross. His ICC certification was current with an expiration date of 10-15-12.

SB989 testing was most recently conducted on 8-12-10. Testing is required once every 3 years. Testing will become due 8-12-13.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title

Signature

Date

INSPECTION REPORT
County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120 SANTA ANA, CA 92705-5611
(714) 433-6000

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/23/2011
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: F04-**FOLLOW-UP INSPECTION - OFF-SITE**

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Joyce Krall, REHS
HAZARDOUS WASTE SPECIALIST III
(714) 433-6236

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
This Agency received the facility's UST monitoring system certification and spill bucket testing report for activities conducted on 5-4-11. All tested components passed.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title COPY MAILED TO OWNER

AND/OR

Signature FACILITY OPERATOR Date

5/23/2011

INSPECTION REPORT
County of Orange, Health Care Agency, Environmental Health
1241 EAST DYER ROAD, SUITE 120 SANTA ANA, CA 92705-5611
(714) 433-6000

PR0024056

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 05/04/2011
Reinspection Date:

Type of Facility: 7095-UNDERGROUND STORAGE TANK (PR)
Service: A01-**ROUTINE INSPECTION**
Joyce Krall, REHS
HAZARDOUS WASTE SPECIALIST III
(714) 433-6236

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

COMMENTS

ZZZ9 - INSPECTOR COMMENTS
On site to conduct a routine UST inspection and witness the annual UST monitoring system certification. The testing technician's credentials were reviewed and were current.

Monitoring System Certification:

UST sensors (UST annular, fill sump, piping sump) tested and passed. Alarms responded.
UST has flapper valve for overfill protection.
Fill bucket located within sump was tested 1/2 hour and passed.

Routine inspection:

The UST documentation maintained on site and available for review included: valid UST operating permit, UST monitoring plan, UST response plan, designated UST operator (DO) monthly inspection reports, DO facility employee training records, UST test records, and UST monitoring plot plan.

The DO conducting the monthly inspections was Tom Ross. His ICC certification was current with an expiration date of 10-15-12.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title _____ ART ZAMI

Signature _____ Date _____

5/4/2011

COUNTY OF ORANGE
HEALTH CARE AGENCY

PUBLIC HEALTH SERVICES
ENVIRONMENTAL HEALTH

MARK A. REFOWITZ
DIRECTOR

RICHARD SANCHEZ, MPH
ASSISTANT DIRECTOR

DAVID M. SOULELES, MPH
DEPUTY AGENCY DIRECTOR

DENISE FENNESSY, REHS
DIRECTOR
ENVIRONMENTAL HEALTH

MAILING ADDRESS:
1241 E. DYER RD., SUITE 120
SANTA ANA, CA 92705-5611

TELEPHONE: (714) 433-6000
FAX: (714) 754-1732
E-MAIL: ehealth@ochca.com

Excellence
Integrity
Service

October 1, 2015

CERTIFIED MAIL

Mailing Address:
GENERAL SERVICES ADMINSTRATION
CHET HOLIFIELD FEDERAL BLDG
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

Site Address:

24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

NOTICE OF VIOLATION

On June 30, 2015, your underground storage tank (UST) operating permit expired and was not reissued due to outstanding violations. To date, this Agency has not received evidence indicating that you are in compliance with all of the required underground storage tank laws and regulations as mandated in the California Health and Safety Code (H&SC) Chapter 6.7 and the California Code of Regulations Title 23.

Section 25299 of the H&SC specifies that any operator who operates an underground storage tank system without a permit and any owner who fails to obtain a permit, or who knowingly fails to take reasonable and necessary steps to assure compliance, are liable for civil penalties of not less than five hundred dollars ($500.00) or more than five thousand dollars ($5,000.00) for each day the facility is in violation. Operating UST(s) by your facility without a permit will result in either Administrative Enforcement or a referral to the Orange County District Attorney's Office. If you have any questions, please contact your district inspector at the phone number found on the back of this letter.

Sincerely,

Liza Frias

Liza Frias, REHS
Assistant Director
Environmental Health

cc: Denise Fennessy, Director, Environmental Health
William Fallon, Deputy District Attorney

A - PROGRAM RECORD REQU

Inspector: J. Grant Staff # 294 Date: 4/7/04 SUPV. INITIALS:

FACILITY INFORMATION	
Facility DBA: Chet Holifield Federal Building	FA # ~~0023993~~ 0023992
Site Address: 24000 Avila Rd.	
City: Laguna Niguel	Zip: 92677

UST REMOVAL	SR #	
TA #	Contents	Size
TA #	Contents	Size
TA #	Contents	Size
TA #	Contents	Size
TA #	Contents	Size
TA #	Contents	Size

SERVICE REQUEST	SR # 0105050
Complete: yes	Date Completed: 04/07/04

ENTERED APR 13 2004

TIERED PERMIT		PR #		
Unit Type	Unit ID	Unit Name	Add	Close

UST INSTALLATION/MODIFICATION PLAN CHECK LIST

Closed 4-13-04

FACILITY NAME: Chet Holifield Fed Bldg **SERVICE REQUEST #:** 0105050

ADDRESS: 24000 Avila Rd., Ste 4100 **CITY:** Laguna Niguel

CONTRACTOR NAME: Matt Thomas **COMPANY:** Shirley Env.

CONTRACTOR PHONE NUMBER: _____

CHECK ONE: ☐ INSTALLATION ☒ MODIFICATION

NUMBER, TYPE AND VOLUME OF TANKS INSTALLED _____

MODIFICATION IS FOR: Repipe, New fill & piping sump, spill buckets, etc.

		DATE COMPLETED	INITIAL
PLANS REVIEWED AND APPROVED		1/21/04	JG
COPY OF PRIMARY CONTRACTOR AND SUBCONTRACTOR LICENSE AND HAZ. SUBSTANCE CERTIFICATION RECEIVED		yes	
PASSED VACUUM TEST *(IF APPLICABLE)*		N/A	
PASSED HOLIDAY TEST *(COMPOSITE TANKS ONLY)*		N/A	
PASSED TANK PRESSURE TEST OR OTHER TEST AS	Primary	N/A	
SPECIFIED BY THE MANUFACTURER	Secondary	N/A	
PASSED PIPELINE PRESSURE TEST OR OTHER TEST AS	Primary	2/5/04	JG
SPECIFIED BY THE MANUFACTURER	Secondary	2/9/04	JG
PASSED WATER TEST – TURBINE AND/OR FILL SUMPS		2/9/04	JG
PASSED WATER TEST – UNDER DISPENSER CONTAINMENT/SPILL BOXES		N/A	
PASSED MONITORING SYSTEM INSPECTION – SENSORS (ANNULAR, SUMP, DISPENSERS, ETC.), LINE LEAK DETECTORS AND POSITIVE SHUTDOWN *(IF APPLICABLE)* DEMONSTRATED OPERATIONAL		3/9/04	
PASSED FINAL INSPECTION - ALL INFO REQUESTED FOR OPERATING PERMIT (INSTALLATION MATCHES PLANS - CONSTRUCTION IS COMPLETE)		4/7/04	JG
SOIL SAMPLE RESULTS RECEIVED AND FORWARDED TO GROUNDWATER *(IF APPLICABLE)*		2/13/04	JG
SYSTEM PASSED TANK/LINE INTEGRITY TEST AND RECEIVED RESULTS		3/29/04	JG
INSPECTION REPORT COMPLETED AND SUBMITTED TO SUPERVISOR WITH UPDATED CUPA FORMS *(IF APPLICABLE)*		3/9/04	JG
INSTALLATION CERTIFICATION FORM RECEIVED, SIGNED BY OWNER		4/7/04	JG
INSTALLATION OF HIGH LEVEL ALARM (90%) AND OUTSIDE ENUNCIATOR		3/9/04	JG
DATE UST(S) REMOVED *(SR#)*		N/A	

_____

INSPECTOR ON-SITE FOR INSTALLATION/MODIFICATION *(PRINT NAME)*

Foreman [redacted] Slunicker (909)538-1941 [redacted] T. Grant

COUNTY OF ORANGE CERTIFIED UNIFIED PROGRAM AGENCY - CUPA

HEALTH CARE AGENCY / ENVIRONMENTAL HEALTH
2009 E. EDINGER AVENUE, SANTA ANA, CA 92705-4720
Telephone: (714) 667-3600 / FAX: (714) 568-5116

UST FACILITY MODIFICATION APPLICATION

SUBMIT A SEPARATE FORM FOR EACH TYPE OF CONSTRUCTION ACTIVITY

(e.g. Installations, Removals, System Modifications, Repairs, etc.)

SITE INFORMATION

FACILITY NAME: CHET HOLIFIELD FEDERAL BUILDING SUBMITTAL DATE: 01.13.04

ADDRESS: 24000 AVILA ROAD (24000)

CITY: LAGUNA NIGUEL CITY CODE TELEPHONE NO: 949.643.1027

ZIP CODE: 92677 CONTACT NAME: TOM PHILLIPS

APPLICANT REQUESTOR

APPLICANTS NAME: MATT THOMAS COMPANY NAME: SHIRLEY ENVIRONMENTAL

ADDRESS: 1927 TYLER AVE, SUITE K

CITY: SO EL MONTE

X [signature] APPLICANTS SIGNATURE (TANK OWNER OR DESIGNEE)

STATE: CA ZIP: 91733

TELEPHONE NO: 800 533 4030

ALTERNATE # (CELL, PAGER) 626 444 7017

UPC UST Forms are required to be submitted prior to pick up of approved UST plans. Forms provided at Plan Check Counter or at http://www.oc.ca.gov/hca/regulatory/cupa/forms.htm

TYPE OF CONSTRUCTION

UST PLAN TYPE:	CODE
☐ INSTALLATION (S) #	T01
☐ CLOSURE (S) – REMOVAL (S) #	T02
☒ SYSTEM MODIFICATION (REPIPE, REPAIR TO PIPING)	T03
☐ REPAIR (S) OR RELINE (S) USTs	T04
☐ OTHER (SPECIFY)	T05

PAID

CONTRACTOR INFORMATION

(Persons performing work on USTs must meet specific State Contractors Licensing Board requirements)

CONTACT PERSON: MATT THOMAS

BUSINESS NAME: SHIRLEY ENV.

ADDRESS: 1927 TYLER AVE, SUITE K

CITY: SO EL MONTE

STATE: CA ZIP: 91733

TELEPHONE NO: 800 533 4030

CONTRACTORS LICENSE TYPE: A, HIC, HAZ

CONTRACTORS STATE LICENSE #: 819027

NOTES: NEW INSTALLATIONS, CLOSURES, REPAIRS AND SYSTEM MODIFICATIONS OF UNDERGROUND STORAGE TANKS REQUIRE THE SUBMITTAL OF (4) SETS OF PLANS TO THIS DIVISION. THESE PLANS MUST BE APPROVED PRIOR TO THE INITIATION OF ANY CONSTRUCTION OR MODIFICATION. ALL PLANS OR REPORTS REQUIRED MUST ACCOMPANY THIS FORM AT THE TIME OF SUBMITTAL.

PLAN APPROVAL AND FEES ARE VALID FOR ONE YEAR. IF TANKS HAVE NOT BEEN REMOVED, INSTALLED OR MODIFIED WITHIN ONE YEAR OF THE APPROVAL DATE, NEW PLANS AND FEES MUST BE SUBMITTED

HSO # 184289

OFFICE USE ONLY

SR # 0105050 PE: 7025 FEES PAID: 312 CHECK # 6790 RCVD BY: ML 1-13-04

PLAN APPROVAL DATE: 1/21/04 BY: J. Grant FA # 0023992

Distribution: White – OC CUPA Pink – Data Entry F042.09.1322

* Plan Revision

SHIRLEY Environmental L.L.C.
Testing & Tank Management Services

APPROVED
ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENT HEALTH DIVISION
HAZARDOUS MATERIALS MANAGEMENT SECTION
THIS APPROVAL IS VALID FOR 12 MONTHS FROM THE APPROVAL DATE
J. Grant | 1/21/04 | SR0105050
Plan Reviewed By | Date | Plan #

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Contact (714) 667 - 3600 for an appointment.

A copy of these approved plans must be available at the jobsite during inspections.

January 20, 2003

Mr. Jeremy Grant
Orange County Health Care Agency
2009 East Edinger Avenue
Santa Ana, California 92705

RE: SB 989 Compliance Repair/Modification
Chet Holifield Federal Building
24000 Avila Road
Laguna Niguel, Ca

Dear Jeremy:

Enclosed please find the Shirley Environmental Workplan for an SB 989 Compliance Repair/Modification Project to be completed at the above referenced site.

Based on the current site conditions, Shirley Environmental shall perform the following:

- Remove old underground fuel oil supply and fuel oil return piping
- Provide and install new underground flexible fuel piping
- Provide and install new tank top dump
- Provide and install new tank monitoring console and leak sensors
- Perform SB 989 Re-test

In addition to the above scope of work, environmental sampling shall occur prior to the installation of the new piping. Shirley Environmental will provide a geologist onsite to collect, package and deliver the samples to an analytical laboratory. A final certified report including the results of laboratory testing shall be submitted to the Orange County Health Care Agency.

Shirley Environmental appreciates the opportunity to work with Orange County Health Care Agency. Should you have any questions or require additional information, please feel free to call.

Sincerely,

Matt Thomas
Matt Thomas
RME

NOTICE
ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION

Final inspection of the continuous leak detector system for the underground tanks at this facility is required. Contact this office to schedule an inspection 48 hours in advance. Telephone (714) 667 - 3600

1928 Tyler Avenue, Suite K South El Monte, CA 91733-3622
(626) 444-7447 (800) 533-4030 Fax (626) 444-7017

An integrity test is required per California Health & Safety Code Chapter 6.7

All piping associated with underground storage tanks shall be removed and properly disposed

1. INTRODUCTION

Currently the site operates (1) 550 gallon, fiberglass reinforced plastic (FRP), double wall underground storage tank. The tank supplies fuel to (1) emergency generator (see Figure 1). Information obtained by Shirley Environmental from the Chet Holifield Federal Building indicated that fuel piping associated with the underground storage tank system had problems with regard to passing an SB 989 secondary containment, pressure (hydrostatic) test.

2. SCOPE OF WORK

Based on the current site conditions, Shirley Environmental shall perform the following tasks:

- Remove old underground fuel oil supply and fuel oil return piping
- Provide and install new underground flexible fuel piping
- Provide and install new tank top sump
- Provide and install new tank monitoring console and leak sensors
- Perform SB 989 Re-test

The following is a detailed description:

2.1 REMOVAL OF OLD UNDERGROUND FUEL OIL SUPPLY AND RETURN PIPING

Shirley Environmental shall remove the surface asphalt, concrete and overburden soil using a backhoe tractor or Bobcat tractor. Once the old piping has been exposed, the entire underground run of fuel oil supply piping and fuel oil return piping will be drained, removed and disposed of as non-hazardous waste.

Work will be performed to characterize the old excavated soil for disposal. A new bedding of pea gravel will be placed prior to the new piping installation. New pea gravel will be used as backfill material to finish the project.

Prior to the exposure of the underground piping the Orange County Health Care Agency shall be contacted for onsite inspection and soil sample collection.

2.2 PROVIDE AND INSTALL NEW FUEL OIL SUPPLY AND FUEL OIL RETURN PIPING

After pea gravel has been placed into the piping trench, Shirley Environmental shall provide new flexible product piping. One-inch Environ flexible, double wall (DW), high density polyethylene (HDPE) piping will be used as for the fuel oil supply and return piping. By using flexible product piping rather then black steel inside of HDPE, will eliminate the potential for line failure caused by abrasion from line torque while the pump is activated.

1/21/04 - Per conversation with Matt Schofield, Contra - will replace existing sump and install a new sump on the fill side.

SHIRLEY Environmental L.L.C.
Testing & Tank Management Services

Two ~~A~~ new tank top piping sump~~s~~ shall be fiberglass to the existing tank collar on the UST at the site. New piping penetration fittings shall be used to install new product piping and re-install existing electrical conduit for low voltage leak monitoring sensors.

Once the piping has been install a primary pressure test shall be scheduled with the OCHCA. Four-inch flexible piping will be used as containment for the one-inch piping. The one-inch piping satisfies the secondary containment requirement. The four-inch piping is being installed only for future maintenance, if necessary. This piping does not satisfy the secondary containment rule (see enclosed cut sheets).

Upon completion of the new piping pressure testing, all piping will be backfilled with a minimum of 18-inch cover of pea gravel with a minimum 6-inch concrete cover.

2.3 PIPING AND INSTALL NEW TANK LEAK MONITORING SYSTEM

Shirley Environmental will provide and install a new continuous electric monitoring system (Veeder Root TLS 300) that will monitor the tank annulus, tank top piping sump and provide a tank overfill alarm at 95-per cent fill capacity. The system shall be installed using existing electrical conduit from the generator storeroom to the UST location. The existing electrical panel is also located in the generator storeroom adjacent to where the new monitoring system console will be located.

3.0 TESTING AND CERTIFICATION

Upon completion of all field activities a final site test shall be performed and all site components and secondary piping modified under this permit shall be tested at one time inspection. At that time all of the leak monitoring system components shall be fail-safe tested. Shirley Environmental shall provide annual certification for the UST system at the site.

1928 Tyler Avenue, Suite K South El Monte, CA 91733-3622
(626) 444-7447 (800) 533-4030 Fax (626) 444-7017

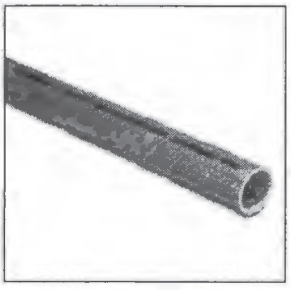
SHIRLEY Environmental L.L.C.

Testing & Tank Management Services

Cut Sheets

1928 Tyler Avenue, Suite K South El Monte, CA 91733-3622
(626) 444-7447 (800) 533-4030 Fax (626) 444-7017

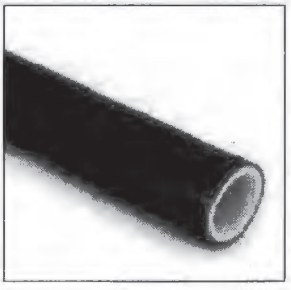
GeoVent®-Piping



A single wall flexible pipe for vent line applications only. Designed for direct burial applications or installation within the GeoDuct flexible conduit for future replacement capabilities. The piping has a smooth inner bore to provide excellent sealing surface for the connection coupling.

PART NO.	SIZE	APPLICATION
GVP-1200	2"	Vent Piping
GVP-1300	3"	Vent Piping

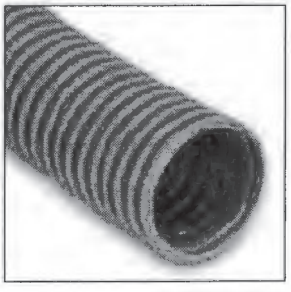
GeoFlex®-M Piping



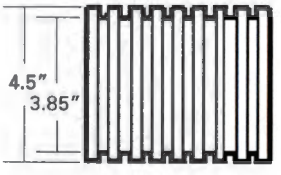
GeoFlex-M is a smooth bore flexible doublewall piping system for pressure or suction systems used in marina applications. The outer stand-off containment jacket offers added UV protection and creates an interstitial space for optimum fluid migration, continuous monitoring and easy periodic pipe testing.

PART NO.	SIZE	MAX O.P.
GFM-2150	1-1/2"	100 PSI
GFM-2200	2"	75 PSI
GFM-2300	3"	75 PSI

GeoDuct™ Conduit

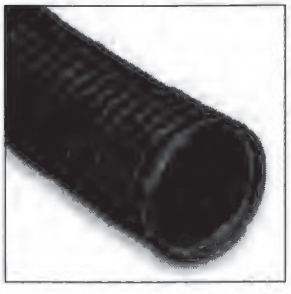


A 4"diameter corrugated flexible conduit used to permit the future replacement of the GeoFlex® piping if desired. Made of high density polyethylene, it is not intended for use as a secondary containment pipe.

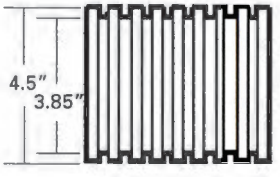


PART NO.	SIZE	FOR USE WITH:
GDP-4500I	4"	3/4", 1",1-1/2"& 2" GeoFlex

GeoDuct-M™ Conduit



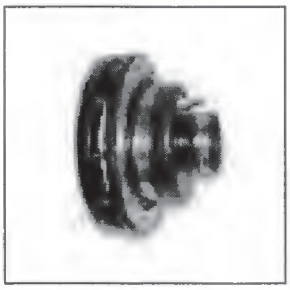
A 4"diameter corrugated flexible conduit used to permit the future replacement of the GeoFlex piping if desired. Installation of GeoFlex-M double wall piping within GeoDuct-M conduit provides added UV protection for marina applications. Made of high density polyethylene, it is not intended for use as a secondary containment pipe.



PART NO.	SIZE	FOR USE WITH:
GDM-4500	4"	1-1/2"& 2" GeoFlex M

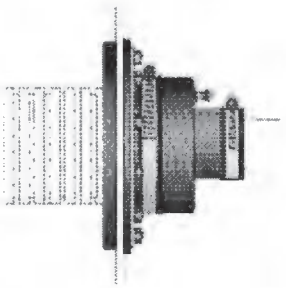
GeoDuct™ Entry Boots

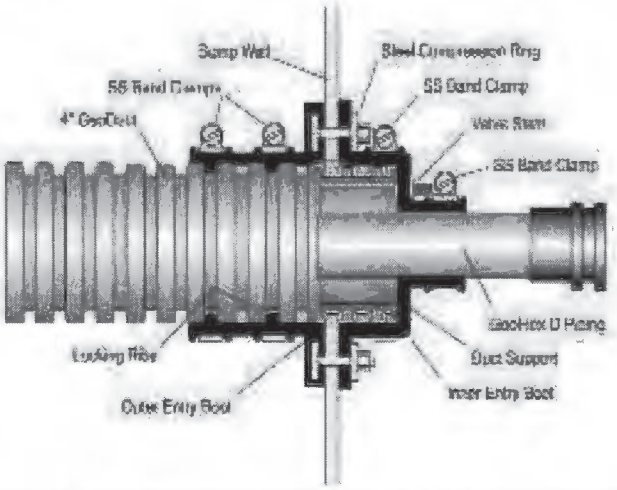
NEW

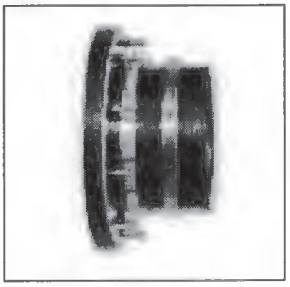


Patent Granted
Other Patents Pending

A double clamped, entry boot designed to seal the GeoDuct™ conduit entry into the wall of a tank sump or dispenser sump. This entry boot includes band clamps for sealing off the GeoDuct conduit as well as the GeoFlex Piping.

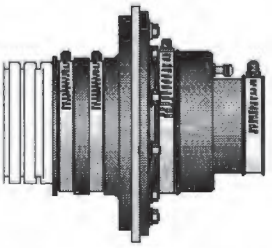






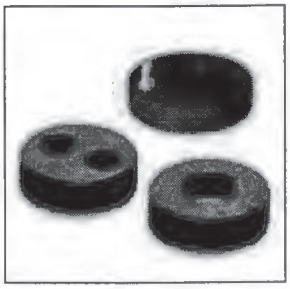
GDB-7450

PART NO.	SIZE	DESCRIPTION
GDB-4515	4" x 1-1/2"	Seals 4" GeoDuct to 1-1/2" GeoFlex
GDB-4520	4" x 2"	Seals 4" GeoDuct to 2" GeoFlex
GDB-4530	4" x 3"	Seals 4"GeoDuct to 1-1/2"GeoFlex w/coax (Donut)
GDB-7450	4"	Used for 3/4", 1", 1-1/2" and 2" GeoFlex (Donut) GDB-7450 does not have an airstem.

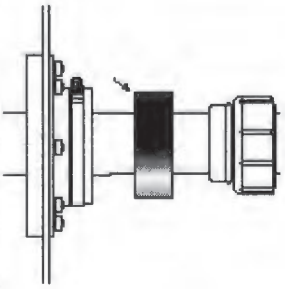


GeoDuct with Double Entry Boots

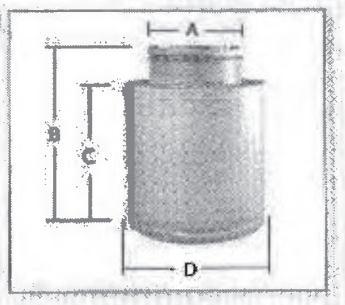
Rubber Reducer Donuts



A rubber donut used to seal off GeoFlex pipe in various entry boots. Refer to chart below for various donut configurations.



PART NO.	DESCRIPTION
RRD-3515-S	Used in GDB-4530 to reduce to 1-1/2" GeoFlex-S w/ Coax fitting
RRD-3515-D	Used in GDB-4530 to reduce to 1-1/2" GeoFlex-D, M w/ Coax fitting
SRD-1010	Used in GDB-7450 for fuel oil 1" supply and 1" return
SRD-1075	Used in GDB-7450 for fuel oil 3/4" supply and 1" return
SRD-4077	Used in GDB-7450 for fuel oil 3/4" supply and 3/4" return
DEP-0075	Reducer Donut Plug used to plug one opening in SRD-4077
RRD-4015-S	Used in GDB-7450 to seal 1-1/2" GeoFlex-S
RRD-4015-D	Used in GDB-7450 to seal 1-1/2" GeoFlex-D or M
RRD-4020-D	Used in GDB-7450 to seal 2" GeoFlex-D or M
RTD-4015-S	Used with GDB-7450 to seal 1-1/2" Geoflex-S (includes airstem)
RTD-4015-D	Used with GDB-7450 to seal 1-1/2" Geoflex-D (includes airstem)
RTD-4020-S	Used with GDB-7450 to seal 2" Geoflex-S (includes airstem)
RTD-4020-D	Used with GDB-7450 to seal 2" Geoflex-D (includes airstem)



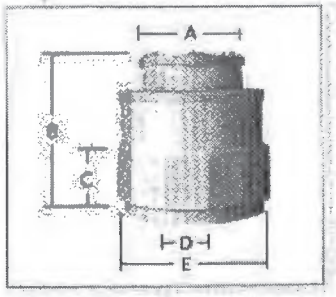
Dimensions:
A: Lid/Riser O.D.
B: Sump Height
C: Panel Height
D: Base Diameter

Cutaway of installed observation cap. All tank sumps can be ordered with a factory-installed observation cap (OC0008) by adding the suffix "O" to the part number.

Cylindrical Fiberglass Tank Sumps

Part #	Dimensions A	B	C	D	Manhole	Burial min	max
w/ Water-Resistant Lids							
ACS230CWT[1]	33.15"	60"	48"	52"	36"	24"	62"
AC4830CWT[1]	33.15"	60"	48"	48"	36"	24"	62"
AC4842CWT[1]	40.00"	60"	48"	48"	42"	24"	62"
AC4230CWT[1]	33.15"	60"	48"	42.5"	36"	24"	62"
AC4224CWT[1]	26.75"	60"	48"	42.5"	30"	24"	62"
AC3630CWT[1]	33.15"	60"	48"	36"	36"	24"	62"
w/ Bottoms & Water-Resistant Lids							
ACS2B30CWT[1]	33.15"	60"	48"	52"	36"	24"	62"
AC48B30CWT[1]	33.15"	60"	48"	48"	36"	24"	62"
AC42B30CWT[1]	33.15"	60"	48"	42.5"	36"	24"	62"
AC36B30CWT[1]	33.15"	60"	48"	36"	36"	24"	62"
w/ Friction Fit Lids							
ACS238CL[1]	38.00"	60"	48"	52"	42"	24"	62"
ACS230CL[1]	32.00"	60"	48"	52"	36"	24"	62"
AC4840CL[1]	40.00"	60"	48"	48"	42"	24"	62"
AC4838CL[1]	38.00"	60"	48"	48"	42"	24"	62"
AC4830CL[1]	32.00"	60"	48"	48"	36"	24"	62"
AC4230CL[1]	32.00"	60"	48"	42.5"	36"	24"	62"
AC3630CL[1]	32.00"	60"	48"	36"	36"	24"	62"
w/ Bottoms & Friction Fit Lids							
ACS2B38CL[1]	38.00"	60"	48"	52"	42"	24"	62"
ACS2B30CL[1]	32.00"	60"	48"	52"	36"	24"	62"
AC48B40CL[1]	40.00"	60"	48"	48"	42"	24"	62"
AC48B38CL[1]	38.00"	60"	48"	48"	42"	24"	62"
AC48B30CL[1]	32.00"	60"	48"	48"	36"	24"	62"
AC42B30CL[1]	32.00"	60"	48"	42.5"	36"	24"	62"
AC36B30CL[1]	32.00"	60"	48"	36"	36"	24"	62"

Cylindrical Tank Sumps are offered in "Offset" and "Full Offset" models. Consult Customer Service for Availability.



Dimensions:
A: Lid/Riser O.D.
B: Sump Height
C: Panel Height
D: Panel Width
E: Base Diameter

Multisided Fiberglass Tank Sumps

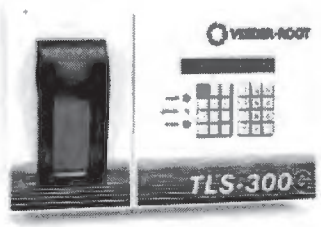
Part #	Dimensions A	B	C	D	E	Manhole	Burial min	max
w/ Water-Resistant Lids								
AM452450CWT[1]	33.15"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM451630CWT[1]	33.15"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM451230CWT[1]	33.15"	46"	12"	12.25"	45.8"	36"	33.5"	48"
w/ Bottoms & Water-Resistant Lids								
AM4524B30CWT[1]	33.15"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM4516B30CWT[1]	33.15"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM4512B30CWT[1]	33.15"	46"	12"	12.25"	45.8"	36"	33.5"	48"
w/ Friction Fit Lids								
AM452434CL[1]	34.00"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM452430CL[1]	30.00"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM451634CL[1]	34.00"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM451630CL[1]	30.00"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM451234CL[1]	34.00"	46"	12"	12.25"	45.8"	36"	33.5"	48"
AM451230CL[1]	30.00"	46"	12"	12.25"	45.8"	36"	33.5"	48"
w/ Bottoms & Friction Fit Lids								
AM4524B34CL[1]	34.00"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM4524B30CL[1]	30.00"	50"	16"	12.60"	47.0"	36"	37.5"	52"
AM4516B34CL[1]	34.00"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM4516B30CL[1]	30.00"	50"	16"	12.25"	45.8"	36"	37.5"	52"
AM4512B34CL[1]	34.00"	46"	12"	12.25"	45.8"	36"	33.5"	48"
AM4512B30CL[1]	30.00"	46"	12"	12.25"	45.8"	36"	33.5"	48"

Multisided Tank Sumps are offered in "Offset" models. Consult Customer Service for Availability.

Footnotes
[1] Requires field assembly using fiberglass adhesive kits; one kit for tank collar-to-sump base joint and one kit for sump base-to-top hat joint.
[2] Requires field assembly using fiberglass adhesive kit for sump base-to-top hat joint. Sump bottom glassed at factory.

New Designates new product or product revision.

VEEDER-ROOT



TLS-300C 0-2 Tank Configurable Console

Product Info

Features & Benefits

Manuals, Guides, & Certifications

Ready to Buy

Distributor Search

Product Overview

Designed to provide the highest quality and most cost effective tank monitoring system for non-Retail Commercial, Industrial, and Municipal tank owners, the new TLS-300C 2 Tank Configurable console offers the ultimate flexibility in one to two tank inventory control and in-tank leak detection systems.

Veeder-Root's TLS-300C Tank Monitoring System can be configured to provide in-tank leak detection for underground storage tank (UST) applications with either one to two leak detection Series 8473 0.1 GPH Magnetostrictive Probes, or one to two 8473 Magnetostrictive Inventory Measurement probes to support Aboveground Storage Tank (AST) applications.

Additional configurable options are designed to provide printed documentation and remote monitoring flexibility. The optional Integral Printer provides fast, quiet continuos printouts. The optional SiteFax option can be programmed to transmit leak detection and inventory reports, as well as real-time alarm reporting to fax machines or other communications devices.

Standard features include back-up generator capabilities, as well as capacity to accept up to eight Veeder-Root Series 7943 float-switch sensors. This high quality, low cost family of sensors includes interstitial leak sensors for steel and fiberglass tanks, piping sump sensors, hydrostatic sensors, and discriminating dispenser pan and containment sump sensors.

Specifications

Standard Features

- System monitors up to two tanks.
- RS-232 Communication Interface with Auxiliary Port provides two 25-pin D-connectors for data transmission to computers or point-of-sale terminals.
- Automatic continuous leak sensing: tank interstitial space; piping sump.
- Audible alarm and display indicate leak location.
- In-tank warnings and alarms are activated for the following conditions: leak, overfill, low product, sudden loss, high water, delivery needed, test failure, tank test not performed.
- Accepts up to eight interstitial / containment float sensors
- Interstitial and piping sump warnings and alarms are activated for the following conditions: fuel presence, low liquid, high liquid.
- Alarm relays can trigger alarm/security devices.
- Two built-in inputs provide for solid-state or switch input from external devices.
- Two built-in output relays provide for outputs to overfill alarms and external audible and visual warning devices.
- Either relay can shut down the submersible if power to the monitor is lost or a leak is detected.
- Emergency generator applications are selectable via programming.

- One system handles a mix of standard and emergency generator tanks.
- Records generator activity.
- Complete inventory reports before and after generator operation.

Configurable Features

- Continuous Statistical Leak Detection for in-tank leak detection without tank shutdown.
- Integral printer, which documents inventory leak detection, alarms and setup information.
- SiteFax modem for remote management of leak detection and inventory alarms and reports.
- One or two Veeder-Root Magnetostrictive Probes for 0.1 GPH in-tank leak detection with 4" float kit and 5" cable.
- One or two Veeder-Root Inventory Only Probes for Inventory Control with 4" float kit and 5" cable.

Standard Models

Console Form No	Description
848590-521	TLS-300C 0-2 Tank Configurable Console with Integral Printer
848590-511	TLS-300C 0-2 Tank Configurable Console without Integral Printer
Software Enhancement Modules	**Note: Must be specified on order**
330161-001	Static In-Tank Testing
330161-003	CSLD
Optional Site Fax Modem	**Note: Must be specified on order**
331398-001	Site Fax Modem Kit for TLS-300 Series Consoles

The following probes and sensors are compatible with the TLS-300C Monitoring System:

Form No.	Description
847390-1XX	0.1 GPH Magnetostrictive Probe
847391-XXX	0.1 GPH Magnetostrictive Probe for Alternative Fuels
847390-3XX	Magnetostrictive Probe for Inventory Measurement
794390-40X	Interstitial Sensor for Fiberglass Tanks
794390-420	Interstitial Sensor for Steel Tanks
794390-20X	Piping Sump Sensor
794380-301	Single-Float Hydrostatic Sensor
794380-302	Dual-Float Hydrostatic Sensor
794380-322	Discriminating Dispenser Pan Sensor
794380-352	Discriminating Containment Sump Sensor

Please refer to Veeder-Root Price List for required probe and sensor lengths and corresponding 3-digit Form Number suffix.

Print Close

APPROVED * Plan Revision

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENT HEALTH DIVISION
HAZARDOUS MATERIALS MANAGEMENT SECTION
THIS APPROVAL IS VALID FOR 12 MONTHS FROM
THE APPROVAL DATE

J. Grant — Plan Reviewed By
1/21/04 — Date
SR0105050 — Plan #

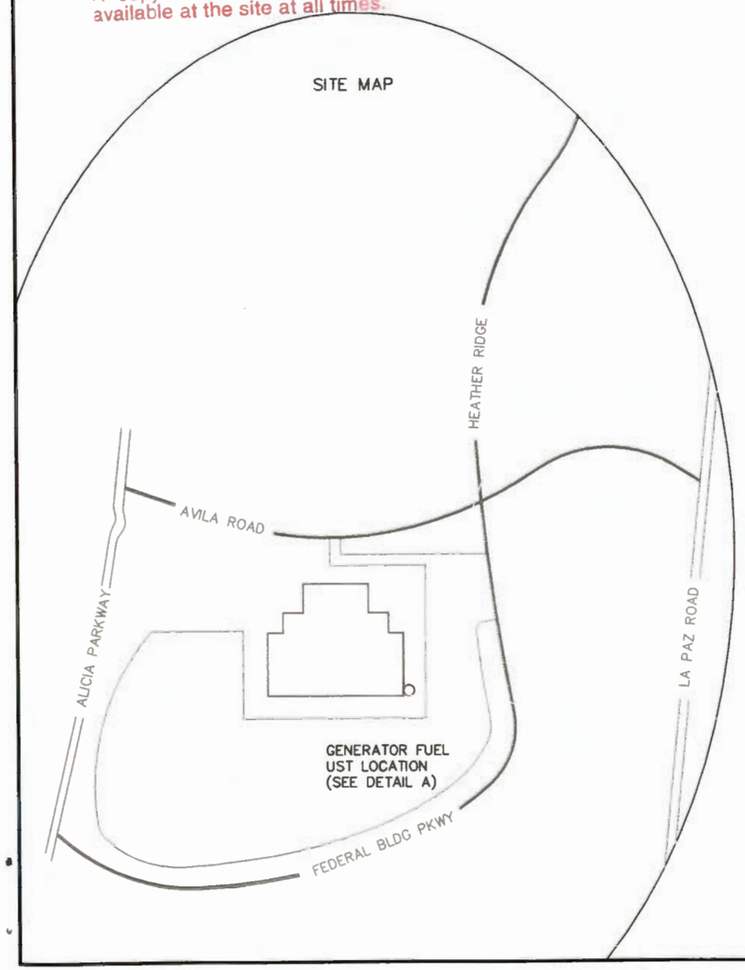
This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

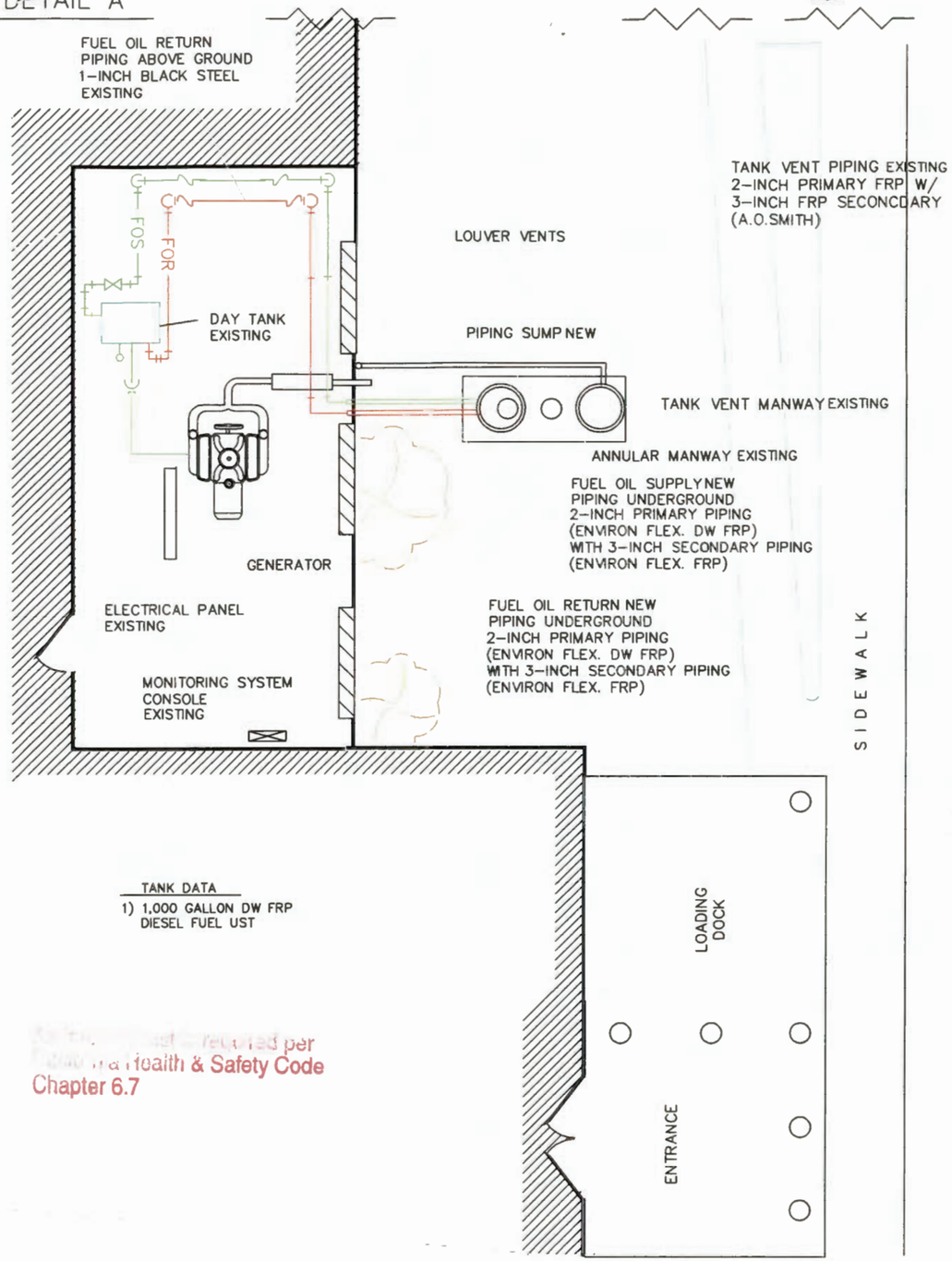
Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Contact (714) 667 - 3600 for an appointment.

A copy of these approved plans must be available at the site at all times.

SITE MAP



DETAIL A



TANK DATA
1) 1,000 GALLON DW FRP DIESEL FUEL UST

Removal required per California Health & Safety Code Chapter 6.7

RECEIVED HCA/RH
JAN 15 2004
ENVIRONMENTAL HLTH

SITE LOCATION

CHET HOLIFIELD
FEDERAL BUILDING
29000 AVILA ROAD
LAGUNA NIGUEL, CA.

All piping associated with underground storage tanks shall be removed and properly disposed

PREPARED FOR

SHIRLEY Environmental L.L.C.
Testing & Tank Management Services

1928 TYLER AVENUE
SUITE K
SO. EL MONTE, CA. 91733
800-533-4030 FAX 626-444-7017
CA. LIC.# 814027 A, HAZ

NOTICE

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION

Final inspection of the continuous leak detector system for the underground tanks at this facility is required. Contact this office to schedule an inspection 48 hours in advance. Telephone (714) 667 - 3600

NORTH
0 25
APPROXIMATE SCALE IN FEET

PLOT PLAN
AND
UNDERGROUND STORAGE TANK
LOCATIONS

DATE 08/19	EARTH TECH	FIGURE
PROJECT NO. 69163	A tyco INTERNATIONAL LTD. COMPANY	1

SITE LOCATION

CHET HOLIFIELD
FEDERAL BUILDING
24000 AVILA ROAD
LAGUNA NIGUEL, CA.

NOTICE

ORANGE COUNTY HEALTH CARE AGENCY

ENVIRONMENTAL HEALTH

HAZARDOUS MATERIALS MANAGEMENT SECTION

Final inspection of the continuous leak detector system for the underground tanks at this facility is required. Contact this office to schedule an inspection 48 hours in advance. Telephone (714) 667 - 3600

An integrity test is required per California Health & Safety Code Chapter 6.7

SINGLE PORT - OFFSET MANWAY 37-INCH (NEW)
(POMECO 6511L-160037RT051)

UST SUMP RISER 42-INCH (NEW)
(TOTAL CONTAINMENT ACL42)
W/ 42-INCH X 30-INCH REDUCER
& LID

FILL CAP 4-INCH (NEW)
(MOR 305C-0100AC)

FILL ADAPTER 4-INCH (NEW)
(MOR 305I-0200AA)

SPILL CONTAINMENT (NEW)
MANHOLE 4-INCH
5-GALLON
(EMCO A1003-008)

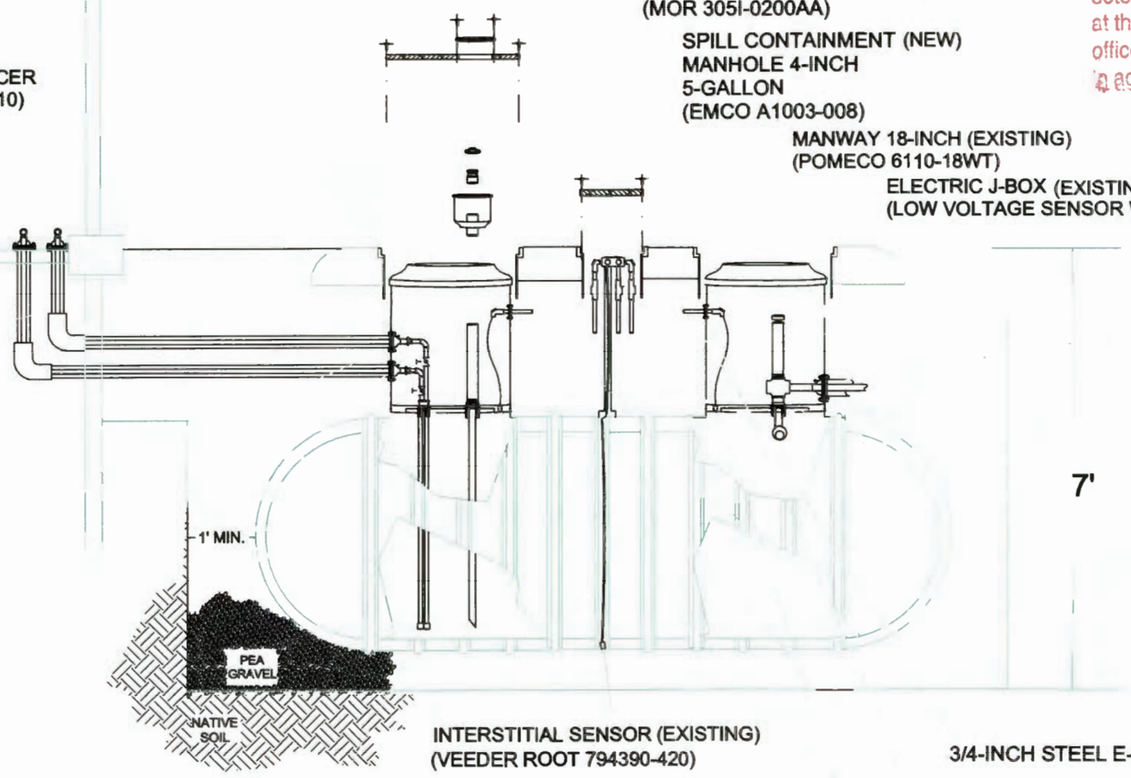
MANWAY 18-INCH (EXISTING)
(POMECO 6110-18WT)

ELECTRIC J-BOX (EXISTING)
(LOW VOLTAGE SENSOR WIRE)

3-INCH TO 1-INCH REDUCER
BOOT (ENVIRON RTR-6010)
(NEW)

GENERATOR
ROOM

BASEMENT



7'

FUEL SUPPLY PIPING (NEW)
1-INCH PRIMARY FLEX.
FRP PIPING W/ 3-INCH
FLEX FRP SECONDARY
PIPING

FUEL RETURN PIPING (NEW)
1-INCH PRIMARY FLEX.
FRP PIPING W/ 3-INCH
FLEX FRP SECONDARY
PIPING

SUMP PENETRATION FITTING (NEW)
3-INCH (ENVIRON FEB-6300)
W/ 3-INCH TO 1-INCH REDUCER
BOOT (ENVIRON RTR-6010)

UST SUMP RISER 42-INCH (NEW)
(TOTAL CONTAINMENT ACL42)
W/ 42-INCH X 30-INCH REDUCER
& LID

VENT RISER PIPING (EXISTING)
VENT PIPING 2-INCH
FRP PRIMARY W/ 3-INCH
FRP SECONDARY
(A.O. SMITH)

SUMP PENETRATION FITTING (NEW)
3-INCH (ENVIRON FEB-6300)
W/ 3-INCH TO 2-INCH REDUCER
BOOT WITH TEST PORT
(ENVIRON RTR-3020)

42-INCH UST (NEW)
SUMP COLLAR
(JOOR OR EQUIVALENT)
IF SUMP COLLAR DAMAGED OR
NONE, USE TOTAL CONTAINMENT
ACL42

INTERSTITIAL SENSOR (EXISTING)
(VEEDER ROOT 794390-420)

3/4-INCH STEEL E-CONDUIT (EXISTING)

FOOT VALVE (EXISTING)

SUMP SENSOR & CABLE
(VEEDER ROOT 794380-208)
(EXISTING)

SUMP PENETRATION FITTING (NEW)
(ENVIRON FEB-3157)

All piping associated with underground storage tanks shall be removed and properly disposed

APPROVED

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENT HEALTH DIVISION
HAZARDOUS MATERIALS MANAGEMENT SECTION
THIS APPROVAL IS VALID FOR 12 MONTHS FROM THE APPROVAL DATE

J. Grant — Plan Reviewed By
1/21/04 — Date
SR0105050 — Plan #

This approval shall not be construed to permit violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Contact (714) 667 - 3600 for an appointment.

A copy of these approved plans must be available at the site at all times.

UNDERGROUND FUEL TANK PIPING REPLACEMENT DETAIL

DATE: 12-10	EARTH TECH	FIGURE 2
PROJECT NO.		

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
2009 E. Edinger Ave., Santa Ana, CA 92705
(714) 667-3600

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 01/29/2004
Type of Facility: UST PLAN CHECK - EACH TANK MODIFICAT
Service: A08-TANK MODIFICATION INSPECTION
Reinspection Date:
Jeremy Grant, REHS
(714) 667-3729

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

The purpose of this visit is to oversee a soil sampling and perform a 1998 UST upgrade inspection.

At this time I have met with Joe Wilson of Advanced Environmental Services, Inc. He was not aware of Orange County sampling protocol and does not have brass sleeves or a hand auger. The soil sampling will be postponed until tomorrow.

The tank pit and pipe run have been completely excavated and cleared of overburden on this date. I did not observe any metal fittings in contact with soil. The supply and return lines were double walled and a piping sump was present.
A corrosion proof spill bucket was present on the fill riser.

This tank system appears to have met 1998 upgrade requirements.

You may proceed with the tank demolition.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title GREG CLUNKER Foreman

Signature _____ Date 1/29/04

SL0105050

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 01/30/2004
Type of Facility: UST PLAN CHECK - EACH TANK MODIFICAT
Service: A08-TANK MODIFICATION INSPECTION
Reinspection Date:
Jeremy Grant, REHS
(714) 667-3729

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

The purpose of this visit is to oversee a soil sampling.

One soil sample was taken by Joe Wilson of Advanced Environmental Services, Inc.

The sample was logged onto a chain of custody form and packed in an ice chest for transport to a lab.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title Mailed to Joyce Panda at GSA.

Signature _____ Date _____

CHAIN OF CUSTODY

Orange County Health Care Agency
Environmental Health Division
2009 E. Edinger Ave., Santa Ana, CA 92705
Telephone: (714) 667-3700

1. ALL SAMPLES ARE TO BE HANDLED AS COURT EVIDENCE, AND ARE TO BE PROPERLY STORED IN A SECURE LOCATION.

2. PLEASE WRITE LEGIBLY.

3. ATTACH THIS FORM TO THE ORIGINAL REPORT OF THE ANALYTICAL RESULTS AND RETURN THEM TO THIS OFFICE. LABORATORY RESULTS RECEIVED WITHOUT PROPER CHAIN OF CUSTODY DOCUMENTATION WILL NOT BE ACCEPTED.

4. TO BE COMPLETED BY LABORATORY ANALYST

LAB NO.: 1197
DATE RECEIVED: 1/30/04
SAMPLE(S) CONDITION (PLEASE CHECK):
CHILLED: ✓ COUNTY SEAL(S) INTACT: N/A
CONTAINER IN GOOD CONDITION: yes
DATE ANALYSIS COMPLETED: 2/7/04
ANALYST: GM

5. TO BE COMPLETED BY SAMPLE COLLECTOR

SITE NAME/ADDRESS: Chet Holifield Fed Bldg
24000 Avila Rd, Laguna Niguel
DATE OF COLLECTION: 1/30/04
SAMPLE COLLECTOR/COMPANY: Joe Wilson
Advanced Environmental Services, Inc.
TELEPHONE NO.: (800) 850-8680
HCA REPRESENTATIVE: Jeremy Grant

6. Run listed Samples for TPH-D 8015, BTEX, MTBE and all Fuel Oxygenates 8260B.

SAMPLE NUMBER	DETERMINATION REQUESTED	SAMPLE DESCRIPTION/COMMENTS	TIME OF COLLECTION
CH-1-4½'	TPH-D, BTEX, MTBE	About 4½ Feet below grade	1:55 PM

7. CHAIN OF CUSTODY

	SIGNATURE	COMPANY/AGENCY	INCLUSIVE DATES/TIMES
1.		HCA/Env. Health	1/30/04 - 1:55 PM
2.		AES	1/30/04 - 1:30 PM
3.		AES	1/30/04 - 2:55 PM
4.		DMA	1/30/04 - 2:55 PM
5.			-
6.			-

WHITE-RETURN THIS COPY TO ENVIRONMENTAL HEALTH, CANARY-LABORATORY COPY
PINK-CONTRACTOR/CONSULTANT COPY, GOLDENROD-OFFICE COPY

F272-9.1531.1(R8/89) CRS

Del Mar Analytical

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2520 E. Sunset Rd. #3, Las Vegas, NV 89120 (702) 798-3620 FAX (702) 798-3621

LABORATORY REPORT

Prepared For: Advanced Environmental Services, Inc.
7 Amato
Mission Viejo, CA 92692
Attention: Joe Wilson

Project: CHET HOLIFIELD FED. BLDG.

Sampled: 01/30/04
Received: 01/30/04
Issued: 02/10/04

NELAP #01108CA CA ELAP #1197

The results listed within this Laboratory Report pertain only to the samples tested in the laboratory. All soil samples are reported on a wet weight basis unless otherwise noted in the report. This Laboratory Report is confidential and is intended for the sole use of Del Mar Analytical and its client. This report shall not be reproduced, except in full, without written permission from Del Mar Analytical. The Chain(s) of Custody, 2 pages, are included and are an integral part of this report.
This entire report was reviewed and approved for release.

SAMPLE CROSS REFERENCE

LABORATORY ID	CLIENT ID	MATRIX
INA1651-01	CH-1-4 1/2'	Soil

Del Mar Analytical, Irvine
Pat Abe
Project Manager

Del Mar Analytical

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Advanced Environmental Services, Inc.
7 Amato
Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

EXTRACTABLE FUEL HYDROCARBONS (CADHS/8015 Modified)

Analyte	Method	Batch	Reporting Limit	Sample Result	Dilution Factor	Date Extracted	Date Analyzed	Data Qualifiers
Sample ID: INA1651-01 (CH-1-4 1/2' - Soil)								
Reporting Units: mg/kg								
EFH (C8 - C40)	EPA 8015 MOD.	4B03058	5.0	**27**	1	2/3/2004	2/7/2004	CR
Surrogate: n-Octacosane (50-125%)				*69 %*				

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Project Manager

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Advanced Environmental Services, Inc.
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Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

BTEX/OXYGENATES by GC/MS (EPA 8260B)

Analyte	Method	Batch	Reporting Limit	Sample Result	Dilution Factor	Date Extracted	Date Analyzed	Data Qualifiers
Sample ID: INA1651-01 (CH-1-4 1/2' - Soil)								
Reporting Units: ug/kg								
Benzene	EPA 8260B	4B04025	2.0	ND	1	2/4/2004	2/5/2004	
Ethylbenzene	EPA 8260B	4B04025	2.0	ND	1	2/4/2004	2/5/2004	
Toluene	EPA 8260B	4B04025	2.0	ND	1	2/4/2004	2/5/2004	
o-Xylene	EPA 8260B	4B04025	2.0	ND	1	2/4/2004	2/5/2004	
m,p-Xylenes	EPA 8260B	4B04025	2.0	ND	1	2/4/2004	2/5/2004	
Xylenes, Total	EPA 8260B	4B04025	4.0	ND	1	2/4/2004	2/5/2004	
Di-isopropyl Ether (DIPE)	EPA 8260B	4B04025	5.0	ND	1	2/4/2004	2/5/2004	
Ethyl tert-Butyl Ether (ETBE)	EPA 8260B	4B04025	5.0	ND	1	2/4/2004	2/5/2004	
tert-Amyl Methyl Ether (TAME)	EPA 8260B	4B04025	5.0	ND	1	2/4/2004	2/5/2004	
Methyl-tert-butyl Ether (MTBE)	EPA 8260B	4B04025	5.0	ND	1	2/4/2004	2/5/2004	
tert-Butanol (TBA)	EPA 8260B	4B04025	100	ND	1	2/4/2004	2/5/2004	
Surrogate: Dibromofluoromethane (80-125%)				*108 %*				
Surrogate: Toluene-d8 (80-120%)				*102 %*				
Surrogate: 4-Bromofluorobenzene (80-120%)				*88 %*				

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Advanced Environmental Services, Inc.
7 Amato
Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

METHOD BLANK/QC DATA

EXTRACTABLE FUEL HYDROCARBONS (CADHS/8015 Modified)

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Data Qualifiers
Batch: 4B03058 Extracted: 02/03/04										
Blank Analyzed: 02/04/04 (4B03058-BLK1)										
EFH (C8 - C40)	ND	5.0	mg/kg							
Surrogate: n-Octacosane	*5.04*		*mg/kg*	*6.67*		*76*	*50-125*			
LCS Analyzed: 02/04/04 (4B03058-BS1)										
EFH (C8 - C40)	25.7	5.0	mg/kg	33.3		77	45-115			
Surrogate: n-Octacosane	*4.86*		*mg/kg*	*6.67*		*73*	*50-125*			
Matrix Spike Analyzed: 02/04/04 (4B03058-MS1)					**Source: INA1621-01**					
EFH (C8 - C40)	582	25	mg/kg	33.3	300	847	35-115			*M-HA*
Surrogate: n-Octacosane	*10.2*		*mg/kg*	*6.67*		*153*	*50-125*			*Z3*
Matrix Spike Dup Analyzed: 02/04/04 (4B03058-MSD1)					**Source: INA1621-01**					
EFH (C8 - C40)	451	25	mg/kg	33.3	300	453	35-115	25	30	*M-HA*
Surrogate: n-Octacosane	*9.37*		*mg/kg*	*6.67*		*140*	*50-125*			*Z3*

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Advanced Environmental Services, Inc.
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Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

METHOD BLANK/QC DATA

BTEX/OXYGENATES by GC/MS (EPA 8260B)

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Data Qualifiers
Batch: 4B04025 Extracted: 02/04/04										
Blank Analyzed: 02/04/04 (4B04025-BLK1)										
Benzene	ND	2.0	ug/kg							
Ethylbenzene	ND	2.0	ug/kg							
Toluene	ND	2.0	ug/kg							
o-Xylene	ND	2.0	ug/kg							
m,p-Xylenes	ND	2.0	ug/kg							
Xylenes, Total	ND	4.0	ug/kg							
Di-isopropyl Ether (DIPE)	ND	5.0	ug/kg							
Ethyl tert-Butyl Ether (ETBE)	ND	5.0	ug/kg							
tert-Amyl Methyl Ether (TAME)	ND	5.0	ug/kg							
Methyl-tert-butyl Ether (MTBE)	ND	5.0	ug/kg							
tert-Butanol (TBA)	ND	100	ug/kg							
Surrogate: Dibromofluoromethane	*51.3*		*ug/kg*	*50.0*		*103*	*80-125*			
Surrogate: Toluene-d8	*53.3*		*ug/kg*	*50.0*		*107*	*80-120*			
Surrogate: 4-Bromofluorobenzene	*51.2*		*ug/kg*	*50.0*		*102*	*80-120*			
LCS Analyzed: 02/04/04 (4B04025-BS1)										
Benzene	48.7	2.0	ug/kg	50.0		97	70-120			
Ethylbenzene	50.0	2.0	ug/kg	50.0		100	75-125			
Toluene	48.2	2.0	ug/kg	50.0		96	75-120			
o-Xylene	50.9	2.0	ug/kg	50.0		102	75-125			
m,p-Xylenes	103	2.0	ug/kg	100		103	75-125			
Xylenes, Total	154	4.0	ug/kg	150		103	75-125			
Di-isopropyl Ether (DIPE)	53.0	5.0	ug/kg	50.0		106	65-135			
Ethyl tert-Butyl Ether (ETBE)	50.0	5.0	ug/kg	50.0		100	60-140			
tert-Amyl Methyl Ether (TAME)	47.4	5.0	ug/kg	50.0		95	60-140			
Methyl-tert-butyl Ether (MTBE)	47.1	5.0	ug/kg	50.0		94	55-145			
tert-Butanol (TBA)	269	100	ug/kg	250		108	70-140			
Surrogate: Dibromofluoromethane	*50.1*		*ug/kg*	*50.0*		*100*	*80-125*			
Surrogate: Toluene-d8	*53.6*		*ug/kg*	*50.0*		*107*	*80-120*			
Surrogate: 4-Bromofluorobenzene	*53.5*		*ug/kg*	*50.0*		*107*	*80-120*			

Del Mar Analytical, Irvine
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Project Manager

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Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

METHOD BLANK/QC DATA

BTEX/OXYGENATES by GC/MS (EPA 8260B)

Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Data Qualifiers
Batch: 4B04025 Extracted: 02/04/04										
Matrix Spike Analyzed: 02/04/04 (4B04025-MS1)					**Source: INA1477-10RE1**					
Benzene	44.4	2.0	ug/kg	50.0	ND	89	65-130			
Ethylbenzene	46.4	2.0	ug/kg	50.0	ND	93	70-130			
Toluene	44.3	2.0	ug/kg	50.0	ND	89	70-125			
o-Xylene	47.7	2.0	ug/kg	50.0	ND	95	70-125			
m,p-Xylenes	95.0	2.0	ug/kg	100	ND	95	70-125			
Xylenes, Total	143	4.0	ug/kg	150	ND	95	70-125			
Di-isopropyl Ether (DIPE)	47.9	5.0	ug/kg	50.0	ND	96	65-145			
Ethyl tert-Butyl Ether (ETBE)	44.0	5.0	ug/kg	50.0	ND	88	60-145			
tert-Amyl Methyl Ether (TAME)	39.2	5.0	ug/kg	50.0	ND	78	60-145			
Methyl-tert-butyl Ether (MTBE)	41.5	5.0	ug/kg	50.0	3.5	76	50-150			
tert-Butanol (TBA)	282	100	ug/kg	250	ND	113	65-140			
Surrogate: Dibromofluoromethane	*49.7*		*ug/kg*	*50.0*		*99*	*80-125*			
Surrogate: Toluene-d8	*52.4*		*ug/kg*	*50.0*		*105*	*80-120*			
Surrogate: 4-Bromofluorobenzene	*51.6*		*ug/kg*	*50.0*		*103*	*80-120*			
Matrix Spike Dup Analyzed: 02/04/04 (4B04025-MSD1)					**Source: INA1477-10RE1**					
Benzene	54.4	2.0	ug/kg	50.0	ND	109	65-130	20	20	
Ethylbenzene	55.7	2.0	ug/kg	50.0	ND	111	70-130	18	20	
Toluene	54.7	2.0	ug/kg	50.0	ND	109	70-125	21	20	*R*
o-Xylene	56.6	2.0	ug/kg	50.0	ND	113	70-125	17	20	
m,p-Xylenes	115	2.0	ug/kg	100	ND	115	70-125	19	20	
Xylenes, Total	171	4.0	ug/kg	150	ND	114	70-125	18	20	
Di-isopropyl Ether (DIPE)	59.6	5.0	ug/kg	50.0	ND	119	65-145	22	20	*R*
Ethyl tert-Butyl Ether (ETBE)	54.6	5.0	ug/kg	50.0	ND	109	60-145	22	25	
tert-Amyl Methyl Ether (TAME)	52.1	5.0	ug/kg	50.0	ND	104	60-145	28	25	*R*
Methyl-tert-butyl Ether (MTBE)	52.2	5.0	ug/kg	50.0	3.5	97	50-150	23	25	
tert-Butanol (TBA)	35.4	100	ug/kg	250	ND	14	65-140	155	30	*M2, R-3*
Surrogate: Dibromofluoromethane	*51.2*		*ug/kg*	*50.0*		*102*	*80-125*			
Surrogate: Toluene-d8	*52.8*		*ug/kg*	*50.0*		*106*	*80-120*			
Surrogate: 4-Bromofluorobenzene	*52.4*		*ug/kg*	*50.0*		*105*	*80-120*			

Del Mar Analytical, Irvine
Pat Abe
Project Manager

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Advanced Environmental Services, Inc.
7 Amato
Mission Viejo, CA 92692
Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

DATA QUALIFIERS AND DEFINITIONS

CR	The carbon range of the fuel found in the sample = C8-C38
M-HA	Due to high levels of analyte in the sample, the MS/MSD calculation does not provide useful spike recovery information. See Blank Spike (LCS).
M2	The MS and/or MSD were below the acceptance limits due to sample matrix interference. See Blank Spike (LCS).
R	The RPD exceeded the method control limit due to sample matrix effects. The individual analyte QA/QC recoveries, however, were within acceptance limits.
R-3	The RPD exceeded the method control limit due to sample matrix effects.
Z3	The sample required a dilution due to the nature of the sample matrix. Because of this dilution, the surrogate spike concentration in the sample was reduced to a level where the recovery calculation does not provide useful information.
ND	Analyte NOT DETECTED at or above the reporting limit or MDL, if MDL is specified.
RPD	Relative Percent Difference

ADDITIONAL COMMENTS

For 8260 analyses:

Due to the high water solubility of alcohols and ketones, the calibration criteria for these compounds is <30% RSD. The average % RSD of all compounds in the calibration is 15%, in accordance with EPA methods.

For Extractable Fuel Hydrocarbons (EFH, DRO, ORO) :

Unless otherwise noted, Extractable Fuel Hydrocarbons (EFH, DRO, ORO) are quantitated against a Diesel Fuel Standard.

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Pat Abe
Project Manager

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Attention: Joe Wilson

Project ID: CHET HOLIFIELD FED. BLDG.

Report Number: INA1651

Sampled: 01/30/04
Received: 01/30/04

Certification Summary

Del Mar Analytical, Irvine

Method	Matrix	NELAP	CA
EPA 8015 MOD.	Soil	X	X
EPA 8260B	Soil	X	X

NV and NELAP provide analyte specific accreditations. Analyte specific information for Del Mar Analytical may be obtained by contacting the laboratory or visiting our website at www.dmalabs.com.

Del Mar Analytical, Irvine
Pat Abe
Project Manager

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
2009 E. Edinger Ave., Santa Ana, CA 92705
(714) 667-3600

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 02/05/2004
Type of Facility: UST PLAN CHECK - EACH TANK MODIFICAT
Service: A08-TANK MODIFICATION INSPECTION
Reinspection Date:
Jeremy Grant, REHS
(714) 667-3729

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

The purpose of this visit is to perform a primary inspection.

At this time the primary supply and return piping is holding at 78 PSI. The vent line is holding at 28 PSI.

All primary fittings were soap tested on this date, no bubbles were observed.

After 30 minutes time elapsed, the pressures remain unchanged.

You have passed the primary inspection.

The secondary inspection has been scheduled for 02/09/04 at 7:30 AM.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title K. GREG SLUNAKER – CONST

Signature _____ Date 2/5/04

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
2009 E. Edinger Ave., Santa Ana, CA 92705
(714) 667-3600

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 02/09/2004
Type of Facility: UST PLAN CHECK - EACH TANK MODIFICAT
Service: A08-TANK MODIFICATION INSPECTION
Reinspection Date:
Jeremy Grant, REHS
(714) 667-3729

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

The purpose of this visit is to perform an inspection of the secondary piping and sumps. At this time the secondary return, supply, and vent piping is holding at 5 PSI. Both UST sumps are filled with water to 2 inches above the highest penetrations.

All secondary clamshell fittings were soap tested on this date, no bubbles were observed.

After 30 minutes time elapsed the pressure remains unchanged. The water level in the sumps remains unchanged.

You have passed the secondary inspection.

You must provide 48 hours notice to schedule the final inspection

I declare that I have examined and received a copy of this inspection report.

Print Name and Title X GREG SUNAKER

Signature _____ Date 2/9/04

INSPECTION REPORT

County of Orange, Health Care Agency, Environmental Health
2009 E. Edinger Ave., Santa Ana, CA 92705
(714) 667-3600

CHET HOLIFIELD FEDERAL BLDG
24000 AVILA RD STE 4100
LAGUNA NIGUEL, CA 92677

Record ID: FA0023992
Inspection Date: 03/09/2004
Type of Facility: UST PLAN CHECK - EACH TANK MODIFICAT
Service: A08-TANK MODIFICATION INSPECTION
Reinspection Date:
Jeremy Grant, REHS
(714) 667-3729

Mailing Address:
GENERAL SERVICES ADMIN
GENERAL SERVICES ADMINSTRATION
24000 AVILA ROAD STE 4100
LAGUNA NIGUEL, CA 92677

The purpose of this visit is to perform a final inspection. A mechanical inspection will also be performed on this date.

The following sensors were tested on this date....

One fill sump sensor (liquid)
One piping sump sensor (liquid)
One annular sensor (brine)

All three sensors triggered an audible/visual alarm when inverted on this date.

An overfill probe was also tested on this date. The probe triggered an audible/visual alarm on an outside annunciator when overfill conditions were simulated. The probe was set to alarm at 90%.

UPC forms A & B were provided on this date.

You have passed the final inspection. You have been approved to operate the UST however you must submit the following documents with in 30 days....

1. Pipeline integrity test results for the new supply and return lines.
2. Updated monitoring procedure and leak response plan.
3. Certification for the new Veeder-Root 300C tank monitor.
4. UPC form C (Certification of installation)
5. UST/Facility plot plan with sensor and monitor locations (example provided).

* Post construction SB989 tests must be completed by 09/09/04.

I declare that I have examined and received a copy of this inspection report.

Print Name and Title ART ZAMO / CHIEF ENG

Signature A. Zamo Date 3/9/04

F272-09.373Ae DISTRIBUTION: Operator One Copy Environmental Health One Copy

COUNTY OF ORANGE

Pumpke

TOM URAM
DIRECTOR

L. REX EHLING, M.D.
HEALTH OFFICER

ENVIRONMENTAL HEALTH DIVISION
ROBERT E. MERRYMAN, R. S. MPH
DEPUTY DIRECTOR

MAILING ADDRESS: P.O. BOX 355
SANTA ANA, CA 92702

FACILITY MODIFICATION APPLICATION (INSTALLATION/REMOVAL/REPAIR)

(COMPLETE PAGES 1 & 2)

HEALTH CARE AGENCY
PUBLIC HEALTH SERVICES

ENVIRONMENTAL HEALTH DIVISION
2009 E. EDINGER AVENUE
SANTA ANA, CALIFORNIA 92705
(714) 667-3700

DATE: 1-15-93

FACILITY INFORMATION

NAME: Federal Build.

STREET ADDRESS: 24000 Avila Ave

CITY: Laguna Niguel

TOTAL NUMBER OF TANKS (AFTER INSTALLATION/REMOVAL) AT THIS LOCATION: 7

TYPE OF BUSINESS:

____ GASOLINE STATION ____ FARM

✓ GOVERNMENT ____ OTHER

TANK OWNER

NAME (CORP., INDIVIDUAL, PUBLIC AGENCY): Same -

STREET ADDRESS: ____

CITY: ____

STATE: ____ ZIP: ____

TELEPHONE NO.: 213-894-6060.

BILLING ADDRESS INFORMATION

BILL TO NAME: T.T.M.S.

BILL TO ADDRESS: 100 Corporate Pt.

CITY: Culver City

STATE: Ca ZIP: 90230

TELEPHONE NO.: 1-800 660 TTMS.

TYPE OF CONSTRUCTION

INDICATE NO. OF TANK(S) BEING REMOVED/RE-PAIRED/INSTALLED BELOW:
(COMPLETE PAGE 2 - INDICATING THE TANKS TO BE INSTALLED/REMOVED, OR AFFECTED BY THE REPAIR)

____ INSTALLATION(S)

____ REPAIR(S)/RELINE(S) TO USTs

7 CLOSURE(S)/REMOVAL(S)

____ SYSTEM MODIFICATION (E.G., REPIPE, REPAIR TO PIPING)

____ OTHER (SPECIFY) ____

24 HOUR EMERGENCY CONTACT PERSON

DAYS: R. Lawson 310 4395964
NAME TELEPHONE

NIGHTS: 11 11
NAME TELEPHONE

APPLICANT

NAME: Roger M Lawson
PLEASE PRINT

SIGNATURE: R-Lawson

COMPANY NAME: T.T.M.S.

TELEPHONE NO.: 1 800 660 TTMS.

FACILITY OPERATOR (CONTACT PERSON)

NAME: ____

BUSINESS TELEPHONE NO.: 213-894 6060.

NOTE: NEW INSTALLATIONS, CLOSURES, REPAIRS AND SYSTEM MODIFICATIONS OF UNDERGROUND STORAGE TANKS REQUIRE THE SUBMITTAL OF (4) SETS OF PLANS TO THIS DIVISION. THESE PLANS MUST BE APPROVED PRIOR TO THE INITIATION OF ANY CONSTRUCTION OR MODIFICATION. ALL PLANS OR REPORTS REQUIRED MUST ACCOMPANY THIS FORM AT THE TIME OF SUBMITTAL.

OFFICE USE ONLY

PLAN CHECK NO.: 93-010 FEES PAID: 695 - RCVD. BY: KS

PLAN APPROVAL DATE: ____ BY: ____

NUMBER OF TANKS TO RECEIVE A SURCHARGE BILL: ____ NUMBER OF TANKS TO BE ADDED TO BILLING: ____

TANK INFORMATION

PROVIDE THE INFORMATION BELOW FOR ALL TANKS AND PIPING SYSTEMS TO BE INSTALLED, REMOVED OR REPAIRED. ALSO INDICATE THE UPGRADE/CHANGES TO BE MADE TO EACH TANK SYSTEM.

				TANK I.D.	#1	#2	#3	#4
MATERIAL STORED	MATERIAL OR WASTE STORED		CURRENTLY		3- GAS	2- Diesel	1- W.oil.	1. Sol/Funkt.
			PROPOSED					
			PREVIOUSLY					
	FUEL TYPE, I.E., UNLEADED							
CONTAINER	TYPE (TANK, SUMP, OTHERS)							
	DOUBLE WALL/SINGLE WALL							
	UL NUMBER							
	YEAR INSTALLED							
	VAULTED/NOT VAULTED							
	PRIMARY	MANUFACTURER						
		CAPACITY (GALLON)						
		CONSTRUCTION MATERIAL						
		THICKNESS (UNITS)						
		INTERIOR LINING						
	SECONDARY	MANUFACTURER						
		CAPACITY (GALLON)						
		CONSTRUCTION MATERIAL						
		THICKNESS (UNITS)						
	CORROSION PROTECTION							
	TYPE OF LEAK DETECTION FOR USTs (LIQUID PROBE, ETC.)							
	MANUFACTURER OF LEAK DETECTOR							
PIPING	LOCATION (UNDER/ABOVE GROUND)							
	SUCTION/PRESSURE GRAVITY/UNKNOWN							
	PRIMARY	CONSTRUCTION MATERIAL						
		MANUFACTURER						
	SECONDARY	CONSTRUCTION MATERIAL						
		MANUFACTURER						
	TYPE OF LEAK DETECTION FOR PIPING (PRESSURE LOSS DEVICE, ETC.)							
	MANUFACTURER OF LEAK DETECTOR							
OVERFILL PROTECTION (TYPE)								
SPILL CONTAINMENT (TYPE)								

File # 1431

General Services Administration

FACILITY SUPPORT CENTER
DESIGN & CONSTRUCTION BRANCH, 9PXC
350 S. FIGUEROA STREET, SUITE 301
LOS ANGELES, CA 90071

May 10, 1993

Mr. James C. Strozier, Hazardous Waste Specialist
Hazardous Materials Management Section
County Of Orange
2009 E. Edinger Ave., Santa Ana, CA 92702

Re: Project Name: Removal of 7 Storage Tanks
Project No: RCA21418
Project Site: Chet Holifield Federal Building
24000 Avila Road, Laguna Niguel, CA 92677

Dear Mr. Strozier:

The approval letter as attached, from Mr. Scott Crail of Integrated Waste Management Department, indicated that the non-hazardous contaminated soil (excavated from tank 7 site) may be disposed to the County Class III landfills. The removal of the Soil is scheduled for 5-12-93.

As discussed with TTMS, we decided to backfill the excavated 2 sites with clean and compactable materials as specified. After the water monitoring wells and boring tests are performed, we will forward the test reports for your review. The recommendation will be included if any contamination needs to be remediated.

Should you have any questions, please call me at 213-894-6329.

Sincerely,

Elsa L. Wong
Project Director

cc: 9PXC(Official, Reading File)
Jerry Chang, J.C. Chang & Associates; Chris Thixson, TTMS
Michele Feher, 9L; Ed Wasielewski, 9PXM7
Roger Wiesnoski, 9PXP

COUNTY OF ORANGE

MURRY L. CABLE
Director
VICKI L. WILSON
Assistant Director

INTEGRATED WASTE MANAGEMENT DEPARTMENT
1200 N. Main Street, Suite 201
Santa Ana, California 92701
(714) 568-4160
FAX (714) 834-0754

May 10, 1993

Ms. Elsa Wong
Facility Support Center
Design and Construction Branch, 9PXC
350 S. Figueroa Street, Suite 301
Los Angeles, CA 90071

Dear Ms Wong:

I am writing you to confirm the acceptance of your department's excavated soil, from the Chet Holifield Federal Building, into County Class III landfills. While the soil is slightly contaminated, it is acceptable for disposal as a non-hazardous material. Please contact me when you have a hauling date, so we may ensure a smooth disposal.

Sincerely,

Scott Crail
Material Regulation Supervisor

ORANGE COUNTY RECYCLES

APPROVED

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION

B. Rieple 1-1993 93-010
Plan Reviewed By Date Plan #

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

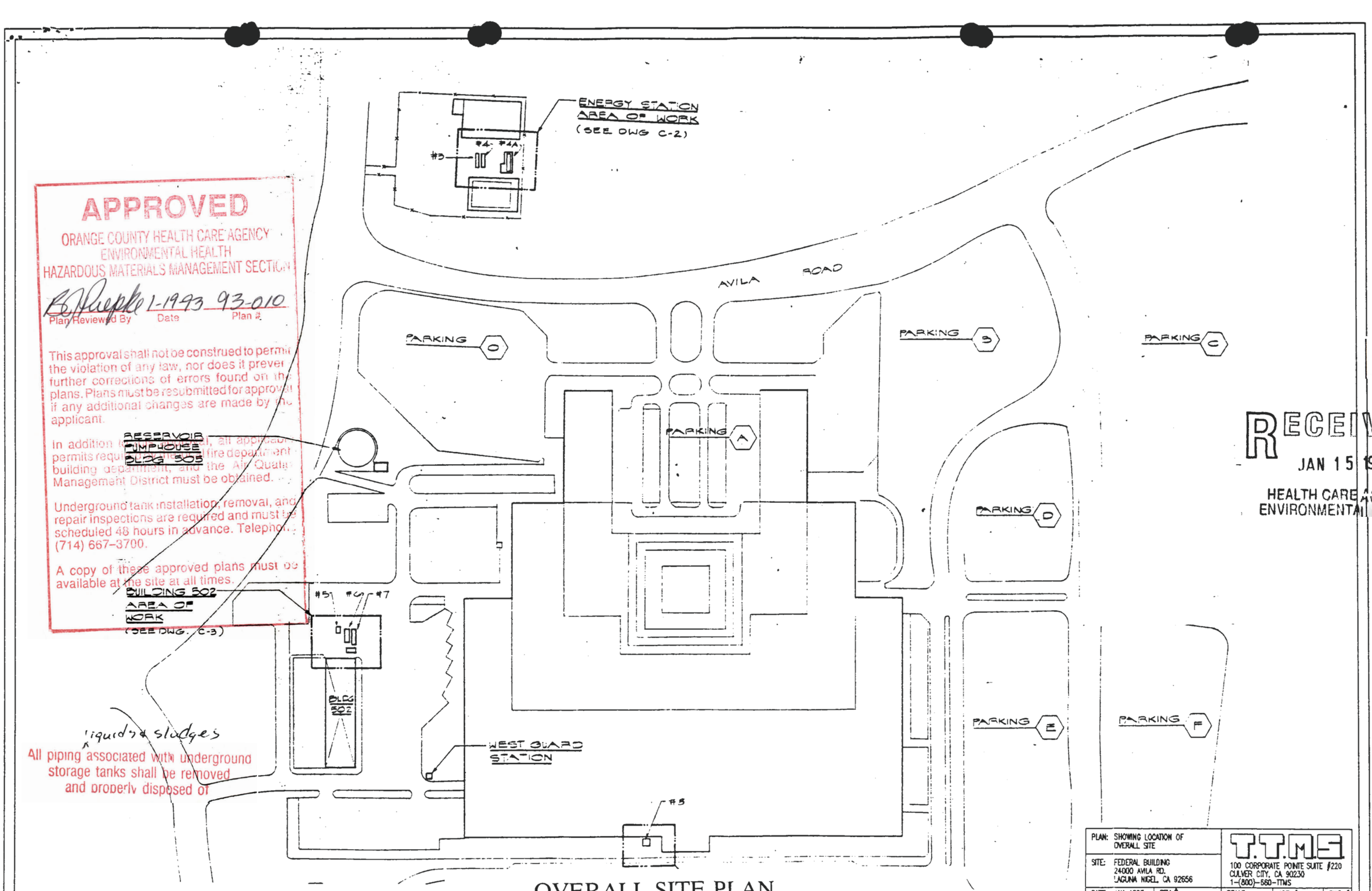
In addition to this approval, all applicable permits required by the fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

A copy of these approved plans must be available at the site at all times.

liquids & sludges
All piping associated with underground storage tanks shall be removed and properly disposed of

RECEIVED
JAN 15 1993
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH



OVERALL SITE PLAN

PLAN: SHOWING LOCATION OF OVERALL SITE		T.T.M.S	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-560-TTMS	
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875	DWG # 2
REV.⚠	REV.⚠			

GENERAL NOTES

SCOPE OF WORK

1 REMOVE SIX (6) EXISTING UNDERGROUND STORAGE TANKS AND ASSOCIATED PIPING, AND ONE (1) ABOVE GROUND ACID STORAGE TANK, ASSOCIATED PIPING, CONCRETE SLAB AND BERM WALLS, STEEL STAIRS AND CATWALK ETC.

2 TANK REMOVAL AND DISPOSAL SHALL BE IN ACCORDANCE WITH ALL RELEVANT LOCAL, STATE AND FEDERAL REGULATIONS.

3 THE LOCATION OF EXISTING UNDERGROUND UTILITIES IS APPROXIMATE ONLY, THE CONTRACTOR SHALL FIELD VERIFY EXACT LOCATION AND DEPTH OF EXISTING UTILITY LINES WITHIN THE AREA OF WORK. PROTECT IN PLACE ALL EXISTING UTILITY LINES AND APPURTENANCES TO REMAIN. IF DAMAGED THEY SHALL BE REPAIRED BY THE CONTRACTOR AT HIS OWN EXPENSE.

4 FILL EXCAVATIONS IN ~~8-INCH LIFTS~~ AND COMPACT TO 90% OF MAXIMUM DENSITY. REPAIR SURFACE TO MATCH EXISTING FOLLOWING TANK REMOVAL.

5 CONTRACTOR SHALL APPLY AND PAY FOR ALL REQUIRED PERMITS, INCLUDING COUNTY OF ORANGE, ENVIRONMENTAL HEALTH DIVISION (714) 667-3700, COUNTY FIRE DEPARTMENT (714) 249-2749 AND SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (714) 396-2000. THE CONTRACTOR SHALL COMPLY WITH THE REQUIREMENTS OF THE COUNTY ENVIRONMENTAL HEALTH DIVISION FORM NUMBER 36 "GUIDELINES FOR THE REMOVAL OF AN UNDERGROUND STORAGE TANK". ALL TESTING, MONITORING, INSPECTIONS ETC. REQUIRED WILL BE PERFORMED BY THE CONTRACTOR. THIS SHALL INCLUDE BUT NOT NECESSARILY BE LIMITED TO CONTINUOUS ON SITE MONITORING READINGS, SOIL SAMPLING AND DELIVERY TO A STATE CERTIFIED LABORATORY, A REPORT FROM THE LABORATORY WILL BE FURNISHED TO THE OWNER AND TO THE AGENCIES NOTED ABOVE. THE CONTRACTOR SHALL PAY ALL FEES, COST ETC. ASSOCIATED WITH THE MONITORING, TESTING, REPORT ETC.

6 ALL TANKS TO BE REMOVED ARE CURRENTLY NOT IN USE. CONTRACTOR SHALL DETERMINE IF THEY CONTAIN PRODUCT, AND IF SO SHALL REMOVE AND DISPOSE OF IT IN A LEGAL MANNER.

7 ALL ITEMS TO BE DEMOLISHED SHALL BECOME THE PROPERTY OF THE CONTRACTOR AND SHALL BE REMOVED AND DISPOSED OF OFF-SITE IN A LEGAL MANNER.

8 CONTRACTOR SHALL PROVIDE TEMPORARY SHORING FOR EXCAVATIONS, AS REQUIRED.

9 IN AC PAVED AREAS, REPAVE IN ACCORDANCE WITH DETAIL 1 ON DRAWING C-3 SLOPE NEW PAVING TO DRAIN.

10 THE SOIL TESTS PERFORMED ON SOIL SAMPLES TAKEN FROM BORING AT THE THREE SITES INDICATE THAT THE SITES HAVE NOT BEEN CONTAMINATED. THESE RESULTS SHALL NOT RELAX THE TESTING AND MONITORING REQUIREMENTS OF THE CONTRACTOR DURING TANK REMOVAL.

11 THE BORINGS FOUND THAT GROUND WATER WAS NOT ENCOUNTERED TO A DEPTH OF 20 FEET AT THE ENERGY PLANT SITE, WAS NOT ENCOUNTERED TO A DEPTH OF 15 FEET AT THE SOUTH ENTRANCE, GROUND WATER WAS ENCOUNTERED AT A DEPTH OF 15 FEET AT BUILDING 502. THESE FACTS ARE NOTED FOR CONTRACTOR INFORMATION ONLY AND NO GUARANTEE, EXPRESSED OR IMPLIED, IS GIVEN WITH REGARD TO THE DEPTH OF GROUND WATER AT THE TIME OF REMOVAL OF THE TANKS.

12 DEGASSING OF GASOLINE TANKS AND LOWER EXPLOSION LEVEL TESTING SHALL BE PERFORMED BY A CONTRACTOR LICENSED TO DO SO IN THE STATE OF CALIFORNIA.

PLAN: GENERAL NOTES		T.T.M.S.	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
DATE: JAN 1993	REV.1	SCALE: SEE PLAN	JOB # 11875	DWG # 2-1
REV.1	REV.1			

DESCRIPTION OF TANKS TO BE REMOVED

TANK NO.	ABOVE OR BELOW GROUND	APPROXIMATE CAPACITY (GALLONS)	APPROXIMATE SIZE	CONST.	PRODUCT	YEAR INSTALLED
3	BELOW GROUND (APPROX 4' COVER)	10,418	8' DIAMETER 28' LONG	STEEL	DIESEL	1969
4	BELOW GROUND (APPROX. 4' COVER)	10,418	8' DIAMETER 28' LONG	STEEL	DIESEL	1969
4A	ABOVE GROUND	5,000	6.5' DIAMETER 21'LONG	STEEL	SULFURIC ACID	1969
5	BELOW GROUND (APPROX. 4' COVER)	500	4' DIAMETER 6 1/2' LONG	STEEL	WASTE OIL	1969
6	BELOW GROUND (APPROX. 4' COVER)	10,100	8' DIAMETER 28' LONG	STEEL	GASOLINE	1969
7	BELOW GROUND (APPROX. 4' COVER)	10,100	8' DIAMETER 28' LONG	STEEL	GASOLINE	1969
8	BELOW GROUND (APPROX. 6' COVER)	500	4' DIAMETER 6 1/2' LONG	STEEL	GASOLINE	1969

PLAN: SHOWING LIST OF TANKS TO BE REMOVED

SITE: FEDERAL BUILDING
24000 AVILA RD.
LAGUNA NIGEL, CA 92656

DATE: JAN 1993 | REV.1 | REV.2
REV.3 | REV.4

T.T.M.S.
100 CORPORATE POINTE SUITE #220
CULVER CITY, CA 90230
1-(800)-660-TTMS

SCALE: SEE PLAN | JOB # 11875 | DWG # 2-2

ENERGY PLANT BUILDING

4" VENT PIPE TO REMAIN

6"±

EXIST TELEPHONE CONDUIT TO REMAIN

EXIST. 3/4" U/G COMP AIR TO REMAIN (COVER = 2'±)

FOLLOWING DEMOLITION, REGRADE & COMPACT SUBGRADE WITHIN SAWCUT LINES TO 90% MAX DENSITY AND REPAVE SIMILAR

TO C-2 | C-3

NEW LOCATION

1" AC D LINE TO REMAIN

CAP TYP.

FUEL OIL RETURN (T)

CONDENSING WATER DRAIN TO REMAIN

4" DRAIN LINE TO REMAIN

EXIST. 1 1/2" U/G PROCESS WATER TO REMAIN (COVER = 2'±)

REPAVE FOLLOWING TANK REMOVAL AND BACKFILL

C-2 | C-3

CAP-TYP.

2' TYP. ALL AROUND, UNO

FUEL OIL SUPPLY

TANK #3

TANK #4

TANK #4A

6'-0"

28'-0"

CONC. PIER TYP. FOR 2

A

C-2 | C-2

12'-0"

3'±

TYP. ALL AROUND.

(FW)

GROUNDING CABLE TO REMAIN

EXIST. 36" CW TO REMAIN (COVER = 4'±)

36" CW

PROTECT IN PLACE ELECTRICAL DUCTBANK (COVER = 7'±) - FIELD VERIFY EXACT LOCATION -

EXIST. FW LINE TO REMAIN (COVER = 30'±)

(E) ELEC. CONDUIT

Liquids & Sludges

All piping associated with underground storage tanks shall be removed and properly disposed of

APPROVED

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION

Plan Reviewed By | Date | Plan #

1-4-93 | 93-010

This approval shall not be construed as a permit for, nor does it allow the violation of any law, nor does it grant authority for any further corrections of errors or omissions that may exist in these plans. Plans must be resubmitted for approval if any additional changes are made from those approved by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

A copy of these approved plans must be available at the site at all times.

ENERGY PLANT AREA SITE PLAN

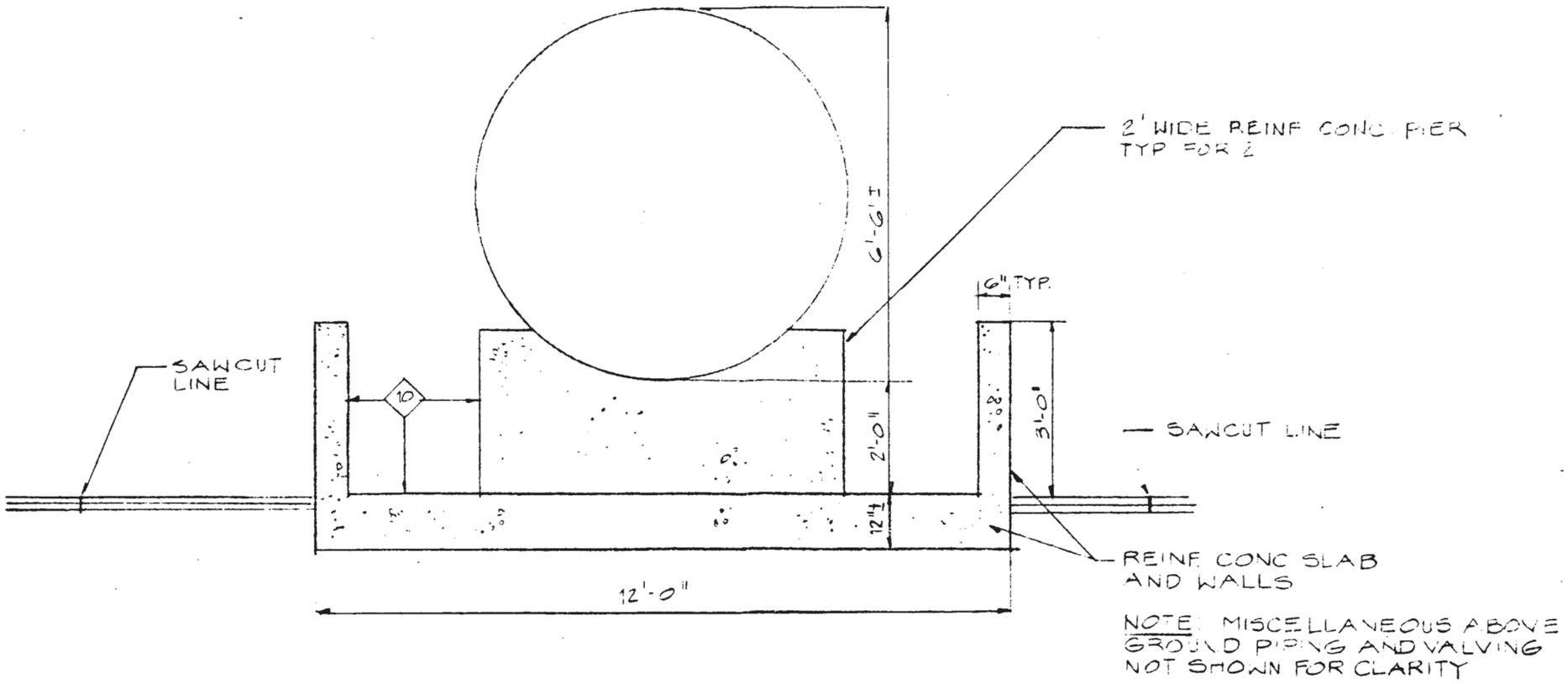
PLAN: SHOWING LOCATION OF TANKS #3, #4 & #4A TO BE REMOVED

SITE: FEDERAL BUILDING
24000 AVILA RD.
LAGUNA NIGEL, CA 92656

DATE: JAN 1993 | REV. | REV. | REV.

SCALE: SEE PLAN | JOB # 11875 | DWG # 3

T.T.M.S
100 CORPORATE POINTE SUITE #220
CULVER CITY, CA 90230
1-(800)-660-TTMS



SECTION A

PLAN: SHOWING SECTION VIEW OF TANK #4A		T.T.M.S	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875	DWG # 3-1
REV.⚠	REV.⚠			

DEMOLITION NOTES

1. EXISTING UNDERGROUND DIESEL FUEL STORAGE TANKS TO BE REMOVED SEE DRAWING C-1 FOR DESCRIPTION.

2. EXISTING ABOVE GROUND SULFURIC ACID STORAGE TANK TO BE REMOVED SEE DRAWING C-1 FOR DESCRIPTION.

3. SAWCUT FULL DEPTH EXIST. 3" AC PAVEMENT.

4. EXIST 8'-6" X 5'-0" X 18" REINF. CONCRETE SLAB WITH MANHOLE FRAME AND COVER TO BE DEMOLISHED.

5. REMOVE EXISTING COMP. AIR AND WATER PIPING AS REQUIRED TO FACILITATE REMOVAL OF TANKS. CAP PIPES TO REMAIN.

6. REMOVE ALL ABOVE AND BELOW GROUND 1 1/2" FUEL OIL-SUPPLY AND 1" FUEL OIL RETURN PIPING AND ASSOCIATED VALVES AND FITTINGS. CAP PIPES 6" ± FROM FACE OF WALL. COVER ON UNDERGROUND PIPES 24" ±.

7. REMOVE EXIST. GUARD RAIL AROUND PUMPS.

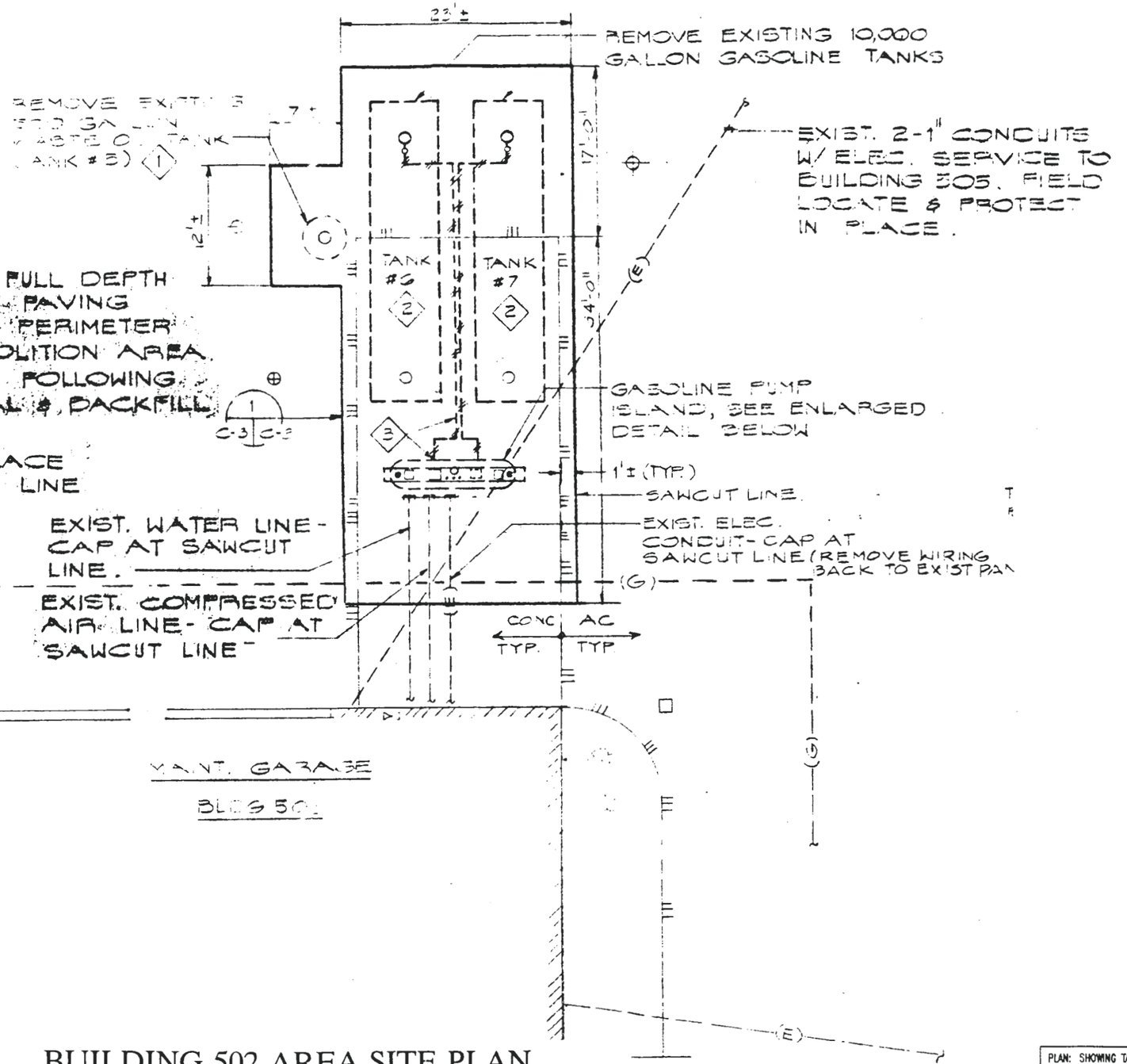
8. REMOVE EXIST. PUMPS AND CONC. PADS.

9. RELOCATE 3' X 4' X 5' HIGH ENCLOSURE WITH PORTABLE FIRE HOSE TO SOUTH WALL OF BUILDING AS SHOWN.

10. DEMO. ALL CONCRETE SLABS AND WALLS, ~~ALL STEEL PLATFORMS, STAIRS AND SUPPORTS~~, ALL WATER PIPING, EYEWASH STAND AND HOSE BIBB, ALL AIR PIPING, AIR OUTLETS, VALVING ETC. ALL PROCESS PIPING ETC. WITHIN THE SAWCUT LINES. NOT ALL ABOVEGROUND PROCESS PIPING IS SHOWN. CAP PIPING TO REMAIN AT PERIMETER OF DEMOLITION AREA.

11. DISCONNECT AND REMOVE WIRE FROM EXISTING CONDUIT BACK TO PANEL.

PLAN: DEMOLITION NOTES FOR TANKS #3,#4 & #4A		T.T.M.S 100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656			
DATE: JAN 1993	REV.1	SCALE: SEE PLAN	JOB # 11875	DWG # 3-2
REV.1	REV.1		



liquids & sludges

All piping associated with underground storage tanks shall be removed and properly disposed of.

All piping associated with underground storage tanks shall be removed and properly disposed of.

APPROVED
ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION
By Rieple 1-1993 93-010
Plan Reviewed By Date Plan #

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

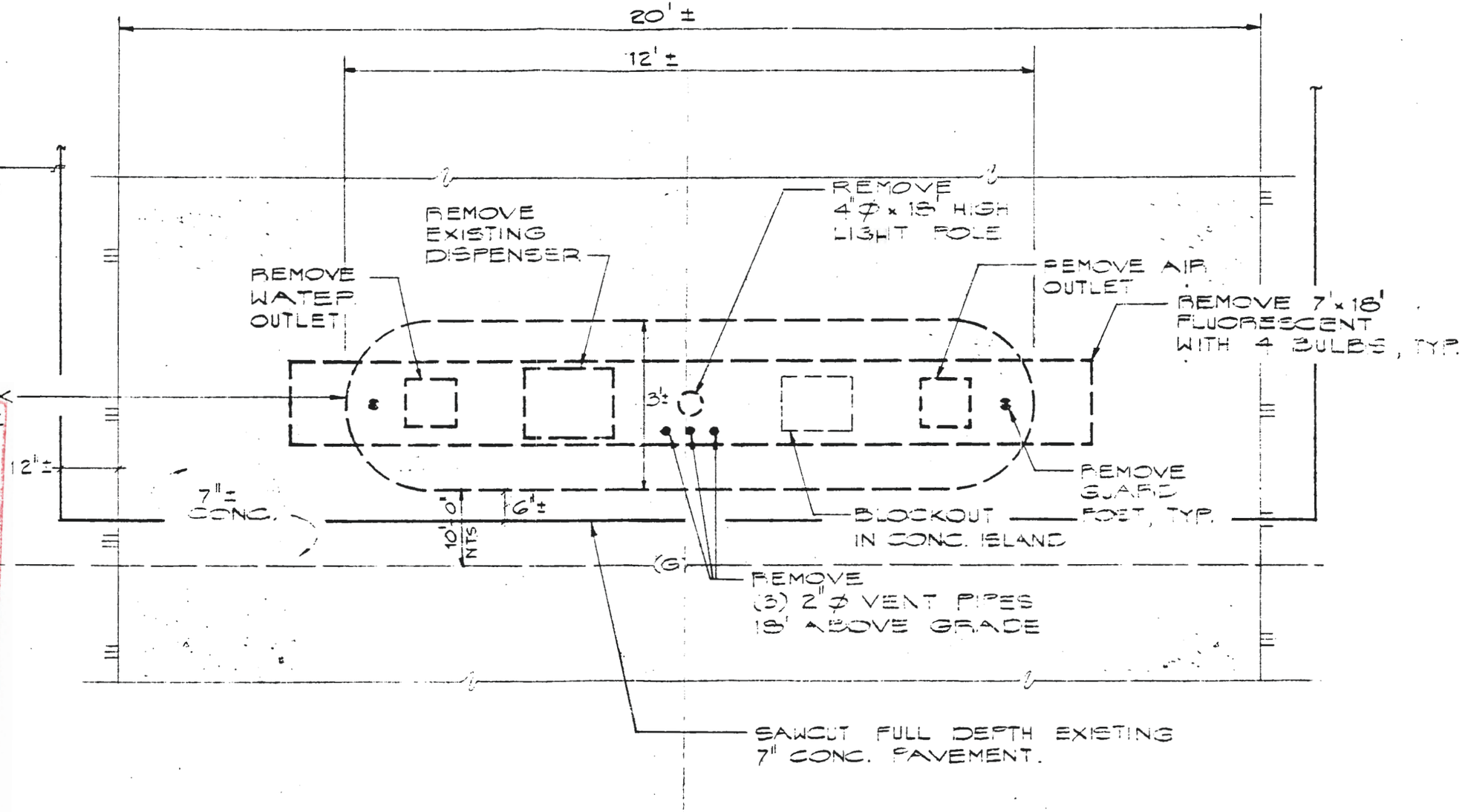
In addition to this approval, all applicable permits required by the local fire department building department, and the Air Quality Management District must be obtained

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

A copy of these approved plans must be available at the site at all times.

BUILDING 502 AREA SITE PLAN

PLAN: SHOWING TANKS #6 & #7 TO BE REMOVED		T.T.M.S. 100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-560-TTMS	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656			
DATE: JAN 1993	REV.△	SCALE: SEE PLAN	JOB # 11875
REV.△	REV.△		DWG # 4



PUMP ISLAND PLAN

liquids & sludges
All piping associated with underground storage tanks shall be removed and properly disposed of

APPROVED
ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION
BJ Rupple 1-1993 93-010
Plan Reviewed By Date Plan #

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In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

These approved plans must be on site at all times.

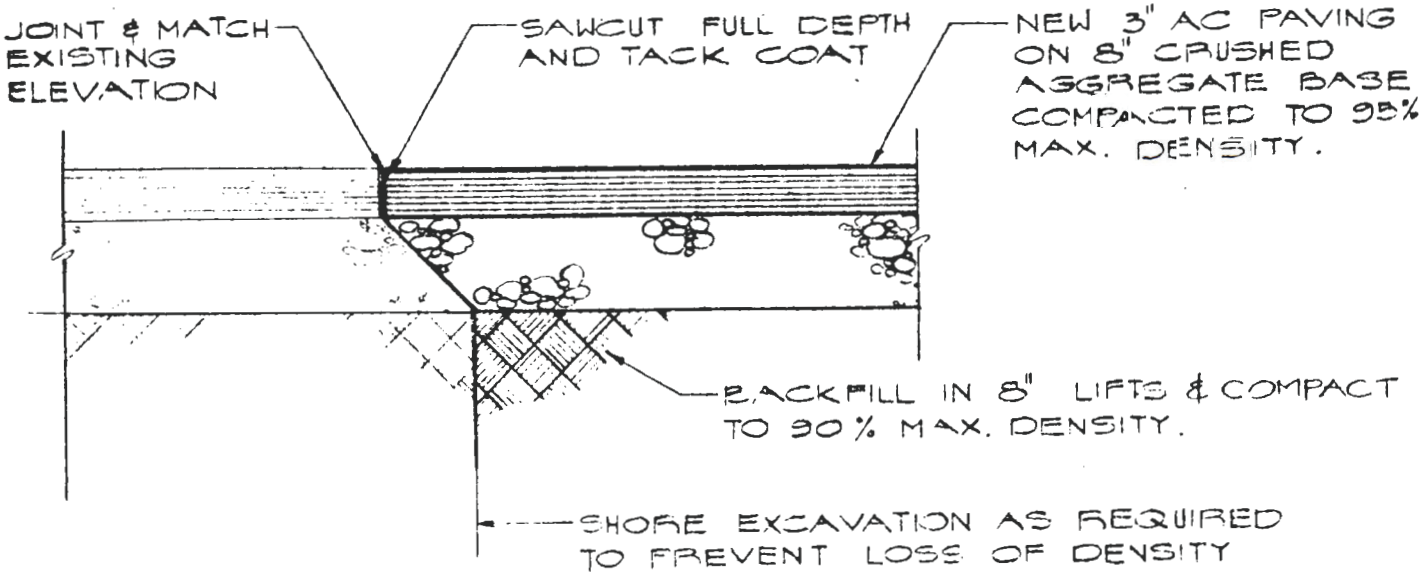
PLAN: SHOWING ISLAND & DISPENCER TO BE REMOVED

SITE: FEDERAL BUILDING
24000 AVILA RD.
LAGUNA NIGEL, CA 92656

DATE: JAN 1993 | REV.⚠ | REV.⚠ | REV.⚠ | REV.⚠

T.T.M.S
100 CORPORATE POINTE SUITE #220
CULVER CITY, CA 90230
1-(800)-660-TTMS

SCALE: SEE PLAN | JOB # 11875 | DWG # 4-1



NOTE: DETAIL AT EXISTING CONCRETE PAVING SHALL BE THE SAME EXCEPT TACK COAT SHALL NOT BE REQUIRED.

DETAIL 1

PLAN: SHOWING SAWCUT & COMPACTION DETAIL		T.T.M.S. 100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-560-TTMS	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656			
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875	DWG # 4-2
REV.⚠	REV.⚠			

DEMOLITION NOTES

BUILDING 502 SITE

1. EXISTING UNDERGROUND WASTE OIL TANK TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION.

2. EXISTING UNDERGROUND GASOLINE STORAGE TANKS TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION.

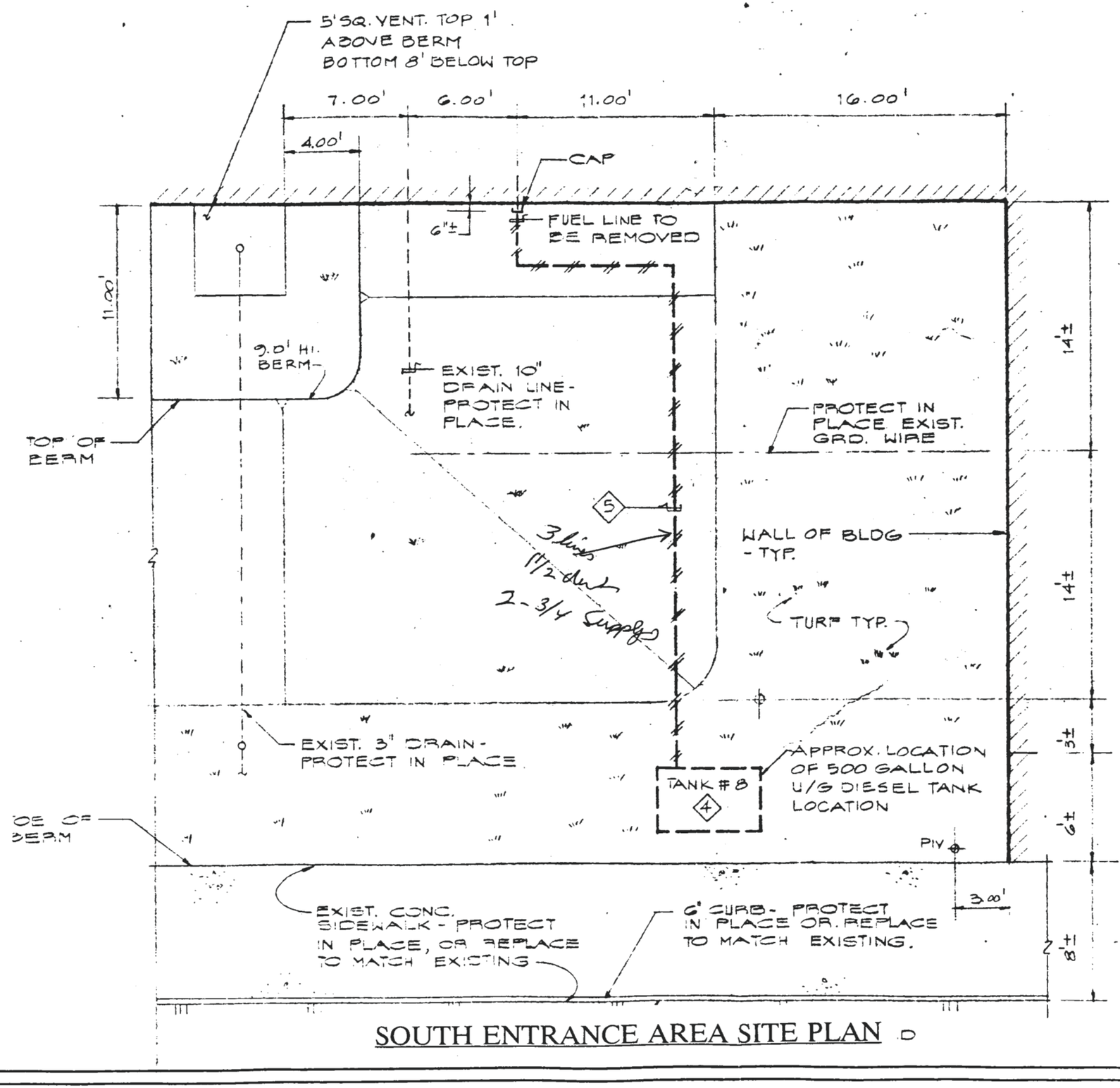
3. REMOVE EXISTING UNDERGROUND FUEL SUPPLY AND RETURN PIPING, VENT PIPING, CONCRETE ISLAND INCLUDING ALL APPURTENANCES (FUEL DISPENSER, LIGHT STANDARD, VENT PIPES, ETC.)

SOUTH ENTRANCE SITE

4. EXISTING UNDERGROUND DIESEL TANK TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION. THIS TANK COULD NOT BE LOCATED DURING FIELD INVESTIGATION. CONTRACTOR SHALL EXCAVATE FUEL LINE INTO BUILDING AND TRACE BACK TO THE TANK.

5. EXIST. FUEL LINE TO BE REMOVED.

PLAN: SHOWING DEMOLITION NOTES FOR TANKS #6 & #7		T.T.M.S.	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875	DWG # 4-3
REV.⚠	REV.⚠			



SOUTH ENTRANCE AREA SITE PLAN

liquids & sludges

All piping associated with underground storage tanks shall be removed and properly disposed of.

APPROVED

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION

Plan Reviewed By	Date	Plan #
B Rapke	1-19-93	93-010

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

A copy of these approved plans must be available at the site at all times.

PLAN: SHOWING TANK #8 TO BE REMOVED		T.T.M.S	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875
REV.⚠	REV.⚠		DWG # 5

DEMOLITION NOTES

BUILDING 502 SITE

1. EXISTING UNDERGROUND WASTE OIL TANK TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION.

2. EXISTING UNDERGROUND GASOLINE STORAGE TANKS TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION.

3. REMOVE EXISTING UNDERGROUND FUEL SUPPLY AND RETURN PIPING, VENT PIPING, CONCRETE ISLAND INCLUDING ALL APPURTENANCES (FUEL DISPENSER, LIGHT STANDARD, VENT PIPES, ETC.)

SOUTH ENTRANCE SITE

4. EXISTING UNDERGROUND DIESEL TANK TO BE REMOVED. SEE DRAWING C-1 FOR DESCRIPTION. THIS TANK COULD NOT BE LOCATED DURING FIELD INVESTIGATION. CONTRACTOR SHALL EXCAVATE FUEL LINE INTO BUILDING AND TRACE BACK TO THE TANK.

5. EXIST. FUEL LINE TO BE REMOVED.

PLAN: SHOWING DEMOLITION NOTES FOR TANK #8		T.T.M.S	
SITE: FEDERAL BUILDING 24000 AVILA RD. LAGUNA NIGEL, CA 92656		100 CORPORATE POINTE SUITE #220 CULVER CITY, CA 90230 1-(800)-660-TTMS	
DATE: JAN 1993	REV.⚠	SCALE: SEE PLAN	JOB # 11875	DWG # 5-1
REV.⚠	REV.⚠			

Orange County Health Care Agency

Environmental Health Division, Hazardous Materials Management Section
Mailing Address: P.O. Box 355, Santa Ana, CA 92702
Office: 2009 E. Edinger, Santa Ana, CA 92705
Telephone: (714) 667-3700

HW 2393

HAZARDOUS WASTE & UNDERGROUND STORAGE TANK INSPECTION REPORT

FILE NO: 001431 ACCOUNT NO: 10237-10 EPA #:
FACILITY: Chet Holifield Bldg UST PERMIT NO:
STREET: 24000 Avila Rd. PERMIT:
CITY: [58] Laguna Niguel, CA ZIP: 92677 MAP COORDINATES:
DISTRICT: 401
NEAREST CROSS STREET: TSD FACILITY?
NEW DBA? ___ NEW BUSINESS? ___ NEW ADDRESS? ___ NEW OWNER? ___ PUBLIC AGENCY? ___
NEW INFO:

HW INSPECTION TYPE: NO OF UST ON SITE: 7→1 UST INSPECTION TYPE: #7
NUMBER OF EMPLOYEES: # TANKS TO BILL : 1 UST COMPLIANCE CODE:
LAST DATE HW INSPECTED: LAST DATE UST INSPECTED:
HW EXEMPT CODE: UST EXEMPT CODE: 1
HW STATUS CODE: UST STATUS CODE: 1
BUSINESS OWNER: PHONE: (___)
TANK OPERATOR: PHONE: (___)
CONTACT: PHONE: (___)

HW BILLING (NAME & MAILING ADDRESS):

PHONE: (___)

UST BILLING (NAME & MAILING ADDRESS):

PHONE: (___)

PROPERTY OWNER (NAME & MAILING ADDRESS):

PHONE: (___)

TANK OWNER (NAME & MAILING ADDRESS):

PHONE: (___)

EMERGENCY CONTACTS

DAY: PHONE: (___)
NIGHT: PHONE: (___)

ENTERED
FEB 2 1993

ACTIVE ICR:
INSPECTOR #: 233 NAME: Brenda J. Riepke DATE: 1/29/93

COUNTY OF ORANGE • HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH DIVISION
2009 EAST EDINGER AVENUE
SANTA ANA, CA 92705-4722
(714) 667-3700

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd
Laguna Niguel, CA 92677

ACCOUNT NUMBER: 10237 FILE NUMBER: _____

UNDERGROUND STORAGE TANK INSPECTION
VIOLATION DESCRIPTION

___ 105 Operating underground storage tank (UST) without a permit
___ 115 Failure to report the change in ownership within 30 days
___ 135 Failure to enter into a written contract between owner(s) and operator(s)
___ 140 Meters not inspected by the County Department of Weights and Measures or a certified device repairman
___ 145 Failure to monitor the tank(s) using the method specified on the UST permit
___ 150 Failure to maintain written records of all monitoring, equipment calibration, and maintenance on site
___ 170 Failure to correct previous violations within 30 days
___ 190 Failure to submit inventory reconciliation quarterly/annual report
___ 196 Failure to submit a "Permit to Operate" application for the USTs at the site
___ 197 Failure to implement/select/develop an approved monitoring system/plan
___ 198 Failure to obtain/show evidence of financial responsibility
___ 291 Failure to submit a diagram showing the location of UST(s)
___ 120 Failure to report changes in the usage of UST(s) within 30 days
___ 125 Failure to report an unauthorized release
___ 130 Failure to develop a response plan to remove the unauthorized release from the secondary container
___ 155 Failure to monitor visually at required frequency
___ 165 Continuous monitoring devices/equipment/tank level monitors/line leak detectors inoperable
___ 180 Failure to annually test and/or submit proof of installation of pipeline leak detectors
___ 185 Failure to submit tank integrity test results within 30 days of test completion
___ 195 Failure to follow procedures when inventory reconciliation/tank gauging exceeds allowable variations
___ 270 Failure to report changes in monitoring alternative procedures within 30 days
___ 275 Failure to properly close UST(s)
___ 280 Failure to properly repair UST(s)
___ 286 Failure to perform tightness/integrity test on tank(s)/pipelines
___ 287 Pressurized line leak detectors are not designed to resist unauthorized tampering
___ 288 Underground storage tank(s) not secured to prevent unauthorized inputs or withdrawals
___ 290 Other

- Witnessed removal of 6 USTs at this location this date. 17 Samples taken at 3 locations at this property. Contamination noted at south entrance and at maintenance area. Case to be referred to cleanup group.

I declare that I have examined and received a copy of this 3 2 of 3 page inspection report.

INSPECTOR #: 233 BJP SIGNATURE: _____

RECEIVED BY: _____ DATE RECEIVED: _____

PAGE NUMBER ___ OF ___ TOTAL PAGES

Orange County Health Care Agency
UNDERGROUND STORAGE TANK INSPECTION REPORT

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd.

: Laguna Niguel, CA 92677

FILE NO: _____ ACCOUNT NO: _____ EPA #: _____

!HCA TANK ID#	!CODE!	TANK # 002	003	!CODE!	TANK # 004	005	!CODE!	TANK # 006	008
!FACILITY TANK ID	!	002	003	!	004	005	!	006	008
!MATERIAL STORED	!			!			!		
!Currently	!	99999	99999	!	99999	99999	!	99999	99999
!Proposed	!			!			!		
!Previously	!			!			!		
!Waste or Product	!			!			!		
!FUEL TYPE	!			!			!		
!Trade Secret	!			!			!		
!EXEMPT TYPE	!			!			!		
!	!			!			!		
!Double/Single Wall	!			!			!		
!Compartment No.	!			!			!		
!Year Installed	!			!			!		
!Vault/Not Vaulted	!			!			!		
!Primary Wall:	!			!			!		
!Manufacturer	!			!			!	500	
!Capacity / Gallons	!	10,000	10,000	!	10,000	10,000	!	~~10,000~~	500
!Construct Material	!			!			!		
!Thickness & Units	!			!			!		
!Interior Lining	!			!			!		
!Secondary Wall:	!			!			!		
!Manufacturer	!			!			!		
!Capacity / Gallons	!			!			!		
!Construct Material	!			!			!		
!Thickness & Units	!			!			!		
!Corrosion Protectn	!			!			!		
!Leak Detect: Type	!			!			!		
!Manufacturer	!			!			!		
!PIPING: Location	!			!			!		
!Dispensr/Tank Fill	!			!			!		
!Double/Single Wall	!			!			!		
!Primary Wall:	!			!			!		
!Construct Material	!			!			!		
!Manufacturer	!			!			!		
!Secondary Wall:	!			!			!		
!Construct Material	!			!			!		
!Manufacturer	!			!			!		
!Leak Detect: Type	!			!			!		
!Manufacturer	!			!			!		
!TYPE OF OVERFILL	!			!			!		
!PROTECTION	!			!			!		
!SPILL	!			!			!		
!CONTAINMENT	!			!			!		
!MONITORING	!			!			!		
!METHOD	! 35	Removed legally	35	!	35	35	!	35	35
!LAST TANK TEST	!			!			!		

INSPECTION DATE: 1/29/93

UNDERGROUND TANK REMOVAL FORM

Chet Holifield Bldg - 24000 Avila Road - Laguna Niguel, CA
Facility Name / Address

PC # 93PC10 II# 92CC8 LUST # _____ IR # _____

Inspector: Brenda Pueppke Date: 1-29-93 Time: 8:00am

La Paz (714)
Cross Street / Site Telephone Number

US GSA - 24000 Avila Rd
Owner / Address

Edgar Gray / Mark Grippi
Contact Person / Telephone Number

N/A
Operator (if different than owner) / Telephone Number

Chris / Roger Lawson TTMS (310) 439-5964
Consultant or Contractor Company / Contact Name / Telephone Number

	Size	Const. Mat.	Mat. Stored		Size	Const. Mat.	Mat. Stored
Tank #1:	10K		diesel	Tank #4:			
Tank #2:	10K		diesel	Tank #5:			
Tank #3:				Tank #6:			

Depth to Groundwater: ? unk Fate of Piping: removed

Proposition 65 Required? Submitted Prop. 65 Form Submitted on: _____

Fire Dept. Personnel On-site: Stacey / Lambeth

Ambient Air Readings on Field Instrument: 0ppm

Other Information: _____

FIELD ACTIVITY DESCRIPTION

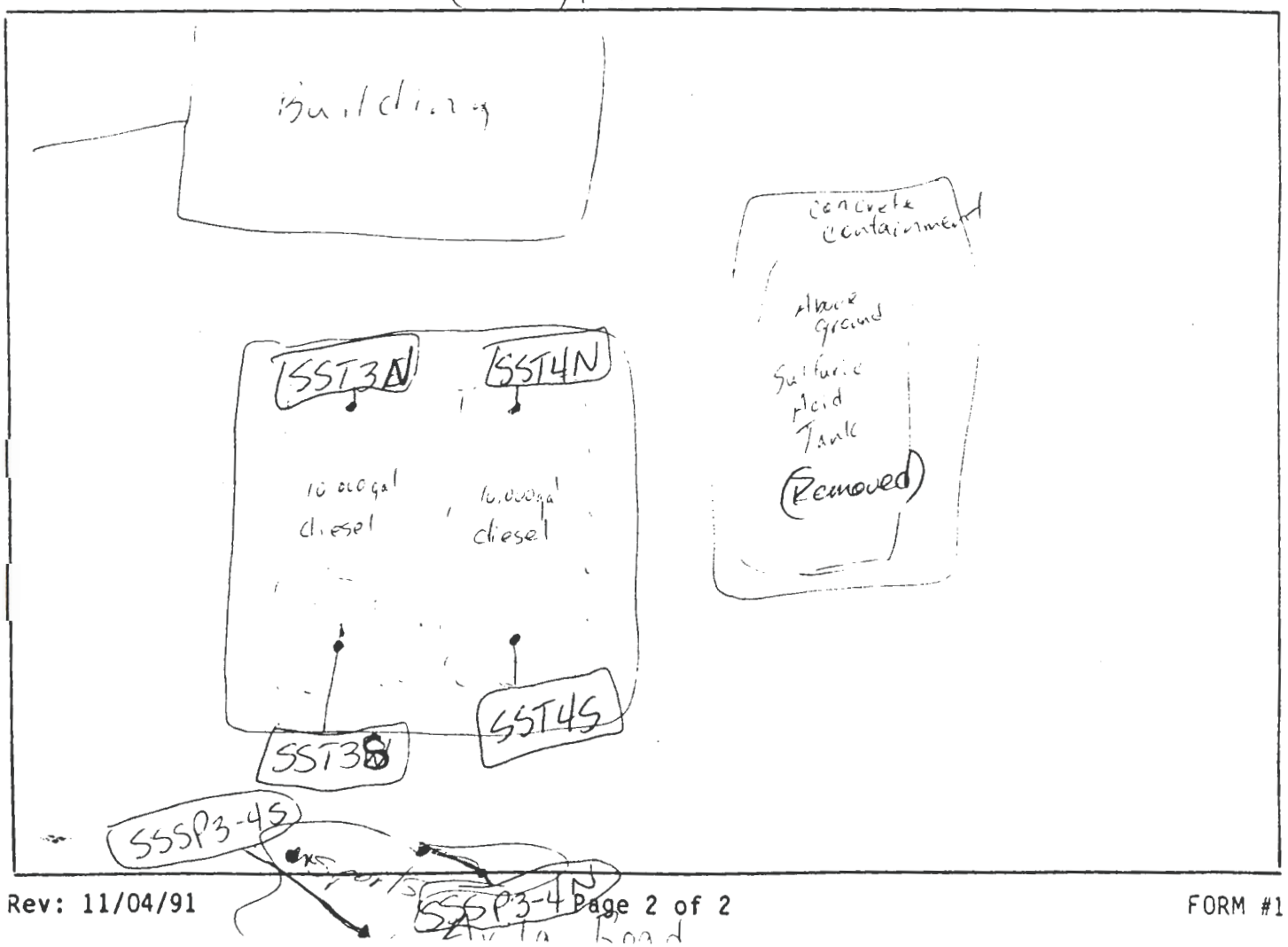
Chet Holifield Bldg. 24100 Avila Rd - Laguna Niguel, CA 92677
Facility Name Address

PC # 93PC10 CC # 92CCE LUST # _____ IR # _____

Inspector: Brenda Jo Pieplke Date: 1-29-93 Time: 8:00am

Field Activity: Witnessed removal of 2-10,000 gal diesel tanks. Tank sat on concrete pads. Samples taken at end of pads, beneath tanks. Sand fill material appeared to be fairly clean. No holes observed in the 2 tanks. Also, an above-ground sulfuric acid tank was removed. It was within a concrete containment area with no soil exposed. No samples taken near the sulfuric tank.
10,000 gal

(Energy Station)



[redacted] FIELD ACTIVITY DESCRIPTION [redacted]

Chet Holifield Bldg - 24000 Alv. la Rd - Laguna Niguel, CA 92677
Facility Name Address

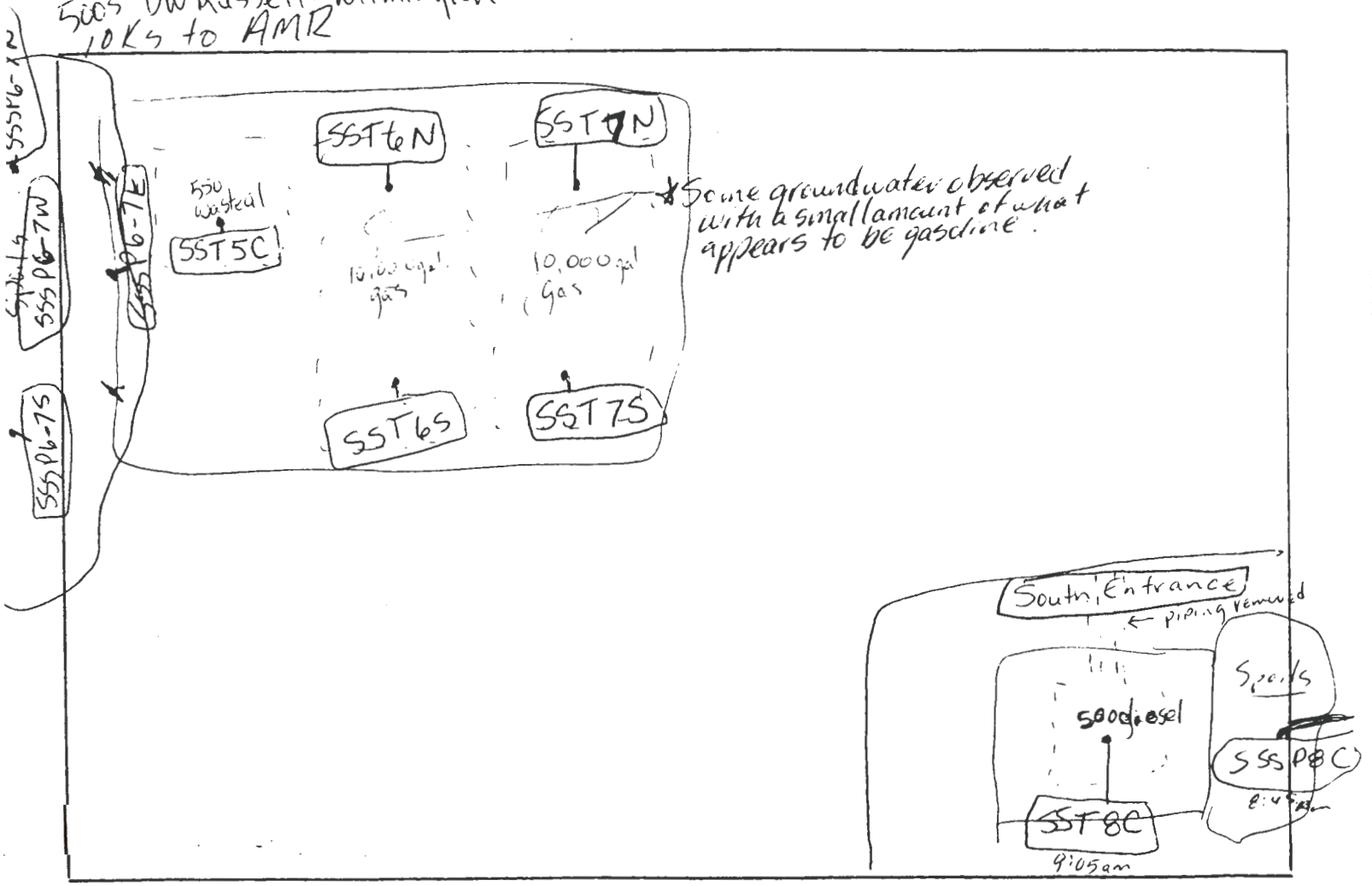
PC # 93PC10 CC # 92CC8 LUST # _____ IR # _____

Inspector: Brenda Pueplke Date: 1-29-93 Time: 8:00am

Field Activity: ☆ Witnessed removal of 1-500 gallon diesel tank located at south entrance to Chet Holifield. 2 samples taken. 1- from spoils, 1- from excavation. Tank resembled swiss cheese with many holes observed - pea-sized to softball-sized holes. Some dark patches of soil observed which appeared to be contamination.

☆ Witnessed removal of 2-10K gallon gasoline & 1-550 gallon waste oil tank. Site appeared to have a dark clay layer near bottom of tank & odors were evident. Waste oil tank (No holes observed) appeared to be in good shape. Greenish-grey soil observed at the location where sample (# SST6N) was taken. Groundwater was observed in the bottom of the excation with an observable film on the water.

5 cys DW Russell - Wilmington
10 Cys to AMR



UNDERGROUND TANK REMOVAL FORM

Chet Holifield Bldg. - 24000 Avila Rd.
Facility Name — Address

PC # 93PC 10 CC # 92CC8 LUST # _____ IR # _____

Inspector: Brenda Jo Pluepke Date: 1-29-93 Time: 8:00am

La Paz
Cross Street — Site Telephone Number

USGSA - 24000 Avila Rd.
Owner — Address

Edgar Gray (714) 643-4863
Contact Person — Telephone Number

N/A
Operator (if different than owner) — Telephone Number

Chris / Rick Pilat TTMS (310) 568-8290
Consultant or Contractor Company — Contact Name — Telephone Number

Roger Lawson

	Size	Const. Mat.	Mat. Stored		Size	Const. Mat.	Mat. Stored
Tank #1:	500	steel	diesel	Tank #4:	500	steel	waste oil
Tank #2:	10,000	steel	gas	Tank #5:			
Tank #3:	10,000	steel	gas	Tank #6:			

Depth to Groundwater: 10 ft? Fate of Piping: removed

Proposition 65 Required? yes Prop. 65 Form Submitted on: _____

Fire Dept. Personnel On-site: Stacey Lambeth

Ambient Air Readings on Field Instrument: 0 ppm

Other Information: _____

LABORATORY ANALYSIS REPORT

Client: T. T. M.S.
Project No.: 11875
Project Name: CHET HOLIFIELD FEDERAL BUILDING
Sample Matrix: SOIL
Method: EPA 8020(BTEX)/8015M(GAS.)/(DIESEL)

AA Project No.:
Date Sampled: 01-29-93
Date Received: 01-30-93
Date Reported: 01-31-93

Date Analyzed:	01-30-93	01-30-93	01-30-93	01-30-93	Reporting Detection Limits	Units
AA I.D. No.:	13308	13309	13311	13312		
Client I.D. No.:	S5T8C	S5SP9C	S5SP6-7G	S5SP6-7E		
Compounds						
Benzene	<5	<5	<5	<5	5	µg/Kg
Toluene	<5	<5	<5	<5	5	µg/Kg
Ethylbenzene	<5	<5	<5	<5	5	µg/Kg
Xylenes	<5	<5	34	<5	10	µg/Kg
Gasoline Range Organics			<2	<2	2	mg/Kg
Date Analyzed						
Diesel Range Organics						

LABORATORY ANALYSIS RESULTS

Client: T, T, M.S.
Project No.: 11875
Project Name: CHET HOLIFIELD FEDERAL BUILDING
Sample Matrix: SOIL
Method: EPA 8020(BTEX)/8015M(GAS)/(DIESEL)

AA Project No.:
Date Sampled: 01-29-93
Date Received: 01-30-93
Date Reported: 01-31-93

Date Analyzed:	01-30-93	01-30-93	01-30-93	01-30-93	Reporting Detection Limits	Units
AA I.D. No.:	13313	13314	13315	13316		
Client I.D. No.:	SSSP6-7W	SSSP6-7W	SST6S	SST6W		
Compounds						
Benzene	<5	<5	<5	<5	5	µg/Kg
Toluene	<5	<5	<5	<5	5	µg/Kg
Ethylbenzene	<5	<5	<5	<5	5	µg/Kg
Xylenes	<10	29	<10	<10	10	µg/Kg
Gasoline Range Organics	<2	<2	<2	<2	2	mg/Kg
Date Analyzed						
Diesel Range Organics						

LABORATORY ANALYSIS REPORT

Client: T, T, M.S.
Project No.: 11875
Project Name: CHET HOLIFIELD FEDERAL BUILDING
Sample Matrix: SOIL
Method: EPA 8020(BTEX)/8015M(GAS)/(DIESEL)

AA Project No.:
Date Sampled: 01-29-93
Date Received: 01-30-93
Date Reported: 01-31-93

Date Analyzed:	01-30-93	01-30-93	01-30-93	01-30-93	Reporting Detection Limits	Units
AA I.D. No.:	13317	13318	13319	13320		
Client I.D. No.:	S9T7N	S9T7S	S9SP3-4W	S9SP3-4S		
Compounds						
Benzene	<5	11	<5	<5	5	µg/Kg
Toluene	<5	48	<5	<5	5	µg/Kg
Ethylbenzene	<5	14	<5	<5	5	µg/Kg
Xylenes	<10	91	<10	<10	10	µg/Kg
Gasoline Range Organics	<2	<2			2	mg/Kg
Date Analyzed						
Diesel Range Organics						

Client: T.T.M.S
Project Name: CHET HOLIFIELD FEDRAL BUILDING
Project No.: 11875
Sample Matrix: soil
Method: EPA 8015M(DIESEL)

AA Project No.:
Date Sampled: 1/21/93
Date Received: 1/30/93
Date Reported:
Units: mg/Kg

AA ID No.	Client ID	Date Extracted	Date Analyzed	Results	Reporting Detection Limits
13308	SSTBC	12/30/93	12/30/93	220	10
13309	SSSPBC	"	"	<10	10
13319	SSSP3-4N	"	"	<10	10
13320	SSSP3-4S	"	"	<10	10
13321	SSST3N	"	"	<10	10
13322	SSST3S	"	"	<10	10
13323	SSST4N	"	"	<10	10
13324	SSST4S	"	"	<10	10

<: Not detected at or above the value of the concentration indicated.

L. ORATORY ANALYSIS RESULT

Client: T, T, M.S.
Project No.: 11875
Project Name: CHET HOLIFIELD FEDERAL BUILDING
Sample Matrix: SOIL
Method: EPA 8020(BTEX)/8015M(GAS)/(DIESEL)

AA Project No.:
Date Sampled: 01-29-93
Date Received: 01-30-93
Date Reported: 01-31-93

Date Analyzed:	01-30-93	01-30-93	01-30-93	01-30-93	Reporting Detection Limits	Units
AA I.D. No.:	13321	13322	13323	13324		
Client I.D. No.:	SST3N	SST3S	SST4N	SST4S		
Compounds						
Benzene	<5	<5	<5	<5	5	µg/Kg
Toluene	<5	<5	<5	<5	5	µg/Kg
Ethylbenzene	<5	<5	<5	<5	5	µg/Kg
Xylenes	<10	<10	<10	<10	10	µg/Kg
Gasoline Range Organics						
Date Analyzed						
Diesel Range Organics						

LABORATORY ANALYSIS RES S

Client: TTMS
Project Name: CHET HOLIFIELD
Project No.: 11895
Sample Matrix: SOIL
Method: EPA 418.1 (TRPH)

AA Project No.:
Date Sampled: 1/29/93
Date Received: 1/30/93
Date Analyzed: 2/8/93
Date Reported:
Units: mg/kg

AA ID No.	Client ID	Results	Reporting Detection Limits
13310	SST 5C	10	5

<: Not detected at or above the value of the concentration indicated.

END

Orang[illegible] ity Health Care Agency

2/16/93

Environmental Health Division, Hazardous Materials Management Section
Mailing Address: P.O. Box 355, Santa Ana, CA 92702
Office: 2009 E. Edinger, Santa Ana, CA 92705
Telephone: (714) 667-3700

HAZARDOUS WASTE & UNDERGROUND STORAGE TANK INSPECTION REPORT

FILE NO: 001431 ACCOUNT NO: 10237-14 EPA #:
UST PERMIT NO:
FACILITY: Chet Holifield Bldg. PERMIT:
STREET: 24000 Avila Rd. MAP COORDINATES:
CITY: (92) Laguna Niguel, CA ZIP: 92677 DISTRICT: 401

NEAREST CROSS STREET: TSD FACILITY?

NEW DBA? ___ NEW BUSINESS? ___ NEW ADDRESS? ___ NEW OWNER? ___ PUBLIC AGENCY? ___

NEW INFO:

HW INSPECTION TYPE: NO OF UST ON SITE: 1 UST INSPECTION TYPE: #93
NUMBER OF EMPLOYEES: # TANKS TO BILL : 1 UST COMPLIANCE CODE: 02
LAST DATE HW INSPECTED: LAST DATE UST INSPECTED:
HW EXEMPT CODE: UST EXEMPT CODE: 1
HW STATUS CODE: UST STATUS CODE: 1
BUSINESS OWNER: PHONE: ( )
TANK OPERATOR: PHONE: ( )
CONTACT: PHONE: ( )

HW BILLING (NAME & MAILING ADDRESS):

PHONE: ( )

UST BILLING (NAME & MAILING ADDRESS):

PHONE: ( )

PROPERTY OWNER (NAME & MAILING ADDRESS):

PHONE: ( )

TANK OWNER (NAME & MAILING ADDRESS):

PHONE: ( )

ENTERED
FEB 16 1993

EMERGENCY CONTACTS

DAY: PHONE: ( )
NIGHT: PHONE: ( )

ACTIVE ICR:
INSPECTOR #: 233 NAME: Brenda Jo Ruepke DATE: 2/3/93

Oran (nty Health Care Agency
UNDERGROUND STORAGE TANK INSPECTION REPORT

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd.

: Laguna Niguel, CA 92677

FILE NO: _____ ACCOUNT NO: _____ EPA #: _____

VIOLATION DESCRIPTIONS

FACILITY

___ 105 OPERATING UNDERGROUND STORAGE TANKS (UST) WITHOUT A PERMIT
___ 115 FAILURE TO REPORT THE CHANGE IN OWNERSHIP WITHIN 30 DAYS
___ 135 FAILURE TO ENTER INTO A WRITTEN CONTRACT BETWEEN OWNERS AND OPERATORS
___ 140 METERS NOT INSPECTED BY THE COUNTY DEPARTMENT OF WEIGHTS AND MEASURES OR A DEVICE REPAIRMAN
___ 145 FAILURE TO MONITOR THE TANKS USING THE METHOD SPECIFIED ON THE PERMIT
___ 150 FAILURE TO MAINTAIN WRITTEN RECORDS OF ALL MONITORING, EQUIPMENT CALIBRATION, AND MAINTENANCE ON SITE
___ 170 FAILURE TO CORRECT PREVIOUS VIOLATIONS WITHIN 30 DAYS
___ 190 FAILURE TO SUBMIT INVENTORY RECONCILIATION QUARTERLY/ANNUAL REPORT
___ 196 FAILURE TO SUBMIT A "PERMIT TO OPERATE" APPLICATION FOR THE USTS AT THE SITE
___ 197 FAILURE TO IMPLEMENT/SELECT/DEVELOP AN APPROVED MONITORING SYSTEM/PLAN
___ 198 FAILURE TO OBTAIN/SHOW EVIDENCE OF FINANCIAL RESPONSIBILITY
___ 291 FAILURE TO SUBMIT A DIAGRAM SHOWING THE LOCATION OF UST

TANK

___ 120 FAILURE TO REPORT THE CHANGES IN THE USAGE OF UST WITHIN 30 DAYS
___ 125 FAILURE TO REPORT AN UNAUTHORIZED RELEASE
___ 130 FAILURE TO DEVELOP A RESPONSE PLAN TO REMOVE THE UNAUTHORIZED RELEASE FROM THE SECONDARY CONTAINER
___ 155 FAILURE TO MONITOR VISUALLY AT REQUIRED FREQUENCY
___ 165 CONTINUOUS MONITORING DEVICES/EQUIPMENT/TANK LEVEL MONITORS/LINE LEAK DETECTORS INOPERABLE
___ 180 FAILURE TO ANNUALLY TEST AND/OR SUBMIT PROOF OF INSTALLATION OF PIPELINE LEAK DETECTORS
___ 185 FAILURE TO SUBMIT TANK INTEGRITY TEST RESULTS WITHIN 30 DAYS OF TEST COMPLETION
___ 195 FAILURE TO FOLLOW PROCEDURES WHEN INVENTORY RECONCILIATION/TANK GAUGING EXCEEDS ALLOWABLE VARIATIONS
___ 270 FAILURE TO REPORT CHANGES IN MONITORING ALTERNATIVE PROCEDURES WITHIN 30 DAYS
___ 275 FAILURE TO PROPERLY CLOSE USTS
___ 280 FAILURE TO PROPERLY REPAIR USTS
___ 286 FAILURE TO PERFORM TIGHTNESS/INTEGRITY TEST ON TANKS/PIPELINES
___ 287 PRESSURIZED LINE LEAK DETECTORS ARE NOT DESIGNED TO RESIST UNAUTHORIZED TAMPERING
___ 288 UNDERGROUND TANK(S) NOT SECURED TO PREVENT UNAUTHORIZED INPUTS OR WITHDRAWLS
___ 290 OTHER

- Received lab results for the samples taken during the tank removal project at this site.
- Sample results show some levels of TPH & BTXE above the transfer levels of TPH-10ppm & BTXE-.3ppm.
- Transfer to cleanup group

I DECLARE THAT I HAVE EXAMINED AND RECEIVED A COPY OF THIS 2 2nd PAGE INSPECTION REPORT.

PRINT NAME & TITLE: _____

SIGNATURE: _____ DATE: 2/3/93

Orange County Health Care Agency

Environmental Health Division, Hazardous Materials Management Section
Mailing Address: P.O. Box 355, Santa Ana, CA 92702
Office: 2009 E. Edinger, Santa Ana, CA 92705
Telephone: (714) 667-3700

VBT 4/26/93

HAZARDOUS WASTE & UNDERGROUND STORAGE TANK INSPECTION REPORT

FILE NO: 001431 ACCOUNT NO: 10237-13 EPA #:
FACILITY: Chet Holifield Bldg. UST PERMIT NO:
STREET: 24000 Avila Rd PERMIT:
CITY: [58] Laguna Niguel, CA ZIP: 92677 MAP COORDINATES:
DISTRICT: 401

NEAREST CROSS STREET: TSD FACILITY?

NEW DBA? ___ NEW BUSINESS? ___ NEW ADDRESS? ___ NEW OWNER? ___ PUBLIC AGENCY? ___

NEW INFO:

HW INSPECTION TYPE: NO OF UST ON SITE: 1 UST INSPECTION TYPE: #93
NUMBER OF EMPLOYEES: # TANKS TO BILL : 1 UST COMPLIANCE CODE: 0
LAST DATE HW INSPECTED: LAST DATE UST INSPECTED:
HW EXEMPT CODE: UST EXEMPT CODE: 1
HW STATUS CODE: UST STATUS CODE: 1
BUSINESS OWNER: PHONE: (___)
TANK OPERATOR: PHONE: (___)
CONTACT: PHONE: (___)

HW BILLING (NAME & MAILING ADDRESS):

PHONE: (___)

UST BILLING (NAME & MAILING ADDRESS):

PHONE: (___)

PROPERTY OWNER (NAME & MAILING ADDRESS):

PHONE: (___)

TANK OWNER (NAME & MAILING ADDRESS):

PHONE: (___)

EMERGENCY CONTACTS

DAY: PHONE: (___)
NIGHT: PHONE: (___)

ENTERED
APR 21 1993

ACTIVE ICR:

INSPECTOR #: 233 NAME: Brenda Jo Puepke DATE: 4/15/93

Orange [redacted]ty Health Care Agency
UNDERGROUND STORAGE TANK INSPECTION REPORT

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd.

: Laguna Niguel, CA

FILE NO: _____ ACCOUNT NO: _____ EPA #: _____

VIOLATION DESCRIPTIONS

FACILITY

___ 105 OPERATING UNDERGROUND STORAGE TANKS (UST) WITHOUT A PERMIT
___ 115 FAILURE TO REPORT THE CHANGE IN OWNERSHIP WITHIN 30 DAYS
___ 135 FAILURE TO ENTER INTO A WRITTEN CONTRACT BETWEEN OWNERS AND OPERATORS
___ 140 METERS NOT INSPECTED BY THE COUNTY DEPARTMENT OF WEIGHTS AND MEASURES OR A DEVICE REPAIRMAN
___ 145 FAILURE TO MONITOR THE TANKS USING THE METHOD SPECIFIED ON THE PERMIT
___ 150 FAILURE TO MAINTAIN WRITTEN RECORDS OF ALL MONITORING, EQUIPMENT CALIBRATION, AND MAINTENANCE ON SITE
___ 170 FAILURE TO CORRECT PREVIOUS VIOLATIONS WITHIN 30 DAYS
___ 190 FAILURE TO SUBMIT INVENTORY RECONCILIATION QUARTERLY/ANNUAL REPORT
___ 196 FAILURE TO SUBMIT A "PERMIT TO OPERATE" APPLICATION FOR THE USTS AT THE SITE
___ 197 FAILURE TO IMPLEMENT/SELECT/DEVELOP AN APPROVED MONITORING SYSTEM/PLAN
___ 198 FAILURE TO OBTAIN/SHOW EVIDENCE OF FINANCIAL RESPONSIBILITY
___ 291 FAILURE TO SUBMIT A DIAGRAM SHOWING THE LOCATION OF UST

TANK

___ 120 FAILURE TO REPORT THE CHANGES IN THE USAGE OF UST WITHIN 30 DAYS
___ 125 FAILURE TO REPORT AN UNAUTHORIZED RELEASE
___ 130 FAILURE TO DEVELOP A RESPONSE PLAN TO REMOVE THE UNAUTHORIZED RELEASE FROM THE SECONDARY CONTAINER
___ 155 FAILURE TO MONITOR VISUALLY AT REQUIRED FREQUENCY
___ 165 CONTINUOUS MONITORING DEVICES/EQUIPMENT/TANK LEVEL MONITORS/LINE LEAK DETECTORS INOPERABLE
___ 180 FAILURE TO ANNUALLY TEST AND/OR SUBMIT PROOF OF INSTALLATION OF PIPELINE LEAK DETECTORS
___ 185 FAILURE TO SUBMIT TANK INTEGRITY TEST RESULTS WITHIN 30 DAYS OF TEST COMPLETION
___ 195 FAILURE TO FOLLOW PROCEDURES WHEN INVENTORY RECONCILIATION/TANK GAUGING EXCEEDS ALLOWABLE VARIATIONS
___ 270 FAILURE TO REPORT CHANGES IN MONITORING ALTERNATIVE PROCEDURES WITHIN 30 DAYS
___ 275 FAILURE TO PROPERLY CLOSE USTS
___ 280 FAILURE TO PROPERLY REPAIR USTS
___ 286 FAILURE TO PERFORM TIGHTNESS/INTEGRITY TEST ON TANKS/PIPELINES
___ 287 PRESSURIZED LINE LEAK DETECTORS ARE NOT DESIGNED TO RESIST UNAUTHORIZED TAMPERING
___ 288 UNDERGROUND TANK(S) NOT SECURED TO PREVENT UNAUTHORIZED INPUTS OR WITHDRAWLS
___ 290 OTHER

- Received closure report for the removal of 1-500 gallon diesel tank this past december. Information includes tank destruction info, rinseate manifest, lab results & disposal manifests for the contaminated spoils pile. Discussed case with Jim Strozier - cleanup, and he agreed that this case could be closed.
- Case closed this date.

I DECLARE THAT I HAVE EXAMINED AND RECEIVED A COPY OF THIS 2 of 2 PAGE INSPECTION REPORT.

PRINT NAME & TITLE: Copy mailed to Chet Holifield

SIGNATURE: _____ DATE: 4/15/93

Pueplce

TOM URAM
DIRECTOR

L. REX EHLING, M.D.
HEALTH OFFICER

ENVIRONMENTAL HEALTH DIVISION
ROBERT E. MERRYMAN, R. S. MPH
DEPUTY DIRECTOR

MAILING ADDRESS: P.O. BOX 355
SANTA ANA, CA 92702

COUNTY OF ORANGE

HEALTH CARE AGENCY
PUBLIC HEALTH SERVICES

ENVIRONMENTAL HEALTH DIVISION
2009 E. EDINGER AVENUE
SANTA ANA, CALIFORNIA 92705
(714) 667-3700

FACILITY MODIFICATION APPLICATION (INSTALLATION/REMOVAL/REPAIR)

(COMPLETE PAGES 1 & 2)

DATE: _____

FACILITY INFORMATION

NAME: CHET HOLIFIELD FEDERAL BUILDING

STREET ADDRESS: 24000 AVILA ROAD

CITY: LAGUNA NIGUEL, CA 92656

TOTAL NUMBER OF TANKS (AFTER INSTALLATION/REMOVAL) AT THIS LOCATION: 0

TYPE OF BUSINESS:

_____ GASOLINE STATION _____ FARM

X GOVERNMENT _____ OTHER

TANK OWNER

NAME (CORP., INDIVIDUAL, PUBLIC AGENCY):

UNITED STATES OF AMERICA

STREET ADDRESS: 24000 AVILA ROAD S.4100

CITY: LAGUNA NIGUEL, CA 92656

STATE: CA ZIP: 92656

TELEPHONE NO.: 714-643-4863

BILLING ADDRESS INFORMATION

BILL TO NAME: SAME AS ABOVE

BILL TO ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

TELEPHONE NO.: _____

TYPE OF CONSTRUCTION

INDICATE NO. OF TANK(S) BEING REMOVED/REPAIRED/INSTALLED BELOW:
(COMPLETE PAGE 2 - INDICATING THE TANKS TO BE INSTALLED/REMOVED, OR AFFECTED BY THE REPAIR)

_____ INSTALLATION(S)

_____ REPAIR(S)/RELINE(S) TO USTs

1 CLOSURE(S)/REMOVAL(S)

_____ SYSTEM MODIFICATION (E.G., REPIPE, REPAIR TO PIPING)

_____ OTHER (SPECIFY) _____

24 HOUR EMERGENCY CONTACT PERSON

DAYS: EDGAR M GRAY JR 714-643-4863
NAME TELEPHONE

NIGHTS: SAME
NAME TELEPHONE

APPLICANT

NAME: CHARLES M BENTLEY
PLEASE PRINT

SIGNATURE: Charles M Bentley

COMPANY NAME: UST COMPLIANCE GROUP

TELEPHONE NO.: 213-773-6437

FACILITY OPERATOR (CONTACT PERSON)

NAME: EDGAR M GRAY JR.

BUSINESS TELEPHONE NO.: 714-643-4863

NOTE: NEW INSTALLATIONS, CLOSURES, REPAIRS AND SYSTEM MODIFICATIONS OF UNDERGROUND STORAGE TANKS REQUIRE THE SUBMITTAL OF (4) SETS OF PLANS TO THIS DIVISION. THESE PLANS MUST BE APPROVED PRIOR TO THE INITIATION OF ANY CONSTRUCTION OR MODIFICATION. ALL PLANS OR REPORTS REQUIRED MUST ACCOMPANY THIS FORM AT THE TIME OF SUBMITTAL.

OFFICE USE ONLY

PLAN CHECK NO.: 92-308 FEES PAID: 173 RCVD. BY: KJ

PLAN APPROVAL DATE: 12-21-92 BY: BJP

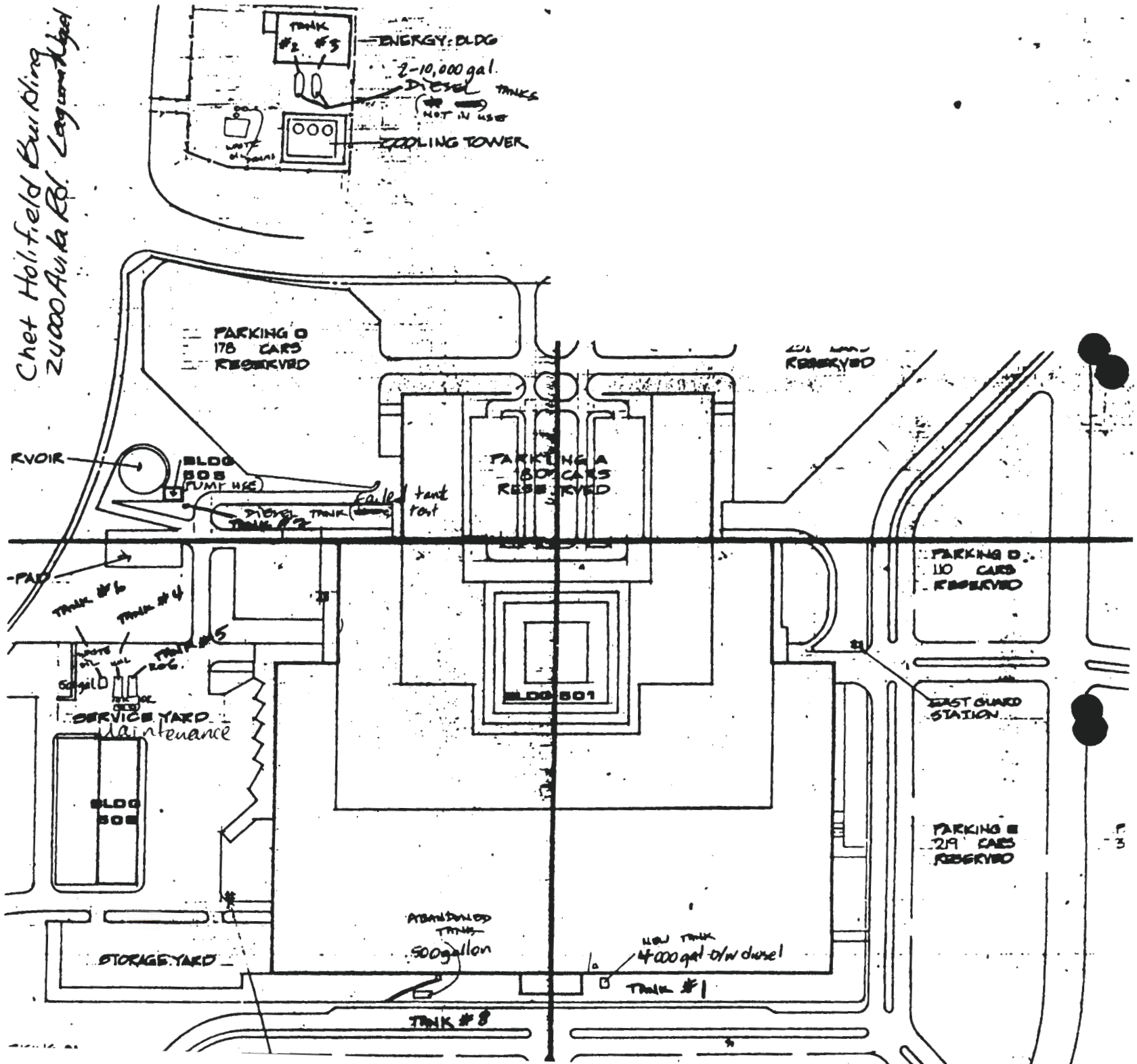
NUMBER OF TANKS TO RECEIVE A SURCHARGE BILL: 0 NUMBER OF TANKS TO BE ADDED TO BILLING: 0

HSO # 118099
12-18-92

TANK INFORMATION

PROVIDE THE INFORMATION BELOW FOR ALL TANKS AND PIPING SYSTEMS TO BE INSTALLED, REMOVED OR REPAIRED. ALSO INDICATE THE UPGRADE/CHANGES TO BE MADE TO EACH TANK SYSTEM.

				TANK I.D.	#1	#2	#3	#4
MATERIAL STORED	MATERIAL OR WASTE STORED		CURRENTLY		DIESEL			
			PROPOSED					
			PREVIOUSLY		DIESEL			
	FUEL TYPE, I.E., UNLEADED							
CONTAINER	TYPE (TANK, SUMP, OTHERS)				TANK			
	DOUBLE WALL/SINGLE WALL				SINGLE			
	UL NUMBER				U/K			
	YEAR INSTALLED				U/K			
	VAULTED/NOT VAULTED				NOT VAULTED			
	PRIMARY	MANUFACTURER			U/K			
		CAPACITY (GALLON)			500			
		CONSTRUCTION MATERIAL			STEEL			
		THICKNESS (UNITS)			U/K			
		INTERIOR LINING			NONE			
	SECONDARY	MANUFACTURER			N/A			
		CAPACITY (GALLON)						
		CONSTRUCTION MATERIAL						
		THICKNESS (UNITS)						
	CORROSION PROTECTION				U/K			
	TYPE OF LEAK DETECTION FOR USTs (LIQUID PROBE, ETC.)				U/K			
	MANUFACTURER OF LEAK DETECTOR				NONE			
PIPING	LOCATION (UNDER/ABOVE GROUND)				UNDER			
	SUCTION/PRESSURE GRAVITY/UNKNOWN				SUCTION			
	PRIMARY	CONSTRUCTION MATERIAL			STEEL			
		MANUFACTURER						
	SECONDARY	CONSTRUCTION MATERIAL			NONE			
		MANUFACTURER						
	TYPE OF LEAK DETECTION FOR PIPING (PRESSURE LOSS DEVICE, ETC.)				NONE			
	MANUFACTURER OF LEAK DETECTOR				NONE			
OVERFILL PROTECTION (TYPE)					NONE			
SPILL CONTAINMENT (TYPE)					NONE			


Chet Holifield Building
24000 Aurora Rd. Laguna Niguel
TANK #2 #3
ENERGY BLDG
2-10,000 gal. Diesel TANKS
NOT IN USE
COOLING TOWER
PARKING D
178 CARS
RESERVED
RESERVED
RESERVOIR
BLDG 505
PUMP HSE
Failed tank rest
PARKING A
180 CARS
RESERVED
PAD
TANK #6
TANK #4
TANK #5
BLDG
Solvent
SERVICE YARD
Maintenance
BLDG 501
PARKING D
110 CARS
RESERVED
EAST GUARD STATION
BLDG 505
PARKING E
219 CARS
RESERVED
ABANDONED TANKS
500 gallon
STORAGE YARD
NEW TANK
4000 gal D/W diesel
TANK #1
TANK #8

APPROVED
ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS MANAGEMENT SECTION
Plan Reviewed By — 12-21-92 Date — 92-308 Plan #

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground tank installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 667-3700.

A copy of these approved plans must be available at the site at all times.

liquids & sludges
All piping associated with underground storage tanks shall be removed and properly disposed of

RECEIVED
DEC 18 1992
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH

EL LAZO ROAD

PARKING

A/7.9

A.C. PAVING

WATER METER VAULT

BACKFLOW PREVENTER

PLANTING

CONTROL GATE A/7.6

PLANTING

FOR LARGE SCALE PLAN SEE SHT. C6.1 CIVIL DWG.

RESERVOIR

B.L.D.G. 505

500 gal for diesel

A/8.4

C.L. FENCE

A/8.3

CONC. WALK

B L D G.

A.C. PAVING

FUEL TANK (BURIED)

DN. A.C. PAVED RAMP

DN. RAMP

3' CONC. WALK

PLANTED SLOPE

BRIDGE

TURF HELI-PAD

RAMP

2.5

SCALE 1" = 40'

A BASIC B

AUTONETICS

APPR

UNDERGROUND TANK REMOVAL FOR

Chet Holifield Building - 24000 Avila Rd. / N
Facility Name — Address

PC # 92-308 TI # _____ LUST # _____ CC # 92CC8

Inspector: Brenda Jo Pueplle Date: 12-23-92 Time: 3:00pm

La Paz — (714) 643-4663
Cross Street — Site Telephone Number

GSA - Federal Bldg. - 24000 Avila
Owner — Address

Ed Gray
Contact Person — Telephone Number

Mark Grippi
Operator (if different than owner) — Telephone Number

UST Compliance Group
Consultant or Contractor Company — Contact Name — Telephone Number

	Size	Const. Mat.	Mat. Stored		Size	Const. Mat.	Mat. Stored
Tank #1:	500	Steel	diesel	Tank #4:			
Tank #2:				Tank #5:			
Tank #3:				Tank #6:			

Depth to Groundwater: ? Fate of Piping: Removed

Proposition 65 Required? _____ Prop. 65 Form Submitted on: _____

Fire Dept. Personnel On-site: None

Ambient Air Readings on Field Instrument: 0 ppm

Other Information: _____

File # 1431

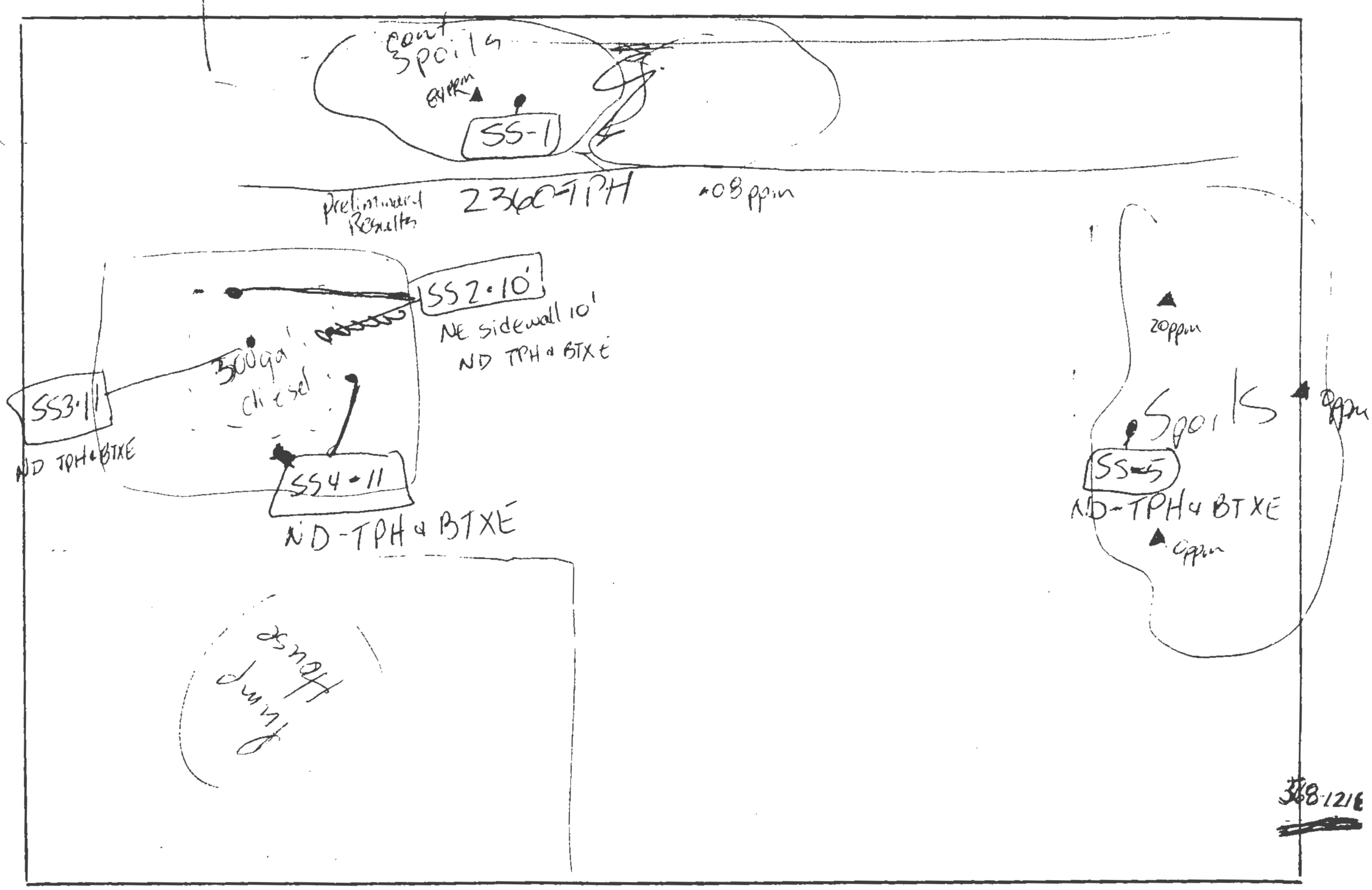
FIELD ACTIVITY DESCRIPTION

Facility Name: Chet Holifield Bldg Address: 24000 Avila Road

PC # 92-300 TI # ______ LUST # ______ IR # ______

Inspector: Brenda Pueple Date: 12-22-92 Time: 3:15pm

Field Activity: Witness removal of 1-500 gallon diesel tank. No fire inspector from the county was on site at that time. I questioned Larry Harlan as to why this was. He stated that the individual who he talked to at OC Fire said that it was not necessary to have them onsite. Tank had small, pea-sized holes near bottom & bottom side. Contamination of soil was evident under tank & toward NW side. Visual contaminated removed and sample SS3·11 taken 3ft. below tank. Sample SS-1 is representative of contaminated spoils pile (worst case). Sample (SS2·10) sidewall is what appears to be dark organic material.



Rev: 11/04/91 Dave-home 811-4860 Page 2 of 2 FORM #1

PRELIMINARY DATA
CERTIFIED ENGINEERING PROJECT # A10598
24000 AVILA ROAD

921 0224

TEG PROJECT #921223CK

TPH (DOHS Mod. EPA 8015) & BTEX (EPA Method 8020) ANALYSES OF SOILS (MG/KG)

SAMPLE NUMBER	DATE ANALYZED	TPH-DIESEL (mg/kg)	BENZENE (mg/kg)	TOLUENE (mg/kg)	EBENZ (mg/kg)	XYLENES (mg/kg)
METHOD BLANK	12/23/92	ND	ND	ND	ND	ND
SS-1	12/23/92	2360	ND	0.09	0.36	0.12
SS-2 @ 10'	12/23/92	ND	ND	ND	ND	ND
SS-3 @ 11'	12/23/92	ND	ND	ND	ND	ND
SS-3 @ 11' DUP	12/23/92	ND	ND	ND	ND	ND
SS-4 @ 11'	12/23/92	25	ND	ND	ND	ND
SS-5	12/23/92	28	ND	ND	ND	ND
DETECTION LIMITS		10	0.05	0.05	0.05	0.05

ND INDICATES NOT DETECTED AT LISTED DETECTION LIMITS

SS1 : is "Dirty" soil pile.

SS-2-10 : is N.East sidewall of excavation at 10' (2' below total depth of tank)

SS-3-11 : is Middle of excavation directly below (3') diesel storage tank. Taken at a depth of 11'.

SS-4-11 : is S. wall of excavation at a depth of 11'.

(The west side of excavation is fronted w/ a 10' retaining wall).

SS-5 : "Clean" soil pile.

site was really "over excavated"

HT 1/25/93

Orange County Health Care Agency

Environmental Health Division, Hazardous Materials Management Section
Mailing Address: P.O. Box 355, Santa Ana, CA 92702
Office: 2009 E. Edinger, Santa Ana, CA 92705
Telephone: (714) 667-3700

HAZARDOUS WASTE & UNDERGROUND STORAGE TANK INSPECTION REPORT

FILE NO: 001431 ACCOUNT NO: [redacted] 10237-9 EPA #: _____
UST PERMIT NO: _____
FACILITY: Chet Holifield Bldg. PERMIT: _____
STREET: 24000 Avila Rd. MAP COORDINATES: _____
CITY: [50] Laguna Niguel, CA ZIP: 92677 DISTRICT: 401
NEAREST CROSS STREET: _____ TSD FACILITY? No
NEW DBA? ___ NEW BUSINESS? ___ NEW ADDRESS? ___ NEW OWNER? ___ PUBLIC AGENCY? ___
NEW INFO: _____

HW INSPECTION TYPE: _____ NO OF UST ON SITE: 8→7 UST INSPECTION TYPE: 7
NUMBER OF EMPLOYEES: _____ # TANKS TO BILL : 7 UST COMPLIANCE CODE: _____
LAST DATE HW INSPECTED: _____ LAST DATE UST INSPECTED: _____
HW EXEMPT CODE: _____ UST EXEMPT CODE: _____
HW STATUS CODE: _____ UST STATUS CODE: _____
BUSINESS OWNER: _____ PHONE: (___) _____
TANK OPERATOR: _____ PHONE: (___) _____
CONTACT: _____ PHONE: (___) _____

HW BILLING (NAME & MAILING ADDRESS):

PHONE: (___) _____

UST BILLING (NAME & MAILING ADDRESS):

PHONE: (___) _____

PROPERTY OWNER (NAME & MAILING ADDRESS):

PHONE: (____) _____

TANK OWNER (NAME & MAILING ADDRESS):

PHONE: (____) _____

EMERGENCY CONTACTS

DAY: _____ PHONE: (___) _____
NIGHT: _____ PHONE: (___) _____

ENTERED JAN 01 1993

ACTIVE ICR: _____
INSPECTOR #: 233 NAME: Brenda Jo Radtke DATE: 12/23/92

Orange County Health Care Agency
UNDERGROUND STORAGE TANK INSPECTION REPORT

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd.

: Laguna Niguel, CA 92677

FILE NO: _____ ACCOUNT NO: _____ EPA #: _____

VIOLATION DESCRIPTIONS

FACILITY

___ 105 OPERATING UNDERGROUND STORAGE TANKS (UST) WITHOUT A PERMIT
___ 115 FAILURE TO REPORT THE CHANGE IN OWNERSHIP WITHIN 30 DAYS
___ 135 FAILURE TO ENTER INTO A WRITTEN CONTRACT BETWEEN OWNERS AND OPERATORS
___ 140 METERS NOT INSPECTED BY THE COUNTY DEPARTMENT OF WEIGHTS AND MEASURES OR A DEVICE REPAIRMAN
___ 145 FAILURE TO MONITOR THE TANKS USING THE METHOD SPECIFIED ON THE PERMIT
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___ 291 FAILURE TO SUBMIT A DIAGRAM SHOWING THE LOCATION OF UST

TANK

___ 120 FAILURE TO REPORT THE CHANGES IN THE USAGE OF UST WITHIN 30 DAYS
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___ 288 UNDERGROUND TANK(S) NOT SECURED TO PREVENT UNAUTHORIZED INPUTS OR WITHDRAWLS
___ 290 OTHER

- Witnessed removal of 1-300 gallon diesel tank (previously reported as 500 gallons). Pea-sized holes observed near bottom of tank and contamination observed below tank. Contaminated removed to visually clean & samples taken of dirty spoils, clean spoils & excavation. Mobile lab on site. Contaminated soil to be properly disposed.

2 of 3

I DECLARE THAT I HAVE EXAMINED AND RECEIVED A COPY OF THIS 3 PAGE INSPECTION REPORT.

PRINT NAME & TITLE: Copy sent to Chet Holifield Bldg. - Edgar Gray

SIGNATURE: _____ DATE: 12/23/92

Orange County Health Care Agency
UNDERGROUND STORAGE TANK INSPECTION REPORT

DBA: Chet Holifield Bldg.

ADDRESS: 24000 Avila Rd.

: Laguna Niguel, CA 92677

FILE NO: _____ ACCOUNT NO: _____ EPA #: _____

Removal 007

!HCA TANK ID#	!CODE!	TANK # 007	!CODE!	TANK #	!CODE!	TANK #
!FACILITY TANK ID	!	!	!	!	!	!
!MATERIAL STORED	!	!	!	!	!	!
!Currently	!	99999	!	!	!	!
!Proposed	!	!	!	!	!	!
!Previously	!	!	!	!	!	!
!Waste or Product	! 1	!	!	!	!	!
!FUEL TYPE	! 4	! diesel	!	!	!	!
!Trade Secret	! 8	!	!	!	!	!
!EXEMPT TYPE	! 8	!	!	!	!	!
!	!	!	!	!	!	!
!Double/Single Wall	! 2	!	!	!	!	!
!Compartment No.	!	!	!	!	!	!
!Year Installed	!	! 1969 ?	!	!	!	!
!Vault/Not Vaulted	! 2	!	!	!	!	!
!Primary Wall:	!	!	!	!	!	!
!Manufacturer	! 99	!	!	!	!	!
!Capacity / Gallons	!	! 500	!	!	!	!
!Construct Material	! 1	! steel	!	!	!	!
!Thickness & Units	! 99	!	!	!	!	!
!Interior Lining	! 96	!	!	!	!	!
!Secondary Wall:	!	!	!	!	!	!
!Manufacturer	! 97	!	!	!	!	!
!Capacity / Gallons	! 97	!	!	!	!	!
!Construct Material	! 97	!	!	!	!	!
!Thickness & Units	! 97	!	!	!	!	!
!Corrosion Protectn	! 96	!	!	!	!	!
!Leak Detect: Type	! 96	!	!	!	!	!
!Manufacturer	! 99	!	!	!	!	!
!PIPING: Location	! 1	!	!	!	!	!
!Dispensr/Tank Fill	! 1	!	!	!	!	!
!Double/Single Wall	! 2	!	!	!	!	!
!Primary Wall:	!	!	!	!	!	!
!Construct Material	! 1	!	!	!	!	!
!Manufacturer	! 99	!	!	!	!	!
!Secondary Wall:	!	!	!	!	!	!
!Construct Material	! 97	!	!	!	!	!
!Manufacturer	! 97	!	!	!	!	!
!Leak Detect: Type	! 97	!	!	!	!	!
!Manufacturer	! 97	!	!	!	!	!
!TYPE OF OVERFILL	!	!	!	!	!	!
!PROTECTION	! 96	!	!	!	!	!
!SPILL	!	!	!	!	!	!
!CONTAINMENT	!	! No	!	!	!	!
!MONITORING	!	!	!	!	!	!
!METHOD	! 35	! Removed, legally	!	!	!	!
!LAST TANK TEST	!	!	!	!	!	!

INSPECTION DATE: 12/23/92

TOM URAM
DIRECTOR

L. REX EHLING, M.D.
HEALTH OFFICER

ENVIRONMENTAL HEALTH DIVISION
ROBERT E. MERRYMAN, REHS MPH
DEPUTY DIRECTOR

MAILING ADDRESS: P.O. BOX 355
SANTA ANA, CA 92702

ENTERED JAN 31 1990

County of Orange

HEALTH CARE AGENCY

PUBLIC HEALTH SERVICES

ENVIRONMENTAL HEALTH DIVISION
2009 E. EDINGER AVENUE
SANTA ANA, CALIFORNIA 92705
(714) 667-3700

FACILITY MODIFICATION APPLICATION (INSTALLATION/REMOVAL/REPAIR)

(COMPLETE PAGES 1 & 2)

DATE: 1/25/90

FACILITY INFORMATION

NAME: CHET HOLLIFIELD FEDERAL BLDG.
STREET ADDRESS: 24000 AVILA ROAD
CITY: LAGUNA NIGUEL, CA 92677
TOTAL NUMBER OF TANKS ~~(AFTER INSTALLATION/REMOVAL)~~ AT THIS LOCATION: 8

TYPE OF BUSINESS:
___ GASOLINE STATION ___ FARM
✓ GOVERNMENT (U.S.) ___ OTHER

TANK OWNER 1342

NAME (CORP., INDIVIDUAL, PUBLIC AGENCY):
GENERAL SERVICES ADMINISTRATION
STREET ADDRESS: 24000 AVILA ROAD
CITY: LAGUNA NIGUEL
STATE: CA ZIP: 92677
TELEPHONE NO.: 714-643-4260

BILLING ADDRESS INFORMATION

BILL TO NAME: (SAME AS TANK OWNER)
BILL TO ADDRESS: ___
CITY: ___
STATE: ___ ZIP: ___
TELELPHONE NO.: ___

TYPE OF CONSTRUCTION

INDICATE NO. OF TANK(S):
1 - DW/DW
4 - AUT #7
___ INSTALLATION(S) (COMPLETE PAGE 2)
3 - ILLEGALLY ABANDONED
___ REPAIR(S)/RELINE(S)
___ CLOSURE(S)/REMOVAL(S)
___ SYSTEM MODIFICATION (E.G., REPIPE)
✓ OTHER (SPECIFY) F.M.A. (8 TANKS)

24 HOUR EMERGENCY CONTACT PERSON

DAYS: MARK GRIPPI (NAME) 714-643-4260 (TELEPHONE)
NIGHTS: MARK GRIPPI (NAME) 714-361-2030 (TELEPHONE)

APPLICANT

NAME: ___ (PLEASE PRINT)
SIGNATURE: ___
COMPANY NAME: ___
TELEPHONE NO.: ___

FACILITY OPERATOR (CONTACT PERSON)

NAME: MARK GRIPPI, CHAN. TUCKER
BUSINESS TELEPHONE NO.: 714-643-4260

NOTE: NEW INSTALLATIONS, CLOSURES REPAIRS AND SYSTEM MODIFICATIONS OF UNDERGROUND STORAGE TANKS REQUIRE THE SUBMITTAL OF (4) SETS OF PLANS TO THIS DIVISION. THESE PLANS MUST BE APPROVED PRIOR TO THE INITIATION OF ANY CONSTRUCTION OR MODIFICATION.

OFFICE USE ONLY

FACILITY PERMIT NO.: 10237 PLAN APPROVAL DATE: ___ BY: ALLEN NO.: 222
PLAN CHECK NO.: ___ FEES: ___ FINAL FIELD INSPECTION DATE: ___
NUMBER OF TANKS TO BE ADDED TO BILLING: ___ NUMBER OF TANKS TO RECEIVE A SURCHARGE BILL: ___

FORMS:FMA
REV:10/30/89

NOTE: THIS FMA ALSO CLOSES OUT PLAN CHECK # 88-PC-349.

96 = NONE
97 = "N/A"
99 = "UNKNOWN"

10237

[redacted]ANK INFORMATION [redacted]A

-2-

NEW | ABOVE (OLD EDISON PLANT) | PUMPED OUT | EMPTY & CAPPED | IN USE

I.

		#1	#2	#3	#4	#5	#6
TANK I.D.		#1 001	#2 002	003 #3	004	005 #4	006
MATERIALS STORED — CAS NO. OR WASTE I.D.	CURRENTLY	1993-FO	1993-FO	1993-FO	2138.W	2138.W	2070.W
	PROPOSED						
	PREVIOUSLY				GAS UNL 1203	GAS 1203	
FUEL TYPE (IF TRADE SECRET, PLEASE STATE)		DIESEL 4	DIESEL 4	4	GAS UNL 1	GAS REG 2	WASTE OIL 5
CONTAINER	TYPE (TANK, SUMP, OTHERS)	TANK →					
	DOUBLE WALL/SINGLE WALL	DOUBLE 1	SINGLE 2 →				
	UL NUMBER	UNKNOWN 99 →					
	YEAR INSTALLED	1989	1969 →				
	VAULTED/NOT VAULTED	NOT →					
PRIMARY	MANUFACTURER	O/C 1	UNKNOWN 99 →				
	CAPACITY (GALLON)	4000	10 000	10,000	10,000	10,000	500
	CONSTRUCTION MATERIAL	F/G 3	STEEL 1	1	1	1	1
	THICKNESS (UNITS)	3/8"	1/8"	1/8"	99 →		
	INTERIOR LINING	99 →					
SECONDARY	MANUFACTURER	O/C 1	97	97 →			
	CAPACITY (GALLON)	4,000	97	97 →			
	CONSTRUCTION MATERIAL	FG 3	97	97 →			
	THICKNESS (UNITS)	3/8"	97	97 →			
	CORROSION PROTECTION	FG 5	99 →				
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)	OC LIQUID = 5 ? HYDROSTATIC?	16	16	96	96	16
	MANUFACTURER OF LEAK DETECTOR	OC 1	97 →				
PIPING	LOCATION (UNDER/ABOVE GROUND)	UNDER →					
	SUCTION/PRESSURE GRAVITY/UNKNOWN	SUCTION 1	SUCTION 1	1	1	1	GRAVITY 2
PRIMARY	CONSTRUCTION MATERIAL	BLACK STEEL 1	STEEL 1	1 →			
	MANUFACTURER	"VOSS" 99	UNKNOWN 99	99 →			
SECONDARY	CONSTRUCTION MATERIAL	FG 3	97	97 →			
	MANUFACTURER	A.O. SMITH 23	97	97 →			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)	SENSOR 5	97	97 →			
	MANUFACTURER OF LEAK DETECTOR	OC 1	97	97 →			
OVERFILL PROTECTION (TYPE)		8 BALL FLOAT VENT	99	99 →			
SPILL CONTAINMENT		POMECO YES	NO	NO			

II. ATTACH A DIAGRAM (8 1/2" X 11") INCLUDE THE LOCATIONS OF THE UNDERGROUND STORAGE TANK(S), PIPING, AUXILIARY EQUIPMENT, BUILDINGS AND OTHER LANDMARKS.

OFFICE USE ONLY

NOT IN USE

MONITORING SYSTEM/ALTERNATIVE	33	7	7	96	96	7

ILLEGALLY ABANDONED

REV 04/04/88

TOM URAM
DIRECTOR

L. REX EHLING, M.D.
HEALTH OFFICER

ENVIRONMENTAL HEALTH DIVISION
ROBERT E. MERRYMAN, REHS MPH
DEPUTY DIRECTOR

MAILING ADDRESS: P.O. BOX 355
SANTA ANA, CA 92702

F.M.A.

County of Orange

HEALTH CARE AGENCY

PUBLIC HEALTH SERVICES

ENVIRONMENTAL HEALTH DIVISION
2009 E. EDINGER AVENUE
SANTA ANA, CALIFORNIA 92705
(714) 667-3700

~~PERMIT TO OPERATE APPLICATION~~

(COMPLETE PAGE 1 & 2)

DATE: _____

FACILITY INFORMATION

NAME: _____

STREET ADDRESS: _____

CITY: _____

TOTAL NUMBER OF TANKS AT THIS LOCATION: _____

TYPE OF BUSINESS:

_____ GASOLINE STATION _____ FARM

_____ GOVERNMENT _____ OTHER

FACILITY OPERATOR (CONTACT PERSON)

NAME: _____

BUSINESS TELEPHONE NO.: ( ) _____

24 HOUR EMERGENCY CONTACT PERSON

DAYS: _____
NAME TELEPHONE

NIGHTS: _____
NAME TELEPHONE

TANK OWNER

NAME (CORP., INDIVIDUAL, PUBLIC AGENCY) _____

STREET ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

TELEPHONE NO.: ( ) _____

BILLING ADDRESS INFORMATION

BILL TO (NAME): _____

BILL TO (ADDRESS): _____

CITY: _____

STATE: _____ ZIP: _____

TELEPHONE NO.: ( ) _____

IMPORTANT NOTE: SECTION 25293 OF THE UNDERGROUND STORAGE TANK LAW STATES THAT THE OPERATOR OF THE FACILITY SHALL MONITOR AND KEEP SUFFICIENT RECORDS OF MONITORING PERFORMED AT THE FACILITY USING AN APPROVED MONITORING METHOD. IF THE OPERATOR IS NOT THE OWNER OF THE TANK(S), THE OWNER SHALL PROVIDE A COPY OF THE PERMIT TO THE OPERATOR, ENTER INTO A WRITTEN CONTRACT WITH THE OPERATOR TO MONITOR THE UNDERGROUND STORAGE TANK(S) AS SPECIFIED, AND PROVIDE THE OPERATOR WITH A COPY OF SECTION 25299 OF THIS LAW. IT IS THE RESPONSIBILITY OF THE OWNER TO ENSURE THAT THE OPERATOR UNDERSTANDS THE MONITORING AND REPORTING REQUIREMENTS SET FORTH.

THIS APPLICATION MUST BE SIGNED BY: THE OWNER OF THE UNDERGROUND STORAGE TANK(S); A PRINCIPAL EXECUTIVE OFFICER AT A LEVEL OF VICE-PRESIDENT OR AN AUTHORIZED REPRESENTATIVE; A GENERAL PARTNER PROPRIETOR; OR A PRINCIPAL EXECUTIVE OFFICER, RANKING ELECTED OFFICIAL, OR AUTHORIZED REPRESENTATIVE OF A PUBLIC AGENCY.

(APPLICANT) OWNER OR AUTHORIZING PERSON: _____ TITLE: _____
Please Print Full Name

(APPLICANT) OWNER OR AUTHORIZING SIGNATURE: _____ DATE: _____

THE COMPLETION AND SUBMITTAL OF THIS APPLICATION DOES NOT CONSTITUTE THE ISSUANCE OF A PERMIT TO OPERATE BUT IS REQUIRED BY LAW. PLEASE BE ADVISED THAT DETAILED COMPLIANCE AND MONITORING INFORMATION MUST ALSO BE SUBMITTED AND APPROVED BY THIS AGENCY, AND VERIFIED BY ON-SITE INSPECTION, PRIOR TO THE ISSUANCE OF A PERMIT.

10237

TANK INFORMATION

-2-

SOUTH SIDE OF MAIN BUILDING

[redacted] NEAR WATER RES. ↓

[redacted] OUT OF USE - POSSIBLY FULL OF SAND

I.

TANK I.D.			#1 007	#2 008	#3	#4
MATERIALS STORED	CAS NO. OR WASTE I.D.	CURRENTLY	1993-FO	2138.W		
		PROPOSED				
		PREVIOUSLY		1993-FO		
	FUEL TYPE (IF TRADE SECRET, PLEASE STATE)		DIESEL 4	DIESEL 4		
CONTAINER	TYPE (TANK, SUMP, OTHERS)		TANK →			
	DOUBLE WALL/SINGLE WALL		SINGLE →			
	UL NUMBER		99 →			
	YEAR INSTALLED		1970 →			
	VAULTED/NOT VAULTED		NOT →			
	PRIMARY: MANUFACTURER		99 →			
	PRIMARY: CAPACITY (GALLON)		500	500		
	PRIMARY: CONSTRUCTION MATERIAL		STEEL 1	STEEL 1		
	PRIMARY: THICKNESS (UNITS)		99 →			
	PRIMARY: INTERIOR LINING		99 →			
	SECONDARY: MANUFACTURER		97 →			
	SECONDARY: CAPACITY (GALLON)		97 →			
	SECONDARY: CONSTRUCTION MATERIAL		97 →			
	SECONDARY: THICKNESS (UNITS)		97 →			
	CORROSION PROTECTION		99 →			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)		66	96		
	MANUFACTURER OF LEAK DETECTOR		97	97		
PIPING	LOCATION (UNDER/ABOVE GROUND)		UNDER →			
	SUCTION/PRESSURE GRAVITY/UNKNOWN		SUCTION 1 →			
	PRIMARY: CONSTRUCTION MATERIAL		STEEL 1 →			
	PRIMARY: MANUFACTURER		99 →			
	SECONDARY: CONSTRUCTION MATERIAL		97 →			
	SECONDARY: MANUFACTURER		97 →			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)		97 →			
	MANUFACTURER OF LEAK DETECTOR		97 →			
OVERFILL PROTECTION (TYPE)			99 →			
SPILL CONTAINMENT			NO →			

II. ATTACH A DIAGRAM (8 1/2" X 11") INCLUDE THE LOCATIONS OF THE UNDERGROUND STORAGE TANK(S), PIPING, AUXILIARY EQUIPMENT, BUILDINGS AND OTHER LANDMARKS.

OFFICE USE ONLY

NOT BEING USED OR MONITORED FOR 10+ YEARS

MONITORING SYSTEM/ALTERNATIVE	7	96		

ILLEGALLY

REV /04/04/88

97 = "N/A"
99 = "UNKNOWN"

[redacted] TANK INFORMATION [redacted] ILA (OLD EDISON PLANT)

NEW — ABOVE — PUMPED OUT — EMPTY & CAPPED

I.

TANK I.D.			#1	#2	3 #3	4	5 #4	6
MATERIALS STORED	CAS NO. OR WASTE I.D.	CURRENTLY	1993-FO	1993-EO	1993-FO			2070.W
		PROPOSED						
		PREVIOUSLY				GAS UNL 1203	GAS UNL 1203	
	FUEL TYPE (IF TRADE SECRET, PLEASE STATE)		DIESEL 4	DIESEL 4	4	GAS UNL 1	GAS REG 2	WASTE OIL 5
CONTAINER	TYPE (TANK) SUMP. OTHERS)		TANK					
	DOUBLE WALL/SINGLE WALL		DOUBLE 1	SINGLE 2				
	UL NUMBER		UNKNOWN 99					
	YEAR INSTALLED		1989	1969				
	VAULTED/(NOT) VAULTED		NOT					
	PRIMARY — MANUFACTURER		O/C 1	UNKNOWN 99				
	PRIMARY — CAPACITY (GALLON)		4000	10 000	10,000	10,000	10,000	500
	PRIMARY — CONSTRUCTION MATERIAL		F/G 3	~~STEEL~~ 1	1	1	1	1
	PRIMARY — THICKNESS (UNITS)		3/8"	1/8"	1/8"	99		
	PRIMARY — INTERIOR LINING		99					
	SECONDARY — MANUFACTURER		O/C 1	97	97			
	SECONDARY — CAPACITY (GALLON)		4,000	97	97			
	SECONDARY — CONSTRUCTION MATERIAL		FG 3	97	97			
	SECONDARY — THICKNESS (UNITS)		3/8"	97	97			
	CORROSION PROTECTION		FG 5	99				
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)		OC LIQUID=5 HYDROSTATIC?	16	16	96	96	16
	MANUFACTURER OF LEAK DETECTOR		OC 1	97				
PIPING	LOCATION (UNDER/ABOVE GROUND)		UNDER					
	SUCTION/PRESSURE GRAVITY/UNKNOWN		SUCTION 1	SUCTION 1	1	1	1	GRAVITY 2
	PRIMARY — CONSTRUCTION MATERIAL		BLACK STEEL 1	STEEL 1	1			
	PRIMARY — MANUFACTURER		"VOSS" 99	UNKNOWN 99	99			
	SECONDARY — CONSTRUCTION MATERIAL		FG 3	97	97			
	SECONDARY — MANUFACTURER		A.O. SMITH 23	97	97			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)		SENSOR 5	97	97			
	MANUFACTURER OF LEAK DETECTOR		OC 1	97	97			
OVERFILL PROTECTION (TYPE)			8 FLOAT BALL VENT	99	99			
SPILL CONTAINMENT			POMECO YES	NO	NO			

II. ATTACH A DIAGRAM (8 1/2" X 11") INCLUDE THE LOCATIONS OF THE UNDERGROUND STORAGE TANK(S), PIPING, AUXILIARY EQUIPMENT, BUILDINGS AND OTHER LANDMARKS.

OFFICE USE ONLY

NOT "IN USE"

MONITORING SYSTEM/ALTERNATIVE	33	7	7	96	96	7

ILLEGALLY ABANDONED

REV 04/04/88

TANK INFORMATION

[redacted] NEAR WATER RES. ✓ — [redacted] OUT OF USE - POSSIBLY FULL OF SAND — BUILDING

I.

			TANK I.D.	#7	#8	#3	#4
MATERIALS STORED	CAS NO. OR WASTE I.D.	CURRENTLY		1993-FO			
		PROPOSED					
		PREVIOUSLY			1993-FO		
	FUEL TYPE (IF TRADE SECRET, PLEASE STATE)			DIESEL 4	DIESEL 4		
CONTAINER	TYPE (TANK, SUMP, OTHERS)			TANK →			
	DOUBLE WALL/SINGLE WALL			SINGLE →			
	UL NUMBER			99 →			
	YEAR INSTALLED			19 70 →			
	VAULTED/NOT VAULTED			NOT →			
	PRIMARY: MANUFACTURER			99 →			
	PRIMARY: CAPACITY (GALLON)			500	500		
	PRIMARY: CONSTRUCTION MATERIAL			STEEL 1	STEEL 1		
	PRIMARY: THICKNESS (UNITS)			99 →			
	PRIMARY: INTERIOR LINING			99 →			
	SECONDARY: MANUFACTURER			97 →			
	SECONDARY: CAPACITY (GALLON)			97 →			
	SECONDARY: CONSTRUCTION MATERIAL			97 →			
	SECONDARY: THICKNESS (UNITS)			97 →			
	CORROSION PROTECTION			99 →			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)			66	96		
	MANUFACTURER OF LEAK DETECTOR			97	97		
PIPING	LOCATION (UNDER/ABOVE GROUND)			UNDER →			
	SUCTION/PRESSURE GRAVITY/UNKNOWN			SUCTION 1 →			
	PRIMARY: CONSTRUCTION MATERIAL			STEEL 1 →			
	PRIMARY: MANUFACTURER			99 →			
	SECONDARY: CONSTRUCTION MATERIAL			97 →			
	SECONDARY: MANUFACTURER			97 →			
	TYPE OF LEAK DETECTION (LIQUID, VAPOR, ETC.)			97 →			
	MANUFACTURER OF LEAK DETECTOR			97 →			
OVERFILL PROTECTION (TYPE)				99 →			
SPILL CONTAINMENT				NO →			

II. ATTACH A DIAGRAM (8 1/2" X 11") INCLUDE THE LOCATIONS OF THE UNDERGROUND STORAGE TANK(S), PIPING, AUXILIARY EQUIPMENT, BUILDINGS AND OTHER LANDMARKS.

OFFICE USE ONLY — NOT BEING USED OR MONITORED FOR 10+ YEARS

MONITORING SYSTEM/ALTERNATIVE	7	96		

ILLEGALLY ABANDONED

REV /04/04/88

SUBSURFACE INVESTIGATION REPORT

REPORT
FOR
PRELIMINARY SUBSURFACE INVESTIGATION AT THREE (3) UNDERGROUND STORAGE TANK (UST) AREAS CHET HOLLIFIELD FEDERAL BUILDING LAGUNA NIGUEL, CALIFORNIA

Prepared For:

J.C. Chang & Associates, Inc.
357 Van Ness Way, #178
Torrance, CA 90501-1435

Prepared By:

Unitech Engineering, Inc.
16331 Gothard Street, Suite D
Huntington Beach, CA 92647
TEL (714) 842-8888
FAX (714) 848-6338

Project No. EI2009
File No. 20992

June 1992

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3.0 LABORATORY ANALYSIS

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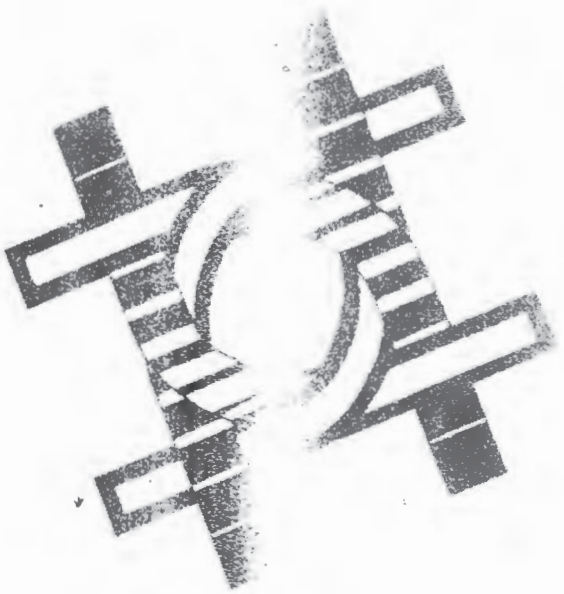
APPENDICES

I. FIELD BORING LOGS

II. SOIL SAMPLE CHAIN-OF-CUSTODY RECORDS

III. RESULTS OF LABORATORY ANALYSES



1.0 BACKGROUND

Unitech Engineering, Inc. (Unitech) was retained by J.C. Chang & Associates, Inc. (JCCA) to conduct a preliminary subsurface investigation at three (3) UST areas at Chet Hollifield Federal Building, Laguna Niguel, California. The objective of this investigation is to characterize whether the subsurface soils of the subject areas have been impacted by UST operations and provide recommendation on mitigation measures of subsurface soil contamination, if identified present.

The target areas of investigation include three (3) UST areas at the site. The first UST area is to the south of the energy plant where two (2) 10,000-gallon diesel tanks (tank No. 3 and 4) are located. The second UST area is to the north of the maintenance shop where one (1) 500-gallon abandoned (in place) waste oil tank (tank No. 5) and two (2) 10,000-gallon abandoned (in place) gasoline tanks (tanks No. 6 and 7) are located. The third UST area is the berm next to the western side of the southern entrance of the Building where one (1) 500-gallon abandoned (in place) diesel tank (tank No. 8) is located. There are two (2) other UST's (tank No. 1 and 2) at the site are still in use and are not targets of this investigation.

A site location map is provided as Figure 1 and the site plan is shown as Figure 2. Figure 2 also marks approximate locations of UST's under study and borings drilled during this investigation.

2.0 SAMPLING LOCATIONS, PROCEDURES, AND PROTOCOL

In order to characterize whether subsurface soils of the subject areas have been impacted by operations of six (6) UST's under study, one (1) vertical and five (5) slant (approximately 30 degrees to vertical) borings were drilled (by hollow stem auger rig), one (1) underneath or next to each tank (with boring number corresponding to tank number) .

Borings SB5 and SB8 were drilled to a total depth of 15 feet. The rest of borings were drilled to a total depth of 20 feet. Boring locations were selected based on the following criteria:

- No identified underground utilities or obstructions; and
- Convenient access for the drilling equipment.

SB4 is a vertical boring instead of slant boring due to above constraints limits the possibility of slant boring drilling to underneath tank No. 4.

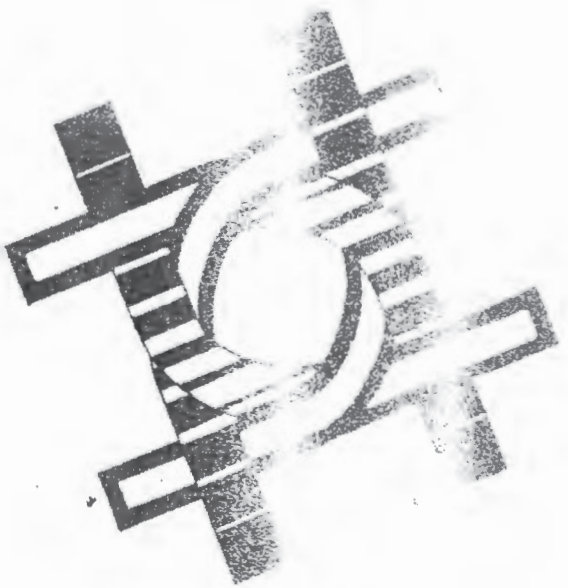
Each of the borings was logged and sampled from ground surface to total depth. The soils were logged using the Unified Soils Classification System. Soil samples were collected at 5 foot intervals minimum. The samples were monitored in the field for organic vapor readings with a TLV sniffer. The sample descriptions, depths, and the TLV sniffer readings were recorded on the field logs attached as Appendix I.

Based on boring logs, the subsurface stratigraphy of the site is identified mainly consisting of silty clay, clayey silt, and silt. Groundwater was encountered at an approximately total depth of 17 feet (corresponding to an approximate vertical depth of 15 feet) in boring SB6 and SB7.

Soil samples were obtained using a split-barrel modified California sampler, which was lowered through the center of the hollow-stem auger to the desired sampling depth and driven into the soil using a 140-pound drop hammer. This and other sampling equipment was washed with Alconox solution and rinsed with clean water before each soil sample is collected. The soil samples were collected in six-inch long, 2-inch diameter, brass-lined tubes that had been cleaned with Alconox solution. Soil samples were immediately sealed, labeled, and chilled in a cooler. The samples were numbered sequentially with increasing depth from the top of the boring.

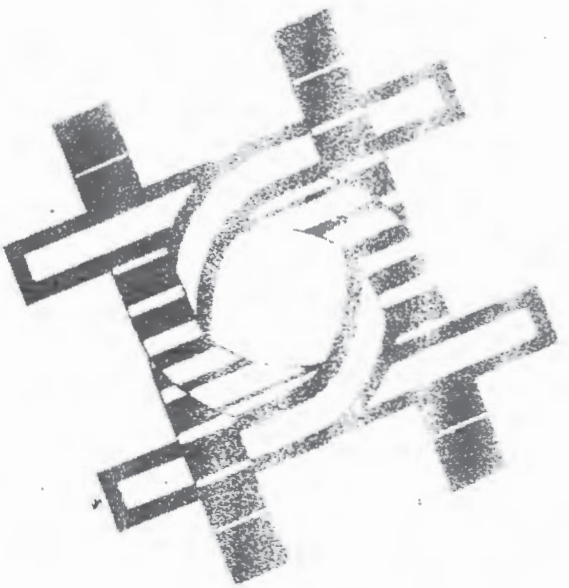
One sample with the highest organic vapor reading or collected at the total depth from each boring was shipped to a state-certified laboratory for analysis the same day of sample collection. Proper chain-of-custody procedures were followed. Chain-of-custody records of soil samples are attached as Appendix II.

The boring and sampling activity was completed on May 28, 1992. The boreholes were backfilled with native soils upon completion of sampling.



3.0 LABORATORY ANALYSIS

Soil samples selected for analysis from borings SB3, SB4, SB8 drilled underneath or next to diesel USTs were analyzed for total petroleum hydrocarbon - diesel (TPH-D) using modified EPA Method 8015 and benzene, toluene, ethylbenzene, and xylenes (BTEX) using EPA Method 8020. The soil sample selected for analysis from boring SB5 drilled underneath the waste oil UST was analyzed for total recoverable petroleum hydrocarbon (TRPH) using EPA Method 418.1 and BTEX using EPA Method 8020. Soil samples selected for analysis from borings SB6 and SB7 drilled underneath gasoline USTs were analyzed for total petroleum hydrocarbon - gasoline (TPH-G) using modified EPA Method 8015 and BTEX using EPA Method 8020. Laboratory analytic reports for soil sample are attached as Appendix III.



6.0 LIMITATIONS

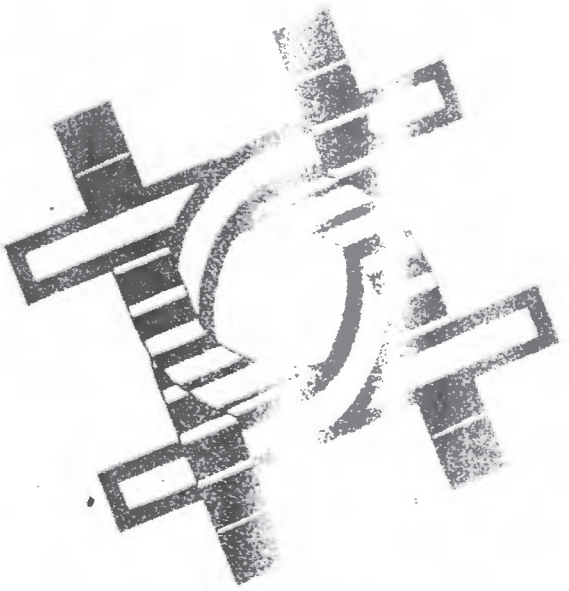
The samples collected and used for analysis and the observations presented here are considered to be representative of the site conditions; however, soil and geologic conditions as well as groundwater conditions may vary significantly from area to area. If conditions are revealed which vary from finding of this project, the newly revealed conditions must be evaluated by the project engineer or geologist and conclusions adjusted as needed.

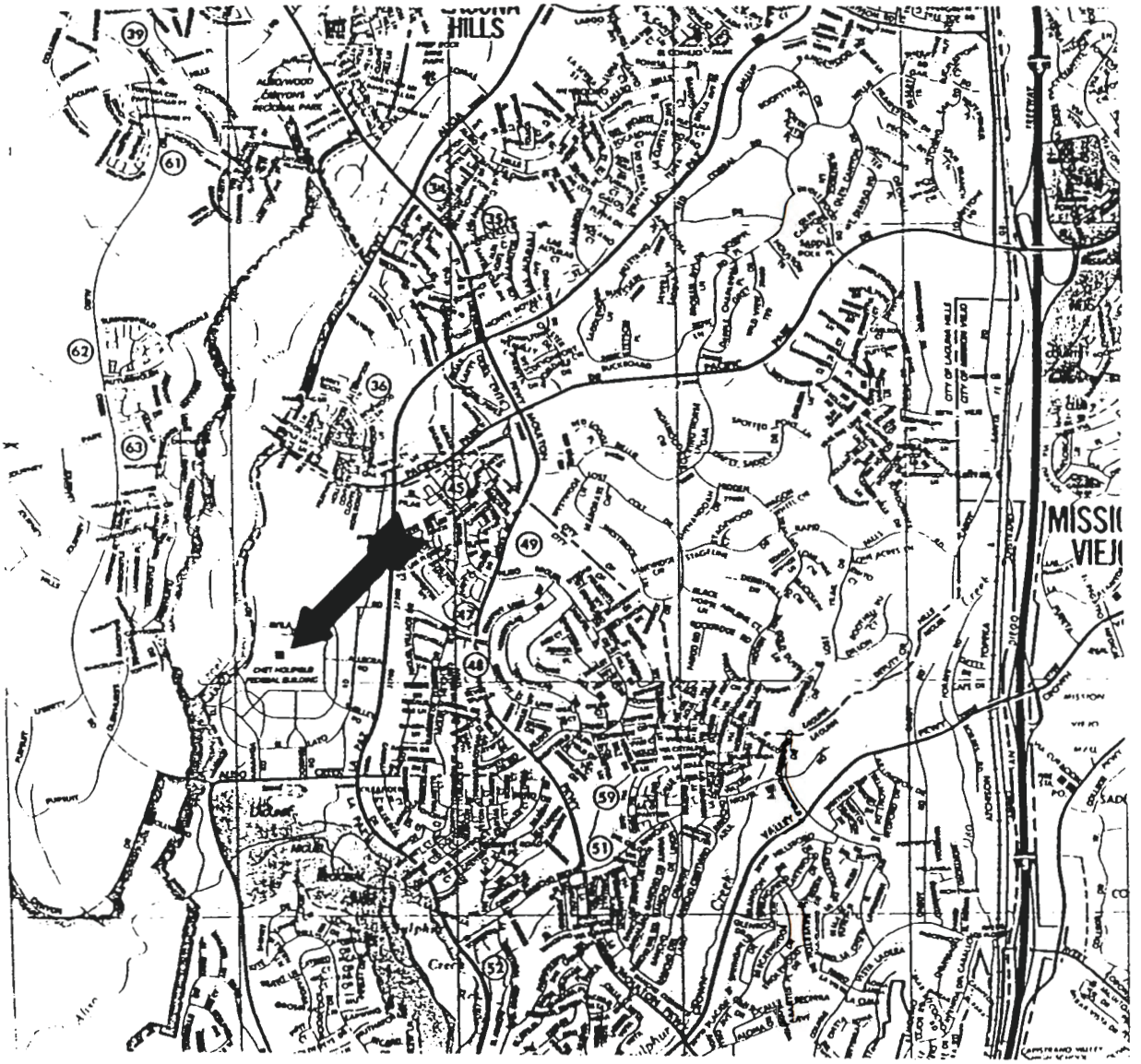
The opinion expressed herein is based on information collected during our investigation, our present understanding of the site conditions, and our professional judgment in light of such information at the time of preparation of this opinion. The report is an opinion worker, and no warranty is either expressed, implied or made as to the conclusions, advice, and recommendations offered in this report. The findings and conclusions of this report are valid as presented, at the date presented. Changes in regulations or property conditions may invalidate the findings and discussions of this report.

Report prepared by:
UNITECH ENGINEERING, INC.

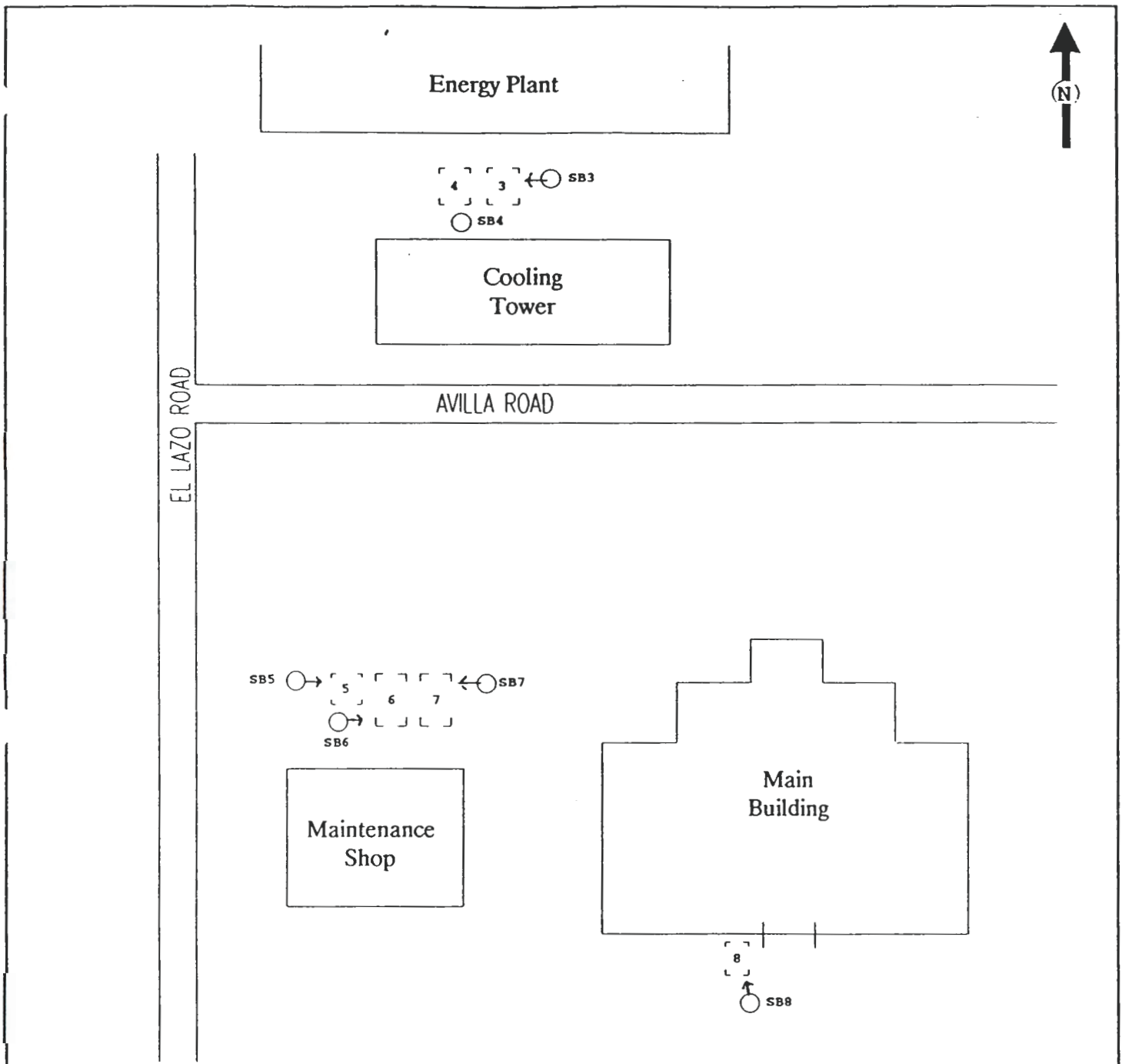
S. Robin Chang

S. Robin Chang, Ph.D., R.G.
Project Manager





UNITECH ENGINEERING, INC. 16331 Gothard Street, Suite D Huntington Beach, CA 92647
SITE LOCATION MAP
FIGURE 1



LEGEND:

Approximate UST Location (with Tank No. inside)

Approximate Boring Location
(Boring inclined Direction Shown by Arrow)

UNITECH ENGINEERING, INC.
16331 Gothard Street, Suite D
Huntington Beach, CA 92647

SITE PLAN AND BORING LOCATION MAP

CHET HOLIFIELD FEDERAL BUILDING

NTS

FIGURE 2

APPENDIX I

FIELD BORING LOGS

UNITECH ENGINEERING, INC.

BORING NO. SB3

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0			ML		3" Thick Asphalt Clayey Silt, Biege, Moist, Medium Stiff
5	20		CL		Silty Clay, Brown, Moist, Very Stiff
10	15				
15	15				
20	20				Note: T.D. = 20', No Groundwater Encountered Slant (approx. 30° from vertical) Boring to Underneath Tank No. 3
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

UNITECH ENGINEERING, INC.

BORING NO. SB4

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0			ML		3" Thick Asphalt Clayey Silt, Biege, Moist, Stiff
5	15				
10	20		CL		Silty Clay, Brown, Moist, Very Stiff
15	15				
20	20				Note: T.D. = 20', No Groundwater Encountered Vertical Boring Next to Tank No. 4
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

UNITECH ENGINEERING, INC.

BORING NO. SB5

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0			SW		3" Thick Asphalt Gravelly Sand, Brown, Moist, Medium Dense
5	30		ML		Clayey Silt, Biege, Moist, Very Stiff
10	20		CL		Silty Clay, Black, Moist, Very Stiff
15	20		ML		Silt, Brown, Moist, Very Stiff
20					Note: T.D. = 15', No Groundwater Encountered Slant (approx. 30° from vertical) Boring Underneath Tank No. 5
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

UNITECH ENGINEERING, INC.

BORING NO. SB6

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0					3" Thick Asphalt
			SW		Gravelly Sand, Brown, Moist, Medium Dense
5	10				Clayey Silt, Trace Gravels, Biege, Moist, Very Stiff
10	10		ML		Black, Moist, Very Stiff
					Biege, Very Moist
15	15				Fine Sand Silt, Biege, Wet
20	10				Note: T.D. = 20', Groundwater Encountered at 17' Depth Slant (approx. 30° from vertical) Boring Underneath Tank No. 6
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

UNITECH ENGINEERING, INC.

BORING NO. SB7

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0			ML		3" Thick Asphalt Clayey Silt, Biege, Moist, Stiff
5	10		SM		Silty Fine Sand, Black, Moist, Dense
10	10		CL		Silty Clay, Black, Moist, Very Stiff
15	15		ML		Clayey Silt, Black, Very Moist, Very Stiff Trace Gravels, Wet
20	10				Note: T.D. = 20', Groundwater Encountered at 17' Depth Slant (approx. 30° from vertical) Boring Underneath Tank No. 7
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

UNITECH ENGINEERING, INC.

BORING NO. SB8

FIELD ENGINEER ROBIN CHANG
DATE BEGAN 05/28/92
DATE FINISHED 05/28/92
CHECKED BY ROBIN CHANG
GROUND SURFACE EL.

DEPTH IN FEET	ORGANIC VAPOR (ppm)	SAMPLE BLOWS/FOOT	USCS	PROFILE	
0			ML		Clayey Silt, Biege, Very Moist, Stiff
5	15				Gray, Slightly Moist, Very Stiff
10	10				Moist
15	15				Note: T.D. = 15', No Groundwater Encountered Slant (approx. 30° from vertical) Boring Underneath Tank No. 8
20					
25					
30					
35					
40					
45					
50					
55					
60					
65					
70					
75					

APPENDIX II

SOIL SAMPLE CHAIN-OF-CUSTODY RECORDS

CHAIN OF CUSTODY RECORD

Log Number _____

Client name	Project or PO#
Address	Phone # / Fax #
City, State, Zip	Report attention

Lab Sample number	Date Sampled	Time Sampled	Type* See key below	Sampled by / Sample description	Number of containers	Analyses required	Hazardous sample / Special handling required	Remarks
SB3-S1	5/23/92	1955	SO		1	✓		
SB4-S1		1750				✓		
SB5-S1		2350					✓	
SB6-S3		1400					✓	
SB1-S1		1215					✓	
SB3-S3		1530				✓		

	Signature	Print Name	Company	Date	Time
Relinquished by	Robin Chang	Robin Chang	Unitech Engineering, Inc.	5/25/92	1750
Received by	Michael Lee	Michael Lee	Chemtek Environmental Laboratory	5/29/92	1740
Relinquished by					
Received by					
Relinquished by					
Received by Laboratory					

CHEMTEK ENVIRONMENTAL LABORATORIES INC.
14140 Alondra Boulevard, Suite A
Santa Fe Springs Ca. 90670
Tel: (213) 926-9848 Fax: (213) 926-8324

Note:
Samples are discarded 30 days after results are reported unless other arrangements are made.
Hazardous samples will be returned to client or disposed of at client expense.

* Key: AQ-Aqueous NA-Nonaqueous SL-Sludge GW-Groundwater SO-Soil OT-Other PE-Petroleum

DISTRIBUTION: WHITE with report / YELLOW To CHEMTEK / PINK To courier

APPENDIX III

RESULTS OF LABORATORY ANALYSES

CHEMTEK
inc.

ENVIRONMENTAL
LABORATORIES

14140 E. Alondra Boulevard
Suite A Santa Fe Springs
California 90670

Telephone 310-926-9848
Telefax 310-926-8324

CERTIFICATE OF ANALYSIS

Job No: 205026 Date: 06-03-92

This is the Certificate of Analysis for the following samples:

Client Work ID:	Unitech Eng.
Project No.:	E12009
Date Received:	05-29-92
Number of Samples:	6
Sample Type:	soil

Samples were labeled as follows:

SAMPLE IDENTIFICATION	LABORATORY NUMBER
SB3-S4-20'	205026-01A
SB4-S4-20'	205026-02A
SB5-S1-5'	205026-03A
SB6-S3-15'	205026-04A
SB7-S4-20'	205026-05A
SB8-S3-15'	205026-06A

Reviewed and Approved:

Michael C.C. Lu
Laboratory Director

CHEMTEK
inc.

ENVIRONMENTAL
LABORATORIES

14140 E. Alondra Boulevard
Suite A Santa Fe Springs
California 90670

Telephone 310-926-9848
Telefax 310-926-8324

Client: Unitech Eng.
Project: E12009
Job No: 205026 Date:06-03-92

Analysis: EPA 8015M (diesel)

Sample ID: See below
Lab Sample ID: See below
Sample Date: 05-28-92
Analysis Date: 06-02-92

Sample ID	Lab Sample ID	Results (mg/Kg)	Detection Limit (mg/kg)
SB3-S4-20'	205026-01A	ND	50
SB4-S4-20'	205026-02A	ND	50
SB8-S3-15'	205026-06A	ND	50

COMMENTS:'ND' INDICATES THAT THE COMPOUND IS NOT DETECTED AT THE SPECIFIED LIMIT.

CHEMTEK
inc.

ENVIRONMENTAL
LABORATORIES

14140 E. Alondra Boulevard
Suite A Santa Fe Springs
California 90670

Telephone 310-926-9848
Telefax 310-926-8324

Client: Unitech Eng.
Project: E12009
Job No: 205026 Date:06-03-92

Analysis: SCL 418/EPA 418.1

Sample ID: See below
Lab Sample ID: See below
Sample Date: 05-28-92
Analysis Date: 06-03-92

Sample ID	Lab Sample ID	Results (mg/kg)	Detection Limit (mg/kg)
SB5-S1-5'	205026-03A	46.57	10

COMMENTS:'ND' INDICATES THAT THE COMPOUND IS NOT DETECTED AT THE SPECIFIED LIMIT.

CHEMTEK
inc.

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LABORATORIES

14140 E. Alondra Boulevard
Suite A Santa Fe Springs
California 90670

Telephone 310-926-9848
Telefax 310-926-8324

Client: Unitech Eng.
Project: E12009
Job No: 205026 Date:06-03-92

Analysis: EPA 8015M (gasoline)

Sample ID: See below
Lab Sample ID: See below
Sample Date: 05-28-92
Analysis Date: 05-29-92

Sample ID	Lab Sample ID	Results (mg/kg)	Detection Limit (mg/kg)
SB6-S3-15'	205026-04A	ND	2.5
SB7-S4-20'	205026-05A	ND	2.5

COMMENTS:'ND' INDICATES THAT THE COMPOUND IS NOT DETECTED AT THE SPECIFIED LIMIT.

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LABORATORIES

14140 E. Alondra Boulevard
Suite A Santa Fe Springs
California 90670

Telephone 310-926-9848
Telefax 310-926-8324

Client: Unitech Eng.
Project: E12009
Job No: 205026 Date: 06-03-92

Analysis: BTEX (EPA 8020)

Sample ID: See below
Lab Sample ID: See below
Sample Date: 05-28-92
Analysis Date: 05-29-92

Dilution Factor: 1
Detection Limit: 5 µg/kg

	SB3-S4-20' 205026-01A (µg/kg)	SB4-S4-20' 205026-02A (µg/kg)	SB5-S1-5' 205026-03A (µg/kg)
BENZENE	ND	ND	ND
TOLUENE	ND	ND	ND
ETHYLBENZENE	ND	ND	ND
M+P+O-XYLENE	ND	ND	ND

	SB6-S3-15' 205026-04A (µg/kg)	SB7-S4-20' 205026-05A (µg/kg)	SB8-S3-15' 205026-06A (µg/kg)
BENZENE	ND	ND	ND
TOLUENE	ND	ND	ND
ETHYLBENZENE	ND	ND	ND
M+P+O-XYLENE	ND	ND	ND

COMMENTS: 'ND' INDICATES THAT THE COMPOUND IS NOT DETECTED AT THE SPECIFIED LIMIT.

OWENS/CORNING FIBERGLAS

Double-Wall Fiberglas Underground Storage Tanks

Model DWT-2P, DWT-4P, and DWT-2S and Related Accessories Installation Instructions

This document highlights the special installation requirements of the Owens-Corning double-wall tank. All other installation details are the same as single-wall tanks. (See OCF Publication 3-PE-6304.) Both this document and the OCF single-wall installation instructions are included in the tank shipping pocket.

Fiberglas underground tanks must be installed according to these instructions and NFPA 30 and 31. Local codes may apply and should be consulted. Failure to follow these installation instructions will void the warranty and may result in tank failure. Proper installation of Fiberglas underground tanks is required to prevent tank damage and to insure long-term corrosion-resistant service. It is imperative to read, understand and follow the instructions below.

The presence of an Owens-Corning representative at the jobsite does not relieve the contractor of his responsibility to follow the published installation instructions. Any variances to the published installation instructions must be approved by Owens-Corning in writing prior to the tank installation.

In order to activate the tank's 30-year structural warranty, the tank installation must be performed by an Owens-Corning Fiberglas Corporation trained contractor in accordance with these instructions. The Owens-Corning installation checklist, Pub. # 15-PE-8894 is shipped with each tank and must be completed and signed by the installing contractor's representative and the tank owner's representative. A copy of the installation checklist must be retained by the tank owner or installing contractor to substantiate any future warranty claim.

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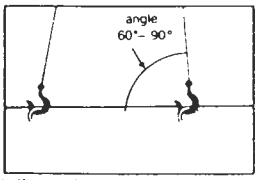
Tank Installation Instruction Iodel DWT-2P, DWT-4P, ar)WT-2S

A1. Handling



Double-wall tanks cannot be unloaded from the truck manually; a crane or a backhoe of sufficient lifting capacity must be used. Do not use chains, cables, straps or ropes around the tank—these devices may "point-load" the tank and damage the tank wall.

Tanks 2,500 gallon capacity or larger are delivered to the jobsite with bumper pads fastened to each end of the tank. The tank may be installed with or without the bumper pads attached.

Do not roll or drop tank. For temporary storage at the jobsite, set tanks on smooth ground free of rocks and foreign objects and rechock with the tires or sandbags provided.

A2. Bed and Backfill

The same as single-wall tanks. See OCF Pub. 3-PE-6304

A3. Testing

Double-wall tanks are shipped to the jobsite with a vacuum on the tank cavity. The vacuum should be left on the tank until the tank is ready to be air tested by the contractor. In the unlikely event of shipping damage, this temporary vacuum serves as an early warning device. The vacuum can detect relatively "large" leaks in the inner or outer tank, but it cannot detect "small" leaks. **Therefore prior to installation, all tanks must also be air tested and soaped using the following procedure:**

Release the vacuum in the tank cavity. Before setting the tank in the excavation, plug and tighten all fittings. Pressure test tanks to 5 psi as follows:

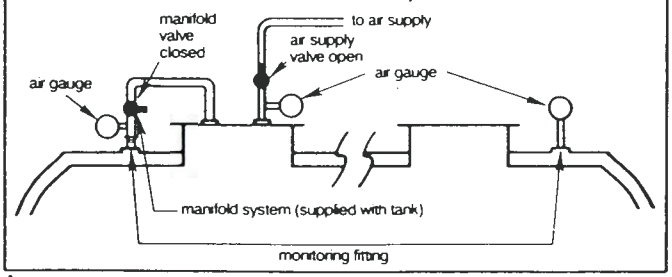
Outer Wall Test:

CAUTION: Pressurizing the tank cavity over 5 psi may damage the tank. For all tests, install an air gauge at the fitting where the air pressure hose is connected to the tank and a second gauge at the other monitoring fitting. Use an air gauge with ¼ or ½ lb. increments so that changes in pressure can be easily observed.

Using the OCF supplied manifold system connected to the inner tank and the cavity between the inner and outer tank, pressurize the tank cavity using air pressure from the inner tank

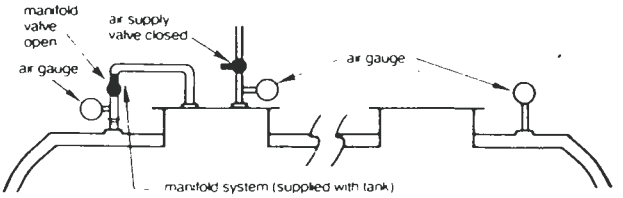
Step #1:
With the manifold valve to the cavity **closed**, first pressurize the inner tank to 5 psi maximum.

Pressurize the inner tank to 5 psi Maximum



Step #2:
Close the air supply valve to the inner tank and then DISCONNECT the air supply.

Using a Manifold From The Inner Tank, Pressurize The Tank Cavity To 5 psi Maximum.



Step #3:
Pressurize the cavity between the inner and outer tank to 5 psi maximum by opening the manifold valve thereby transferring pressure from the inner tank

DO NOT CONNECT THE AIR SUPPLY DIRECTLY TO THE MONITORING FITTING OR ALLOW THE MANIFOLD VALVE TO BE OPEN DURING STEP #1. Typical air compressors can over pressurize (over 5 psi) the tank cavity between the inner tank and outer wall in less than 2 seconds.

Step #4:
Monitor the pressure on both the inner tank and cavity between the inner and outer tank for at least 30 minutes. Soap the outer tank and check for leaks as indicated by bubbles. An outer wall leak detected before backfilling is simple to repair. **Do not backfill a tank with a known or suspected leak in the outer wall.**

Inner Wall Test:

Test #5:
Close the manifold valve to the cavity between the inner and outer wall. Release the pressure and vent the primary tank (by opening the air supply valve), but maintain the 5 psi maximum pressure on the cavity between the inner and outer walls.

Step #6:
Monitor the air gauge on the tank monitoring fitting for another 30 minutes, but no more than 60 minutes. Longer tests conducted during changing temperatures or changing cloud cover may distort test results ± 1 psi.

In the unlikely event a tank leak is discovered with any of the above tests, call the Owens-Corning Field Service Supervisor to schedule a tank repair.
Telephone: (419) 248-8196.

DO NOT EXCEED 5 PSI DURING AIR TEST.

After successfully completing the air test, disconnect and remove the air manifold fittings, hose, and valve.

A4. Hole Size

The same as single-wall tanks. See OCF Pub. 3-PE-6304.

A5. Burial Depth

Minimum burial depths are the same as single-wall tanks. See OCF Pub. 3-PE-6304.

If a continuous vacuum monitor is used, the maximum burial depth is 3 feet from the tank top to grade.

For all other tank monitors the maximum burial depth is 7 feet from the tank top to grade.

A6. Filter Fabric—Hole Liner

The same as single wall tanks. See OCF Pub. 3-PE-6304.

A7. Installation Procedure—Dry Hole

The same as single-wall tanks. See OCF Pub. 3-PE-6304.

A8. Installation Procedure—Wet Hole

The same as single-wall tanks. See OCF Pub. 3-PE-6304.

A9. Anchoring

Anchor straps must be placed between the arrows ►◄ on the tank sides.

For tanks 2,500 gallon capacity and larger, the anchor straps must also be placed in the strap guides at the tank top.

A10. Filling Primary Tank

The same as single-wall tanks. See OCF Pub. 3-PE-6304.

A11. Venting Primary Tank

The same as single-wall tanks. However, if the monitoring cavity between the inner and outer tank is also vented, it must be vented independently from the primary tank.

A12. Tank Accessory Clearance

The same as single-wall tanks. See OCF Pub. 3-PE-6304.

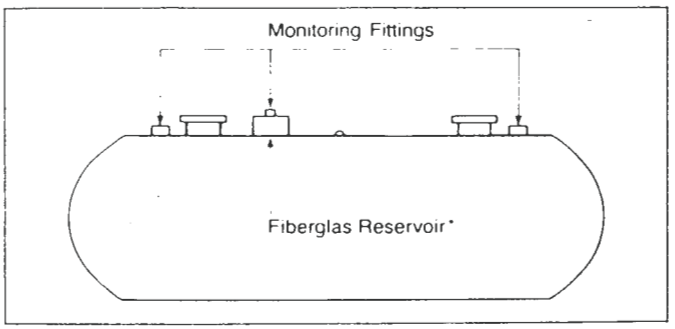
A13. Tank Monitoring

Owens-Corning recommends the Hydrostatic Tank Monitor versus other methods because of its superior leak detection capability. However, the selection of the monitoring system and method is the responsibility of the tank owner and/or operator.

Alternate Tank Monitoring Systems

The Owens-Corning double-wall tank is designed to accommodate a variety of leak monitoring systems. If another type of tank monitor is specified initially, the Hydrostatic Tank Monitor can still be activated at a future date.

An alternate tank monitoring sensor can be located at any monitoring fitting on the tank top. However, to provide maximum future flexibility, locating the tank sensor through the fitting in the Fiberglas reservoir will permit the tank owner to more economically retrofit the tank, if he chooses, to activate the Hydrostatic Tank Monitor in the future.



*Tank models DWT-2P and DWT-4P only

Monitoring Capabilities—(All Owens-Corning Double-Wall Tanks)

The following restrictions apply for the various types of double-wall tank monitors:

a. Liquid sensors—when "dry" cavity monitors (which detect the presence of a liquid) are used, the cavity between the inner and outer tank may be either vented to the atmosphere or sealed.

b. Gasoline vapor sensors—when gasoline vapor sensors are used, the cavity between the inner and outer tank may be either vented to the atmosphere or sealed.

Additional Monitoring Capabilities (Tank Models DWT-2P and DWT-4P Only).

c. Hydrostatic Tank Monitor—tank burial depth must not exceed 7' from tank top to finish grade.

The monitoring cavity must be vented to the atmosphere. The optional reservoir sensor, supplied by Owens-Corning senses the liquid level in the reservoir and also automatically vents the monitoring cavity.

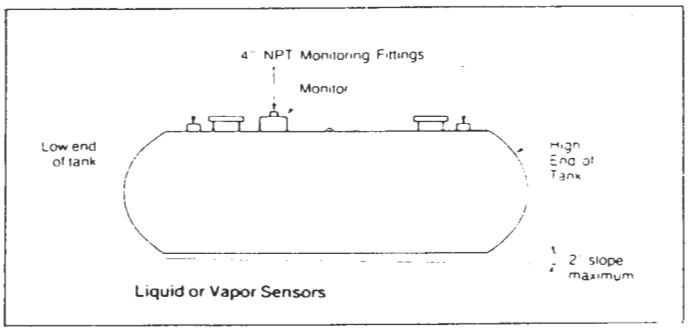
d. Vacuum monitoring—when vacuum monitoring is used, the maximum vacuum is 3" mercury (1.5 psi maximum).

e. Positive air pressure monitoring—when positive air pressure monitoring is used, the maximum air pressure is 3 psi

A14. Installation of Liquid or Vapor Sensors

When liquid or vapor sensors are used, the tank should be sloped at time of installation so that the lowest elevation is at the monitoring end.

These sensors are normally installed using an electrician's wire puller to position the sensor at or near the tank bottom. Most sensors can be installed from finished grade. However, for ease of installation, insert the sensor in the tank cavity before installing the monitoring riser pipe to grade.



Liquid or Vapor Sensors

The space between the inner and outer tank wall is 1⅛" for tanks 12,000 gallon capacity and less; the cavity space is 1¾" for tanks 15,000 gallon capacity and larger.

Consult monitoring equipment manufacturer for proper installation.

A15. Installation of vacuum or air pressure monitoring systems

Consult monitoring equipment manufacturer for proper installation.

A16. Installation of Hydrostatic Tank Monitor

See next page.

If you have an installation condition which is not fully addressed in these instructions, please call the Owens-Corning Tank Installation Supervisor at 419-248-7371.

If you need to schedule a tank repair, please call the Field Service Supervisor, 419-248-8196.

Installation Instructions—Hydrostatic Tank Monitor

For use with Model DWT-2P and DWT-4P tanks only.

B1. Preparation

The annular space in the tank can be filled after tanks have been placed in the excavation. DO NOT PUT ANY PRODUCT IN THE INNER TANK WITHOUT SETTING AND BACKFILLING TO THE TANK TOP. FILL THE ANNULAR SPACE BEFORE FILLING THE TANK, THEN REMOVE A PRIMARY TANK FITTING PLUG AND INSPECT THE INNER TANK FOR LEAKS.

B2. Antifreeze Solutions

Antifreeze solutions are necessary if ambient or product delivered temperature drops below freezing.

Chemically acceptable antifreeze solutions include ethylene glycol (automotive antifreeze), propylene glycol (food-grade antifreeze) and calcium chloride (non-toxic brine). However, before selecting the antifreeze solution, consult local environmental codes for possible restrictions—particularly if using ethylene glycol.

Freeze Protection	% Glycol Mixture (with water)	Brine
20°F	20%	N/A
0°F	30%	N/A
–20°F	40%	N/A
–40°F	50%	Premixed*

*As supplied by Owens-Corning

If using glycol antifreezes, mix the antifreeze solution before pouring into the tank cavity. Brine antifreeze provided by Owens-Corning is premixed and ready to use without the need for mixing or blending.

B3. Jobsite Safety Precautions

Wear safety glasses and protective clothing when mixing or handling any antifreeze solution. In the event of an accident, take the following action:

Contact:

Contact may cause minor eye injury and skin irritation. In case of contact with eyes, promptly flush eyes with plenty of water for at least 15 minutes and get medical attention. For skin, flush skin with plenty of water.

Ingestion:

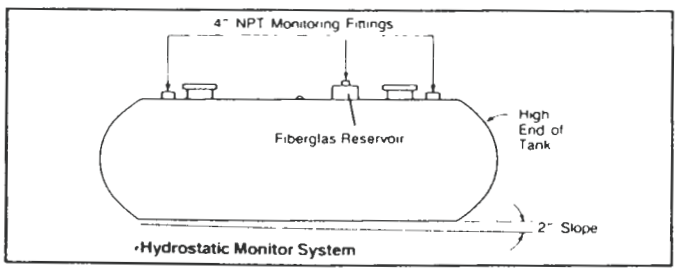
May cause gastrointestinal irritation or ulceration. If swallowed, induce vomiting and consult a physician.

Spillage:

Flush area with plenty of water. Surfaces on which people walk may remain wet longer due to moisture being held by spilled material.

B4. Filling the Annular Space

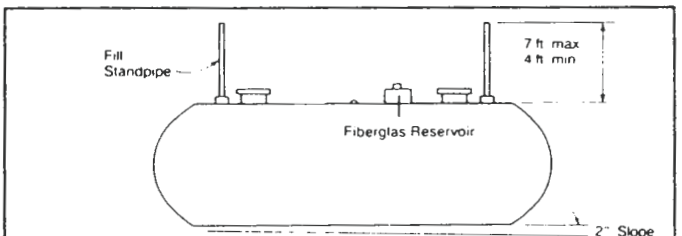
Where safety conditions dictate, backfill the tank first, then fill the annular space. Slope the tank 2" to minimize trapped air in the cavity. Trapped air may cause false alarms at a later date. If the Fiberglas reservoir is located near the tank end, set the tank in the excavation with the reservoir placed at the high end of the tank. Where jobsite conditions permit, fill the annular space with liquid prior to backfilling.



Hydrostatic Monitor System

The 4" NPT fitting plug in the top of the reservoir should be removed prior to filling the annular space. Remove the fitting plugs and place standpipes at the 4" monitoring fitting located on each end of the tank. The standpipes (2" diameter or larger fiberglass pipe is recommended) must be no less than 4' higher than the tank top.

Note: Since the 1,000 and 2,500 gallon capacity tanks have only one monitoring fitting in addition to the Fiberglas reservoir, the standpipes should be placed on the one monitoring fitting and in the fitting at the top of the reservoir. Since the 550 gallon capacity tank only has the 4" fitting in the Fiberglas reservoir, place one standpipe in the Fiberglas reservoir fitting.



Hydrostatic Monitor System

The liquid to fill the cavity must be gravity fed by pouring liquid into the standpipe. A water hose may be used only if it is *not* screwed or attached to any of the monitoring fittings. Connecting a pressurized hose directly to the monitoring fitting will overpressurize the cavity and will damage the tank.

To minimize the trapped air, fill the annular space from the low end of the sloped tank. Continue to fill the cavity with water until liquid begins to overflow the standpipes. Refilling the cavity through the fill standpipe will be required. After water overflows the Fiberglas reservoir, replace the plug in the reservoir fitting.

Disconnect the standpipe at the low end of the tank and replace the fitting plug. The standpipe at the high end of the tank remains connected to the monitoring fitting.

The cavity and remaining standpipe are gravity filled until the liquid level in the remaining standpipe is at least 4' higher than the tank top. Tighten the lower monitoring fitting securely.

Testing

Continue refilling to the 4' level on the standpipe until the liquid level stabilizes (less than ½" drop in 1 hour).

If backfilling after filling the annular space, thoroughly check the outer tank for leaks. An exterior leak detected before backfilling is simple to repair. Do not backfill a tank with a known or suspected leak in the outer wall.

Remove a primary tank fitting plug and inspect the inner tank for leaks. Do not enter the tank without adequate safety protection.

In the unlikely event a tank leak is discovered, call the Owens-Corning Field Repair Supervisor to schedule a tank repair. Telephone: (419) 248-8196.

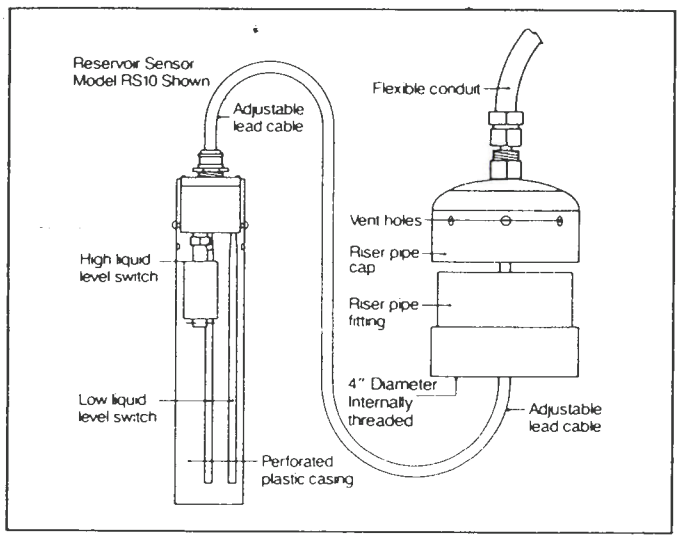
After the liquid level has stabilized, disconnect the remaining fill standpipe and plug the monitoring fitting. Additional fluid may be added, if necessary, in the Fiberglas reservoir so that the reservoir is ⅔ full.

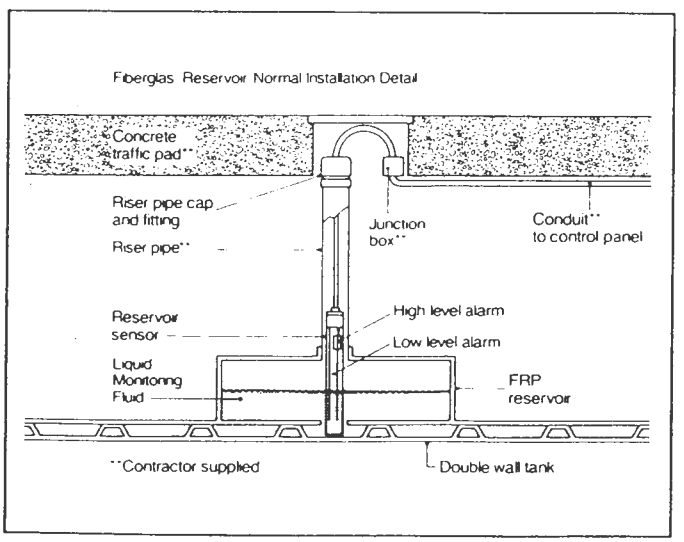
B5. Fiberglas Reservoir Sensor

After filling with liquid, the level in the Fiberglas reservoir may be monitored periodically by using a dipstick or continuously by using the optional reservoir sensor, in conjunction with an optional electronic control panel.

The monitoring sensor is placed into the Fiberglas reservoir through a 4"diameter riser pipe from grade. The sensor includes the riser pipe cap with a 16" length of flexible conduit, which is connected to an electrical junction box (contractor supplied).

The PVC riser pipe cap is designed to slip on and off the PVC fitting installed on the top of the riser pipe. These pipe fitting connections are designed to provide quick and easy access to the sensor and reservoir without disconnecting any electrical or piping connections. However, for extreme high groundwater conditions, to prevent the intrusion of groundwater into the reservoir, the factory drilled vent holes (4) in the PVC riser pipe cap must be plugged and a separate vent line installed from the riser pipe to above ground. In addition, the PVC riser pipe top should be glued to the riser pipe fitting.





B6. Electrical

All electrical connections must be in accordance with local codes. To wire the reservoir sensor to the control panel use 16 AWG type MTW or 14 AWG type THNN.

B7. Testing

Remove the sensor from the Fiberglas reservoir to simulate a low liquid level condition; removing the sensor from the fluid in the reservoir will activate the control panel low level alarm. Then, immerse the sensor into a bucket of water to activate the high level alarm.

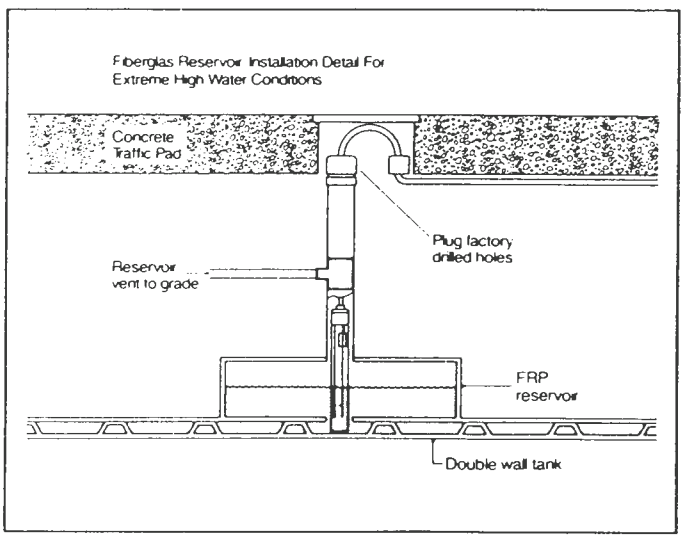
B8. Reservoir Leak Detection

In the event of an alarm condition, remove the riser pipe cap and extract the reservoir sensor. Then use a dipstick to measure the reservoir liquid level to determine if the low or high level alarm was tripped. If the dipstick measurement is 1.25" (2.00" for tanks 15,000 gallon capacity or larger) or less, the reservoir has drained, indicating a low level alarm. If the dipstick measurement is 10" or higher, the high level alarm was activated.

For a low level alarm, refill the reservoir to ⅔ full and continue monitoring. For a high level alarm, remove liquid from the reservoir until it is ⅔ full and continue monitoring.

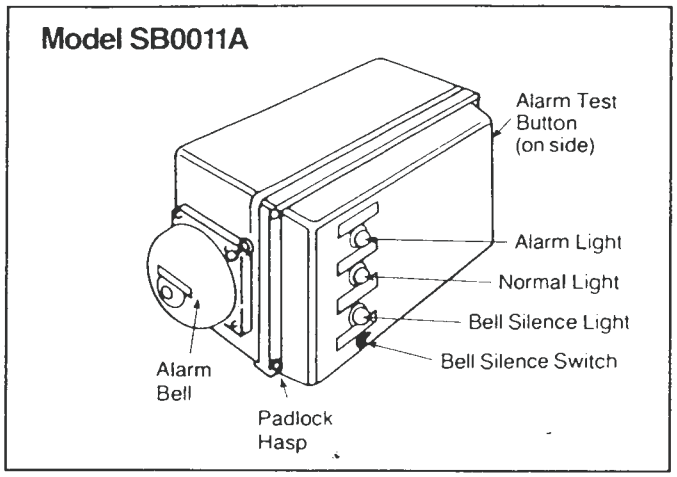
If an alarm condition occurs and the reservoir level is normal, the control panel is improperly wired (consult your local electrician) or has a defective component. (See Section C9 on Control Panel False Alarms.)

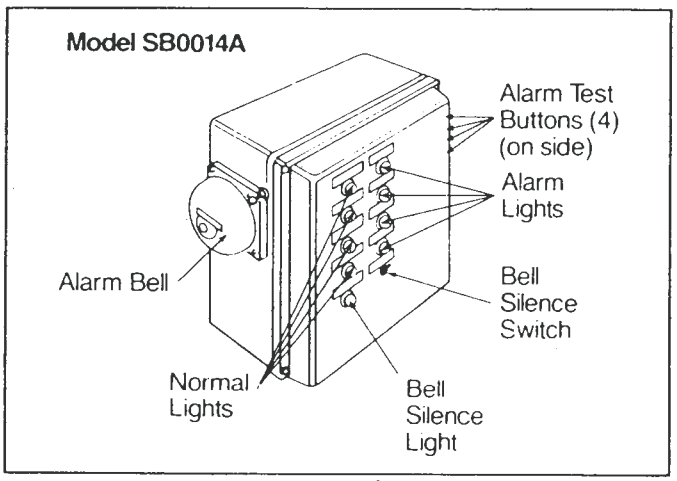
If an additional low level or high level alarm occurs, call the Owens-Corning Field Service Supervisor at 419-248-8196.



Installation Instructions—
Electronic Control Panel Mo s SB0011A and SB0014A

Installation of Model SB0011A is detailed in this section and Figure B. Reference Figure C for Model SB0014A circuit diagram.



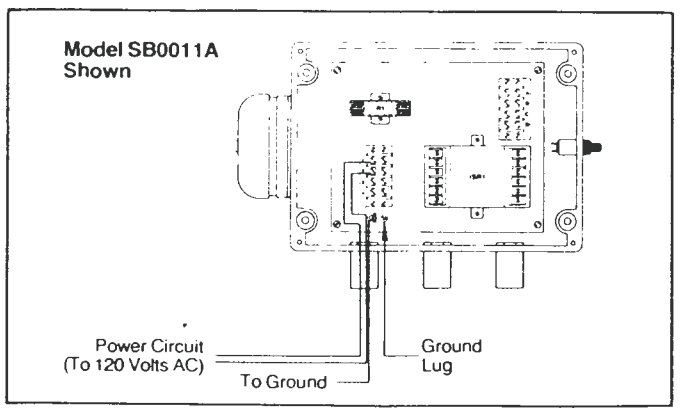


C1. Location

Locate the control panel in a non-hazardous area where an explosive environment does not exist. The control panel can be wall mounted using the provided mounting hardware.

C2. Power Circuit

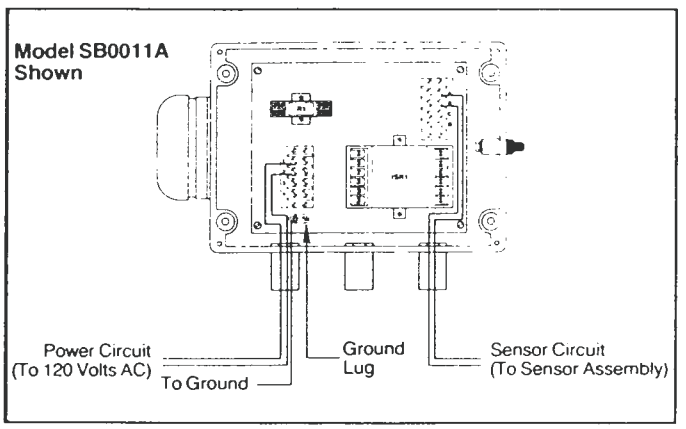
The control panel is pre-assembled and ready to wire. A 120 volt AC power source is required. All wiring must be in accordance with local codes. The power circuit wiring (contractor provided) enters the left conduit at the bottom of the control panel and is connected to terminals 1 and 2.



A circuit breaker (contractor provided) common to other devices is recommended. Using a circuit breaker common to other devices will increase the probability the tank owner is aware of a tripped circuit breaker. If there is no power to the control panel, the alarm bell and other warning devices cannot be activated.

C3. Sensor Circuit

The pre-assembled reservoir sensor is ready to wire (contractor supplied) to the control panel. For intrinsically safe wiring, use 16 AWG type MTW or 14 AWG type THNN (contractor supplied). For UL rated applications the maximum wiring distance between the sensor and control panel is 1,750 feet. The wiring for the sensor circuit enters the right conduit at the bottom of the control panel and is connected to terminals A and B.



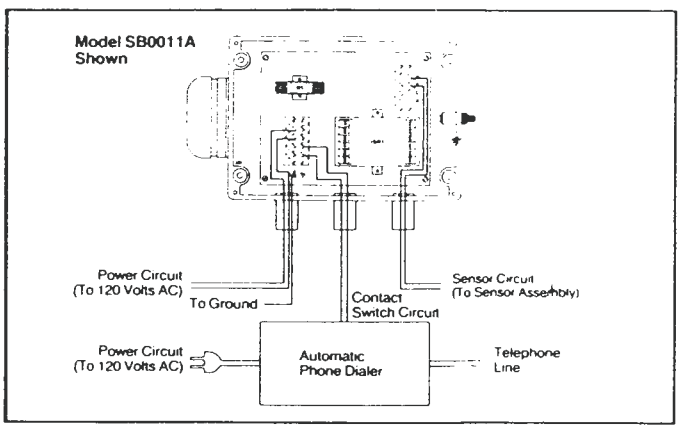
On the four circuit control panel (Model SB0014A), there are four terminal pairs (AB, EF, IJ, and MN). Connect a separate sensor to each terminal pair. **If less than four monitoring circuits are used, a jumper wire is required to separately connect each unused terminal pair.**

C4. Optional Warning Device Circuit

The tank owner may specify additional warning devices to be provided by the contractor. The optional warning device circuits enter the panel at the center conduit.

Transmission Contact Switch

An automatic telephone dialer typically requires only a contact switch to activate the dialing function. The telephone dialer is plugged (or wired directly) into an electrical outlet for the power source. The power source for the dialer is not supplied by the control panel. With power to the control panel, normally closed contacts are at terminals 3 and 4. These terminals will open—providing the switching mechanism to activate the dialer—when the control panel goes into the alarm mode.



Power Source Switch

A typical wiring diagram is provided for accessories requiring power such as a light beacon. The wiring diagram (see Figure B) will provide 120 volts AC; the optional warning device must be rated for 300 watts or less.

C5. Alarm Bell Silence Switch

The control panel is equipped with an "ALARM BELL SILENCE" switch. Positioning this switch to "OFF" will silence all audible alarms, but will illuminate the "ALARM BELL" light. If this feature is not desired, the control panel can be rewired (at the location of the switch inside the control panel) by the contractor to override the alarm bell silence feature.

C6. Normal Operation

A stable liquid level range in the reservoir indicates that both the inner and outer wall of the double-wall tank are leak-free. The liquid level in the reservoir will fluctuate as the temperature of the incoming stored product changes. The reservoir is designed to provide adequate capacity for normal thermal expansion and contraction. As long as the reservoir liquid level is in the normal range, the "NORMAL" light is illuminated continuously. The "ALARM BELL" switch should be set to "AUTO."

C7. Testing and Maintenance

The control panel warning system should be checked at least once per year. Depress the "TEST BUTTON" switch located on the side of the control panel to verify that each circuit is operational. This "TEST BUTTON" verifies the operation of the internal circuits of the control panel. However, it does not test the operation of the monitoring sensors.

A faulty circuit in the control panel can be diagnosed using the troubleshooting guide (See Figure A). Contact the Owens-Corning Field Service Supervisor for control panel replacement parts.

C8. Leak Detection

In the unlikely event the reservoir totally drains, the control panel alarm will be activated—the warning light will illuminate, the alarm bell will sound, and the transmission contacts will activate any accessory alarm devices.

The alarm bell can be temporarily silenced by setting the "ALARM BELL" switch to the "OFF" position. Under this condition, the "ALARM BELL" light is illuminated, the "WARNING" light remains on, and the "NORMAL" light is off.

See Section B8 on Reservoir Leak Detection

C9. Control Panel False Alarms

A control panel false alarm occurs when the panel goes into the alarm mode, but the reservoir liquid level is still in the normal range. Although rare, these types of false alarms typically result from the failure of an electronic component inside the control panel. All electronic components must function properly to maintain the "NORMAL" condition. An electrical component failure will result in an "ALARM" condition. Refer to the troubleshooting guide below to identify the specific problem.

Installation Instructions—Switch Panels Models SP1 and SP4

D1. General

The switch panel will double the number of piping and double-wall tank sensors which can be monitored with the Owens-Corning supplied electronic control panels. A switch panel connects a tank sensor and piping sump sensor to one monitoring circuit of the control panel. In an alarm condition, when both the tank and piping sump sensor are connected to the same monitoring circuit, the switch panel is used to determine which sensor is in the alarm mode. The switch panels can also be used to connect a maximum of two reservoir sensors to each monitoring circuit.

Installation of Model SP1 is detailed in this section and Figure D. Reference Figure E for Model SP4 circuit diagram.

D2. Location

Locate the switch panel in a non-hazardous area where an explosive environment does not exist, preferably next to the electronic control panel. The switch panel can be wall mounted using the provided mounting hardware.

D3. Sensor Circuits

For UL rated applications, the maximum wiring distance between the control panel and the sensors is 1,750 feet. However, if a switch panel is used the maximum wiring distance is 875 feet. For intrinsically safe wiring, use 16 AWG type MTW or 14 AWG type THNN (contractor supplied). The wiring from the switch panel (from terminals 1 and 2) enters the right conduit at the bottom of the control panel and is connected to terminals A and B.

On the four circuit control panel (Model SB0014A), there are four terminal pairs (AB, EF, IJ, and MN). Connect a separate sensor circuit from the switch panel (Model SP4) to each terminal pair. **If less than four sensor circuits are used, a jumper wire is required to separately connect each unused terminal pair in the control panel.**

The tank sensor (from the reservoir) and the piping sump sensor are wired to the switch panel. Connect the tank sensor wires to terminals 3 and 4 and the sump sensor wires to terminals 5 and 6 in the switch panel. The switch panel is pre-wired so that the tank and pipe sump sensors are connected in series.

D4. Transmission Contact Switch

In the event the piping sump sensor detects liquid in the piping sump, Owens-Corning recommends that the power to the submersible sump be disconnected. This can be performed automatically by providing an electrical feedback circuit from the monitoring system to disengage the submersible pump. The transmission contacts in the electronic control panel (located at terminals 3 and 4 for Model SB0011A) can provide the switching mechanism for this feedback circuit.

The four circuit control panel (Model SB0014A) has four separate sets of transmission contacts. When the tank sensor and piping sump sensor are connected in series using a switch panel, an alarm in either sensor would activate the transmission contacts for that monitoring circuit. If the tank sensor and pipe sump sensor are wired on separate monitoring circuits using the four circuit control panel, each sensor would activate a separate set of transmission contacts.

D5. Testing

After connecting the tank sensor, the pipe sump sensor, and the switch panel to an operational control panel, activate the sensors to test the total system. To test the tank sensor, remove the reservoir sensor from the reservoir. To test the pipe sump sensor, lift the trip rod on the sensor. Depress the appropriate push button on the switch panel to temporarily silence the alarm. This will determine which sensor is in the alarm mode.

D6. Leak Detection Using Switch Panels

In the unlikely event of an alarm condition, independently depress each push button on the switch panel until the alarm is temporarily silenced. The push button which silences the alarm indicates which sensor is in the alarm mode.

Piping Sumps Model PS 42-2[illegible], PS 42-30A, SPS 42-22A and SPS 42-30A

E1. General

The piping sump provides containment of a submersible pump leak and also provides a termination point for double-wall piping systems.

The piping sump is produced in two pieces: a top half and bottom half. The bottom half is surface mounted on the manway where the submersible pump will be located. After completing the piping and wiring connections to the submersible pump and optional piping sump sensor, the top and bottom halves are cemented together using the two-part adhesive used for fiberglass pipe connections.

E2. Handling

Use the side handles to manually or mechanically lift the piping sump. Do not roll or drop. Set on smooth ground. If high winds are anticipated, the contractor is responsible for tying down to prevent damage from being moved by high winds.

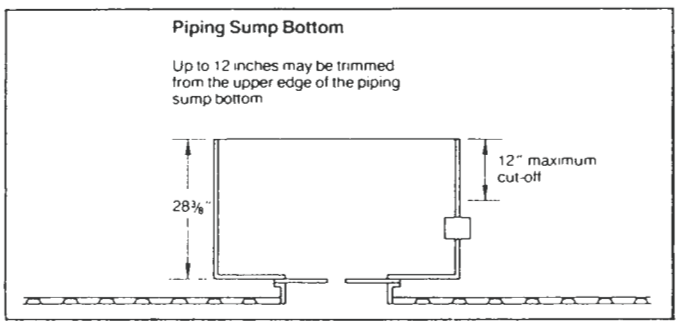
E3. Inspection

Before installation visually inspect the piping sump for potential impact or handling damage.

E4. Tank Burial Depth

The piping sump is designed for a tank burial depth of 48" from the tank top to grade. Deeper burial depths are possible by using a 24" manway extension.

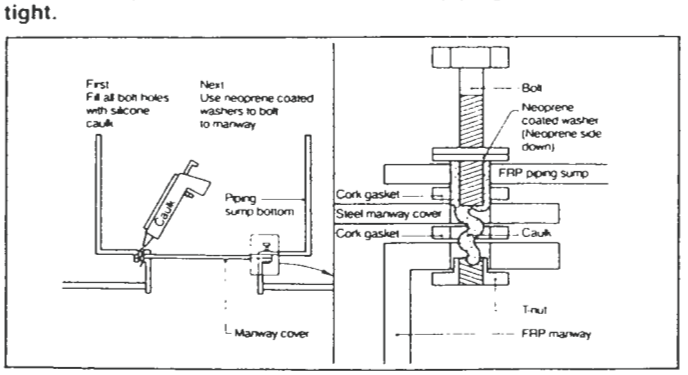
The piping sump bottom can be cut in the field to accommodate tank burial depths less than 48" but above 36". Use a sabre saw or circular saw with carbide tipped masonry blades to trim up to 12" off the upper edge of the piping sump bottom.



E5. Surface Mounting on a 22" or 30" Manway

If the piping sump is to be surface mounted on the manway, first remove the existing bolts on the manway cover. **Rotate the manway cover to align the fittings and submersible pump with the intended piping run (see typical piping configuration).** Wipe the manway cover to remove any dirt, gravel or other foreign substances that may interfere with the gasket. Place the supplied cork gasket on top of the steel cover and align it with the bolt pattern. Position the bottom of piping sump on top of the gasket.

Use the supplied silicone caulk and washers to seal the bolt holes. Before bolting the piping sump to the manway cover, fill the bolt holes with silicone caulk. After caulking the bolt holes, fasten the sump onto the manway using the bolts and neoprene coated washers. The neoprene coated washer must be installed with the neoprene side down to assure the piping sump is water tight.



As the bolts are tightened, the T-nut will permanently imbed itself in the fiberglass manway flange. A surface-mounted piping sump will prevent future access to the tank from that manway.

E6. Hydrostatic Water Test

Use the supplied cork manway gasket, silicone caulk and metal/neoprene washers to surface mount the piping sump on the manway cover. After tightening all bolts, fill the piping sump bottom with one to two inches of water. Allow the water to stand at least 12 hours while other work is being performed.

Inspect the bolts and underside of the tank manway for potential leaks. Tighten bolts or repair any gaskets/seals as indicated by the presence of moisture.

E7. Piping Connections

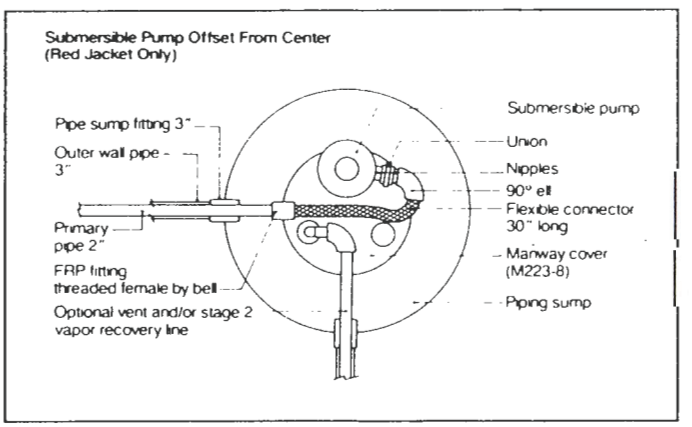
The pipe sump fittings are standard FRP couplings. Any unused pipe fittings can be plugged using standard FRP pipe plugs.

The primary piping passes through the pipe sump fitting. The outer jacket of the double-wall piping is cemented to the pipe sump fitting. Fiberglass pipe manufactured by Smith Fiberglass or Ameron is compatible with the pipe sump fitting.

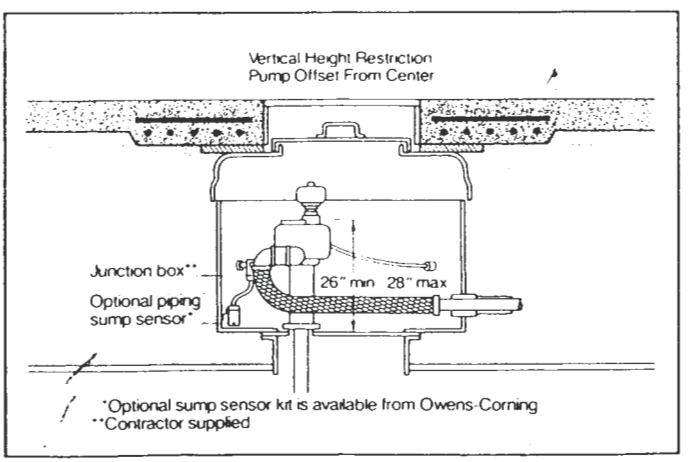
E8. Typical Configurations

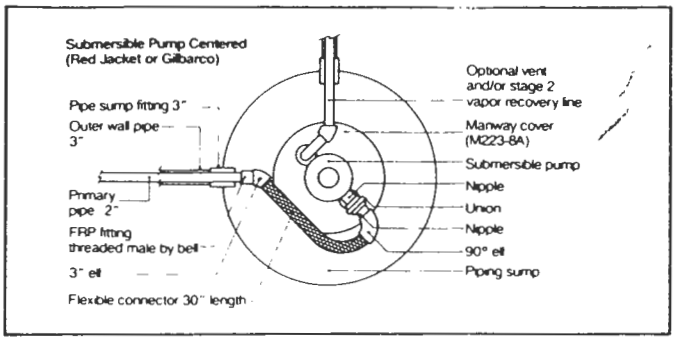
Double-wall piping is stiffer and less forgiving of improper alignment than single-wall piping. Layout the piping trench and piping sump orientation to assure that the piping system can be connected properly. It may be necessary to rotate the manway cover and submersible pump so that the primary piping inside the piping sump is properly aligned to interface with the double-wall piping system.

The primary piping that connects to the submersible pump can be rigid FRP piping or flexible connectors. Although flexible connectors are more costly, they will minimize potential piping alignment problems inside the piping sump, particularly for contractors not familiar with double-wall piping systems. Two typical piping configurations are shown:



Note: When using the submersible pump offset from the center of the manway, the maximum height for the submersible pump (without leak detector) is 28" from the manway cover, this allows ample room to remove the submersible pump for maintenance. A minimum height of 26" is recommended to avoid over-stressing the flexible connector.





E9. Electrical Connections

Electrical conduits are connected to the steel NPT fittings. Four fittings are provided to accommodate wiring to the submersible pump and an optional monitoring sensor. All wiring connections must conform to local and national electrical codes.

The piping sump (Model series SPS only) is to be air tested after the electrical connections are made. Use seal-off fittings to make the electrical connections air tight.

E10. Monitoring

The piping sump can be equipped at the jobsite with an optional monitor to detect the presence of liquid in the piping sump. The monitoring sensor should be placed in a protective casing, which has been perforated. The casing is fastened to the sensor mounting bracket on the side of the piping sump using a mounting clamp.

The optional Owens-Corning Fiberglas factory supplied pipe sump sensor is already mounted inside a plastic casing and is supplied with the mounting clamp.

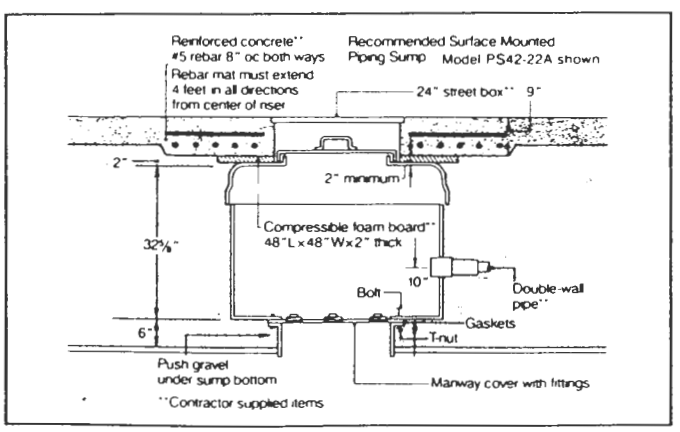
If the monitoring sensor detects liquid in the piping sump, Owens-Corning recommends that the power on the submersible pump be disconnected. This can be performed automatically by providing an electrical feedback circuit from the monitoring system to disengage the submersible pump. (See Section D4: Transmission Contact Switch)

E11. Backfilling and Clearances

After completing all piping and electrical connections, the top and bottom halves of the piping sump are cemented together. Clean the joint area to insure maximum bonding strength. Use the two-part adhesive supplied by the fiberglass pipe vendor. Apply a generous amount of mixed adhesive to both the bottom and the top joint. Place the top half into position and press down to squeeze out the excessive adhesive. Follow other installation instructions provided by the adhesive manufacturer.

Hand place gravel around and under the bottom of the piping sump.

The piping sump must be isolated from direct traffic loading.



Allow a 2" minimum clearance between the top of the piping sump and the bottom of the concrete pad. Backfill to the top of the piping sump, then place compressible foam board (48"L maximum x 48"W maximum x 2" thick—or equivalent layers) on top of the piping sump. The 9" thick concrete traffic slab can be poured directly onto the compressible foam board. **However, the concrete must not come into direct contact with the piping sump.** Styrofoam or urethane foam sheathing may be used for the compressible board (contractor supplied); the minimum length and width of the compressible board is 42".

As an alternate to the compressible board, a 48" diameter riser (12" long) can be used to isolate the piping sump from the traffic slab. Allow a 6" minimum clearance between the bottom of the riser and top of the double wall pipe.

E12. Air Testing (Model Series SPS Only)

For Model series SPS sumps, the air test must not exceed 5 psi.

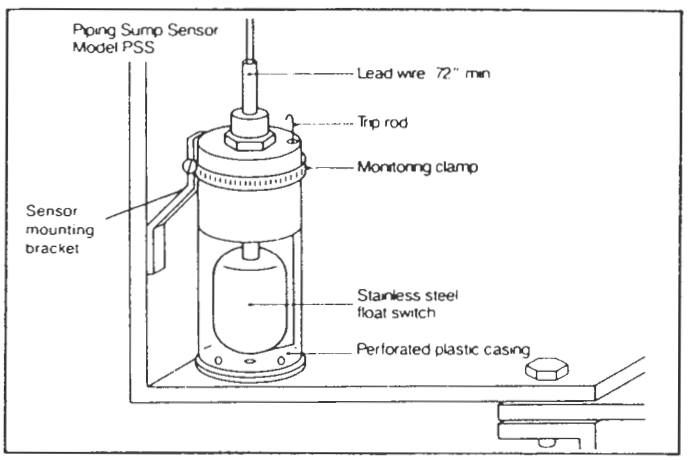
Monitor the pressure for at least 30 minutes. While under pressure, soap the piping sump and check for leaks as indicated by soap bubbles.

E13. Traffic Slab

Model series PS piping sumps can be accessed through a 24" street box; model series SPS sumps require a 30" street box.

Traffic areas require a rebar reinforced concrete road surface to span the underground void created by the piping sump.

E14. Piping Sump Sensor



Using the supplied mounting clamp, mount the piping sump sensor on the sensor mounting bracket. For maximum sensitivity, the sensor must rest on the bottom of the piping sump.

The float switch is activated after 2" of liquid has accumulated in the bottom of the piping sump—approximately 12 gallons of liquid. To improve the sump sensor sensitivity, add 2" of gravel to the bottom of the piping sump. With gravel, the sensor is activated by approximately 5 gallons of liquid. If gravel is used in the sump bottom, wrap the sump sensor sides and bottom with filter fabric to prevent small stones or grit from entering the sensor casing.

The piping sump sensor can be wired directly to the Owens-Corning supplied electronic control panel or can be indirectly wired to the control panel using an optional switch panel. For intrinsically safe wiring, use 16 AWG type MTW or 14 AWG type THNN (contractor supplied). All electrical connections must be in accordance with local and national electrical codes.

After the sensor is installed and connected to an operating control panel, the sensor can be tested by lifting the trip rod located on the top of the sensor.

For details of wiring the Model PSS sensor see Figures D and E.

E15. Maintenance

Use caution for normal maintenance or inspection of the submersible pump and piping located in the piping sump.

WARNING: FUEL VAPORS MAY BE PRESENT IN THE PIPING SUMP. KEEP ALL IGNITION SOURCES AWAY WHEN REMOVING THE PIPING SUMP LID.

F1. Other Accessories

Compression Rings

Optional steel compression rings are available to connect a piping trench liner (flexible membrane or Fiberglas trench liner) to:

- The manway cover.
- A Fiberglas attachment ring.
- A Manway interface ring.

When flexible membranes are used, a special caulk (supplied by the trench liner manufacturer) is applied to both sides of the liner before fastening it to the manway flange.

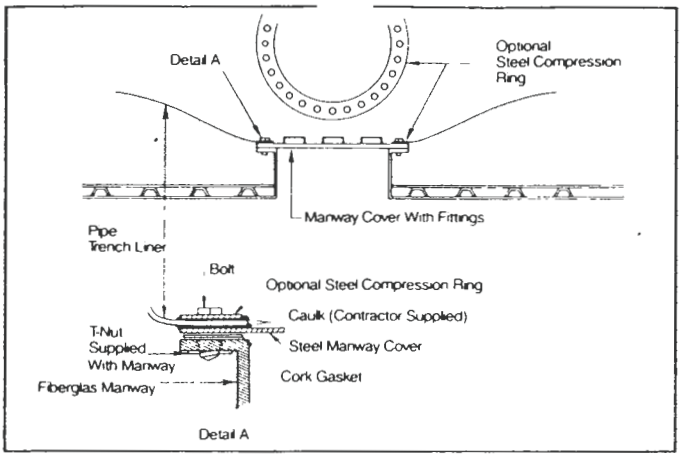


Figure A: Troubleshooting Guide For Electronic Control Panels (Model SB0011A and SB0014A)

Test	Test Results	Conclusion
1.0 Symptom: Reservoir Full, Alarm Bell On, Alarm Light On, Normal Light Off		
1.1 **Check Liquid Media.** Remove sensor from reservoir. Insert sensor in fresh glass of water.	Bell off, alarm light off, normal light on Bell on, alarm light on, normal light off	Replace fluid in sensor Proceed to Test 1.2
1.2 **Check Relay ISR1.** Jumper terminals G & L on relay ISR1.	Bell on, alarm light on, normal light off Bell off, alarm light off, normal light on	Replace relay IRS1 Proceed to Test 1.3
1.3 **Check Pushbutton or Sensor.** Jumper terminals A & B on terminal strip.	Bell on, alarm light on, normal light off Bell off, alarm light off, normal light on	Replace pushbutton switch Inspect sensor and wiring for defects
2.0 Symptom: Reservoir Full, Alarm Bell On, Alarm Light Off, Normal Light On		
2.1 **Check Relay R1.** None.* *On Model SB0014A, check *all* four relays	None	None
3.0 Symptom: Reservoir Full, Alarm Bell On, Alarm Light Off, Normal Light Off		
3.1 **Check Relay ISR1.** Pushbutton.	Bell on, alarm light on, normal light off Bell on, alarm light off, normal light off	Replace relay ISR1 Replace burned out light
4.0 Symptom: Reservoir Full, Alarm Bell Off, Alarm Light On, Normal Light On		
4.1 **Check Relay ISR1.** Push test pushbutton.	Bell on, alarm light on, normal light off	Replace relay ISR1

Figure B: Detailed Circuit Diagram Model SB0011A Control Panel

Single Tank With Reservoir Sensor

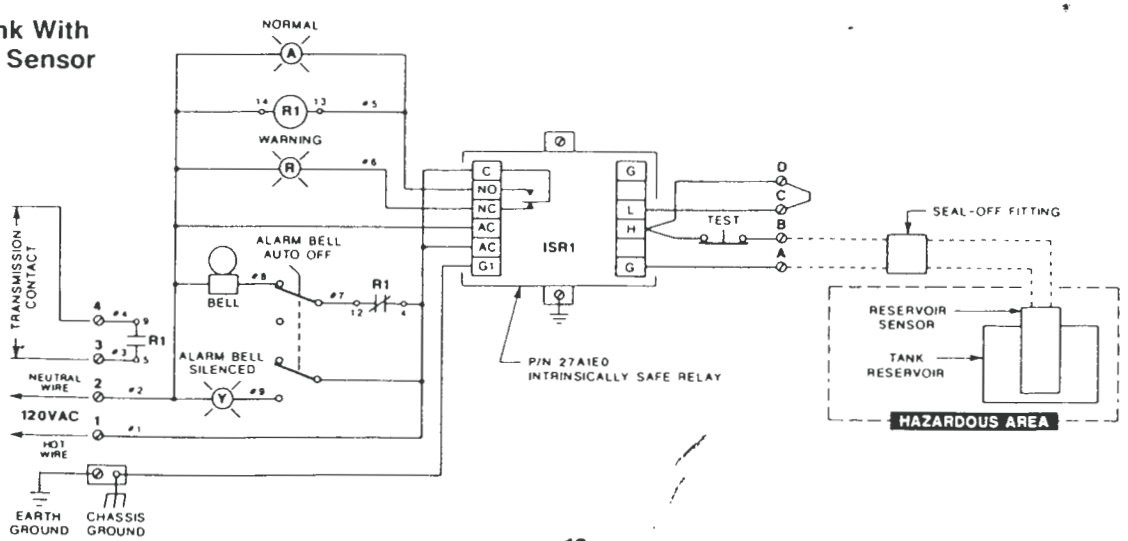


Figure C: Detailed Circuit Diagram for Control Panel Model SB00

Four Tanks With Reservoir Sensors

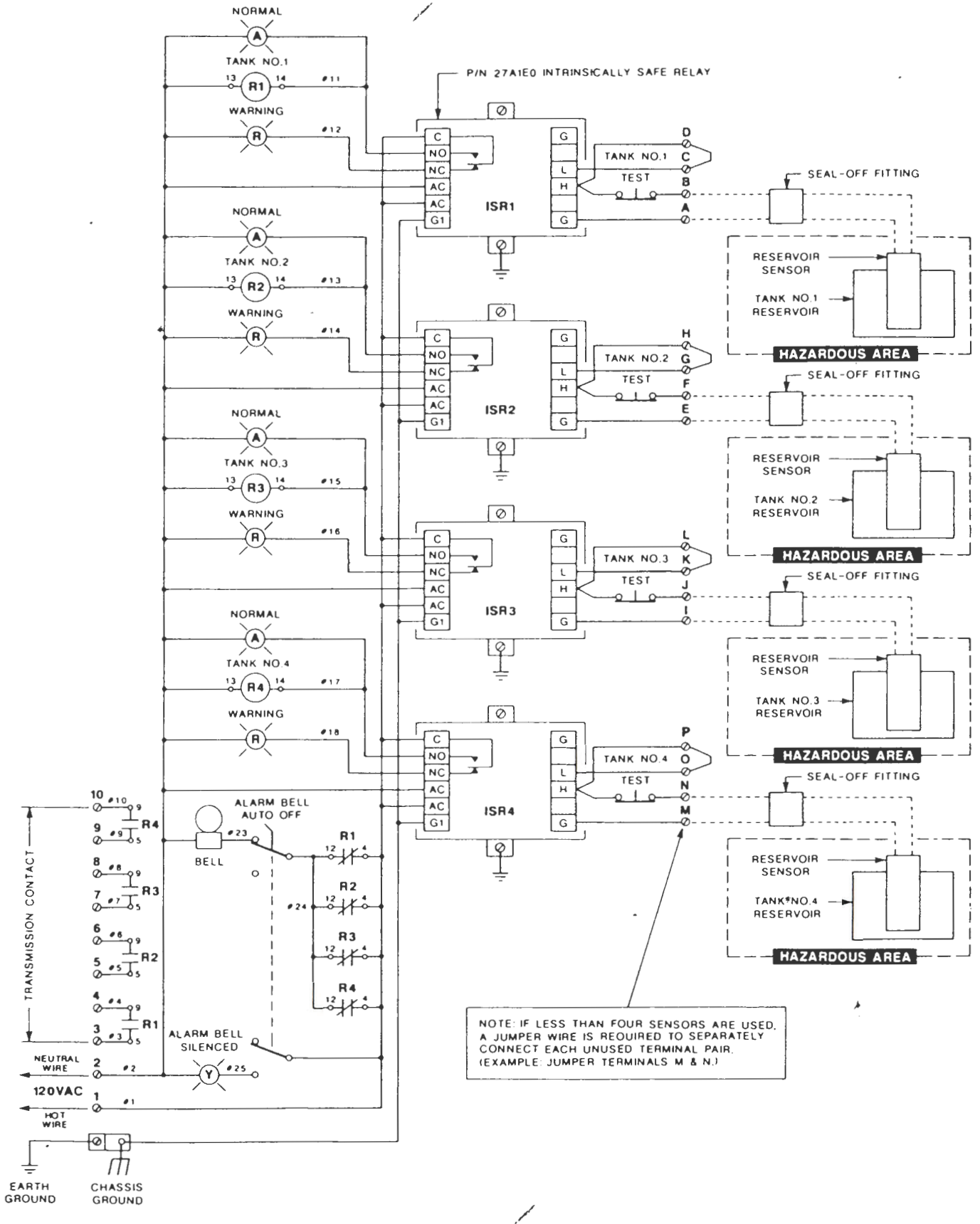


Figure D: Detailed Circuit Diagram for Model SB0011A Control Panel With Model SP1 Switch Panel

Single Tank With Sensors on the Tank Reservoir and on the Optional Piping Sump

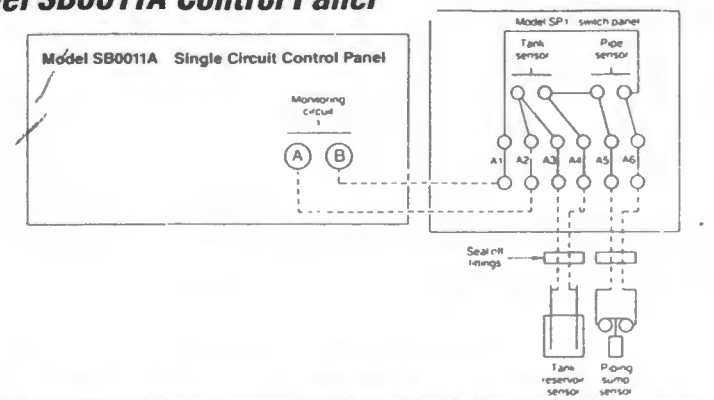
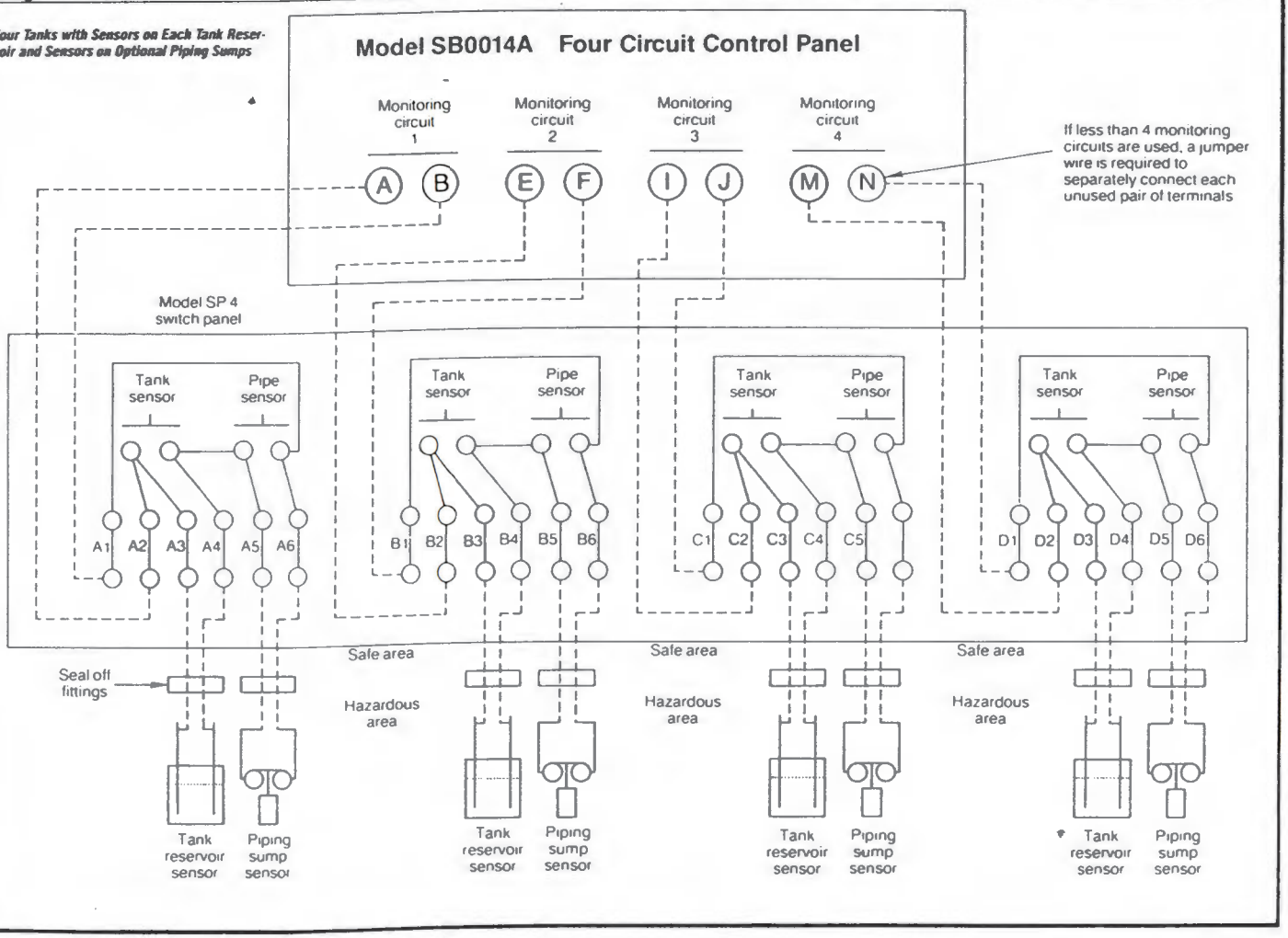


Figure E: Detailed Circuit Diagram Model SB0014A Control Panel with Model SP4 Switch Panel

Four Tanks with Sensors on Each Tank Reservoir and Sensors on Optional Piping Sumps



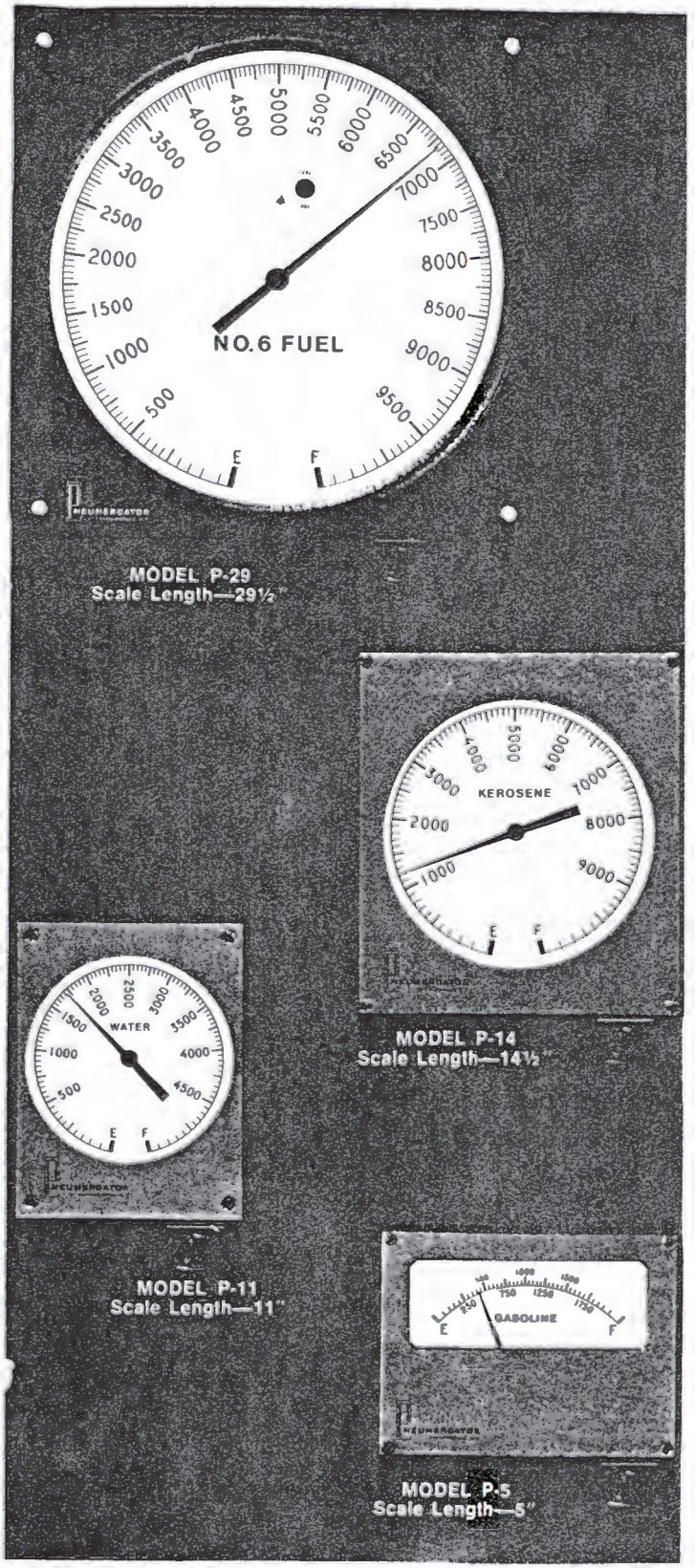
OWENS/CORNING FIBERGLAS TRADEMARK

OWENS-CORNING FIBERGLAS CORPORATION
Non-Corrosive Products Division
Fiberglas Tower
Toledo, Ohio 43659

Pub. No. 3-PE-12681-G
Litho in U.S.A., October, 1987

PNEUMERCATOR
LIQUID LEVEL CONTROL SYSTEMS

HYDROSTATIC LIQUID LEVEL TANK GAUGING SYSTEMS



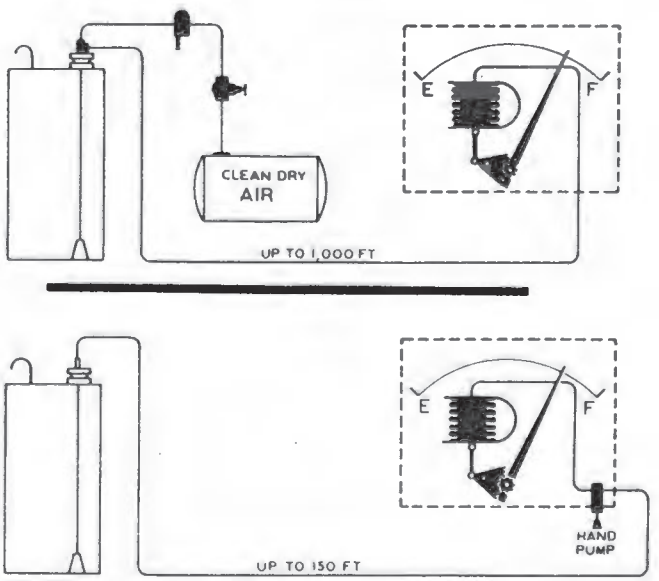
This family of indicators is the same as the hydraulic line only with relation to outside case dimensions and scale length. Based on an adaptation of the hydrostatic principle, air pressure is required to obtain liquid level indication. This is provided either by a built-in hand pump or by a source of clean dry air.

Installation is readily accomplished in either empty tanks or partially filled tanks. A 2" tank opening is required through which the air bell assembly (supplied by Pneumercator) is installed. Once the system has been properly installed, maintenance is practically non-existent. All that is required is an occasional check of the zero position which takes less than a minute.

For constant air systems, high or low level switches can be supplied which will activate a light, audible alarm or start and stop pumps to maintain predetermined levels.

The hydrostatic gaging system described on this page should be used only on tanks vented to the atmosphere.

PRINCIPLE OF OPERATION



Air is introduced in the line between the indicator and the tank by means of either the built in hand pump or a source of clean compressed air. When the pressure in this line equals the pressure at the bottom of the bubble pipe (created by the head of liquid in the tank), the bellows in the indicator mechanism expands—or contracts—and thru suitable linkage moves the pointer over the face of the dial. Excess pressure bubbles out of the bottom of the bubble pipe.

REMOTE READING HYDROSTATIC TYPE

Pneumercator hydrostatic tank gaging systems operate on the principle that the pressure at the bottom of the tank varies with the liquid head. The pressure balance which is equal to the tank liquid height is converted into tank contents and indicated on a calibrated dial. These gages are designed to measure liquids having a constant specific gravity in vented tanks. The simple bubble pipe arrangement in the tank is ideal for vertical tanks and those having internal obstructions. For corrosive liquids the pipe can be of proper resistant material.

There are two types of systems available. One system has a hand pump built into the gage case. A few strokes of the pump supplies the air for purging the tube in the tank to obtain the "pressure balance". The hand pump gages can operate a distance up to 150 feet from the tank. The other system is with the hand pump omitted and a constant source of clean dry air is used to instantly follow tank level changes and automatically indicate capacity on a calibrated dial. Constant air gages can be located up to 1000 feet from the tank.

This gaging system is listed by Underwriters Laboratories Inc., N.Y.C., Board of Standards and Appeals.

HAND PUMP MODELS

STANDARD SYSTEM: Includes a dial type indicator complete with gallons dial, built in hand pump, 30 feet of ¼ inch tubing, an air chamber, a 2 inch tank entrance bushing and all other necessary fittings to complete the installation. Additional tubing is available.

Instrument Case:	Surface or flush mount.
Tank Pressure:	Vented tanks
Gage Models:	P-5 (5 inch scale), P-11 (11 inch scale) P-14 (14½ inch scale), P-29 (29½ inch scale)

SUGGESTED SPECIFICATION: Provide and install for each tank a remote reading UL listed tank gaging system which shall be of the dial hydrostatic type, utilizing an integral built in hand pump for manual operation. The instrument shall be factory calibrated for the tank contents and indicated on [(5") (11") (14½") (29½")] dial scale marked for ( ) gallons without the use of gage glass or fluids. The gaging system shall be model ( ) manufactured by The Pneumercator Co., Inc., Farmingdale, N.Y. 11735.

GAGE SELECTION

Model gage recommended depends on tank capacity. A P-5 model on a 10,000 gallon tank has readable spaced marks representing 200 gallons each. A P-11 and P-14 has approximately 100 gallons each but the P-29 with 50 gallons for each mark is more suitable for measurement as you can interpolate between marks and read to approximately ten gallons.

CONTINUOUS READING MODELS

STANDARD SYSTEM: Includes indicating instrument and a 2" tank entrance assembly with choke and fittings for ¼" tubing to air supply and indicator.

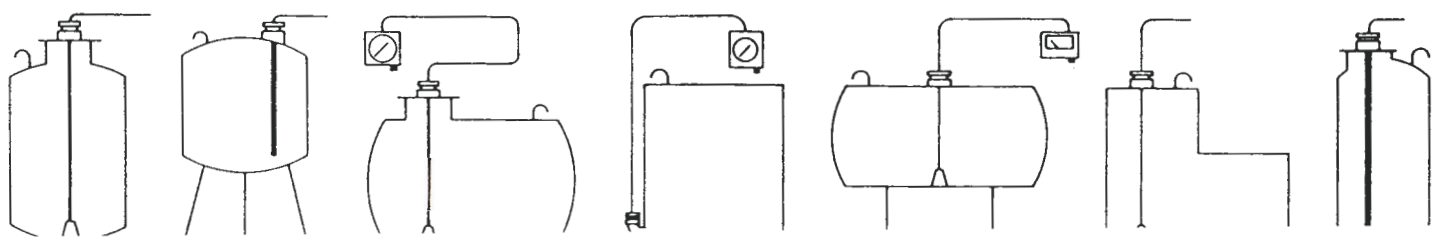
Indicator Case:	Surface or flush mount.
Tank Distance:	Up to 1000 feet
Switches:	High and/or low level available S.P.D.T., 10 amp. non-inductive at 120V-ac.
Gage Models:	P-5A (5 inch scale), P-11A (11 inch scale), P-14A (14½ inch scale), P-29A (29½ inch scale).

SUGGESTED SPECIFICATION: Provide and install for each tank a remote continuous reading dial type hydrostatic tank gage. The gaging system shall utilize an external source of compressed air and include a pressure regulator, a sight glass bubbler, an air filter, a combination jewel choke and tank entrance fitting. The gaging system shall provide continuous indication of tanks' contents on a [(5") (11") (14½") (29½")] dial scale calibrated for ( ) gallons. Switches shall be provided for actuating a C-1SA or C-2SA alarm console which provides high and low level warning lights and an audible alarm. The gaging system shall be model ( ) manufactured by The Pneumercator Co., Inc., Farmingdale, N.Y. 11735.

Experience has established the following gage selection:

Model P-5 For tanks up to 3000 gallons
Model P-11 For tanks 3000 to 7500 gallons
Model P-14 For tanks 5000 to 10000 gallons
Model P-29 For tanks 8000 gallons and upward.

INSTALLATION: Either the hand pump or constant air type gages can be installed quickly and simply in empty or full tanks. No special skills are required.



"ORDERING SPECIFICATIONS"

MODEL: P-5 ☐, P-5A ☐, P-11 ☐, P-11A ☐, P-14 ☐, P-14A ☐, P-29 ☐, P-29A ☐ MOUNTING: WALL ☐, PANEL ☐

CONTENTS: CORROSIVE ☐, NONCORROSIVE ☐ TUBING LENGTH TO INDICATOR _____

DIAL CALIBRATION: GALLONS ☐, LITERS ☐, FEET AND INCHES ☐, OTHER _____

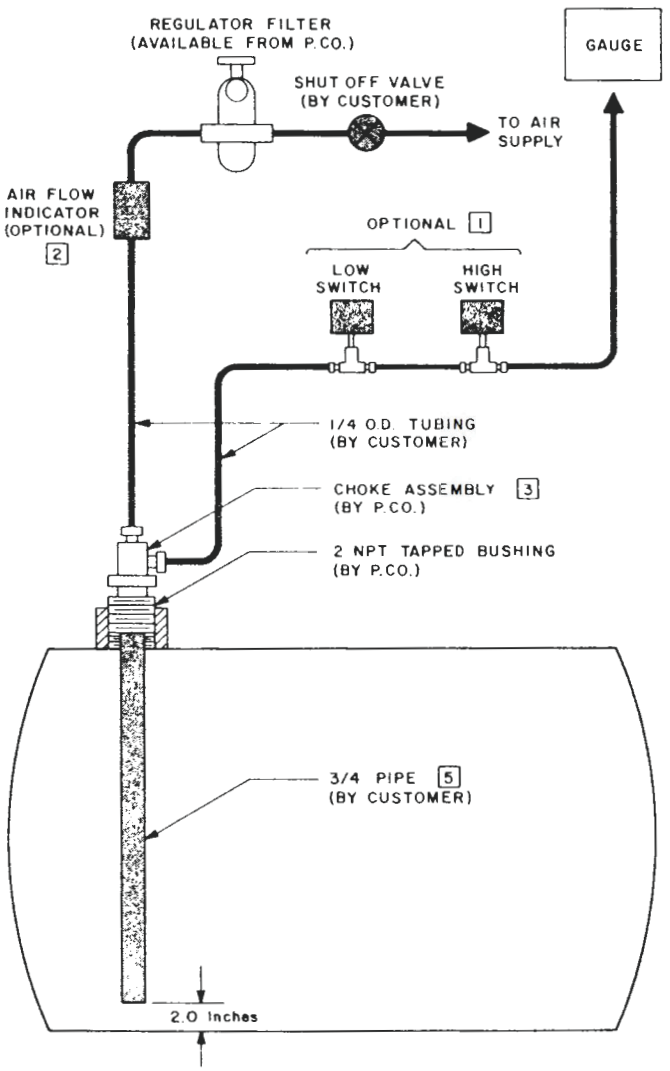
CONSTANT AIR SWITCH: LOW ☐, HIGH ☐ AIR FLOW INDICATOR: _____ REGULATOR FILTER: _____ ALARM: _____

"REQUIRED TANK INFORMATION"

TANK TYPE (STEEL OR FIBERGLASS)		HORIZONTAL OR VERTICAL TANK	
TANK MANUFACTURER		OVERALL LENGTH OUTSIDE	
TANK MODEL (MANUFACTURERS Nº.)		INSIDE DIAMETER	
CAPACITY (ACTUAL)		TYPE OF ENDS	
TANK CONTENTS		SPECIFIC GRAVITY	

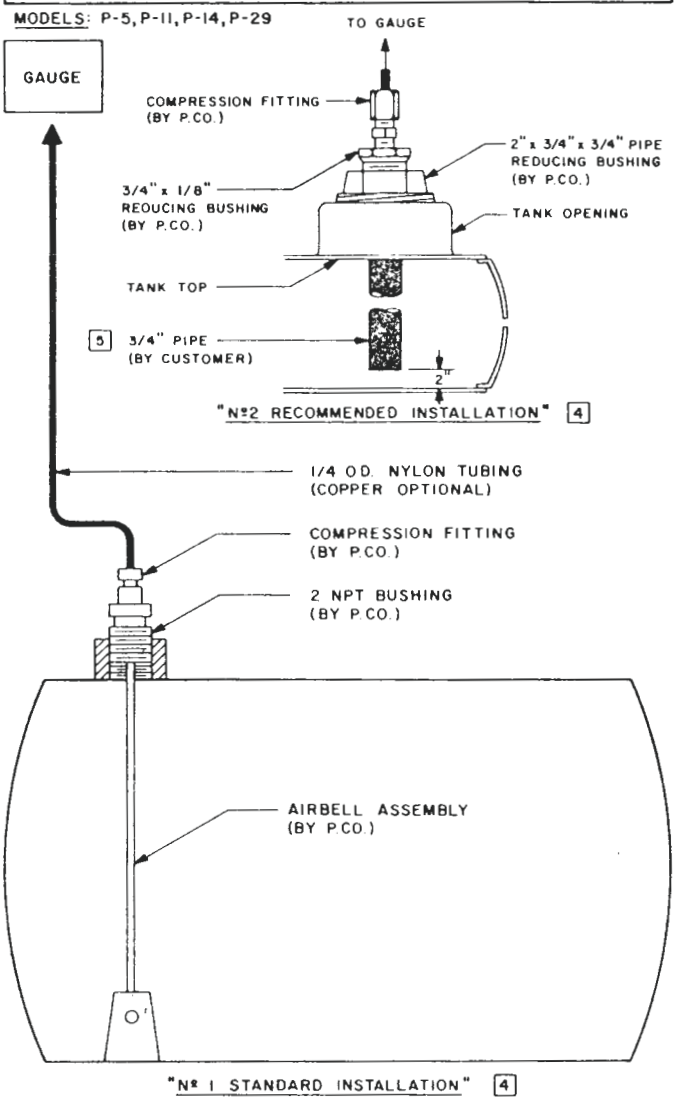
"CONSTANT AIR TYPE-"

MODELS: P-5A, P-11A, P-14A, P-29A



"HAND PUMP TYPE"

MODELS: P-5, P-11, P-14, P-29



NOTES:

1 – 1.) SWITCHES ARE OPTIONAL AND WILL BE FACTORY SET TO OPERATE AT LEVEL SPECIFIED BY CUSTOMER.

2 – 2.) AIR FLOW INDICATOR OPTIONAL - PROVIDES VISUAL INDICATION OF AIR FLOW THROUGH SYSTEM.

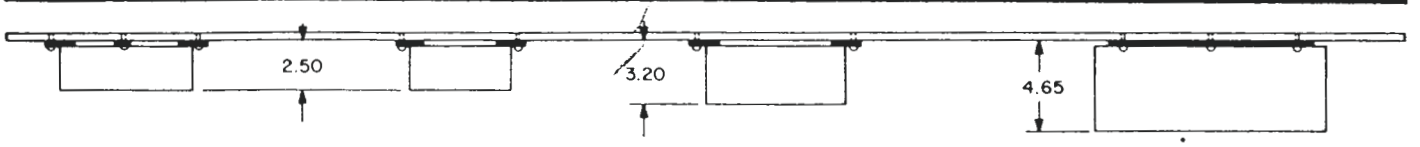
3.) ALL SYSTEM COMPONENTS ARE SUPPLIED WITH FITTINGS TO ACCEPT 1/4 O.D. TUBING.

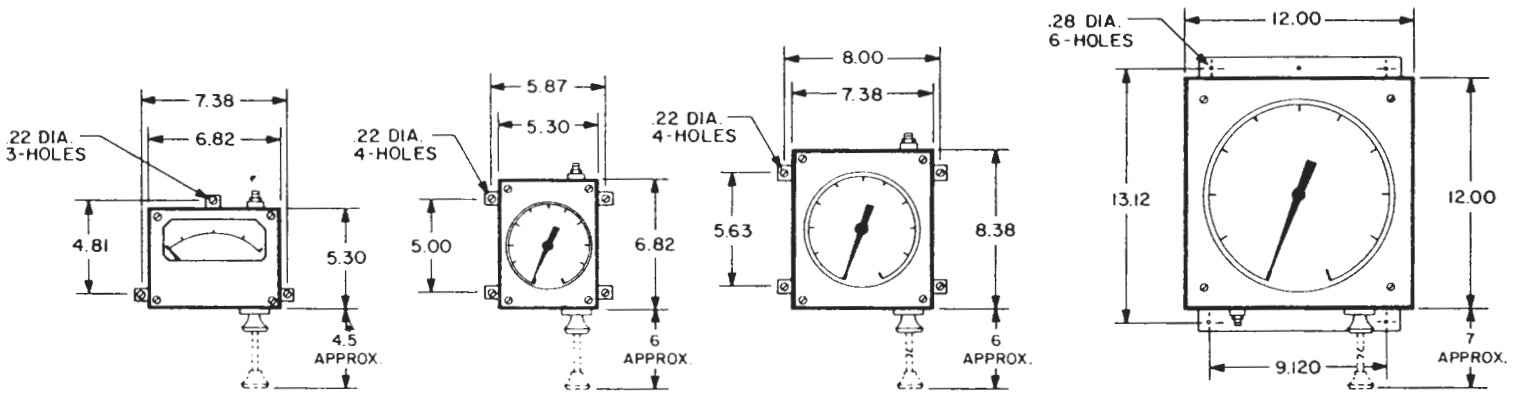
3 – 4.) IN ROUTING LINES, AVOID (AS MUCH AS POSSIBLE) BENDS OR DIPS THAT WOULD ACT AS MOISTURE TRAPS. WHERE THEY CANNOT BE AVOIDED, IT IS SUGGESTED THAT CONDENSATE TRAPS BE INSTALLED.

4 – 5.) USE Nº1 INSTALLATION FOR TANKS UP TO 10'-6" IN DIAMETER. USE Nº2 INSTALLATION FOR TANKS OVER 10'-6" IN DIAMETER AND FOR Nº 6 OIL.

5 – 6.) FOR CORROSIVE LIQUIDS, USE STAINLESS STEEL OR P.V.C. PIPING.

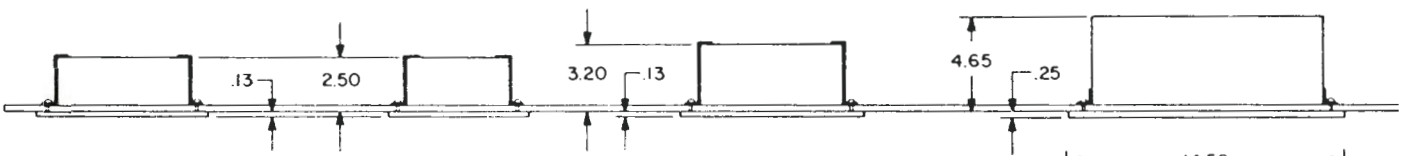
WALL MOUNT

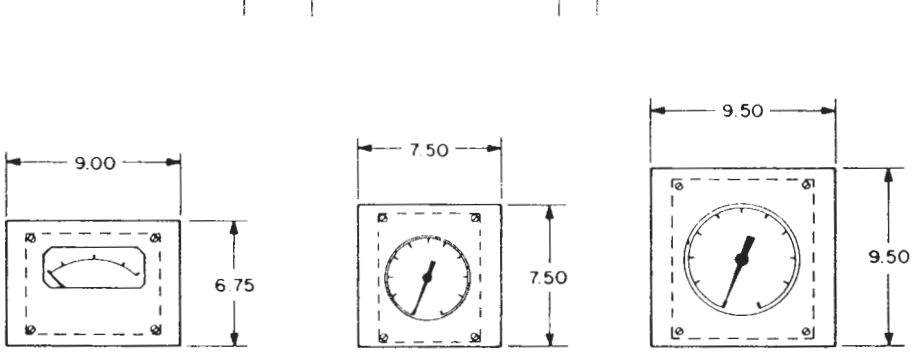




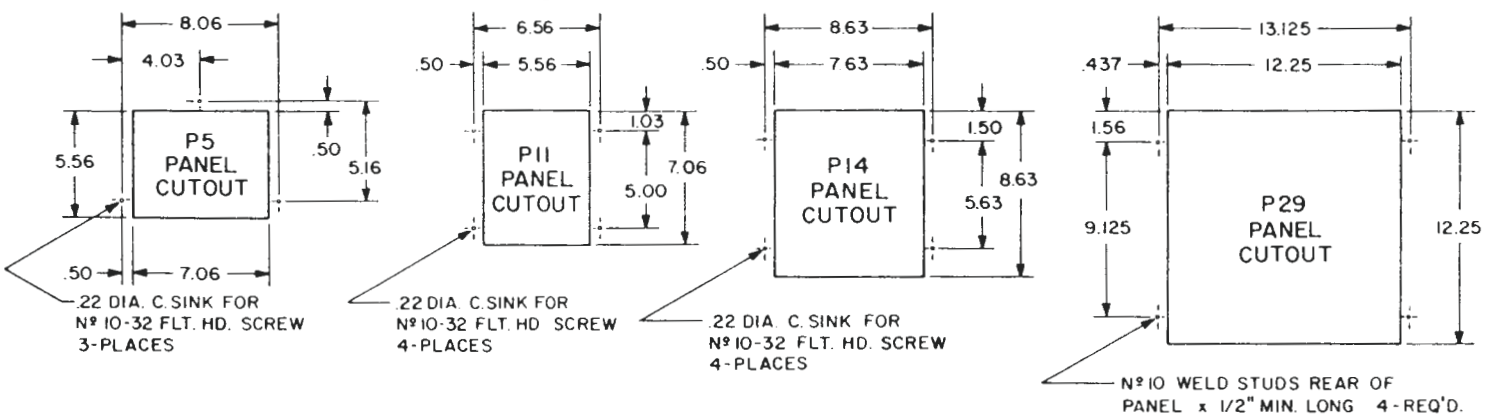
P5 P11 P14 P29

PANEL MOUNT





P5 P11 P14 P29



PNEUMERCATOR
120 FINN COURT, FARMINGDALE, N.Y. 11735
(516) 293-8450

DISTRIBUTED BY:

PNEUMERCATOR HYDROSTATIC GAGES

Instructions for Installation and Adjustment

Model P-5 Tank Gage

1. OPERATING PRINCIPLE

1.1 The Pneumercator Tank Gauge is designed to provide remote indication of the contents of storage tanks containing non-corrosive liquids. Operation of the built-in pump forces air through the connecting tubing until it escapes from the air bell opening located 2" above the bottom of the tank. The hydrostatic head of the liquid above this point determines the air pressure in the system and thus the position of the pointer on the scale.

1.2 This gauge should not be used on unvented tanks, for corrosive liquids or on tanks whose diameter and capacity vary from those shown on the dial.

1.3 Each time a reading is desired the pump should be operated until all liquid has been purged from the tubing and the pointer returns to the same spot between successive strokes.

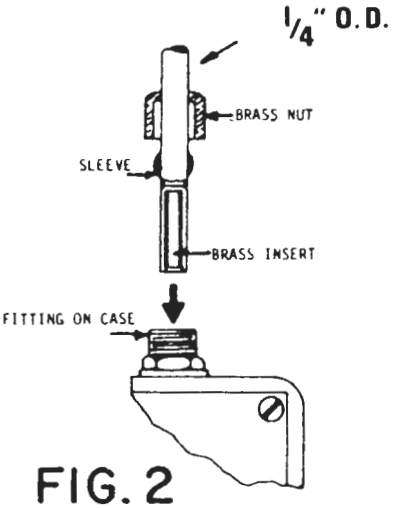


FIG. 2

2. INSTALLATION

2.1 Mount the gauge securely on a wall in a location where it will be both visible and accessible.

2.2 Lower the air bell through the tank opening until it rests on the bottom. Screw in the reducing bushing and compression fitting taking the slack from the tubing inside the tank before tightening but making sure the air bell remains on the bottom. Run the tubing to the gauge being careful that it does not become distorted or plugged. It is desirable to have the tubing drain from the gauge to the tank, avoiding low spots or pockets where moisture can collect. Buried tubing can be protected by taping it to the underside of the oil suction pipe.

2.3 Before tubing is attached to gauge make sure the pointer is exactly on the first mark (empty position) on the dial. If it is necessary to zero the pointer, remove cover from the gauge, slightly loosen the red adjusting screw and tap the mechanism as shown in Fig. 1. Be sure to tighten the red adjusting screw before replacing the cover.

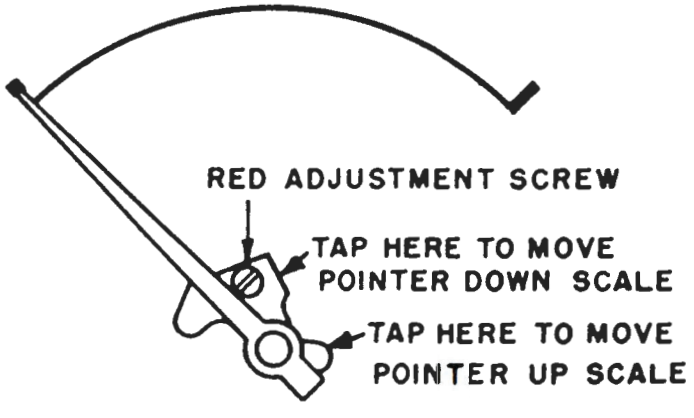


FIG. 1

2.4 Cut off any excess tubing. Install the brass insert into end of tubing, slip first brass nut then sleeve over the tubing as shown in Fig. 2. Insert tubing into fitting on gauge, slide sleeve and brass nut down and fasten tubing securely to gauge.

3. TROUBLE SHOOTING

3.1 If the pointer oscillates between pump strokes and gradually comes to rest, check for a liquid accumulation in a low pocket of the tubing.

3.2 If the pointer remains on "Empty" while the pump is operated, make sure there is liquid in the tank, check for a leaking connection between tubing and gauge, check for damaged tubing and check that the air bell is on the bottom of the tank.

3.3 If the tank is partly empty and the pointer remains on "Full" between strokes of the pump, check for an obstruction in the tubing or crushed tubing.

3.4 It is possible to localize malfunctions in the tank and transmission assembly or in the gauge by disconnecting the tubing from the gauge. Place the thumb over the tubing connection and operate the pump to observe for normal pointer travel.

3.5 If the pointer does not return to "Empty" after the tubing has been disconnected, rezero the gauge by following the procedure described in par. 2.3.

3.6 Additional repair or replacement of gauge parts in the field is not recommended. Return the gauge directly to the factory and attach a letter with your name, address and description of the trouble encountered.

4. CAUTION

4.1 Do not use detergents, solvents, paint thinners, lighter fluids or chemical cleaning compounds to clean the gauge. Use only a damp, soft cloth and a mild soap.

ADJUSTMENT INSTRUCTIONS FOR P-11 AND P-14

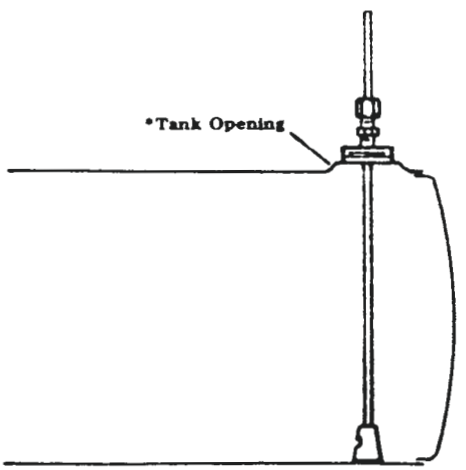
These gages are calibrated and adjusted at the factory specifically for the tanks on which they are to be installed. Actually, no further adjustment should be required but due to minor variations in tank diameter it may be necessary to re-position the pointer to the empty position. This is accomplished as follows:

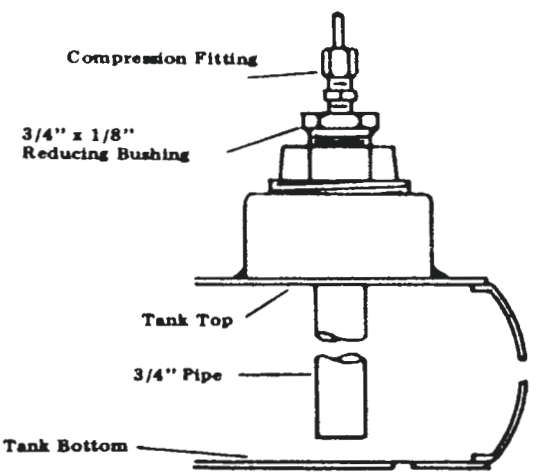
1. Loosen compression nut which secures the tubing to the fitting on top of the gage. This vents the system which is necessary before any adjustment is made.
2. Remove 4 cover screws and cover.
3. The pointer is held to the hub by 2 – #1–72 screws. Loosen each crew slightly.
4. Re-position the pointer so that the pointer tip is in the center of the large increment representing the empty position.
5. Tighten the 1–72 screws and re-check the pointer position.
6. Replace cover and compression nut on top of gage.

NOTE: If inaccurate gage readings are observed after the pointer has been re-positioned to the empty mark, the following procedure is suggested:

(a) Make certain the air bell is on the bottom of the tank.
(b) Check tank diameter and compare with the tank diameter specified on the purchase order.
(c) Check specific gravity or grade of fuel oil.

If (b) or (c) is found to show any appreciable difference the gage must be returned to the factory with new information.





PNEUMERCATOR CO., INC.
120 FINN COURT, FARMINGDALE, N.Y. 11735

COUNTY OF ORANGE
HEALTH CARE AGENCY

TOM URAM
DIRECTOR

L. REX EHLING, M.D.
HEALTH OFFICER

1725 WEST 17TH STREET
SANTA ANA, CA 92706

TELEPHONE: 714/834-7601

MAILING ADDRESS: P.O. BOX 355
SANTA ANA, CA 92702

PUBLIC HEALTH AND MEDICAL SERVICES
ENVIRONMENTAL HEALTH

Job phone: (714) 643-1034

APPLICATION FOR: (Check One)

- [X] PERMIT TO OPERATE/INSTALLATION (COMPLETE PAGE 1 & 2)
- [✓] FACILITY MODIFICATION (COMPLETE PAGE 1)

DATE 20 May 1988

FACILITY INFORMATION

NAME CHET HOLIFIELD FEDERAL BUILDING

STREET ADDRESS 24000 Avila Rd.

CITY Laguna Niguel, 92656

TOTAL NUMBER OF TANKS (AFTER INSTALLATION/REMOVAL) AT THIS LOCATION _____

TYPE OF BUSINESS
- ____ GASOLINE STATION
- ____ FARM
- [✓] GOVERNMENT
- ____ OTHER

DEPTH TO FIRST GROUNDWATER _____ FT.

TYPE OF CONSTRUCTION

INDICATE NO. OF TANK(S)

- 1 INSTALLATION(S) (COMPLETE PAGE 2)
- ____ REPAIR(S)/RELINE(S)
- ____ CLOSURE(S)/REMOVAL(S)
- ____ SYSTEM MODIFICATION (E.G., REPIPE)
- [✓] OTHER (SPECIFY) F.M.A.

TANK OWNER

NAME (CORP., INDIVIDUAL, PUBLIC AGENCY) FEDERAL GOVERNMENT GENERAL SERVICES ADM Region 9

STREET ADDRESS 525 Market St.

MAILING ADDRESS 525 Market St.

CITY San Francisco

STATE California ZIP 94105

PHONE NO. _____

24 HOUR EMERGENCY CONTACT PERSON

DAYS _____ NAME _____ TELEPHONE

NIGHTS _____ NAME _____ TELEPHONE

APPLICANT

NAME DARLENE R. GREGORY (PLEASE PRINT)

SIGNATURE Darlene R. Gregory

COMPANY NAME B & L Hydraulic Hoist Co

PHONE NO. (213) 630-1669

FACILITY OPERATOR (CONTACT PERSON)

NAME _____

BUSINESS PHONE NO. _____

NOTE: NEW INSTALLATIONS, CLOSURES, REPAIRS AND SYSTEM MODIFICATIONS OF UNDERGROUND STORAGE TANKS REQUIRE THE SUBMITTAL OF (4) SETS OF PLANS TO THIS DIVISION. THESE PLANS MUST BE APPROVED PRIOR TO THE INITIATION OF ANY CONSTRUCTION OR MODIFICATION.

OFFICE USE ONLY

FACILITY PERMIT NO. _____ APPROVAL DATE _____ BY _____

PLAN CHECK NO. 88-349 FEES: PLAN CHECK 412.00 EMPLOYEE NO. _____

USD 79256 ck # 1298

TANK INFORMATION

I.

TANK I. D.			#1	#2	#3	#4
MATERIALS STORED	IF MOTOR VEHICLE FUEL, PLEASE SPECIFY THE GRADE	PROPOSED	UNLEADED			
		CURRENTLY	N/A			
	CAS NO. (IF TRADE SECRET, PLEASE STATE)		N/A			
CONTAINER	TYPE (TANK, SUMP, OTHERS)		TANK			
	DOUBLE WALL/SINGLE WALL		DOUBLE WALL			
	YEAR MANUFACTURED/INSTALLED		1988			
	VAULTED/NOT VAULTED		NOT VAULTED			
	PRIMARY	MANUFACTURER	OWENS CORNING			
		CAPACITY (GALLON)	4,000			
		CONSTRUCTION MATERIAL	Fiberglass			
		THICKNESS (UNITS)	3/8"			
		LINING/COATING (EXTERIOR/INTERIOR)	N/A			
	SECONDARY	MANUFACTURER	OWENS CORNING			
		CAPACITY (GALLON)	4,000			
		CONSTRUCTION MATERIAL	FIBERGLASS			
		THICKNESS (UNITS)	3/8"			
		LINING/COATING (EXTERIOR/INTERIOR)	N/A			
	TYPE OF LEAK DETECTION AND MANUFACTURER		HYDROSTATIC OWENS CORNING			
PIPING	LOCATION (UNDER/ABOVE GROUND)		UNDER GROUND			
	SUCTION/PRESSURE/ GRAVITY/UNKNOWN		SUCTION			
	PRIMARY	CONSTRUCTION MATERIAL	SCH 40 BLACK STEEL			
		MANUFACTURER	VOSS			
	SECONDARY	CONSTRUCTION MATERIAL	FIBERGLASS			
		MANUFACTURER	A.O. SMITH			
	TYPE OF LEAK DETECTION AND MANUFACTURER		[illegible] OWENS CORNING	SENSOR	HERSEY - TANK GAUGE FLOAT VENT VALVE (V/R) OVERFILL	
OVERFILL/SPILL CONTAINMENT, PROTECTION (TYPE)			POMECO III VE SPILL CONTAINMENT			
FOR TANKS INSTALLED PRIOR TO 1/1/84 SPECIFY THE MONITORING SYSTEM						

II. ATTACH A DIAGRAM (8 1/2'' X 11'') INCLUDE THE LOCATIONS OF THE UNDERGROUND STORAGE TANK(S), PIPING, AUXILIARY EQUIPMENT, BUILDINGS AND OTHER LANDMARKS.

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3600

ACCOUNT NUMBER:	3918

FILE NUMBER : 006723

DATE:	22 MAR 01

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 216081

PAYMENT DUE	BILLING	FROM	TO
23 APR 2001	PERIOD	01 JAN 2001	31 DEC 2001

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE MANAGEMENT PROGRAM FEE	EMP	0 TO 10	298.00
TIERED PERMIT - ONSITE TREATMENT			0.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Tier Permitting Program.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the [illegible] after the due date.

Or Payment made pr

3918
HSO 168508 BATCH 11074
04/13/01 INV# 216081
CHECK# 1027 298.00

TOTAL DUE	298.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9 1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3696

ACCOUNT NUMBER: 3918

FILE NUMBER : 00672

DATE: 29 JUN 0

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 197612

PAYMENT DUE	BILLING	FROM	TO
31 JUL 2000	PERIOD	01 JAN 2000	31 DEC 2000

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE MANAGEMENT PROGRAM FEE	EMP	0 TO 10	298.00
TIERED PERMIT ~ ONSITE TREATMENT			0.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Tier Permitting Program.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

3918
HSO 163311 BATCH 9263
07/12/00 INV# 197612
CHECK# 7051 298.00

TOTAL DUE 298.00

MAKE CHECKS PAYABLE TO ((((COUNTY OF ORANGE, AUDITOR CONTROLLER))))

F272-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3696

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 21 JAN 99

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 173190

PAYMENT DUE	BILLING	FROM	TO
22 FEB 1999	PERIOD	01 JAN 1999	31 DEC 1999

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE HEALTH SERVICES FEE	EMP	0 TO 10	231.00
HAZARDOUS MATERIALS PROGRAM OFFICE FEE	EMP	0 TO 10	61.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Hazardous Materials Program Office.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

3918
HSO 155218 BATCH 7332
02/10/99 INV# 173190
CHECK# 6159 292.00

TOTAL DUE 292.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

FO 272-9.1521

1213

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3696

ACCOUNT NUMBER: 30*999*3918

FILE NUMBER : 6723

DATE: 14 DEC 98

BILL TO:	COMPANY ADDRESS:
VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677	VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677-3908

INVOICE NUMBER: 170484

PAYMENT DUE	BILLING	FROM	TO
15 JAN 1999	PERIOD	01 JAN 1998	31 DEC 1998

	UNIT	QUANTITY	AMOUNT
STATE SERVICE CHARGE ASSESSMENT			
Base Fee	10.00	FLAT FEE	10.00

This State service charge is assessed to industries which generate or handle hazardous materials and/or hazardous wastes. The service charge supports State activities to ensure consistent and effective statewide implementation of the Unified Program. Please refer to the enclosed letter and fact sheet which will further explain the functions of the Unified Program and the service charge.

If there has been a change in ownership, please return this invoice with the new owner's name and mailing address.

Please retain one copy of this invoice for your records and return the original with your payment.

NON-PAYMENT OF FEES MAY CONSTITUTE REVOCATION OF PERMITS

0*999*3918
SO 154758 BATCH 7149
1/15/99 INV# 170484
CHECK# 6124 10 00

TOTAL DUE 10.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

FO 272-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3600

ACCOUNT NUMBER: 3918

FILE NUMBER : #06723

DATE: 26 JAN 98

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 151896

PAYMENT DUE	BILLING	FROM	TO
27 FEB 1998	PERIOD	#1 JAN 1998	31 DEC 1998

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE HEALTH SERVICES FEE	EMP	# TO 1#	231.00
HAZARDOUS MATERIALS PROGRAM OFFICE FEE	EMP	# TO 1#	61.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Hazardous Materials Program Office.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

3918
HSO 148795 BATCH 5692
02/25/98 INV# 151896
CHECK# 5823 292.00

TOTAL DUE 292.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

1315-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3600

ACCOUNT NUMBER: 30*999*3918

FILE NUMBER : 006723

DATE: 03 NOV 97

BILL TO:	COMPANY ADDRESS:
VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL CA 92677-3908	VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677-3908

INVOICE NUMBER: 147400

PAYMENT DUE	BILLING	FROM	TO
05 DEC 1997	PERIOD	01 JAN 1997	31 DEC 1997

	UNIT	QUANTITY	AMOUNT
STATE SERVICE CHARGE ASSESSMENT			
Base Fee	18.50	FLAT FEE	18.50

This Fiscal Year 1996/97 State service charge is assessed to industries which generate or handle hazardous materials and/or hazardous wastes. The service charge supports State activities to ensure consistent and effective statewide implementation of the Unified Program. Please refer to the enclosed letter and fact sheet which will further explain the functions of the Unified Program and the service charge.

If there has been a change in ownership, please return this invoice with the new owner's name and mailing address.

Please retain one copy of this invoice for your records and return the original with your payment.

NON-PAYMENT OF FEES MAY CONSTITUTE REVOCATION OF PERMITS

30*999*3918
HSO 147298 BATCH 5207
12/01/97 INV# 147400
CHECK# 5722 18.50

TOTAL DUE	18.50

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

FO 272-9.1521
3935

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 02 JAN 97

BILL TO:	COMPANY ADDRESS:
VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677	VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 130549

PAYMENT DUE	BILLING	FROM	TO
03 FEB 1997	PERIOD	01 JAN 1997	31 DEC 1997

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE HEALTH SERVICES FEE	EMP	0 TO 10	231.00
HAZARDOUS MATERIALS PROGRAM OFFICE FEE	EMP	0 TO 10	61.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Hazardous materials Program Office.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

PAID
JAN 24 1997
BATCH # 141599
CHECK # 5225 INTL.

TOTAL DUE 292.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

FO 272-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3700

ACCOUNT NUMBER: 391

FILE NUMBER : 0067

DATE: 04 JAN 96

BILL TO:	COMPANY ADDRESS:
VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677	VILLAGE 1 HOUR CLEANERS 23984 ALISO CREEK RD LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 122227

PAYMENT DUE	BILLING	FROM	TO
05 FEB 1996	PERIOD	01 JAN 1996	31 DEC 1996

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE HEALTH SERVICES FEE	EMP	1 TO 10	231.00
HAZARDOUS MATERIALS PROGRAM OFFICE FEE	EMP	1 TO 10	61.00

Please refer to the enclosed letter which will explain the functions of the Hazardous Waste Program and the Hazardous Materials Program Office.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy for your records and return original with payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

PAID
FEB 06 1996
BATCH # 136062
CHECK # 2191

TOTAL DUE 292.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER)))

FO 272-9.1521
1546

ange County Health Care Agency
Environmental Health Division
2009 E. Edinger, Santa Ana, CA 92705
Telephone (714) 667-3700

PRELIMINARY INVESTIGATION REQUEST

Account No. 3918 Active: ☒ Yes ☐ No IR#/TI# 95IR 265
File No. 006723 Received By: BS / TA
Date Received: 10-4-95

Requested By: OCFD MARIO MACK
Name

Street Address

City Zip 854-7549
Phone Number

Regarding: VILLAGE 1HR. CLEANERS Howard Yang
Company Name/Location

24022 ALISO CREEK
Street Address

CALIVNA NIGUEL 92677 UNK
City Zip Phone Number

Nearest Cross Streets: ALISO CREEK / LA PAZ 95-1-G1
Map Coordinates

Nature of Complaint/Request: [8] (1) DRUM OF PERC SLUDGE TIPPED OVER IN BACK ALLEYWAY RELEASING 1-2 GALLONS OF WASTE PERC SLUDGE TO THE PARKING LOT. OCFD RESPONDED & CLEANED UP WITH ABSORBANT. SOLIDIFIED/DRUMMED WASTE LEFT ON SITE. REQUEST HCA OVERSEE DISPOSAL.

(REFER TO 95EI 126 FOR EI DETAILS)

Date	Staff	Activities/Comments
10-6-95		Received ~~complete~~ investigation from K. Baity. Called Mr. Yang & was on site. Approx. 20 gallons of waste perc will be picked up by AAD next week.
10-10-95		Spoke to Mr. Yang about disposal of waste.
10-17-95		Spoke to employee who stated that Mr. Yang has heart problems and will be out for 2 weeks.
11-6-95		Spoke to Mr. Yang who explained that the waste had been picked up by A.A.D on 11-1-95. Reviewed invoice on site this date. No violations noted. Case closed

Use Blank Attachments if Needed

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 13 JAN 95

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 113847

PAYMENT DUE	BILLING	FROM	TO
14 FEB 95	PERIOD	01 JAN 95	31 DEC 95

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE HEALTH SERVICES FEE	EMP	0 TO 10	231.00
HAZARDOUS MATERIALS PROGRAM OFFICE FEE	EMP	0 TO 10	61.00

Effective January, 1995 the Hazardous Materials Program Office will be transferred from the County Fire Department to the County Health Care Agency. In an effort to reduce costs, the fees are now consolidated into one invoice. Please refer to the enclosed letter which will explain the functions of the two programs.

All fees have been established by the Orange County Board of Supervisors to recover costs to operate the Programs.

Retain one copy of this invoice for your records and return the original with your payment.

****PLEASE NOTE: Timely payment of this invoice will avoid a late charge of 25% being added to the invoice 32 days after the due date. We recommend that disputes be resolved or payment made prior to that date to avoid the late fee.

PAID
FEB 24 1995
BATCH # 130770
CHECK # ____ INIT.

4952

TOTAL DUE 292.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521
1646

COUNTY OF ORANGE
FIRE DEPARTMENT
HAZARDOUS MATERIALS
PROGRAM OFFICE

2009 E. EDINGER SANTA ANA, CA 92705 (714)289-7430

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 04 JAN 94

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 104590

PAYMENT DUE	BILLING	FROM	TO
05 FEB 94	PERIOD	01 JAN 94	31 DEC 94

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE MANAGEMENT FEE	EMP	0 TO 10	61.00

This is your Hazardous Waste Management Fee for calendar year 1994. The fee, which was authorized by the Board of Supervisors per resolution 92-676 per Health and Safety Code Section 510, has been assessed to industries which generate hazardous waste.

Retain one copy for your records and return original with payment.

NOTE: A late charge of 25% will be added if not paid by the due date

PAID
JAN 27 1994
BATCH # 2881
CHECK # 1406 INTL.

TOTAL DUE	61.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92705 (714)667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 04 JAN 94

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 98358

PAYMENT DUE	BILLING	FROM	TO
05 FEB 94	PERIOD	01 JAN 94	31 DEC 94

	UNIT	QUANTITY	AMOUNT
HEALTH SERVICES FEE	EMP	0 TO 10	231.00

This is your Health Services Fee for the Hazardous Waste Program for calendar year 1994. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous waste.

Retain one copy for your records and return original with your payment.

NOTE: A late charge of 25% will be added if not paid by the due date

PAID
JAN 27 1994
BATCH # 2281
CHECK # 4406 INTL. DJ

TOTAL DUE 231.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521

COUNTY OF ORANGE
FIRE DEPARTMENT
HAZARDOUS MATERIALS
PROGRAM OFFICE

2009 E. EDINGER SANTA ANA, CA 92702 (714)667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 28 DEC 9

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 88701

PAYMENT DUE	BILLING	FROM	TO
29 JAN 93	PERIOD	01 JAN 93	31 DEC 93

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE MANAGEMENT FEE	EMP	0 TO 10	61.00

This is your Hazardous Waste Management Fee for calendar year 1993. The fee, which was authorized by the Board of Supervisors per resolution 92-676 per Health and Safety Code Section 510, has been assessed to industries which generate hazardous waste.

A late charge of 25% will be added if not paid by due date.

Retain one copy for your records and return original with payment.

PAID
FEB 22 1993
BATCH # 2548
CHECK # ____ INTL.

3955

TOTAL DUE 61.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521

1951

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

2009 E. EDINGER SANTA ANA, CA 92702 (714)667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 006723

DATE: 28 DEC 92

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 82561

PAYMENT DUE	BILLING	FROM	TO
29 JAN 93	PERIOD	01 JAN 93	31 DEC 93

	UNIT	QUANTITY	AMOUNT
HEALTH SERVICES FEE	EMP	0 TO 10	231.00

This is your Health Services Fee for the Hazardous Waste Program for calendar year 1993. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous wastes.

A late charge of 25% will be added if not paid by due date.

Retain one copy for your records and return original with payment.

PAID
FEB 22 1993
BATCH # 2548
CHECK # ____ INTL.

3955

TOTAL DUE 231.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521

1951

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

P.O. BOX 355 SANTA ANA,CA. 92702 (714)834-8174

ACCOUNT NUMBER: 3918

DATE: 01 APR 89

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

006723

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 20841

PAYMENT DUE	BILLING	FROM	TO
03 MAY 89	PERIOD	01 JAN 89	31 DEC 89

HEALTH SERVICES FEE	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE	EMP	0 TO 10	179.00

This is your Health Services fee for the Hazardous Waste Program for calendar year 1989. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous wastes.

A late charge of 25% will be added if not paid by date due.

Retain one copy for your records and return original with payment.

PAID
MAY 09 1989
BATCH# 518
CHECK# 2363 CASH:

TOTAL DUE 179.

MAKE CHECKS PAYABLE TO <<< ORANGE COUNTY HEALTH CARE AGENCY >>>

FO 272-9.1521
2525

COUNTY OF ORANGE
FIRE DEPARTMENT
HAZARDOUS MATERIALS
PROGRAM OFFICE

P.O. BOX 355 SANTA ANA, CA 92702 (714) 744-0543

ACCOUNT NUMBER: 3910

FILE NUMBER : 006723

DATE: 27 DEC 91

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 71637

PAYMENT DUE	BILLING	FROM	TO
28 JAN 92	PERIOD	01 JAN 92	31 DEC 92

	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE MANAGEMENT FEE	EMP	0 TO 10	49.00

This is your Hazardous Waste Management Fee for calendar year 1992. The fee, which was authorized by the Board of Supervisors per Health and Safety Code Section 510, has been assessed to industries which generate hazardous waste.

Retain one copy of your records and return original with payment.

A late charge of 25% will be added if not paid by due date.

PAID
JAN 30 1992
BATCH # 1950
CHECK # 3498 INIT.

TOTAL DUE 49.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-81521

2193

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

P.O. BOX 355 SANTA ANA, CA 92702 (714) 667-3700

ACCOUNT NUMBER: 3918

FILE NUMBER : 00672

DATE: 27 DEC 91

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 68421

PAYMENT DUE	BILLING	FROM	TO
28 JAN 92	PERIOD	01 JAN 92	31 DEC 92

	UNIT	QUANTITY	AMOUNT
HEALTH SERVICES FEE	EMP	0 TO 10	231.00

This is your Health Services Fee for the Hazardous Waste Program for calendar year 1992. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous wastes.

Retain one copy for your records and return original with payment.

A late charge of 25% will be added if not paid by due date.

PAID
JAN 30 1992
BATCH # 1950
CHECK # _____ INIT. _____

3498

TOTAL DUE 231.00

MAKE CHECKS PAYABLE TO ((COUNTY OF ORANGE, AUDITOR CONTROLLER))

FO 272-9.1521
47A3

COUNTY OF O[redacted]GE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

P.O. BOX 355 SANTA ANA, CA 92702 (714) 667-3700

[redacted]CCOUNT NUMBER: 3918

006723

DATE: 07 JAN 91

BILL TO:	

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 49692

PAYMENT DUE	BILLING	FROM	TO
08 FEB 91	PERIOD	01 JAN 91	31 DEC 91

HEALTH SERVICES FEE	UNIT	QUANTITY	AMOUNT
	EMP	0 TO 10	221.00

This is your Health Services fee for the Hazardous Waste Program for calendar year 1991. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous wastes.

A late charge of 25% will be added if not paid by due date.

Retain one copy for your records and return original with payment.

PAID
JAN 29 1991
BATCH # 1480
CHECK # 3089

TOTAL DUE	221.00

MAKE CHECKS PAYABLE TO (((COUNTY OF ORANGE, AUDITOR CONTROLLER

FO 272-9.1521

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

P.O. BOX 355 SANTA ANA, CA. 92702 (714)834-8175

ACCOUNT NO.	3918

DATE	14 JAN 87

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK
LAGUNA NIGUEL, CA 92677

#006723

INVOICE NUMBER 2197

PAYMENT DUE	BILLING	FROM	TO
15 FEB 87	PERIOD	15 JAN 87	14 JAN 88

HEALTH SERVICES FEE	UNIT	QUANITY	AMOUNT
HAZARDOUS WASTE PROGRAM	EMP	Ø TO 5	159.ØØ

PAID
JAN 30 1987
BATCH# 042-HW
CHECK# 325 CASH

A late charge of 25% will be added if not paid by date due.

Retain one copy for your records and return original with payment.

TOTAL DUE	159.ØØ

<<<MAKE CHECKS PAYABLE TO ORANGE COUNTY HEALTH CARE AGENCY>>>

FO 272-9.1521

COUNTY OF ORANGE
FIRE DEPARTMENT
HAZARDOUS MATERIALS
PROGRAM OFFICE
P.O. BOX 355 SANTA ANA, CA 92702 (714) 744-0543

ACCOUNT NUMBER: 3918

006723

DATE: 07 JAN 91

BILL TO:	

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 59699

PAYMENT DUE	BILLING	FROM	TO
08 FEB 91	PERIOD	01 JAN 91	31 DEC 91

HAZARDOUS WASTE MANAGEMENT FEE	UNIT	QUANTITY	AMOUNT
	EMP	0 TO 10	46.00

This is your Hazardous Waste Management fee for calendar year 1991. The fee, which was authorized by the Board of Supervisors per resolution 90-1529 per Health and Safety Code Section 510, has been assessed to industries which generate hazardous waste.

A late charge of 25% will be added if not paid by due date.

Retain one copy of your records and return original with payment.

PAID
JAN 29 1991
BATCH # 1480

CHECK # 3089 INTL.

TOTAL DUE	46.00

MAKE CHECKS PAYABLE TO (COUNTY OF ORANGE, AUDITOR CONTROLLER)

FO 272-9.1521

2288

COUNTY OF ORANGE
HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

P.O. BOX 355 SANTA ANA,CA. 92702 (714)834-8175

ACCOUNT NO. 3918

DATE 05 FEB 88

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER 13005

PAYMENT DUE	BILLING	FROM	TO
08 MAR 88	PERIOD	01 JAN 88	31 DEC 88

HEALTH SERVICES FEE	UNIT	QUANTITY	AMOUNT
HAZARDOUS WASTE PROGRAM	EMP	0 TO 5	165.00

This is your Health Services fee for the Hazardous Waste Program for calendar year 1988. The fee is assessed to industries which generate hazardous waste. The Program and the fees were authorized by the Orange County Board of Supervisors to regulate the storage and disposal of hazardous wastes.

A late charge of 25% will be added if not paid by date due.

Retain one copy for your records and return original with payment.

PAID
MAR 2 1988
BATCH# 433-HW
CHECK# 1819 CASH

TOTAL DUE 165.00

<<<MAKE CHECKS PAYABLE TO ORANGE COUNTY HEALTH CARE AGENCY>>>

FO 272-8.1521

COUNTY OF ORANGE
HAZARDOUS MATERIALS PROGRAM OFFICE
AUDITOR CONTROLLER
P.O. BOX 355, SANTA ANA, CA. 92702

ACCOUNT NUMBER: 3918

DATE: 01 APR 89

BILL TO:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

COMPANY ADDRESS:

VILLAGE 1 HOUR CLEANERS
23984 ALISO CREEK RD
LAGUNA NIGUEL, CA 92677

INVOICE NUMBER: 25575

PAYMENT DUE	BILLING	FROM	TO
03 MAY 89	PERIOD	01 JAN 89	31 DEC 89

ORANGE COUNTY FIRE DEPARTMENT	UNIT	QUANTITY	AMOUNT	
HAZARDOUS WASTE MANAGEMENT FEE	EMP	0 TO 10	37	00

This is your Hazardous Waste Management fee for calendar year 1989. The fee, which was authorized by the Board of Supervisors per Resolution 89-322 per Health and Safety Code Section 510, has been assessed to industries which generate hazardous waste.

If you have any questions regarding this fee please contact the Hazardous Materials Program Office at (714) 744-0543.

A late charge of 25% will be added if not paid by due date.

Retain one copy of your records and return original with payment.

PAID
MAY 09 1989
BATCH# 812-HWM
CHECK# 2384 CASH

TOTAL DUE 37.00

MAKE CHECKS PAYABLE TO (COUNTY OF ORANGE, AUDITOR CONTROLLER)

FO 272-9.1521
2525

VILLAGE ONE DRY CLEANERS
15475 JEFFREY RD
SUITE # 125
IRVINE CA 92714

PAID
APR 25 1986
BATCH# 852
CHECK# 2981 CASH ENK

FO 272-9.1521