1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 1-22-02

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 762 N NOGALES
CITY: WALNUT ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER TEL. NO. 626 965-7922
ADDRESS: Same
CITY: ZIP:
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:

SQ. FT. SIZE: 630 | NO. OF STORIES: | NO. OF FAMILIES: | CHECK ONE

DESCRIPTION OF WORK: BUILD A BASEMENT 15' X 42' For Maintenance — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.: LUBE + OIL

APPLICANT (PRINT): DAN GERSTNER TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 479.40 — Permit Fee 591.98
Investigation Fee 3.97 — Issuance Fee 42.40
Total Fee 614.38

BUILDING ADDRESS: 762 N NOGALES
TRACT: MOBIL EXPRESS LUBE
NEAREST CROSS ST.: FRANCESCA
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: 3 PROCESSED BY:
STATISTICAL CLASSIFICATION: APT.: CONDO.:
CLASS NO. 22 DWELL. UNITS 0
SEWER MPA
BK. ___ PG. ___
VALUATION $18,900.00
$
FINAL DATE 11/12/02
BY

VALIDATION

3220 479.40
CASH 479-40
OCT15'02 #5651 CLK1

3240 614.38
CASH 614-38
OCT15'02 #5649 CLK1
3270 3.97
CASH 3-97
OCT15'02 #5650 CLK1

PLANS TO APPLICANT				
To:		Returned		Approved
No.	Date	No.	Date	

Approvals	Required		Date Received or Approved
	Yes	No	
Water Certificate			
Health Department			
Fire Department			
Grading			
Geological			
Pedestrian Protection (Fence) (Canopy)			
Special Inspection (Conc.) (Masonry) (Welding)			
Lot Drainage			
Parking			

Approvals	Date	Inspector's Signature
Location - (Setback & Yards)		
Foundations	6-18-03	FH
Slab	7/24/03	FH
Frame		
Energy Insulation		
Lath/Drywall - Interior		
Lath - Exterior		
House Number - Correct & Posted		
Final - Enter on Front		

INSPECTOR'S NOTES

6/25/03 OK TO GROUT RET WALL FULL HEIGHT. INSPECTION HOLES PROVIDED FH

BLACK INSULATION BARRIER IN TO SET DRAIN LINE 7-3-03 JAB

7/24/03 STEEL COLUMNS BOLTED. OK TO POUR SLAB. FH

9-11-03 UPSTAIRS FLOOR SLAB STEEL. JAB

HU ASSOCIATES, INC.

Geotechnical/Environmental Engineering Consultants
11955 Rivera Road, Santa Fe Springs, CA 90670
Phone: (562) 696-6052, (562) 693-6114 Fax: (562) 698-5771 e-mail: HuAssocInc@aol.com

NOTICE OF FIELD OBSERVATION

Date: 6/18/03 Project No. HA4512-1 Project Name: Gerstner/784 Nogales St

Project Address: 784 Nogales Street, Walnut, CA

Contractor: _____ Superintendent: _____

Preliminary Soil Report By: Hu Associates, Inc. Date: 7/26/01

Description of Work / Remark: Footing Excavations for the proposed basement have been observed and approved per "Foundation Plan prepared by Pineware design and Engineering", undated. Approval Subject to Final Cleanout.

Our observation does not waive the additional observation required by the governing agencies. We make no representation as to accuracy of the dimensions, measurement, calculations and any portion of the design. The scope of our onsite observation service did not include the responsibility of job safety.

Arrival Time: 10:10	Departure Time: 10:40	Total Inspection Time: ½ hr	* Round trip travel time will be added to field observation time
Field Inspector / Engineer: Allen Lee		Received By:	

Sketch:

V. & F. MFG.
5582 Alhambra Avenue
Los Angeles, Calif. 90032
(323) 222-5936 Bus * (323) 222-9554 Fax
License # 388440

[CERTIFICATE OF COMPLIANCE]

DATE: September 17, 2003

NAME: Dan Gerstner

LICENSE STEEL FABRICATOR FOR THE CITY OF LOS ANGELES

LICENSE NUMBER: 1171

WE CERTIFY THAT WE WORKED ON:

2 – W 6 x 25 x 40'3"
2 – W 6 x 25 x 4'
2 – W 6 x 12 x 9'
2 – W 6 x 12 x 7'
1 – Angle 6 x 4 x 5/16 x 40'
8 – Ts Cols 4 x 4 x ¼ x 8'

JOB ADDRESS:

762 Nogales Street
Walnut, Ca.

ALL WELDING WAS DONE AS PER PLANS AND SPECIFICATIONS AT OUR SHOP BY A CERTIFIED WELDER: Gerardo Llamas #P003252

Victor Llamas

VICTOR LLAMAS

CORDERO INSPECTION SERVICES
I.C.B.O. CERTIFIED
P.O. BOX 6863 PICO RIVERA, CA 90661

(24 Hour) : (310) 930-551[illegible]
Fax: (562) 908-5141
PAGER: (213) 313-2798

SPECIAL INSPECTION REPORT

Permit No.	Job Name	Date
5649	LUBE/TUNE	9-11-03

TYPE OF INSPECTION			
☐ Reinforced concrete	☒ WELDING	☒ Quality Control	
☐ Reinforced Masonry	☐ Fire Proofing	☐ Epoxy	
☐ Post Tensioned Concrete	☐ High Strength Bolts	☐ Other	

BUILDING DEPARTMENT: CITY OF WALNUT	Job Address: 762 NOGALES ST.
Owner: DAN GRESTNER (626) 965-7922	Address: 762 NOGALES ST. WALNUT
Contractor	Address
Engineer: ERIC C. AU. PINEWAVE (909) 869-5777	Address: 21015 COMMERCE POINTE DR. WALNUT, CA 91789
Architect: JC DESIGN	Address
Sub contractor: V&F MANUFACTURING	Address

INSPECTION SUMMARY - LOCATIONS OF WORK INSPECTED, TEST SAMPLES TAKEN, WORK REJECTED, JOB PROBLEMS, PROGRESS, REMARKS, ETC. INCLUDES INFORMATION ABOUT - AMOUNTS OF MATERIAL PLACED OR WORK PERFORMED, NUMBER, TYPE & IDENT. NO'S OF TEST SAMPLES TAKEN: STRUCT, CONNECTIONS (WELD MADE H.T. BOLTS TORQUED) CHECKED; ETC.

SEPTEMBER 11, 2003

Completed field welding of the following:

1) 3/4" diameter Nelson studs to top of WF beams at perimeter floor opening.

2) L4x5x3/8" angle brackets welded to bottom flange of WF beams and anchored to wall with 2- 5/8" diameter Hlti Hit Hy-150 epoxy anchors a total of 8 brackets.

3) New C12x20.7 channel door opening frame with 12- 5/8" diameter Hilti Hit Hy-150 epoxy anchors.

Welding was done by AWS certified welder Gerardo :Llamas using E7018 filler metal.

All work was done at new floor pit.

ICBO Special Inspector Structural Steel and Welding ISMAEL CORDERO No. 1010614-85

CERTIFICATE OF COMPLIANCE

I HEREBY CERTIFY THAT I HAVE INSPECTED TO THE BEST OF MY KNOWLEDGE ALL OF THE ABOVE REPORTED WORK UNLESS OTHERWISE NOTED. I HAVE FOUND THIS WORK TO COMPLY WITH THE APPROVED PLANS SPECIFICATIONS, AND APPLICABLE SECTIONS OF THE GOVERNING BUILDING LAWS

INSPECTOR'S NAME: ISMAEL CORDERO 310-930-5515

INSPECTOR SIGNATURE:

LIC. NO: R004188 AGENCY: LA CITY

CONTINUED ON NEXT PAGE ☐ PAGE 1 OF 1

		REG.HOURS	O.T. HOURS	SAMPLES
		8		

All inspections based on a minimum of 4 hours and over 4 hours - 8 hour minimum. in addition, any inspection extending past noon hour will be an 8 hour minimum.

Verified by _____
Project Superintendent

CORDERO INSPECTION SERVICES
I.C.B.O. CERTIFIED
P.O. BOX 6863 PICO RIVERA, CA 90661

(24 Hours) : (310) 930-5515
Fax: (562) 908-5141
PAGER: (213) 313-2798

SPECIAL INSPECTION REPORT

Permit No.	Job Name	Date
5649	LUBE/TUNE	8-19-03

TYPE OF INSPECTION			
☐ Reinforced concrete	☒ WELDING	☒ Quality Control
☐ Reinforced Masonry	☐ Fire Proofing	☒ Epoxy
☐ Post Tensioned Concrete	☐ High Strength Bolts	☐ Other

BUILDING DEPARTMENT: CITY OF WALNUT	Job Address: 762 NOGALES ST.
Owner: DAN GRESTNER (626) 965-7922	Address: 762 NOGALES ST. WALNUT
Contractor	Address
Engineer: ERIC C. AU. PINEWAVE (909) 869-5777	Address: 21015 COMMERCE POINTE DR. WALNUT, CA 91789
Architect: JC DESIGN	Address
Sub contractor: V&F MANUFACTURING	Address

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AUGUST 19, 2003

1) Installation of 5/8" diameter epoxy ledger anchors into existing CMU wall per detail 2/S-1 of approved drawings. Holes were cleaned and filled with approved Simpson Set-22 Epoxy Adhesive ICBO # 5279.

2) Field welding of WF beam to beam connections with shear plates a total of 7 connections. Also welding of 4x6x5/16 angle ledger splice connections and ledger to WF beams. Welding was done by AWS certified welder Gerardo :Llamas using E7018 filler metal.

All work was done at new floor.

CERTIFICATE OF COMPLIANCE

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INSPECTOR'S NAME: ISMAEL CORDERO 310-930-5515

INSPECTOR SIGNATURE:

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CONTINUED ON NEXT PAGE ☐ PAGE 1 OF 1

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		8		

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(24 Hour) : (310) 930-5515
Fax: (562) 908-5141
PAGER: (213) 313-2798

SPECIAL INSPECTION REPORT

Permit No.	Job Name	Date
5649	LUBE/TUNE	8-28-03

TYPE OF INSPECTION			
☐ Reinforced concrete	☒ WELDING	☒ Quality Control
☐ Reinforced Masonry	☐ Fire Proofing	☐ Epoxy
☐ Post Tensioned Concrete	☐ High Strength Bolts	☐ Other

BUILDING DEPARTMENT	CITY OF WALNUT	Job Address	762 NOGALES ST.
Owner	DAN GRESTNER (626) 965-7922	Address	762 NOGALES ST. WALNUT
Contractor		Address	
Engineer	ERIC C. AU. PINEWAVE (909) 869-5777	Address	21015 COMMERCE POINTE DR. WALNUT, CA 91789
Architect	JC DESIGN	Address	
Sub contractor	V&F MANUFACTURING	Address	

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AUGUST 28, 2003

Completed field welding of metal decking to top flange of WF floor beams 5/8" diameter puddle welds. Welding was done by AWS certified welder Gerardo :Llanas using E7018 filler metal.

All work was done at new floor.

CERTIFICATE OF COMPLIANCE

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INSPECTOR'S NAME ISMAEL CORDERO 310-930-5515

INSPECTOR SIGNATURE

LIC. NO R004188 AGENCY LA CITY

CONTINUED ON NEXT PAGE ☐ PAGE 1 OF 1

		REG.HOURS	O.T. HOURS	SAMPLES
		8		

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Verified by _____
Project Superintendent

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

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(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 3-26-90

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 764 N. NOGALES
CITY: WALNUT ZIP: 0
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER TEL NO.: 818 962-6315
ADDRESS: ~~CHT~~ 600 CHATHAM PL
CITY: LA CANADA ZIP: 91011
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
612			

DESCRIPTION OF WORK: Tenant

CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 429.42
Permit Fee 514.50
Issuance Fee 15.75
Investigation Fee
Total Fee 530.25

BUILDING ADDRESS: 764 N Nogales
TRACT: LOT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.: SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: V FIRE ZONE: III PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 19 DWELL. UNITS: 0 APT.: CONDO.:
SEWER MPA BK.: PG.:

VALIDATION

VALUATION $ 15,300
$ 30722.40
FINAL DATE 7-6-90
BY

3220 429.42
CASH 429.42
MAR26 '90

3240 530.25
CASH 530.25
APR24 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

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Date 7/25/90 Applicant _____

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LICENSED CONTRACTORS DECLARATION

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

License Number 560634 Lic. Class C-45

Contractor _____ Date 7/26/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

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Lender's Name _____

Lender's Address _____

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Signature of Applicant or Agent _____ Date 7/26/90

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	764 "A" NOGALES
CITY	WALNUT ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT / BLOCK / LOT NO.	
OWNER	COCKSMITH TEL. NO.
ADDRESS	SAME
CITY	ZIP
ARCHITECT OR ENGINEER	TEL. NO.
ADDRESS	
CONTRACTOR	FRED BOYLES TEL. NO. 714 595 3929
ADDRESS	1174 CYNTHIA CT LIC. NO. 560634
CITY	LA VERNE LIC. CLASS C45
SQ. FT. SIZE / NO. OF STORIES / NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK	NEW ☐
ONE 2'X7'S/F WALL SIGN	ADD ☐
	ALTER ☐
	REPAIR ☐
USE OF EXISTING BLDG.	DEMOL ☐
APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00	Permit Fee 61.00
	Issuance Fee 15.75
Investigation Fee	Total Fee 76.75

BUILDING ADDRESS	764 "A" Nogales
TRACT / LOT	
NEAREST CROSS ST.	
ASSESSOR MAP BOOK / PAGE / PARCEL	
USE ZONE	C-3
MAP NO.	
SPECIAL INSTRUCTIONS	
GROUP / TYPE CONST.	V
FIRE ZONE	III
PROCESSED BY	
STATISTICAL CLASSIFICATION	
CLASS NO 22 DWELL. UNITS 0	APT. / CONDO.
SEWER MPA	
BK. ___ PG. ___	
VALUATION $	850.00
$	
FINAL DATE	8.10.90
BY	

VALIDATION

CASH 30.00 90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-7543

MISCELLANEOUS APPLICATION

764 "A"

WORKERS' COMPENSATION DECLARATION

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Contractor _____ Date _____

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Lender's Address _____

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X A. H. HAJIKNIA _____

Signature of Permittee Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 728 Nogales #A

LOCALITY

NEAREST CROSS ST. FRANCISCA

LEGAL DESCRIPTION | LOT NO. | BLOCK

TRACT | NO. OF BLDGS. NOW ON LOT

SIZE OF LOT | USE OF EXISTING BLDG.

OWNER DANNY

MAIL ADDRESS 764 NOGALES #A

CITY WALNUT TEL NO (818) 810 0707

APPLICATION FOR

TRAILER USE ☐ GEOLOGY INSPECTION ☐

OCCUPANCY INSPECTION X

SAFETY PERMIT ☐ (LIST ITEMS BELOW)

SIZE OF EXISTING BLDG. 600 SQ/FT | NO. OF STORIES

PRESENT USE OF BUILDING OFFICE ONLY

NO. OF EXISTING BUILDINGS ON LOT AND USE

NO. PARKING SPACES PROVIDED

PROPOSED USE OF BUILDING OFFICE USE FOR Wholsale CARS TO OTHER DEALER FEW RETAILS

PROPOSED MAX. OCC.

PERMIT FEE	640.00
ISSUANCE FEE	16.50
TOTAL FEE	$656.50

BUILDING ADDRESS 764 Nogales

LOCALITY

NEAREST CROSS ST.

GROUP | TYPE CONST. | PROCESSED BY

MAP NO. | HIGHWAY CIRCLE | STATE MINOR SECOND LOCAL

USE ZONE | SPECIAL CONDITIONS

OCCUPANCY GROUP

OCCUPANT LOAD

EXIT HARDWARE:
No Spec. Knowl. ☐
Panic Devices ☐

NO. OF EXITS

PARKING SPACES REQ'D | PROVIDED

LIMITED TIME USE

FROM: DATE | TO: DATE

FINAL APPROVAL | DATE 1-11-93 | INSPECTOR'S SIGNATURE

CASH
JAN05 '93

3220 656.50
656.50
#6877 CLK1

INSPECTOR COPY

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 7/20/90 Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 560634 Lic. Class C-45

Contractor _____ Date 7/20/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

_____ 7/20/90
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	764 "B" NOGALES	
CITY	WALNUT	ZIP
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT
TRACT	BLOCK	LOT NO.
OWNER	4466'S GIFTS	TEL. NO.
ADDRESS	SAME	
CITY		ZIP
ARCHITECT OR ENGINEER		TEL. NO.
ADDRESS		
CONTRACTOR	FRED POWERS	TEL. NO. 917-595-
ADDRESS	1174 CANTHIA CT	LIC. NO. 560645
CITY	LA VERNE	LIC. CLASS C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW ☐
ONE 2'x7' S/E WALL			ADD ☐
			ALTER ☐
			REPAIR ☐
USE OF EXISTING BLDG.			DEMOL ☐

APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	51.00	Permit Fee	61.00
		Issuance Fee	15.75
Investigation Fee		Total Fee	76.75

BUILDING ADDRESS	764 "B" Nogales		
TRACT		LOT	
NEAREST CROSS ST.			
ASSESSOR MAP BOOK		PAGE	PARCEL
USE ZONE	C3	MAP NO.	
		SPECIAL INSTRUCTIONS	
GROUP	TYPE CONST. V	FIRE ZONE III	PROCESSED BY
STATISTICAL CLASSIFICATION		APT.	CONDO.
CLASS NO 22	DWELL. UNITS 0		

SEWER MPA
BK. ___ PG. ___

VALUATION
$ 850.00

$

FINAL DATE

BY

VALIDATION

CASH
JUL 20 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

JOB ADDRESS 764 Nogales A & B.
TRACT LOT
NEAREST CROSS ST Nogales & Francisca.
OWNER OR FIRM NAME Adams Car Wash.
MAIL ADDRESS same.
CITY Tel No.
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT GIRALDO'S ELEC.
ADDRESS 770 Nilham Ave.
CITY La Puente Tel. No. 918 6592
LICENSE OR REG. NUMBER 388647 Class C10.
FINAL DATE 7-6-90
PROCESSED BY
BY
VALIDATION

FOR APPLICANT TO FILL IN

	EACH $	NO. —	FEE $
New Residential Bldg. & Pools Sq. ft.		—	
Residential Swimming Pools		—	
Outlets: Rec 11 Ligh 10 Sw 5 First 20	1.35	20	27 00
Total No. ____ Additional	.90	6	5 40
Lighting Fixtures First 20 Total No. 10 Additional	1.35	10	13 50
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ V.M. ___			
Top ___ FAU ___ V.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
1-27. Up to 1 Incl.			
___ Over 1 to 10 Incl.			10 50
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Service 1 @ 200 Amp. Under 600 V			27 00
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			83 40
PLAN CHECK FEE (50% Permit Fee)			15 75
PERMIT ISSUING FEE			
TOTAL FEE			99 15

CASH
JUN 26 '90

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 6-26-90 Applicant [signature]

NOTICE TO APPLICANT: If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 388647 Lic. Class C10

Contractor Electrical Date 6-26-90

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

[signature] 6-26-90

Signature of Permittee Date

1

INSPECTOR COPY

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT
HEATING-VENTILATING-AIR CONDITIONING

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. FS2402 Company Fairmont Ins. Exp. 10/90

☐ Certified Copy is hereby furnished.

☑ Certified copy is filed with the city building inspection department.

Date 5/25/90 Applicant Bob Hernandez

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 302865 Lic. Class C20 CLG 9/90

Contractor Bob Hernandez Date 5/25/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Bob Hernandez 5/25/90
Signature of Permittee Date

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU _____	
	AIR HANDLING UNIT, CFM _____	
	BOILER, BTU _____	
1	COMPRESSOR, BTU 15,000	18 00
	VENTILATION SYSTEM	
	EVAPORATIVE COOLER	
	FURNACE: FAU ____ GRAVITY ____ FLOOR: ____ BTU ____	
	HEATER: SUSPENDED ____ WALL ____ UNIT ____	
	INLETS & OUTLETS	
Plan check fee 50 % of above.		
	PERMIT ISSUING FEE $	15 75
	TOTAL FEE	33 75

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY TEL. NO.

OWNER Dan Gartner Dev.

MAIL ADDRESS 600 Hathaway Pl.

CITY La Canada TEL. NO. 952-6315

CONTRACTOR Cypress Htg & Air

ADDRESS 5475 S. Torrence Ave.

CITY Glendora TEL. NO. 963-4810

STATE LICENSE NO. 302865 LIC. CLASS C20

BUILDING ADDRESS 764 N. Hyssop

TRACT LOT

NEAREST CROSS ST.

PROCESSED BY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL	7-6-90	

VALIDATION

CASH
JUN05 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT

HEATING-VENTILATING-AIR CONDITIONING

INSPECTOR COPY

NO.	FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY) TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU	
	AIR HANDLING UNIT, CFM	
	BOILER, BTU	
1	COMPRESSOR, BTU	18 00
	VENTILATION SYSTEM	
	EVAPORATIVE COOLER	
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___	
	HEATER: SUSPENDED WALL UNIT	
2	Ret air / In / Out	6 00
	Plan check fee 25% of above.	
	PERMIT ISSUING FEE $	15 75
	TOTAL FEE	39 75

BUILDING ADDRESS: 764 N. NOGALES ST
TRACT: LOT
NEAREST CROSS ST.

PROCESSED BY: WV

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL	7-6-90	

VALIDATION

PLAN CHECK APPLICANT: DAN GERSTNER
NAME
ADDRESS: 764 N. NOGALES
CITY: WALNUT TEL. NO. 965-7922
OWNER: DAN GERSTNER
MAIL ADDRESS
CITY TEL. NO.
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS

CASH
J.N.C. NO

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7031, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent

6-26-90
Date

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)			
NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		16 55
✓	SINK		~~10 00~~
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		28 10
	TOTAL FEE		44 65

Plan check applicant
Name Silvia Torres
Address 764 N. Nogales ste A
City Walnut Tel. No. 1026 810-7059

BUILDING ADDRESS 764 Nogales
TRACT LOT
NEAREST CROSS ST. Amar Rd
OWNER Silvia Torres
MAIL ADDRESS 764 N Nogales
CITY Walnut TEL. NO. 810-7059
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS
FINAL DATE 8-16-99 PROCESSED BY
BY M. Moody VALIDATION

CASH 3240 44.65
AUG09 '99 #0154 44.65 CLK1

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company: Dulceria la Vaquita

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date 8/16/99 Applicant Silvia Torres

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name Dulceria la Vaquita

Lender's Address 764 N. Nogales Ste A

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Silvia Torres

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 (909) 595-7543

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

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

WORKER'S COMPENSATION DECLARATION

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

(__) I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
Policy No.

(X) **I have and will maintain workers' compensation insurance, as required by Section** 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and number are:
Carrier EXPRESS INS Policy No. 3300063089-131
Expiration Date 12/1/14 Name of Agent SUSAN H. DIGNUS Tel. No. (818) 589-8057

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

CALIFORNIA LICENSED CONTRACTOR'S DECLARATION

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

Contractor Name and Address:

License Class and No. Contractor

Signature

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9(commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500)):

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do (__) all of or (__) portions of the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not build of improved for the purpose of sale).

(__) **I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project** (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law).

(__) **I am exempt from licensure under the Contractors' State License Law for the following reason:**

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: http://www.leginfo.ca.gov/calaw.html.

Property Owner or
Authorized Agent signature Date 4-16-14

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).
Lender's Name and Address

By my signature below, I certify to each of the following:

I am (__) a California licensed contractor or (__) the property owner* or (__) authorized to act on the property owner's behalf.**

I have read this construction permit application and the information I have provided is correct. I agree to comply with all applicable city and county ordinances and state laws relating to building construction. I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

*requires separate verification form. **requires separate authorization form.
California Licensed Contractor, Property Owner* or Authorized Agent**.

Signature Date 4-16-14

TO BE COMPLETED BY APPLICANT		
BUILDING ADDRESS 718 N. NOGALES ST # E		
OWNER DAN GERSTNER		
ADDRESS 784 N. NOGALES		
CITY WALNUT	ZIP 91789	
TEL NO 626 287-1671		
ARCHITECT OR ENGINEER		
ADDRESS		
CITY	ZIP	
TEL NO	LIC NO	
CONTRACTOR		
ADDRESS		
CITY	ZIP	
TEL NO	LIC NO	CLASS
SQ FT SIZE	NO. STORIES	
DESCRIPTION OF WORK ADD Rest Room for Tenant	NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐ URM ☐	
APPLICANT		
TELEPHONE		
SMIP .50	PC FEE 162.00	
SB 1473 1.00	PERMIT FEE 163.00	
	ISSUANCE FEE 54.80	
	TOTAL FEE 217.80	

BUILDING ADDRESS 718 N NOGALES ST. "E"			
TRACT	LOT NO.	LOT SIZE	
USE OF EXISTING BLDG			
ASSESSOR MAP BOOK	PAGE	PARCEL	
SPECIAL CONDITIONS			
GROUP	TYPE CONST.	FIRE ZONE	
STATISTICAL CLASSIFICATION CLASS NO.	DWELL UNITS	APT	CONDO
VALUATION $ 2,000.00	$		
FINAL DATE 9-3-14	PROCESSED BY		
FINAL BY JMG			

WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIAL INFORMATION GUIDE?

YES ☐ NO ☐

WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR THE CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD)? SEE PERMITTING CHECKLIST FOR GUIDELINES

YES ☐ NO ☐

I HAVE READ THE HAZARDOUS MATERIAL INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST AND I UNDERSTAND MY REQUIREMENTS UNDER THE LOS ANGELES COUNTY CODE, TITLE 12 CHAPTER 12.52, SECTIONS 12.52.005 THROUGH 12.52.150 CONCERNING HAZARDOUS MATERIAL REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.

OWNER OR AGENT

01 05/13/2014 15:06 021158 PLU
3220 $162.00
CLERK 1

01 05/13/2014 15:06 021159 PLU
3240 $217.80
CLERK 1

01 05/13/2014 15:06 021160 PLU
3270 $0.50
CLERK 1

01 05/13/2014 15:06 021161 PLU
3271 $1.00
CLERK 1

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 (909) 595-7543

APPLICATION FOR ELECTRICAL PERMIT

1

INSPECTOR COPY

S COMPENSATION DECLARATION

...erjury one of the following declarations:

...a certificate of consent to self-insure for workers' compensation, as ...00 of the Labor Code, for the performance of the work for which this ...

...maintain workers' compensation insurance, as required by Section 3700 of ... for the performance of the work for which this permit is issued. My workers' ...insurance carrier and number are:

CYPRESS INS

...No. 33000 63059-131

...Date 12-1-14 Applicant DAN GERSTNER

(This section need not be completed if the permit is for one hundred dollars ($100) or less)

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

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

LICENSED CONTRACTOR'S DECLARATION

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

Lic. Class_____ Lic. No _____

Exp. Date_____ Contractor _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' License Law for the following reason (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt there from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500):)

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that he or she did not build or improve for the purpose of sale.)

(__) I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.)

(X) I am exempt under Sec. _____, B. & P. C. for this

reason: _____

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State Laws relating to building construction. I hereby authorize representatives of the City of Walnut to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation laws, this permit shall be deemed revoked.

PERMITTEE SIGNATURE

778 N NOGALES ST # E

ADDRESS CITY ZIP

☐ Contractor ☒ Owner ☐ Other Licensed Professional

CONSTRUCTION LENDING DECLARATION

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work of which this permit is issued (Section 3097, Civil Code).

Lender's Name _____

Lender's Address _____

FOR APPLICANT TO FILL IN

	EA	No.	FEE	
NEW RESIDENTIAL BLDGS _____ sq ft. **OUTLETS:**				
Rec. 1 Light 1 Sw. 1 First 20	3.15	3	9	45
Total Number _____ Additional				
Lighting Fixtures: First 20	3.15	1	3	15
Total Number _____ Additional				
FIXED APPLIANCES NOT OVER 1 HP				
Range ____ Heater ____ D.W. ____				
Oven ____ Dryer ____ W.M. ____				
Top ____ FAU ____ W.H. ____				
Hood ____ Fan ____ Other ____				
Disposal ____ Room Air Cond. ____				
Power Apparatus & Large Appliances Size & HP, KVW, KVA or KVAR				
_____ Not exceeding 3				
_____ Over 3 to 10 incl.				
_____ Over 10 to 50 incl.				
_____ Over 50 to 100 incl.				
_____ Over 100				
SERVICES 0-200 Amp. Under 600 V				
201- 1000 Amp. Under 600 V				
Over 1000 Amp or Over 600 V				
Temp. Power Pole & Appurtenances				
Sign With One Branch Circuit				
Additional Sign Branch Circuits				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule)				
PERMIT FEE (SUB-TOTAL)			12	60
PLAN CHECK FEE (70% PERMIT FEE) SB 1473				
PERMIT ISSUANCE FEE			41	10
TOTAL FEE			53	70

JOB ADDRESS 778 N NOGALES UNIT E

OWNER DAN GERSTNER

ADDRESS 784 N NOGALES ST

CITY TEL NO. 818 726 5109

APPLICANT

ADDRESS

CITY TEL No.

LICENSE NO. CLASS

FINAL DATE 9-3-14 PROCESSED BY

BY

01 05/13/2014 15:07 021163 PLU
3240 $53.70
CLERK 1

...ORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL ...INAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND ...ON TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN ...H CODE, INTEREST, AND ATTORNEY'S FEES.

WORKER'S COMPENSATION DECLARATION

...penalty of perjury one of the following declarations:

...will maintain a certificate of consent to self-insure for workers' compensation, issued by the ...dustrial Relations as provided for by Section 3700 of the Labor Code, for the performance of ...or which this permit is issued.

...No.

(X) **I have and will maintain workers' compensation insurance,** as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and number are:
Carrier CYPRESS INS Policy No. 33000 63089-131
Expiration Date 12-1-14 Name of Agent SUSAN DIONNE Tel. No. 916 569-8057

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

CALIFORNIA LICENSED CONTRACTOR'S DECLARATION

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

License Class and No. _____ Signature _____

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9(commencing with Section 7000) of Division 3 of the Business and Professions Code) for that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do (__) all of or (__) portions of the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not build of improved for the purpose of sale.).

(__) **I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project** (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.).

(X) **I am exempt from licensure under the Contractors' State License Law for the following reason:**

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: http://www.leginfo.ca.gov/calaw.html.
Property Owner or Authorized Agent signature _____ Date 4-16-14

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).
Lender's Name and Address

By my signature below, I certify to each of the following:

I am (__) a California licensed contractor or (X) the property owner* or (__) authorized to act on the property owner's behalf.**

I have read this construction permit application and the information I have provided is correct. I agree to comply with all applicable city and county ordinances and state laws regulating Plumbing. I authorize representatives of this city or county to enter the above-identified property for inspection purposes. *Requires separate verification form **requires separate authorization form*

California Licensed Contractor, Property Owner* or Authorized Agent**:
Signature _____ Date 4-16-14

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 TELEPHONE: (909) 595-7543

APPLICATION FOR PLUMBING PERMIT

1

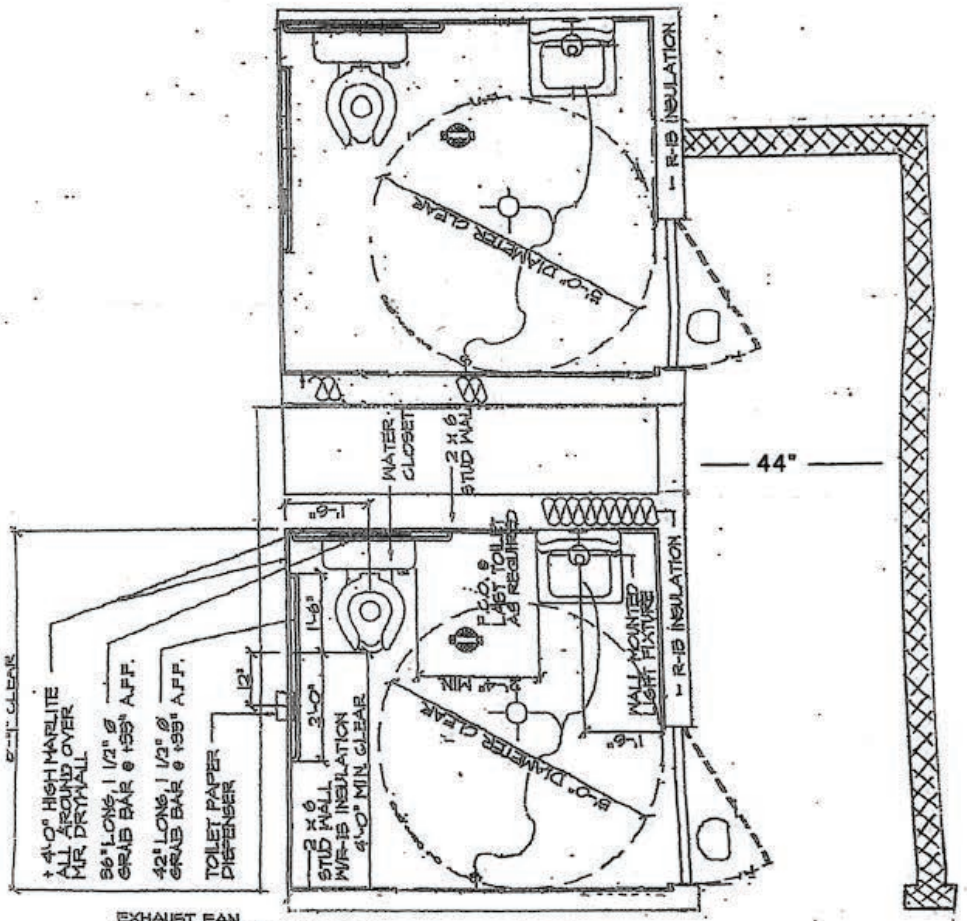
TO BE COMPLETED BY APPLICANT				JOB ADDRESS 778 N NOGALESS ST #E
NO.	FIXTURE OR TRAP	FEE		NEAREST CROSS STREET
1	TOILET	24	00	OWNER DAN GERSTNER
	BATHTUB			CITY TEL NO 626 7265109
	SHOWER			CONTRACTOR
1	LAVATORY	24	00	ADDRESS
	SINK			CITY TEL NO
	DISHWASHER			STATE LICENSE NO. LIC CLASS
	CLOTHES WASHER			FINAL DATE 9-3-14 PROCESSED BY
	SWIMMING POOL RECEPTOR			BY
	LAWN SPRINKLER SYSTEM			
	WATER HEATER			
	GAS SYSTEM _____ OUTLETS			
	OUTLETS OVER 5 PER SYSTEM			
	HOSE BIBBS			
	PLAN CHECK FEE 40% OF ABOVE			
	SB 1473			
	PERMIT FEE	48	00	
	ISSUANCE FEE	41	10	
	TOTAL FEE	89	10	

01 05/13/2014 15:06 021162 PLU
3240 $89.10
CLERK 1

INSPECTOR COPY

STREET TACOS RESTAURANT

778 N. NOGALES # E WALNUT CA. 91789

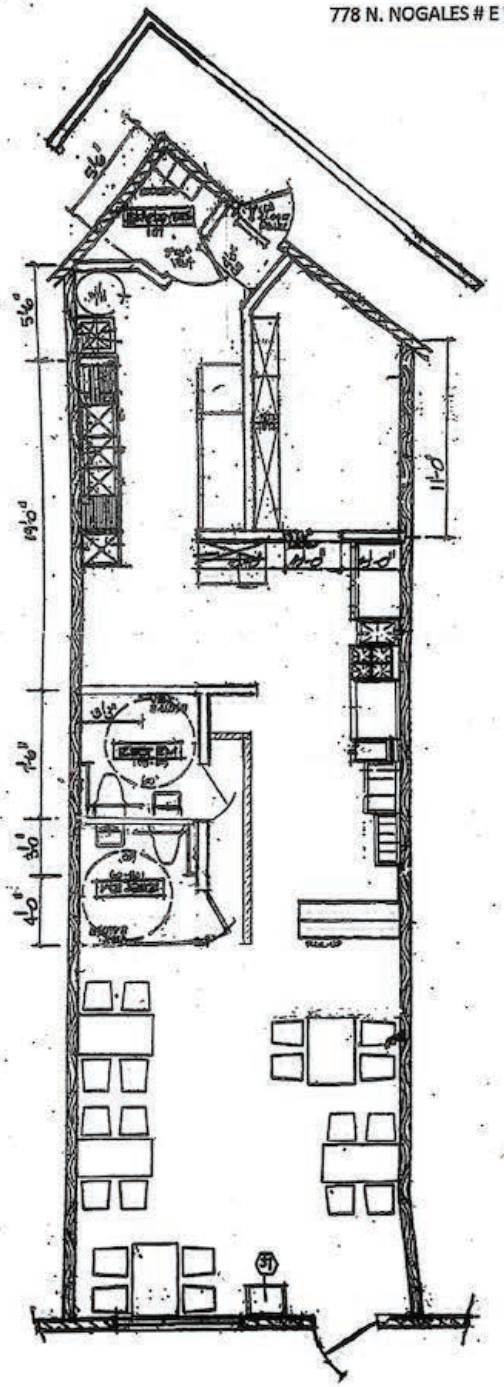


EXHAUST FAN
PROVIDE AND INSTALL EXHAUST FAN PROVIDING A MINIMUM OF 5' AIR CHANGES PER HOUR.

MIRROR

STREET TACOS RESTAU

778 N. NOGALES # E WALNUT CA.



WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereb authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

4 DAN GERSTNER 5-25-10

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7543

1

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
1	SINK Floor		22 05
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
PLUMBING PERMIT ISSUING FEE $			37 95
TOTAL FEE			60 00

Plan check applicant

Name

Address

City Tel.No.

BUILDING ADDRESS 778 "F" Nogales

TRACT LOT

NEAREST CROSS ST.

OWNER DAN GERSTNER

MAIL ADDRESS 778 #F NOGALES AVE.

CITY WALNUT - TEL. NO 626-965-7922

CONTRACTOR

ADDRESS

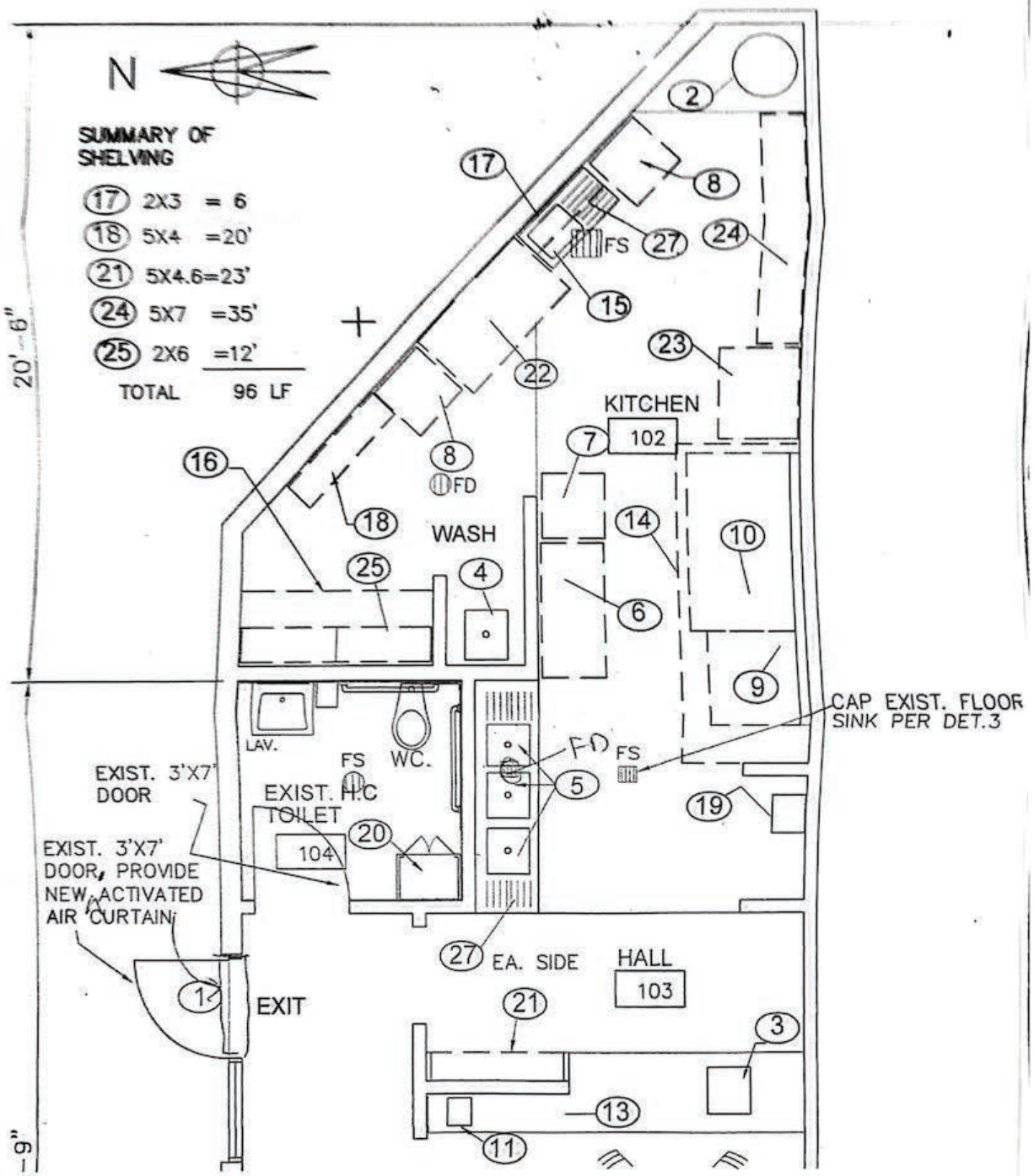
CITY TEL. NO

STATE LICENSE NO. LIC. CLASS

FINAL DATE 5-26-10 PROCESSED BY

BY VALIDATION

01 05/25/2010 09:49 010233 PU
3240 $60.00
CLERK 1


N
SUMMARY OF SHELVING
17 2X3 = 6
18 5X4 =20'
21 5X4.6=23'
24 5X7 =35'
25 2X6 =12'
TOTAL 96 LF
20'-6"
-9"
KITCHEN
102
WASH
LAV.
WC.
FS
FD
EXIST. 3'X7' DOOR
EXIST. H.C TOILET
104
EXIST. 3'X7' DOOR, PROVIDE NEW ACTIVATED AIR CURTAIN
EXIT
EA. SIDE
HALL
103
CAP EXIST. FLOOR SINK PER DET.3

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date 3-2-10 Applicant DAN GERSTNER

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereb authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 3-2-10

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7543

APPLICATION FOR PLUMBING PERMIT

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
1	SINK		22.05
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
	Plan check fee 50% Permit Fee		3
	PLUMBING PERMIT ISSUING FEE $		37 95
	TOTAL FEE		60 00

Plan check applicant

Name

Address

City Tel.No.

BUILDING ADDRESS 778 NOGALES. ST. WALNUT -CA.

TRACT LOT

NEAREST CROSS ST FRANCISQUA.

OWNER DAN GERSTNER

MAIL ADDRESS 784 N. NOGALES ST.

CITY WALNUT -CA TEL. NO (626) 965-7922

CONTRACTOR

ADDRESS 784 N. NOGALES ST.

CITY WALNUT TEL. NO (626) 965-7922

STATE LICENSE NO LIC. CLASS

FINAL DATE 3/17/10 PROCESSED BY

BY

VALIDATION

01 03/03/2010 09:53 009574 PLU
3240 $60.00
CLERK 1

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

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CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereb authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

DAN GERSTNER 6-22-10

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7543

APPLICATION FOR PLUMBING PERMIT

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE	
	WATER CLOSET			
	BATH TUB			
	SHOWER			
	LAVATORY			
	SINK Floor		22	05
	DISHWASHER			
	CLOTHES WASHER			
	SWIMMING POOL RECEPTOR			
	LAWN SPRINKLER SYSTEM			
	WATER HEATER			
	GAS SYSTEM OUTLETS			
	OUTLETS OVER 5 PER SYSTEM			
	523		22	05
Plan check fee 50% Permit Fee				
	PLUMBING PERMIT ISSUING FEE $		37	95
	TOTAL FEE		60	00

Plan check applicant

Name

Address

City Tel.No.

BUILDING ADDRESS 778 "F" NOGALES

TRACT LOT

NEAREST CROSS ST.

OWNER DAN GERSTNER

MAIL ADDRESS 778 #F NOGALES AVE.

CITY WALNUT TEL. NO (626) 965-7922

CONTRACTOR

ADDRESS

CITY TEL. NO.

STATE LICENSE NO. LIC. CLASS

FINAL DATE 6/23/10 PROCESSED BY

BY VALIDATION

01 06/22/2010 09:21 010531 PLU
3240 $60.00
CLERK 1

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

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LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code)

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the wages as their sole compensation will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 9-29-08

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7543

APPLICATION FOR BUILDING PERMIT

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 Nogales AVE Suite I
CITY: Walnut CA ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.
OWNER: Daniel Gerstwolf TEL.
ADDRESS: 778 N Nogales St
CITY: Walnut ZIP: 91789
ARCHITECT OR ENGINEER: TEL. NO.
ADDRESS:
CONTRACTOR: TEL. NO.
ADDRESS: LIC. NO.
CITY: LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK: Demo office spaces in Exist Build			NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.: Vacant			

APPLICANT (PRINT): Norma Jimenez TEL. NO. 562-296-3873
ADDRESS: 102 99 Lone Summit Dr Hacienda Valley CA

Will the applicant or future building occupant handle hazardous material or a mixture containing a hazardous material equal to or greater than the amounts specified on the Unified Program(UP) Form?
Note: For information regarding this form, contact LA County Haz Mat
☐ Yes ☒ No

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification form the South Coast Air Quality Management District (SCAMD), see permitting checklist for guidelines? ☐ Yes ☐ No

I have read the Unified Program(UP) Form and the SCAQMD Permitting Checklist. I understand my requirements under the Los Angeles County Code, Title 2 Chapter 2 20, Sections 2 20 100 through 2 20 140 concerning hazardous materials reporting and for obtaining a permit from the SCAQMD.

Owner or Agent Signature _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $		Permit Fee	168.00
		Issuance Fee	50.60
Investigation Fee		Total Fee	218.60

BUILDING ADDRESS: 778 Nogales Ave. Suite I
TRACT: LOT
NEAREST CROSS ST.
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.
SPECIAL INSTRUCTIONS
GROUP: 1 TYPE CONST: ~~V~~ ~~FHH~~ FIRE ZONE: ~~III~~ II PROCESSED BY
STATISTICAL CLASSIFICATION APT CONDO
CLASS NO ____ DWELL. UNITS ____
SEWER MPA ____ PG. ____
VALIDATION
VALUATION $
$
FINAL DATE 10-7-08
BY

01 09/29/2008 14:33 006837 PLU
T240 $218.60
CLERK 1

INSPECTOR COPY

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7031, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 4-13-01

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N NOGALES ST #I
CITY: WALNUT ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER TEL: (626) 726 5196
ADDRESS: 784 N. NOGALES ST
CITY: WALNUT ZIP: 91789
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: 720 LIC. CLASS:
SQ. FT. SIZE: 1000 | NO. OF STORIES: | NO. OF FAMILIES:

DESCRIPTION OF WORK: TENANT IMPROVEMENTS

CHECK ONE	
NEW	☐
ADD	☐
ALTER	☒
REPAIR	☐
DEMOL	☐

USE OF EXISTING BLDG.:

APPLICANT (PRINT): DAN GERSTNER TEL. NO.: 626 965-7922
ADDRESS:
PRESENT BUILDING ADDRESS: 778 N NOGALES ST #I
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SETBACK	YARD	MWP	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 347.14 — Permit Fee 411.20
SMI 2.88 — Issuance Fee 40.00
Investigation Fee — Total Fee 450.20

BUILDING ADDRESS: 778 N NOGALES ST #I
TRACT: LOT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: 3 PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS: APT. CONDO.
SEWER MPA
BK. PG.

VALIDATION

VALUATION: 13,637
FINAL DATE: 7-6-01
BY:

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

...KERS' COMPENSATION DECLARATION

...eby affirm that I have a certificate of consent to self ...ure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date 4-24-01

FOR APPLICANT TO FILL IN

	EACH $	NO.	FEE $	
New Residential Bldgs. & Pools Sq. Ft. _____				
Residential Swimming Pools				
Outlets: Rec 12 Light _____ Sw. 7	2.30	19	43	70
Total No. 19 First 20				
Additional				
Lighting Fixtures First 20				
Total No. _____ Additional				
Fixed Appliances Not Over 1 HP				
Range ___ Heater ___ D.W. ___				
Oven ___ Dryer ___ W.M. ___				
Top ___ FAU ___ W.H. ___				
Hood ___ Fan ___ Other ___				
Disp. ___ Room Air Cond ___				
Power Apparatus & Large Appliances				
Size & Type HP, KW, KVA, or KVAR				
_____ Up to 1 Incl.				
_____ Over 1 to 10 Incl.				
_____ Over 10 to 50 Incl.				
_____ Over 50 to 100 Incl.				
_____ Over 100				
Services				
0-200 Amp. Under 600 V				
201-1000 Amp. Under 600 V				
Over 1000 Amp. or Over 600 V				
Temp. Power Pole & Appurtenances				
Sign with One Branch Circuit				
Additional Sign Branch Circuits				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule) ___				
PERMIT FEE (Sub-Total)			43	70
PLAN CHECK FEE (50% Permit Fee)				
PERMIT ISSUING FEE			30	00
TOTAL FEE			73	70

JOB ADDRESS 778 N NOGALES # I
TRACT _____ LOT _____
NEAREST CROSS ST. _____
OWNER OR FIRM NAME DAN GERSTNER
MAIL ADDRESS P.O. BOX 545
CITY SAN GABRIEL Tel No. (626) 965-7722
PLAN CHECK APPLICANT DAN GERSTNER
ADDRESS _____
CITY _____ Tel. No. _____
PERMIT APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
LICENSE OR REG. NUMBER _____ Class _____

FINAL DATE 7-6-01 PROCESSED BY _____
BY _____ VALIDATION

73.70
73.70

...KERS' COMPENSATION DECLARATION

...reby affirm that I have a certificate of consent to self ...sure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

[ ] Certified copy is hereby furnished.

[ ] Certified copy is filed with the city building inspection department

Date 3-6-98 Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

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CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 3-6-98
Signature of Permittee — Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 · (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

1 #6

INSPECTOR COPY

FOR APPLICANT TO FILL IN	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft. _____	$	—	$
Residential Swimming Pools		—	
Outlets: Rec. ___ Light ___ Sw. ___ Total No. _____ First 20 / Additional			
Lighting Fixtures Total No. _____ First 20 / Additional			
Fixed Appliances Not Over 1 HP: Range ___ Heater ___ D.W. ___ Oven ___ Dryer ___ W.M. ___ Top ___ F.A.U. ___ W.H. ___ Hood ___ Fan ___ Other ___ Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR: _____ Up to 1 Incl. / _____ Over 1 to 10 Incl. / _____ Over 10 to 50 Incl. / _____ Over 50 to 100 Incl. / _____ Over 100			
Services: 0-200 Amp. Under 600 V / 201-1000 Amp. Under 600 V / Over 1000 Amp. or Over 600 V			39 35
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			39 35
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			28 10
TOTAL FEE			67 45

JOB ADDRESS 778 N NOGALES ST UNIT N° 3

TRACT _____ LOT _____

NEAREST CROSS ST. _____

OWNER OR FIRM NAME DAN GERSTNER

MAIL ADDRESS 784N NOGALES ST

CITY WALNUT Tel No. (629 965-7922

PLAN CHECK APPLICANT _____

ADDRESS _____

CITY _____ Tel. No. _____

PERMIT APPLICANT Same

ADDRESS _____

CITY _____ Tel. No. _____

LICENSE OR REG. NUMBER _____ Class _____

FINAL DATE 7-6-98 PROCESSED BY _____

BY _____ VALIDATION

CASH MAR01 '98

3240 67.45
67.45
#8028 CLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 3-21-03

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 Nogales A + A1
CITY: _____ ZIP: _____
SIZE OF LOT: _____ NO. OF BLDGS. NOW ON LOT: _____
TRACT: _____ BLOCK: _____ LOT NO.: _____
OWNER: DAN GERSTNER TEL. NO. 818 7265109
ADDRESS: 784 N NOGALES ST
CITY: WALNUT ZIP: _____
ARCHITECT OR ENGINEER: _____ TEL. NO.: _____
ADDRESS: _____
CONTRACTOR: _____ TEL. NO.: _____
ADDRESS: _____ LIC. NO.: _____
CITY: _____ LIC. CLASS: _____

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
1008			

DESCRIPTION OF WORK: Add Wall to divide unit and create office + Bathroom 24' x 42' — NEW ☐ ADD ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.: _____

APPLICANT (PRINT): _____ TEL. NO.: _____
ADDRESS: _____
PRESENT BUILDING ADDRESS: _____
LOCALITY: _____
MOVING CONTRACTOR: _____ TEL. NO.: _____
ADDRESS: _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 282.03 — Permit Fee 333.80
SMIP 2.10 — Issuance Fee 42.40
Investigation Fee — Total Fee 376.20

BUILDING ADDRESS: 778 Nogales A + A1
TRACT: _____
NEAREST CROSS ST.: _____
ASSESSOR MAP BOOK: _____ PAGE: _____ PARCEL: _____
USE ZONE: C-3 MAP NO: _____
SPECIAL INSTRUCTIONS: _____
GROUP: _____ TYPE CONST.: _____ FIRE ZONE: 3 PROCESSED BY: _____
STATISTICAL CLASSIFICATION: _____ PT ☐ CONDO ☐
CLASS NO. 22 DWELL. UNITS: 0

SEWER MPA
BK. ____ PG. ____

VALUATION $ 9274.00

FINAL DATE: 5-23-03 CASH ANCE '03
BY: _____

VALIDATION

3220 282.03
282-03
#6295 CLK1

3240 376.20
CASH 376-20
FEB14 '03 #6420 CLK1
3270 2.10
CASH 2-10
FEB14 '03 #6421 CLK1

NSATION DECLARATION

Have a certificate of consent to self of Workers' Compensation Insurance, or ot (Sec. 3800, Lab. C.)

Company

ified Copy is hereby furnished.

Certified copy is filed with the City building inspection department.

Date Applicant

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date Applicant

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number Lic. Class

Contractor Date

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. Date

HOME OWNER-BUILDER DECLARATION

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☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name

Lender's Address

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

X DAN GERSTNER 3-21-03

Signature of Permittee Date

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR PLUMBING PERMIT

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
1	WATER CLOSET		18 60
	BATH TUB		
	SHOWER		
	LAVATORY		
1	SINK		18 60
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		31 80
	TOTAL FEE		69 00

Plan check applicant

Name

Address

City Tel. No.

BUILDING ADDRESS 778 NOGALES A-1

TRACT LOT

NEAREST CROSS ST. FRANCESLA.

OWNER DAN GERSTNER.

MAIL ADDRESS 784 N. NOGALES ST.

CITY WALNUT TEL. NO (626) 965-7922

CONTRACTOR

ADDRESS

CITY TEL. NO.

STATE LICENSE NO. LIC. CLASS

FINAL DATE 5/23/03 PROCESSED BY JH2

BY VALIDATION

INSPECTOR COPY

CASH MAR 28 '03 21

3240 69.00
69-00
#6551 CLK1

1

...MPENSATION DECLARATION

...r that I have a certificate of consent to self ...certificate of Workers' Compensation Insurance, or ...copy thereof (Sec. 3800, Lab. C.)

...icy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☑ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

DAN GERSTNER — 3-21-03

Signature of Permittee — Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft. _____	$	—	$
Residential Swimming Pools		—	
Outlets: Rec. 9 Light 5 Sw. 4	2.40	18	43 20
Total No. 18 First 20 / Additional			
Lighting Fixtures Total No. 5 First 20 / Additional	2.40	5	12 00
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
_____ Up to 1 Incl.			
_____ Over 1 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services 0-200 Amp. Under 600 V	44.25	1	44 25
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			99 45
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			31 80
TOTAL FEE			131 25

JOB ADDRESS 778 N NOGALES A-1
TRACT _____ LOT _____
NEAREST CROSS ST. _____
OWNER OR FIRM NAME DAN GERSTNER
MAIL ADDRESS 778 N. NOGALES ST.
CITY WALNUT. Tel No. 626-965-9922
PLAN CHECK APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
PERMIT APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
LICENSE OR REG. NUMBER _____ Class _____
FINAL DATE 5/23/03 — PROCESSED BY _____
BY _____ — VALIDATION

CASH
MAR 23 '03
21

3240 131.25
131-25
#6550 CLK1

...PENSATION DECLARATION

...at I have a certificate of consent to self ...ificate of Workers' Compensation Insurance, or ...opy thereof (Sec. 3800, Lab. C.)

...y No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

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I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☑ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Electrical wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

X DAN GERSTNER 3-21-03

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

1

APPLICATION FOR PERMIT
SEWER-SEWAGE DISPOSAL

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N NOGALES A-1
LOCALITY:
NEAREST CROSS ST.: FRANCESCA
OWNER: ~~784 N. NOGALES ST.~~ DAN GERSTNER
MAIL ADDRESS: 778 N. NOGALES ST.
CITY: WALNUT TEL. NO. (626) 965-7922
LEGAL DESCRIPTION LOT NO.:
BLOCK: TRACT:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
USE OF BUILDINGS:
CONTRACTOR:
ADDRESS:
CITY: TEL. NO.:
STATE LICENSE NO.: LIC. CLASS:

NO	DESCRIPTION OF WORK	FEE	
1	HOUSE SEWER CONNECTING TO PUBLIC SEWER	53	70
	SEPTIC TANK, SEEPAGE PIT OR PITS AND/OR DRAINFIELD		
	HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM		
	CONNECT ADDITIONAL BLDG. OR WORK TO HOUSE SEWER		
	OVERFLOW SEEPAGE PIT, DRAINFIELD EXTN., CESSPOOL, DRYWELL, MANHOLE		
	ALTER, REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM		
	Permit	31	80
OWNER'S AUTHORIZATION	TOTAL FEE	$ 85	50

I HAVE AT THIS DATE A CONTRACT WITH THE HEREIN NAMED CONTRACTOR TO CONNECT THE ABOVE DESCRIBED EXISTING DWELLING TO THE PUBLIC SEWER.

SIGNED THIS _____ DAY OF _____ 19 ____

OWNER OR OWNER'S AGENT _____

ADDRESS _____

CONNECTION DATA

STATION: DEPTH:
MANHOLE REFERENCE: UPPER / LOWER
Y: TYPE OF CONNECTION: CURB P.L. LENGTH FROM M.L. TO P.L.:
CO. IMP. NO.: P.C. NO. / JOB NO.:
TRUNK PERMIT NO.: ROAD PERMIT NO.:

AFFIDAVIT	WAIVER	EASEMENT	REC. INSTR. NO.	DATE

HWY. OR ST. WIDENING:
STATE ENCROACHMENT PERMIT NO.:

CHARGES

CONNECTION CHARGE FEE:
REIMBURSEMENT FEE:

GROUP	MAP BK. PG.	FINAL DATE	PROCESSED BY

BY

VALIDATION

3240 85.50
CASH 85.50
MAR 03 '03 #6549 CLK1
21

76N617 N1 CE 900 1018

INSPECTOR'S OFFICE HOURS
Monday - Thursday 7:00 am - 9:00 am

CITY OF WALNUT
DEPARTMENT OF BUILDING AND SAFETY
21201 La Puente Rd.
Walnut, California 91789
(909) 598-5241

NOTICE

JOB ADDRESS 778 NOGALES SUITE F

OWNER ADOBO HOUSE

1) CLEAN GLASS AND DEBRESS FROM FRONT TO PREVENT SLIPPING
2) BOARD UP STORE FRONT
3) REPLACE STORE FRONT AND APPLY FOR A BUILDING PERMIT
4) NO CUSTOMERS ALLOWED IN AREA DAMAGED BY ACCIDENT

AAA INSURANCE
PRICILLA ALMENDRAL 909-598-245
CHP # 105-09050-
2917-472

11.15.05
DATE

KARL FORD
INSPECTORS SIGNATURE

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certificate copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 7/20/90 Applicant [signature]

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 560634 Lic. Class C-45

Contractor [signature] Date 7/20/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

[signature] 7/20/90
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	778 NOGALES "A"
CITY	WALNUT ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT / BLOCK / LOT NO.	
OWNER	JED AUTO REPAIR TEL. NO.
ADDRESS	SAME.
CITY	ZIP
ARCHITECT OR ENGINEER	TEL. NO.
ADDRESS	
CONTRACTOR	FRED BOYLES TEL. NO. 714 593-3929
ADDRESS	1174 CYNTHIA CT LIC. NO. 560634
CITY	CA CERNE LIC. CLASS C45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW ☐
ONE 2'X12' WALLSIGN			ADD ☐
			ALTER ☐
			REPAIR ☐
USE OF EXISTING BLDG.			DEMOL ☐

APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00	Permit Fee 61.00
	Issuance Fee 15.75
Investigation Fee	Total Fee 76.75

BUILDING ADDRESS	778 Nogales "A"
TRACT / LOT	
NEAREST CROSS ST.	
ASSESSOR MAP BOOK / PAGE / PARCEL	
USE ZONE	C3
MAP NO.	
SPECIAL INSTRUCTIONS	
GROUP / TYPE CONST.	V
FIRE ZONE	III
PROCESSED BY	
STATISTICAL CLASSIFICATION	APT. / CONDO.
CLASS NO. 22 DWELL. UNITS 0	
SEWER MPA BK. ___ PG. ___	
VALIDATION	
VALUATION $ 850	
$	
FINAL DATE	
BY	

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

1

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

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☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

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License Number 560634 Lic. Class C-45

Contractor _____ Date 7/20/90

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Lic. or Reg. No. _____ Date _____

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Lender's Address _____

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_____ 7/20/90
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 778 NOGALES "E"
CITY WALNUT ZIP
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER JOSIES KITCHENETTE TEL. NO.
ADDRESS SAME
CITY ZIP
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR FRED BOGGS TEL. NO. 714 595-3929
ADDRESS 1174 CYNTHIA CT LIC. NO. 560634
CITY LA VERNE LIC. CLASS C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: ONE 2'X9' — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00 Permit Fee 61.00
Issuance Fee 15.75
Investigation Fee Total Fee 76.75

BUILDING ADDRESS 778 Nogales "E"
TRACT LOT
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO. SPECIAL INSTRUCTIONS
GROUP TYPE CONST. V FIRE ZONE IV PROCESSED BY
STATISTICAL CLASSIFICATION CLASS NO 22 DWELL. UNITS 0 APT. CONDO.
SEWER MPA BK. ___ PG. ___
VALUATION $ 850.00
$
FINAL DATE 9-25-90
BY

VALIDATION

CASH
JUL 30 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

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☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

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Date 7/20/90 Applicant _____

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LICENSED CONTRACTORS DECLARATION

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

License Number 560654 Lic. Class C-45

Contractor _____ Date 7/20/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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Lender's Name _____

Lender's Address _____

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_____ 7/20/90
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 778 NOGALES "E"
CITY WALNUT ZIP
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER MEXICAN FOOD TEL. NO.
ADDRESS SAME
CITY ZIP
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR FRED BOYLES TEL. NO. 714 595-5929
ADDRESS 1174 CYNTHIA CT LIC. NO. 560654
CITY LA VERNE LIC. CLASS C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK
ONE 2'X9'

NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00 Permit Fee 61.00
Issuance Fee 15.75
Investigation Fee Total Fee 76.75

BUILDING ADDRESS 778 Nogales "E"
TRACT LOT
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO. SPECIAL INSTRUCTIONS
GROUP TYPE CONST. V FIRE ZONE IV PROCESSED BY
STATISTICAL CLASSIFICATION APT. CONDO.
CLASS NO 22 DWELL. UNITS 0

SEWER MPA
BK. ____ PG. ____

VALIDATION

VALUATION $ 850.00
$
FINAL DATE 11-2-90
BY RO

CASH
JUL 20 '90

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

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I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

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☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

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Date 7/20/90 Applicant _____

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License Number 560634 Lic. Class C-45 ~~560634~~

Contractor _____ Date 7/20/90

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Lic. or Reg. No. _____ Date _____

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Lender's Address _____

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Signature of Applicant or Agent _____ Date 7/20/90

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	778 NOGALES "D"
CITY	WALNUT ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT / BLOCK / LOT NO.	
OWNER	COACHES CORNER TEL. NO.
ADDRESS	SAME.
CITY	ZIP
ARCHITECT OR ENGINEER	TEL. NO.
ADDRESS	
CONTRACTOR	FRED BOYLES TEL. NO. 714 598-3929
ADDRESS	1174 CYNTHIA CT LIC. NO. C-45 560634
CITY	LA VERNE LIC. CLASS C-45
SQ. FT. SIZE / NO. OF STORIES / NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK	TWO - 2x9'S — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.	
APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00	Permit Fee 161.00
	Issuance Fee 15.75
Investigation Fee	Total Fee 76.75

BUILDING ADDRESS	778 Nogales "D"
NEAREST CROSS ST.	
ASSESSOR MAP BOOK / PAGE / PARCEL	
USE ZONE	C-3 — MAP NO. — SPECIAL INSTRUCTIONS
GROUP / TYPE CONST. / FIRE ZONE / PROCESSED BY	V / III
STATISTICAL CLASSIFICATION	APT. / CONDO.
CLASS NO. 23 DWELL. UNITS 0	
SEWER MPA — BK. ___ PG. ___	VALIDATION
VALUATION $ 850 (D)	
$	
FINAL DATE	
BY	

CASH
JUL 20 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

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Date 7/20/90 Applicant _____

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License Number 560634 Lic. Class C-45

Contractor _____ Date 7/20/90

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Signature of Applicant or Agent _____ Date 7/20/90

FOR APPLICANT TO FILL IN			
BUILDING ADDRESS	778 NOGALES "G"		
CITY	WALNUT	ZIP	
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
TRACT	BLOCK	LOT NO.	
OWNER	MARIOS DYKSTRA	TEL. NO.	
ADDRESS	SAME		
CITY		ZIP	
ARCHITECT OR ENGINEER		TEL. NO.	
ADDRESS			
CONTRACTOR	FRED BOYLES	TEL. NO.	714/593-3928
ADDRESS	1174 CYNTHIA	LIC. NO.	560634
CITY		LIC. CLASS	C-45
SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW ☐
ONE 2½' WALL SIGN			ADD ☐
			ALTER ☐
			REPAIR ☐
USE OF EXISTING BLDG.			DEMOL ☐
APPLICANT (PRINT)		TEL. NO.	
ADDRESS			
PRESENT BUILDING ADDRESS			
LOCALITY			
MOVING CONTRACTOR		TEL. NO.	
ADDRESS			

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	45.00	Permit Fee	61.00
		Issuance Fee	15.75
Investigation Fee		Total Fee	76.75

BUILDING ADDRESS	778 Nogales "C"		
TRACT		LOT	
NEAREST CROSS ST.			
ASSESSOR MAP BOOK		PAGE	PARCEL
USE ZONE	C-3	MAP NO.	
		SPECIAL INSTRUCTIONS	
GROUP	TYPE CONST. V	FIRE ZONE III	PROCESSED BY
STATISTICAL CLASSIFICATION			APT. / CONDO.
CLASS NO. 22	DWELL. UNITS 0		
SEWER MPA			
BK. ___ PG. ___			
VALUATION $	850 a		
$			
FINAL DATE			
BY			

VALIDATION

CASH
JUL 20 '90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

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License Number 560634 Lic. Class B-45

Contractor _____ Date 7/20/81

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Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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Lender's Address _____

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Signature of Applicant or Agent _____ Date 7/20/90

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 778 NOGALES "B"
CITY WALNUT ZIP 91
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER EXCEL AUTO TEL. NO.
ADDRESS SAME
CITY ZIP
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR FRED BOYLES TEL. NO. 595 3829
ADDRESS 1174 CYNTHIA CT LIC. NO. 560634
CITY LA VERNE LIC. CLASS B-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: ONE 2X12' — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00 Permit Fee 61.00
Issuance Fee 15.75
Investigation Fee Total Fee 76.75

BUILDING ADDRESS 778 Nogales "B"
TRACT LOT
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO. SPECIAL INSTRUCTIONS
GROUP TYPE CONST. V FIRE ZONE III PROCESSED BY
STATISTICAL CLASSIFICATION APT. CONDO.
CLASS NO. 22 DWELL. UNITS 0

SEWER MPA
BK. ____ PG. ____
VALUATION 850.00
FINAL DATE
BY

VALIDATION

CASH
JUL 20 '90

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 713-0010669 Company STATE COMPENSATION INS. FUND

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 760818 Lic. Class B

Contractor VN CONSTRUCTION Date 2-7-05

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code)

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the wages as their sole compensation will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

X _____ 2-7-05

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 778 NOGALES ST. 6TH
CITY WALNUT ZIP 91789
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER DR. LAURENTINO DE GUIA TEL. (626) 589-2334
ADDRESS 17900 COLIMA RD.
CITY ROWLAND HEIGHTS ZIP 91742
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR VN CONSTRUCTION TEL. NO. (323) 221-6236
ADDRESS 2346 WORDALE AVE. LIC. NO. 760818
CITY L.A. CA. 90031 LIC. CLASS B

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: TENANT IMPROVEMENT

CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG. (323)
APPLICANT (PRINT) Cecil TEL. NO. 333-7693
ADDRESS

Will the applicant or future building occupant handle hazardous material or a mixture containing a hazardous material equal to or greater than the amounts specified on the Unified Program(UP) Form?
Note: For information regarding this form, contact LA County Haz Mat.
☐ Yes ☐ No

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification form the South Coast Air Quality Management District (SCAMD), see permitting checklist for guidelines?
☐ Yes ☐ No

I have read the Unified Program(UP) Form and the SCAQMD Permitting Checklist. I understand my requirements under the Los Angeles County Code, Title 2 Chapter 2.20, Sections 2.20.100 through 2.20.140 concerning hazardous materials reporting and for obtaining a permit from the SCAQMD.

Owner or Agent Signature _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 413.10 Permit Fee 340.08 (Was 409.44)
SMIP 2.52 Issuance Fee 44.80 (minus Refund)
Investigation Fee Total Fee 384.88

(Should Be $343.74
$69.36 Refund)

BUILDING ADDRESS 778 Nogales 6th
TRACT LOT
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO.
SPECIAL INSTRUCTIONS
GROUP TYPE CONST. FIRE ZONE 3 PROCESSED BY FM
STATISTICAL CLASSIFICATION CLASS NO 22 DWELL. UNITS 0 APT CONDO
SEWER MPA PQ.

VALIDATION

VALUATION $15000 01 03/29/2005 17:05 001109 PLU $384.88 CLERK 1
$11,694
FINAL DATE 7-26-05
BY

01 02/07/2005 16:33 000901 PLU $413.10 CLERK 1
3220

3/29/05 3240 $384.88
3/29/05 3270 $ 2.52
TOTAL $387.40

01 03/29/2005 17:05 001110 PLU $2.52 CLERK 1
3270

OMPENSATION DECLARATION

...that I have a certificate of consent to self ...rtificate of Worker's Compensation Insurance, or ...copy thereof (Sec. 3800, Lab. C.)

olicy No. 713-8010069 Company STATE COMPENSATION INS. FUND

☒ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 760818 Lic. Class B

Contractor VN CONSTRUCTION Date 4-18-05

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereb authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

VN 4-18-05

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

1

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
4	SINK		78 60
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
1	FLOOR SINK		19 65
	SUB		98 25
Plan check fee 50% Permit Fee			
PLUMBING PERMIT ISSUING FEE $			33 60
TOTAL FEE			131 85

Plan check applicant

Name

Address

City Tel. No.

BUILDING ADDRESS 778 NOGALES G & H

TRACT LOT

NEAREST CROSS ST. FRANCESCA

OWNER DR. LAURENTINO DeGIA

MAIL ADDRESS 1780 C COLIMA RD.

CITY ROWLAND HEIGHTS TEL NO (626) 589-3342

CONTRACTOR V N CONSTRUCTION

ADDRESS 2346 Rivendale Ave.

CITY L.A. CA TEL NO (323) 333-8693

STATE LICENSE NO. 760818 LIC CLASS B

FINAL DATE 7-26-05 PROCESSED BY

BY VALIDATION

01 04/20/2005 14:33 001206 PLU
3240 $131.85
CLERK 1

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. 713-001806 9 Company STATE COMP. INS. FUND

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 760818 Lic. Class B

Contractor VN CONSTRUCTION Date 3-29-05

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 3-29-05

City of Walnut, Dept. of Building and Safety

21201 La Puente Rd., Walnut, CA 91789 • (909) 598-5241

1

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft.	$	—	$
		—	
Residential Swimming Pools			
Outlets: Rec 40 Light ___ Sw ___	2.50	20	50 00
Total No 40 First 20 Additional	1.80	20	36 00
Lighting Fixtures First 20 Additional			
Total No			
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
___ Not exceeding 3			
___ Over 3 to 10 Incl.			
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			87 00
PLAN CHECK FEE (70% Permit Fee)			
PERMIT ISSUING FEE			33 60
TOTAL FEE			120 60

JOB ADDRESS 778 NOGALES GE H

TRACT _____ LOT _____

NEAREST CROSS ST. FRANCES CA

OWNER OR FIRM NAME DR. LAURENTINO DE GIA

MAIL ADDRESS 1780C COLIMA Rd.

CITY ROWLAND HEIGHTS (626) 589-3362

PLAN CHECK APPLICANT

ADDRESS

CITY _____ Tel. No

PERMIT APPLICANT VN CONSTRUCTION

ADDRESS 2246 Riverdale Ave.

CITY L.A. CA. Tel No (323) 333-7693

LICENSE OR REG. NUMBER 760818 Class B

FINAL DATE 7-26-05 BY

PROCESSED BY

VALIDATION

01 04/20/2005 14:33 001207 PLU
3240 $120.60
CLERK 1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

(Was part "C" 1)

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date 5-7-90

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 778 NOGALES ST
CITY WALNUT ZIP 91789
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER DAN GERSTNER TEL. NO. (818) 965-7922
ADDRESS 600 CHATHAM PL
CITY LA CANADA ZIP CA 91011
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR TEL. NO.
ADDRESS LIC. NO.
CITY LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
2518			

DESCRIPTION OF WORK: Tenant Improvement — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 491.64 — Permit Fee 583.58
Issuance Fee 15.75
Investigation Fee — Total Fee 599.33

BUILDING ADDRESS 778 Nogales COACHES CARWOOD
TRACT LOT "I" x "G"
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO. SPECIAL INSTRUCTIONS
GROUP TYPE CONST. V FIRE ZONE III PROCESSED BY
STATISTICAL CLASSIFICATION APT. CONDO.
CLASS NO. 22 DWELL. UNITS
SEWER MPA BK. PG.
VALUATION $ 23,000.00
$ 37,000
FINAL DATE 8.10.90
BY

VALIDATION

CASH MAY07'90 8250
CASH MAY22'90 3240

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR BUILDING PERMIT

1 (Was Part "C") "D"

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 1-10-96

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N NOGALES
CITY: WALNUT ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER TEL. NO.:
ADDRESS: 784 N NOGALES ST
CITY: WALNUT ZIP:
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: Wall (Between "A" & "D") — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 50.11 .50
Investigation Fee
Permit Fee 58.00
Issuance Fee 36.40
Total Fee 94.40

BUILDING ADDRESS: 778 Nogales "D"
TRACT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST. VN FIRE ZONE 3 PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS 0 APT. CONDO.
SEWER MPA: BK. ____ PG. ____
VALUATION 500.00
FINAL DATE:
BY:

VALIDATION

EXPIRED DATE 1-10-97

CASH 3240 94.40
JAN10 '96 #5016 CLK1 94-40

CASH 3270 0.50
JAN10 '96 #5017 CLK1 0-50

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT (was "B")

"E"

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

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Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

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CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date 3-23-90

ROMEO KOH

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	778 NOGALES ST		
CITY	WALNUT	ZIP	CA
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
TRACT	BLOCK	LOT NO.	
OWNER	DAN GERSTNER	TEL. NO.	965 7922
ADDRESS	600 CHATHAM PL		
CITY	LA CANADA, CA	ZIP	91011
ARCHITECT OR ENGINEER		TEL. NO.	
ADDRESS			
CONTRACTOR		TEL. NO.	
ADDRESS		LIC. NO.	
CITY		LIC. CLASS	

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
1080			

DESCRIPTION OF WORK: TENANT IMPROVEMENT BLDG. B

NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.

APPLICANT (PRINT)		TEL. NO.	
ADDRESS			
PRESENT BUILDING ADDRESS			
LOCALITY			
MOVING CONTRACTOR		TEL. NO.	
ADDRESS			

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	327.68	Permit Fee	392.10
		Issuance Fee	15.75
Investigation Fee		Total Fee	407.85

BUILDING ADDRESS	778 Nogales ST
TRACT	LOT
NEAREST CROSS ST.	
ASSESSOR MAP BOOK	PAGE / PARCEL
USE ZONE	C-3
MAP NO.	
SPECIAL INSTRUCTIONS	
GROUP	
TYPE CONST.	V
FIRE ZONE	III
PROCESSED BY	WV
STATISTICAL CLASSIFICATION	
CLASS NO. ____ DWELL. UNITS ____	
APT.	
CONDO.	
SEWER MPA	
BK. ____ PG. ____	
VALUATION	$21,600
$	
FINAL DATE	
BY	

VALIDATION

CASH MAR23'90

CASH APR25'90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT "aa E"

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date 10-12-89

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 NOGALES AVE BLDG "C"
CITY NOGALES ZIP
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER DAN GERSTNER TEL. NO. 965-7922
ADDRESS 600 CHATHAM PL
CITY LA CANADA ZIP 91011
ARCHITECT OR ENGINEER TEL. NO.
ADDRESS
CONTRACTOR TEL. NO.
ADDRESS LIC. NO.
CITY LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
2044			

DESCRIPTION OF WORK
TENANT IMPROVEMENT
GENERAL AUTO REPAIR

NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 274.98 Permit Fee 326.02
Issuance Fee 15.75
Investigation Fee Total Fee 341.77

BUILDING ADDRESS 778 NOGALES "C"
TRACT LOT
NEAREST CROSS ST. AMAR
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO. 8A
SPECIAL INSTRUCTIONS
GROUP B1&2 TYPE CONST. VN FIRE ZONE III PROCESSED BY
STATISTICAL CLASSIFICATION CLASS NO. 22 DWELL. UNITS 0 APT. CONDO.
SEWER MPA BK. ___ PG. ___
VALIDATION
VALUATION $ 18.000,00
FINAL DATE 6.27.90
BY

CASH OCT12 '89 3220 #7976
CASH NOV07 '89 3240 #7983

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-4241

APPLICATION FOR BUILDING PERMIT "was A"

A 1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☑ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N. NOGALES ST
CITY: WALNUT ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: TEL. NO. 88 965-7922
ADDRESS: DAN GERSTNER
CITY: 600 CHATHAM PL (A CANADA ZIP: 91011
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
1100			

DESCRIPTION OF WORK: Tenant Improv. — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 261.80 — Permit Fee 310.38
Issuance Fee 15.75
Investigation Fee — Total Fee 326.13

BUILDING ADDRESS: 778 Nogales "F"
TRACT: LOT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: III PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS: 0 APT.: CONDO.:
SEWER MPA: BK. ____ PG. ____
VALIDATION
VALUATION: 16,500
$
FINAL DATE: 11-2-96
BY:

1

INSPECTOR COPY

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

Was "F"

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 10-27-87

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	778 NOGALES AVE
CITY	WALNUT ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT	BLOCK LOT NO.
OWNER	DAN GERSTNER TEL. NO. 965-7922
ADDRESS	600 CHATHAM PL
CITY	LA CANADA ZIP 91011
ARCHITECT OR ENGINEER	TEL. NO.
ADDRESS	
CONTRACTOR	TEL. NO.
ADDRESS	LIC. NO.
CITY	LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW ☐
TENANT IMPROVEMENT			ADD ☐
GENERAL AUTO REPAIR			ALTER ☐
			REPAIR ☐
USE OF EXISTING BLDG.			DEMOL ☐

APPLICANT (PRINT)	Same TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	69.58	Permit Fee	200.90
		Issuance Fee	15.75
Investigation Fee		Total Fee	216.65

BUILDING ADDRESS	778 Nogales "A"
TRACT	LOT
NEAREST CROSS ST.	
ASSESSOR MAP BOOK	PAGE PARCEL
USE ZONE R-1	MAP NO.
	SPECIAL INSTRUCTIONS
GROUP	TYPE CONST. V FIRE ZONE III PROCESSED BY
STATISTICAL CLASSIFICATION	APT. CONDO.
CLASS NO 22 DWELL. UNITS 0	
SEWER MPA BK. ___ PG. ___	VALIDATION
VALUATION 10,000	
FINAL 6	
BY	

Denny
Dan G.
(626) 965-7922

NOV07 '88

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241*
*(909) Area Code effective Oct. 14, 1992

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 1WC2275360 Company Golden Eagle

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date 1-6-94 Applicant [signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 605688 Lic. Class C-45

Contractor FIRST SIGN CO. Date 1-6-94

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

[signature] 1-6-94
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 FRANCESCA DR #4B.
CITY: WALNUT ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: MAC CAR STEREO TEL. NO.:
ADDRESS:
CITY: ZIP:
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: FIRST SIGN CO. TEL. NO.: 818-448-1616
ADDRESS: 9647 E. RUSH ST LIC. NO.: 605688
CITY: S. EL MONTE 91733 LIC. CLASS: C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
			NEW ☐
			ADD ☐
			ALTER ☐
			REPAIR ☐
			DEMOL ☐

DESCRIPTION OF WORK: One set of channel letters & one wall sign face change.
USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	106.76	Permit Fee	126.86
SMI	0.50	Issuance Fee	26.40
Investigation Fee		Total Fee	153.26

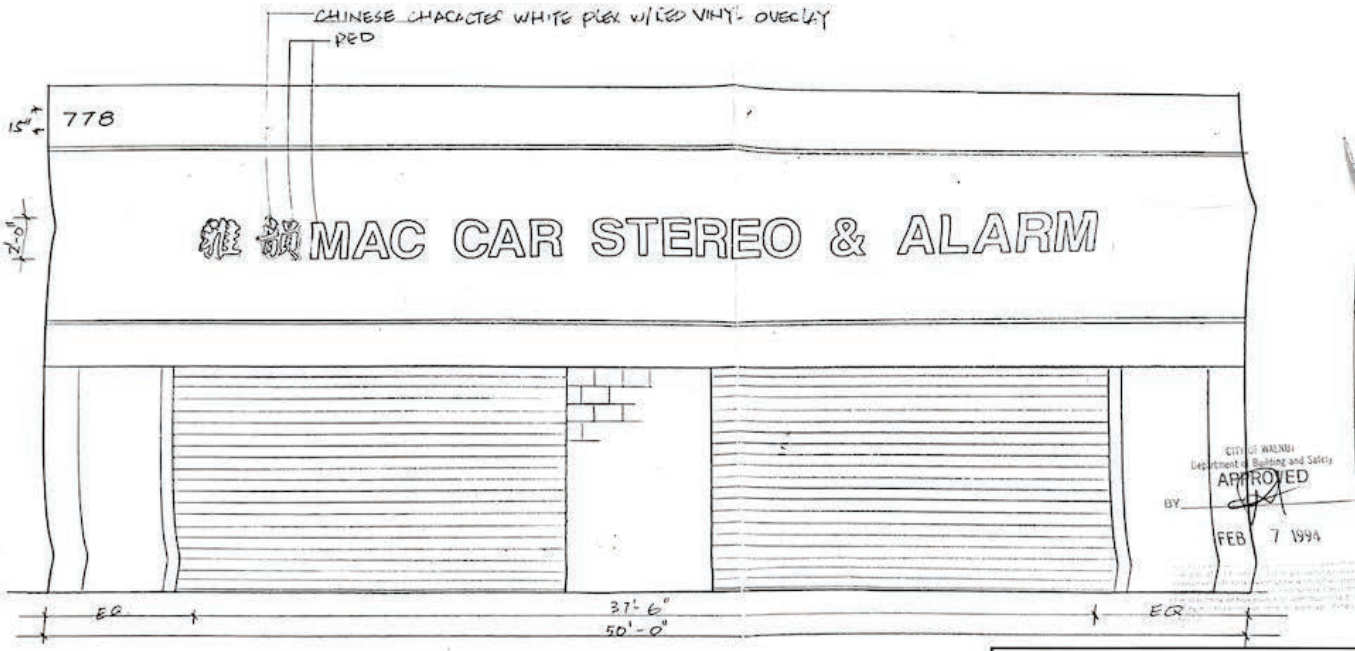
BUILDING ADDRESS: 778 FRANCESCA DR #4B
TRACT: LOT:
NEAREST CROSS ST.: NOGALES
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: PROCESSED BY:
STATISTICAL CLASSIFICATION: APT.: CONDO.:
CLASS NO.: DWELL. UNITS:
SEWER MPA: BK. PG.
VALUATION: 3000.00
FINAL DATE:
BY:

VALIDATION

3220 106.76
CASH 106.76
JAN06 '94 #1526 CLK1

EXPIRED DATE 2-7-95

3270 0.50
CASH 3240 99.50
FEB07 '94 #1742 CLK1
CASH 153.28
FEB07 '94 #1750 CLK1



CITY OF WALNUT
Department of Building and Safety
APPROVED
BY
FEB 7 1994

MAC CAR STEREO
778 FRANCESCA #48

CITY OF WALNUT
Department of Building and Safety

PROPOSED 5" DEEP INDIVIDUAL CHANNEL LTRS. WALL SIGN. INTERNALLY ILL'd. BY 13 MM NEONS. 1/8" THICK PLEX FACE WITH 3/4" GOLD TRIM .AP. 22 GUAGE SHEET METAL LTRS. TO BE PAINTED IN BROWN RETURNS & TO BE SECURED ON WALL BY 1/4"x2" NYLON ANCHORS. (MIN. 4 PER LETTER)

778 FRANCESCA DR. #4B SPC 1019-94
WALNUT, CA 91789

SCALE 1/4" = 1'-0"	APPROVED BY:	DRAWN BY J. Y
DATE 1.21.94		REVISED

FIRST SIGN CO. 448-1616 | DRAWING NUMBER 012194

PEPE'S RESTAURA

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PLUMBING PERMIT

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
1	WATER CLOSET		11 25
	BATH TUB		
	SHOWER		
	LAVATORY		
2	SINK		22 50
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
1	WATER HEATER		11 25
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		15 75
	TOTAL FEE		60 75

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 778 N NOGALES ST # E
TRACT 1 LOT
NEAREST CROSS ST.
OWNER DAN GERSTNER
MAIL ADDRESS 778 N NOGALES
CITY NOGALES TEL. NO.
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS

FINAL DATE 11-2-90 PROCESSED BY
BY RV VALIDATION

CASH
JUL 11 '90

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

_____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

7-11-90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)			
NUMBER	FIXTURE OR ITEM	•	FEE
1	WATER CLOSET		16 05
	BATH TUB		
	SHOWER		
1	LAVATORY		16 05
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		27 30
	TOTAL FEE		59 40

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 778 N NOGALES # I
TRACT LOT
NEAREST CROSS ST.
OWNER DAN GERSTNER
MAIL ADDRESS 784 N NOGALES ST
CITY WALNUT TEL. NO. 818 965 7922
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS
FINAL DATE PROCESSED BY
BY VALIDATION

CASH 3240 59.40
JAN10 '96 #5019 59-40 CLK1

EXPIRED DATE 1-10-97

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 1-10-96

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-7543

APPLICATION FOR PERMIT

HEATING-VENTILATING-AIR CONDITIONING

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. 387110 Company STATE FUND

☒ Certified Copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date 8/15/90 Applicant J&L METAL PRODUCTS

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 484761 Lic. Class C-43

Contractor J&L METAL Date 8/15/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Robert Muirhead 8/15/90
Signature of Permittee Date

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU	
	AIR HANDLING UNIT, CFM	
	BOILER, BTU	
	COMPRESSOR, BTU	
	VENTILATION SYSTEM	
1	EVAPORATIVE COOLER	15 00
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___	
	HEATER: SUSPENDED ___ WALL ___ UNIT	
1	KITCHEN Hood	45 00
	Plan check fee	
	PERMIT ISSUING FEE $	15 75
	TOTAL FEE	75 75

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY TEL. NO.

OWNER JOSIE'S KITCHENETTE

MAIL ADDRESS 778 NOGALES # F

CITY WALNUT TEL. NO.

CONTRACTOR J&L METAL PRODUCTS

ADDRESS 7007 MOTZ ST

CITY PARAMOUNT TEL. NO. 213 531-6595

STATE LICENSE NO. 484761 LIC. CLASS C-43

BUILDING ADDRESS 778 NOGALES # F

LOCALITY WALNUT

NEAREST CROSS ST.

PROCESSED BY WV

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL	9-25-90	

VALIDATION

CASH
AUG 15 '90

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT

HEATING-VENTILATING-AIR CONDITIONING

Josie's Kitchen.

BUILDING ADDRESS	778 -E nogales
TRACT	LOT
NEAREST CROSS ST.	FRANCESCA
PROCESSED BY	

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL	9-25-90	

VALIDATION

INSPECTOR COPY

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU	
~~0~~	~~AIR HANDLING UNIT, CFM~~	
	BOILER, BTU	
1	COMPRESSOR, BTU 48,000	18 00
1	VENTILATION SYSTEM	22 50
1	EVAPORATIVE COOLER	15 00
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___	
	HEATER: SUSPENDED ___ WALL ___ UNIT ___	
10	REGISTERS	30 00
Plan check fee 25% of above.		
	PERMIT ISSUING FEE $	15 75
	TOTAL FEE	101 25

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY TEL. NO.

OWNER ROMEO G. KOH ✓

MAIL ADDRESS 19255 KINCRA DR. ✓

CITY WALNUT TEL. NO. 810-1703 ✓

CONTRACTOR ZABATTIT HTG. ✓

ADDRESS 954 WAUREL AVE ✓

CITY POMONA TEL. NO. 623-3279 ✓

STATE LICENSE NO. 561159 LIC. CLASS C-20 ✓

CASH
JUL 06 '90

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. 1168678-90 Company STATE FUND

☒ Certified Copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date 7/6/90 Applicant ZABATTA HTG.

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 561159 Lic. Class C-20

Contractor ZABATTIT HTG Date 7/6/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Tuffy John Zabatta _____
Signature of Permittee Date

1

INSPECTOR COPY

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR ELECTRICAL PERMIT

JOB ADDRESS 778 NOGALES ST
TRACT LOT
NEAREST CROSS ST. FRANCESCA
OWNER OR FIRM NAME JAN GERTSNER
MAIL ADDRESS 600 CHATHAM PL
CITY LA CANADA Tel No. 9657922
PLAN CHECK APPLICANT - SAME AS ABOVE -
ADDRESS
CITY Tel. No.
PERMIT APPLICANT ROMEO G. KOH
ADDRESS 19255 RIVIERA DR
CITY WALNUT Tel No. 810-1703 (818)
LICENSE OR REG. NUMBER Class
FINAL DATE 11-2-90
PROCESSED BY
BY RK
VALIDATION

FOR APPLICANT TO FILL IN	EACH	NO.	FEE
New Residential Bldgs. & Pools	$	—	$
1 & 2 Family, Sq. Ft.			
Multi-family Sq. Ft.			
Residential Swimming Pools			
Outlets: Rec 22 Light 16 Sw. 7	1.35	20	27 00
Total No. 47 First 20 Additional	.90	27	24 30
Lighting Fixtures Total No. ~~24~~ 16 First 20 Additional	1.35	16	21 60
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___ Oven ___ Dryer ___ W.M. ___ Top ___ FAU ___ W.H. ___ Hood ___ Fan 2 Other ___ Disp. ___ Room Air Cond. ___	7.50	2	15 00
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR	13.50	2	27 00
9 Up to 1 Incl.			
___ Over 1 to 10 Incl.			
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Services ~~0-200~~ Amp. Under 600 V	27.00	1	27 00
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule)			
PERMIT FEE (Sub-Total)			141 90
PLAN CHECK FEE 50% OF Permit Fee ~~One-Fourth Permit Fee~~			70 95
PERMIT ISSUING FEE			15 75
TOTAL FEE			157 65

CASH APR16 '90 3220 86983

CASH APR25 '90 3240 89084

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 409401 Lic. Class C-10

Contractor Juhl inc Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Romeo Koh, 4/16/90
Signature of Permittee Date

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 6-26-90 Applicant [signature]

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 388647 Lic. Class C10

Contractor Electrical Date 6-26-90

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

[signature] 6-26-90

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

1

COACHES CORNER

INSPECTOR COPY

FOR APPLICANT TO FILL IN

	EACH $	NO. —	FEE $
New Residential Bldgs. & Pools Sq. Ft. _____			
Residential Swimming Pools Outlets: Rec. 24 Light 28 Sw. 10 Total No. _____ First 20	1.35	20	27 00
Additional			
Lighting Fixtures Total No. 18 First 20	1.35	18	24 30
Additional			
Fixed Appliances Not Over 1 HP: Range ___ Heater ___ D.W. ___ Oven ___ Dryer ___ W.M. ___ Top ___ FAU ___ W.H. ___ Hood ___ Fan ___ Other ___ Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
1-5T. Up to 1 Incl.			
___ Over 1 to 10 Incl.			
___ Over 10 to 50 Incl.			13 50
___ Over 50 to 100 Incl.			
___ Over 100			
Services (1) 0-200 Amp. Under 600 V		1	27 00
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			91 80
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			15 75
TOTAL FEE			107 55

JOB ADDRESS 778 Nogales # D

TRACT _____ LOT _____

NEAREST CROSS ST. Nogales & Francisca

OWNER OR FIRM NAME Alamo Car Wash

MAIL ADDRESS Same.

CITY Walnut Tel No. _____

PLAN CHECK APPLICANT _____

ADDRESS _____

CITY _____ Tel. No. _____

PERMIT APPLICANT Giraldo's Electric

ADDRESS 770 Melhan Ave.

CITY La Puente Tel. No. 9181524

LICENSE OR REG. NUMBER 388647 Class C10

FINAL DATE 8.10.90

BY [signature]

PROCESSED BY [signature]

VALIDATION

CASH JUN 26 '90

1

City of Walnut, Dept. of Build and Safety
21201 La Puente Rd., Walnut, CA 9178 (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 5-29-90 Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 388647 Lic. Class C-10

Contractor ELECTRICAL Date 5-29-90

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 5-29-90

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools	$	—	$
1 & 2 Family, Sq. Ft. _____			
Multi-family Sq. Ft. _____			
Residential Swimming Pools			
Outlets: Rec. 13 Light 11 Sw. 3	1.35	20	27 00
Total No. _____ First 20 Additional	.90	7	9 45
Lighting Fixtures First 20			
Total No. 11 Additional	1.35	11	14 85
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
___ Up to 1 Incl.			
COMPRESSOR Over 1 to 10 Incl.		1	13 50
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			69 80
PLAN CHECK FEE (One-Fourth Permit Fee)			
PERMIT ISSUING FEE			15 75
TOTAL FEE			80 55

JOB ADDRESS 788 N. NOGALES UNIT C

LOT _____ BLOCK _____

NEAREST CROSS ST. AMAR & NOGALES

OWNER OR FIRM NAME MARIO INCLAN.

MAIL ADDRESS _____

CITY _____ Tel No. _____

PERMIT APPLICANT _____

ADDRESS _____

CITY _____ Tel. No. _____

PERMIT APPLICANT GIRALDO'S ELECTRIC

ADDRESS 770 MELHAM AVE

CITY LA PUENTE Tel. No. 9186592

LICENSE OR R. NUMBER 388647 Class C-10

FINAL DATE 7.11.80 PROCESSED BY _____

BY _____ VALIDATION

CASH
MAY29 '90

3240

#9337

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 6-7-90 Applicant _____

NOTICE TO APPLICANT: If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 388647 Lic. Class C10

Contractor ELECTRICAL Date 6-7-90

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 6-7-90
Signature of Permittee — Date

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools	$	—	$
1 & 2-Family, Sq. Ft. _____			
Multi-family Sq. Ft. _____			
Residential Swimming Pools			
Outlets: Rec. 4 Light 7 Sw. 2	1,35	13	17 55
Total No. _____ First 20 / Additional			
Lighting Fixtures Total No. 7 First 20 / Additional	1,35	7	9 45
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
COMPRESSOR Up to 1 Incl.			
Over 1 to 10 Incl.		1	13 50
Over 10 to 50 Incl.			
Over 50 to 100 Incl.			
Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			40 50
PLAN CHECK FEE (One-Fourth Permit Fee)			
PERMIT ISSUING FEE			15 75
TOTAL FEE			56 25

JOB ADDRESS 778 NOGALES ST #B

TRACT _____ LOT _____

NEAREST CROSS ST. NOGALES & FRANCISCA.

OWNER OR FIRM NAME EXCEL AUTOCENTER

MAIL ADDRESS 778 Nogales st

CITY Walnut Ca. Tel No. 714 355 5251

PLAN CHECK APPLICANT _____

ADDRESS _____

CITY _____ Tel. No. _____

PERMIT APPLICANT GIRALDO'S ELECTRIC.

ADDRESS 770 MELHAM AVE.

CITY La Puente Ca. Tel. No. 818 918 6592

LICENSE OR REG. NUMBER 388647 Class C10

FINAL DATE 6-12-90

PROCESSED BY VV

BY _____

VALIDATION

CASH JUN07 '90 56.25

James Richenette

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

JOB ADDRESS 778 NOGALES # F
TRACT LOT
NEAREST CROSS ST. NOGALES & Francesca
OWNER OR FIRM NAME ALSMO CAR WASH.
MAIL ADDRESS SAME.
CITY WALNUT. Tel No.
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT GRALDO'S ELECTRIC
ADDRESS 770 Hellman Ave.
CITY La Puente Tel. No. 918 6592
LICENSE OR REG. NUMBER 388647 Class C10
FINAL DATE 9-25-90
PROCESSED BY
BY
VALIDATION

FOR APPLICANT TO FILL IN

	EACH $	NO. —	FEE $
New Residential Bldgs. & Pools Sq. Ft.			
Residential Swimming Pools			
Outlets: Rec. 22 Light 23 Sw. 7	1.35	20	27 00
Total No. First 20 Additional	.90	32	28 80
Lighting Fixtures Total No. 22 First 20	1.35	20	27 00
Additional	.90	2	1 80
Fixed Appliances Not Over 1 HP			
Range Heater D.W. Oven Dryer W.M. Top FAU W.H. Hood Fan Other Disp. Room Air Cond.			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
1.37 Up to 1 Incl.			10 50
Over 1 to 10 Incl.			
Over 10 to 50 Incl.			
Over 50 to 100 Incl.			
Over 100			
Services (1) 0-200 Amp. Under 600 V			27 00
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule)			
PERMIT FEE (Sub-Total)			122 10
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			15 75
TOTAL FEE			137 85

CASH
JUN 26 90

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 6-26-90 Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 388647 Lic. Class C10

Contractor Electrical Date 6-26-90

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 6-26-90

Signature of Permittee Date

1

City of Walnut, Dept. of Building and Safety
1201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT

HEATING-VENTILATING-AIR CONDITIONING Pepe's Rest.

BUILDING ADDRESS 778 W. Noyales St E
TRACT LOT
NEAREST CROSS ST. Francesca
PROCESSED BY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL		

VALIDATION

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. 1168678-90 Company STATE FUND

☒ Certified Copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date 7/6/90 Applicant ZABATTA HTG.

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 561159 Lic. Class C-20

Contractor ZABATTA Date 7/6/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ ☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Tirso Zabatta 7/6/90
Signature of Permittee Date

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU _____	
	AIR HANDLING UNIT, CFM _____	
	BOILER, BTU _____	
1	COMPRESSOR, BTU 48,000	18 00
1	VENTILATION SYSTEM	22 50
1	EVAPORATIVE COOLER	15 00
	FURNACE: FAU ___ GRAVITY ___ FLOOR: _____ BTU _____	
	HEATER: SUSPENDED ___ UNIT WALL	
11	Registers	33 00
	Plan check fee 25% of above.	
	PERMIT ISSUING FEE $	15 75
	TOTAL FEE	104 25

FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)

PLAN CHECK APPLICANT
NAME
ADDRESS
CITY TEL. NO.
OWNER Dan Gerkner
MAIL ADDRESS 784 Noyales
CITY Walnut TEL. NO. 965-7927
CONTRACTOR ZABATTA HTG.
ADDRESS 954 Laurel
CITY Pomona TEL. NO. 623-3229
STATE LICENSE NO. ~~561159~~ LIC. CLASS C-20

561159

7-6-90

CASH
JOBS NO

1

INSPECTOR COPY

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT
HEATING-VENTILATING-AIR CONDITIONING

BUILDING ADDRESS	778 NOGALES ST
TRACT	LOT
NEAREST CROSS ST.	FRANCESCA
PROCESSED BY	

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL		

VALIDATION

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	
	ABSORPTION UNIT, BTU		
	AIR HANDLING UNIT, CFM		
	BOILER, BTU		
	COMPRESSOR, BTU		
	VENTILATION SYSTEM		
	EVAPORATIVE COOLER		
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___		
	HEATER: SUSPENDED WALL UNIT		
	INLETS & OUTLETS		
	Hood (Comm.)	45	00
	Plan check fee 50 % of above.	22	50
	PERMIT ISSUING FEE $	15	75
	TOTAL FEE	60	75

PLAN CHECK APPLICANT

NAME DAN GERSTNER
ADDRESS 600 CHATHAM PL
CITY LA CANADA TEL. NO. 9657922
OWNER ROMEO KOH
MAIL ADDRESS 19255 RIVIERA DR
CITY WALNUT TEL. NO. (818) 810-1703
CONTRACTOR G. KRIESEL
ADDRESS 778 NOGALES
CITY WALNUT TEL. NO. 965 79xx
STATE LICENSE NO. LIC. CLASS

CASH
APR 13 '90 #8963

Expired P/C

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date 4/13/90

REDLAND SCHOOL DIST

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 7-26-89 Applicant DAN GERSTNER

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 7-26-89

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 NOGALES
CITY _____ ZIP _____
SIZE OF LOT _____ NO. OF BLDGS. NOW ON LOT _____
TRACT _____ BLOCK _____ LOT NO. _____
OWNER DAN GERSTNER TEL NO. 818/952-6315
ADDRESS 600 CHATHAM PL
CITY LA CANADA ZIP 91011
ARCHITECT OR ENGINEER GARY STEGEMANN TEL NO. 714/798-1123
ADDRESS 5½ E. STATE ST. REDLANDS
CONTRACTOR _____ TEL. NO. _____
ADDRESS _____ LIC. NO. _____
CITY _____ LIC. CLASS _____

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
9400	1		

DESCRIPTION OF WORK: BUILDING B AUTO CENTER

NEW ☑ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG. _____
APPLICANT (PRINT) _____ TEL. NO. _____
ADDRESS _____
PRESENT BUILDING ADDRESS _____
LOCALITY _____
MOVING CONTRACTOR _____ TEL. NO. _____
ADDRESS _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 1257.16 — Permit Fee 2343.00
ADD P.C. 734.39 — Issuance Fee 21.00
Investigation Fee _____ — Total Fee 2364.00
TOTAL 1991.55

APC $591.59

BUILDING ADDRESS: 778 NOGALES
TRACT _____ LOT _____
NEAREST CROSS ST. AMAR / FRANCESCA
ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____
USE ZONE C-3 — MAP NO. 8A — SPECIAL INSTRUCTIONS _____
GROUP B-2 — TYPE CONST. IIN — FIRE ZONE III — PROCESSED BY _____
STATISTICAL CLASSIFICATION _____ APT. _____ CONDO. _____
CLASS NO. 13 DWELL. UNITS 0
SEWER MPA BK. ___ PG. ___
VALUATION $ 169,000
$ 313,000
FINAL DATE 5-24-90
BY _____

VALIDATION
3220
$1257.16
#3073
11-21-88 BAL

PROP. DEV. TAX
AMOUNT 282.00

PAID _____
CASH JUL 26 '89 — 3220 591.59 — #6721 CLK1
CASH JUL 26 '89 — 3240 2196.00 — #6722 CLK1

2175.00
21.00
$2196.00

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut, CA 91789 • (714) 595-7543

MISCELLANEOUS APPLICATION

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Roberto Blanco 7-13-92
Signature of Permittee Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N. NOGALES #A
LOCALITY: WALNUT
NEAREST CROSS ST.: FRANCESCA.
LEGAL DESCRIPTION | LOT NO. | BLOCK
TRACT | NO. OF BLDGS. NOW ON LOT
SIZE OF LOT | USE OF EXISTING BLDG.
OWNER: ALBERTO BLANCO - FABIAN PRATO
MAIL ADDRESS: 778 N. NOGALES #A
CITY: WALNUT 91789 TEL NO: 818-9648838

APPLICATION FOR

TRAILER USE ☐ GEOLOGY INSPECTION ☐
OCCUPANCY INSPECTION ☒
SAFETY PERMIT ☐ (LIST ITEMS BELOW)

SIZE OF EXISTING BLDG.: 2000 # FT. | NO. OF STORIES: 1
PRESENT USE OF BUILDING
NO. OF EXISTING BUILDINGS ON LOT AND USE
NO. PARKING SPACES PROVIDED
PROPOSED USE OF BUILDING: AUTO REPAIR SHOP.
PROPOSED MAX. OCC.

PERMIT FEE: 640.00
ISSUANCE FEE: 16.50
TOTAL FEE: 656.50

BUILDING ADDRESS: 778 Nogales "A"
LOCALITY
NEAREST CROSS ST.
GROUP | TYPE CONST. | PROCESSED BY
MAP NO. | HIGHWAY CIRCLE | STATE MAJOR SECOND LOCAL
USE ZONE | SPECIAL CONDITIONS

OCCUPANCY GROUP
OCCUPANT LOAD
EXIT HARDWARE:
No Spec. Knowl. ☐
Panic Devices ☐
NO. OF EXITS
PARKING SPACES REQ'D | PROVIDED

LIMITED TIME USE

DATE DATE
FROM: TO:
FINAL APPROVAL | DATE 8-12-92 | INSPECTOR'S SIGNATURE

3220 656.50
CASH 656.50
JUL13'92 #5709 CLK1

5

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 - (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

TEMPORARY FILE COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date 2-6-98 Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 2-6-98
Signature of Permittee Date

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft. _____	$	—	$
Residential Swimming Pools		—	
Outlets: Rec. ___ Light ___ Sw ___ Total No. _____ First 20 / Additional			
Lighting Fixtures Total No. _____ First 20 / Additional			
Fixed Appliances Not Over 1 HP: Range ___ Heater ___ D.W. ___; Oven ___ Dryer ___ W.M. ___; Top ___ F.A.U. ___ W.H. ___; Hood ___ Fan ___ Other ___; Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances — Size & Type HP, KW, KVA, or KVAR: _____ Up to 1 Incl.			
_____ Over 1 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services: 0-200 Amp. Under 600 V; 201-1000 Amp. Under 600 V; Over 1000 Amp. or Over 600 V			39.35
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule)			
PERMIT FEE (Sub-Total)			39.35
PLAN CHECK FEE (50% Permit Fee)			28.10
PERMIT ISSUING FEE			
TOTAL FEE			67.45

JOB ADDRESS 772 N. HERMOSA ST. UNIT - D
TRACT _____ LOT _____
NEAREST CROSS ST. _____
OWNER OR FIRM NAME DAVID CHANG
MAIL ADDRESS 772 N. HERMOSA ST.
CITY WALNUT Tel No. 909 [illegible]
PLAN CHECK APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
PERMIT APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
LICENSE OR REG. NUMBER _____ Class _____
FINAL DATE _____ PROCESSED BY _____
BY _____

VALIDATION

2490 67.45
67.45
18028 CLK1

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date 2-9-93

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241*
*(909) Area Code effective Nov. 14, 1992

APPLICATION FOR BUILDING PERMIT

(Part of C) 1
" H "

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N NOGALES
CITY: WALNUT ZIP: 91776
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.
OWNER: DAN GERSTNER TEL. 965-7922
ADDRESS: SAME
CITY: ZIP
ARCHITECT OR ENGINEER: TEL. NO.
ADDRESS:
CONTRACTOR: TEL. NO.
ADDRESS: LIC. NO.
CITY: LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: Leonard Improvement Partition Wall Between "G + H" — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.
APPLICANT (PRINT): TEL. NO.
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 101.00 — Permit Fee 102.50
Investigation Fee 27.50 — Issuance Fee 27.50
Total Fee 129.70

BUILDING ADDRESS: 778 N NOGALES
TRACT: LOT:
NEAREST CROSS ST.
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.
SPECIAL INSTRUCTIONS
GROUP: TYPE CONST. VN FIRE ZONE: 3 PROCESSED BY
STATISTICAL CLASSIFICATION: CLASS NO. 20 DWELL. UNITS 0 APT. CONDO.
SEWER MPA: BK. ____ PG. ____
VALUATION $ 1500.00
FINAL DATE
BY

VALIDATION

EXPIRED DATE 2-9-94

CASH 3220 101.00
FEB09'93 #7034

CASH 1240 129.70
FEB09'93

CASH
FEB09'93

WORKERS' COMPENSATION DEC...

I hereby affirm that I have a certificate of consent ... insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

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☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Dan Gerstner 2/3/93

Signature of Permittee Date

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft. _____	$	—	$
Residential Swimming Pools		—	
Outlets: Rec. 4 Light 3 Sw. 1	17.00	8	136.00
Total No. _____ First 20 / Additional			
	17.00	3	51.00
Lighting Fixtures Total No. 3 First 20 / Additional			
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
_____ Up to 1 Incl.			
_____ Over 1 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			18.70
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			16.50
TOTAL FEE			35.20

JOB ADDRESS 778 N. Nogales St.
TRACT LOT
NEAREST CROSS ST. FRANCESCA
OWNER OR FIRM NAME DAN GERSTNER
MAIL ADDRESS 784 N. Nogales St.
CITY Walnut Tel No. 965-7122
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT Same
ADDRESS
CITY Tel. No.
LICENSE OR REG. NUMBER Class
FINAL DATE
PROCESSED BY
BY
VALIDATION

3240 35.20
CASH 35.20
FEB04 '93 #7002 CLK1

EXPIRED DATE 2-4-94

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

JOB ADDRESS 778 N NOGALES # I
TRACT LOT
NEAREST CROSS ST.
OWNER OR FIRM NAME DAN GERSTNER
MAIL ADDRESS 784 N NOGALES ST
CITY WALNUT Tel No. 968-7922
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT
ADDRESS
CITY Tel. No.
LICENSE OR REG. NUMBER Class
FINAL DATE
PROCESSED BY
BY
VALIDATION

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft.	$		$
Residential Swimming Pools			
Outlets: Rec. ___ Light ___ Sw. ___ First 20 Total No. ___ Additional			
Lighting Fixtures First 20 Additional Total No. ___			
Fixed Appliances Not Over 1 HP: Range ___ Heater ___ D.W. ___ Oven ___ Dryer ___ W.M. ___ Top ___ F.A.U. ___ W.H. ___ Hood ___ Fan ___ Other ___ Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR: ___ Up to 1 Incl. ___ Over 1 to 10 Incl. ___ Over 10 to 50 Incl. ___ Over 50 to 100 Incl. ___ Over 100			
Services 0-200 Amp. Under 600 V		1	38 25
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			38 25
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			27 30
TOTAL FEE			65 55

CASH JAN10 '96 3240 #5018 65.55 65.55 CLK1

EXPIRED DATE 1-10-97

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

[ ] Certified copy is hereby furnished.

[ ] Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

[X] I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

[ ] I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 1-10-96

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

[ ] Certified copy is hereby furnished.

[ ] Certified copy is filed with the city building inspection department

Date 3-6-98 Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

[X] I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

[ ] I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 3-6-98
Signature of Permittee — Date

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft. _____	$	—	$
Residential Swimming Pools		—	
Outlets: Rec. ___ Light ___ Sw. ___ Total No. _____ First 20			
Additional			
Lighting Fixtures Total No _____ First 20			
Additional			
Fixed Appliances Not Over 1 HP: Range ___ Heater ___ D.W ___ Oven ___ Dryer ___ W.M ___ Top ___ FAU ___ W.H ___ Hood ___ Fan ___ Other ___ Disp. ___ Room Air Cond ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
_____ Up to 1 Incl.			
_____ Over 1 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services 0-200 Amp. Under 600 V			39 35
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			

PERMIT FEE	(Sub-Total)	39 35
PLAN CHECK FEE	(50% Permit Fee)	
PERMIT ISSUING FEE		28 10
TOTAL FEE		67 45

JOB ADDRESS 778 N NOGALES ST UNIT H
TRACT _____ LOT _____
NEAREST CROSS ST _____
OWNER OR FIRM NAME DAN GERSTNER
MAIL ADDRESS 784 N NOGALES ST
CITY WALNUT Tel No. (626) 965-7922
PLAN CHECK APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
PERMIT APPLICANT Same
ADDRESS _____
CITY _____ Tel. No. _____
LICENSE OR REG. NUMBER _____ Class _____
FINAL DATE _____ PROCESSED BY _____
BY _____ VALIDATION

CASH
MAR01 '98

3240 67.45
67-45
#8029 CLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT
HEATING-VENTILATING-AIR CONDITIONING

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. F 50407 Company Fairmont Ins. exp. 10/90

☐ Certified Copy is hereby furnished.

☑ Certified copy is filed with the city building inspection department.

Date 3/21/90 Applicant Bob Hernandez

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

_____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 302965 Lic. Class C20 exp. 9/90

Contractor Cypress Htg. Date 3/21/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Bob Hernandez 3/21/90
Signature of Permittee Date

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	
	ABSORPTION UNIT, BTU		
	AIR HANDLING UNIT, CFM		
	BOILER, BTU		
1	COMPRESSOR, BTU 16,000 Heatpump	18	00
	VENTILATION SYSTEM		
	EVAPORATIVE COOLER		
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___		
	HEATER: SUSPENDED ___ WALL ___ UNIT ___		
	INLETS & OUTLETS		
Plan check fee 50 % of above.			
	PERMIT ISSUING FEE $	15	75
	TOTAL FEE	33	75

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY TEL. NO.

OWNER Dan Gerstner Dev.

MAIL ADDRESS 600 Chatham Pl.

CITY La Canada TEL. NO. 952-6315

CONTRACTOR Cypress Htg & Air

ADDRESS 5547 S. Soraine Ave.

CITY Glendora TEL. NO. 963-9810

STATE LICENSE NO. 302965 LIC. CLASS C20

BUILDING ADDRESS 778 N. Nogales "E"

TRACT LOT

NEAREST CROSS ST.

PROCESSED BY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL	11 2 90	

VALIDATION

CASH
APR 20 90

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-524

APPLICATION FOR PERMIT
SEWER - SEWAGE DISPOSAL

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 778 N HOGARES
LOCALITY: WALNUT CA
NEAREST CROSS ST.: SAN FRANCISCO
OWNER: DAN GUERSTUBD
MAIL ADDRESS: 600 CHATHAM PL
CITY: LA CANADA PHONE NO. 818 952-631[illegible]
LEGAL DESCRIPTION LOT NO.: PM 19520
BLOCK: TRACT: PM 16187
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
USE OF BUILDINGS: [illegible]
CONTRACTOR: TBP PLB
ADDRESS: 16295 RAMONA ST
CITY: PUENTE TEL. NO. 714 [illegible]
STATE LICENSE NO.: 391277 LIC. CLASS: C-36

NO	DESCRIPTION OF WORK	FEE	
	HOUSE SEWER CONNECTING TO PUBLIC SEWER	32	25
	SEPTIC TANK, SEEPAGE PIT OR PITS AND/OR DRAINFIELD		
	HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM		
	CONNECT ADDITIONAL BLDG. OR WORK TO HOUSE SEWER		
	OVERFLOW SEEPAGE PIT, DRAINFIELD EXTN., CESSPOOL, DRYWELL, MANHOLE		
	ALTER, REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM		
	Permit	15	75
	TOTAL FEE	48	00

OWNER'S AUTHORIZATION

I HAVE AT THIS DATE A CONTRACT WITH THE HEREIN NAMED CONTRACTOR TO CONNECT THE ABOVE DESCRIBED EXISTING DWELLING TO THE PUBLIC SEWER.

SIGNED THIS 5 DAY OF Dec, 19 89

OWNER OR OWNER'S AGENT: [illegible]

ADDRESS: 16295 RAMONA BLVD

CONNECTION DATA

STATION: DEPTH:
MANHOLE REFERENCE: UPPER / LOWER
Y. TYPE OF CONNECTION: CURB P.L. LENGTH FROM M.L. TO P.L.
CO. IMP. NO.: P.C. NO. / JOB NO.:
TRUNK PERMIT NO.: ROAD PERMIT NO.:

AFFIDAVIT	WAIVER	EASEMENT	REC. INSTR. NO.	DATE

HWY. OR ST. WIDENING:
STATE ENCROACHMENT PERMIT NO.:

CHARGES

CONNECTION CHARGE FEE	
REIMBURSEMENT FEE	

GROUP	MAP BK PG	FINAL DATE	PROCESSED BY
		12-6-89	CR

BY: [signature]

VALIDATION

CASH
DEC 05 '89

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 391277 Lic. Class C-36

Contractor TBP PLB Date 12-5-89

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

[signature] 12-5-89

Signature of Permittee Date

"B"

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. ~~249~~ 249 Company St Comp. Ins Fd

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department

Date 8-7-89 Applicant Juhl Electric, Inc

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 409401 Lic. Class C 10

Contractor _____ Date 8-7-89

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Dale Juhl 8-7-89

Signature of Permittee Date

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN

	EACH $	NO. —	FEE $
New Residential Bldgs. & Pools Sq. Ft. _____			
Residential Swimming Pools Outlets: Rec. 5 Light 27 Sw. 8 Total No. 40 First 20	1,35	20	27 00
Additional	,90	20	18 00
Lighting Fixtures Total No. 29 First 20	1,35	20	27 00
Additional	,90	9	8 10
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___ Oven ___ Dryer ___ W.M. ___ Top ___ FAU ___ W.H. ___ Hood ___ Fan ___ Other ___ Disp. ___ Room Air Cond ___			
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR			
_____ Up to 1 Incl.			
_____ Over 1 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services 0-200 Amp. Under 600 V	27.00	2	54 00
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			127 80
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			15 75
TOTAL FEE			143 55

JOB ADDRESS 778 Nogales

TRACT _____ LOT _____

NEAREST CROSS ST. _____

OWNER OR FIRM NAME Dan Gerstner

MAIL ADDRESS 600 Chetham Pl

CITY La Canada Tel No. (714) 790-1123

PLAN CHECK APPLICANT _____

ADDRESS _____

CITY _____ Tel. No. _____

PERMIT APPLICANT JUHL ELECTRIC

ADDRESS PO 194

CITY LOMA LINDA Tel. No. 824-2140

LICENSE OR REG. NUMBER 409401 Class C-10

FINAL DATE 5-24-90

PROCESSED BY _____

BY _____

VALIDATION

3240 143.55
CASH 143-55
AUG15 '89 #6892 CK1

3240 143.55
CASH 143-55
AUG17 '89 #6904 CK1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7543

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department

Date 10-5-09 Applicant DAN GERSTNER

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code you must forth with comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the wages as their sole compensation will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 10-5-09

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	778 N. NOGALES # F		
CITY	WALNUT	ZIP	
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
TRACT	BLOCK	LOT NO.	
OWNER	DAN GERSTNER	TEL. NO.	726 5109
ADDRESS	784 N NOGALES ST		
CITY	WALNUT	ZIP	91789
ARCHITECT OR ENGINEER		TEL. NO.	
ADDRESS			
CONTRACTOR		TEL. NO.	
ADDRESS		LIC. NO.	
CITY		LIC. CLASS	

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK: Relocate 8' Wall Partition			NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.			

APPLICANT (PRINT)		TEL. NO.
ADDRESS		

Will the applicant or future building occupant handle hazardous material or a mixture containing a hazardous material equal to or greater than the amounts specified on the Unified Program(UP) Form?
Note: For information regarding this form, contact LA County Haz Mat
☐ Yes ☐ No

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification form the South Coast Air Quality Management District (SCAMD), see permitting checklist for guidelines?
☐ Yes ☐ No

I have read the Unified Program(UP) Form and the SCAQMD Permitting Checklist. I understand my requirements under the Los Angeles County Code, Title 2 Chapter 2.69, Sections 2.20.100 through 2.20.140 concerning hazardous materials reporting and/or obtaining a permit from the SCAQMD.

Owner or Agent Signature _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 0F 1%		Permit Fee	81.40
SMF .50		Issuance Fee	50.60
Investigation Fee		Total Fee	132.00

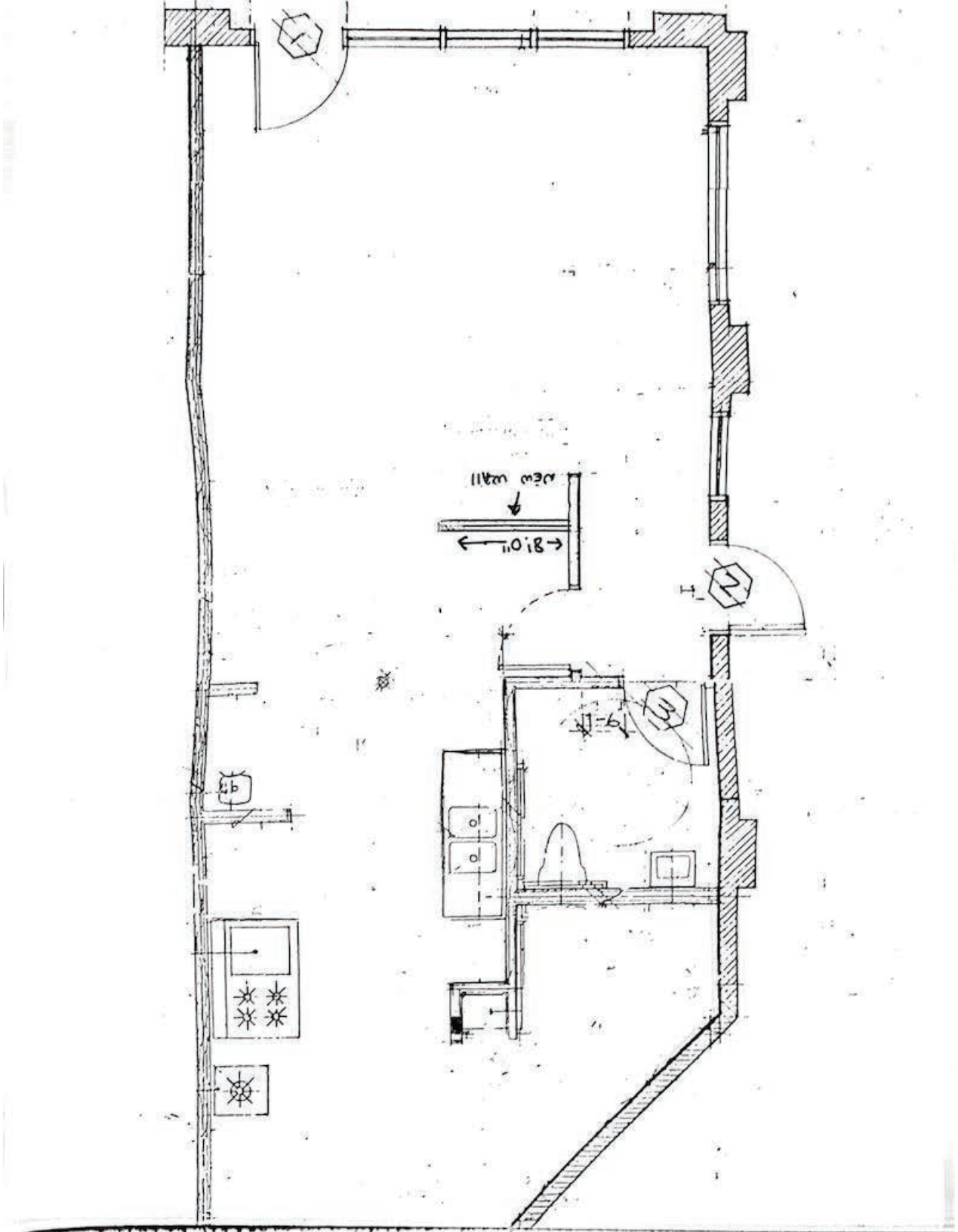
BUILDING ADDRESS	778 Nogales # F
TRACT	LOT
NEAREST CROSS ST.	
ASSESSOR MAP BOOK	PAGE / PARCEL
USE ZONE	MAP NO. / SPECIAL INSTRUCTIONS
GROUP / TYPE CONST.	FIRE ZONE: 3
PROCESSED BY	
STATISTICAL CLASSIFICATION	CLASS NO 22 DWELL. UNITS 1 / APT / CONDO
SEWER MPA	PG.
VALIDATION	
VALUATION $	700.00
$	
FINAL DATE	11-3-09
BY	

1

10/06/2009 08:47 006558 PLU
3240 $132.00
CLERK 1

10/06/2009 08:47 006559 PLU
3270 $0.50
CLERK 1

10/06/2009 08:47 006560 PLU
3271 $1.00
CLERK 1


new wall
18'0"

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 (909) 595-7543

APPLICATION FOR ELECTRICAL PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

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

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

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

Carrier OLD REPUBLIC

Policy No. AICW3796104

Exp. Date 3.31.2012 Applicant BM

(This section need not be completed if the permit is for one hundred dollars ($100) or less)

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

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

LICENSED CONTRACTOR'S DECLARATION

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

Lic. Class C10 Lic. No. 937330

Exp. Date 9.30.2013 Contractor BM

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' License Law for the following reason (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt there from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

(__) I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

(__) I am exempt under Sec. _____, B. & P. C. for this

reason: _____

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State Laws relating to building construction. I hereby authorize representatives of the City of Walnut to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.

PERMITTEE SIGNATURE BM

1210 N REDGUM ADDRESS ANAHEIM CITY 92814 ZIP

[X] Contractor [ ] Owner [ ] Other Licensed Professional

CONSTRUCTION LENDING DECLARATION

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work of which this permit is issued (Section 3097, Civil Code)

Lender's Name _____

Lender's Address

FOR APPLICANT TO FILL IN

	EA.	No	FEE	
NEW RESIDENTIAL BLDGS _____sq.ft				
OUTLETS:				
Rec. ____ Light ____ Sw. ____ First 20				
Total Number_____ Additional				
Lighting Fixtures: First 20				
Total Number _____ Additional				
FIXED APPLIANCES NOT OVER 1 HP				
Range ____ Heater ____ D.W. ____				
Oven ____ Dryer ____ W.M. ____				
Top ____ FAU ____ W.H. ____				
Hood ____ Fan ____ Other ____				
Disposal ____ Room Air Cond. ____				
Power Apparatus & Large Appliances Size & HP, KVW, KVA or KVAR				
_____ Not exceeding 3				
_____ Over 3 to 10 incl.				
_____ Over 10 to 50 incl.				
_____ Over 50 to 100 incl.				
_____ Over 100				
SERVICES				
0-200 Amp. Under 600 V				
201- 1000 Amp. Under 600 V				
Over 1000 Amp or Over 600 V				
Temp. Power Pole & Appurtenances		1	64	65
Sign With One Branch Circuit	SUB	1	64	65
Additional Sign Branch Circuits				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule)			129	30
PERMIT FEE (SUB-TOTAL)			~~64~~ ~~65~~	
PLAN CHECK FEE (70% PERMIT FEE) SB 1473				
PERMIT ISSUANCE FEE			41	10
TOTAL FEE			170	40

JOB ADDRESS 784 N NOGALES ST.

OWNER DAN & SYLVIA GERSTNER

ADDRESS 784 N NOGALES

CITY WALNUT TEL NO. 810-724-5109

APPLICANT POWER PLUS

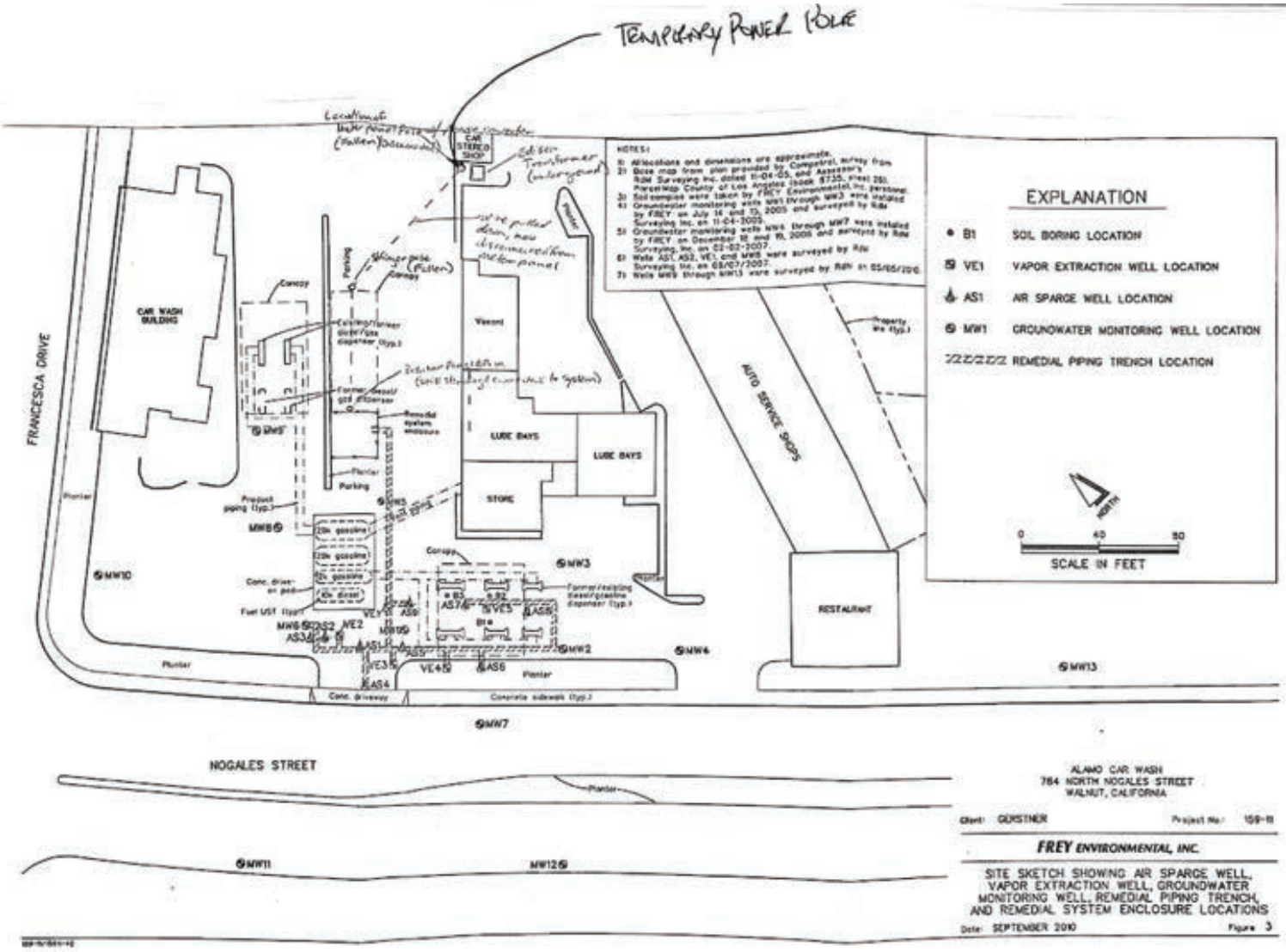
ADDRESS 1210 N. REDGUM

CITY ANAHEIM TEL No. 714-705-7551

LICENSE NO. 937330 CLASS C10

FINAL DATE 10-6-11 PROCESSED BY SMW

BY BM



ALAMO CAR WASH
784 NORTH NOGALES STREET
WALNUT, CALIFORNIA

Client: GERSTNER Project No.: 159-11

FREY ENVIRONMENTAL, INC.

SITE SKETCH SHOWING AIR SPARGE WELL, VAPOR EXTRACTION WELL, GROUNDWATER MONITORING WELL, REMEDIAL PIPING TRENCH, AND REMEDIAL SYSTEM ENCLOSURE LOCATIONS

Date: SEPTEMBER 2010 Figure: 3

192137

MOORE · Speediset · 405

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES — BUILDING AND SAFETY

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 784 N. NOGALES
CITY: WALNUT ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: TEL. NO.:
ADDRESS:
CITY: ZIP:
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: PROFESSIONAL FIRE TEL. NO. 714 923-8121
ADDRESS: 780 E. FRANCIS # H LIC. NO. 580332
CITY: LIC. CLASS C-16

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
			NEW ☑
			ADD ☐
			ALTER ☐
			REPAIR ☐
			DEMOL ☐

DESCRIPTION OF WORK: INSTALLATION OF HOOD AND DUCT FIRE SUPPRESSION SYSTEM
USE OF EXISTING BLDG.:
APPLICANT (PRINT): MARK JONES TEL. NO. 714 549 0152
ADDRESS: 206A 46TH ST NEWPORT BEACH

PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 51.00 — Permit Fee
Investigation Fee — Issuance Fee
Total Fee

SEE REVERSE FOR EXPLANATORY LANGUAGE

BUILDING ADDRESS: 784 N. Nogales
LOCALITY: Walnut
NEAREST CROSS ST:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: MAP NO.: SPECIAL CONDITIONS:
DISTRICT: GROUP: TYPE CONST.: FIRE ZONE: PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS: APT.: CONDO.:
SEWER MAP BK PG

VALIDATION

VALUATION $ 1,000.00
$
FINAL DATE
FINAL By

LOMA Ref. #
LOMA P/C #
LOMA Perm. #

Expired P/C

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.
☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

_____ Date: _____

Signature _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code.)

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code.)

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 7-6-90

76 A638A 20.0010 DPW 7/86

CITY OF WALNUT

PLANNING COMMISSION

cc: Colleen; City Clerk; File

Case No. TENTATIVE PARCEL MAP 24826 Date: December 5, 1997

I/We, Dan Gerstner
Applicant(s)/Owner(s) Name

784 Nogales Street
Mailing Address

Walnut, CA 91789
City, State, Zip Code

Telephone Number

hereby certify that I/we have the legal authority to make land use decisions for the property located at 750 Nogales Street. Furthermore, I/We hereby acknowledge that I/we am/are aware of, accept, and agree to abide by all of the Conditions of Approval for Case No. 24826, as listed in the Letter of Approval dated December 5, 1997.

Signature 1-23-98
Date

Signature Date

ATTEST:

Case No. 24826 was approved by the Planning Commission on December 3, 1997. This Affidavit of Conditions was received in the Community Development Department:

Received By: Date: 1/23/98

P.O. Box 682, Walnut, CA 91788-0682
21201 LA PUENTE ROAD
WALNUT, CALIFORNIA 91789-2018
Telephone (909) 595-7543
FAX (909) 595-6095

"BERT" ASHLEY
Mayor
JACK ISETT
Mayor Pro Tem
WILLIAM T. CHOCTAW, M.D.
H. THOMAS SYKES
JUNE WENTWORTH
Council Members

CITY OF WALNUT

May 3, 1994

Don Walker, Postmaster
280 S. Lemon Avenue
Walnut, Ca 91789

This is in reply to the conversation I had with your office regarding the Alamo Car Wash at 784 Nogales Street, Walnut.

At the present time, there are three businesses located at that address in addition to the car wash, all of which are sharing the same mailbox. According to the owner, Mr. Dan Gerstner, problems are resulting from this arrangement.

Mr. Gerstner suggested that they provide more mailboxes and use the addresses of 784 Nogales, "A", "B", and "C". so I informed him I would check with the Post Office to see if this was acceptable. Your office had no objections, but requested I send a letter stating those intentions.

If there are any questions regarding this matter, please contact me at (909) 598-5241, Monday through Thursday, 8:30 a.m. to 5:30 p.m. or Friday, 8:00 a.m. to 5:00 p.m.

Sincerely

Carleen Price
Building Department

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 (909) 595-7543

APPLICATION FOR ELECTRICAL PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

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

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

(X) I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and number are:

Carrier OLD REPUBLIC

Policy No. AICW3745104

Exp. Date 3.31.2012 Applicant [signature]

(This section need not be completed if the permit is for one hundred dollars ($100) or less)

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

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

LICENSED CONTRACTOR'S DECLARATION

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

Lic. Class C10 Lic. No. 937330

Exp. Date 9.30.2013 Contractor [signature]

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' License Law for the following reason (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt there from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

(__) I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

(__) I am exempt under Sec. _____, B. & P. C. for this

reason: _____

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State Laws relating to building construction. I hereby authorize representatives of the City of Walnut to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.

[signature]
PERMITTEE SIGNATURE

784 N RED GUM ANAHEIM 92806
ADDRESS CITY ZIP

☒ Contractor ☐ Owner ☐ Other Licensed Professional

CONSTRUCTION LENDING DECLARATION

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work of which this permit is issued (Section 3097, Civil Code).

Lender's Name _____

Lender's Address

FOR APPLICANT TO FILL IN

	EA	No.	FEE
NEW RESIDENTIAL BLDGS _____sq.ft. OUTLETS:			
Rec. ____ Light ____ Sw. ____ First 20			
Total Number_____ Additional			
Lighting Fixtures: First 20			
Total Number _____ Additional			
FIXED APPLIANCES NOT OVER 1 HP			
Range ____ Heater ____ D.W. ____			
Oven ____ Dryer ____ W.M. ____			
Top ____ FAU ____ W.H. ____			
Hood ____ Fan ____ Other ____			
Disposal ____ Room Air Cond. ____			
Power Apparatus & Large Appliances Size & HP, KVW, KVA or KVAR			
_____ Not exceeding 3			
_____ Over 3 to 10 incl.			
_____ Over 10 to 50 incl.			
_____ Over 50 to 100 incl.			
_____ Over 100			
SERVICES			
0-200 Amp. Under 600 V			
201- 1000 Amp. Under 600 V			
Over 1000 Amp or Over 600 V			
Temp. Power Pole & Appurtenances	Sub Pole		64 65
Sign With One Branch Circuit			
Additional Sign Branch Circuits	Panel		
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule)			
PERMIT FEE (SUB-TOTAL)			
PLAN CHECK FEE (70% PERMIT FEE) SB 1473			
PERMIT ISSUANCE FEE			41 10
TOTAL FEE			106 75

JOB ADDRESS 784 N. NOGALES ST.

OWNER DON & SYLVIA GERSTNER

ADDRESS 784 N NOGALES

CITY WALNUT TEL NO. 818-726-5109

APPLICANT POWER PLU

ADDRESS 1210 N RED GUM

CITY ANAHEIM TEL No. 714-765-7561

LICENSE NO. 937330 CLASS C10

FINAL DATE 10-13-11 PROCESSED BY

BY [signature]

REDLAND SCHOOL DIS

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-4241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 7-26-89 Applicant DAN GERSTNER

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☒ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date 7-26-89

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 NOGALES
CITY _____ ZIP _____
SIZE OF LOT _____ NO. OF BLDGS. NOW ON LOT _____
TRACT _____ BLOCK _____ LOT NO. _____
OWNER DAN GERSTNER TEL NO. 818-982-6315
ADDRESS 600 CHATHAM PL
CITY LA CANADA ZIP 91011
ARCHITECT OR ENGINEER GARY STEGEMAN TEL NO. 714-798-1123
ADDRESS 5½ E. STATE ST., REDLANDS
CONTRACTOR _____ TEL. NO. _____
ADDRESS _____ LIC. NO. _____
CITY _____ LIC. CLASS _____
SQ. FT. SIZE 2884 NO. OF STORIES 1 NO. OF FAMILIES _____

CHECK ONE	
NEW	☐
ADD	☐
ALTER	☐
REPAIR	☐
DEMOL	☐

DESCRIPTION OF WORK: CAR WASH
USE OF EXISTING BLDG. _____
APPLICANT (PRINT) _____ TEL. NO. _____
ADDRESS _____
PRESENT BUILDING ADDRESS _____
LOCALITY _____
MOVING CONTRACTOR _____ TEL. NO. _____
ADDRESS _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 1517.25 Permit Fee 3627.00
ADD P.C. 1565.70 Issuance Fee 21.00
Investigation 582.95 Total Fee 3648.00
TOTAL

BUILDING ADDRESS 784 NOGALES
TRACT _____ LOT _____
NEAREST CROSS ST. AMAR / FRANCESCA
ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____
USE ZONE C-3 MAP NO. 8A
SPECIAL INSTRUCTIONS _____
GROUP _____ TYPE CONST. VN FIRE ZONE III PROCESSED BY _____
STATISTICAL CLASSIFICATION _____ APT. _____ CONDO. _____
CLASS NO. 19 DWELL. UNITS 0
SEWER MPA _____ BK. _____ PG. _____
VALUATION $220,000 + 384,230 = 524,000
FINAL DATE 8.15.90
BY _____
PROP. DEV. TAX
AMOUNT 86.52
PAID CASH JUL 26 '89

VALIDATION

3220
$1517.25
#3078
11-21-88 Bld

3220 841.50
841.50
#6723 CLIO
3240 2796.00
2796.00
CASH JUL 26 '89
#6729 CLIO

2775.00
21.00
2796.00

APC 841.50 / TOTAL AC 2358.75

PLANS TO APPLICANT				
To:				
No.	Date	Returned No.	Returned Date	Approved

Approvals	Required Yes	Required No	Date Received or Approved
Water Certificate			
Health Department			
Fire Department			
Grading			
Geological			
Pedestrian Protection (Fence) (Canopy)			
Special Inspection (Conc.) (Masonry) (Welding)			
Lot Drainage			
Parking			

Approvals	Date	Inspector's Signature
Location—(Setback & Yards)		
Foundations	8-25-89	
Slab		
Frame	2-1-90	
Energy Insulation	2-8-90	
Lath/Drywall—Interior	2-15-90	
Lath—Exterior		
House Number—Correct & Posted		
Final—Enter on Front		
ROOF NAILING	11-1-89	
SHEARWALLS SP-1	1-11-90	

INSPECTOR'S NOTES

9.1.1989 CONNECTOR FOUNDATION OK

9-22-89 SLAB SOUTH CARWASH TUNNEL ONLY

10-19-89 PERIMETER NAILING AT EDGE OF 2ND FLOOR ONLY

11-20-89 SHEAR TRANSFER NAILING (2/S2) OK

11-30-89 SHEAR NAILING @ MANSARD + FRONT WALLS

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-8201

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company FREMONT

☑ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date 9-5-00 Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 561205 Lic. Class C-10,C-61/D49

Contractor COMPETROL Date 9-5-00

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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Lender's Address _____

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Signature of Applicant or Agent _____ Date 9-5-00

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 N. NOGALES

CITY WALNUT ZIP 91789

SIZE OF LOT _____ NO. OF BLDGS. NOW ON LOT _____

TRACT _____ BLOCK _____ LOT NO. _____

OWNER DAN GEISTNER TEL NO. 626-965-3714

ADDRESS 784 N. NOGALES

CITY WALNUT ZIP 91789

ARCHITECT OR ENGINEER _____ TEL. NO. _____

ADDRESS _____

CONTRACTOR COMPETROL TEL NO. 957-0808

ADDRESS 8714 LIMIT ST. LIC NO. 561205

CITY FONTANA LIC. CLASS 561205 C-10 C-61/D49

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: REPAIR FUEL SYSTEM

NEW ☐ ADD ☐ ALTER ☐ REPAIR ☑ DEMOL ☐

USE OF EXISTING BLDG. CARWASH/GAS

APPLICANT (PRINT) ROBERTO TEL NO. 957-0808

ADDRESS _____

PRESENT BUILDING ADDRESS _____

LOCALITY _____

MOVING CONTRACTOR _____ TEL. NO. _____

ADDRESS _____

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 289.20 Permit Fee _____

Fire Dept Investigation Fee _____ Issuance Fee _____

Total Fee _____

BUILDING ADDRESS 784 N NOGALES

TRACT _____ LOT _____

NEAREST CROSS ST. _____

ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____

USE ZONE _____ MAP NO. _____

SPECIAL INSTRUCTIONS _____

GROUP	TYPE CONST.	FIRE ZONE	PROCESSED BY

STATISTICAL CLASSIFICATION _____ APT. _____ CONDO _____

CLASS NO. _____ DWELL. UNITS _____

SEWER MFA

BK. _____ PG. _____

VALIDATION

VALUATION $ 8700.00

$ _____

FINAL DATE _____

BY _____

3220 289.20
C49 289.20
A1023100 A1485 DLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

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License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 10-12-89

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	784 NOGALES AVE
CITY	NOGALES ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT / BLOCK / LOT NO.	
OWNER	DAN GERSTNER TEL. NO. 965-7922
ADDRESS	600 CHATHAM PL
CITY	LA CANADA ZIP 91011
ARCHITECT OR ENGINEER	Jay Stegeman TEL. NO. 714 7981123
ADDRESS	5½ East State ST
CONTRACTOR	Owner/Dev TEL. NO. 8189657922
ADDRESS	784 W Nogales LIC. NO.
CITY	LIC. CLASS

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: MODIFICATION OF LUBE PIT

CHECK ONE: NEW ☒ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.

APPLICANT (PRINT) TEL. NO.

ADDRESS

PRESENT BUILDING ADDRESS

LOCALITY

MOVING CONTRACTOR TEL. NO.

ADDRESS

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	143.22	Permit Fee	169.62
		Issuance Fee	5.75
Investigation Fee		Total Fee	185.37

BUILDING ADDRESS	784 NOGALES
TRACT	MINI-MART
NEAREST CROSS ST.	
ASSESSOR MAP BOOK / PAGE / PARCEL	
USE ZONE	C-3
MAP NO.	8A
SPECIAL INSTRUCTIONS	
GROUP	B-1&2
TYPE CONST.	V-N
FIRE ZONE	III
PROCESSED BY	
STATISTICAL CLASSIFICATION	
CLASS NO.	22
DWELL. UNITS	0
APT.	
CONDO.	
SEWER MFA	
BK. / PG.	
VALUATION	$8000.00
FINAL DATE	8.10.90
BY	

VALIDATION

CASH OCT 12 '89

CASH NOV 07 '89

City of Walnut, Dept. of Building and Safety

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-4251
(909) Area Code effective Nov. 14, 1992

1

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 3-17-94

784

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: ~~786~~ N NOGALES 6TH D
CITY: WALNUT ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTMAN TEL: 965-7922
ADDRESS: 784 N NOGALES ST
CITY: WALNUT ZIP: 91789
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:
SQ. FT. SIZE: 1000 SF NO. OF STORIES: NO. OF FAMILIES:
DESCRIPTION OF WORK: TEN. IMP. "BEAUTY SALON"
USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 106.76
SMI $0.68
Investigation Fee

Permit Fee 126.86
Issuance Fee 26.40
Total Fee 153.26

BUILDING ADDRESS: ~~786~~ N. NOGALES #D
TRACT: LOT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: PROCESSED BY: RGD
STATISTICAL CLASSIFICATION: APT.: CONDO.:
CLASS NO.: DWELL. UNITS:
SEWER MFA
BK. PG.
VALIDATION
VALUATION $ 3,000
FINAL DATE: 5-2-94
BY:

CASH MAR23'94 3270 0.63 0.63 #1964 CLK1

CASH MAR16'94 3220 106.76 106.7 #1926

CASH MAR23'94 3240

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 - (714) 598-4241

1

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
2	LAVATORY		30 90
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
1	WATER HEATER		15 45
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
	SUBTL		46 35
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		26 40
	TOTAL FEE		$ 72 75

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 786 N NOGALES # D
TRACT LOT
NEAREST CROSS ST.
OWNER DAN GERSTNER
MAIL ADDRESS 764 N NOGALES ST
CITY WALNUT TEL. NO.
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS

FINAL DATE 5-3-94 PROCESSED BY RQD
BY VALIDATION

3240 72.75
CASH 72-75
MAR16'94 #1927 CLK1

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 3-17-94
Signature of Permittee

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 786 Nogales
CITY Walnut ZIP
SIZE OF LOT NO. OF BLDGS. NOW ON LOT
TRACT BLOCK LOT NO.
OWNER Silvia Gerstner TEL. NO. 965-7922
ADDRESS 784 N. Nogales St.
CITY Walnut ZIP 91789
ARCHITECT OR ENGINEER TEL. NO. 965-7922
ADDRESS
CONTRACTOR TEL. NO.
ADDRESS LIC. NO.
CITY LIC. CLASS
SQ. FT. SIZE 256 NO. OF STORIES NO. OF FAMILIES CHECK ONE
DESCRIPTION OF WORK Terrmite Drypowder. NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG.
APPLICANT (PRINT) TEL. NO.
ADDRESS
PRESENT BUILDING ADDRESS
LOCALITY
MOVING CONTRACTOR TEL. NO.
ADDRESS

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 116.88 — Permit Fee 38.50
Strong Motion Fee .50 — Issuance Fee 16.50
Investigation Fee — Total Fee 155.00

BUILDING ADDRESS 786 Nogales
TRACT Marino Car Wash
NEAREST CROSS ST.
ASSESSOR MAP BOOK PAGE PARCEL
USE ZONE C-3 MAP NO.
SPECIAL INSTRUCTIONS
GROUP TYPE CONST. V-N FIRE ZONE 3 PROCESSED BY
STATISTICAL CLASSIFICATION
CLASS NO. 22 DWELL. UNITS 0 APT. CONDO.
SEWER MFA
BK. PG.
VALIDATION
VALUATION $ 3200.00
$
FINAL DATE 3-1-93
BY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

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☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

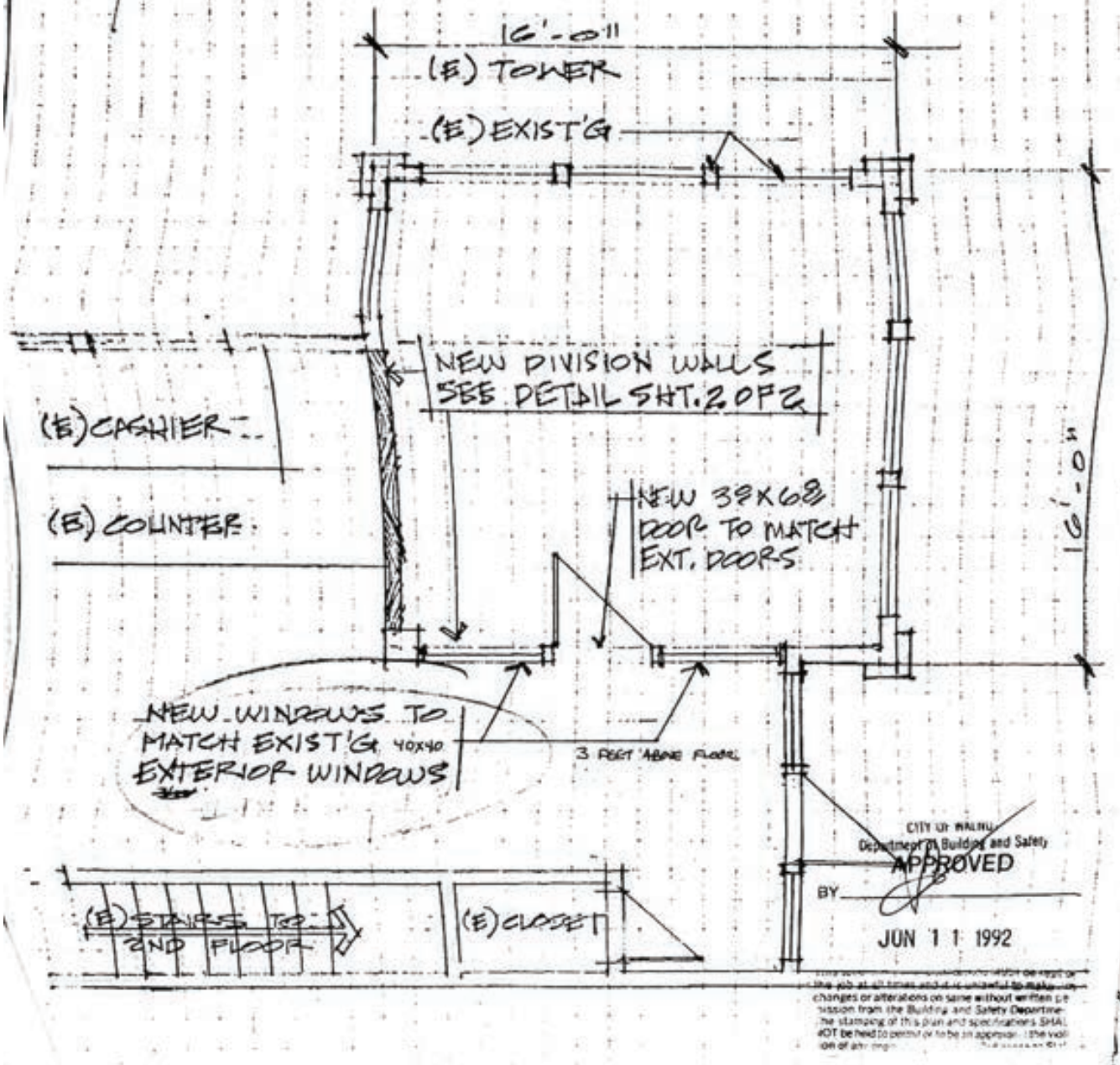
Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

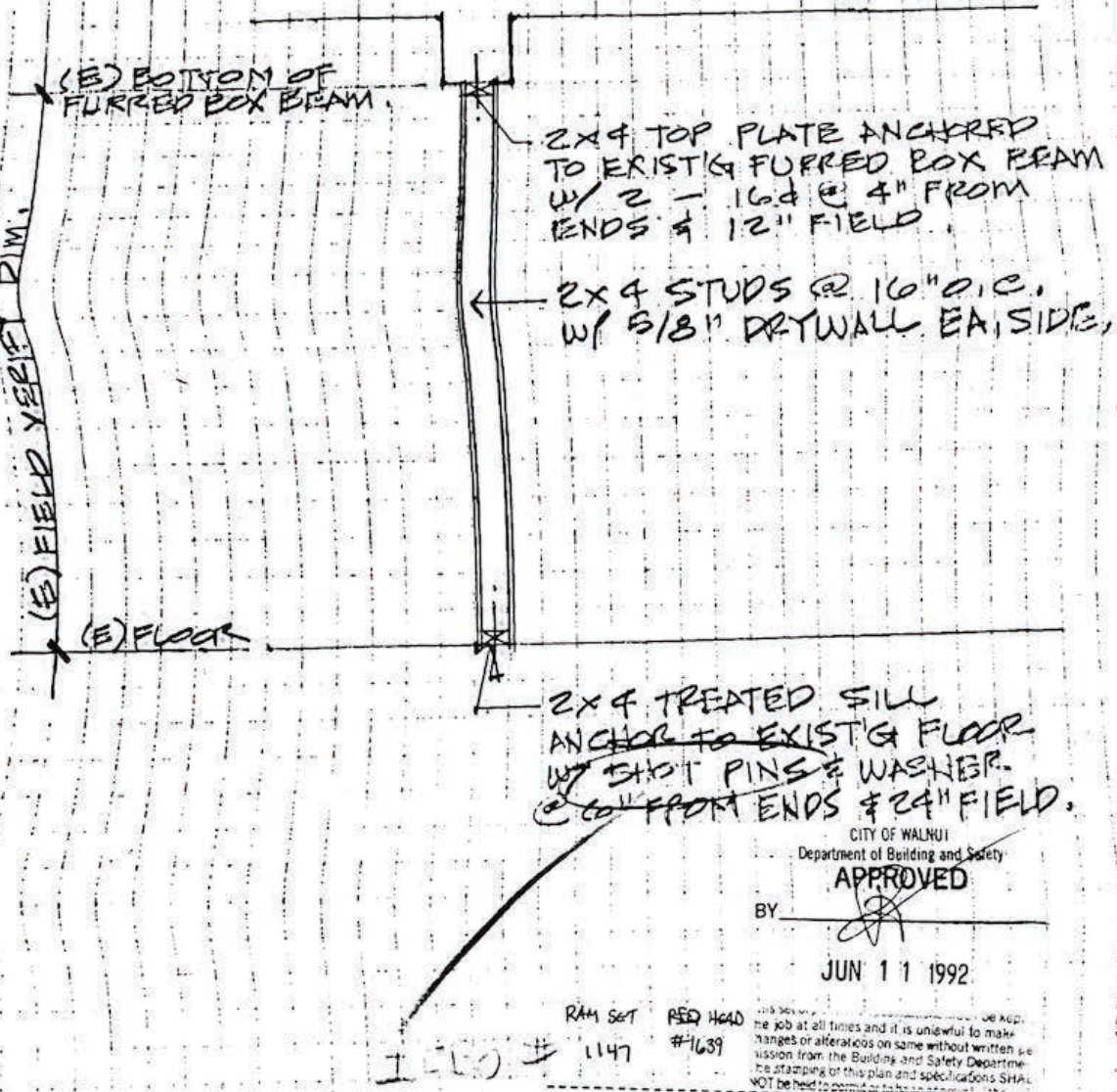
Signature of Applicant or Agent — Date 6-12-92

CASH MAY21'92	3220 #5241	116.88 CLK1
		116.88
CASH JUN12'92	3240 #5484	155.00 CLK1
	3270	0.50
CASH JUN12'92	#5485	0.50 CLK1



PARTIAL FLOOR PLAN SCALE: 1/4" = 1'-0"

ALAMO CAR WASH SHT. 1 OF 2



CITY OF WALNUT
Department of Building and Safety
APPROVED
BY
JUN 11 1992

RAM SET RED HEAD
#1147 #1639

...he job at all times and it is unlawful to make ...anges or alterations on same without written ...ission from the Building and Safety Departme... ...he stamping of this plan and specifications SHAL... NOT be held to permit or to be an approval of the ...tion of any pro...

Eastner

786 Nogales

DIVISION WALL
ALAMO CAR WAS

CITY OF WALNUT
Department of Building and Safety

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 3/28/90 Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 560634 Lic. Class C-45

Contractor SIGNDESIGN Date 3/28/90

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 784 N. NOGALES
CITY: WALNUT ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER TEL. NO.:
ADDRESS: SAME
CITY: ZIP:
ARCHITECT OR ENGINEER: SEI TEL. NO. (619) 543-1222
ADDRESS: 3935 HARNEY ST. #202 SAN DIEGO 92110
CONTRACTOR: SIGN DESIGN TEL. NO. 714 595-3929
ADDRESS: 1174 CYNTHIA CT LIC. NO. 560634
CITY: LA VERNE LIC. CLASS: C45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK: 4 - MONUMENT SIGNS
3 - 5X2 1 - 6X10

CHECK ONE: NEW ☑ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.: COM.
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 195.92
Permit Fee 234.10
Issuance Fee 15.75
Investigation Fee
Total Fee 249.85

BUILDING ADDRESS: 784 Nogales
TRACT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:

GROUP	TYPE CONST.	FIRE ZONE	PROCESSED BY
	V	III	

STATISTICAL CLASSIFICATION: CLASS NO. 20 DWELL. UNITS 0 APT. CONDO.

SEWER MFA
BK. PG.

VALIDATION

VALUATION $ 12,000.00

FINAL DATE
BY

EXPIRED DATE 4-10-91

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241
(909) Area Code effective Nov. 14, 1993

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

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☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent — Date 3/22/93

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 Nogales
CITY _____ ZIP _____
SIZE OF LOT _____ NO. OF BLDGS. NOW ON LOT _____
TRACT _____ BLOCK _____ LOT NO. _____
OWNER GERSTNER TEL. NO. _____
ADDRESS 784 N. Nogales St.
CITY Walnut ZIP 91789
ARCHITECT OR ENGINEER _____ TEL. NO. (909) 465-7922
ADDRESS _____
CONTRACTOR _____ TEL. NO. _____
ADDRESS _____ LIC. NO. _____
CITY _____ LIC. CLASS _____
SQ. FT. SIZE 100 NO. OF STORIES _____ NO. OF FAMILIES _____ CHECK ONE
DESCRIPTION OF WORK TI's - Office — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
USE OF EXISTING BLDG. _____
APPLICANT (PRINT) Same TEL. NO. _____
ADDRESS _____
PRESENT BUILDING ADDRESS _____
LOCALITY _____
MOVING CONTRACTOR _____ TEL. NO. _____
ADDRESS _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 101.00 — Permit Fee 102.00
SMI 3.46 — Issuance Fee 25.90
Investigation Fee _____ — Total Fee 127.90

BUILDING ADDRESS 784 Nogales
TRACT _____ LOT _____
NEAREST CROSS ST. _____
ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____
USE ZONE C-2 MAP NO. _____
SPECIAL INSTRUCTIONS _____
GRADE _____ TYPE CONST. VII FIRE ZONE 3 PROCESSED BY _____
STATISTICAL CLASSIFICATION _____ APT. _____ CONDO. _____
CLASS NO. 22 DWELL. UNITS 0

SEWER MFA
BK. ____ PG. ____

VALIDATION

VALUATION $ 1650.00
$ _____
FINAL DATE 4-20-93
BY R

		3240	127.90
			127.90
CASH	MAR22'93	#7291	CLK1
		3220	101.00
CASH	MAR22'93		101.00
		#7292	CLK1
		3270	3.46
CASH	MAR22'93		3.46
		#7293	CLK1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd. Walnut, CA 91789 • (714) 595-5241

1

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

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LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Dan Gerstner — Signature of Applicant or Agent

5/10/91 — Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 784 N. Noggles St.
CITY: Walnut ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN + SILVIA GERSTNER TEL. NO.: 965-7922
ADDRESS: 600 Chatham Pl.
CITY: La Canada ZIP: 91011
ARCHITECT OR ENGINEER: GARY Stegeman TEL. NO.: 798-1123
ADDRESS: 5½ E. State St. Redlands.
CONTRACTOR: DAN GERSTNER TEL. NO.: 965-7922
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
700			

DESCRIPTION OF WORK: Detail Shop — NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.:
APPLICANT (PRINT): SAME AS ABOVE TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS: 784 N. Noggles St.
LOCALITY: Alamo Chl. WASH
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 340.84 — Permit Fee 578.91
2.30 — Issuance Fee 16.50
Investigation Fee — Total Fee 595.41

BUILDING ADDRESS: 784 Noggles
TRACT: LOT:
NEAREST CROSS ST.: Francesca
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: C-3 MAP NO.:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: VN FIRE ZONE: 4 PROCESSED BY: WV
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS: 1 APT.: CONDO.:
SEWER MFA BK. ____ PG. ____
VALIDATION
VALUATION $ 22,400 00
$
FINAL DATE: 12.4.91
BY:

CASH MAY10 '91 — 3220 340.84 — 340.84 — #2140 CLK1

CASH AUG26 '91 — 3240 595.41 — 595.41 — #3316 CLK1

CASH AUG26 '91 — 3270 2.30 — 2.30 — #3317 CLK1

784 NOGALES

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date 7-26-89 Applicant DAN GERSTNER

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☑ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date 7-26-89

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	784 Nogales
CITY	ZIP
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT
TRACT / BLOCK / LOT NO.	
OWNER	DAN GERSTNER TEL. NO. 818 9826315
ADDRESS	600 CHATHAM PL
CITY	LA CANADA ZIP 91011
ARCHITECT OR ENGINEER	GARY STEGEMANN TEL. NO. 714 7981183
ADDRESS	S½ E STATE ST REDLANDS
CONTRACTOR	TEL. NO.
ADDRESS	LIC. NO.
CITY	LIC. CLASS
SQ. FT. SIZE	1664
NO. OF STORIES	
NO. OF FAMILIES	
CHECK ONE	NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
DESCRIPTION OF WORK	CANAPY (CarWash) 1664 sq ft.
USE OF EXISTING BLDG.	
APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	335.76	Permit Fee	395.00
		Issuance Fee	21.00
Investigation Fee		Total Fee	416.00

BUILDING ADDRESS	784 Nogales
NEAREST CROSS ST.	LOT
ASSESSOR MAP BOOK / PAGE / PARCEL	
USE ZONE	C3
MAP NO.	
SPECIAL INSTRUCTIONS	
GROUP / TYPE CONST.	VN
FIRE ZONE	III
PROCESSED BY	
STATISTICAL CLASSIFICATION	CLASS NO 22 DWELL. UNITS 00
APT. / CONDO.	
SEWER MPA	BK. ___ PG. ___
VALIDATION	
VALUATION	$ 29,700.00
FINAL DATE	8.15.90
BY	

3220 335.76
CASH 335.76
FEB08 '89 #4095 CLK1

3240 416.00
CASH 416.00
JUL26 '89 #5725 CLK1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

1

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 784 NOGALES "B Type"
CITY: WALNUT ZIP:
SIZE OF LOT: Bld "A" NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: ALAMO TEL. NO.:
ADDRESS:
CITY: ZIP:
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: FRED BOYLE SIGN DESIGN TEL. NO. 714 595-3929
ADDRESS: 1174 CYNTHIA LIC. NO. 560634
CITY: LA VERN LIC. CLASS C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE

DESCRIPTION OF WORK:
145/F WALL SIGN 2x12
B-Type 4- 2x9'
Sign 2- 2x7'

CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

USE OF EXISTING BLDG.:
APPLICANT (PRINT): FRED BOYLES TEL. NO. 714 595-3929
ADDRESS: 1174 CYNTHIA CT
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ ~~145.92~~ $51 ck
Investigation Fee

Permit Fee 61.00
Issuance Fee 15.75
Total Fee 76.75

BUILDING ADDRESS: 784 Nogales "Bld A"
TRACT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK:
USE ZONE: C-3 MAP NO.: PAGE: PARCEL:
SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST. V FIRE ZONE III PROCESSED BY:
STATISTICAL CLASSIFICATION: CLASS NO. 22 DWELL. UNITS 0 APT.: CONDO.:
SEWER MFA BK. ___ PG. ___

VALIDATION

VALUATION: 12,000.
850 ck
FINAL DATE:
BY:

(PC Only)

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	784 NOGALES (A) Type
CITY	WALNUT ZIP
SIZE OF LOT	BDA "N" NO. OF BLDGS. NOW ON LOT
TRACT	BLOCK LOT NO.
OWNER	TEL. NO.
ADDRESS	
CITY	ZIP
ARCHITECT OR ENGINEER	TEL. NO.
ADDRESS	
CONTRACTOR	FRED BOYLES TEL. NO.
ADDRESS	1174 CANTHAGE LIC. NO. 560634
CITY	CA VERNE LIC. CLASS C-45

SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	CHECK ONE
DESCRIPTION OF WORK			NEW ☐
ONE EXPRESS CUBE			ADD ☐
ONE FOOD MART			ALTER ☐
CHANNEL LETTERS			REPAIR ☐
USE OF EXISTING BLDG. "A" Type Sign			DEMOL ☐

APPLICANT (PRINT)	TEL. NO.
ADDRESS	
PRESENT BUILDING ADDRESS	
LOCALITY	
MOVING CONTRACTOR	TEL. NO.
ADDRESS	

REQUIRED SETBACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EAST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $	64.18	Permit Fee	76.50
		Issuance Fee	15.75
Investigation Fee		Total Fee	92.25

BUILDING ADDRESS	784 Nogales BDA "N"
TRACT	LOT
NEAREST CROSS ST.	
ASSESSOR MAP BOOK	PAGE PARCEL
USE ZONE	MAP NO.
PC-3	SPECIAL INSTRUCTIONS
GROUP	TYPE CONST. V FIRE ZONE III PROCESSED BY
STATISTICAL CLASSIFICATION	APT. CONDO.
CLASS NO 22 DWELL. UNITS 0	
SEWER MFA	
BK. ____ PG. ____	VALIDATION
VALUATION $ 2700-	
$ 1350	
FINAL DATE	
BY	

(PC Only)

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR BUILDING PERMIT

1

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm ~~that I~~ have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 N NOGALES
CITY [redacted]
SIZE OF LOT _____ NO. OF BLDGS. NOW ON LOT _____
TRACT _____ BLOCK _____ LOT NO. _____
OWNER DAN GERSTNER TEL NO. 626 965-7922
ADDRESS 784 N NOGALES ST
CITY _____ ZIP _____
ARCHITECT OR ENGINEER _____ TEL. NO. _____
ADDRESS _____
CONTRACTOR _____ TEL. NO. _____
ADDRESS _____ LIC. NO. _____
CITY _____ LIC. CLASS _____
SQ. FT. SIZE 1200 NO. OF STORIES _____ NO. OF FAMILIES _____

CHECK ONE
NEW ☐
ADD ☐
ALTER ☐
REPAIR ☐
DEMOL ☐

DESCRIPTION OF WORK
Lattice Awning
8' X 60' X 20'
[redacted]
USE OF EXISTING BLDG.
APPLICANT (PRINT) [illegible] TEL. NO. _____
ADDRESS _____
PRESENT BUILDING ADDRESS _____
LOCALITY _____
MOVING CONTRACTOR _____ TEL. NO. _____
ADDRESS _____

REQUIRED SET BACK	YARD	WAY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $ 423.81 Permit Fee 502.40
SMIP 3.99 Issuance Fee 31.40
Investigation Fee _____ Total Fee 539.80

BUILDING ADDRESS 784 N Nogales
BLOCK _____
NEAREST CROSS ST. _____
ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____
USE ZONE C-3 MAP NO. _____
SPECIAL INSTRUCTIONS _____
GROUP _____ TYPE CONST. VN FIRE ZONE 3 PROCESSED BY _____
STATISTICAL CLASSIFICATION _____
CLASS NO 23 DWELL. UNITS _____ APT. CONDO _____
SEWER MFA
BK. ____ PG. ____
VALUATION 18,912.00
FINAL DATE 2-5-99
BY [illegible]

VALIDATION
SPC 29-98

CASH JUL 13 '98
3220 423.81
423.81
#8601 CLK1

CASH OCT 28 '98
3240 539.80
539.80
#9070 CLK1

CASH OCT 28 '98
3270 3.99
3.99
#9071 CLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 595-7241

APPLICATION FOR BUILDING PERMIT

INSPECTOR COPY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is used, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to building construction, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant or Agent — Date: 9-8-95

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 784 N NOGALES
CITY: WALNUT ZIP: 91789
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: DAN GERSTNER 952-6315
ADDRESS: 600 CHATHAM PL
CITY: LA CANADA ZIP: 91011
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: TEL. NO.:
ADDRESS: LIC. NO.:
CITY: LIC. CLASS:
SQ. FT. SIZE: 100 NO. OF STORIES: NO. OF FAMILIES:
DESCRIPTION OF WORK: T.I
USE OF EXISTING BLDG.:
APPLICANT (PRINT): TEL. NO.:
ADDRESS:
PRESENT BUILDING ADDRESS:
LOCALITY:
MOVING CONTRACTOR: TEL. NO.:
ADDRESS:

CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				

P.C. Fee $		Permit Fee	107.00
SMI	2.00	Issuance Fee	35.80
Investigation Fee		Total Fee	142.80

BUILDING ADDRESS: 784 Nogales
TRACT: LOT:
NEAREST CROSS ST.:
ASSESSOR MAP BOOK: PAGE: PARCEL:
USE ZONE: MAP NO.: SPECIAL INSTRUCTIONS:
GROUP: TYPE CONST.: FIRE ZONE: PROCESSED BY:
STATISTICAL CLASSIFICATION: APT: CONDO:
CLASS NO.: DWELL. UNITS:
SEWER MFA
BK. ___ PG. ___

VALIDATION

VALUATION $ 2000
$
FINAL DATE
BY
DATE

EXPIRED 9-5-96

3270 2.00
CASH 2.00
SEP05'95 #4581 CLK1
3240 142.80
CASH 142.80
SEP05'95 #4582 CLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-4241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) STATE COMP INS FUND

Policy No. ~~229~~ 449 Company JUHL E

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department

Date 8-7-89 Applicant JUHL ELECTRIC

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 409401 Lic. Class C-10

Contractor JUHL ELEC Date 8-7-89

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Dale Juhl 8-7-89
Signature of Permittee Date

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft.	$	—	$
Residential Swimming Pools		—	
Outlets: Rec 46 Light 65 Sw. 16	1.35	20	27 —
Total No. 127 First 20			
Additional	.90	107	96 30
Lighting Fixtures First 20	1.35	20	27 —
Total No. 60 Additional	.90	40	36 —
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond. ___			
Power Apparatus & Large Appliances			
Size & Type (HP) KW, KVA, or KVAR			
3 Up to 1 Incl.			
14 Over 1 to 10 Incl.	13.50	14	189 =
4 Over 10 to 50 Incl.	33.00	4	132 =
___ Over 50 to 100 Incl.			
___ Over 100			
Services			
0-200 Amp. Under 600 V	27.00	2	54 00
201-1000 Amp. Under 600 V		1	32 =
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			613 30
PLAN CHECK FEE (50% Permit Fee)			306 65
PERMIT ISSUING FEE			15 75
TOTAL FEE			629 05

JOB ADDRESS 784 NOGALES

TRACT LOT

NEAREST CROSS ST. N/A

OWNER OR FIRM NAME

MAIL ADDRESS

CITY Tel No.

PLAN CHECK APPLICANT

ADDRESS

CITY Tel. No.

PERMIT APPLICANT JUHL ELECTRIC

ADDRESS PO 194

CITY LOMA LINDA Tel. No. 824-2140

LICENSE OR REG. NUMBER 409401 Class C-10

FINAL DATE 8-15-90

BY

PROCESSED BY

VALIDATION

CASH AUG08 '89 — 3220 306.65 — 306-65 — #6823 CLK1

CASH AUG15 '89 — 3240 629.05 — 629-05 — #6890 CLK1

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR ELECTRICAL PERMIT

INSPECTOR COPY

JOB ADDRESS 784 N NOGALES ST
TRACT LOT
NEAREST CROSS ST. FRANCESCA
OWNER OR FIRM NAME ALAMO CAR WASH
MAIL ADDRESS
CITY Tel No.
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT DAN GERSTNER
ADDRESS Same
CITY Tel. No.
LICENSE OR REG. NUMBER Class
FINAL DATE 4-20-93
PROCESSED BY
BY
VALIDATION

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools Sq. Ft.	$		$
Residential Swimming Pools			
Outlets: Rec. 4 Light 6 Sw. First 20	1??	10	1700
Total No. Additional			
Lighting Fixtures First 20	1??	6	10 20
Total No. 6 Additional			
Fixed Appliances Not Over 1 HP			
Range Heater D.W.			
Oven Dryer W.M.			
Top FAU W.H.			
Hood Fan Other			
Disp. Room Air Cond.			
Power Apparatus & Large Appliances			
Size & Type HP, KW, K.V.A. or K.V.A.R			
Up to 1 Incl.			
Over 1 to 10 Incl.			
Over 10 to 50 Incl.			
Over 50 to 100 Incl.			
Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule)			

PERMIT FEE	(Sub-Total)	27 20
PLAN CHECK FEE	(50% Permit Fee)	
PERMIT ISSUING FEE		16 50
TOTAL FEE		43 70

CASH
DEC04 '91
3240 43.70
43-70
#4142 CLK1

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 12-4-91

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)			
NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
1	LAWN SPRINKLER SYSTEM		11 25
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		15 75
	TOTAL FEE		27 00

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 784 N NOGALES ST
TRACT LOT
NEAREST CROSS ST. FRANCESCA
OWNER DAN GERSTNER
MAIL ADDRESS 600 CHATHAM PL
CITY LA CANADA TEL. NO 818 952 6315
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS
FINAL DATE 8-15-90 PROCESSED BY
BY

VALIDATION

CASH
MAR 26 '90

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

_____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 3-26-90

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 595-5241

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	*	FEE
7	WATER CLOSET		70 75
	BATH TUB		
7	SHOWER		
	LAVATORY		70 75
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		
	TOTAL FEE		157 25

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 784 No MOGALLES
TRACT LOT
NEAREST CROSS ST. FRANKLIN
OWNER PAUL GERSTNER DOVE
MAIL ADDRESS 784 No MOGALLES
CITY WALNUT TEL. NO 965-7402
CONTRACTOR THP PLG
ADDRESS 16295 PEARCE ST
CITY FONTANA TEL. 714-823-9976
STATE LICENSE NO. 391277 LIC. CLASS C-36
FINAL DATE 8-15-90
BY
PROCESSED BY
VALIDATION

CASH
FEB12 '90

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☒ Certified copy is filed with the City building inspection department.

Date 2-12-91 Applicant THP PLG

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

2-12-90 Applicant THP PLG

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 391277 Lic. Class C-36

Contractor THP PLG Date 2-12-91

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

2-12-91

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

1

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. P-3526A Company Central City Ins

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date 8-25-89 Applicant THP Plumbing

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 391277 Lic. Class _____

Contractor THP Plumbing Date 8-25-89

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Joshua Murphy 8-25-89

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
3	WATER CLOSET		33 75
	BATH TUB		
	SHOWER		
3	LAVATORY		33 75
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
2	WATER HEATER		22 50
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
1	Urinal		11 25
1	Dishwasher Trap		11 25
3	Floor Drains		33 75
1 WH	100 Gal #1 WH 230		
Plan check fee	6%		
	PLUMBING PERMIT ISSUING FEE $		15 75
	TOTAL FEE		162 00

Plan check applicant

Name

Address

City Tel. No.

BUILDING ADDRESS 784 Nogales

TRACT LOT

NEAREST CROSS ST. AMAR / Francisquito

OWNER DAN GERSTNER

MAIL ADDRESS 600 Chatham Pl

CITY La Canada TEL. NO. 798-4123

CONTRACTOR

ADDRESS

CITY TEL. NO.

STATE LICENSE NO. LIC. CLASS

FINAL DATE 8-15-90 BY PA

PROCESSED BY

VALIDATION

CASH AUG28 '89

3240 162.00 #7065

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PLUMBING PERMIT

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
1	GAS SYSTEM OUTLETS		15 45
	OUTLETS OVER 5 PER SYSTEM		
Plan check fee 50% Permit Fee			
	PLUMBING PERMIT ISSUING FEE $		26 40
	TOTAL FEE		41 85

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS 786 N NOGALES # B
TRACT LOT
NEAREST CROSS ST.
OWNER DAN GERSTNER
MAIL ADDRESS 784 N NOGALES ST
CITY WALNUT TEL. NO.
CONTRACTOR
ADDRESS
CITY TEL. NO.
STATE LICENSE NO. LIC. CLASS
FINAL DATE 3-22-94 PROCESSED BY
BY VALIDATION

3240 41.85
CASH 41-85
MAR17'94 #1938 CLK1

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and ~~hereby~~ authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

_____ 3-18-94

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-5241

APPLICATION FOR PERMIT
HEATING-VENTILATING-AIR CONDITIONING

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. F50407 Company Fairmont Insurance

☐ Certified Copy is hereby furnished.

☑ Certified copy is filed with the city building inspection department.

Date 10/90 exp. Applicant Bob Hernandez

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 302605 Lic. Class C20

Contractor Bob Hernandez Date 9/90 exp.

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Heating, Ventilating and Air Conditioning, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Bob Hernandez 1/9/90
Signature of Permittee Date

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	
	ABSORPTION UNIT, BTU		
	AIR HANDLING UNIT, CFM		
	BOILER, BTU		
2	Heat Pumps COMPRESSOR, BTU 42,000 & 36,000	30	00
	VENTILATION SYSTEM		
	EVAPORATIVE COOLER		
	FURNACE: FAU ___ GRAVITY ___ FLOOR: ___ BTU ___		
	HEATER: SUSPENDED ___ WALL ___ UNIT ___		
	INLETS & OUTLETS		
	Plan check fee 50 % of above.		
	PERMIT ISSUING FEE $	15	75
	TOTAL FEE	51	75

PLAN CHECK APPLICANT

NAME

ADDRESS

CITY TEL. NO.

OWNER Dan Gerstner Development

MAIL ADDRESS 600 Chatham Pl.

CITY La Canada TEL. NO. 952-6315

CONTRACTOR Cypress Htg & A/C

ADDRESS 5475 S. Lorraine Ave.

CITY Glendora TEL. NO. 963-9810

STATE LICENSE NO. 302605 LIC. CLASS C20

BUILDING ADDRESS 784 N. Nogales

TRACT LOT

NEAREST CROSS ST.

PROCESSED BY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH		
FINAL		

VALIDATION

EXPIRED 1-11-91
DATE

3240 31.50
CASH 51 75
JAN11'90 #8252

1

City of Walnut, Dept. of Building and Safety
21201 La Puente Road, Walnut, CA 91789 • (909) 598-5241

APPLICATION FOR PLUMBING PERMIT 784 Nogales

INSPECTOR COPY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM	•	FEE
	WATER CLOSET		
	BATH TUB		
	SHOWER		
	LAVATORY		
	SINK		
	DISHWASHER		
	CLOTHES WASHER		
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
	WATER HEATER		
	GAS SYSTEM OUTLETS		
	OUTLETS OVER 5 PER SYSTEM		
1	Interceptor		18 15
	Plan check fee 50% Permit Fee		
	PLUMBING PERMIT ISSUING FEE $		31 00
	TOTAL FEE		49 15

Plan check applicant
Name
Address
City Tel. No.

BUILDING ADDRESS: ALAMO CAR WASH
TRACT: 784 N NOGALES ST LOT:
NEAREST CROSS ST.:
OWNER: DAN GERSTNER
MAIL ADDRESS: 784 N NOGALES ST
CITY: WALNUT TEL. NO.: 818 726-5109
CONTRACTOR:
ADDRESS:
CITY: TEL. NO.:
STATE LICENSE NO.: LIC. CLASS:
FINAL DATE: PROCESSED BY:
BY: VALIDATION

3240 49.15
CASH 49-15
FEB28 '02 #4029 CLK1

EXP 8-03

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified Copy is hereby furnished.

☐ Certified copy is filed with the City building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Signature of Permittee _____ Date 3-8-02

COUNTY OF LOS ANGELES

DEPARTMENT OF PUBLIC WORKS

900 SOUTH FREMONT AVENUE
ALHAMBRA, CALIFORNIA 91803-1331
Telephone: (626) 458-5100

JAMES A. NOYES, Director

ADDRESS ALL CORRESPONDENCE TO
P.O. BOX 1460
ALHAMBRA, CALIFORNIA 91802-1460

November 26, 2001

IN REPLY PLEASE
REFER TO FILE EP-1
008290-I08843

Mr. Dan Gerstner
Alamo Auto Center
784 N. Nogales St.
Walnut, CA 91789

Dear Mr. Gerstner:

TRANSMITTAL OF APPROVED PLANS (A321996)
FACILITY LOCATION: 784 N. NOGALES ST., WALNUT (6L)

Enclosed are 2 sets of approved industrial waste disposal plans. The plans must be presented to the Local Building Official when filing for any building or plumbing permits which may be required if new construction or plumbing changes are indicated on the plans.

One set of these plans should be retained by your firm as a permanent record.

If you have any questions regarding this matter, please contact Mr. Frank Chin of this office at (626) 458-3514, Monday through Thursday, 7:00 a.m. to 5:30 p.m.

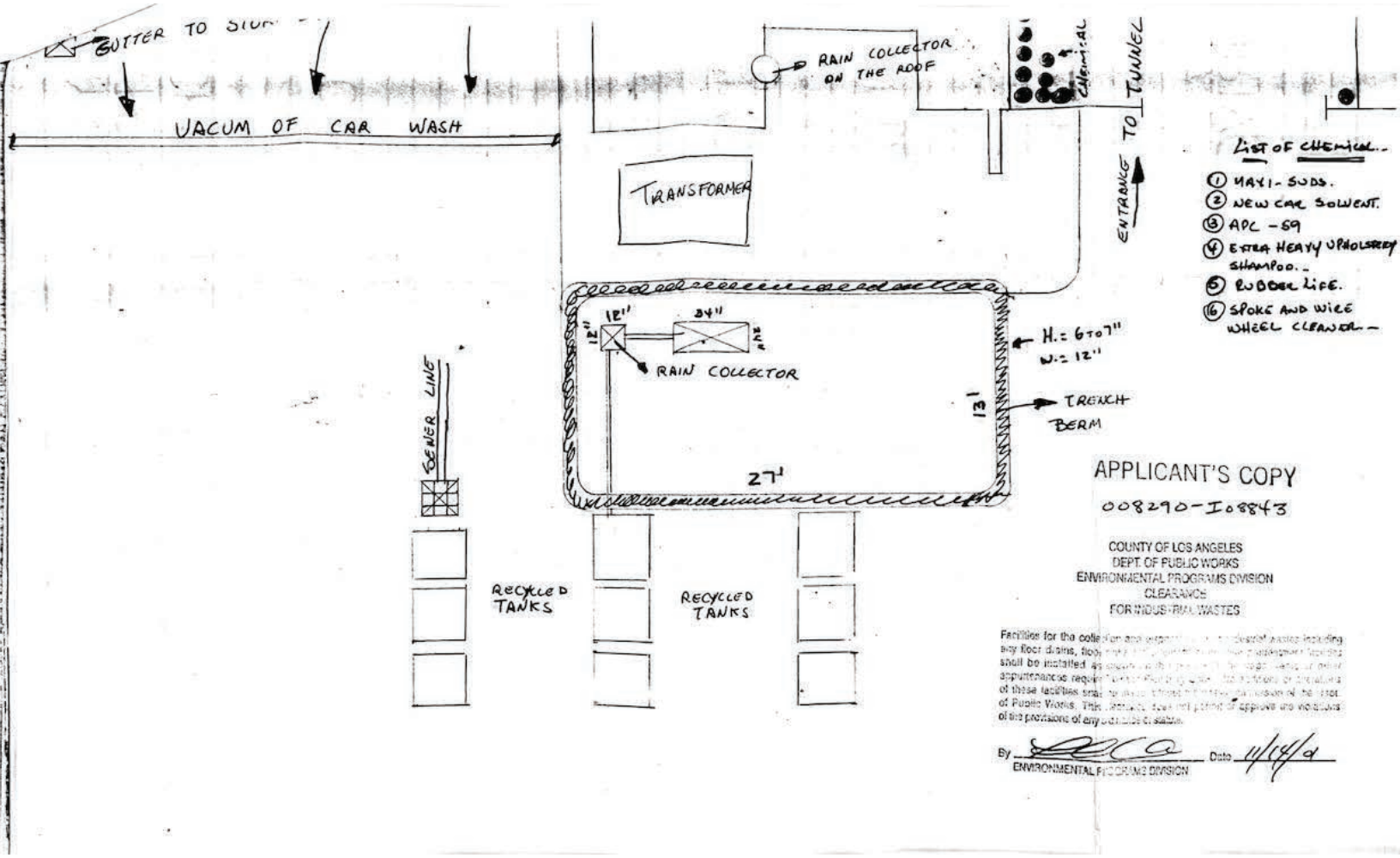
Very truly yours,

JAMES A. NOYES
Director of Public Works

for NARDY DREW
Associate Civil Engineer
Environmental Programs Division

FC:nm
ADIS\G\GERSTNER
C332163

Enc.



APPLICANT'S COPY

008290-I08843

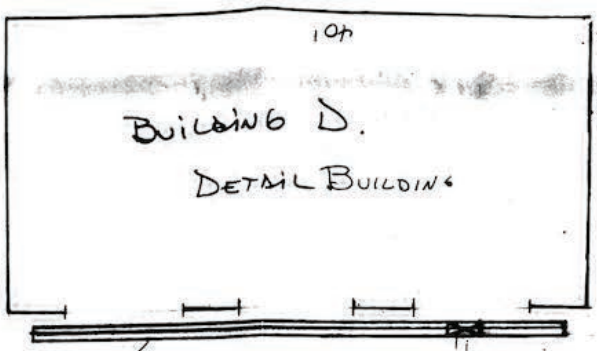
COUNTY OF LOS ANGELES
DEPT. OF PUBLIC WORKS
ENVIRONMENTAL PROGRAMS DIVISION
CLEARANCE
FOR INDUSTRIAL WASTES

Facilities for the collection and [illegible] of liquid wastes including any floor drains, floor [illegible] shall be installed as shown on the [illegible] appurtenances required [illegible] of these facilities shall be [illegible] of Public Works. This [illegible] of the provisions of any [illegible]

By _____ Date 11/14/91
ENVIRONMENTAL PROGRAMS DIVISION

10-37

EAST



NORTH

South

AR WASH

West

COUNTY OF LOS ANGELES
DEPT. OF PUBLIC WORKS
ENVIRONMENTAL PROGRAMS DIVISION
CLEARANCE
FOR INDUSTRIAL WASTES

Facilities for the collection and disposal of industrial wastes including any floor drains thereto shall be installed in accordance with requirements of the plans, specifications or permits of these facilities shall not relieve the owner of the responsibility of obtaining such permits as may be required by the Department of Public Works. This clearance does not grant or approve the violations of the provisions of any ordinance or statute.

By _____ Date _____
ENVIRONMENTAL PROGRAMS DIVISION

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA 91789 • (714) 598-524

1

APPLICATION FOR PERMIT
SEWER - SEWAGE DISPOSAL

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☒ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws.

_____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

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

License Number 391277 Lic. Class C-36

Contractor THP PLG Date 12-5-89

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regulating Plumbing, and hereby authorize representatives of this City to enter upon the above mentioned property for inspection purposes.

Thomas W. Thorp 12-5-89

Signature of Permittee Date

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 784 N NOGALES
LOCALITY WALNUT CA
NEAREST CROSS ST. SAN JOSE CREEK
OWNER DAN GERSTNER
MAIL ADDRESS 600 CHATHAM PL
CITY LA CANADA NO. 818 952-6315
LEGAL DESCRIPTION LOT NO. 19
BLOCK TRACT PM 145 20
SIZE OF LOT PM 168 NO. OF BLDGS. NOW ON LOT
USE OF BUILDINGS COMMERCIAL
CONTRACTOR THP PLG
ADDRESS 16295 REED ST
CITY FONTANA TEL. NO. 714 823 9956
STATE LICENSE NO. 391277 LIC. CLASS C-36

NO	DESCRIPTION OF WORK	FEE	
	HOUSE SEWER CONNECTING TO PUBLIC SEWER	32	25
	SEPTIC TANK, SEEPAGE PIT OR PITS AND/OR DRAINFIELD		
	HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM		
	CONNECT ADDITIONAL BLDG. OR WORK TO HOUSE SEWER		
	OVERFLOW SEEPAGE PIT, DRAINFIELD EXTN., CESSPOOL, DRYWELL, MANHOLE		
	ALTER, REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM		
	Permit	15	75
	TOTAL FEE	48	00

OWNER'S AUTHORIZATION

I HAVE AT THIS DATE A CONTRACT WITH THE HEREIN NAMED CONTRACTOR TO CONNECT THE ABOVE DESCRIBED EXISTING DWELLING TO THE PUBLIC SEWER.

SIGNED THIS 5 DAY OF DEC 1989

OWNER OR OWNER'S AGENT Thomas W. Thorp

ADDRESS 16295 REED FONTANA CA

CONNECTION DATA

STATION DEPTH
MANHOLE REFERENCE UPPER LOWER
Y. TYPE OF CONNECTION CURB P.L. LENGTH FROM M.L. TO P.L.
CO. IMP. NO. P.C. NO. JOB NO.
TRUNK PERMIT NO. ROAD PERMIT NO.

AFFIDAVIT	WAIVER	EASEMENT	REC. INSTR. NO.	DATE

HWY. OR ST. WIDENING
STATE ENCROACHMENT PERMIT NO.

CHARGES

CONNECTION CHARGE FEE
REIMBURSEMENT FEE

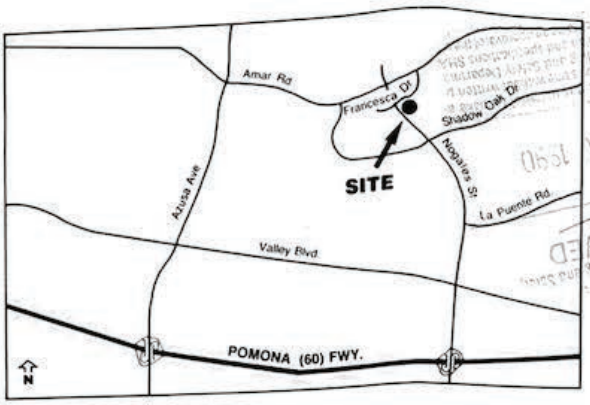
GROUP	MAP BK	MAP PG	FINAL DATE	PROCESSED BY

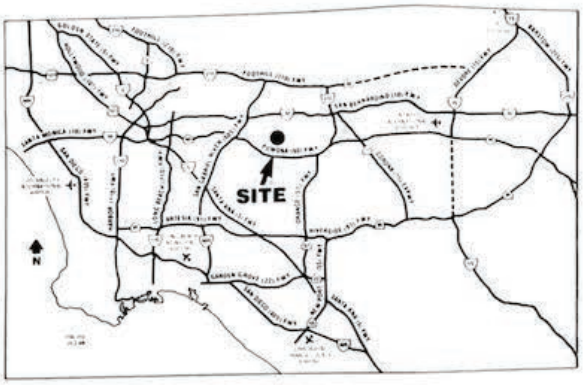
BY

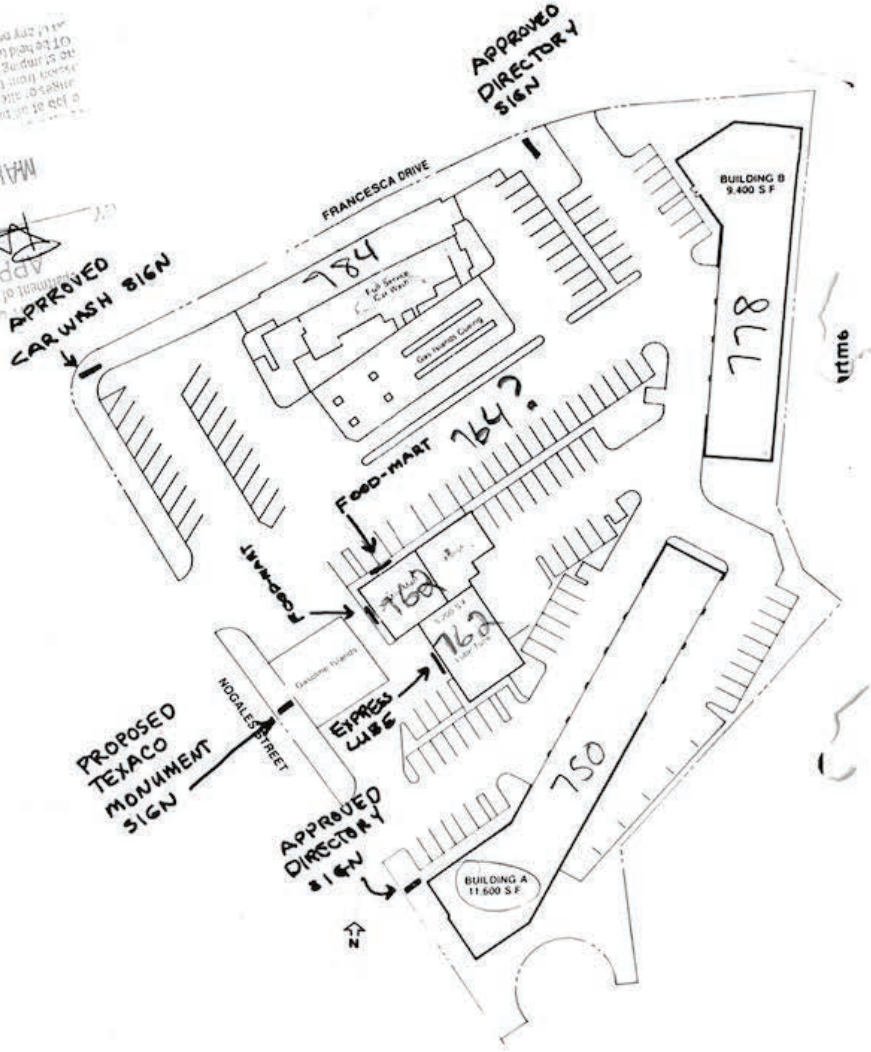
VALIDATION

CASH
DEC05 '89

EXPIRED DATE 12-5-90



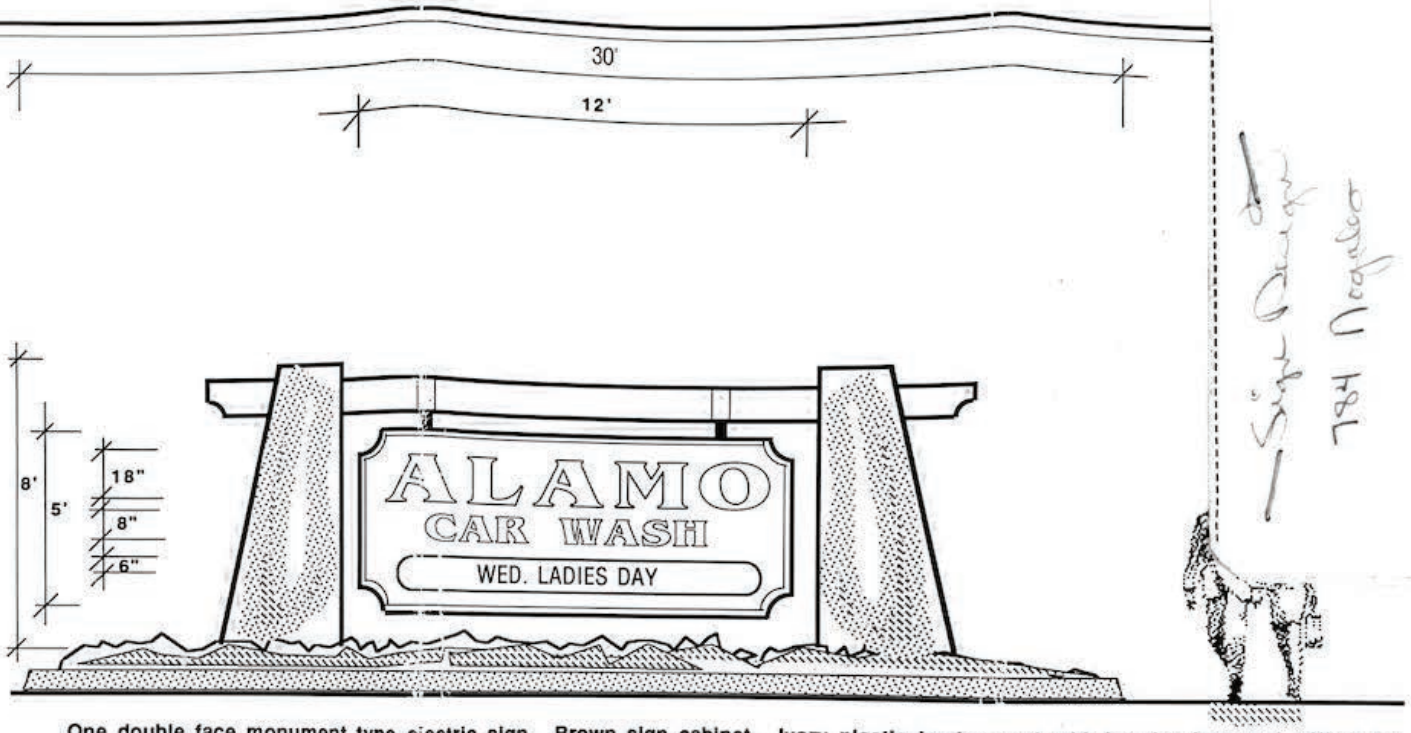




ANTICIPATED TENANTS:

- Full Service Car Wash
- Mini Market
- Lube & Oil
- Tire Store
- Car Stereo & Cellular Phones
- Restaurants/Fast Food
- Dry Cleaners
- Smog Service
- Independent Mechanics
- Muffler & Brakes

The above Statement is made upon information furnished by the owner, or from sources which we deem to be reliable, for which we assume no responsibility, but which we believe to be correct. This property offered subject to prior sale, change in price or withdrawal from the market without notice.



CITY OF WALNUT
Department of Building and Safety

One double face monument type electric sign. Brown sign cabinet. Ivory plastic background, with hanging bars and stiffner tie backs. Brown woodgrained vynle overlay. Ivory letters "ALAMO CAR WASH" with 1" gold trim capping. Track for reader panel for 6" letters. Beige stucco over metal pole cover similar to building color. Sign suspended from wood beam. Wood beam size to be submitted after engineering. Wood beam stained dark brown similar to building wood color.

APPROVED
BY
MAR 3 0 1990

Approved design _____ Date _____

Fred Boyles & Company
1174 Cynthia Ct La Verne CA 91750 (714) 593-3929

This design is the property of Fred Boyles and is not to be copied or shown to anyone outside your organization if has a value of 5% of its estimate
Agreed _____

Date 1/12/90 Address Walnut Scale 1/4"=1'

DATE: 22-Mar-90 JOB Alamo Auto Center Sign

SEI SAN DIEGO
3935 HARNEY ST, SUITE 202
San Diego, CA 92110
(619) 543-1222

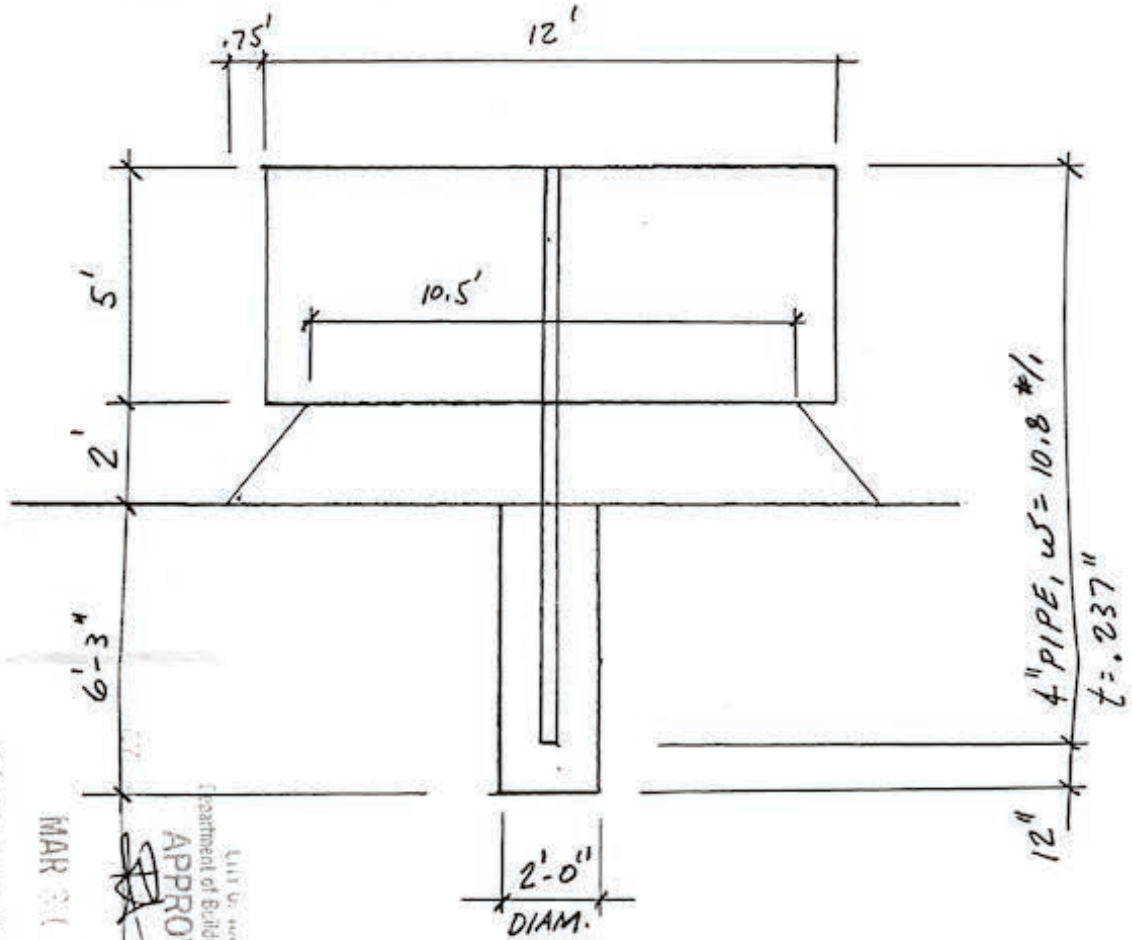
SHEET 1 of 2

BY: RVS No. 292 -3

CLIENT: Fred Boyles & Associates
CODE: 1988 UBC
LOCATION: Walnut, CA
WIND: Basic Wind = 70 mph
Exposure = C
qs = 13 psf
Cq = 1.4

Design Wind Pressures:

0 '- 20'	21.8 psf
20 '- 40'	23.7 psf
40 '- 60'	27.3 psf
60 '-100'	29.1 psf
100 '-150'	32.8 psf



APPROVED
Department of Building and Safety
MAR 31 1990

12/31/92

DATE: 22-Mar-90 JOB Alamo Auto Center Sign

SEI SAN DIEGO
3935 Harney St.,Suite 202
San Diego, CA 92110
(619) 543-1222

SHEET 2 of

BY: _____ No. 292 -3

	AREA	FORCE	ARM	MOMENT	HEIGHT
sign	60.0	1310	4.50	5897	
base	24.0	524	0.96	502	
		1835		6399	3.49

FOOTING

SOIL PRESSURE = 150 x 2 = 300 PSF/FT
(UBC TABLE 29-B VALUE x 2, PER FOOTNOTE 4)

P = 1835 LBS H = 3.49 FEET B = 2.00 FEET

S1 = S x D / 3 = 582.68

A = 2.34 x P / (S1 X B) = 3.68

D = .5 x A (1 + (1 + 4.36 X H / A) ^.5) = 6.01 FEET

****
2 ' - 0 " DIAM x 6 ' - 3 " DEEP
****

COLUMN

PIPE STEEL - ASTM A53 GRADE B

S = 6399 X12/(1.33X22000)= 2.6 @ 0.0 FT

****
4.0 "PIPE w= 10.8 #/ft t=0.237 "
****

DATE: 22-Mar-90 JOB Alamo Car Wash Sign

SEI SAN DIEGO
3935 Harney St.,Suite 202
San Diego, CA 92110
(619) 543-1222

SHEET 2 of

BY: RVS No. 292 - 4

	AREA	FORCE	ARM	MOMENT	HEIGHT
crossarm	8.5	186	7.00	1299	
sign	30.0	655	3.50	2293	
cover	22.0	480	3.64	1747	
		1321		5340	4.04

FOOTING

SOIL PRESSURE = 150 x 2 = 300 PSF/FT
(UBC TABLE 29-B VALUE x 2, PER FOOTNOTE 4)

P = 1321 LBS H = 4.04 FEET B = 1.50 FEET

S1 = S x D / 3 = 598.69

A = 2.34 x P / (S1 X B) = 3.44

D = .5 x A (1 + (1 + 4.36 X H / A) ^.5) = 5.99 FEET

****
1 ' - 6 " DIAM x 6 ' - 0 " DEEP
****

COLUMN

PIPE STEEL - ASTM A53 GRADE B

S = 5340 X12/(1.33X22000)= 2.2 @ 0.0 FT

****
3.5 "PIPE w= 9.1 #/ft t=0.226 "
****

HANGER PIPE

$M = 655 \times 3.0 = 2293$ in-#

$REQ'D\ S = \frac{2293 \times 12}{22000 \times 1.33} = .94\ IN^3$

2 1/2" PIPE, w = 5.8 #/ft, t = .203"

CROSSARM TORSION

$T = 2293$ in-#

$f_v = \frac{2293 \times 12}{.246 \times 7.5^2 \times 11.25} = 177$ PSI

8 x 12 DOUGLAS FIR

Richard V. Stagg
12/31/92

DATE: 22-Mar-90 JOB Alamo Car Wash Sign

BY: LVS No. 292 - 4

SEI SAN DIEGO
3935 HARNEY ST, SUITE 202
San Diego, CA 92110
(619) 543-1222

CLIENT: Fred Boyles & Associates
CODE: 1988 UBC
LOCATION: Walnut, CA
WIND: Basic Wind = 70 mph
Exposure = C
qs = 13 psf
Cq = 1.4

Design Wind Pressures:

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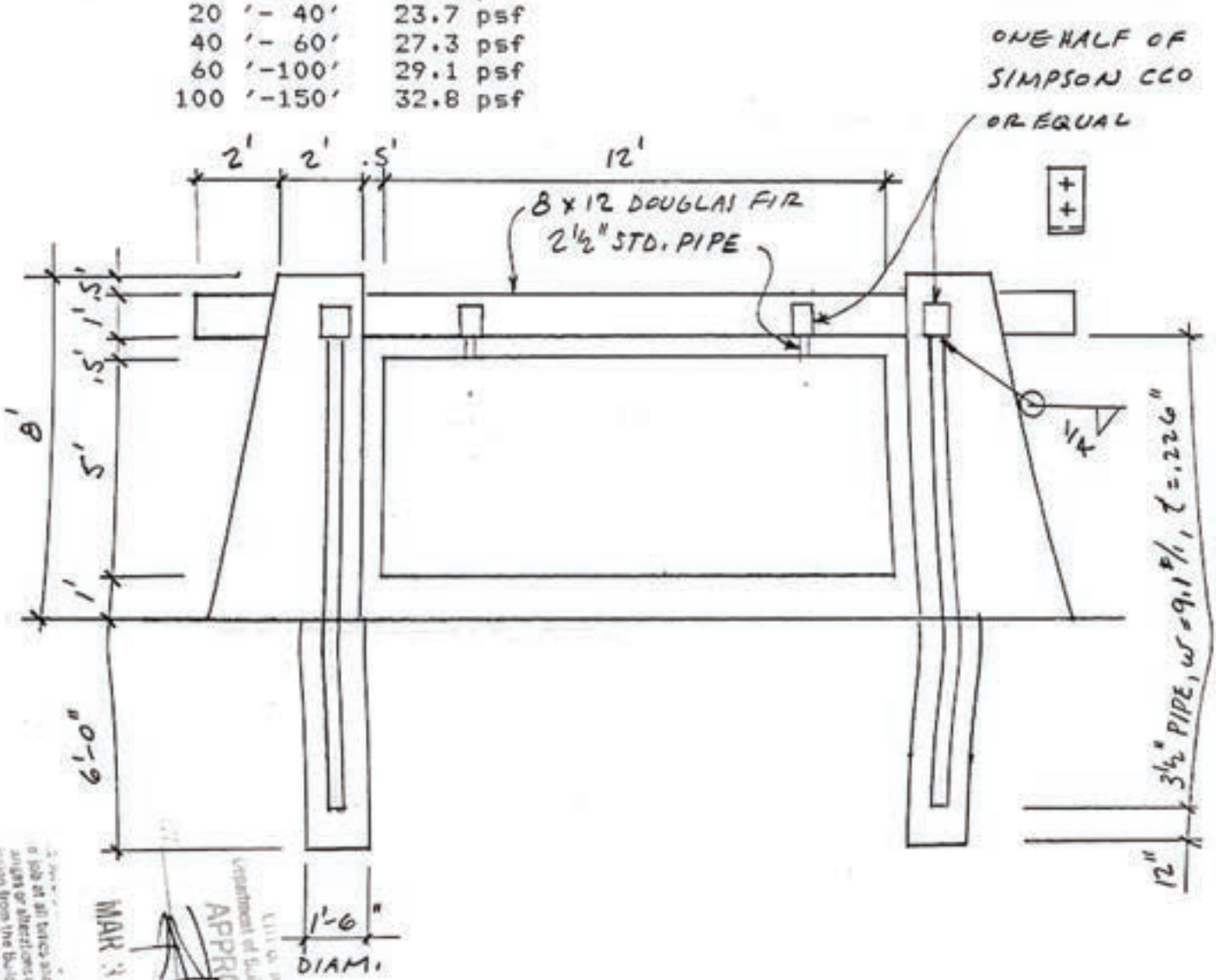
40 '- 60'	27.3 psf
60 '-100'	29.1 psf
100 '-150'	32.8 psf



APPROVED
MAR 21 1990
Department of Building and Safety

COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY

1955 Workman Mill Road / Whittier, California
Mailing Address: P.O. Box 4998, Whittier, California 90607
Telephone: (213) 699-7411 / From Los Angeles (213) 685-5217
Hours: 7:30 a.m. - 4:00 p.m. Mon. - Fri.

CHARLES W. CARRY
Chief Engineer and General Manager

Account No.: 375679
District No.: 21

SEWERAGE SYSTEM CONNECTION FEE

Complete Items 1 through 9 — PLEASE TYPE OR PRINT

Date: 6 / 6 / 84 (MONTH) (DAY) (YEAR)

1. Name of Applicant DAN GERSTNER
2. Address of Property 784 NOGALES (STREET) WALNUT (CITY) CA. (STATE) (ZIP)
3. Contact DAN GERSTNER Phone Number: (818) 952-6315
4. Mailing Address (IF DIFFERENT FROM ABOVE) 600 CHATHAM PL. (STREET) LA CANADA (CITY) CA. (STATE) 91011 (ZIP)
5. County Assessor Map Book, Page, and Parcel Number: PM 10520 LOT 19 PM 6187 LOTS 1 & 2
6. Structure is: ☒ Proposed ☐ Existing, Date of Construction
7. User Category and Units of Usage: *(Check the appropriate box and provide the applicable information)*

a. Residential:
- ☐ Single Family Home(s) — ▶ Number of Units:
- ☐ Duplex ☐ Triplex ☐ Fourplex — ▶ Number:
- ☐ Five Units or More — ▶ Number of Units:
- ☐ Mobile Home Park — ▶ Number of Spaces:
- ☐ Condominium — ▶ Number of Units:

b. Commercial:
- ☐ Hotel/Motel — Bldg A 31,000 ▶ Number of Rooms:
- ☐ Convalescent Hospital/ Home for the Aged — 21,000 ▶ Number of Beds:
- ☒ Other (Specify): AUTO SALES/REPAIR CARWASH TUNNEL — ▶ Improvement Square Footage: 29684

c. Institutional:
- ☐ College/University — ▶ Number of Students:
- ☐ Private School — 1853 ▶ Improvement Square Footage:
- ☐ Church — Office/324 ▶ Improvement Square Footage:

d. Industrial ☐ All Categories — Storage/707 mini mart/5200 ▶ All industrial dischargers must obtain a permit for industrial wastewater discharge.

8. **In order to process this application a copy of the floor plan, plot plan, or subdivision map, showing square footage/number of dwelling units and use of the structure must be submitted. Attached is: ☐ floor plan ☐ plot plan ☐ subdivision map. This is not required for one detached, single family home.**

9. **I certify that the information provided in this application is true and correct to the best of my knowledge.**

☐ APPLICANT
☐ AGENT FOR APPLICANT

(SIGNATURE) (DATE)

Please pay by check or money order only. **(Cash will not be accepted.)**
Make checks payable to: COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY.
Returned checks will be subject to a penalty.

FEE CALCULATION FOR RESIDENTIAL, COMMERCIAL, AND INSTITUTIONAL CATEGORIES

Number of Units of Usage		Connection Fee Per Unit of Usage		Connection Fee
1,853 324 26,200 707	×	$ 10,131.00 548.00 276.00 93.00	18772.29 177.55 7231.20 65.75	$ 26247.24

PERMIT IS

CITY OF WALNUT
OFFICE OF CITY ENGINEER
21201 LA PUENTE ROAD
WALNUT, CALIFORNIA 91789
TELEPHONE (714)595-7543

OK 5/9/90 JA

SUPERVISED GRADING INSPECTION CERTIFICATE

JOB ADDRESS OR TRACT NO. NOGALES CAR WASH P.M. 10520 LOT 19 PERMIT NO. CUP #96-88

OWNER _____ CONTRACTOR _____

SOILS ENGINEER'S ROUGH GRADING CERTIFICATION

I certify that the earth fills placed on the following lots were installed upon competent and properly prepared base material and compacted in compliance with requirements of Building Code Section 7010. I further certify that where the report or reports of an engineering geologist, relative to this site, have recommended the installation of buttress fills or other similar stabilization measures, such earthwork construction has been completed in accordance with the approved design.

LOT NOS. _____

See report dated _____ for compaction test data, recommended allowable soil bearing values and other special recommendations.

EXPANSIVE SOILS (YES) (NO) LOT NOS. _____

BUTTRESS FILLS (YES) (NO) LOS NOS. _____

REMARKS _____

Engineer _____ Reg. No. _____ Date _____
(signature)

SUPERVISING GRADING ENGINEER'S ROUGH GRADING CERTIFICATION

I certify to the satisfactory completion of rough grading including: grading to approximate final elevations; property lines located and staked; cut and fill slopes correctly graded and located in accordance with the approved design; swales and terraces graded ready for paving; berms installed; and required drainage slopes provided on the building pads. I further certify that where report or reports of an engineering geologist and/or soils engineer have been prepared relative to this site, the recommendations contained in such reports have been followed in the prosecution of the work.

LOT NOS. NOTE: OKAY TO GIVE TEMPORARY POWER TO TEST THE EQUIPMENT IN

REMARKS CAR WASH BUILDING ONLY (T84 Nogales)

Engineer _____ Reg. No. _____ Date 5-8-90
(signature) Jack Ogden

SUPERVISING GRADING ENGINEER'S FINAL GRADING CERTIFICATION

I hereby state that to the best of my knowledge the subject project's final grading is in substantial compliance with the approved grading plan. All required drainage devices have been installed; slope planting established and irrigation systems provided (where required); and adequate provisions have been made for drainage of surface water from each building site. I further state that to the best of my knowledge where report or reports of an engineering geologist and/or soils engineer have been prepared relative to this site, the recommendations contained in such reports have been followed in the prosecution of the work. No guarantees of the contractor's work are made or implied by this statement.

LOT NOS. _____

REMARKS X _____

Engineer _____ Reg. No. 15474 Date 5-8-90
(signature) Russell Watson

(A)

Alamo Auto Center
784 Nogales Ave. Walnut

Tenant Space	Store Frontage		Sign sq. Footage
A	18'		2'x9'=18 sq. ft.
B	18'		2'x9'=18 sq. ft.
C	36'		Two 2'x9'=36 sq. ft.
D	25'		2'x12'=24 sq. ft.
E	50'		2'x12'=24 sq. ft.
F	50'		2'x12'=24 sq. ft.
G	50'		2'x12'=24 sq. ft.
H	25'		2'x12'=24 sq. ft.
I	25'		2'x12'=24 sq. ft.
J	100'		Three 2'x12'=72 sq. ft.
K	27'		2'x12'=24 sq. ft.
L	42'		2'x12'=24 sq. ft.
	60'		Two 2'x12'=48sq. ft.
M	58'	Ch. letters	1.5x17=25.5 sq. ft.
→ N	50'	Ch. letters	1.5'x11'=16.5 Sq. ft.
O	42'		2'x12'=24 sq. ft.
P	15'		2'x7'=14 sq. ft.
Q	15'		2'x7'=14 sq. ft.

CITY OF WALNUT
Department of Building and Safety
APPROVED
BY
JUN 11 1990

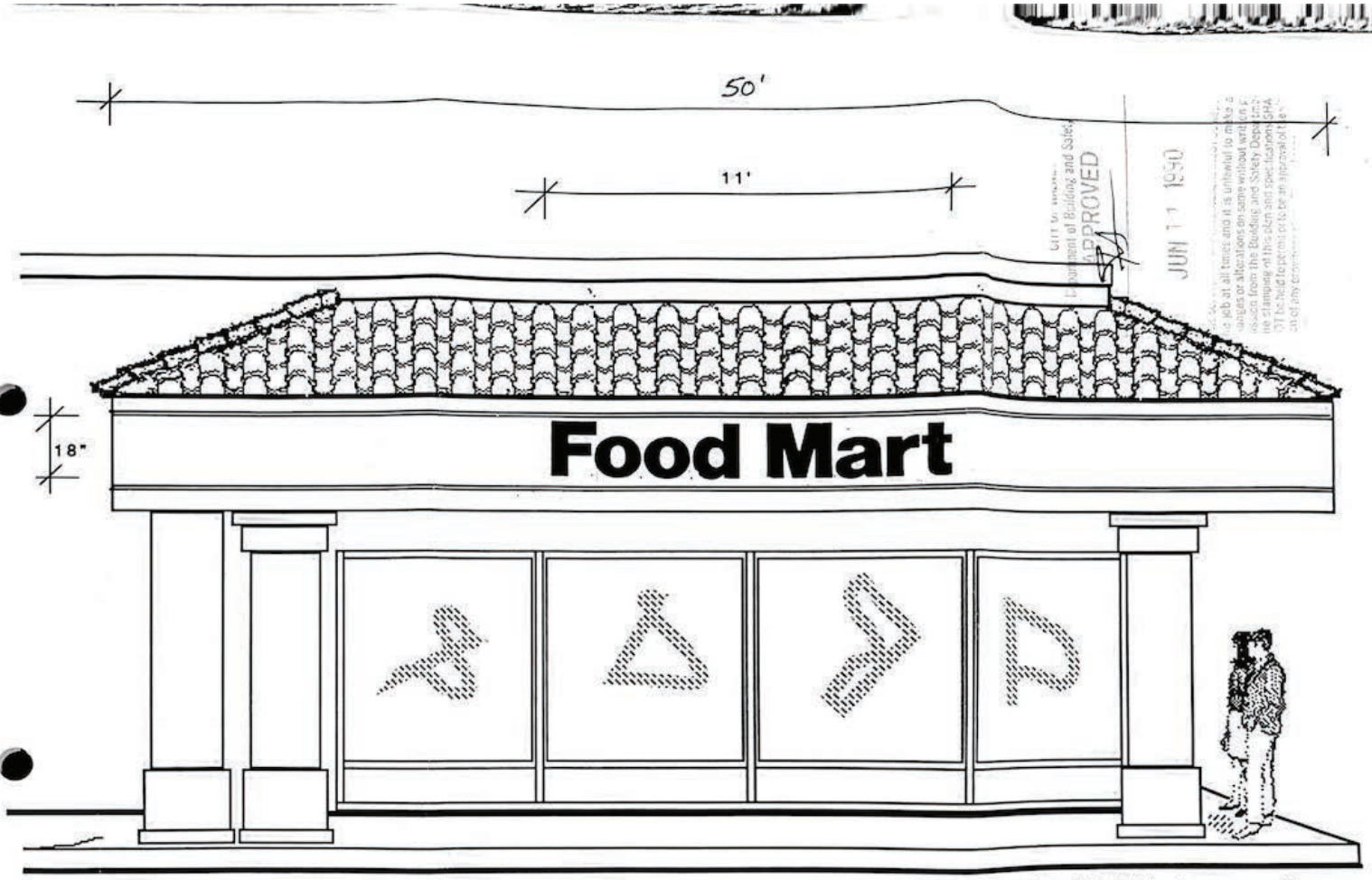
This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations on same without written permission from the Building and Safety Department. The stamping of this plan and specifications SHALL NOT be held to permit or to be an approval of the violation of any provision of any City Ordinance or State law.

01-3230

90690 00001 #9424 CASH 64.18

VALIDATION

DEPT. CITY OF WALNUT
Department of Building and Safety



North elevation / Scale 1/4"=1'

Metal pan channel letters. 2793 Red faces Black trim cap. Matte black Metal returns as per Texaco.

Fred Boyles & Company

1174 Cynthia Ct. La Verne CA 91750 (714) 593-3929

This design is the property of Fred Boyles and is not to be copied or shown to anyone outside your organization. It has a value of 25% of its estimate

Agreed

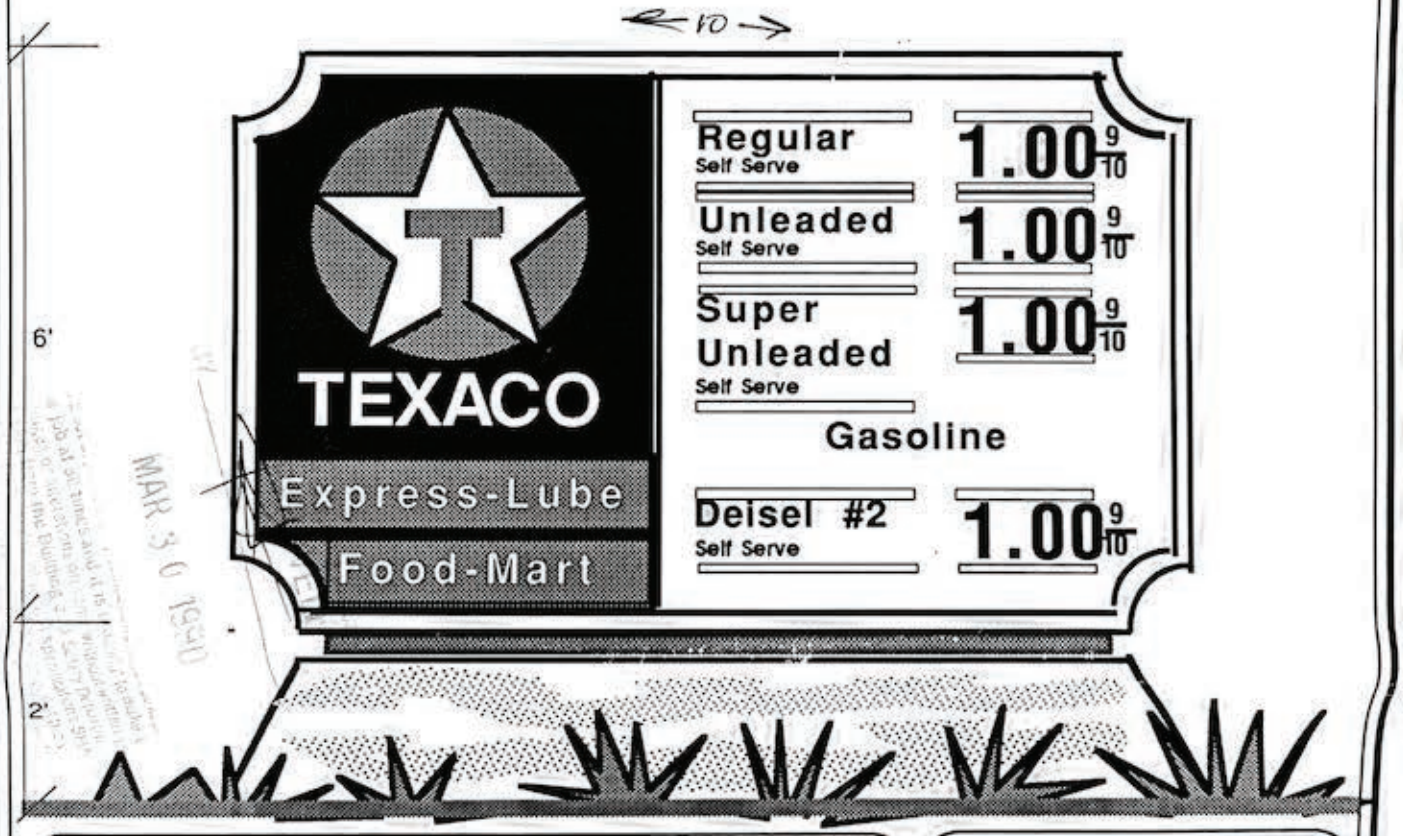
Design approved----------

Date----------

Sign located in 15' wide planter.

10'

One double face monument electric sign. Gasoline price section: White background black vynle copy all removeable copy. Texaco logo Black background red star over white background, red Texaco against black background. "Express-Lube and Food-Mart" white letters against dark gray background all vynle copy as per specks from Texaco. Brown stucco finish on sign cabinet. White stucco finish on base. Flat brown devider between base and sign cabinet.



Fred Boyles & Company

1174 Cynthia Ct. La Verne, CA 91750 (714) 593-3929

This design is the property of Fred Boyles and is not to be copied or shown to anyone outside your business. It's value is 25% of it's estimate

DESIGN APPROVED---------- DATE----------

(DATE) 2/2/90 (ADDRESS) 784 N. Nogales , Wallnut (SCALE) 1/2""=1'

Rowland
UNIFIED
SCHOOL DISTRICT

1830 NOGALES STREET
P. O. BOX 8490
ROWLAND HEIGHTS, CALIFORNIA 91748
PHONE: (818) 965-2541

Dr. Sharon S. Robson ..... *Superintendent*

Date JUL 2 6 1989

City of Walnut
P. O. Box 682
21201 La Puente Road
Walnut, California 91789

Ladies/Gentlemen:

RE: CERTIFICATION OF COMPLIANCE WITH FEE PROVISIONS OF GOVERNMENT CODE SECTION 65995

Developer DAN GERSTNER

Address 600 CHATHAM PL
LA CAÑADA, CA 91011

Telephone 818 952-6315

Signature of Applicant
(The person signing represents that he/she is authorized to sign on behalf of the owner/developer and that the information provided is true and accurate to the best of his/her knowledge.)

FEE SCHEDULE: The development fees levied by the Rowland Unified School District under provision of Section 65995 of the Government Code are:

Residential Development	$1.50/sq. ft.
Commercial/Industrial Development	$0.25/sq. ft.

Tract/Project Address NOGALES + FRANCESCA

Number of Building(s) in Project FOUR BUILDINGS + 2 CANOPIES

Building Permit Application No(s). _____

GOVERNING BOARD

Dean F. Anderson ..... *President*
Mary Jo Maxwell ..... *Vice President*
Phil "Andy" Anderson ..... *Clerk*
Rolland M. Boceta ..... *Member*
Robert J. Wilson ..... *Member*

32,052 sq. ft

	LOT/ADDRESS	USE OF BUILDING	AREA (SQ. FT.)	FEE
1.	784 NOGALES	CAR WASH	2884	[illegible]
2.	778 NOGALES	AUTO CENTER (B)	9400	2,350.00
3.	762 NOGALES	MINI MART/LUBE	5200	1,300.00
4.	750 NOGALES	AUTO CENTER (A)	11,600	2,900.00
5.	CANOPY CARWASH		1664	416.00
	CANOPY MINI MART		1324	331.00

(Information below line completed by school district.)

SUB TOTAL (Attached Sheets) _____

TOTAL FEES DUE $ 7,013.00

RECEIPT NO. 127537

☑ This is to certify that all fees due to the Rowland Unified School District under provisions of Government Code Section 65995 as a prerequisite to the issuance of a Building Permit by the Department of Public Works have been received. Based on the above information presented, this Certification of Completion is hereby executed.

☐ This is to certify that the above described development has been determined to be exempt from the development fees of Government Code Section 65995, and Building Permits may be issued therefore.

Very truly yours,
ROWLAND UNIFIED SCHOOL DISTRICT

APPROVED BY: Richard J. Angarola

Richard J. Angarola
Deputy Superintendent
Administrative Services

RJA:fn

1

INSPECTOR COPY

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished

☐ Certified copy is filed with the city building inspection department

Date _____ Applicant _____

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License Number _____ Lic. Class _____

Contractor _____ Date _____

HOME OWNER BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☒ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws regarding Electrical Wiring, and hereby authorize representatives of this City to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date 2-2-99

City of Walnut, Dept. of Building and Safety
21201 La Puente Rd., Walnut, CA (909) 598-5241

APPLICATION FOR ELECTRICAL PERMIT

FOR APPLICANT TO FILL IN	EACH	NO	FEE
New Residential Bldgs. & Pools Sq. Ft.	$		$
Residential Swimming Pools			5 5
Outlets: Rec. 2 Light ___ Sw ___			~~3 3 0~~
Total No 3 1 8 First 20	1.95	#	
Additional			
Lighting Fixtures First 20			
Additional			
Total No ___			
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W ___			
Oven ___ Dryer ___ W.M ___			
Top ___ FAU ___ W.H ___			
Hood ___ Fan ___ Other ___			
Disp. ___ Room Air Cond ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
___ Up to 1 Incl.			
___ Over 1 to 10 Incl.			
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Services			
0-200 Amp. Under 600 V			
201-1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) ___			
PERMIT FEE (Sub-Total)			5 5
PLAN CHECK FEE (50% Permit Fee)			
PERMIT ISSUING FEE			2 5 / 10
TOTAL FEE			3 3 / 9 5

JOB ADDRESS 784 N NOGALES ST #
LOT ___ TR ___
NEAREST CROSS ST FRANCESCA
OWNER OR FIRM NAME ALAMO CAR WASH
MAIL ADDRESS 784 N NOGALES ST
CITY WALNUT Tel No
PLAN CHECK APPLICANT
ADDRESS
CITY Tel No
PERMIT APPLICANT DAN GERSTNER
ADDRESS SAME
CITY Tel No
LICENSE OR REG. NUMBER Class
FINAL DATE
BY
PROCESSED BY
VALIDATION

CASH
JAN30 '99

1040 33.95
33.95
#9485 CLK1

JUHL Electric LICENSED CONTRACTOR • P. O. BOX 194 • LOMA LINDA, CALIFORNIA 92354 • (714) 796-0097

May 3, 1990

City of Walnut
Building and Safety
21201 La Puente Road
Walnut, California 91789

RE: Nogales Auto Center
784 North Nogales
Walnut, California 91789

To Whom it may Concern:

All buildings at the above referenced Auto Center are per code and tested.

Signed Howard Juhl Dated May 3, 1990
Howard Juhl, President

GATES ROOFING
15114 E. Arrow Highway
Baldwin Park, CA 91706
State Lic. #396419
Ph. (818) 962-1414

City of Walnut
21201 La Puente Rd.
Walnut, Ca. 91789

Regarding:
Nogales Auto Center
784 Nogales Ave.
Walnut, Ca. 91789

784 Nogales Ave. roofs are per code, plans, and contract.

Gates Roofing Inc.

Bud Gates

CITY OF WALNUT DEPARTMENT OF BUILDING AND SAFETY

21201 La Puente Road, Walnut, CA 91789 (909) 595-7543

APPLICATION FOR ELECTRICAL PERMIT

5

TEMPORARY FILE COPY

WORKER'S COMPENSATION DECLARATION

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

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

(X) I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and number are:

Carrier [illegible]

Policy No [illegible]

Exp. Date _____ Applicant [illegible]

(This section need not be completed if the permit is for one hundred dollars ($100) or less)

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

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

LICENSED CONTRACTOR'S DECLARATION

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

Lic. Class [illegible] Lic. No [illegible]

Exp. Date [illegible] Contractor [illegible]

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' License Law for the following reason (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt there from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

(__) I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Section 7044, Business Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

(__) I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

(__) I am exempt under Sec. _____, B. & P. C. for this

reason: _____

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State Laws relating to building construction. I hereby authorize representatives of the City of Walnut to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's Compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be deemed revoked.

PERMITTEE SIGNATURE [illegible]

ADDRESS [illegible] CITY [illegible] ZIP [illegible]

☒ Contractor ☐ Owner ☐ Other Licensed Professional

CONSTRUCTION LENDING DECLARATION

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work of which this permit is issued (Section 3097, Civil Code).

Lender's Name _____

Lender's Address

FOR APPLICANT TO FILL IN

	EA	No	FEE	
NEW RESIDENTIAL BLDGS _____ sq ft				
OUTLETS:				
Rec. ____ Light ____ Sw. ____ First 20				
Total Number _____ Additional				
Lighting Fixtures: First 20				
Total Number _____ Additional				
FIXED APPLIANCES NOT OVER 1 HP				
Range ____ Heater ____ D.W. ____				
Oven ____ Dryer ____ W.M. ____				
Top ____ FAU ____ W.H. ____				
Hood ____ Fan ____ Other ____				
Disposal ____ Room Air Cond. ____				
Power Apparatus & Large Appliances Size & HP, KVW, KVA or KVAR				
_____ Not exceeding 3				
_____ Over 3 to 10 incl.				
_____ Over 10 to 50 incl.				
_____ Over 50 to 100 incl.				
_____ Over 100				
SERVICES				
0-200 Amp. Under 600 V				
201- 1000 Amp. Under 600 V				
Over 1000 Amp or Over 600 V				
Temp. Power Pole & Appurtenances	Sub		645	
Sign With One Branch Circuit	1		22	
Additional Sign Branch Circuits	Panel			
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule)				
PERMIT FEE (SUB-TOTAL)				
PLAN CHECK FEE (70% PERMIT FEE)				
SB 1473				
PERMIT ISSUANCE FEE			41	10
TOTAL FEE			106	75

JOB ADDRESS	[illegible]
OWNER	[illegible]
ADDRESS	[illegible]
CITY	TEL NO. [illegible]
APPLICANT	[illegible]
ADDRESS	[illegible]
CITY	TEL No. [illegible]
LICENSE NO.	CLASS [illegible]
FINAL DATE	PROCESSED BY
BY	

01 10/12/2011 11:05 [illegible]
3240 [illegible]

INDUSTRIAL WASTE DISPOSAL PERMIT

PERMIT No. 10195

EXPIRATION DATE NONE

Los Angeles County
Department of Public Works
Waste Management Division
P.O. Box 1460
Alhambra, CA 91802-1460

PERMISSION IS HEREBY GRANTED TO:

008843-6L <<<<<<<<<<<<<<<<<< FILE NUMBER

NOGALES AUTO CENTER <<<<<<<<<<<<<<<<<< PERMITTEE
00600 CHATHAM PL
LA CANADA CA 91011

RE: 00762 NOGALES ST <<<<<<<<<<<<<<<<<< FACILITY ADDRESS

TO TREAT/STORE/DISPOSE INDUSTRIAL WASTE MATERIALS AT THE FACILITY ABOVE:

UNDER THE SANITARY SEWER AND INDUSTRIAL WASTE ORDINANCE OF:

[ ] Los Angeles County Code Title 20, Division 2
[X] City of Walnut
[ ] Ordinance No.
[X] Municipal Code Section C21, A1

THE INDUSTRIAL WASTE OPERATIONS REGULATED BY THIS PERMIT CONSIST OF THE FOLLOWING:

Waste Generating Operations: FLOOR WASHDOWN OF AUTO-REPAIR SHOP AND CAR-WASH.

THIS PERMIT IS SUBJECT TO THE FOLLOWING REQUIREMENTS:

[X] PART A - ON-SITE DISPOSAL (PUBLIC SANITARY SEWER/PRIVATE DISPOSAL SYSTEM)
[X] PART B - WASTES NOT AUTHORIZED FOR DISCHARGE OR DEPOSIT IN PART A
[X] PART C - GENERAL CONDITIONS AND LIMITATIONS
[X] PART D - EFFLUENT QUALITY LIMITATIONS
[ ] PART E - SELF-MONITORING AND REPORTING
[ ] PART F - OTHER:

The plans approved in conjunction with this permit and any plans referenced herein are made part of this permit. The Industrial Waste Engineering Inspector in your area will explain the permit conditions, and make periodic inspections of your operations. This permit is subject to annual industrial waste inspection fees.

Very truly yours,

T. A. TIDEMANSON
DIRECTOR OF PUBLIC WORKS

By Shivkhaur
WASTE MANAGEMENT DIVISION

Issue Date July 6, 1989

38-0003 DPW 6/88

Los Angeles County
Department of Public Works
Waste Management Division
P. O. Box 1460
Alhambra, CA 91802-1460

Permit No. 10195

File No. I-8843-6L

Date July 6, 1989

INDUSTRIAL WASTE DISPOSAL PERMIT
CONDITIONS AND LIMITATIONS

Part A - ON-SITE DISPOSAL, PUBLIC SANITARY SEWER

1. Disposal of industrial wastewater to the public sanitary sewer system shall be limited to the flow rate indicated below:

   [ ] a. Local Sewer. The maximum permitted peak flow rate to the sewer shall be _____ gallons per minute (gpm).
   [X] b. Trunk Sewer. Maximum permitted daily flow to the sewer shall be no greater than 25% in excess of the value on line 13 of the attached Permit for Industrial Wastewater Discharge.

2. Pretreatment, monitoring and control facilities required under this permit shall consist of the system(s) indicated below:

   [X] a. Sampling point prior to combining industrial wastewater flow with domestic wastewater.
   [X] b. Final gravity separator (clarifier) 1500 gallon capacity, 3 stage.
   [ ] c. pH measurement and recording system.
   [ ] d. Automatic pH control.
   [ ] e. Flow measurement.
   [ ] f. Automatic rainwater diversion system with alarm capable of diverting storm flow in excess of the first 0.10 inch of rain from the sanitary sewer system.
   [X] g. TWO(2) CLARIFIERS NOTT., 1500 GALLON CAPACITY EACH USED FOR THE CAR-WASH RECLAIM AND SETTLING PROCESSES.

3. Industrial wastewater shall at all times meet the following effluent quality limitations prior to discharge to the sanitary sewer system:

   [X] a. As specified in Part D - Effluent Quality Limitations.
   [ ] b. Additional quality limitations: _____

4. The permittee shall submit the following periodic reports:

   [ ] a. Self-monitoring and/or industrial wastewater treatment surcharge reports as may be required by the Sanitation Districts of Los Angeles County. NOTE: These reports are to be submitted directly to the Sanitation Districts.
   [ ] b. Self-monitoring compliance reports as described in Part E of this permit.

5. All required industrial wastewater collection, pretreatment, monitoring, disposal and sampling facilities must be installed in accordance with approved plans and prior to initiating any discharge to the sewer system.

38-0014 DPW 10/88

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC WORKS

INDUSTRIAL WASTE DISPOSAL PERMIT

Part D - EFFLUENT QUALITY LIMITATIONS - JOINT OUTFALL PERMIT

Constituents	Phase I Local Effluent Limits, mg/L
Arsenic	3.0
Cadmium	15.0
Copper	15.0
Cyanide (Total)	-------
Cyanide (Amenable)	2.0
Dissolved Sulfides	0.1
Lead	40.0
Nickel	12.0
pH Range	never lower than 6.0
Silver	5.0
Total Chromium	10.0
Zinc	25.0
Mineral Oil and grease	---
Floatable oil and grease	None Visible
Temperature	140°F
Total Toxic Organic (TTO)	-------
* Total Metals	-------

* The sum of concentration of Copper, Nickle, Chromium(Total), zinc.

mmr(G4)/PARTD

CITY OF CITY OF WALNUT

76F276-CE #664- 9/84

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER — FACILITIES
SANITATION DIVISION

1

FEE RECEIPT

APPLICATION FEE FOR INDUSTRIAL WASTE DISPOSAL PERMIT
NOT REFUNDABLE

RECEIVED OF: MISSION CAR WASH

FOR (Firm Name): NOGALES AUTO CENTER

ADDRESS: 918 S. SAN GABRIEL BLVD, SAN GABRIEL 91776

When validated this is a receipt for the amount of fee collected as shown below for the consideration of an application for permission to discharge or deposit industrial waste materials from or upon the premises located at: 762, 750, 778 NOGALES, WALNUT 91789

File 8842-6L
~~8842~~ -6L
8843-

THIS IS NOT A PERMIT

VALIDATION
CASH (CHK) M.O. #322

90-3414
1222

DIST. NO. 98

#5304
$160.00

RECEIVED BY MValadez 710 JUN 85 160.00

APPENDIX C

Regulatory Records Documentation (with EDR Database)

Gerstner Family Trust Property
750 - 784 North Nogales Avenue
Walnut, CA 91789

Inquiry Number: 6816654.2s
January 12, 2022

The EDR Radius Map™ Report with GeoCheck®

6 Armstrong Road, 4th floor
Shelton, CT 06484
Toll Free: 800.352.0050
www.edrnet.com

TABLE OF CONTENTS

SECTION	PAGE
Executive Summary	ES1
Overview Map	2
Detail Map	3
Map Findings Summary	4
Map Findings	9
Orphan Summary	355
Government Records Searched/Data Currency Tracking	GR-1

GEOCHECK ADDENDUM

Physical Setting Source Addendum	A-1
Physical Setting Source Summary	A-2
Physical Setting Source Map	A-8
Physical Setting Source Map Findings	A-9
Physical Setting Source Records Searched	PSGR-1

Thank you for your business.
Please contact EDR at 1-800-352-0050
with any questions or comments.

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EXECUTIVE SUMMARY

A search of available environmental records was conducted by Environmental Data Resources, Inc (EDR). The report was designed to assist parties seeking to meet the search requirements of EPA's Standards and Practices for All Appropriate Inquiries (40 CFR Part 312), the ASTM Standard Practice for Environmental Site Assessments (E1527-21), the ASTM Standard Practice for Environmental Site Assessments for Forestland or Rural Property (E 2247-16), the ASTM Standard Practice for Limited Environmental Due Diligence: Transaction Screen Process (E 1528-14) or custom requirements developed for the evaluation of environmental risk associated with a parcel of real estate.

TARGET PROPERTY INFORMATION

ADDRESS

750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

COORDINATES

Latitude (North):	34.0246990 - 34ˆ 1' 28.91"
Longitude (West):	117.8934030 - 117ˆ 53' 36.25"
Universal Tranverse Mercator:	Zone 11
UTM X (Meters):	417516.9
UTM Y (Meters):	3765060.0
Elevation:	588 ft. above sea level

USGS TOPOGRAPHIC MAP ASSOCIATED WITH TARGET PROPERTY

Target Property Map:	12015951 BALDWIN PARK, CA
Version Date:	2018
Northeast Map:	12014998 SAN DIMAS, CA
Version Date:	2018

AERIAL PHOTOGRAPHY IN THIS REPORT

Portions of Photo from:	20140513
Source:	USDA

MAPPED SITES SUMMARY

Target Property Address:
750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

Click on Map ID to see full detail.

MAP ID	SITE NAME	ADDRESS	DATABASE ACRONYMS	RELATIVE ELEVATION	DIST (ft. & mi.) DIRECTION
A1	K SPEC MOTORS LLC	778 N NOGALES ST UNI	CERS HAZ WASTE, HWTS		TP
A2	AUTOCARE 101 INC	750 N NOGALES ST STE	ECHO		TP
A3	PREVENTION AUTO CARE	750 N NOGALES ST # F	CERS HAZ WASTE, CERS		TP
A4	ALAMO CAR WASH	784 N NOGALES ST # A	CERS TANKS, CERS, HWTS		TP
A5	MOBIL XPRESS LUBE	762 N NOGALES ST # B	AST		TP
A6	RES AUTO CARE	750 NOGALES ST UNIT	ECHO		TP
A7	MARIES DYNO TUNE	778 NORTH NOGALES	HWTS		TP
A8	TRI CITY AUTO REPAIR	750 N NOGALES UNIT F	RCRA-SQG, FINDS, ECHO		TP
A9	EURO TECH AUTO SVC	778 N NOGALES #A	HWTS		TP
A10	ALAMO CAR WASH	784 NOGALES AVE.	FINDS		TP
A11	MANNYS AUTOMOTIVE SO	778 N NOGALES ST #A	FINDS, ECHO		TP
A12	EURO TECH AUTO SVC	750 NOGALES AVE STE	EDR Hist Auto		TP
A13	TOYOTA & HONDA SPECI	778 N NOGALES ST # C	CERS HAZ WASTE		TP
A14	SUPER-TEK MOTORS	750 N NOGALES ST # D	CERS HAZ WASTE		TP
A15	AUTO CARE 101 INC	750 N NOGALES ST # E	CERS HAZ WASTE, CERS		TP
A16	PRO CARWORKS INC	762 N NOGALES ST # D	CERS HAZ WASTE, CERS		TP
A17	H A T AUTO SERVICE	750 NOGALES ST #C	ECHO		TP
A18	JED AUTO REPAIR	778-A N NOGALES ST	FINDS, ECHO		TP
A19	TOYOTA & HONDA SPECI	778 NOGALES AVE #C	LOS ANGELES CO. HMS		TP
A20	PREVENTION AUTO CARE	750 NOGALES AVE #F	LOS ANGELES CO. HMS		TP
A21	PREVENTION AUTO CARE	778 NOGALES AVE #A	CERS HAZ WASTE, LOS ANGELES CO. HMS		TP
A22	ALAMO XPRESS LUBE	762 NOGALES AVE #A	LOS ANGELES CO. HMS		TP
A23	ALAMO RADIATOR	778 NOGALES AVE #B	LOS ANGELES CO. HMS		TP
A24	SIMIN'S BEAUTY SALON	750 NOGALES AVE #H	LOS ANGELES CO. HMS		TP
A25	SUPER-TEK MOTORS	750 NOGALES AVE #D	LOS ANGELES CO. HMS		TP
A26	JED AUTO REPAIR	778 N NOGALES AVE #A	HWTS		TP
A27	SUPERTEK MOTORS	750 N NOGALES ST UNI	HWTS		TP
A28	RES AUTO CARE	750 NOGALES ST UNIT	RCRA NonGen / NLR		TP
A29	EUROJUNKYS INC	762 N NOGALES ST	FINDS, ECHO		TP
A30	PRO & NEAT AUTO	778 NOGALES AVE #C	LOS ANGELES CO. HMS		TP
A31	RICH'S TINT SHOP	784 NOGALES AVE #B	LOS ANGELES CO. HMS		TP
A32	TRI CITY AUTO REPAIR	750 N NOGALES ST UNI	HWTS		TP
A33	TEXACO EXPRESS LUBE	762 N NOGALES AVE	HWTS		TP
A34	SINGH'S POWER AUTO C	762 NOGALES AVE BLDG	HWTS		TP
A35	H A T AUTO SERVICE	750 NOGALES ST #C	FINDS		TP
A36	ALAMO AUTOMOTIVE SER	750 NOGALES	HWTS		TP
A37	K SPEC MOTORS LLC	778 N NOGALES ST UNI	FINDS		TP
A38	AUTOCARE 101 INC	750 N NOGALES ST STE	HWTS		TP
A39	JED AUTO REPAIR	778 A N NOGALES ST	HWTS		TP

MAPPED SITES SUMMARY

Target Property Address:
750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

Click on Map ID to see full detail.

MAP ID	SITE NAME	ADDRESS	DATABASE ACRONYMS	RELATIVE ELEVATION	DIST (ft. & mi.) DIRECTION
A40	EJS AUTOMOTIVE	778 NOGALES AVE UNIT	HWTS		TP
A41	ALAMO CAR WASH DBA C	784 NOGALES AVE #A	LOS ANGELES CO. HMS		TP
A42	SUPERTEK MOTORS	750 N NOGALES ST UNI	HWTS		TP
A43	EUROJUNKYS INC	762 N NOGALES ST	RCRA NonGen / NLR		TP
A44	PREVENTION AUTO CARE	750 N NOGALES ST UNI	HWTS		TP
A45	AUTO CARE 101	750 N NOGALES ST STE	HWTS		TP
A46	AUTOCARE 101 INC	750 N NOGALES ST STE	FINDS		TP
A47	RAM AUTO REPAIR	778 NOGALES AVE #C	FINDS, ECHO		TP
A48	K SPEC MOTORS LLC	778 N NOGALES ST UNI	RCRA NonGen / NLR		TP
A49	REYES RACING & OFFRO	778 N NOGALES UNIT A	HWTS		TP
A50	DAYTONA AUTO REPAIR	778 N NOGALES	HWTS		TP
A51	JED AUTO REPAIR	778-A N NOGALES ST	RCRA-SQG		TP
A52	MOBIL XPRESS LUBE	762 N NOGALES ST # B	CERS HAZ WASTE, CERS TANKS, CERS		TP
A53	TOYOTA & HONDA SPECI	778 N NOGALES ST # C	FINDS		TP
A54	ALAMO CAR WASH	784 NOGALES ST.	CERS		TP
A55	ALAMO CAR WASH	784 NOGALES AVE.	RGA LUST		TP
A56	DC LOGISTICS	780 NOGALES ST #8	ECHO		TP
A57	AUTOCARE 101 INC	750 N NOGALES ST STE	RCRA NonGen / NLR		TP
A58	CHEVRON (ON THE RUN)	762 N NOGALES ST # A	FINDS		TP
A59	RES AUTO CARE	750 NOGALES STREET,	HAULERS		TP
A60	BEST FRIENDS AUTO SH	778 NOGALES AVE STE	HWTS		TP
A61	TEXACO EXPRESS LUBE	762 N NOGALES ST	HWTS		TP
A62	SUPERTEK MOTORS	750 NOGALES AVE STE	HWTS		TP
A63	ALAMO CAR WASH	784 NOGALES AVE #A	LOS ANGELES CO. HMS		TP
A64	J P AUTO	778 N NOGALES STE B	HWTS		TP
A65	K SPEC MOTORS LLC	778 N NOGALES ST UNI	ECHO		TP
A66	DAYTONA AUTO REPAIR	778 N NOGALES ST STE	RCRA NonGen / NLR		TP
A67	ALAMO CAR WASH	784 NO NOGALES	HAZNET, HWTS		TP
A68	RAM AUTO REPAIR	778 NOGALES AVE #C	HAZNET, HWTS		TP
A69	PREVENTION AUTO CARE	778 NORTH NOGALES	HAZNET, HWTS		TP
A70	AUTO CARE 101	750 N NOGALES ST # E	FINDS, ECHO		TP
A71	DAYTONA AUTO REPAIR	778 N NOGALES	RCRA NonGen / NLR		TP
A72	SUPERTRACK MOTORS	750 N NOGALES AVE	HAZNET, HWTS		TP
A73	TRACT 88205	780 FRANCESCA DRIVE	NPDES, CIWQS		TP
A74	MANNYS AUTOMOTIVE SO	778 N NOGALES ST #A	HWTS		TP
A75	SUPER-TEK MOTORS	750 N NOGALES ST # D	FINDS		TP
A76	TRI CITY AUTO REPAIR	750 N NOGALES UNIT F	HWTS		TP
A77	H A T AUTO SERVICE	750 NOGALES AVE STE	CERS HAZ WASTE, HWTS		TP
A78	HAT AUTO SERVICE	750 NOGALES AVE UNIT	HAZNET, HWTS		TP

MAPPED SITES SUMMARY

Target Property Address:
750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

Click on Map ID to see full detail.

MAP ID	SITE NAME	ADDRESS	DATABASE ACRONYMS	RELATIVE ELEVATION	DIST (ft. & mi.) DIRECTION
A79	ALAMO CAR WASH	784 NO NOGALES	ECHO		TP
A80	H A T AUTO SERVICE	750 N NOGALES ST # C	FINDS		TP
A81	EUROJUNKYS INC	762 NOGALES AVE STE	CERS HAZ WASTE, LOS ANGELES CO. HMS, CERS		TP
A82	H A T AUTO SERVICE	750 NOGALES ST #C	RCRA NonGen / NLR		TP
A83	PRO CARWORKS INC	762 N NOGALES ST # D	FINDS		TP
A84	1X NOGALES CAR WASH	784 NO NOGALES	HAZNET, HWTS		TP
A85	ALAMO CAR WASH	784 N NOGALES ST # A	UST		TP
A86	CHEVRON CORPORATION	762 NOGALES AVE STE	EDR Hist Auto		TP
A87	DAYTONA AUTO REPAIR	778 N NOGALES ST # B	FINDS, ECHO		TP
A88	RAM AUTO REPAIR	778 NOGALES AVE #C	RCRA NonGen / NLR		TP
A89	FREY ENVIRONMENTAL I	762 NOGALES AVE	LOS ANGELES CO. HMS		TP
A90	SCOTT KETCHUM	780 S NOGALES ST	LOS ANGELES CO. HMS		TP
A91	AUTO CARE 101	750 N NOGALES ST STE	RCRA NonGen / NLR		TP
A92	ALAMO CAR WASH	784 NOGALES AVE STE	UST		TP
A93	CHEVRON ON THE RUN	762 NOGALES ST. STE	UST		TP
A94	ALAMO CAR WASH	784 NO NOGALES	FINDS		TP
A95	FANCY CUTS	778 NOGALES AVE #D	LOS ANGELES CO. HMS		TP
A96	EUROJUNKYS INC	762 N NOGALES ST	HAZNET, HWTS		TP
A97	ALAMO CAR WASH	784 NO NOGALES	RCRA NonGen / NLR		TP
A98	PREVENTION AUTO CARE	750 N NOGALES ST # F	FINDS		TP
A99	PRO CARWORKS INC	762 N NOGALES ST STE	HWTS		TP
A100	AUTOCARE 101	750 NOGALES AVE #E	LOS ANGELES CO. HMS		TP
A101	RES AUTO CARE	750 NOGALES ST UNIT	FINDS		TP
A102	MANNYS AUTOMOTIVE SO	778 N NOGALES ST #A	RCRA NonGen / NLR		TP
A103	TEXACO REFINING AND	784 N NOGALES	HAZNET, HWTS		TP
A104	ALAMO RADIATOR AND A	778 NOGALES AVE UNIT	HAZNET, HWTS		TP
A105	ALAMO CAR WASH	784 NOGALES ST.	LUST, Cortese		TP
A106	H A T AUTO SERVICE	750 NOGALES ST #C	HWTS		TP
A107	JOSE RODRIGUEZ	727 AMADOR CIR	RCRA NonGen / NLR	Higher	55, 0.010, SE
108	BEN VICENCIO	3126 GABRIELLA STREE	RCRA NonGen / NLR	Lower	159, 0.030, WSW
B109	TEMPO DRY CLEANERS	820 N NOGALES	RCRA-SQG, FINDS, ECHO, DRYCLEANERS, EMI, LOS...	Higher	239, 0.045, NW
B110	PRAM TOM	820 NOGALES AVE	EDR Hist Cleaner	Higher	239, 0.045, NW
B111	TEMPO CLEANERS	820 NOGALES	DRYCLEANERS	Higher	239, 0.045, NW
B112	TEMPO CLEANERS	820 NOGALES ST	EDR Hist Cleaner	Higher	239, 0.045, NW
B113	TEMPO DRY CLEANERS	820 N NOGALES	DRYCLEANERS	Higher	239, 0.045, NW
B114	TEMPO CLEANERS	820 N NOGALES	DRYCLEANERS	Higher	239, 0.045, NW
C115	MA BROTHERS DBA MB S	788 FRANCESCA DR 1A	RCRA NonGen / NLR	Higher	350, 0.066, NE
C116	M B STARS	788 FRANCESCA DR # 1	CERS HAZ WASTE, LOS ANGELES CO. HMS, CERS	Higher	350, 0.066, NE
C117	FRANCESCA AUTO SERVI	788 FRANCESCA DR	SWEEPS UST, LOS ANGELES CO. HMS	Higher	350, 0.066, NE

MAPPED SITES SUMMARY

Target Property Address:
750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

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MAP ID	SITE NAME	ADDRESS	DATABASE ACRONYMS	RELATIVE ELEVATION	DIST (ft. & mi.) DIRECTION
D118	RAQUEL BALDEMOR	2439 GINGER COURT	RCRA NonGen / NLR	Lower	386, 0.073, South
B119	JIFFY LUBE #374	856 NOGALES AVE	UST	Higher	424, 0.080, NW
B120	WALNUT JIFFY LUBE	856 NOGALES AVE	HIST UST	Higher	424, 0.080, NW
B121	JIFFY LUBE #374	856 N NOGALES ST	AST, SWEEPS UST, HIST UST, LOS ANGELES CO. HMS	Higher	424, 0.080, NW
D122	JESSE MARTINEZ	2438 E GLORIA ST	RCRA NonGen / NLR	Lower	425, 0.080, SSW
B123	OILMEN 2	856 NOGALES ST	RCRA-SQG, FINDS, ECHO	Higher	456, 0.086, NW
B124	THE OILMEN	856 NOGALES ST	CERS HAZ WASTE, CERS TANKS, HAZNET, CERS, HWTS	Higher	456, 0.086, NW
E125	FIRESTONE COMPLETE A	860 NOGALES AVE	RCRA NonGen / NLR	Higher	540, 0.102, NW
E126	FIRESTONE TIRE & RUB	860 NOGALES AVE	SWEEPS UST, LOS ANGELES CO. HMS	Higher	540, 0.102, NW
E127	FIRESTONE STORE #27W	860 NOGALES	LUST, Cortese, HAZNET, CERS, HWTS	Higher	540, 0.102, NW
E128	FIRESTONE COMPLETE A	860 NOGALES ST	CERS HAZ WASTE, CERS	Higher	584, 0.111, NW
F129	MOBIL STATION	2422 FELICIA ST	EDR Hist Auto	Lower	585, 0.111, WSW
130	ELMER GIBSON	2433 GAIL COURT	RCRA NonGen / NLR	Lower	606, 0.115, South
131	TEXACO CAR CARE CENT	18935 TRUCKE WAY	EDR Hist Auto	Higher	628, 0.119, ESE
F132	MARGIE URIAS	3114 FAITH ST	RCRA NonGen / NLR	Lower	727, 0.138, WSW
F133	ISAGO, SUZANNE	2401 FELICIA STREET	RCRA NonGen / NLR	Higher	755, 0.143, West
G134	WALNUT 76 INC	18702 AMAR RD	CERS HAZ WASTE, CERS TANKS, LOS ANGELES CO. HMS,..	Higher	828, 0.157, NNW
G135	WALNUT 76 INC	18702 AMAR RD	RCRA NonGen / NLR	Higher	828, 0.157, NNW
G136	MARINELAND	6600 PALOS VERDES	HIST CORTESE	Higher	828, 0.157, NNW
G137	WALNUT 76 INC	18702 AMAR RD	UST	Higher	828, 0.157, NNW
G138	76 PRODUCTS STATION	18702 AMAR RD	LUST, SWEEPS UST, Cortese, HIST CORTESE, CERS	Higher	828, 0.157, NNW
G139	TOSCO/UNOCAL #31216	18702 AMAR RD	UST	Higher	828, 0.157, NNW
G140	O'REILLY AUTO PARTS	18724 AMAR RD	RCRA NonGen / NLR	Higher	854, 0.162, NNW
G141	O'REILLY AUTO PARTS	18724 AMAR RD	CERS HAZ WASTE, HAZNET, LOS ANGELES CO. HMS, CERS	Higher	854, 0.162, NNW
142	JUSTIN TUAZON	3139 FAITH STREET	RCRA NonGen / NLR	Lower	857, 0.162, SW
H143	WALNUT HILLS CLEANER	18732 AMAR RD	RCRA-SQG, FINDS, ECHO, DRYCLEANERS, HAZNET, LOS...	Higher	867, 0.164, North
H144	WALNUT HILLS CLEANER	18732 AMAR RD #84	DRYCLEANERS	Higher	867, 0.164, North
H145	WALNUT HILLS CLEANER	18732 AMAR RD	DRYCLEANERS	Higher	867, 0.164, North
G146	NOGALES CAR WASH	894 N NOGALES ST	SWEEPS UST, CA FID UST	Higher	952, 0.180, NNW
147	MEDDA'S CLEANERS	2550 E AMAR RD	DRYCLEANERS	Higher	1050, 0.199, NW
I148	BACH, RONALD	3112 S. ADRIENNE DRI	RCRA NonGen / NLR	Higher	1090, 0.206, SSW
J149	KAREN BOROUSET	2405 ARLINE ST	RCRA NonGen / NLR	Higher	1101, 0.209, South
I150	RAMON & MARIA PEREZ	3116 S ADRIENNE DR	RCRA NonGen / NLR	Higher	1131, 0.214, SSW
J151	ESTHER VIALLNUEVA	2409 ARLINE ST	RCRA NonGen / NLR	Higher	1190, 0.225, South
K152	AA CLEANERS	18800 AMAR C-9 RD	DRYCLEANERS, CERS	Higher	1222, 0.231, NNE
K153	AA CLEANERS	18800 AMAR RD STE C	DRYCLEANERS	Higher	1222, 0.231, NNE
K154	AA CLEANERS	18800 AMAR RD UNIT C	RCRA-SQG, FINDS, ECHO	Higher	1222, 0.231, NNE
I155	CASSANDRA TAYLOR	3126 S. ADRIANE	RCRA NonGen / NLR	Higher	1224, 0.232, SSW
156	GEORGE RAMOS	2450 ARLINE ST	RCRA NonGen / NLR	Higher	1247, 0.236, SSE

MAPPED SITES SUMMARY

Target Property Address:
750 - 784 NORTH NOGALES AVENUE
WALNUT, CA 91789

Click on Map ID to see full detail.

MAP ID	SITE NAME	ADDRESS	DATABASE ACRONYMS	RELATIVE ELEVATION	DIST (ft. & mi.) DIRECTION
157	TONY HERNANDEZ	3027 S. BETSY STREET	RCRA NonGen / NLR	Higher	1257, 0.238, WSW
158	OSWALT ELEMENTARY SC	19501 SHADOW OAK DRI	ENVIROSTOR, SCH	Lower	1357, 0.257, SSE

EXECUTIVE SUMMARY

TARGET PROPERTY SEARCH RESULTS

The target property was identified in the following records. For more information on this property see page 9 of the attached EDR Radius Map report:

Site	Database(s)	EPA ID
K SPEC MOTORS LLC 778 N NOGALES ST UNI WALNUT, CA 91789	CERS HAZ WASTE HWTS	N/A
AUTOCARE 101 INC 750 N NOGALES ST STE WALNUT, CA 91789	ECHO Registry ID: 110070632046	N/A
PREVENTION AUTO CARE 750 N NOGALES ST # F WALNUT, CA 91789	CERS HAZ WASTE CERS	N/A
ALAMO CAR WASH 784 N NOGALES ST # A WALNUT, CA 91789	CERS TANKS CERS HWTS	N/A
MOBIL XPRESS LUBE 762 N NOGALES ST # B WALNUT, CA 91789	AST Database: AST, Date of Government Version: 07/06/2016	N/A
RES AUTO CARE 750 NOGALES ST UNIT WALNUT, CA 91789	ECHO Registry ID: 110070729692	N/A
MARIES DYNO TUNE 778 NORTH NOGALES WALNUT, CA 91789	HWTS	N/A
TRI CITY AUTO REPAIR 750 N NOGALES UNIT F WALNUT, CA 91789	RCRA-SQG EPA ID:: CA0000348730 FINDS Registry ID:: 110002617213 ECHO Registry ID: 110002617213	CA0000348730
EURO TECH AUTO SVC 778 N NOGALES #A WALNUT, CA 91789	HWTS	N/A
ALAMO CAR WASH 784 NOGALES AVE. WALNUT, CA 91789	FINDS	N/A

EXECUTIVE SUMMARY

	Registry ID:: 110065106138	
MANNYS AUTOMOTIVE SO 778 N NOGALES ST #A WALNUT, CA 91789	FINDS Registry ID:: 110070428213 ECHO Registry ID: 110070428213	N/A
EURO TECH AUTO SVC 750 NOGALES AVE STE WALNUT, CA 91789	EDR Hist Auto	N/A
TOYOTA & HONDA SPECI 778 N NOGALES ST # C WALNUT, CA 91789	CERS HAZ WASTE	N/A
SUPER-TEK MOTORS 750 N NOGALES ST # D WALNUT, CA 91789	CERS HAZ WASTE	N/A
AUTO CARE 101 INC 750 N NOGALES ST # E WALNUT, CA 91789	CERS HAZ WASTE CERS	N/A
PRO CARWORKS INC 762 N NOGALES ST # D WALNUT, CA 91789	CERS HAZ WASTE CERS	N/A
H A T AUTO SERVICE 750 NOGALES ST #C WALNUT, CA 91789	ECHO Registry ID: 110070593205	N/A
JED AUTO REPAIR 778-A N NOGALES ST WALNUT, CA 91789	FINDS Registry ID:: 110002853680 ECHO Registry ID: 110002853680	N/A
TOYOTA & HONDA SPECI 778 NOGALES AVE #C WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021092-029864	N/A
PREVENTION AUTO CARE 750 NOGALES AVE #F WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021073-029824	N/A

EXECUTIVE SUMMARY

PREVENTION AUTO CARE 778 NOGALES AVE #A WALNUT, CA 91789	CERS HAZ WASTE LOS ANGELES CO. HMS Facility ID: 021091-029862	N/A
ALAMO XPRESS LUBE 762 NOGALES AVE #A WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021080-029837 Facility ID: 021080-058820	N/A
ALAMO RADIATOR 778 NOGALES AVE #B WALNUT, CA 91798	LOS ANGELES CO. HMS Facility ID: 021089-029860	N/A
SIMIN'S BEAUTY SALON 750 NOGALES AVE #H WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021075-029826	N/A
SUPER-TEK MOTORS 750 NOGALES AVE #D WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021076-029827	N/A
JED AUTO REPAIR 778 N NOGALES AVE #A WALNUT, CA 91789	HWTS	N/A
SUPERTEK MOTORS 750 N NOGALES ST UNI WALNUT, CA 91789	HWTS	N/A
RES AUTO CARE 750 NOGALES ST UNIT WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000452574	CAL000452574
EUROJUNKYS INC 762 N NOGALES ST WALNUT, CA 91789	FINDS Registry ID:: 110017946268 ECHO Registry ID: 110070849514	N/A
PRO & NEAT AUTO 778 NOGALES AVE #C WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021092-029863	N/A
RICH'S TINT SHOP 784 NOGALES AVE #B WALNUT, CA 91789	LOS ANGELES CO. HMS	N/A

EXECUTIVE SUMMARY

Facility ID: 021093-029866

TRI CITY AUTO REPAIR 750 N NOGALES ST UNI WALNUT, CA 91789	HWTS	N/A
TEXACO EXPRESS LUBE 762 N NOGALES AVE WALNUT, CA 91789	HWTS	N/A
SINGH'S POWER AUTO C 762 NOGALES AVE BLDG WALNUT, CA 91789	HWTS	N/A
H A T AUTO SERVICE 750 NOGALES ST #C WALNUT, CA 91789	FINDS	N/A
ALAMO AUTOMOTIVE SER 750 NOGALES WALNUT, CA 91789	HWTS	N/A
K SPEC MOTORS LLC 778 N NOGALES ST UNI WALNUT, CA 91789	FINDS	N/A
AUTOCARE 101 INC 750 N NOGALES ST STE WALNUT, CA 91789	HWTS	N/A
JED AUTO REPAIR 778 A N NOGALES ST WALNUT, CA 91789	HWTS	N/A
EJS AUTOMOTIVE 778 NOGALES AVE UNIT WALNUT, CA 91789	HWTS	N/A
ALAMO CAR WASH DBA C 784 NOGALES AVE #A WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 014427-015014	N/A
SUPERTEK MOTORS 750 N NOGALES ST UNI WALNUT, CA 91789	HWTS	N/A

EXECUTIVE SUMMARY

EUROJUNKYS INC 762 N NOGALES ST WALNUT, CA 91789	RCRA NonGen / NLR	CAL000456817
PREVENTION AUTO CARE 750 N NOGALES ST UNI WALNUT, CA 91789	HWTS	N/A
AUTO CARE 101 750 N NOGALES ST STE WALNUT, CA 91789	HWTS	N/A
AUTOCARE 101 INC 750 N NOGALES ST STE WALNUT, CA 91789	FINDS	N/A
RAM AUTO REPAIR 778 NOGALES AVE #C WALNUT, CA 91789	FINDS Registry ID:: 110070448610 ECHO Registry ID: 110070448610	N/A
K SPEC MOTORS LLC 778 N NOGALES ST UNI WALNUT, CA 91789	RCRA NonGen / NLR	CAL000456935
REYES RACING & OFFRO 778 N NOGALES UNIT A WALNUT, CA 91789	HWTS	N/A
DAYTONA AUTO REPAIR 778 N NOGALES WALNUT, CA 91789	HWTS	N/A
JED AUTO REPAIR 778-A N NOGALES ST WALNUT, CA 91789	RCRA-SQG EPA ID:: CAD983595919	CAD983595919
MOBIL XPRESS LUBE 762 N NOGALES ST # B WALNUT, CA 91789	CERS HAZ WASTE CERS TANKS CERS	N/A
TOYOTA & HONDA SPECI 778 N NOGALES ST # C WALNUT, CA 91789	FINDS Registry ID:: 110065191660	N/A
ALAMO CAR WASH 784 NOGALES ST. WALNUT, CA 91789	CERS	N/A

EXECUTIVE SUMMARY

ALAMO CAR WASH 784 NOGALES AVE. WALNUT, CA	RGA LUST	N/A
DC LOGISTICS 780 NOGALES ST #8 CITY OF INDUSTRY, CA 91789	ECHO Registry ID: 110070947111	N/A
AUTOCARE 101 INC 750 N NOGALES ST STE WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000448914	CAL000448914
CHEVRON (ON THE RUN) 762 N NOGALES ST # A WALNUT, CA 91789	FINDS Registry ID:: 110065046970	N/A
RES AUTO CARE 750 NOGALES STREET, WALNUT, CA 91789	HAULERS Facility ID: 1947568	N/A
BEST FRIENDS AUTO SH 778 NOGALES AVE STE WALNUT, CA 91789	HWTS	N/A
TEXACO EXPRESS LUBE 762 N NOGALES ST WALNUT, CA 91789	HWTS	N/A
SUPERTEK MOTORS 750 NOGALES AVE STE WALNUT, CA 91789	HWTS	N/A
ALAMO CAR WASH 784 NOGALES AVE #A WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 014427-029865	N/A
J P AUTO 778 N NOGALES STE B WALNUT, CA 91789	HWTS	N/A
K SPEC MOTORS LLC 778 N NOGALES ST UNI WALNUT, CA 91789	ECHO Registry ID: 110070905461	N/A
DAYTONA AUTO REPAIR 778 N NOGALES ST STE WALNUT, CA 91789	RCRA NonGen / NLR	CAL000457049

EXECUTIVE SUMMARY

ALAMO CAR WASH 784 NO NOGALES WALNUT, CA 91789	HAZNET GEPAID: CAC002206073 HWTS	N/A
RAM AUTO REPAIR 778 NOGALES AVE #C WALNUT, CA 91789	HAZNET GEPAID: CAL000147223 HWTS	N/A
PREVENTION AUTO CARE 778 NORTH NOGALES WALNUT, CA 91789	HAZNET GEPAID: CAL000177095 HWTS	N/A
AUTO CARE 101 750 N NOGALES ST # E WALNUT, CA 91789	FINDS Registry ID:: 110065765087 ECHO Registry ID: 110065765087	N/A
DAYTONA AUTO REPAIR 778 N NOGALES WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000337225	CAL000337225
SUPERTRACK MOTORS 750 N NOGALES AVE WALNUT, CA 91789	HAZNET GEPAID: CAL000201032 HWTS	N/A
TRACT 88205 780 FRANCESCA DRIVE WALNUT, CA 91789	NPDES Facility Status: Active CIWQS	N/A
MANNYS AUTOMOTIVE SO 778 N NOGALES ST #A WALNUT, CA 91789	HWTS	N/A
SUPER-TEK MOTORS 750 N NOGALES ST # D WALNUT, CA 91789	FINDS Registry ID:: 110066098948	N/A
TRI CITY AUTO REPAIR 750 N NOGALES UNIT F WALNUT, CA 91789	HWTS	N/A
H A T AUTO SERVICE 750 NOGALES AVE STE WALNUT, CA 91789	CERS HAZ WASTE HWTS	N/A

EXECUTIVE SUMMARY

HAT AUTO SERVICE 750 NOGALES AVE UNIT WALNUT, CA 91789	HAZNET GEPAID: CAL000208853 HWTS	N/A
ALAMO CAR WASH 784 NO NOGALES WALNUT, CA 91789	ECHO Registry ID: 110070798498	N/A
H A T AUTO SERVICE 750 N NOGALES ST # C WALNUT, CA 91789	FINDS Registry ID:: 110066609968	N/A
EUROJUNKYS INC 762 NOGALES AVE STE WALNUT, CA 91789	CERS HAZ WASTE LOS ANGELES CO. HMS Facility ID: 008290-I08843 Facility ID: 008290-008843 Facility ID: 008290-029836 Facility ID: 008290-060544 CERS	N/A
H A T AUTO SERVICE 750 NOGALES ST #C WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000446901	CAL000446901
PRO CARWORKS INC 762 N NOGALES ST # D WALNUT, CA 91789	FINDS Registry ID:: 110066543039	N/A
1X NOGALES CAR WASH 784 NO NOGALES WALNUT, CA 91789	HAZNET GEPAID: CAC000633648 HWTS	N/A
ALAMO CAR WASH 784 N NOGALES ST # A WALNUT, CA 91789	UST Database: UST, Date of Government Version: 09/07/2021 Facility Id: LACoFA0018716	N/A
CHEVRON CORPORATION 762 NOGALES AVE STE WALNUT, CA 91789	EDR Hist Auto	N/A
DAYTONA AUTO REPAIR 778 N NOGALES ST # B WALNUT, CA 91789	FINDS Registry ID:: 110065407606 ECHO	N/A

EXECUTIVE SUMMARY

	Registry ID: 110065407606	
RAM AUTO REPAIR 778 NOGALES AVE #C WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000147223	CAL000147223
FREY ENVIRONMENTAL I 762 NOGALES AVE WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 008290-057839	N/A
SCOTT KETCHUM 780 S NOGALES ST CITY OF INDUSTRY, CA 91789	LOS ANGELES CO. HMS Facility ID: 015360-025519	N/A
AUTO CARE 101 750 N NOGALES ST STE WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000310216	CAL000310216
ALAMO CAR WASH 784 NOGALES AVE STE WALNUT, CA 91789	UST Database: UST, Date of Government Version: 09/07/2021 Facility Id: 15014	N/A
CHEVRON ON THE RUN 762 NOGALES ST. STE WALNUT, CA 91789	UST Database: UST, Date of Government Version: 09/07/2021 Facility Id: LACoFA0018734	N/A
ALAMO CAR WASH 784 NO NOGALES WALNUT, CA 91789	FINDS	N/A
FANCY CUTS 778 NOGALES AVE #D WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021090-029861	N/A
EUROJUNKYS INC 762 N NOGALES ST WALNUT, CA 91789	HAZNET GEPAID: CAL000097443 HWTS	N/A
ALAMO CAR WASH 784 NO NOGALES WALNUT, CA 91789	RCRA NonGen / NLR	CAL000454043

EXECUTIVE SUMMARY

PREVENTION AUTO CARE 750 N NOGALES ST # F WALNUT, CA 91789	FINDS Registry ID:: 110065853909	N/A
PRO CARWORKS INC 762 N NOGALES ST STE WALNUT, CA 91789	HWTS	N/A
AUTOCARE 101 750 NOGALES AVE #E WALNUT, CA 91789	LOS ANGELES CO. HMS Facility ID: 021074-029825	N/A
RES AUTO CARE 750 NOGALES ST UNIT WALNUT, CA 91789	FINDS	N/A
MANNYS AUTOMOTIVE SO 778 N NOGALES ST #A WALNUT, CA 91789	RCRA NonGen / NLR EPA ID:: CAL000432374	CAL000432374
TEXACO REFINING AND 784 N NOGALES WALNUT, CA 91789	HAZNET GEPAID: CAL000047441 HWTS	N/A
ALAMO RADIATOR AND A 778 NOGALES AVE UNIT WALNUT, CA 91789	HAZNET GEPAID: CAL000135925 HWTS	N/A
ALAMO CAR WASH 784 NOGALES ST. WALNUT, CA 91789	LUST Database: LUST, Date of Government Version: 09/07/2021 Status: Open - Eligible for Closure Global Id: T0603774352 Cortese Cleanup Status: COMPLETED - CASE CLOSED	N/A
H A T AUTO SERVICE 750 NOGALES ST #C WALNUT, CA 91789	HWTS	N/A

EXECUTIVE SUMMARY

DATABASES WITH NO MAPPED SITES

No mapped sites were found in EDR's search of available ("reasonably ascertainable ") government records either on the target property or within the search radius around the target property for the following databases:

STANDARD ENVIRONMENTAL RECORDS

Lists of Federal NPL (Superfund) sites

NPL ---------- National Priority List
Proposed NPL ---------- Proposed National Priority List Sites
NPL LIENS ---------- Federal Superfund Liens

Lists of Federal Delisted NPL sites

Delisted NPL ---------- National Priority List Deletions

Lists of Federal sites subject to CERCLA removals and CERCLA orders

FEDERAL FACILITY ---------- Federal Facility Site Information listing
SEMS ---------- Superfund Enterprise Management System

Lists of Federal CERCLA sites with NFRAP

SEMS-ARCHIVE ---------- Superfund Enterprise Management System Archive

Lists of Federal RCRA facilities undergoing Corrective Action

CORRACTS ---------- Corrective Action Report

Lists of Federal RCRA TSD facilities

RCRA-TSDF ---------- RCRA - Treatment, Storage and Disposal

Lists of Federal RCRA generators

RCRA-LQG ---------- RCRA - Large Quantity Generators
RCRA-VSQG ---------- RCRA - Very Small Quantity Generators (Formerly Conditionally Exempt Small Quantity Generators)

Federal institutional controls / engineering controls registries

LUCIS ---------- Land Use Control Information System
US ENG CONTROLS ---------- Engineering Controls Sites List
US INST CONTROLS ---------- Institutional Controls Sites List

Federal ERNS list

ERNS ---------- Emergency Response Notification System

Lists of state- and tribal (Superfund) equivalent sites

RESPONSE ---------- State Response Sites

Lists of state and tribal landfills and solid waste disposal facilities

SWF/LF ---------- Solid Waste Information System

Lists of state and tribal leaking storage tanks

INDIAN LUST ---------- Leaking Underground Storage Tanks on Indian Land
CPS-SLIC ---------- Statewide SLIC Cases

Lists of state and tribal registered storage tanks

FEMA UST ---------- Underground Storage Tank Listing
INDIAN UST ---------- Underground Storage Tanks on Indian Land

Lists of state and tribal voluntary cleanup sites

INDIAN VCP ---------- Voluntary Cleanup Priority Listing
VCP ---------- Voluntary Cleanup Program Properties

Lists of state and tribal brownfield sites

BROWNFIELDS ---------- Considered Brownfieds Sites Listing

ADDITIONAL ENVIRONMENTAL RECORDS

Local Brownfield lists

US BROWNFIELDS ---------- A Listing of Brownfields Sites

Local Lists of Landfill / Solid Waste Disposal Sites

WMUDS/SWAT ---------- Waste Management Unit Database
SWRCY ---------- Recycler Database
INDIAN ODI ---------- Report on the Status of Open Dumps on Indian Lands
DEBRIS REGION 9 ---------- Torres Martinez Reservation Illegal Dump Site Locations
ODI ---------- Open Dump Inventory
IHS OPEN DUMPS ---------- Open Dumps on Indian Land

Local Lists of Hazardous waste / Contaminated Sites

US HIST CDL ---------- Delisted National Clandestine Laboratory Register
AOCONCERN ---------- Key Areas of Concerns in Los Angeles County
HIST Cal-Sites ---------- Historical Calsites Database
SCH ---------- School Property Evaluation Program
CDL ---------- Clandestine Drug Labs
Toxic Pits ---------- Toxic Pits Cleanup Act Sites
US CDL ---------- National Clandestine Laboratory Register
PFAS ---------- PFAS Contamination Site Location Listing
AQUEOUS FOAM ---------- Former Fire Training Facility Assessments Listing

Local Land Records

LIENS ---------- Environmental Liens Listing

LIENS 2	CERCLA Lien Information
DEED	Deed Restriction Listing

Records of Emergency Release Reports

HMIRS	Hazardous Materials Information Reporting System
CHMIRS	California Hazardous Material Incident Report System
LDS	Land Disposal Sites Listing
MCS	Military Cleanup Sites Listing
SPILLS 90	SPILLS 90 data from FirstSearch

Other Ascertainable Records

FUDS	Formerly Used Defense Sites
DOD	Department of Defense Sites
SCRD DRYCLEANERS	State Coalition for Remediation of Drycleaners Listing
US FIN ASSUR	Financial Assurance Information
EPA WATCH LIST	EPA WATCH LIST
2020 COR ACTION	2020 Corrective Action Program List
TSCA	Toxic Substances Control Act
TRIS	Toxic Chemical Release Inventory System
SSTS	Section 7 Tracking Systems
ROD	Records Of Decision
RMP	Risk Management Plans
RAATS	RCRA Administrative Action Tracking System
PRP	Potentially Responsible Parties
PADS	PCB Activity Database System
ICIS	Integrated Compliance Information System
FTTS	FIFRA/ TSCA Tracking System - FIFRA (Federal Insecticide, Fungicide, & Rodenticide Act)/TSCA (Toxic Substances Control Act)
MLTS	Material Licensing Tracking System
COAL ASH DOE	Steam-Electric Plant Operation Data
COAL ASH EPA	Coal Combustion Residues Surface Impoundments List
PCB TRANSFORMER	PCB Transformer Registration Database
RADINFO	Radiation Information Database
HIST FTTS	FIFRA/TSCA Tracking System Administrative Case Listing
DOT OPS	Incident and Accident Data
CONSENT	Superfund (CERCLA) Consent Decrees
INDIAN RESERV	Indian Reservations
FUSRAP	Formerly Utilized Sites Remedial Action Program
UMTRA	Uranium Mill Tailings Sites
LEAD SMELTERS	Lead Smelter Sites
US AIRS	Aerometric Information Retrieval System Facility Subsystem
US MINES	Mines Master Index File
ABANDONED MINES	Abandoned Mines
UXO	Unexploded Ordnance Sites
DOCKET HWC	Hazardous Waste Compliance Docket Listing
FUELS PROGRAM	EPA Fuels Program Registered Listing
CA BOND EXP. PLAN	Bond Expenditure Plan
CUPA Listings	CUPA Resources List
EMI	Emissions Inventory Data
ENF	Enforcement Action Listing
Financial Assurance	Financial Assurance Information Listing
ICE	ICE
HWP	EnviroStor Permitted Facilities Listing

HWT ---- Registered Hazardous Waste Transporter Database
MINES ---- Mines Site Location Listing
MWMP ---- Medical Waste Management Program Listing
PEST LIC ---- Pesticide Regulation Licenses Listing
PROC ---- Certified Processors Database
Notify 65 ---- Proposition 65 Records
LA Co. Site Mitigation ---- Site Mitigation List
UIC ---- UIC Listing
UIC GEO ---- UIC GEO (GEOTRACKER)
WASTEWATER PITS ---- Oil Wastewater Pits Listing
WDS ---- Waste Discharge System
WIP ---- Well Investigation Program Case List
MILITARY PRIV SITES ---- MILITARY PRIV SITES (GEOTRACKER)
PROJECT ---- PROJECT (GEOTRACKER)
WDR ---- Waste Discharge Requirements Listing
NON-CASE INFO ---- NON-CASE INFO (GEOTRACKER)
OTHER OIL GAS ---- OTHER OIL & GAS (GEOTRACKER)
PROD WATER PONDS ---- PROD WATER PONDS (GEOTRACKER)
SAMPLING POINT ---- SAMPLING POINT (GEOTRACKER)
WELL STIM PROJ ---- Well Stimulation Project (GEOTRACKER)
LOS ANGELES CO LF METHANE ---- Methane Producing Landfills
MINES MRDS ---- Mineral Resources Data System

EDR HIGH RISK HISTORICAL RECORDS

EDR Exclusive Records

EDR MGP ---- EDR Proprietary Manufactured Gas Plants

EDR RECOVERED GOVERNMENT ARCHIVES

Exclusive Recovered Govt. Archives

RGA LF ---- Recovered Government Archive Solid Waste Facilities List

SURROUNDING SITES: SEARCH RESULTS

Surrounding sites were identified in the following databases.

Elevations have been determined from the USGS Digital Elevation Model and should be evaluated on a relative (not an absolute) basis. Relative elevation information between sites of close proximity should be field verified. Sites with an elevation equal to or higher than the target property have been differentiated below from sites with an elevation lower than the target property.
Page numbers and map identification numbers refer to the EDR Radius Map report where detailed data on individual sites can be reviewed.

Sites listed in ***bold italics*** are in multiple databases.

Unmappable (orphan) sites are not considered in the foregoing analysis.

EXECUTIVE SUMMARY

STANDARD ENVIRONMENTAL RECORDS

Lists of Federal RCRA generators

RCRA-SQG: RCRAInfo is EPA's comprehensive information system, providing access to data supporting the Resource Conservation and Recovery Act (RCRA) of 1976 and the Hazardous and Solid Waste Amendments (HSWA) of 1984. The database includes selective information on sites which generate, transport, store, treat and/or dispose of hazardous waste as defined by the Resource Conservation and Recovery Act (RCRA). Small quantity generators (SQGs) generate between 100 kg and 1,000 kg of hazardous waste per month.

A review of the RCRA-SQG list, as provided by EDR, and dated 09/13/2021 has revealed that there are 4 RCRA-SQG sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
TEMPO DRY CLEANERS EPA ID:: CAD981650476	***820 N NOGALES***	***NW 0 - 1/8 (0.045 mi.)***	***B109***	***201***
OILMEN 2 EPA ID:: CAD981167901	***856 NOGALES ST***	***NW 0 - 1/8 (0.086 mi.)***	***B123***	***225***
WALNUT HILLS CLEANER EPA ID:: CAD983615238	***18732 AMAR RD***	***N 1/8 - 1/4 (0.164 mi.)***	***H143***	***312***
AA CLEANERS EPA ID:: CAD983603705	***18800 AMAR RD UNIT C***	***NNE 1/8 - 1/4 (0.231 mi.)***	***K154***	***342***

Lists of state- and tribal hazardous waste facilities

ENVIROSTOR: The Department of Toxic Substances Control's (DTSC's) Site Mitigation and Brownfields Reuse Program's (SMBRP's) EnviroStor database identifes sites that have known contamination or sites for which there may be reasons to investigate further. The database includes the following site types: Federal Superfund sites (National Priorities List (NPL)); State Response, including Military Facilities and State Superfund; Voluntary Cleanup; and School sites. EnviroStor provides similar information to the information that was available in CalSites, and provides additional site information, including, but not limited to, identification of formerly-contaminated properties that have been released for reuse, properties where environmental deed restrictions have been recorded to prevent inappropriate land uses, and risk characterization information that is used to assess potential impacts to public health and the environment at contaminated sites.

A review of the ENVIROSTOR list, as provided by EDR, and dated 07/22/2021 has revealed that there is 1 ENVIROSTOR site within approximately 1 mile of the target property.

Lower Elevation	Address	Direction / Distance	Map ID	Page
OSWALT ELEMENTARY SC Facility Id: 60001139 Status: No Action Required	***19501 SHADOW OAK DRI***	***SSE 1/4 - 1/2 (0.257 mi.)***	***158***	***352***

Lists of state and tribal leaking storage tanks

LUST: Leaking Underground Storage Tank (LUST) Sites included in GeoTracker. GeoTracker is the Water Boards data management system for sites that impact, or have the potential to impact, water quality in California, with emphasis on groundwater.

A review of the LUST list, as provided by EDR, has revealed that there are 2 LUST sites within approximately 0.5 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
FIRESTONE STORE #27W	***860 NOGALES***	***NW 0 - 1/8 (0.102 mi.)***	***E127***	***249***
Database: LUST, Date of Government Version: 09/07/2021 Status: Completed - Case Closed Global Id: T10000006819				
76 PRODUCTS STATION	***18702 AMAR RD***	***NNW 1/8 - 1/4 (0.157 mi.)***	***G138***	***295***
Database: LUST REG 4, Date of Government Version: 09/07/2004 Database: LUST, Date of Government Version: 09/07/2021 Status: Completed - Case Closed Facility Id: R-08106 Status: Case Closed Global Id: T0603704770 Global ID: T0603704770				

Lists of state and tribal registered storage tanks

UST: The Underground Storage Tank database contains registered USTs. USTs are regulated under Subtitle I of the Resource Conservation and Recovery Act (RCRA). The data come from the State Water Resources Control Board's Hazardous Substance Storage Container Database.

A review of the UST list, as provided by EDR, has revealed that there are 3 UST sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
JIFFY LUBE #374	856 NOGALES AVE	NW 0 - 1/8 (0.080 mi.)	B119	220
Database: UST, Date of Government Version: 09/07/2021 Facility Id: 14023				
WALNUT 76 INC	18702 AMAR RD	NNW 1/8 - 1/4 (0.157 mi.)	G137	295
Database: UST, Date of Government Version: 09/07/2021 Facility Id: LACoFA0002748				
TOSCO/UNOCAL #31216	18702 AMAR RD	NNW 1/8 - 1/4 (0.157 mi.)	G139	300
Database: UST, Date of Government Version: 09/07/2021 Facility Id: 24734				

AST: A listing of aboveground storage tank petroleum storage tank locations.

A review of the AST list, as provided by EDR, has revealed that there is 1 AST site within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
JIFFY LUBE #374	***856 N NOGALES ST***	***NW 0 - 1/8 (0.080 mi.)***	***B121***	***221***
Database: AST, Date of Government Version: 07/06/2016				

ADDITIONAL ENVIRONMENTAL RECORDS

Local Lists of Hazardous waste / Contaminated Sites

CERS HAZ WASTE: List of sites in the California Environmental Protection Agency (CalEPA) Regulated Site Portal which fall under the Hazardous Chemical Management, Hazardous Waste Onsite Treatment, Household Hazardous Waste Collection, Hazardous Waste Generator, and RCRA LQ HW Generator programs.

A review of the CERS HAZ WASTE list, as provided by EDR, and dated 07/15/2021 has revealed that there are 5 CERS HAZ WASTE sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
M B STARS	*788 FRANCESCA DR # 1*	*NE 0 - 1/8 (0.066 mi.)*	*C116*	*211*
THE OILMEN	*856 NOGALES ST*	*NW 0 - 1/8 (0.086 mi.)*	*B124*	*228*
FIRESTONE COMPLETE A	*860 NOGALES ST*	*NW 0 - 1/8 (0.111 mi.)*	*E128*	*266*
WALNUT 76 INC	*18702 AMAR RD*	*NNW 1/8 - 1/4 (0.157 mi.)*	*G134*	*277*
O'REILLY AUTO PARTS	*18724 AMAR RD*	*NNW 1/8 - 1/4 (0.162 mi.)*	*G141*	*303*

Local Lists of Registered Storage Tanks

SWEEPS UST: Statewide Environmental Evaluation and Planning System. This underground storage tank listing was updated and maintained by a company contacted by the SWRCB in the early 1990's. The listing is no longer updated or maintained. The local agency is the contact for more information on a site on the SWEEPS list.

A review of the SWEEPS UST list, as provided by EDR, and dated 06/01/1994 has revealed that there are 5 SWEEPS UST sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
FRANCESCA AUTO SERVI Status: A Tank Status: A Comp Number: 14657	*788 FRANCESCA DR*	*NE 0 - 1/8 (0.066 mi.)*	*C117*	*217*
JIFFY LUBE #374 Status: A Tank Status: A Comp Number: 14023	*856 N NOGALES ST*	*NW 0 - 1/8 (0.080 mi.)*	*B121*	*221*
FIRESTONE TIRE & RUB Status: A Tank Status: A Comp Number: 7910	*860 NOGALES AVE*	*NW 0 - 1/8 (0.102 mi.)*	*E126*	*248*
76 PRODUCTS STATION Status: A Tank Status: A Comp Number: 8106	*18702 AMAR RD*	*NNW 1/8 - 1/4 (0.157 mi.)*	*G138*	*295*
NOGALES CAR WASH Status: A Tank Status: A Comp Number: 15014	*894 N NOGALES ST*	*NNW 1/8 - 1/4 (0.180 mi.)*	*G146*	*327*

HIST UST: Historical UST Registered Database.

A review of the HIST UST list, as provided by EDR, and dated 10/15/1990 has revealed that there are 2 HIST UST sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
WALNUT JIFFY LUBE Facility Id: 00000067431	856 NOGALES AVE	NW 0 - 1/8 (0.080 mi.)	B120	221
JIFFY LUBE #374	***856 N NOGALES ST***	***NW 0 - 1/8 (0.080 mi.)***	***B121***	***221***

CA FID UST: The Facility Inventory Database contains active and inactive underground storage tank locations. The source is the State Water Resource Control Board.

A review of the CA FID UST list, as provided by EDR, and dated 10/31/1994 has revealed that there is 1 CA FID UST site within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
NOGALES CAR WASH Facility Id: 19055101 Status: A	***894 N NOGALES ST***	***NNW 1/8 - 1/4 (0.180 mi.)***	***G146***	***327***

CERS TANKS: List of sites in the California Environmental Protection Agency (CalEPA) Regulated Site Portal which fall under the Aboveground Petroleum Storage and Underground Storage Tank regulatory programs.

A review of the CERS TANKS list, as provided by EDR, and dated 07/15/2021 has revealed that there are 2 CERS TANKS sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
THE OILMEN	***856 NOGALES ST***	***NW 0 - 1/8 (0.086 mi.)***	***B124***	***228***
WALNUT 76 INC	***18702 AMAR RD***	***NNW 1/8 - 1/4 (0.157 mi.)***	***G134***	***277***

Other Ascertainable Records

RCRA NonGen / NLR: RCRAInfo is EPA's comprehensive information system, providing access to data supporting the Resource Conservation and Recovery Act (RCRA) of 1976 and the Hazardous and Solid Waste Amendments (HSWA) of 1984. The database includes selective information on sites which generate, transport, store, treat and/or dispose of hazardous waste as defined by the Resource Conservation and Recovery Act (RCRA). Non-Generators do not presently generate hazardous waste.

A review of the RCRA NonGen / NLR list, as provided by EDR, and dated 09/13/2021 has revealed that there are 19 RCRA NonGen / NLR sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
JOSE RODRIGUEZ EPA ID:: CAC003049914	727 AMADOR CIR	SE 0 - 1/8 (0.010 mi.)	A107	196
MA BROTHERS DBA MB S EPA ID:: CAL000447157	788 FRANCESCA DR 1A	NE 0 - 1/8 (0.066 mi.)	C115	208
FIRESTONE COMPLETE A	860 NOGALES AVE	NW 0 - 1/8 (0.102 mi.)	E125	245

EPA ID:: CAL000365642				
ISAGO, SUZANNE EPA ID:: CAC002989815	2401 FELICIA STREET	W 1/8 - 1/4 (0.143 mi.)	F133	275
WALNUT 76 INC EPA ID:: CAL000355415	18702 AMAR RD	NNW 1/8 - 1/4 (0.157 mi.)	G135	292
O'REILLY AUTO PARTS EPA ID:: CAL000392759	18724 AMAR RD	NNW 1/8 - 1/4 (0.162 mi.)	G140	301
BACH, RONALD EPA ID:: CAC002996533	3112 S. ADRIENNE DRI	SSW 1/8 - 1/4 (0.206 mi.)	I148	329
KAREN BOROUSET EPA ID:: CAC002995839	2405 ARLINE ST	S 1/8 - 1/4 (0.209 mi.)	J149	331
RAMON & MARIA PEREZ	3116 S ADRIENNE DR	SSW 1/8 - 1/4 (0.214 mi.)	I150	334
ESTHER VIALLNUEVA EPA ID:: CAC002999104	2409 ARLINE ST	S 1/8 - 1/4 (0.225 mi.)	J151	336
CASSANDRA TAYLOR EPA ID:: CAC003023355	3126 S. ADRIANE	SSW 1/8 - 1/4 (0.232 mi.)	I155	345
GEORGE RAMOS	2450 ARLINE ST	SSE 1/8 - 1/4 (0.236 mi.)	156	347
TONY HERNANDEZ	3027 S. BETSY STREET	WSW 1/8 - 1/4 (0.238 mi.)	157	350

Lower Elevation	Address	Direction / Distance	Map ID	Page
BEN VICENCIO	3126 GABRIELLA STREE	WSW 0 - 1/8 (0.030 mi.)	108	198
RAQUEL BALDEMOR	2439 GINGER COURT	S 0 - 1/8 (0.073 mi.)	D118	218
JESSE MARTINEZ EPA ID:: CAC003045432	2438 E GLORIA ST	SSW 0 - 1/8 (0.080 mi.)	D122	223
ELMER GIBSON	2433 GAIL COURT	S 0 - 1/8 (0.115 mi.)	130	269
MARGIE URIAS EPA ID:: CAC002975203	3114 FAITH ST	WSW 1/8 - 1/4 (0.138 mi.)	F132	272
JUSTIN TUAZON	3139 FAITH STREET	SW 1/8 - 1/4 (0.162 mi.)	142	309

Cortese: The sites for the list are designated by the State Water Resource Control Board (LUST), the Integrated Waste Board (SWF/LS), and the Department of Toxic Substances Control (Cal-Sites).

A review of the Cortese list, as provided by EDR, and dated 09/20/2021 has revealed that there are 2 Cortese sites within approximately 0.5 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
FIRESTONE STORE #27W	***860 NOGALES***	***NW 0 - 1/8 (0.102 mi.)***	***E127***	***249***
Cleanup Status: COMPLETED - CASE CLOSED				
76 PRODUCTS STATION	***18702 AMAR RD***	***NNW 1/8 - 1/4 (0.157 mi.)***	***G138***	***295***
Cleanup Status: COMPLETED - CASE CLOSED				

DRYCLEANERS: A list of drycleaner related facilities that have EPA ID numbers. These are facilities with certain SIC codes: power laundries, family and commercial; garment pressing and cleaners' agents; linen supply; coin-operated laundries and cleaning; drycleaning plants except rugs; carpet and upholster cleaning; industrial launderers; laundry and garment services.

A review of the DRYCLEANERS list, as provided by EDR, has revealed that there are 10 DRYCLEANERS

sites within approximately 0.25 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
TEMPO DRY CLEANERS	***820 N NOGALES***	***NW 0 - 1/8 (0.045 mi.)***	***B109***	***201***
Database: DRYCLEANERS, Date of Government Version: 08/27/2021 EPA Id: CAL000025173				
TEMPO CLEANERS	820 NOGALES	NW 0 - 1/8 (0.045 mi.)	B111	206
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
TEMPO DRY CLEANERS	820 N NOGALES	NW 0 - 1/8 (0.045 mi.)	B113	207
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
TEMPO CLEANERS	820 N NOGALES	NW 0 - 1/8 (0.045 mi.)	B114	208
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
WALNUT HILLS CLEANER	***18732 AMAR RD***	***N 1/8 - 1/4 (0.164 mi.)***	***H143***	***312***
Database: DRYCLEANERS, Date of Government Version: 08/27/2021 Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021 EPA Id: CAL000332616 EPA Id: CAD983615238 EPA Id: CAL000229819 EPA Id: CAL000271709				
WALNUT HILLS CLEANER	18732 AMAR RD #84	N 1/8 - 1/4 (0.164 mi.)	H144	325
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
WALNUT HILLS CLEANER	18732 AMAR RD	N 1/8 - 1/4 (0.164 mi.)	H145	326
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
MEDDA'S CLEANERS	2550 E AMAR RD	NW 1/8 - 1/4 (0.199 mi.)	147	328
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
AA CLEANERS	***18800 AMAR C-9 RD***	***NNE 1/8 - 1/4 (0.231 mi.)***	***K152***	***339***
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				
AA CLEANERS	18800 AMAR RD STE C	NNE 1/8 - 1/4 (0.231 mi.)	K153	341
Database: DRYCLEAN SOUTH COAST, Date of Government Version: 08/18/2021				

HIST CORTESE: The sites for the list are designated by the State Water Resource Control Board [LUST], the Integrated Waste Board [SWF/LS], and the Department of Toxic Substances Control [CALSITES]. This listing is no longer updated by the state agency.

A review of the HIST CORTESE list, as provided by EDR, and dated 04/01/2001 has revealed that there are 2 HIST CORTESE sites within approximately 0.5 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
MARINELAND	6600 PALOS VERDES	NNW 1/8 - 1/4 (0.157 mi.)	G136	295
Reg Id: R-01409				
76 PRODUCTS STATION	***18702 AMAR RD***	***NNW 1/8 - 1/4 (0.157 mi.)***	***G138***	***295***
Reg Id: R-08106				

EXECUTIVE SUMMARY

EDR HIGH RISK HISTORICAL RECORDS

EDR Exclusive Records

EDR Hist Auto: EDR has searched selected national collections of business directories and has collected listings of potential gas station/filling station/service station sites that were available to EDR researchers. EDR's review was limited to those categories of sources that might, in EDR's opinion, include gas station/filling station/service station establishments. The categories reviewed included, but were not limited to gas, gas station, gasoline station, filling station, auto, automobile repair, auto service station, service station, etc. This database falls within a category of information EDR classifies as "High Risk Historical Records", or HRHR. EDR's HRHR effort presents unique and sometimes proprietary data about past sites and operations that typically create environmental concerns, but may not show up in current government records searches.

A review of the EDR Hist Auto list, as provided by EDR, has revealed that there are 2 EDR Hist Auto sites within approximately 0.125 miles of the target property.

Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
TEXACO CAR CARE CENT	18935 TRUCKE WAY	ESE 0 - 1/8 (0.119 mi.)	131	272

Lower Elevation	Address	Direction / Distance	Map ID	Page
MOBIL STATION	2422 FELICIA ST	WSW 0 - 1/8 (0.111 mi.)	F129	269

EDR Hist Cleaner: EDR has searched selected national collections of business directories and has collected listings of potential dry cleaner sites that were available to EDR researchers. EDR's review was limited to those categories of sources that might, in EDR's opinion, include dry cleaning establishments. The categories reviewed included, but were not limited to dry cleaners, cleaners, laundry, laundromat, cleaning/laundry, wash & dry etc. This database falls within a category of information EDR classifies as "High Risk Historical Records", or HRHR. EDR's HRHR effort presents unique and sometimes proprietary data about past sites and operations that typically create environmental concerns, but may not show up in current government records searches.

A review of the EDR Hist Cleaner list, as provided by EDR, has revealed that there are 2 EDR Hist Cleaner sites within approximately 0.125 miles of the target property.

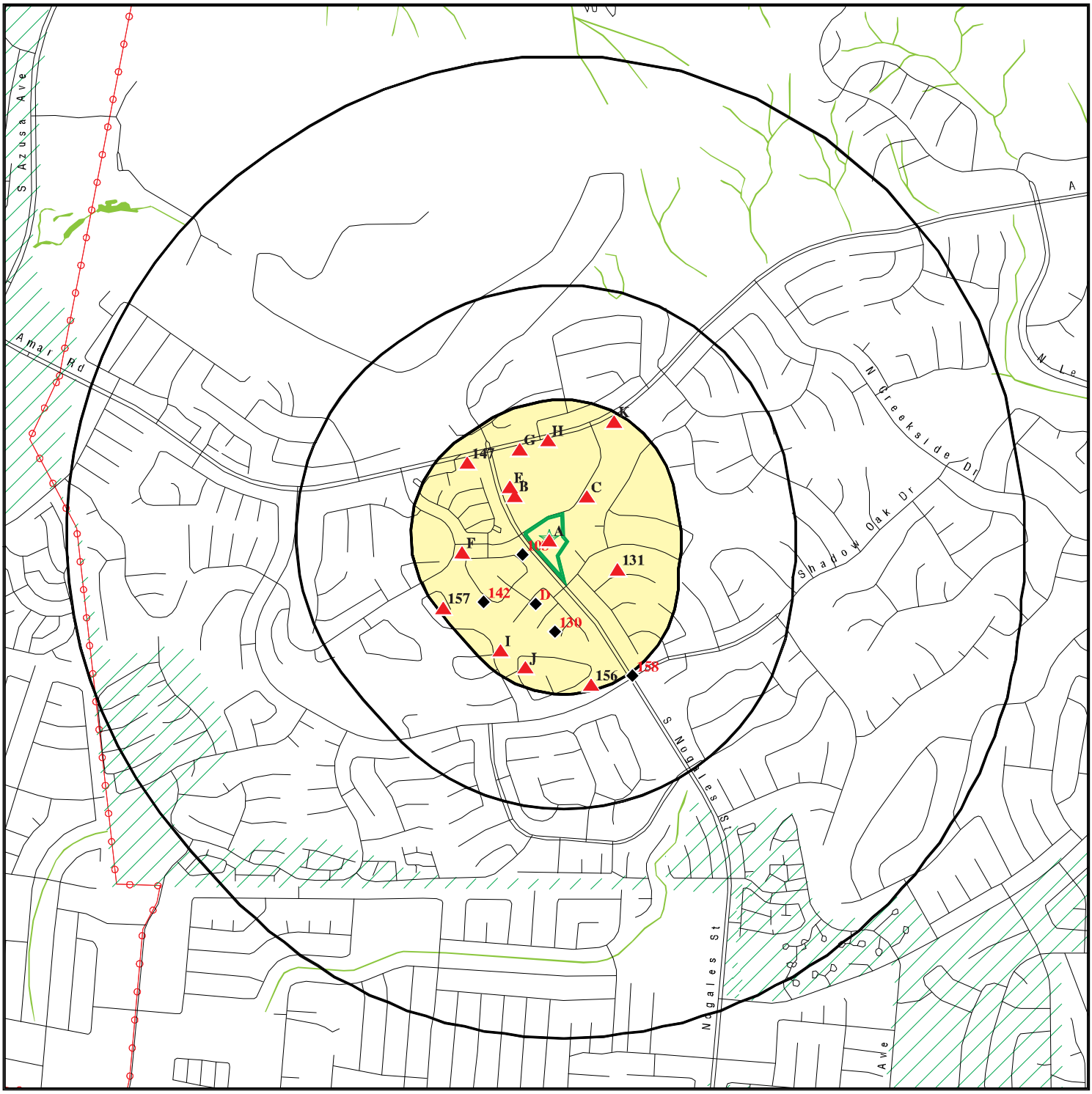
Equal/Higher Elevation	Address	Direction / Distance	Map ID	Page
PRAM TOM	820 NOGALES AVE	NW 0 - 1/8 (0.045 mi.)	B110	206
TEMPO CLEANERS	820 NOGALES ST	NW 0 - 1/8 (0.045 mi.)	B112	207

EXECUTIVE SUMMARY

Due to poor or inadequate address information, the following sites were not mapped. Count: 2 records.

Site Name	Database(s)
DOLLAR TREE #03707	CERS HAZ WASTE, CERS
SAN GABRIEL GROUND WATER BASIN 4	CA BOND EXP. PLAN

OVERVIEW MAP - 6816654.2S



- Target Property
- Sites at elevations higher than or equal to the target property
- Sites at elevations lower than the target property
- Manufactured Gas Plants
- National Priority List Sites
- Dept. Defense Sites
- Indian Reservations BIA
- Power transmission lines
- Special Flood Hazard Area (1%)
- 0.2% Annual Chance Flood Hazard
- National Wetland Inventory
- State Wetlands
- Areas of Concern

This report includes Interactive Map Layers to display and/or hide map information. The legend includes only those icons for the default map view.

SITE NAME:	Gerstner Family Trust Property	CLIENT:	AdvancedGeo, Inc.
ADDRESS:	750 - 784 North Nogales Avenue Walnut CA 91789	CONTACT:	Kim Burchard
LAT/LONG:	34.024699 / 117.893403	INQUIRY #:	6816654.2s
		DATE:	January 12, 2022 6:10 pm

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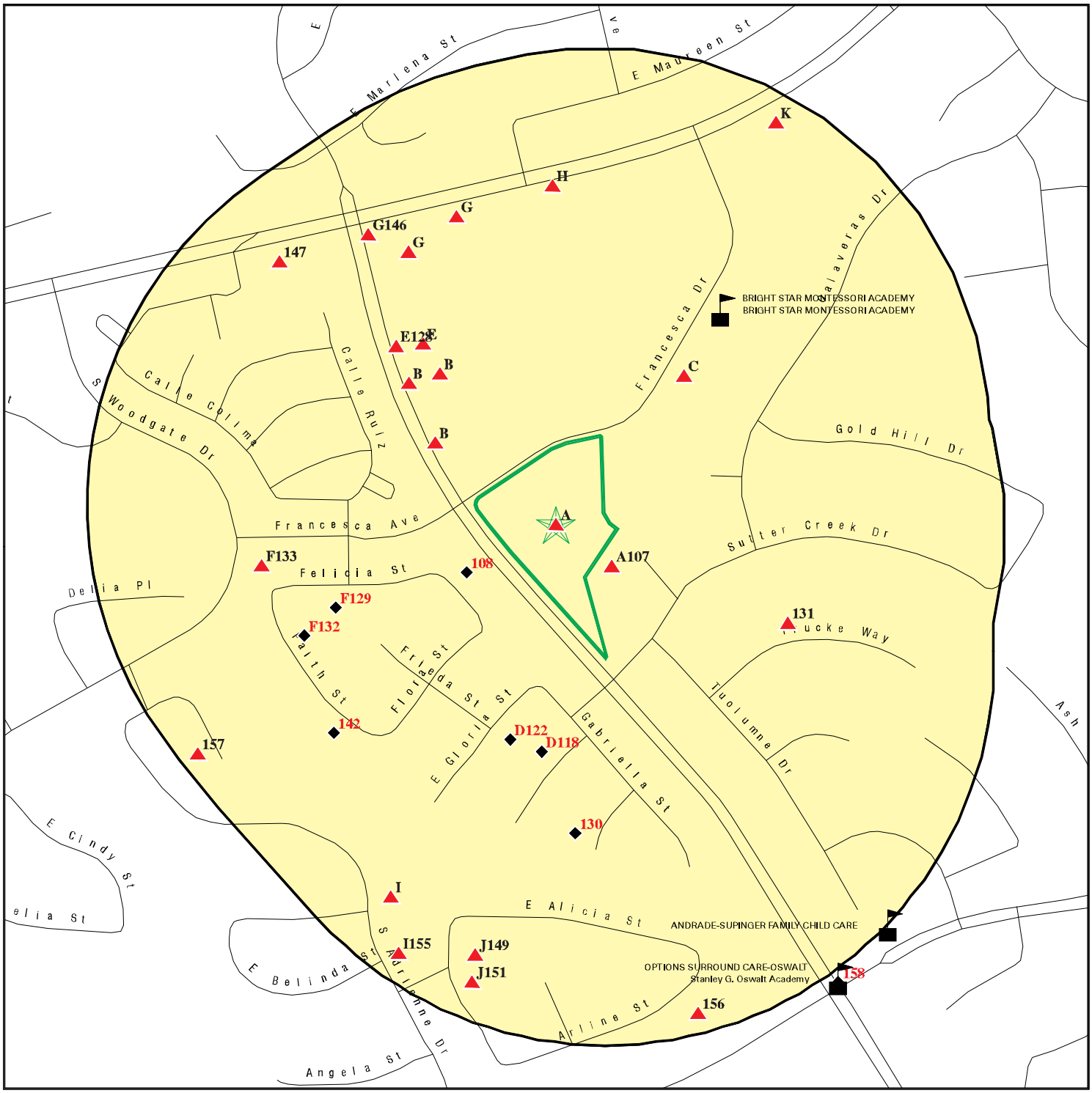
DETAIL MAP - 6816654.2S



Target Property

Sites at elevations higher than or equal to the target property

Sites at elevations lower than the target property

Manufactured Gas Plants

Sensitive Receptors

National Priority List Sites

Dept. Defense Sites

0 1/16 1/8 1/4 Miles

Indian Reservations BIA

Special Flood Hazard Area (1%)

0.2% Annual Chance Flood Hazard

Areas of Concern

This report includes Interactive Map Layers to display and/or hide map information. The legend includes only those icons for the default map view.

SITE NAME: Gerstner Family Trust Property	CLIENT: AdvancedGeo, Inc.
ADDRESS: 750 - 784 North Nogales Avenue Walnut CA 91789	CONTACT: Kim Burchard INQUIRY #: 6816654.2s
LAT/LONG: 34.024699 / 117.893403	DATE: January 12, 2022 6:17 pm

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MAP FINDINGS SUMMARY

Database	Search Distance (Miles)	Target Property	< 1/8	1/8 - 1/4	1/4 - 1/2	1/2 - 1	> 1	Total Plotted
STANDARD ENVIRONMENTAL RECORDS								
Lists of Federal NPL (Superfund) sites								
NPL	1.000		0	0	0	0	NR	0
Proposed NPL	1.000		0	0	0	0	NR	0
NPL LIENS	1.000		0	0	0	0	NR	0
Lists of Federal Delisted NPL sites								
Delisted NPL	1.000		0	0	0	0	NR	0
Lists of Federal sites subject to CERCLA removals and CERCLA orders								
FEDERAL FACILITY	0.500		0	0	0	NR	NR	0
SEMS	0.500		0	0	0	NR	NR	0
Lists of Federal CERCLA sites with NFRAP								
SEMS-ARCHIVE	0.500		0	0	0	NR	NR	0
Lists of Federal RCRA facilities undergoing Corrective Action								
CORRACTS	1.000		0	0	0	0	NR	0
Lists of Federal RCRA TSD facilities								
RCRA-TSDF	0.500		0	0	0	NR	NR	0
Lists of Federal RCRA generators								
RCRA-LQG	0.250		0	0	NR	NR	NR	0
RCRA-SQG	0.250	2	2	2	NR	NR	NR	6
RCRA-VSQG	0.250		0	0	NR	NR	NR	0
Federal institutional controls / engineering controls registries								
LUCIS	0.500		0	0	0	NR	NR	0
US ENG CONTROLS	0.500		0	0	0	NR	NR	0
US INST CONTROLS	0.500		0	0	0	NR	NR	0
Federal ERNS list								
ERNS	0.001		0	NR	NR	NR	NR	0
Lists of state- and tribal (Superfund) equivalent sites								
RESPONSE	1.000		0	0	0	0	NR	0
Lists of state- and tribal hazardous waste facilities								
ENVIROSTOR	1.000		0	0	1	0	NR	1
Lists of state and tribal landfills and solid waste disposal facilities								
SWF/LF	0.500		0	0	0	NR	NR	0

MAP FINDINGS SUMMARY

Database	Search Distance (Miles)	Target Property	< 1/8	1/8 - 1/4	1/4 - 1/2	1/2 - 1	> 1	Total Plotted
Lists of state and tribal leaking storage tanks								
LUST	0.500	1	1	1	0	NR	NR	3
INDIAN LUST	0.500		0	0	0	NR	NR	0
CPS-SLIC	0.500		0	0	0	NR	NR	0
Lists of state and tribal registered storage tanks								
FEMA UST	0.250		0	0	NR	NR	NR	0
UST	0.250	3	1	2	NR	NR	NR	6
AST	0.250	1	1	0	NR	NR	NR	2
INDIAN UST	0.250		0	0	NR	NR	NR	0
Lists of state and tribal voluntary cleanup sites								
INDIAN VCP	0.500		0	0	0	NR	NR	0
VCP	0.500		0	0	0	NR	NR	0
Lists of state and tribal brownfield sites								
BROWNFIELDS	0.500		0	0	0	NR	NR	0
ADDITIONAL ENVIRONMENTAL RECORDS								
Local Brownfield lists								
US BROWNFIELDS	0.500		0	0	0	NR	NR	0
Local Lists of Landfill / Solid Waste Disposal Sites								
WMUDS/SWAT	0.500		0	0	0	NR	NR	0
SWRCY	0.500		0	0	0	NR	NR	0
HAULERS	0.001	1	0	NR	NR	NR	NR	1
INDIAN ODI	0.500		0	0	0	NR	NR	0
DEBRIS REGION 9	0.500		0	0	0	NR	NR	0
ODI	0.500		0	0	0	NR	NR	0
IHS OPEN DUMPS	0.500		0	0	0	NR	NR	0
Local Lists of Hazardous waste / Contaminated Sites								
US HIST CDL	0.001		0	NR	NR	NR	NR	0
AOCONCERN	1.000		0	0	0	0	NR	0
HIST Cal-Sites	1.000		0	0	0	0	NR	0
SCH	0.250		0	0	NR	NR	NR	0
CDL	0.001		0	NR	NR	NR	NR	0
CERS HAZ WASTE	0.250	10	3	2	NR	NR	NR	15
Toxic Pits	1.000		0	0	0	0	NR	0
US CDL	0.001		0	NR	NR	NR	NR	0
PFAS	0.500		0	0	0	NR	NR	0
AQUEOUS FOAM	TP		NR	NR	NR	NR	NR	0
Local Lists of Registered Storage Tanks								
SWEEPS UST	0.250		3	2	NR	NR	NR	5
HIST UST	0.250		2	0	NR	NR	NR	2

MAP FINDINGS SUMMARY

Database	Search Distance (Miles)	Target Property	< 1/8	1/8 - 1/4	1/4 - 1/2	1/2 - 1	> 1	Total Plotted
CA FID UST	0.250		0	1	NR	NR	NR	1
CERS TANKS	0.250	2	1	1	NR	NR	NR	4
Local Land Records								
LIENS	0.001		0	NR	NR	NR	NR	0
LIENS 2	0.001		0	NR	NR	NR	NR	0
DEED	0.500		0	0	0	NR	NR	0
Records of Emergency Release Reports								
HMIRS	0.001		0	NR	NR	NR	NR	0
CHMIRS	0.001		0	NR	NR	NR	NR	0
LDS	0.001		0	NR	NR	NR	NR	0
MCS	0.001		0	NR	NR	NR	NR	0
SPILLS 90	0.001		0	NR	NR	NR	NR	0
Other Ascertainable Records								
RCRA NonGen / NLR	0.250	11	7	12	NR	NR	NR	30
FUDS	1.000		0	0	0	0	NR	0
DOD	1.000		0	0	0	0	NR	0
SCRD DRYCLEANERS	0.500		0	0	0	NR	NR	0
US FIN ASSUR	0.001		0	NR	NR	NR	NR	0
EPA WATCH LIST	0.001		0	NR	NR	NR	NR	0
2020 COR ACTION	0.250		0	0	NR	NR	NR	0
TSCA	0.001		0	NR	NR	NR	NR	0
TRIS	0.001		0	NR	NR	NR	NR	0
SSTS	0.001		0	NR	NR	NR	NR	0
ROD	1.000		0	0	0	0	NR	0
RMP	0.001		0	NR	NR	NR	NR	0
RAATS	0.001		0	NR	NR	NR	NR	0
PRP	0.001		0	NR	NR	NR	NR	0
PADS	0.001		0	NR	NR	NR	NR	0
ICIS	0.001		0	NR	NR	NR	NR	0
FTTS	0.001		0	NR	NR	NR	NR	0
MLTS	0.001		0	NR	NR	NR	NR	0
COAL ASH DOE	0.001		0	NR	NR	NR	NR	0
COAL ASH EPA	0.500		0	0	0	NR	NR	0
PCB TRANSFORMER	0.001		0	NR	NR	NR	NR	0
RADINFO	0.001		0	NR	NR	NR	NR	0
HIST FTTS	0.001		0	NR	NR	NR	NR	0
DOT OPS	0.001		0	NR	NR	NR	NR	0
CONSENT	1.000		0	0	0	0	NR	0
INDIAN RESERV	1.000		0	0	0	0	NR	0
FUSRAP	1.000		0	0	0	0	NR	0
UMTRA	0.500		0	0	0	NR	NR	0
LEAD SMELTERS	0.001		0	NR	NR	NR	NR	0
US AIRS	0.001		0	NR	NR	NR	NR	0
US MINES	0.250		0	0	NR	NR	NR	0
ABANDONED MINES	0.250		0	0	NR	NR	NR	0
FINDS	0.001	19	0	NR	NR	NR	NR	19
ECHO	0.001	13	0	NR	NR	NR	NR	13
UXO	1.000		0	0	0	0	NR	0

MAP FINDINGS SUMMARY

Database	Search Distance (Miles)	Target Property	< 1/8	1/8 - 1/4	1/4 - 1/2	1/2 - 1	> 1	Total Plotted
DOCKET HWC	0.001		0	NR	NR	NR	NR	0
FUELS PROGRAM	0.250		0	0	NR	NR	NR	0
CA BOND EXP. PLAN	1.000		0	0	0	0	NR	0
Cortese	0.500	1	1	1	0	NR	NR	3
CUPA Listings	0.250		0	0	NR	NR	NR	0
DRYCLEANERS	0.250		4	6	NR	NR	NR	10
EMI	0.001		0	NR	NR	NR	NR	0
ENF	0.001		0	NR	NR	NR	NR	0
Financial Assurance	0.001		0	NR	NR	NR	NR	0
HAZNET	0.001	9	0	NR	NR	NR	NR	9
ICE	0.001		0	NR	NR	NR	NR	0
HIST CORTESE	0.500		0	2	0	NR	NR	2
LOS ANGELES CO. HMS	0.001	16	0	NR	NR	NR	NR	16
HWP	1.000		0	0	0	0	NR	0
HWT	0.250		0	0	NR	NR	NR	0
MINES	0.250		0	0	NR	NR	NR	0
MWMP	0.250		0	0	NR	NR	NR	0
NPDES	0.001	1	0	NR	NR	NR	NR	1
PEST LIC	0.001		0	NR	NR	NR	NR	0
PROC	0.500		0	0	0	NR	NR	0
Notify 65	1.000		0	0	0	0	NR	0
LA Co. Site Mitigation	0.001		0	NR	NR	NR	NR	0
UIC	0.001		0	NR	NR	NR	NR	0
UIC GEO	0.001		0	NR	NR	NR	NR	0
WASTEWATER PITS	0.500		0	0	0	NR	NR	0
WDS	0.001		0	NR	NR	NR	NR	0
WIP	0.250		0	0	NR	NR	NR	0
MILITARY PRIV SITES	0.001		0	NR	NR	NR	NR	0
PROJECT	0.001		0	NR	NR	NR	NR	0
WDR	0.001		0	NR	NR	NR	NR	0
CIWQS	0.001	1	0	NR	NR	NR	NR	1
CERS	0.001	7	0	NR	NR	NR	NR	7
NON-CASE INFO	0.001		0	NR	NR	NR	NR	0
OTHER OIL GAS	0.001		0	NR	NR	NR	NR	0
PROD WATER PONDS	0.001		0	NR	NR	NR	NR	0
SAMPLING POINT	0.001		0	NR	NR	NR	NR	0
WELL STIM PROJ	0.001		0	NR	NR	NR	NR	0
LOS ANGELES CO LF METHANE	0.500		0	0	0	NR	NR	0
HWTS	TP	36	NR	NR	NR	NR	NR	36
MINES MRDS	0.001		0	NR	NR	NR	NR	0

EDR HIGH RISK HISTORICAL RECORDS

EDR Exclusive Records

EDR MGP	1.000		0	0	0	0	NR	0
EDR Hist Auto	0.125	2	2	NR	NR	NR	NR	4
EDR Hist Cleaner	0.125		2	NR	NR	NR	NR	2

EDR RECOVERED GOVERNMENT ARCHIVES

Exclusive Recovered Govt. Archives

RGA LF	0.001		0	NR	NR	NR	NR	0

MAP FINDINGS SUMMARY

Database	Search Distance (Miles)	Target Property	< 1/8	1/8 - 1/4	1/4 - 1/2	1/2 - 1	> 1	Total Plotted
RGA LUST	0.001	1	0	NR	NR	NR	NR	1
- Totals --		137	30	32	1	0	0	200

NOTES:

TP = Target Property

NR = Not Requested at this Search Distance

Sites may be listed in more than one database

A1 Target Property | **K SPEC MOTORS LLC**
778 N NOGALES ST UNIT J
WALNUT, CA 91789 | **CERS HAZ WASTE** | **S123537318**
HWTS | **N/A**

Site 1 of 107 in cluster A

Actual: 588 ft.

CERS HAZ WASTE:

Name:	DAYTONA AUTO REPAIR INC
Address:	778 N NOGALES ST # B
City,State,Zip:	WALNUT, CA 91789
Site ID:	24140
CERS ID:	10308199
CERS Description:	Hazardous Waste Generator

Violations:

Site ID:	24140
Site Name:	DAYTONA AUTO REPAIR INC
Violation Date:	08-20-2020
Citation:	Un-Specified
Violation Description:	Hazardous Waste Generator Program - Administration/Documentation - General Local Ordinance
Violation Notes:	Returned to compliance on 08/20/2020. OBSERVATION: Owner/Operator failed to obtain or maintain an active permit. CORRECTIVE ACTION: Every business or business concern within the jurisdiction of the LACoCUPA and subject to one or more of the program elements shall be required to apply for, pay the permit fees, and obtain from the LACoCUPA a unified program facility permit for the program elements applicable to such facility prior to the commencement of any business or activity related to any of the program elements. The permit required under this section shall be posted and conspicuously displayed at the location falling under the requirements of this chapter. Every person, business, or business concern within the jurisdiction of the LACoCUPA and subject to the requirements of one or more of the program elements shall be required to pay the applicable annual fees and any applicable late payment penalty and apply for and obtain from the LACoCUPA a unified program facility permit for the program elements [Truncated]
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Site ID:	24140
Site Name:	DAYTONA AUTO REPAIR INC
Violation Date:	05-26-2017
Citation:	HSC 6.5 Multiple - California Health and Safety Code, Chapter 6.5, Section(s) Multiple
Violation Description:	Hazardous Waste Generator Program - Administration/Documentation - General
Violation Notes:	Returned to compliance on 11/14/2017. OBSERVATION: Owner/Operator failed to submit the hazardous waste notification electronically to CERS. CORRECTIVE ACTION: Owner/Operator shall submit a notification of hazardous waste generated by the facility in accordance with HSC 25158 electronically to CERS. HSC 25404(e)(4) No later than three years after the statewide information management system is established, each CUPA, PA, and regulated business shall report program data electronically. The secretary shall work with the CUPAs to develop a phased in schedule for the electronic collection and submittal of information to be included in the statewide information management system, giving first priority to information relating to those chemicals determined by the secretary to be of greatest concern. The

K SPEC MOTORS LLC (Continued) **S123537318**

secretary, in making this determination shall consult with the CUPAs, the California Emergency Management Agency, the State Fire Marshal, and the boards, departments, and offices within the California [Truncated]

Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 05-26-2017
Citation: 22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description: Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes: Returned to compliance on 10/12/2017. OBSERVATION: This facilityG s EPA ID number is inactive. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an EPA ID number. CORRECTIVE ACTION: Immediately contact DTSC and reactivate your EPA ID number and submit evidence to the CUPA 30 days from now.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 08-20-2020
Citation: 22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description: Failure to properly label hazardous waste accumulation containers and portable tanks with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes: Returned to compliance on 10/21/2020. OBSERVATION: Drum of waste coolant located in the service bay was observed without a complete hazardous waste label. CORRECTIVE ACTION: Submit a photo to the CUPA demonstrating that the container listed above has been properly labeled.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 08-20-2020
Citation: 22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description: Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes: Returned to compliance on 09/30/2020. OBSERVATION: Uniform Hazardous Waste Manifests for waste antifreeze and parts washing solvent were

K SPEC MOTORS LLC (Continued) **S123537318**

not available at the time of inspection. CORRECTIVE ACTION: Locate a copy of all manifests for waste antifreeze and parts washing solvent and submit copies to the CUPA.

Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 08-20-2020
Citation: HSC 6.5 Multiple - California Health and Safety Code, Chapter 6.5, Section(s) Multiple
Violation Description: Hazardous Waste Generator Program - Administration/Documentation - General
Violation Notes: Returned to compliance on 09/30/2020. OBSERVATION: Owner/Operator failed to submit the hazardous waste notification electronically to CERS. CORRECTIVE ACTION: Owner/Operator shall submit a notification of hazardous waste generated by the facility in accordance with HSC 25158 electronically to CERS. HSC 25404(e)(4) No later than three years after the statewide information management system is established, each CUPA, PA, and regulated business shall report program data electronically. The secretary shall work with the CUPAs to develop a phased in schedule for the electronic collection and submittal of information to be included in the statewide information management system, giving first priority to information relating to those chemicals determined by the secretary to be of greatest concern. The secretary, in making this determination shall consult with the CUPAs, the California Emergency Management Agency, the State Fire Marshal, and the boards, departments, and offices within the California [Truncated]
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 08-20-2020
Citation: 22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description: Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes: Returned to compliance on 10/16/2020. OBSERVATION: The generator has not obtained an active EPA ID number to manage hazardous waste. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an active EPA ID number. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that you have obtained an EPA ID number.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 24140
Site Name: DAYTONA AUTO REPAIR INC
Violation Date: 08-20-2020
Citation: HSC 6.5 25123.3(h)(1) - California Health and Safety Code, Chapter 6.5, Section(s) 25123.3(h)(1)

K SPEC MOTORS LLC (Continued) **S123537318**

Violation Description: Failure to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles) for a generator who generates less than 1000 kilogram per month if all of the following conditions are met: (1) The quantity of hazardous waste accumulated onsite never exceeds 6,000 kilograms. (2) The generator complies with the requirements of 40 Code of Federal Regulations section 262.34(d), (e) and (f). (3) The generator does not hold acutely hazardous waste or extremely hazardous waste in an amount greater than one kilogram for more than 90 days.
Violation Notes: Returned to compliance on 09/30/2020. OBSERVATION: Owner/Operator is a small quantity generator and failed to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles), or has failed to comply with the conditions of CCR 66262.34(d) and has stored hazardous waste over 90 days. CORRECTIVE ACTION: Dispose of hazardous waste that has been stored over the applicable time limit and provide documentation that the violation has been corrected.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY LUIS E. SIMON
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 03-04-2014
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-26-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Luis Simon, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

K SPEC MOTORS LLC (Continued) **S123537318**

Eval General Type:	Other/Unknown
Eval Date:	10-05-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	1st revisit; met with Luis Simon; EPA ID remains inactive; no HW notification in CERS; RV fee explained; followup in 2 weeks.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	10-12-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	08-20-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Fili Cruz, Mechanic
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	11-14-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	CERS reviewed; HW notification accepted; NOV abated.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Affiliation:

Affiliation Type Desc:	Identification Signer
Entity Name:	Susana Simon
Entity Title:	Owner
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Operator
Entity Name:	Luis Simon
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 322-5246

K SPEC MOTORS LLC (Continued) **S123537318**

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000

Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	778 N NOGALES ST #B
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Parent Corporation
Entity Name:	DAYTONA AUTO REPAIR INC
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Environmental Contact
Entity Name:	Luis Simon
Entity Title:	Not reported
Affiliation Address:	778 N NOGALES ST # B
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Legal Owner
Entity Name:	DAYTONA AUTO REPAIR INC
Entity Title:	Not reported
Affiliation Address:	778 N NOGALES ST # B
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 810-5600

HWTS:

Name:	K SPEC MOTORS LLC
Address:	778 N NOGALES ST UNIT J
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000456935

K SPEC MOTORS LLC (Continued) **S123537318**

Inactive Date:	Not reported
Create Date:	09/21/2020
Last Act Date:	09/21/2020
Mailing Name:	Not reported
Mailing Address:	732 DUNSMUIR LN
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	K SPEC MOTORS LLC
Owner Address:	732 DUNSMUIR LN
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 91789
Contact Name:	KAREEM ELATTAR
Contact Address:	732 DUNSMUIR LN
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000456935
Create Date:	2020-09-21 15:44:37.827
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2020-09-21 15:44:37.82000
Inactive Date:	Not reported
Facility Name:	K SPEC MOTORS LLC
Facility Address:	778 N NOGALES ST UNIT J
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

Name:	DAYTONA AUTO REPAIR INC
Address:	778 N NOGALES ST STE B
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000457049
Inactive Date:	Not reported
Create Date:	09/24/2020
Last Act Date:	09/24/2020
Mailing Name:	Not reported
Mailing Address:	778 N NOGALES ST STE B
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	DAYTONA AUTO REPAIR INC
Owner Address:	778 N NOGALES ST STE B
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 91789
Contact Name:	SUSANA SIMON
Contact Address:	778 N NOGALES ST STE B
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000457049
Create Date:	2020-09-24 13:49:00.463
NAICS Code:	811111
NAICS Description:	General Automotive Repair

K SPEC MOTORS LLC (Continued) **S123537318**

Issued EPA ID Date:	2020-09-24 13:49:00.46300
Inactive Date:	Not reported
Facility Name:	DAYTONA AUTO REPAIR INC
Facility Address:	778 N NOGALES ST STE B
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A2 **AUTOCARE 101 INC** **ECHO** **1025925252**
Target Property **750 N NOGALES ST STE E** **N/A**
WALNUT, CA 91789

Site 2 of 107 in cluster A

Actual: 588 ft.

ECHO:

Envid:	1025925252
Registry ID:	110070632046
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110070632046
Name:	AUTOCARE 101 INC
Address:	750 N NOGALES ST STE E
City,State,Zip:	WALNUT, CA 91789

A3 **PREVENTION AUTO CARE** **CERS HAZ WASTE** **S123501652**
Target Property **750 N NOGALES ST # F** **CERS** **N/A**
WALNUT, CA 91789

Site 3 of 107 in cluster A

Actual: 588 ft.

CERS HAZ WASTE:

Name:	PREVENTION AUTO CARE
Address:	750 N NOGALES ST # F
City,State,Zip:	WALNUT, CA 91789
Site ID:	144890
CERS ID:	10298089
CERS Description:	Hazardous Waste Generator

CERS:

Name:	PREVENTION AUTO CARE
Address:	750 N NOGALES ST # F
City,State,Zip:	WALNUT, CA 91789
Site ID:	144890
CERS ID:	10298089
CERS Description:	Chemical Storage Facilities

Violations:

Site ID:	144890
Site Name:	PREVENTION AUTO CARE
Violation Date:	09-10-2020
Citation:	22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description:	Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted

PREVENTION AUTO CARE (Continued) **S123501652**

	for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes:	Returned to compliance on 03/02/2021. OBSERVATION: Uniform Hazardous Waste Manifests for waste coolant were not available at the time of inspection. CORRECTIVE ACTION: Locate a copy of all manifests for waste coolant and submit copies to the CUPA.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	144890
Site Name:	PREVENTION AUTO CARE
Violation Date:	05-26-2017
Citation:	22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description:	Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes:	Returned to compliance on 02/22/2018. OBSERVATION: This facilityG s EPA ID number is inactive. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an EPA ID number. CORRECTIVE ACTION: Immediately contact DTSC and reactivate your EPA ID number and submit evidence to the CUPA 30 days from now.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	144890
Site Name:	PREVENTION AUTO CARE
Violation Date:	09-10-2020
Citation:	22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description:	Failure to properly label hazardous waste accumulation containers and portable tanks with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes:	Returned to compliance on 03/02/2021. OBSERVATION: Drum of waste coolant located in the south service bay was observed without a complete hazardous waste label. CORRECTIVE ACTION: Submit a photo to the CUPA demonstrating that the container listed above has been properly labeled (show business name, address, accumulation start date, and contents description).
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	144890
Site Name:	PREVENTION AUTO CARE
Violation Date:	05-26-2017
Citation:	HSC 6.95 25507 - California Health and Safety Code, Chapter 6.95, Section(s) 25507
Violation Description:	Failure to adequately establish and implement a business plan when storing/handling a hazardous material at or above reportable quantities.
Violation Notes:	Returned to compliance on 09/10/2020. OBSERVATION: Owner/Operator

PREVENTION AUTO CARE (Continued) **S123501652**

failed to establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet. CORRECTIVE ACTION: Establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet. REPORTABLE HAZ MAT: motor oil - 55 gallons; antifreeze - 55 gallons

Violation Division: Los Angeles County Fire Department
Violation Program: HMRRP
Violation Source: CERS

Site ID: 144890
Site Name: PREVENTION AUTO CARE
Violation Date: 09-10-2020
Citation: HSC 6.95 25507 - California Health and Safety Code, Chapter 6.95, Section(s) 25507
Violation Description: Failure to adequately establish and implement a business plan when storing/handling a hazardous material at or above reportable quantities.
Violation Notes: OBSERVATION: The business failed to establish and implement a business plan when handling hazardous materials at or above the reportable threshold quantities. CORRECTIVE ACTION: Establish and implement a business plan for the facility. Submit documentation of correction to the unified program agency.
Violation Division: Los Angeles County Fire Department
Violation Program: HMRRP
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-26-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Bill Doan, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 09-10-2020
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Bill Doan, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 10-05-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: 1st revisit; met with Mr. Bill Doan; HMBP not submitted; EPA ID shows inactive in HWTS website; RV fee explained; to apply on next revisit if noncompliant; followup in 1 week.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

PREVENTION AUTO CARE (Continued) **S123501652**

Eval General Type: Other/Unknown
Eval Date: 01-03-2018
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: CERS reviewed; facility info only submitted and rejected.
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 02-22-2018
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Revisit conducted with Mr. Doan; CERS reviewed, Facility Info submitted but Not Accepted due to missing HW notification, Inventory, and Plans; discussed comments with Mr. Doan; advised to contact Fernanda Martinez if he had questions; he said he would correct and submit; followup required.
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 09-10-2020
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Bill Doan, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 01-03-2018
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: HWTS reviewed; EPA ID not active.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

PREVENTION AUTO CARE (Continued) **S123501652**

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY DEAN HOANG
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-14-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY DEAN HOANG
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 02-22-2018
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: EPA ID issued to business and reported in CERS; NOV abated.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-26-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Bill Doan, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-14-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire

PREVENTION AUTO CARE (Continued) **S123501652**

Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Environmental Contact
Entity Name:	HOANG DOAN
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST # F
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	HOANG DOAN
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST #F
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 839-1111
Affiliation Type Desc:	Operator
Entity Name:	BILL DOAN
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 839-1111
Affiliation Type Desc:	Parent Corporation
Entity Name:	PREVENTION AUTO CARE
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST #F
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

A4 Target Property — **ALAMO CAR WASH**, **784 N NOGALES ST # A**, **WALNUT, CA 91789** — **CERS TANKS**, **CERS**, **HWTS** — **S123539900**, **N/A**

Site 4 of 107 in cluster A

Actual: 588 ft.

CERS TANKS:

Name:	ALAMO CAR WASH
Address:	784 N NOGALES ST # A
City,State,Zip:	WALNUT, CA 91789
Site ID:	90518
CERS ID:	10309846
CERS Description:	Underground Storage Tank

CERS:

Name:	ALAMO CAR WASH
Address:	784 N NOGALES ST # A
City,State,Zip:	WALNUT, CA 91789
Site ID:	90518
CERS ID:	10309846
CERS Description:	Chemical Storage Facilities

Violations:

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to have current UST Monitoring Plan available on site.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	06-17-2020
Citation:	HSC 6.95 25508(a)(1) - California Health and Safety Code, Chapter 6.95, Section(s) 25508(a)(1)
Violation Description:	Failure to complete and electronically submit a site map with all required content.
Violation Notes:	Returned to compliance on 06/18/2020. OBSERVATION: The business failed to complete and electronically submit a site map with all required content (missing locations of carwash chemicals). CORRECTIVE ACTION: Complete and electronically submit a site map with all required content.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-05-2019
Citation:	23 CCR 16 2712(b)(2) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)(2)
Violation Description:	Failure to maintain monitoring records for release detection and/or maintain records of appropriate follow-up actions.

ALAMO CAR WASH (Continued) **S123539900**

Violation Notes:	CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-13-2018
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Monitoring Plan.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	23 CCR 16 2641(j) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(j)
Violation Description:	Failure of the leak detection equipment to be installed, calibrated, operated, and/or maintained properly.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	HSC 6.7 25284, 25286 - California Health and Safety Code, Chapter 6.7, Section(s) 25284, 25286
Violation Description:	Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-06-2015
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to maintain on site an approved monitoring plan.
Violation Notes:	Returned to compliance on 08/14/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518

ALAMO CAR WASH (Continued) **S123539900**

Site Name:	ALAMO CAR WASH
Violation Date:	08-13-2018
Citation:	23 CCR 16 2641(a) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(a)
Violation Description:	Failure of leak detection equipment to be located such that equipment is capable of detecting a leak at the earliest possible opportunity.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-17-2016
Citation:	23 CCR 16 2632(d)(1)(C), 2641(h), 2711(a)(8) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2632(d)(1)(C), 2641(h), 2711(a)(8)
Violation Description:	Failure to submit or update a plot plan.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	23 CCR 16 2712(b)(2) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)(2)
Violation Description:	Failure to maintain monitoring records for release detection and/or maintain records of appropriate follow-up actions.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description:	Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-17-2016
Citation:	23 CCR 6.7 25284, 25286 - California Code of Regulations, Title 23, Chapter 6.7, Section(s) 25284, 25286
Violation Description:	Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes:	Returned to compliance on 09/13/2019.

ALAMO CAR WASH (Continued) **S123539900**

Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-06-2015
Citation:	HSC 6.7 25286(a) - California Health and Safety Code, Chapter 6.7, Section(s) 25286(a)
Violation Description:	Failure to submit an complete and accurate application for a permit to operate an underground storage tank, or for renewal of the permit.
Violation Notes:	Returned to compliance on 08/14/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-13-2018
Citation:	HSC 6.7 25284, 25286 - California Health and Safety Code, Chapter 6.7, Section(s) 25284, 25286
Violation Description:	Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	HSC 6.7 25284, 25286 - California Health and Safety Code, Chapter 6.7, Section(s) 25284, 25286
Violation Description:	Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-13-2018
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to have current UST Monitoring Plan available on site.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-17-2016
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter

ALAMO CAR WASH (Continued) **S123539900**

16, Section(s) 2641(h)
Violation Description: Failure to have an approved UST Monitoring Plan.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018
Citation: 23 CCR 16 2712(i), 2632(d)(2), 2634(e), 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i), 2632(d)(2), 2634(e), 2641(h)
Violation Description: Failure to submit a current UST Response Plan available on site.
Violation Notes: Not reported
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018
Citation: 23 CCR 16 2712(f) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(f)
Violation Description: Failure to implement the corrections specified in the inspection report within 30 calendar days of receiving an inspection report from either the UPA or special inspector.
Violation Notes: Not reported
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2711(a)(8) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2711(a)(8)
Violation Description: Failure to submit or maintain a current facility plot plan.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: HSC 6.7 25290.1(c)(3),25290.2(c)(3) - California Health and Safety Code, Chapter 6.7, Section(s) 25290.1(c)(3),25290.2(c)(3)
Violation Description: Failure to keep water out of the secondary containment of UST systems installed on or after July 1, 2003.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

ALAMO CAR WASH (Continued) **S123539900**

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-06-2015
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to submit, obtain approval, or maintain a complete/accurate response plan.
Violation Notes:	Returned to compliance on 08/14/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	08-13-2018
Citation:	23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description:	Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-17-2016
Citation:	HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description:	Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-05-2019
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Monitoring Plan.
Violation Notes:	CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	23 CCR 16 2711(a)(8) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2711(a)(8)
Violation Description:	Failure to submit or maintain a current facility plot plan.
Violation Notes:	Returned to compliance on 09/13/2019.

ALAMO CAR WASH (Continued) **S123539900**

Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2712(b) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)
Violation Description: Failure to maintain records of repairs, lining, and upgrades on site, or off site if approved by the UPA, for the life of the UST.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018
Citation: 23 CCR 16 2637 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2637
Violation Description: Failure to conduct secondary containment testing, or one or more of the following requirements: Perform the test within six months of installation and every 36 months thereafter.Use a procedure that demonstrates the system works as well as at installation.Use applicable manufacturer guidelines, industry codes, engineering standard, or professional engineer approval.Performed by a certified service technician or a licensed tank tester.
Violation Notes: Not reported
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2715(c) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2715(c)
Violation Description: Failure to comply with one or more of the following designated operator (DO) monthly inspection requirements: Be performed by an ICC certified DO. Inspect monthly alarm history report, check that alarms are documented and responded to appropriately, and attach a copy. Inspect for the presence of liquid/debris in spill containers. Inspect for the presence of liquid/debris in under dispenser containment (UDC) and ensure that the monitoring equipment is positioned correctly. Inspect for liquid or debris in containment sumps where an alarm occurred with no service visit. Check that all testing and maintenance has been completed and documented. Verify that all facility employees have been trained in accordance with 23 CCR 2715(f)(2).
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018

ALAMO CAR WASH (Continued) **S123539900**

Citation:	23 CCR 16 2715(a) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2715(a)
Violation Description:	Failure to submit the UPA. of the designated operator (DO) identification and/or change of the DO within 30 days.
Violation Notes:	Not reported
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	23 CCR 16 2712(i), 2632(d)(2), 2634(e), 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i), 2632(d)(2), 2634(e), 2641(h)
Violation Description:	Failure to submit a current UST Response Plan available on site.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description:	Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Response Plan.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-17-2016
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to have a UST Monitoring Plan available on site.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

ALAMO CAR WASH (Continued) **S123539900**

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2712(b)(1)(G) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)(1)(G)
Violation Description: Failure to comply with one or more of the following overfill prevention equipment requirements: Alert the transfer operator when the tank is 90 percent full by restricting the flow into the tank or triggering an audible and visual alarm; or Restrict delivery of flow to the tank at least 30 minutes before the tank overfills, provided the restriction occurs when the tank is filled to no more than 95 percent of capacity; and activate an audible alarm at least five minutes before the tank overfills; or Provide positive shut-off of flow to the tank when the tank is filled to no more than 95 percent of capacity; or Provide positive shut-off of flow to the tank so that none of the fittings located on the top of the tank are exposed to product due to overfilling. Install/retrofit overfill prevention equipment that does not use flow restrictors on vent piping to meet overfill prevention equipment requirements when the overfill prevention equipment is installed, repaired, or replaced on and after October 1,- 2018. For USTs installed before October 1, 2018, perform an inspection by October 13, 2018 and every 36 months thereafter. For USTs installed on and after October- 1,- 2018, perform an inspection at installation and every 36 months thereafter. Inspected within 30 days after a repair to the overfill prevention equipment. Inspected using an applicable manufacturer guidelines, industry codes, engineering standards, or a method approved by a professional engineer. Inspected by a certified UST service technician. Maintain records of overfill prevention equipment inspection for 36 months.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description: Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)

ALAMO CAR WASH (Continued) **S123539900**

Violation Description:	Failure to have current UST Monitoring Plan available on site.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-16-2017
Citation:	HSC 6.7 25293 - California Health and Safety Code, Chapter 6.7, Section(s) 25293
Violation Description:	Failure to maintain UST records of monitoring, testing, repairing, and closure in sufficient detail to enable the UPA to determine whether the UST systems are in compliance.
Violation Notes:	Returned to compliance on 09/13/2019.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	11-03-2020
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Monitoring Plan.
Violation Notes:	1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS. 1)UPDATE CERS. 2. SUBMIT INVESTIGATIVE PERMIT TO DETERMINE CAUSE OF MULTIPLE ANNULAR ALRMS FOR 87 UST, 91 UST, DSL UST.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	90518
Site Name:	ALAMO CAR WASH
Violation Date:	06-17-2020
Citation:	HSC 6.95 25508.1(a)-(f) - California Health and Safety Code, Chapter 6.95, Section(s) 25508.1(a)-(f)
Violation Description:	Failure to electronically update business plan within 30 days of any one of the following events: A 100 percent or more increase in the quantity of a previously disclosed material. Any handling of a previously undisclosed hazardous materials at or above reportable quantities. A change of business address, business ownership, or business name. A substantial change in the handler's operations that requires modification to any portion of the business plan.
Violation Notes:	Returned to compliance on 06/18/2020. OBSERVATION: The business failed to update business plan within 30 days when one of the following occurs: a 100 percent or more increase in the quantity of a previously disclosed material***; any handling of a previously undisclosed hazardous material***; a change of business address, business ownership, or business name; or a substantial change in the handler's operations that requires modification to any portion of the business plan. *** 3 55-gal drums each of APC-59 Neodane, Citris Power, Maxi Suds; 1 55-gal drum each of Spoke Wheel and Rubber Life. Please update and re-submit both the Site Map and Inventory CORRECTIVE ACTION: Update all submittal elements affected by the change(s) and electronically submit the update within 30 days.
Violation Division:	Los Angeles County Fire Department

ALAMO CAR WASH (Continued) **S123539900**

Violation Program: HMRRP
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2641(a) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(a)
Violation Description: Failure of leak detection equipment to be located such that equipment is capable of detecting a leak at the earliest possible opportunity.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2637(e) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2637(e)
Violation Description: Failure to submit a copy of the secondary containment test results to the UPA within 30 days after the test.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description: Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description: Failure to have current UST Monitoring Plan available on site.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518

ALAMO CAR WASH (Continued) **S123539900**

Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2638(d) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2638(d)
Violation Description: Failure to submit the Annual Monitoring System Certification Form to the UPA within 30 days of completion of the test.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018
Citation: HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description: Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes: Not reported
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: HSC 6.7 25284, 25286 - California Health and Safety Code, Chapter 6.7, Section(s) 25284, 25286
Violation Description: Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2641(a) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(a)
Violation Description: Failure of leak detection equipment to be located such that equipment is capable of detecting a leak at the earliest possible opportunity.
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2715(a)(2) - California Code of Regulations, Title 23,

ALAMO CAR WASH (Continued) **S123539900**

Chapter 16, Section(s) 2715(a)(2)
Violation Description: Failure to submit the G Underground Storage Tank Statement of Understanding and Compliance Form.G
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-17-2016
Citation: 23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description: Failure to have an approved UST Response Plan.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-05-2019
Citation: 23 CCR 16 2715(c)(2) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2715(c)(2)
Violation Description: Failure to have at least one facility employee present during operating hours that has been trained in the proper operation and maintenance of the UST system by a designated operator (DO).
Violation Notes: CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTICAL, EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE SUBMIT CERS,SUBMIT EXPLANATION/INVESTIGATE PRM MAY BE RQD,CORRECT SNSR PLACEMENT/SUBMIT WORK ORDER,SUBMIT CMPLT EMPLOYEE TRAINING,
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description: Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description: Failure to have an approved UST Monitoring Plan.
Violation Notes: Returned to compliance on 09/13/2019.

ALAMO CAR WASH (Continued) **S123539900**

Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 06-12-2020
Citation: 23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description: Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes: CERS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-06-2015
Citation: 23 CCR 16 2711(a)(8) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2711(a)(8)
Violation Description: Failure to submit, obtain approval, or maintain a complete/accurate plot plan.
Violation Notes: Returned to compliance on 08/14/2015.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 08-13-2018
Citation: 23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description: Failure to have an approved UST Response Plan.
Violation Notes: Not reported
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-17-2016
Citation: 23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description: Failure to have a UST Response Plan available on site.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 90518
Site Name: ALAMO CAR WASH
Violation Date: 11-16-2017
Citation: 23 CCR 16 2712(f) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(f)
Violation Description: Failure to implement the corrections specified in the inspection report within 30 calendar days of receiving an inspection report from

ALAMO CAR WASH (Continued) **S123539900**

either the UPA or special inspector.
Violation Notes: Returned to compliance on 09/13/2019.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-17-2020
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Francisco Araya, Manager
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 11-05-2019
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC:CERS,SEVERAL TNK ANNLR SNSR ALRMS,FILL/STP SMP SNSR NOT VERTCL,EMPLYEE TRAIN LOG NOT SIGNED BY DO,DO NOT FOLL UP OVFL,OVFL LATE
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 11-16-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC:INCORRCT CERS ID(FAC,TNK,MNTR PLN,CFRT/CFO,RESP PLN, PLOT PLN); 91 STP SMP SNSR INCRCT LOCTN;DEBRS-UDC'S 7/8,11/12. '16 CTLS NT ONST
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 11-17-2016
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOV-CERS CORRECTIONS-CFR/CFO EXP,RESPONSE PLAN NOT SIGNED,FAC INFO, TANK INFO,PLOT PLAN,MON PLAN;REQUESTED SITE TO USE CERS ID#10309846
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 08-06-2015
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC ISSUED FOR ERRORS ON CERS TANK/MONITORING PAGES DATED 7/9/14 & EXPIRED OSDO IN CERS.CTLS 11/19/14.SB989 08/06/15.
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

ALAMO CAR WASH (Continued) **S123539900**

Eval General Type: Other/Unknown
Eval Date: 06-12-2020
Violations Found: Yes
Eval Type: Other, not routine, done by local agency
Eval Notes: NOVC:CERS CORRECTIONS NEEDED
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 08-13-2018
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC:CERS SUBMITTAL REQ'D UNDER ID#10309846(ALSO SEE REQ'D CORRCTNS) LATE ON SB989 TEST,208 IN UDC 7/8 NOT@LOWPT.
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 11-03-2020
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: 1)CERS. 2)INVESTIGATIVE PERMIT- 87 UST, 91 UST, DSL UST- MULTIPLE ANNULAR ALRMS.
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Property Owner
Entity Name: Dan Gerstner and Sylvia Trs
Entity Title: Not reported
Affiliation Address: 784 N NOGALES ST # A
Affiliation City: WALNUT
Affiliation State: CA
Affiliation Country: United States
Affiliation Zip: 91789
Affiliation Phone: (626) 965-3714

Affiliation Type Desc: UST Tank Operator
Entity Name: DAN GERSTNER
Entity Title: Not reported
Affiliation Address: 784 N NOGALES ST # A
Affiliation City: WALNUT
Affiliation State: CA
Affiliation Country: United States

ALAMO CAR WASH (Continued) **S123539900**

Affiliation Zip:	91789
Affiliation Phone:	(626) 483-7584
Affiliation Type Desc:	Environmental Contact
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	784 N NOGALES ST # A
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Identification Signer
Entity Name:	GERSTNER, DAN
Entity Title:	OWNER
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	784 N NOGALES ST # A
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 965-3714
Affiliation Type Desc:	Operator
Entity Name:	GERSTNER, DAN
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 965-3714
Affiliation Type Desc:	Parent Corporation
Entity Name:	ALAMO CAR WASH
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	UST Property Owner Name
Entity Name:	Dan Gerstner and Sylvia Trs
Entity Title:	Not reported
Affiliation Address:	PO Box 545

ALAMO CAR WASH (Continued) **S123539900**

Affiliation City:	San Gabriel
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91776
Affiliation Phone:	(626) 483-7584
Affiliation Type Desc:	UST Tank Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	784 N NOGALES ST # A
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 483-7584
Affiliation Type Desc:	Document Preparer
Entity Name:	Karen McKabney
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	784 N NOGALES ST # A
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

HWTS:

Name:	ALAMO CAR WASH
Address:	784 N NOGALES ST #A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000454043
Inactive Date:	Not reported
Create Date:	04/02/2020
Last Act Date:	07/13/2020
Mailing Name:	Not reported
Mailing Address:	784 N NOGALES ST #A
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	GERSTNER DAN
Owner Address:	784 N NOGALES
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	DAN GERSTNER
Contact Address:	784 N NOGALES ST #A
Contact Address 2:	Not reported

ALAMO CAR WASH (Continued) **S123539900**

City,State,Zip: WALNUT, CA 91789

NAICS:

EPA ID:	CAL000454043
Create Date:	2020-04-02 14:08:26.080
NAICS Code:	454390
NAICS Description:	Other Direct Selling Establishments
Issued EPA ID Date:	2020-04-02 14:08:26.06300
Inactive Date:	Not reported
Facility Name:	ALAMO CAR WASH
Facility Address:	784 N NOGALES ST #A
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917890000

A5 **MOBIL XPRESS LUBE** **AST** **A100422454**
Target **762 N NOGALES ST # B** **N/A**
Property **WALNUT, CA 91789**

Site 5 of 107 in cluster A

Actual: **588 ft.**

AST:

Name:	MOBIL XPRESS LUBE
Address:	762 N NOGALES ST # B
City/Zip:	WALNUT,91789
Certified Unified Program Agencies:	Not reported
Owner:	DAN GERSTNER
Total Gallons:	Not reported
CERSID:	10292689
Facility ID:	LACoFA0018736
Business Name:	MOBIL XPRESS LUBE
Phone:	(626) 965-6032
Fax:	Not reported
Mailing Address:	762 N NOGALES ST #B
Mailing Address City:	WALNUT
Mailing Address State:	CA
Mailing Address Zip Code:	91789
Operator Name:	DAN GERSTNER
Operator Phone:	(818) 726-5109
Owner Phone:	(626) 965-6032
Owner Mail Address:	762 N. NOGALES ST. #B
Owner State:	CA
Owner Zip Code:	91789
Owner Country:	United States
Property Owner Name:	DAN GERSTNER
Property Owner Phone:	(818) 726-5109
Property Owner Mailing Address:	600 CHATAM PL.
Property Owner City:	LA CANADA
Property Owner Stat :	CA
Property Owner Zip Code:	91011
Property Owner Country:	United States
EPAID:	CAL000097076

A6 **RES AUTO CARE** **ECHO** **1026148953**
Target **750 NOGALES ST UNIT D** **N/A**
Property **WALNUT, CA 91789**

Site 6 of 107 in cluster A

Actual: **588 ft.**

ECHO:

Envid:	1026148953
Registry ID:	110070729692
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110070729692
Name:	RES AUTO CARE
Address:	750 NOGALES ST UNIT D
City,State,Zip:	WALNUT, CA 91789

A7 **MARIES DYNO TUNE** **HWTS** **S124796314**
Target **778 NORTH NOGALES** **N/A**
Property **WALNUT, CA 91789**

Site 7 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	MARIES DYNO TUNE
Address:	778 NORTH NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000095274
Inactive Date:	06/30/1997
Create Date:	07/12/1993
Last Act Date:	08/18/1999
Mailing Name:	Not reported
Mailing Address:	778 NOGALES AVE STE C
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894553
Owner Name:	MARIES DYNO TUNE
Owner Address:	778 NOGALES AVE STE C
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894553
Contact Name:	--
Contact Address:	778 NOGALES AVE STE C UNDELIV
Contact Address 2:	V97 -PH
City,State,Zip:	WALNUT, CA 917894553

A8 **TRI CITY AUTO REPAIR** **RCRA-SQG** **1000905140**
Target **750 N NOGALES UNIT F** **FINDS** **CA0000348730**
Property **WALNUT, CA 91789** **ECHO**

Site 8 of 107 in cluster A

Actual: **588 ft.**

RCRA-SQG:

Date Form Received by Agency:		19940513
Handler Name:	TRI CITY AUTO REPAIR	
Handler Address:		750 N NOGALES UNIT F
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CA0000348730
Contact Name:		ERIC VAN HER
Contact Address:		750 N NOGALES UNIT F
Contact City,State,Zip:		WALNUT, CA 91789
Contact Telephone:		818-912-7504

TRI CITY AUTO REPAIR (Continued) **1000905140**

Contact Fax:	Not reported
Contact Email:	Not reported
Contact Title:	Not reported
EPA Region:	09
Land Type:	Private
Federal Waste Generator Description:	Small Quantity Generator
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	N NOGALES UNIT F
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	VAN HER ERIC VAN HER RONALD
Owner Type:	Private
Operator Name:	Not reported
Operator Type:	Not reported
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	NN
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A

TRI CITY AUTO REPAIR (Continued) **1000905140**

Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20000915
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	Not reported
Manifest Broker:	Not reported
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	VAN HER ERIC VAN HER RONALD
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	914 SEA BISCUIT CT
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	909-594-4180
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	19940513
Handler Name: TRI CITY AUTO REPAIR	
Federal Waste Generator Description:	Small Quantity Generator
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Codes:	No NAICS Codes Found

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

TRI CITY AUTO REPAIR (Continued) **1000905140**

FINDS:
Registry ID: 110002617213

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1000905140
Registry ID:	110002617213
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110002617213
Name:	TRI CITY AUTO REPAIR
Address:	750 N NOGALES UNIT F
City,State,Zip:	WALNUT, CA 91789

A9 Target Property **EURO TECH AUTO SVC** **HWTS** **S124794503**
778 N NOGALES #A **N/A**
WALNUT, CA 91789

Site 9 of 107 in cluster A

Actual: 588 ft.

HWTS:

Name:	EURO TECH AUTO SVC
Address:	778 N NOGALES #A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000090997
Inactive Date:	01/01/1900
Create Date:	12/21/1992
Last Act Date:	08/09/1995
Mailing Name:	Not reported
Mailing Address:	778 NOGALES #A
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	ACAMO AUTO CENTER
Owner Address:	--
Owner Address 2:	Not reported
Owner City,State,Zip:	--, 99 --
Contact Name:	INACTIVE NEW BUSS AT SITE
Contact Address:	8-9-95
Contact Address 2:	Not reported
City,State,Zip:	--, 99 --

A10 **ALAMO CAR WASH** **FINDS** **1023224087**
Target **784 NOGALES AVE.** **N/A**
Property **WALNUT, CA 91789**

Site 10 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110065106138

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A11 **MANNYS AUTOMOTIVE SOLUTION** **FINDS** **1024639826**
Target **778 N NOGALES ST #A** **ECHO** **N/A**
Property **WALNUT, CA 91789**

Site 11 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110070428213

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1024639826
Registry ID:	110070428213
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110070428213
Name:	MANNYS AUTOMOTIVE SOLUTION
Address:	778 N NOGALES ST #A
City,State,Zip:	WALNUT, CA 91789

A12 **EURO TECH AUTO SVC** **EDR Hist Auto** **1020195870**
Target **750 NOGALES AVE STE C** **N/A**
Property **WALNUT, CA 91789**

Site 12 of 107 in cluster A

Actual: **588 ft.**

EDR Hist Auto

Year:	Name:	Type:
1991	AMERICAN DISCOUNT TIRES	General Automotive Repair Shops
1992	AMERICAN DISCOUNT TIRES	General Automotive Repair Shops
1993	PRO-NEAT	General Automotive Repair Shops
1994	PRO-NEAT	General Automotive Repair Shops
1995	ANDYS AUTOMOTIVE SERVICE	General Automotive Repair Shops

EURO TECH AUTO SVC (Continued) **1020195870**

1995	PRO-NEAT INC	General Automotive Repair Shops
1996	PRO-NEAT INC	General Automotive Repair Shops
1997	PRO-NEAT INC	General Automotive Repair Shops
1998	ACTIVE TRANSMISSION	Automotive Transmission Repair Shops
1998	PRO-NEAT INC	General Automotive Repair Shops
1998	EURO TECH AUTO SVC	General Automotive Repair Shops
1998	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
1999	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
1999	EURO TECH AUTO SVC	General Automotive Repair Shops
1999	PRO-NEAT INC	General Automotive Repair Shops
2000	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
2000	PRO-NEAT INC	General Automotive Repair Shops
2000	AUTO CARE 101	General Automotive Repair Shops
2001	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
2001	AUTO CARE 101	General Automotive Repair Shops
2001	PRO-NEAT INC	General Automotive Repair Shops
2002	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
2002	AUTO CARE 101	General Automotive Repair Shops
2002	ANDYS AUTOMOTIVE SERVICE	General Automotive Repair Shops
2002	PRO-NEAT INC	General Automotive Repair Shops
2003	AUTO CARE 101	General Automotive Repair Shops
2003	PRO-NEAT INC	General Automotive Repair Shops
2003	PREVENTION AUTO CARE	General Automotive Repair Shops
2003	SUPER-TEK MOTORS AUTO REPAIR	General Automotive Repair Shops
2004	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2004	AUTO CARE 101	General Automotive Repair Shops
2004	PRO-NEAT INC	General Automotive Repair Shops
2004	PREVENTION AUTO CARE	General Automotive Repair Shops
2005	PREVENTION AUTO CARE	General Automotive Repair Shops
2005	AUTO CARE 101	General Automotive Repair Shops
2005	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2005	PRO-NEAT INC	General Automotive Repair Shops
2006	AUTO CARE 101	General Automotive Repair Shops
2006	PREVENTION AUTO CARE	General Automotive Repair Shops
2006	PRO-NEAT INC	General Automotive Repair Shops
2006	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2007	AUTO CARE 101	General Automotive Repair Shops
2007	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2007	PREVENTION AUTO CARE	General Automotive Repair Shops
2007	PRO-NEAT INC	General Automotive Repair Shops
2008	PREVENTION AUTO CARE	General Automotive Repair Shops
2008	AUTO CARE 101	General Automotive Repair Shops
2008	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2009	SUPER TEK MOTOR AUTO REPAIR	General Automotive Repair Shops
2009	AUTO CARE 101	General Automotive Repair Shops
2010	AUTO CARE 101	General Automotive Repair Shops
2011	AUTO CARE 101	General Automotive Repair Shops
2012	ANDYS AUTOMOTIVE SERVICE	General Automotive Repair Shops
2012	AUTO CARE 101	General Automotive Repair Shops
2013	PREVENTION AUTO CARE	General Automotive Repair Shops
2013	ANDYS AUTOMOTIVE SERVICE	General Automotive Repair Shops
2013	AUTO CARE 101	General Automotive Repair Shops
2014	ANDYS AUTOMOTIVE SERVICE	General Automotive Repair Shops
2014	AUTO CARE 101	General Automotive Repair Shops
2014	PREVENTION AUTO CARE	General Automotive Repair Shops

A13 **TOYOTA & HONDA SPECIALTY** **CERS HAZ WASTE** **S123537161**
Target **778 N NOGALES ST # C** **N/A**
Property **WALNUT, CA 91789**

Site 13 of 107 in cluster A

Actual:
588 ft.

CERS HAZ WASTE:

Name:	TOYOTA & HONDA SPECIALTY
Address:	778 N NOGALES ST # C
City,State,Zip:	WALNUT, CA 91789
Site ID:	162958
CERS ID:	10265653
CERS Description:	Hazardous Waste Generator

Violations:

Site ID:	162958
Site Name:	TOYOTA & HONDA SPECIALTY
Violation Date:	05-26-2017
Citation:	HSC 6.5 Multiple - California Health and Safety Code, Chapter 6.5, Section(s) Multiple
Violation Description:	Hazardous Waste Generator Program - Administration/Documentation - General
Violation Notes:	Returned to compliance on 07/30/2017. OBSERVATION: Owner/Operator failed to submit the hazardous waste notification electronically to CERS. CORRECTIVE ACTION: Owner/Operator shall submit a notification of hazardous waste generated by the facility in accordance with HSC 25158 electronically to CERS. HSC 25404(e)(4) No later than three years after the statewide information management system is established, each CUPA, PA, and regulated business shall report program data electronically. The secretary shall work with the CUPAs to develop a phased in schedule for the electronic collection and submittal of information to be included in the statewide information management system, giving first priority to information relating to those chemicals determined by the secretary to be of greatest concern. The secretary, in making this determination shall consult with the CUPAs, the California Emergency Management Agency, the State Fire Marshal, and the boards, departments, and offices within the California [Truncated]
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Site ID:	162958
Site Name:	TOYOTA & HONDA SPECIALTY
Violation Date:	05-26-2017
Citation:	22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description:	Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes:	Returned to compliance on 10/05/2017. OBSERVATION: This facilityG s EPA ID number is inactive. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an EPA ID number. CORRECTIVE ACTION: Immediately contact DTSC and reactivate your EPA ID number and submit evidence to the CUPA 30 days from now.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

TOYOTA & HONDA SPECIALTY (Continued) **S123537161**

Site ID:	162958
Site Name:	TOYOTA & HONDA SPECIALTY
Violation Date:	09-14-2020
Citation:	22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description:	Failure to properly label hazardous waste accumulation containers and portable tanks with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes:	Returned to compliance on 10/28/2020. OBSERVATION: Drum of waste coolant located in the service bay was observed without the following information on the label: Accumulation Start Date. CORRECTIVE ACTION: Submit photos to the CUPA demonstrating that the container listed above has been properly labeled.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Site ID:	162958
Site Name:	TOYOTA & HONDA SPECIALTY
Violation Date:	09-14-2020
Citation:	HSC 6.5 25123.3(h)(1) - California Health and Safety Code, Chapter 6.5, Section(s) 25123.3(h)(1)
Violation Description:	Failure to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles) for a generator who generates less than 1000 kilogram per month if all of the following conditions are met: (1) The quantity of hazardous waste accumulated onsite never exceeds 6,000 kilograms. (2) The generator complies with the requirements of 40 Code of Federal Regulations section 262.34(d), (e) and (f). (3) The generator does not hold acutely hazardous waste or extremely hazardous waste in an amount greater than one kilogram for more than 90 days.
Violation Notes:	Returned to compliance on 10/28/2020. OBSERVATION: Owner/Operator is a small quantity generator and failed to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles), or has failed to comply with the conditions of CCR 66262.34(d) and has stored hazardous waste over 90 days. CORRECTIVE ACTION: Dispose of hazardous waste that has been stored over the applicable time limit and provide documentation that the violation has been corrected.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Site ID:	162958
Site Name:	TOYOTA & HONDA SPECIALTY
Violation Date:	09-14-2020
Citation:	22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description:	Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes:	Returned to compliance on 10/28/2020. OBSERVATION: Uniform Hazardous Waste Manifests for waste coolant were not available at the time of

TOYOTA & HONDA SPECIALTY (Continued) **S123537161**

inspection. CORRECTIVE ACTION: Locate a copy of all manifests for waste coolant and submit copies to the CUPA.

Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Evaluation:

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 03-04-2014
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 09-14-2020
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Rene Madrigal, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY RENE MADRIGAL
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY RENE MADRIGAL
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 02-22-2018
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Revisit with Mr. Madrigal; CERS reviewed but no HW certification;

TOYOTA & HONDA SPECIALTY (Continued) **S123537161**

print out of CERS submittal presented as proof; appears to have failed to submit completely; helped Mr. Madrigal re-submit but he was unable to recover his username and/or password; he said he would keep trying and call Inspector when complete.

Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 10-05-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: 1st revisit; met with Rene Madrigal; EPA ID active; no HW notification in CERS; RV fee explained; followup in 2 weeks.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-16-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: 2nd revisit, met with Mr. Rene Madrigal; could not get computer to work and finish CERS; RV Fee notice provided; followup in one week.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-10-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-26-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Rene Madrigal, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Affiliation:
Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 778 N NOGALES ST #C
Affiliation City: WALNUT
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

TOYOTA & HONDA SPECIALTY (Continued) **S123537161**

Affiliation Type Desc:	Environmental Contact
Entity Name:	RENE MADRIGAL
Entity Title:	Not reported
Affiliation Address:	21039 E LAKE CANYON
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Parent Corporation
Entity Name:	RAM AUTO REPAIR
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000

Affiliation Type Desc:	Legal Owner
Entity Name:	RENE MADRIGAL
Entity Title:	Not reported
Affiliation Address:	778 N. NOGALES ST. #C
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 964-6981

Affiliation Type Desc:	Document Preparer
Entity Name:	RENE MADRIGAL
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Identification Signer
Entity Name:	RENE
Entity Title:	OWNER
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported

TOYOTA & HONDA SPECIALTY (Continued) **S123537161**

Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Operator
Entity Name:	RENE MADRIGAL
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 964-6981

A14 **SUPER-TEK MOTORS** **CERS HAZ WASTE** **S123537130**
Target **750 N NOGALES ST # D** **N/A**
Property **WALNUT, CA 91789**

Site 14 of 107 in cluster A

Actual: **588 ft.**

CERS HAZ WASTE:

Name:	SUPER-TEK MOTORS
Address:	750 N NOGALES ST # D
City,State,Zip:	WALNUT, CA 91789
Site ID:	158259
CERS ID:	10272079
CERS Description:	Hazardous Waste Generator

Affiliation:

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST UNIT D
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Parent Corporation
Entity Name:	SUPER-TEK MOTORS
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

SUPER-TEK MOTORS (Continued) **S123537130**

Affiliation Type Desc:	Document Preparer
Entity Name:	MELKY NGAMBA
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Environmental Contact
Entity Name:	LEONARD THEODORUS
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST UNIT D
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

A15 **AUTO CARE 101 INC** **CERS HAZ WASTE** **S123511081**
Target **750 N NOGALES ST # E** **CERS** **N/A**
Property **WALNUT, CA 91789**

Site 15 of 107 in cluster A

Actual:
588 ft.

CERS HAZ WASTE:

Name:	AUTO CARE 101 INC
Address:	750 N NOGALES ST # E
City,State,Zip:	WALNUT, CA 91789
Site ID:	96000
CERS ID:	10298062
CERS Description:	Hazardous Waste Generator

Name:	H A T AUTO SERVICE
Address:	750 N NOGALES ST # C
City,State,Zip:	WALNUT, CA 91789
Site ID:	35023
CERS ID:	10282447
CERS Description:	Hazardous Waste Generator

CERS:

Name:	H A T AUTO SERVICE
Address:	750 N NOGALES ST # C
City,State,Zip:	WALNUT, CA 91789
Site ID:	35023
CERS ID:	10282447
CERS Description:	Chemical Storage Facilities

Violations:

Site ID:	35023
Site Name:	H A T AUTO SERVICE
Violation Date:	06-14-2019
Citation:	22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description:	Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any

AUTO CARE 101 INC (Continued) **S123511081**

hazardous waste.
Violation Notes: Returned to compliance on 06/25/2019. OBSERVATION: The generator has not obtained an active EPA ID number to manage hazardous waste. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an active EPA ID number. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that you have obtained an EPA ID number.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 35023
Site Name: H A T AUTO SERVICE
Violation Date: 03-18-2016
Citation: 22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description: Failure to obtain and/or maintain an Active EPA ID.
Violation Notes: Returned to compliance on 04/29/2016. Complete and fax/email EPA ID application to the Dept. Of Toxic Substances Control (DTSC) to reactivate the EPA ID number. This facilityG s EPA ID number is G inactiveG .
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Evaluation:
Eval General Type: Other/Unknown
Eval Date: 04-29-2016
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-14-2019
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Htay Naing, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 03-18-2016
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ntay Naing
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 03-18-2016
Violations Found: Yes
Eval Type: Routine done by local agency

AUTO CARE 101 INC (Continued) **S123511081**

Eval Notes:	Htay Naing
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-14-2019
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Htay Naing, Owner
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Affiliation:

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Document Preparer
Entity Name:	htay naing
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Environmental Contact
Entity Name:	htay naing
Entity Title:	Not reported
Affiliation Address:	13134 BRETON AVE
Affiliation City:	CHINO
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91710
Affiliation Phone:	Not reported
Affiliation Type Desc:	Identification Signer
Entity Name:	htay naing
Entity Title:	owner
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Parent Corporation
Entity Name:	H A T AUTO SERVICE

AUTO CARE 101 INC (Continued) **S123511081**

Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	750 N NOGALES ST #C
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	htay naing
Entity Title:	Not reported
Affiliation Address:	13134 BRETON AVE
Affiliation City:	CHINO
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91710
Affiliation Phone:	(626) 634-5012
Affiliation Type Desc:	Operator
Entity Name:	htay naing
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 634-5012

A16 **PRO CARWORKS INC** **CERS HAZ WASTE** **S123501667**
Target **762 N NOGALES ST # D** **CERS** **N/A**
Property **WALNUT, CA 91789**

Site 16 of 107 in cluster A

Actual:
588 ft.

CERS HAZ WASTE:

Name:	PRO CARWORKS INC
Address:	762 N NOGALES ST # D
City,State,Zip:	WALNUT, CA 91789
Site ID:	145026
CERS ID:	10294729
CERS Description:	Hazardous Waste Generator

CERS:

Name:	PRO CARWORKS INC
Address:	762 N NOGALES ST # D
City,State,Zip:	WALNUT, CA 91789

PRO CARWORKS INC (Continued) **S123501667**

Site ID: 145026
CERS ID: 10294729
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 145026
Site Name: PRO CARWORKS INC
Violation Date: 06-13-2017
Citation: 22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description: Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes: Returned to compliance on 10/05/2017. OBSERVATION: The generator has not obtained an active EPA ID number to manage hazardous waste. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an active EPA ID number. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that you have obtained an EPA ID number.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-14-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-14-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-14-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY MILAD BAAKLINI
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-13-2017
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Milad Baaklini, Owner
Eval Division: Los Angeles County Fire Department

PRO CARWORKS INC (Continued) **S123501667**

Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-13-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Milad Baaklini, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 10-05-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: HWTS reviewed; EPA ID active as of June 2017; NOV abated.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-14-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY MILAD BAAKLINI
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 08-24-2020
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Milad Baaklini, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 762 N NOGALES ST #D
Affiliation City: WALNUT
Affiliation State: CA
Affiliation Country: Not reported

PRO CARWORKS INC (Continued) **S123501667**

Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Operator
Entity Name:	MILAD BAAKLINI/JOSE ROSENFELD
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(909) 598-6504
Affiliation Type Desc:	Document Preparer
Entity Name:	MiLAD BAAKLINI
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Environmental Contact
Entity Name:	JOSE ROSENFELD
Entity Title:	Not reported
Affiliation Address:	762 N NOGALES ST # D
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Identification Signer
Entity Name:	Milad baaklini
Entity Title:	Secretary
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	MILAD BAAKLINI/JOSE ROSENFELD
Entity Title:	Not reported
Affiliation Address:	762 N NOGALES ST #D
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(909) 598-6504
Affiliation Type Desc:	Parent Corporation
Entity Name:	PRO CARWORKS INC
Entity Title:	Not reported
Affiliation Address:	Not reported

PRO CARWORKS INC (Continued) **S123501667**

Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

A17 **H A T AUTO SERVICE** **ECHO** **1025912722**
Target **750 NOGALES ST #C** **N/A**
Property **WALNUT, CA 91789**

Site 17 of 107 in cluster A

Actual: **588 ft.**

ECHO:
Envid: 1025912722
Registry ID: 110070593205
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110070593205
Name: H A T AUTO SERVICE
Address: 750 NOGALES ST #C
City,State,Zip: WALNUT, CA 91789

A18 **JED AUTO REPAIR** **FINDS** **1016188492**
Target **778-A N NOGALES ST** **ECHO** **N/A**
Property **WALNUT, CA 91789**

Site 18 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110002853680

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:
Envid: 1016188492
Registry ID: 110002853680
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110002853680
Name: JED AUTO REPAIR
Address: 778-A N NOGALES ST
City,State,Zip: WALNUT, CA 91789

A19 **TOYOTA & HONDA SPECIALTY** **LOS ANGELES CO. HMS** **S109422171**
Target **778 NOGALES AVE #C** **N/A**
Property **WALNUT, CA 91789**

Site 19 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: TOYOTA & HONDA SPECIALTY
Address: 778 NOGALES AVE #C
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021092-029864
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A20 **PREVENTION AUTO CARE** **LOS ANGELES CO. HMS** **S108998511**
Target **750 NOGALES AVE #F** **N/A**
Property **WALNUT, CA 91789**

Site 20 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: PREVENTION AUTO CARE
Address: 750 NOGALES AVE #F
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021073-029824
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A21 **PREVENTION AUTO CARE** **CERS HAZ WASTE** **S108998512**
Target **778 NOGALES AVE #A** **LOS ANGELES CO. HMS** **N/A**
Property **WALNUT, CA 91789**

Site 21 of 107 in cluster A

Actual: **588 ft.**

CERS HAZ WASTE:
Name: MANNYS AUTOMOTIVE SOLUTION
Address: 778 NOGALES AVE STE A
City,State,Zip: WALNUT, CA 91789
Site ID: 430579
CERS ID: 10746883
CERS Description: Hazardous Waste Generator

Violations:
Site ID: 430579
Site Name: mannys automotive solution
Violation Date: 10-05-2017
Citation: HSC 6.95 25507 - California Health and Safety Code, Chapter 6.95, Section(s) 25507
Violation Description: Failure to adequately establish and implement a business plan when

PREVENTION AUTO CARE (Continued) **S108998512**

	storing/handling a hazardous material at or above reportable quantities.
Violation Notes:	Returned to compliance on 11/14/2017. OBSERVATION: Owner/Operator failed to establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet. CORRECTIVE ACTION: Establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet. HAZ MAT STORED: used oil
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS
Site ID:	430579
Site Name:	mannys automotive solution
Violation Date:	10-05-2017
Citation:	22 CCR 12 66262.12 - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.12
Violation Description:	Failure to obtain an Identification Number prior to treating, storing, disposing of, transporting or offering for transportation any hazardous waste.
Violation Notes:	Returned to compliance on 12/04/2017. OBSERVATION: The generator has not obtained an active EPA ID number to manage hazardous waste. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an active EPA ID number. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that you have obtained an EPA ID number.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	430579
Site Name:	mannys automotive solution
Violation Date:	10-05-2017
Citation:	22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description:	Failure to properly label hazardous waste accumulation containers and portable tanks with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes:	Returned to compliance on 12/04/2017. OBSERVATION: Drums of waste coolant, used oil, and used oil filters located in the service garage was observed without hazardous waste labels. CORRECTIVE ACTION: Submit a photo to the CUPA demonstrating that the containers listed above have been properly labeled.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Evaluation:

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	10-05-2017
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Manuel Perez, Owner
Eval Division:	Los Angeles County Fire Department

PREVENTION AUTO CARE (Continued) **S108998512**

Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 12-04-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Reportable quantities of HM removed and verified on 11/14/17; NOV abated.
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 10-05-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Manuel Perez, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 10-20-2020
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Manuel Perez, Owner
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 12-04-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: EPA ID active per HWTS; photos received showing HW drums labeled; NOV abated.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-14-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: 1st revisit; met with Manuel Perez, no EPA ID obtained; no labels on HW caddies; RV fee notice provided; followup in 2 weeks.
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-14-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: 1st revisit; met with Manuel Perez; 55-gal drums replaced with caddies for used oil and waste coolant; NOV abated.

PREVENTION AUTO CARE (Continued) **S108998512**

Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Document Preparer
Entity Name: Manuel Perez
Entity Title: Not reported
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 778 nogales st
Affiliation City: walnut
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

Affiliation Type Desc: Environmental Contact
Entity Name: MANUEL PEREZ
Entity Title: Not reported
Affiliation Address: 778 Nogales Ave Ste A
Affiliation City: Walnut
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

Affiliation Type Desc: Identification Signer
Entity Name: MANUEL PEREZ
Entity Title: OWNER
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Operator
Entity Name: mannys automotive solution inc.

PREVENTION AUTO CARE (Continued) **S108998512**

Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 705-6158
Affiliation Type Desc:	Parent Corporation
Entity Name:	mannys automotive solution
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	mannys automotive solution inc.
Entity Title:	Not reported
Affiliation Address:	778 Nogales Ave Ste A
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 705-6158

LOS ANGELES CO. HMS:

Name:	PREVENTION AUTO CARE
Address:	778 NOGALES AVE #A
City,State,Zip:	WALNUT, CA 91789
Region:	LA
Permit Category:	Not reported
Facility Id:	021091-029862
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L
Permit Number:	Not reported
Permit Status:	Not reported

A22
Target Property

ALAMO XPRESS LUBE
762 NOGALES AVE #A
WALNUT, CA 91789

LOS ANGELES CO. HMS **S108998308**
N/A

Site 22 of 107 in cluster A

Actual:
588 ft.

LOS ANGELES CO. HMS:

Name:	MOBIL XPRESS LUBE
Address:	762 NOGALES AVE #A
City,State,Zip:	WALNUT, CA 917894532
Region:	LA
Permit Category:	Not reported
Facility Id:	021080-029837
Facility Type:	Not reported
Facility Status:	OPEN

ALAMO XPRESS LUBE (Continued) **S108998308**

Area: 6L
Permit Number: Not reported
Permit Status: Not reported

Name: ALAMO XPRESS LUBE
Address: 762 NOGALES AVE #A
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: Not reported
Facility Id: 021080-058820
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A23 **ALAMO RADIATOR** **LOS ANGELES CO. HMS** **S108997253**
Target **778 NOGALES AVE #B** **N/A**
Property **WALNUT, CA 91798**

Site 23 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: ALAMO RADIATOR
Address: 778 NOGALES AVE #B
City,State,Zip: WALNUT, CA 91798
Region: LA
Permit Category: Not reported
Facility Id: 021089-029860
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A24 **SIMIN'S BEAUTY SALON** **LOS ANGELES CO. HMS** **S108998710**
Target **750 NOGALES AVE #H** **N/A**
Property **WALNUT, CA 91789**

Site 24 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: SIMIN'S BEAUTY SALON
Address: 750 NOGALES AVE #H
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021075-029826
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A25 **SUPER-TEK MOTORS** **LOS ANGELES CO. HMS** **S108998799**
Target **750 NOGALES AVE #D** **N/A**
Property **WALNUT, CA 91789**

Site 25 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:

Name:	SUPER-TEK MOTORS
Address:	750 NOGALES AVE #D
City,State,Zip:	WALNUT, CA 91789
Region:	LA
Permit Category:	Not reported
Facility Id:	021076-029827
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L
Permit Number:	Not reported
Permit Status:	Not reported

A26 **JED AUTO REPAIR** **HWTS** **S124778049**
Target **778 N NOGALES AVE #A** **N/A**
Property **WALNUT, CA 91789**

Site 26 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	JED AUTO REPAIR
Address:	778 N NOGALES AVE #A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000048963
Inactive Date:	06/30/1994
Create Date:	08/02/1993
Last Act Date:	07/10/2001
Mailing Name:	Not reported
Mailing Address:	778 N NOGALES AVE #A
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	--
Owner Address:	--
Owner Address 2:	Not reported
Owner City,State,Zip:	--, 99 --
Contact Name:	UNDELIVERABLE PER FEES 6/94
Contact Address:	--
Contact Address 2:	Not reported
City,State,Zip:	--, 99 --

A27 **SUPERTEK MOTORS** **HWTS** **S124869493**
Target **750 N NOGALES ST UNIT D** **N/A**
Property **WALNUT, CA 91789**

Site 27 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	SUPERTEK MOTORS
Address:	750 N NOGALES ST UNIT D
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

SUPERTEK MOTORS (Continued) **S124869493**

EPA ID: CAL000327596
Inactive Date: 06/30/2008
Create Date: 12/07/2007
Last Act Date: 04/23/2009
Mailing Name: Not reported
Mailing Address: 750 N NOGALES ST UNIT D
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917890000
Owner Name: FRANCISCO GATCHALIAN
Owner Address: 3401 S SENTOUS AVE
Owner Address 2: Not reported
Owner City,State,Zip: WEST COVINA, CA 917922727
Contact Name: LEONARD THEODORUS
Contact Address: 750 N NOGALES ST UNIT D
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

NAICS:
EPA ID: CAL000327596
Create Date: 2007-12-07 13:24:40.937
NAICS Code: 811111
NAICS Description: General Automotive Repair
Issued EPA ID Date: 2007-12-07 13:24:40.90700
Inactive Date: 2008-06-30 00:00:00
Facility Name: SUPERTEK MOTORS
Facility Address: 750 N NOGALES ST UNIT D
Facility Address 2: Not reported
Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 917890000

A28 **RES AUTO CARE** **RCRA NonGen / NLR** **1026056387**
Target **750 NOGALES ST UNIT D** **CAL000452574**
Property **WALNUT, CA 91789**

Site 28 of 107 in cluster A

Actual: 588 ft.

RCRA NonGen / NLR:
Date Form Received by Agency: 20200206
Handler Name: RES AUTO CARE
Handler Address: 750 NOGALES ST UNIT D
Handler City,State,Zip: WALNUT, CA 91789
EPA ID: CAL000452574
Contact Name: PETER CHIANG
Contact Address: 1311 N CRAPE MYRTLE DR
Contact City,State,Zip: AZUSA, CA 91702
Contact Telephone: 626-905-0303
Contact Fax: Not reported
Contact Email: SERVICE@RESAUTO.COM
Contact Title: Not reported
EPA Region: 09
Land Type: Not reported
Federal Waste Generator Description: Not a generator, verified
Non-Notifier: Not reported
Biennial Report Cycle: Not reported
Accessibility: Not reported

RES AUTO CARE (Continued) **1026056387**

Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	750 NOGALES ST UNIT D
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	JACK XU
Owner Type:	Other
Operator Name:	PETER CHIANG
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200210

RES AUTO CARE (Continued) **1026056387**

Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	JACK XU
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	19563 EMPTY SADDLE RD
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-215-1596
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	PETER CHIANG
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	1311 N CRAPE MYRTLE DR
Owner/Operator City,State,Zip:	AZUSA, CA 91702
Owner/Operator Telephone:	626-905-0303
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20200206
Handler Name: RES AUTO CARE	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:

Violations:	No Violations Found

RES AUTO CARE (Continued) **1026056387**

Evaluation Action Summary:
Evaluations: No Evaluations Found

A29 **EUROJUNKYS INC** **FINDS** **1007677561**
Target **762 N NOGALES ST** **ECHO** **N/A**
Property **WALNUT, CA 91789**

Site 29 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110017946268

Click Here:

Environmental Interest/Information System:
STATE MASTER
UORS (California - Used Oil Recycling System). California Integrated Waste Management Board (CIWMB) helps communities establish and promote convenient collection opportunities for used oil and used oil filters.
Registry ID: 110070849514

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:
Envid: 1007677561
Registry ID: 110070849514
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110070849514
Name: EUROJUNKYS INC
Address: 762 N NOGALES ST
City,State,Zip: WALNUT, CA 91789

A30 **PRO & NEAT AUTO** **LOS ANGELES CO. HMS** **S108998517**
Target **778 NOGALES AVE #C** **N/A**
Property **WALNUT, CA 91789**

Site 30 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: PRO & NEAT AUTO
Address: 778 NOGALES AVE #C
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021092-029863
Facility Type: Not reported

PRO & NEAT AUTO (Continued) **S108998517**

Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A31 **RICH'S TINT SHOP** **LOS ANGELES CO. HMS** **S108998581**
Target **784 NOGALES AVE #B** **N/A**
Property **WALNUT, CA 91789**

Site 31 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: RICH'S TINT SHOP
Address: 784 NOGALES AVE #B
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021093-029866
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A32 **TRI CITY AUTO REPAIR** **HWTS** **S124789035**
Target **750 N NOGALES ST UNIT F** **N/A**
Property **WALNUT, CA 91789**

Site 32 of 107 in cluster A

Actual: **588 ft.**

HWTS:
Name: TRI CITY AUTO REPAIR
Address: 750 N NOGALES ST UNIT F
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
EPA ID: CAL000075894
Inactive Date: 06/30/1995
Create Date: 10/16/1992
Last Act Date: 07/24/2001
Mailing Name: Not reported
Mailing Address: 750 N NOGALES ST UNIT F
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917890000
Owner Name: GERSTNER DANNY
Owner Address: --
Owner Address 2: Not reported
Owner City,State,Zip: --, 99 --
Contact Name: UNDELIVERABLE FEE FORM 95 LH
Contact Address: 8-20-95OGALES ST UNIT F
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

A33 **TEXACO EXPRESS LUBE** **HWTS** **S124778064**
Target **762 N NOGALES AVE** **N/A**
Property **WALNUT, CA 91789**

Site 33 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	TEXACO EXPRESS LUBE
Address:	762 N NOGALES AVE
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000049005
Inactive Date:	06/30/1998
Create Date:	08/02/1993
Last Act Date:	10/15/1998
Mailing Name:	Not reported
Mailing Address:	762 NOGALES AVE # N
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894532
Owner Name:	DAN GERSTNER
Owner Address:	762 NOGALES AVE # N
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894532
Contact Name:	DAN GERSTNER
Contact Address:	INACTIVE PER VQ98 - BMI
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894532

A34 **SINGH'S POWER AUTO CENTER** **HWTS** **S124869339**
Target **762 NOGALES AVE BLDG C** **N/A**
Property **WALNUT, CA 91789**

Site 34 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	SINGH'S POWER AUTO CENTER
Address:	762 NOGALES AVE BLDG C
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894532
EPA ID:	CAL000327262
Inactive Date:	06/30/2010
Create Date:	11/30/2007
Last Act Date:	03/15/2012
Mailing Name:	Not reported
Mailing Address:	15815 FAIRGROVE AVE
Mailing Address 2:	Not reported
Mailing City,State,Zip:	LA PUENTE, CA 917441627
Owner Name:	PRAVINA D SINGH
Owner Address:	15815 FAIRGROVE AVE
Owner Address 2:	Not reported
Owner City,State,Zip:	LA PUENTE, CA 917441627
Contact Name:	VJ SINGH
Contact Address:	15815 FAIRGROVE AVE
Contact Address 2:	Not reported
City,State,Zip:	LA PUENTE, CA 917441627

NAICS:

EPA ID:	CAL000327262
Create Date:	2007-11-30 10:21:05.940
NAICS Code:	811111

SINGH'S POWER AUTO CENTER (Continued) **S124869339**

NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2007-11-30 10:21:05.91000
Inactive Date:	2010-06-30 00:00:00
Facility Name:	SINGH'S POWER AUTO CENTER
Facility Address:	762 NOGALES AVE BLDG C
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917894532

A35 **H A T AUTO SERVICE** **FINDS** **1025981567**
Target **750 NOGALES ST #C** **N/A**
Property **WALNUT, CA 91789**

Site 35 of 107 in cluster A

Actual: FINDS:
588 ft. Registry ID: 110070593205

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A36 **ALAMO AUTOMOTIVE SERVICES** **HWTS** **S124817108**
Target **750 NOGALES** **N/A**
Property **WALNUT, CA 91789**

Site 36 of 107 in cluster A

Actual: HWTS:
588 ft.

Name:	ALAMO AUTOMOTIVE SERVICES
Address:	750 NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000177146
Inactive Date:	06/30/1997
Create Date:	08/18/1995
Last Act Date:	09/18/1997
Mailing Name:	Not reported
Mailing Address:	750 NOGALES AVE STE L
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894556
Owner Name:	ELMER LORENZO
Owner Address:	750 NOGALES AVE STE L
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894556
Contact Name:	UNDELIVERABLE PER VF97 AH

ALAMO AUTOMOTIVE SERVICES (Continued) **S124817108**

Contact Address: 750 NOGALES AVE STE L
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917894556

A37 **K SPEC MOTORS LLC** **FINDS** **1026779294**
Target **778 N NOGALES ST UNIT J** **N/A**
Property **WALNUT, CA 91789**

Site 37 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110070905461

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A38 **AUTOCARE 101 INC** **HWTS** **S125545495**
Target **750 N NOGALES ST STE E** **N/A**
Property **WALNUT, CA 91789**

Site 38 of 107 in cluster A

Actual: **588 ft.**

HWTS:
Name: AUTOCARE 101 INC
Address: 750 N NOGALES ST STE E
Address 2: Not reported
City,State,Zip: WALNUT, CA 91789
EPA ID: CAL000448914
Inactive Date: 06/30/2020
Create Date: 09/17/2019
Last Act Date: 01/04/2021
Mailing Name: Not reported
Mailing Address: 750 N NOGALES ST STE E
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 91789
Owner Name: AUTOCARE 101 INC
Owner Address: 750 N NOGALES ST STE E
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 91789
Contact Name: RICHARD YAP
Contact Address: 3578 WHIRLAWAY LN
Contact Address 2: Not reported
City,State,Zip: CHINO HILLS, CA 91709

NAICS:
EPA ID: CAL000448914
Create Date: 2019-09-17 14:19:09.437
NAICS Code: 811111

AUTOCARE 101 INC (Continued) **S125545495**

NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2019-09-17 14:19:09.34300
Inactive Date:	2020-06-30 00:00:00
Facility Name:	AUTOCARE 101 INC
Facility Address:	750 N NOGALES ST STE E
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A39 **JED AUTO REPAIR** **HWTS** **S124753557**
Target **778 A N NOGALES ST** **N/A**
Property **WALNUT, CA 91789**

Site 39 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	JED AUTO REPAIR
Address:	778 A N NOGALES ST
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAD983595919
Inactive Date:	08/09/1995
Create Date:	07/24/1991
Last Act Date:	08/18/2010
Mailing Name:	Not reported
Mailing Address:	778 A N NOGALES ST
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	ALAMO CAR CENTER
Owner Address:	NOT REQUIRED
Owner Address 2:	Not reported
Owner City,State,Zip:	NOT REQUIRED, ME 999990000
Contact Name:	INACTIVE NEW BUS AT SITE
Contact Address:	8-9-95 NJ
Contact Address 2:	Not reported
City,State,Zip:	NOT REQUIRED, ME 999990000

A40 **EJS AUTOMOTIVE** **HWTS** **S124869573**
Target **778 NOGALES AVE UNIT J** **N/A**
Property **WALNUT, CA 91789**

Site 40 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	EJS AUTOMOTIVE
Address:	778 NOGALES AVE UNIT J
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894553
EPA ID:	CAL000327761
Inactive Date:	06/30/2008
Create Date:	12/12/2007
Last Act Date:	04/23/2009
Mailing Name:	Not reported

EJS AUTOMOTIVE (Continued) **S124869573**

Mailing Address:	778 NOGALES AVE UNIT J
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894553
Owner Name:	ERIK EVORA
Owner Address:	778 NOGALES AVE UNIT J
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894553
Contact Name:	ERIK EVORA
Contact Address:	778 NOGALES AVE UNIT J
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894553

NAICS:

EPA ID:	CAL000327761
Create Date:	2007-12-12 08:11:50.700
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2007-12-12 08:11:50.68300
Inactive Date:	2008-06-30 00:00:00
Facility Name:	EJS AUTOMOTIVE
Facility Address:	778 NOGALES AVE UNIT J
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917894553

A41 **ALAMO CAR WASH DBA CHEVRON** **LOS ANGELES CO. HMS** **S120729523**
Target **784 NOGALES AVE #A** **N/A**
Property **WALNUT, CA 91789**

Site 41 of 107 in cluster A

Actual:
588 ft.

LOS ANGELES CO. HMS:

Name:	ALAMO CAR WASH DBA CHEVRON
Address:	784 NOGALES AVE #A
City,State,Zip:	WALNUT, CA 917894552
Region:	LA
Permit Category:	T
Facility Id:	014427-015014
Facility Type:	0
Facility Status:	Permit
Area:	6L
Permit Number:	00005814T
Permit Status:	Permit

A42 **SUPERTEK MOTORS** **HWTS** **S124823255**
Target **750 N NOGALES ST UNIT D** **N/A**
Property **WALNUT, CA 91789**

Site 42 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	SUPERTEK MOTORS
Address:	750 N NOGALES ST UNIT D
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000204958
Inactive Date:	06/30/2008
Create Date:	07/20/2000
Last Act Date:	04/23/2009
Mailing Name:	Not reported
Mailing Address:	730 N MOGALES ST STE D
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WEST COVINA, CA 917890000
Owner Name:	SUPER TEK MOTORS
Owner Address:	750 N NOGALES ST STE D
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	LEONARD THEODORUS
Contact Address:	750 N NOGALES ST STE D
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

A43 **EUROJUNKYS INC** **RCRA NonGen / NLR** **1026492044**
Target **762 N NOGALES ST** **CAL000456817**
Property **WALNUT, CA 91789**

Site 43 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20200917
Handler Name:	EUROJUNKYS INC	
Handler Address:		762 N NOGALES ST
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAL000456817
Contact Name:		PETE VIZCARRONDO
Contact Address:		110 N ROCK RIVER DR
Contact City,State,Zip:		DIAMOND BAR, CA 91765
Contact Telephone:		909-938-2399
Contact Fax:		Not reported
Contact Email:		Not reported
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Not reported
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		762 N NOGALES ST
Mailing City,State,Zip:		WALNUT, CA 91789
Owner Name:		EUROJUNKYS INC
Owner Type:		Other

EUROJUNKYS INC (Continued) **1026492044**

Operator Name:	PETE VIZCARRONDO
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200920
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

EUROJUNKYS INC (Continued) **1026492044**

Handler - Owner Operator:
Owner/Operator Indicator: Owner
Owner/Operator Name: EUROJUNKYS INC
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 110 N ROCK RIVER DR
Owner/Operator City,State,Zip: DIAMOND BAR, CA 91765
Owner/Operator Telephone: 909-938-2399
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Owner/Operator Indicator: Operator
Owner/Operator Name: PETE VIZCARRONDO
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 110 N ROCK RIVER DR
Owner/Operator City,State,Zip: DIAMOND BAR, CA 91765
Owner/Operator Telephone: 909-938-2399
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 20200917
Handler Name: EUROJUNKYS INC
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A44 **PREVENTION AUTO CARE** **HWTS** **S124862431**
Target **750 N NOGALES ST UNIT F** **N/A**
Property **WALNUT, CA 91789**

Site 44 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	PREVENTION AUTO CARE
Address:	750 N NOGALES ST UNIT F
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000311773
Inactive Date:	06/30/2007
Create Date:	09/25/2006
Last Act Date:	03/20/2008
Mailing Name:	Not reported
Mailing Address:	750 N NOGALES ST UNIT F
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	HONG "BILL" DOAN
Owner Address:	750 N NOGALES ST
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 91789
Contact Name:	HONG "BILL" DOAN
Contact Address:	750 N NOGALES ST
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000311773
Create Date:	2006-09-25 09:39:37.433
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2006-09-25 09:39:37.38700
Inactive Date:	2007-06-30 00:00:00
Facility Name:	PREVENTION AUTO CARE
Facility Address:	750 N NOGALES ST UNIT F
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A45 **AUTO CARE 101** **HWTS** **S124861687**
Target **750 N NOGALES ST STE E** **N/A**
Property **WALNUT, CA 91789**

Site 45 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	AUTO CARE 101
Address:	750 N NOGALES ST STE E
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000310216
Inactive Date:	06/30/2020
Create Date:	08/10/2006
Last Act Date:	01/04/2021
Mailing Name:	Not reported

AUTO CARE 101 (Continued) **S124861687**

Mailing Address:	750 N NOGALES ST STE E
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	RICHARD YAP
Owner Address:	750 N NOGALES ST STE E
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	RICHARD YAP
Contact Address:	750 N NOGALES ST STE E
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

NAICS:

EPA ID:	CAL000310216
Create Date:	2006-08-10 15:34:44.533
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2006-08-10 15:34:44.50300
Inactive Date:	2020-06-30 00:00:00
Facility Name:	AUTO CARE 101
Facility Address:	750 N NOGALES ST STE E
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A46 **AUTOCARE 101 INC** **FINDS** **1026065034**
Target **750 N NOGALES ST STE E** **N/A**
Property **WALNUT, CA 91789**

Site 46 of 107 in cluster A

Actual:
588 ft.

FINDS:
Registry ID: 110070632046

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A47 **RAM AUTO REPAIR** **FINDS** **1024660216**
Target **778 NOGALES AVE #C** **ECHO** **N/A**
Property **WALNUT, CA 91789**

Site 47 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110070448610

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1024660216
Registry ID:	110070448610
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110070448610
Name:	RAM AUTO REPAIR
Address:	778 NOGALES AVE #C
City,State,Zip:	WALNUT, CA 91789

A48 **K SPEC MOTORS LLC** **RCRA NonGen / NLR** **1026492157**
Target **778 N NOGALES ST UNIT J** **CAL000456935**
Property **WALNUT, CA 91789**

Site 48 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:	20200921
Handler Name:	K SPEC MOTORS LLC
Handler Address:	778 N NOGALES ST UNIT J
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000456935
Contact Name:	KAREEM ELATTAR
Contact Address:	732 DUNSMUIR LN
Contact City,State,Zip:	WALNUT, CA 91789
Contact Telephone:	626-261-3704
Contact Fax:	Not reported
Contact Email:	KSPECMOTOR@GMAIL.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	732 DUNSMUIR LN
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	K SPEC MOTORS LLC

K SPEC MOTORS LLC (Continued) **1026492157**

Owner Type:	Other
Operator Name:	KAREEM ELATTAR
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200927
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No

K SPEC MOTORS LLC (Continued) **1026492157**

Sub-Part P Indicator: No

Handler - Owner Operator:
Owner/Operator Indicator: Owner
Owner/Operator Name: K SPEC MOTORS LLC
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 732 DUNSMUIR LN
Owner/Operator City,State,Zip: WALNUT, CA 91789
Owner/Operator Telephone: 626-261-3704
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Owner/Operator Indicator: Operator
Owner/Operator Name: KAREEM ELATTAR
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 732 DUNSMUIR LN
Owner/Operator City,State,Zip: WALNUT, CA 91789
Owner/Operator Telephone: 626-261-3704
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 20200921
Handler Name: K SPEC MOTORS LLC
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 811111
NAICS Description: GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A49 **REYES RACING & OFFROAD** **HWTS** **S124829057**
Target **778 N NOGALES UNIT A** **N/A**
Property **WALNUT, CA 91789**

Site 49 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	REYES RACING & OFFROAD
Address:	778 N NOGALES UNIT A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000224495
Inactive Date:	06/30/2003
Create Date:	07/18/2001
Last Act Date:	04/07/2004
Mailing Name:	Not reported
Mailing Address:	678-C SAN BERNARDINO RD
Mailing Address 2:	Not reported
Mailing City,State,Zip:	COVINA, CA 917230000
Owner Name:	ART REYES
Owner Address:	678-C SAN BERNARDINO RD
Owner Address 2:	Not reported
Owner City,State,Zip:	COVINA, CA 917230000
Contact Name:	ART REYES JR. OWNER
Contact Address:	678-C SAN BERNARDINO RD
Contact Address 2:	Not reported
City,State,Zip:	COVINA, CA 917230000

NAICS:

EPA ID:	CAL000224495
Create Date:	2002-03-14 16:36:29.000
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2001-07-18 00:00:00
Inactive Date:	2003-06-30 00:00:00
Facility Name:	REYES RACING & OFFROAD
Facility Address:	778 N NOGALES UNIT A
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917890000

A50 **DAYTONA AUTO REPAIR** **HWTS** **S124873969**
Target **778 N NOGALES** **N/A**
Property **WALNUT, CA 91789**

Site 50 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	DAYTONA AUTO REPAIR
Address:	778 N NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000337225
Inactive Date:	Not reported
Create Date:	10/15/2008
Last Act Date:	08/27/2020
Mailing Name:	Not reported

DAYTONA AUTO REPAIR (Continued) **S124873969**

Mailing Address:	778 N NOGALES
Mailing Address 2:	SUITE B
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	LUIS E. SIMON
Owner Address:	778 N. NOGALES
Owner Address 2:	SUITE B
Owner City,State,Zip:	WALNUT, CA 91789
Contact Name:	SUSANA SIMON
Contact Address:	778 N. NOGALES
Contact Address 2:	SUITE B
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000337225
Create Date:	2010-11-22 13:00:50.000
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2008-10-15 15:15:38.05000
Inactive Date:	Not reported
Facility Name:	DAYTONA AUTO REPAIR
Facility Address:	778 N NOGALES
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

EPA ID:	CAL000337225
Create Date:	2008-10-15 15:15:38.080
NAICS Code:	99999
NAICS Description:	Not Otherwise Specified
Issued EPA ID Date:	2008-10-15 15:15:38.05000
Inactive Date:	Not reported
Facility Name:	DAYTONA AUTO REPAIR
Facility Address:	778 N NOGALES
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A51 **JED AUTO REPAIR** **RCRA-SQG** **1000595640**
Target **778-A N NOGALES ST** **CAD983595919**
Property **WALNUT, CA 91789**

Site 51 of 107 in cluster A

Actual:
588 ft.

RCRA-SQG:

Date Form Received by Agency:		19910724
Handler Name:	JED AUTO REPAIR	
Handler Address:		778-A N NOGALES ST
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAD983595919
Contact Name:		ELDIE TRINIDAD
Contact Address:		778 A N NOGALES ST
Contact City,State,Zip:		WALNUT, CA 91789
Contact Telephone:		818-912-3181

JED AUTO REPAIR (Continued) **1000595640**

Contact Fax:	Not reported
Contact Email:	Not reported
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Small Quantity Generator
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	CA
State District:	3
Mailing Address:	N NOGALES ST
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	ALAMO CAR CENTER
Owner Type:	Private
Operator Name:	NOT REQUIRED
Operator Type:	Private
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	NN
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A

JED AUTO REPAIR (Continued) **1000595640**

Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20000915
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	Not reported
Manifest Broker:	Not reported
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	ALAMO CAR CENTER
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	NOT REQUIRED
Owner/Operator City,State,Zip:	NOT REQUIRED, ME 99999
Owner/Operator Telephone:	415-555-1212
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	NOT REQUIRED
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	NOT REQUIRED
Owner/Operator City,State,Zip:	NOT REQUIRED, ME 99999
Owner/Operator Telephone:	415-555-1212
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	19910724
Handler Name: JED AUTO REPAIR	
Federal Waste Generator Description:	Small Quantity Generator
State District Owner:	CA
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

JED AUTO REPAIR (Continued) **1000595640**

List of NAICS Codes and Descriptions:
NAICS Codes: No NAICS Codes Found

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A52 Target Property **MOBIL XPRESS LUBE**
762 N NOGALES ST # B
WALNUT, CA 91789

CERS HAZ WASTE **S123500991**
CERS TANKS **N/A**
CERS

Site 52 of 107 in cluster A

Actual: 588 ft.

CERS HAZ WASTE:
Name: MOBIL XPRESS LUBE
Address: 762 N NOGALES ST # B
City,State,Zip: WALNUT, CA 91789
Site ID: 135804
CERS ID: 10292689
CERS Description: Hazardous Waste Generator

CERS TANKS:
Name: MOBIL XPRESS LUBE
Address: 762 N NOGALES ST # B
City,State,Zip: WALNUT, CA 91789
Site ID: 135804
CERS ID: 10292689
CERS Description: Aboveground Petroleum Storage

CERS:
Name: MOBIL XPRESS LUBE
Address: 762 N NOGALES ST # B
City,State,Zip: WALNUT, CA 91789
Site ID: 135804
CERS ID: 10292689
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 135804
Site Name: MOBIL XPRESS LUBE
Violation Date: 02-01-2017
Citation: 22 CCR 15 66265.195(c) - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.195(c)
Violation Description: Failure to conduct and document inspections of hazardous waste tank systems each operating day and retain records of those inspections at the facility.
Violation Notes: Returned to compliance on 05/26/2017. OBSERVATION: Facility failed to conduct daily inspections of the hazardous waste tank system(s). The owner/operator shall inspect, and document, where present, at least once each operating day: 1) Overfill/spill control equipment; 2) Aboveground portions of the tank system to detect corrosion or releases of water; 3) Data gathered from monitoring and leak-detection equipment; 4) Outside areas of the tank system including secondary

MOBIL XPRESS LUBE (Continued) **S123500991**

containment to detect erosion or signs of releases of hazardous waste; 5) For uncovered tanks, the level of waste in the tank; 6) Cathodic protection if present. Manager stated inspection was only done once a month. CORRECTIVE ACTION: Immediately begin daily inspections of the hazardous waste tank system(s), and document the items inspected. Submit a copy of the inspection log for the next 30 days to the CUPA 30 days from now.

Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 135804
Site Name: MOBIL XPRESS LUBE
Violation Date: 02-01-2017
Citation: 22 CCR 15 66265.192(a) - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.192(a)
Violation Description: Failure to obtain and maintain a written assessment reviewed and certified by an independent, qualified, professional engineer prior to placing the tank system in service. The written assessment shall state that, the new hazardous waste tank system has sufficient structural integrity, is acceptable for the transferring, storing and treating of hazardous waste, and that the tanks and containment system including the foundation, structural support, seams, connections, and pressure controls (if applicable) are suitably designed to meet the regulation.
Violation Notes: Returned to compliance on 10/05/2017. OBSERVATION: Owner/Operator does not have a tank assessment for the 1,200-gal used oil tank. The owner or operator of a hazardous waste tank shall obtain a written assessment reviewed and certified by an independent, qualified, professional engineer, registered in California attesting that the system has sufficient structural integrity, is acceptable for the transferring, storing, and treating of hazardous waste, and that the tanks and containment system are suitably designed. CORRECTIVE ACTION: Immediately have an assessment prepared for the 1,200-gal used oil tank. Submit a schedule showing when this will be accomplished to the CUPA 30 days from now.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 135804
Site Name: MOBIL XPRESS LUBE
Violation Date: 02-05-2020
Citation: 22 CCR 15 66265.195(c) - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.195(c)
Violation Description: Failure to conduct and document inspections of hazardous waste tank systems each operating day and retain records of those inspections at the facility.
Violation Notes: Returned to compliance on 03/16/2020. OBSERVATION: Daily inspections of the used oil tank system have not been conducted and documented. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that the used oil tank system is being properly inspected and documented.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 135804
Site Name: MOBIL XPRESS LUBE

MOBIL XPRESS LUBE (Continued) **S123500991**

Violation Date:	02-05-2020
Citation:	HSC 6.67 25270.4.5 (a) - California Health and Safety Code, Chapter 6.67, Section(s) 25270.4.5 (a)
Violation Description:	Failure to complete a review and evaluation of the SPCC Plan at least once every five years, document the completion of the review, and sign a statement as to whether the SPCC Plan will be amended.
Violation Notes:	Returned to compliance on 02/05/2020. OBSERVATION: Failure to perform and/or document the five-year review of the SPCC plan. CORRECTIVE ACTION: Complete and document the 5 year review of SPCC Plan and submit verification of proper completion.
Violation Division:	Los Angeles County Fire Department
Violation Program:	APSA
Violation Source:	CERS

Evaluation:

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-08-2014
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	06-13-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	2nd re-visit, met with Joaquin Vega, manager; Mr. Vega stated that his consultant John Schroeder would not be able to certify the used oil tank and is therefore recommending upgrade to double-wall; he presented 2 proposals for tank replacement worth $10K and $12K, awaiting a 3rd bid today; expecting to go with best bid within 2 weeks for installation of one 500-gal d/w AST; followup required.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-08-2014
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-08-2014
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY JOAQUIN VEGA
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection

MOBIL XPRESS LUBE (Continued) **S123500991**

Eval Date:	02-01-2017
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	02-01-2017
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-08-2014
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY JOAQUIN VEGA
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	02-01-2017
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	02-05-2020
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	02-05-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	02-05-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency

MOBIL XPRESS LUBE (Continued) **S123500991**

Eval Notes:	Joaquin Vega, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	03-04-2014
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	05-26-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	1st revisit, met with Mr. Dan Gerstner, Owner. Daily inspections being conducted and logged. Used oil tank enclosure removed for better viewing. Tank to be decommissioned as soon as a double-wall tank has been installed at an vacant service bay pit; estimates ongoing; will update on progress and notify upon installation; followup required.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	10-05-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	2nd revisit; new used oil tank 500-gal installed; old used oil tank decommissioined, disconnected and marked EMPTY; new tank assessment completed in August 2017 for new used oil tank; NOV abated.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-08-2014
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY JOAQUIN VEGA
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Affiliation:

Affiliation Type Desc:	Environmental Contact
Entity Name:	JOAQUIN VEGA
Entity Title:	Not reported
Affiliation Address:	762 N. Nogales St. Suite B
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

MOBIL XPRESS LUBE (Continued) **S123500991**

Affiliation Type Desc:	Document Preparer
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Parent Corporation
Entity Name:	MOBIL XPRESS LUBE
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Property Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	600 CHATHAM PL.
Affiliation City:	LA CANADA
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91011
Affiliation Phone:	(818) 726-5109

Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	762 N NOGALES ST #B
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Identification Signer
Entity Name:	DAN GERSTNER
Entity Title:	OWNER
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Operator
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported

MOBIL XPRESS LUBE (Continued) **S123500991**

Affiliation Zip:	Not reported
Affiliation Phone:	(818) 726-5109
Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Legal Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	762 N. NOGALES ST. #B
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 965-6032

A53 **TOYOTA & HONDA SPECIALTY** **FINDS** **1023231935**
Target Property **778 N NOGALES ST # C** **N/A**
WALNUT, CA 91789

Site 53 of 107 in cluster A

Actual: 588 ft.

FINDS:
Registry ID: 110065191660

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A54 **ALAMO CAR WASH** **CERS** **U003777250**
Target Property **784 NOGALES ST.** **N/A**
WALNUT, CA 91789

Site 54 of 107 in cluster A

Actual: 588 ft.

CERS:

Name:	ALAMO CAR WASH
Address:	784 NOGALES ST.
City,State,Zip:	WALNUT, CA 91789
Site ID:	259717
CERS ID:	T0603774352
CERS Description:	Leaking Underground Storage Tank Cleanup Site

Affiliation:

Affiliation Type Desc:	Local Agency Caseworker
Entity Name:	TIM SMITH - LOS ANGELES COUNTY

ALAMO CAR WASH (Continued) **U003777250**

Entity Title:	Not reported
Affiliation Address:	900 S. FREMONT AVE.
Affiliation City:	ALHAMBRA
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Regional Board Caseworker
Entity Name:	NOMAN CHOWDHURY - LOS ANGELES RWQCB (REGION 4)
Entity Title:	Not reported
Affiliation Address:	320 WEST 4TH STREET, SUITE 200
Affiliation City:	LOS ANGELES
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	2135766704

A55 **ALAMO CAR WASH** **RGA LUST** **S114569740**
Target **784 NOGALES AVE.** **N/A**
Property **WALNUT, CA**

Site 55 of 107 in cluster A

Actual: **588 ft.**

RGA LUST:

Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2012 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2011 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2010 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2009 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2008 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.
City:	WALNUT
State:	WALNUT
	2007 ALAMO CAR WASH 784 NOGALES AVE.
Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE.

ALAMO CAR WASH (Continued) **S114569740**

City: WALNUT
State: WALNUT
2006 ALAMO CAR WASH 784 NOGALES AVE.
Name: ALAMO CAR WASH
Address: 784 NOGALES AVE.
City: WALNUT
State: WALNUT
2005 ALAMO CAR WASH 784 NOGALES AVE.

A56 **DC LOGISTICS** **ECHO** **1026846425**
Target **780 NOGALES ST #8** **N/A**
Property **CITY OF INDUSTRY, CA 91789**

Site 56 of 107 in cluster A

Actual: **588 ft.**

ECHO:
Envid: 1026846425
Registry ID: 110070947111
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110070947111
Name: DC LOGISTICS
Address: 780 NOGALES ST #8
City,State,Zip: CITY OF INDUSTRY, CA 91789

A57 **AUTOCARE 101 INC** **RCRA NonGen / NLR** **1025875778**
Target **750 N NOGALES ST STE E** **CAL000448914**
Property **WALNUT, CA 91789**

Site 57 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:
Date Form Received by Agency: 20190917
Handler Name: AUTOCARE 101 INC
Handler Address: 750 N NOGALES ST STE E
Handler City,State,Zip: WALNUT, CA 91789
EPA ID: CAL000448914
Contact Name: RICHARD YAP
Contact Address: 3578 WHIRLAWAY LN
Contact City,State,Zip: CHINO HILLS, CA 91709
Contact Telephone: 626-475-1033
Contact Fax: Not reported
Contact Email: MR.RICHYAP@YAHOO.COM
Contact Title: Not reported
EPA Region: 09
Land Type: Not reported
Federal Waste Generator Description: Not a generator, verified
Non-Notifier: Not reported
Biennial Report Cycle: Not reported
Accessibility: Not reported
Active Site Indicator: Not reported
State District Owner: Not reported
State District: Not reported
Mailing Address: 750 N NOGALES ST STE E
Mailing City,State,Zip: WALNUT, CA 91789
Owner Name: AUTOCARE 101 INC
Owner Type: Other
Operator Name: RICHARD YAP

AUTOCARE 101 INC (Continued) **1025875778**

Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20190927
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

AUTOCARE 101 INC (Continued) **1025875778**

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	AUTOCARE 101 INC
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	750 N NOGALES ST STE E
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-810-3252
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	RICHARD YAP
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	3578 WHIRLAWAY LN
Owner/Operator City,State,Zip:	CHINO HILLS, CA 91709
Owner/Operator Telephone:	626-475-1033
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20190917
Handler Name: AUTOCARE 101 INC	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

A58 **CHEVRON (ON THE RUN)** **FINDS** **1023218650**
Target **762 N NOGALES ST # A** **N/A**
Property **WALNUT, CA 91789**

Site 58 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110065046970

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A59 **RES AUTO CARE** **HAULERS** **S127807593**
Target **750 NOGALES STREET, UNIT D** **N/A**
Property **WALNUT, CA 91789**

Site 59 of 107 in cluster A

Actual: **588 ft.**

HAULERS:

Name:	RES AUTO CARE
Address:	750 NOGALES STREET, UNIT D
City,State,Zip:	WALNUT, CA 91789
Facility ID:	1947568
Facility Phone:	(626) 507-8488
Business Email Address:	service@resauto.com
Contact Person:	Peter Chiang
Mailing Address:	750 Nogales Street, Unit D
Mailing City:	Walnut
Mailing State:	CA
Mailing Zip:	91789
Mailing County:	Not reported
Mailing Phone:	Not reported
Current Status:	Active
Current Hauler Status:	Not reported
Accepting Tires From Public:	Not reported
Regulatory Status Last Changed:	Not reported
Business Types:	Not reported

A60 **BEST FRIENDS AUTO SHOP** **HWTS** **S124879430**
Target **778 NOGALES AVE STE A** **N/A**
Property **WALNUT, CA 91789**

Site 60 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	BEST FRIENDS AUTO SHOP
Address:	778 NOGALES AVE STE A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894553
EPA ID:	CAL000348948
Inactive Date:	06/30/2010
Create Date:	12/22/2009
Last Act Date:	02/15/2011
Mailing Name:	Not reported
Mailing Address:	763 S GLENSHAW DR

BEST FRIENDS AUTO SHOP (Continued) **S124879430**

Mailing Address 2:	Not reported
Mailing City,State,Zip:	WEST COVINA, CA 91790
Owner Name:	HENRY LOPEZ
Owner Address:	763 S GLENSHAW DR
Owner Address 2:	Not reported
Owner City,State,Zip:	WEST COVINA, CA 917903630
Contact Name:	HENRY LOPEZ
Contact Address:	763 S GLENSHAW DR
Contact Address 2:	Not reported
City,State,Zip:	WEST COVINA, CA 91790

NAICS:

EPA ID:	CAL000348948
Create Date:	2009-12-22 16:39:41.933
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2009-12-22 16:39:41.92000
Inactive Date:	2010-06-30 00:00:00
Facility Name:	BEST FRIENDS AUTO SHOP
Facility Address:	778 NOGALES AVE STE A
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917894553

A61 **TEXACO EXPRESS LUBE** **HWTS** **S124797152**
Target **762 N NOGALES ST** **N/A**
Property **WALNUT, CA 91789**

Site 61 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	TEXACO EXPRESS LUBE
Address:	762 N NOGALES ST
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000097076
Inactive Date:	06/30/1992
Create Date:	09/17/1992
Last Act Date:	06/28/2001
Mailing Name:	Not reported
Mailing Address:	762 N NOGALES ST
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	GERSTNER DAN
Owner Address:	--
Owner Address 2:	Not reported
Owner City,State,Zip:	--, 99 --
Contact Name:	INACT PER FEE FORM DATED
Contact Address:	6-28-93
Contact Address 2:	Not reported
City,State,Zip:	--, 99 --

A62 **SUPERTEK MOTORS** **HWTS** **S124876656**
Target **750 NOGALES AVE STE D** **N/A**
Property **WALNUT, CA 91789**

Site 62 of 107 in cluster A

Actual: **588 ft.**

HWTS:

Name:	SUPERTEK MOTORS
Address:	750 NOGALES AVE STE D
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000342961
Inactive Date:	06/30/2010
Create Date:	05/13/2009
Last Act Date:	03/15/2012
Mailing Name:	Not reported
Mailing Address:	750 NOGALES AVE STE D
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	JEFFRY SANGARI
Owner Address:	750 NOGALES AVE STE D
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	JEFFRY SANGARI
Contact Address:	750 NOGALES AVE STE D
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

NAICS:

EPA ID:	CAL000342961
Create Date:	2009-05-13 10:43:46.257
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2009-05-13 10:43:46.24000
Inactive Date:	2010-06-30 00:00:00
Facility Name:	SUPERTEK MOTORS
Facility Address:	750 NOGALES AVE STE D
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917890000

A63 **ALAMO CAR WASH** **LOS ANGELES CO. HMS** **S120729524**
Target **784 NOGALES AVE #A** **N/A**
Property **WALNUT, CA 91789**

Site 63 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:

Name:	ALAMO CAR WASH
Address:	784 NOGALES AVE #A
City,State,Zip:	WALNUT, CA 917894552
Region:	LA
Permit Category:	Not reported
Facility Id:	014427-029865
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L

ALAMO CAR WASH (Continued) **S120729524**

Permit Number: Not reported
Permit Status: Not reported

A64 **J P AUTO** **HWTS** **S124862509**
Target **778 N NOGALES STE B** **N/A**
Property **WALNUT, CA 91789**

Site 64 of 107 in cluster A

Actual:
588 ft.

HWTS:

Name:	J P AUTO
Address:	778 N NOGALES STE B
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000311934
Inactive Date:	06/30/2007
Create Date:	09/27/2006
Last Act Date:	03/20/2008
Mailing Name:	Not reported
Mailing Address:	778 N NOGALES STE B
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	JOSEPH PARK
Owner Address:	15632 AMAR RD #F
Owner Address 2:	Not reported
Owner City,State,Zip:	LA PUENTE, CA 91744
Contact Name:	JOSEPH PARK
Contact Address:	778 N NOGALES STE B
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000311934
Create Date:	2006-09-27 13:37:48.223
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2006-09-27 13:37:48.13000
Inactive Date:	2007-06-30 00:00:00
Facility Name:	J P AUTO
Facility Address:	778 N NOGALES STE B
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A65 **K SPEC MOTORS LLC** **ECHO** **1026521221**
Target **778 N NOGALES ST UNIT J** **N/A**
Property **WALNUT, CA 91789**

Site 65 of 107 in cluster A

Actual: ECHO:
588 ft.

Envid:	1026521221
Registry ID:	110070905461
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110070905461
Name:	K SPEC MOTORS LLC
Address:	778 N NOGALES ST UNIT J
City,State,Zip:	WALNUT, CA 91789

A66 **DAYTONA AUTO REPAIR INC** **RCRA NonGen / NLR** **1026492266**
Target **778 N NOGALES ST STE B** **CAL000457049**
Property **WALNUT, CA 91789**

Site 66 of 107 in cluster A

Actual: RCRA NonGen / NLR:
588 ft.

Date Form Received by Agency:	20200924
Handler Name:	DAYTONA AUTO REPAIR INC
Handler Address:	778 N NOGALES ST STE B
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000457049
Contact Name:	SUSANA SIMON
Contact Address:	778 N NOGALES ST STE B
Contact City,State,Zip:	WALNUT, CA 91789
Contact Telephone:	626-810-5600
Contact Fax:	323-681-2737
Contact Email:	DAYTONAAUTOREPAIRINC@GMAIL.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	778 N NOGALES ST STE B
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	DAYTONA AUTO REPAIR INC
Owner Type:	Other
Operator Name:	SUSANA SIMON
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No

DAYTONA AUTO REPAIR INC (Continued) **1026492266**

Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200927
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	SUSANA SIMON
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	778 N NOGALES ST STE B
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-810-5600
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

DAYTONA AUTO REPAIR INC (Continued) **1026492266**

Owner/Operator Indicator:	Owner
Owner/Operator Name:	DAYTONA AUTO REPAIR INC
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	778 N NOGALES ST STE B
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	323-681-2737
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20200924
Handler Name:	DAYTONA AUTO REPAIR INC
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

A67 **ALAMO CAR WASH** **HAZNET** **S112903708**
Target **784 NO NOGALES** **HWTS** **N/A**
Property **WALNUT, CA 91789**

Site 67 of 107 in cluster A

Actual:
588 ft.

HAZNET:

Name:	ALAMO CAR WASH
Address:	784 NO NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
Contact:	DAN GERSTNER
Telephone:	6269653714
Mailing Name:	Not reported
Mailing Address:	784 NO NOGALES
Year:	2000
Gepaid:	CAC002206073
TSD EPA ID:	CAT080013352

ALAMO CAR WASH (Continued) **S112903708**

CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: R01 - Recycler
Tons: 2.47

Additional Info:
Year: 2000
Gen EPA ID: CAC002206073

Shipment Date: 20000320
Creation Date: 6/7/2000 0:00:00
Receipt Date: 20000329
Manifest ID: 99828241
Trans EPA ID: CAT080016116
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT080013352
Trans Name: Not reported
TSDF Alt EPA ID: CAT080013352
TSDF Alt Name: Not reported
Waste Code Description: 221 - Waste oil and mixed oil
RCRA Code: Not reported
Meth Code: R01 - Recycler
Quantity Tons: 1.33
Waste Quantity: 350
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 20000309
Creation Date: 5/30/2000 0:00:00
Receipt Date: 20000317
Manifest ID: 99325835
Trans EPA ID: CAT080016116
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT080013352
Trans Name: Not reported
TSDF Alt EPA ID: CAT080013352
TSDF Alt Name: Not reported
Waste Code Description: 221 - Waste oil and mixed oil
RCRA Code: Not reported
Meth Code: R01 - Recycler
Quantity Tons: 0.57
Waste Quantity: 150
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

ALAMO CAR WASH (Continued) **S112903708**

Shipment Date:	20000308
Creation Date:	5/23/2000 0:00:00
Receipt Date:	20000310
Manifest ID:	99828251
Trans EPA ID:	CAT080016116
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT080013352
Trans Name:	Not reported
TSDF Alt EPA ID:	CAT080013352
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	0.57
Waste Quantity:	150
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

HWTS:

Name:	ALAMO CAR WASH
Address:	784 NO NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAC002206073
Inactive Date:	06/11/2001
Create Date:	03/08/2000
Last Act Date:	06/11/2001
Mailing Name:	Not reported
Mailing Address:	784 NO NOGALES
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	ALAMO CAR WASH INC
Owner Address:	784 NO NOGALES
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	DAN GERSTNER
Contact Address:	784 NO NOGALES
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

A68 **RAM AUTO REPAIR** **HAZNET S113080962**
Target **778 NOGALES AVE #C** **HWTS N/A**
Property **WALNUT, CA 91789**

Site 68 of 107 in cluster A

Actual:
588 ft.

HAZNET:

Name:	RAM AUTO REPAIR
Address:	778 NOGALES AVE #C
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

RAM AUTO REPAIR (Continued) **S113080962**

Contact:	RENEE MADRIGAL
Telephone:	6269646981
Mailing Name:	Not reported
Mailing Address:	778 NOGALES AVE #C
Year:	2006
Gepaid:	CAL000147223
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.084
Year:	2000
Gepaid:	CAL000147223
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.105
Year:	1999
Gepaid:	CAL000147223
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.063
Year:	1998
Gepaid:	CAL000147223
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.1596
Year:	1998
Gepaid:	CAL000147223
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	T01 - Treatment, Tank
Tons:	0.0588

Additional Info:

Year:	2006
Gen EPA ID:	CAL000147223
Shipment Date:	20060127
Creation Date:	5/5/2006 18:30:35
Receipt Date:	20060127
Manifest ID:	24365816
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	Not reported

RAM AUTO REPAIR (Continued) **S113080962**

Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	SAFETY-KLEEN SYSTEMS INC
TSDF Alt EPA ID:	CAT000613893
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1999
Gen EPA ID:	CAL000147223
Shipment Date:	19990217
Creation Date:	4/5/1999 0:00:00
Receipt Date:	19990217
Manifest ID:	98700738
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2000
Gen EPA ID:	CAL000147223
Shipment Date:	20000425
Creation Date:	6/13/2000 0:00:00
Receipt Date:	20000425
Manifest ID:	99855418
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported

RAM AUTO REPAIR (Continued) **S113080962**

Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.105
Waste Quantity:	25
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1998
Gen EPA ID:	CAL000147223
Shipment Date:	19981223
Creation Date:	2/8/1999 0:00:00
Receipt Date:	19981223
Manifest ID:	98622336
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19981028
Creation Date:	12/10/1998 0:00:00
Receipt Date:	19981028
Manifest ID:	98563700
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported

RAM AUTO REPAIR (Continued) **S113080962**

Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19980904
Creation Date:	11/2/1998 0:00:00
Receipt Date:	19980904
Manifest ID:	98271024
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.0336
Waste Quantity:	8
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19980708
Creation Date:	9/3/1998 0:00:00
Receipt Date:	19980708
Manifest ID:	98186237
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	T01 - Treatment, Tank
Quantity Tons:	0.0588
Waste Quantity:	14
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported

RAM AUTO REPAIR (Continued) **S113080962**

Additional Code 4: Not reported
Additional Code 5: Not reported

HWTS:
Name: RAM AUTO REPAIR
Address: 778 NOGALES AVE #C
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
EPA ID: CAL000147223
Inactive Date: 06/30/2020
Create Date: 05/12/1998
Last Act Date: 01/04/2021
Mailing Name: Not reported
Mailing Address: 778 NOGALES AVE #C
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917890000
Owner Name: RENEE MADRIGAL
Owner Address: 778 NOGALES AVE #C
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 917890000
Contact Name: RENEE MADRIGAL OWNER
Contact Address: 778 NOGALES AVE #C
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

NAICS:
EPA ID: CAL000147223
Create Date: 2017-07-10 15:17:36.337
NAICS Code: 811111
NAICS Description: General Automotive Repair
Issued EPA ID Date: 1998-05-12 00:00:00
Inactive Date: 2020-06-30 00:00:00
Facility Name: RAM AUTO REPAIR
Facility Address: 778 NOGALES AVE #C
Facility Address 2: Not reported
Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 917890000

A69 **PREVENTION AUTO CARE** **HAZNET** **S113093473**
Target **778 NORTH NOGALES** **HWTS** **N/A**
Property **WALNUT, CA 91789**

Site 69 of 107 in cluster A

Actual: **588 ft.**

HAZNET:
Name: PREVENTION AUTO CARE
Address: 778 NORTH NOGALES
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
Contact: HONG "BILL" DOAN
Telephone: 8188391111
Mailing Name: Not reported
Mailing Address: 778 NOGALES AVE STE A

Year: 2004

PREVENTION AUTO CARE (Continued) **S113093473**

Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.1596
Year:	2001
Gepaid:	CAL000177095
TSD EPA ID:	CAD028409019
CA Waste Code:	352 - Other organic solids
Disposal Method:	H01 - Transfer Station
Tons:	0.05
Year:	2001
Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.084
Year:	2000
Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.168
Year:	1999
Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.399
Year:	1998
Gepaid:	CAL000177095
TSD EPA ID:	CAD093459485
CA Waste Code:	342 - Organic liquids with metals (Alkaline solution (pH >= 12.5) with metals)
Disposal Method:	H01 - Transfer Station
Tons:	0.0792
Year:	1998
Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	T01 - Treatment, Tank
Tons:	0.0546
Year:	1998
Gepaid:	CAL000177095
TSD EPA ID:	CAT000613893

PREVENTION AUTO CARE (Continued) **S113093473**

CA Waste Code: 134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method: H01 - Transfer Station
Tons: 0.1512

Additional Info:
Year: 1999
Gen EPA ID: CAL000177095

Shipment Date: 19991208
Creation Date: 2/1/2000 0:00:00
Receipt Date: 19991208
Manifest ID: 99026980
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.084
Waste Quantity: 20
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 19990823
Creation Date: 10/12/1999 0:00:00
Receipt Date: 19990823
Manifest ID: 99043036
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.063
Waste Quantity: 15
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

PREVENTION AUTO CARE (Continued) **S113093473**

Shipment Date:	19990630
Creation Date:	8/16/1999 0:00:00
Receipt Date:	19990630
Manifest ID:	99236336
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19990503
Creation Date:	6/3/1999 0:00:00
Receipt Date:	19990503
Manifest ID:	98809086
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19990309
Creation Date:	5/4/1999 0:00:00
Receipt Date:	19990309
Manifest ID:	98868436
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893

PREVENTION AUTO CARE (Continued) **S113093473**

Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.063
Waste Quantity: 15
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 19990112
Creation Date: 3/15/1999 0:00:00
Receipt Date: 19990112
Manifest ID: 98629216
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.063
Waste Quantity: 15
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Additional Info:
Year: 2001
Gen EPA ID: CAL000177095

Shipment Date: 20010730
Creation Date: 10/23/2001 0:00:00
Receipt Date: 20010808
Manifest ID: 20948532
Trans EPA ID: CAR000021048
Trans Name: Not reported
Trans 2 EPA ID: CAD982524480
Trans 2 Name: Not reported
TSDF EPA ID: CAD028409019
Trans Name: Not reported
TSDF Alt EPA ID: CAD028409019
TSDF Alt Name: Not reported
Waste Code Description: 352 - Other organic solids
RCRA Code: Not reported

PREVENTION AUTO CARE (Continued) **S113093473**

Meth Code:	H01 - Transfer Station
Quantity Tons:	0.05
Waste Quantity:	100
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20010102
Creation Date:	3/6/2001 0:00:00
Receipt Date:	20010102
Manifest ID:	20384871
Trans EPA ID:	SCR000075150
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1998
Gen EPA ID:	CAL000177095
Shipment Date:	19981117
Creation Date:	1/13/1999 0:00:00
Receipt Date:	19981117
Manifest ID:	98444034
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.0588
Waste Quantity:	14
Quantity Unit:	G
Additional Code 1:	Not reported

PREVENTION AUTO CARE (Continued) **S113093473**

Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19980930
Creation Date:	11/19/1998 0:00:00
Receipt Date:	19980930
Manifest ID:	98280169
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.0294
Waste Quantity:	7
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19980804
Creation Date:	9/15/1998 0:00:00
Receipt Date:	19980804
Manifest ID:	98271287
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19980618
Creation Date:	8/3/1998 0:00:00
Receipt Date:	19980618
Manifest ID:	98182828

PREVENTION AUTO CARE (Continued) **S113093473**

Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D006
Meth Code:	T01 - Treatment, Tank
Quantity Tons:	0.0546
Waste Quantity:	13
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19980427
Creation Date:	6/26/1998 0:00:00
Receipt Date:	19980429
Manifest ID:	97370152
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD093459485
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	342 - Organic liquids with metals (see 121
RCRA Code:	D006
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.0375
Waste Quantity:	9
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19980306
Creation Date:	5/8/1998 0:00:00
Receipt Date:	19980311
Manifest ID:	97483435
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	AZ0000001560
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD093459485
Trans Name:	Not reported
TSDF Alt EPA ID:	CAD093459485
TSDF Alt Name:	Not reported
Waste Code Description:	342 - Organic liquids with metals (see 121

PREVENTION AUTO CARE (Continued) **S113093473**

RCRA Code: D006
Meth Code: H01 - Transfer Station
Quantity Tons: 0.0417
Waste Quantity: 10
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Additional Info:
Year: 2000
Gen EPA ID: CAL000177095

Shipment Date: 20000328
Creation Date: 5/17/2000 0:00:00
Receipt Date: 20000329
Manifest ID: 99414104
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.084
Waste Quantity: 20
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 20000201
Creation Date: 3/22/2000 0:00:00
Receipt Date: 20000201
Manifest ID: 99059790
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: D039
Meth Code: H01 - Transfer Station
Quantity Tons: 0.084
Waste Quantity: 20
Quantity Unit: G

PREVENTION AUTO CARE (Continued) **S113093473**

Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Additional Info:
Year: 2004
Gen EPA ID: CAL000177095

Shipment Date: 20040519
Creation Date: 10/15/2004 10:47:43
Receipt Date: 20040520
Manifest ID: 23351140
Trans EPA ID: TXR000050930
Trans Name: SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: SAFETY-KLEEN SYSTEMS INC
TSDF Alt EPA ID: CAT000613893
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: Not reported
Meth Code: H01 - Transfer Station
Quantity Tons: 0.0756
Waste Quantity: 18
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 20040326
Creation Date: 8/23/2004 8:30:10
Receipt Date: 20040329
Manifest ID: 23026094
Trans EPA ID: TXR000050930
Trans Name: SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: SAFETY-KLEEN SYSTEMS INC
TSDF Alt EPA ID: CAT000613893
TSDF Alt Name: Not reported
Waste Code Description: 134 - Aqueous solution with <10% total organic residues
RCRA Code: Not reported
Meth Code: H01 - Transfer Station
Quantity Tons: 0.084
Waste Quantity: 20
Quantity Unit: G
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

PREVENTION AUTO CARE (Continued) **S113093473**

HWTS:

Name:	PREVENTION AUTO CARE
Address:	778 NORTH NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000177095
Inactive Date:	06/30/1998
Create Date:	08/09/1995
Last Act Date:	04/11/2006
Mailing Name:	Not reported
Mailing Address:	778 NOGALES AVE STE A
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894553
Owner Name:	HONG "BILL" DOAN
Owner Address:	778 NORT NOGALES
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	HONG "BILL" DOAN
Contact Address:	INACT PER 98VQ FINAL NOTICE
Contact Address 2:	- BATCH 4/27
City,State,Zip:	WALNUT, CA 917890000

A70 **AUTO CARE 101** **FINDS 1023285478**
Target **750 N NOGALES ST # E** **ECHO N/A**
Property **WALNUT, CA 91789**

Site 70 of 107 in cluster A

Actual:
588 ft.

FINDS:
Registry ID: 110065765087

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1023285478
Registry ID:	110065765087
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110065765087
Name:	AUTO CARE 101
Address:	750 N NOGALES ST # E
City,State,Zip:	WALNUT, CA 91789

A71 **DAYTONA AUTO REPAIR** **RCRA NonGen / NLR** **1024821436**
Target **778 N NOGALES** **CAL000337225**
Property **WALNUT, CA 91789**

Site 71 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20081015
Handler Name:	DAYTONA AUTO REPAIR	
Handler Address:		778 N NOGALES
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAL000337225
Contact Name:		SUSANA SIMON PART OWNER
Contact Address:		948 E ALWOOD ST
Contact City,State,Zip:		WEST COVINA, CA 91790
Contact Telephone:		323-681-2737
Contact Fax:		626-810-5644
Contact Email:		ELDAYTONAAUTO@GMAIL.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		778 N NOGALES
Mailing City,State,Zip:		WALNUT, CA 91789
Owner Name:		LUIS E. SIMON
Owner Type:		Other
Operator Name:		SUSANA SIMON PART OWNER
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No
Underground Injection Control:		No
Off-Site Waste Receipt:		No
Universal Waste Indicator:		Yes
Universal Waste Destination Facility:		Yes
Federal Universal Waste:		No
Active Site Fed-Reg Treatment Storage and Disposal Facility:		Not reported
Active Site Converter Treatment storage and Disposal Facility:		Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:		Not reported
Active Site State-Reg Handler:		---
Federal Facility Indicator:		Not reported
Hazardous Secondary Material Indicator:		N
Sub-Part K Indicator:		Not reported
Commercial TSD Indicator:		No
Treatment Storage and Disposal Type:		Not reported
2018 GPRA Permit Baseline:		Not on the Baseline
2018 GPRA Renewals Baseline:		Not on the Baseline
Permit Renewals Workload Universe:		Not reported

DAYTONA AUTO REPAIR (Continued) **1024821436**

Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180905
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	SUSANA SIMON PART OWNER
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	948 E ALWOOD ST
Owner/Operator City,State,Zip:	WEST COVINA, CA 91790
Owner/Operator Telephone:	323-681-2737
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Owner
Owner/Operator Name:	LUIS E. SIMON
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	948 E ALWOOD ST
Owner/Operator City,State,Zip:	WEST COVINA, CA 91790
Owner/Operator Telephone:	626-322-5246
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

DAYTONA AUTO REPAIR (Continued) **1024821436**

Historic Generators:
Receive Date: 20081015
Handler Name: DAYTONA AUTO REPAIR
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

NAICS Code: 811111
NAICS Description: GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A72 **SUPERTRACK MOTORS** **HAZNET S113103346**
Target **750 N NOGALES AVE** **HWTS N/A**
Property **WALNUT, CA 91789**

Site 72 of 107 in cluster A

Actual: **588 ft.**

HAZNET:
Name: SUPERTRACK MOTORS
Address: 750 N NOGALES AVE
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
Contact: FERRY MARINGKA-OWNER
Telephone: 6269656012
Mailing Name: Not reported
Mailing Address: 750 N NOGALES AVE

Year: 2006
Gepaid: CAL000201032
TSD EPA ID: CAT000613893
CA Waste Code: 134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method: H01 - Transfer Station
Tons: 0.084

Year: 2000
Gepaid: CAL000201032
TSD EPA ID: CAT000613893
CA Waste Code: 134 - Aqueous solution with total organic residues less than 10

SUPERTRACK MOTORS (Continued) **S113103346**

	percent
Disposal Method:	H01 - Transfer Station
Tons:	0.084

Additional Info:

Year:	2006
Gen EPA ID:	CAL000201032
Shipment Date:	20060110
Creation Date:	3/14/2007 18:30:24
Receipt Date:	20060110
Manifest ID:	24355888
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	SAFETY-KLEEN SYSTEMS INC
TSDF Alt EPA ID:	CAT000613893
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2000
Gen EPA ID:	CAL000201032
Shipment Date:	20000411
Creation Date:	5/30/2000 0:00:00
Receipt Date:	20000411
Manifest ID:	99851533
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported

SUPERTRACK MOTORS (Continued) **S113103346**

Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

HWTS:
Name: SUPERTRACK MOTORS
Address: 750 N NOGALES AVE
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
EPA ID: CAL000201032
Inactive Date: 06/30/2000
Create Date: 10/26/1999
Last Act Date: 03/20/2008
Mailing Name: Not reported
Mailing Address: 750 N NOGALES AVE
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917890000
Owner Name: FERRY MARINGKA
Owner Address: 750 N NOGALES AVE
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 917890000
Contact Name: FERRY MARINGKA-OWNER
Contact Address: INACT PER VQ00 NEW OWNER - NK
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

A73 **TRACT 88205** **NPDES S111216266**
Target **780 FRANCESCA DRIVE** **CIWQS N/A**
Property **WALNUT, CA 91789**

Site 73 of 107 in cluster A

Actual:
588 ft.

NPDES:
Name: SENIOR CONDOMINIUM AND COMMERCIAL
Address: 780 FRANCESCA DRIVE
City,State,Zip: WALNUT, CA 91789
Facility Status: Not reported
NPDES Number: Not reported
Region: Not reported
Agency Number: Not reported
Regulatory Measure ID: Not reported
Place ID: Not reported
Order Number: Not reported
WDID: 4 19C360120
Regulatory Measure Type: Construction
Program Type: Not reported
Adoption Date Of Regulatory Measure: Not reported
Effective Date Of Regulatory Measure: Not reported
Termination Date Of Regulatory Measure: Not reported
Expiration Date Of Regulatory Measure: Not reported
Discharge Address: Not reported
Discharge Name: Not reported
Discharge City: Not reported
Discharge State: Not reported
Discharge Zip: Not reported
Status: Terminated

TRACT 88205 (Continued) **S111216266**

Status Date:	11/15/2016
Operator Name:	A AND P BUISNESS SERVICES LLC
Operator Address:	14240 DON JULIAN ROAD UNIT B
Operator City:	CITY OF INDUSTRY
Operator State:	California
Operator Zip:	91746

NPDES as of 03/2018:

NPDES Number:	Not reported
Status:	Not reported
Agency Number:	Not reported
Region:	4
Regulatory Measure ID:	409289
Order Number:	Not reported
Regulatory Measure Type:	Construction
Place ID:	Not reported
WDID:	4 19C360120
Program Type:	Not reported
Adoption Date Of Regulatory Measure:	Not reported
Effective Date Of Regulatory Measure:	Not reported
Expiration Date Of Regulatory Measure:	Not reported
Termination Date Of Regulatory Measure:	09/17/2016
Discharge Name:	Not reported
Discharge Address:	Not reported
Discharge City:	Not reported
Discharge State:	Not reported
Discharge Zip:	Not reported
Received Date:	12/28/2010
Processed Date:	12/28/2010
Status:	Terminated
Status Date:	11/15/2016
Place Size:	1.51
Place Size Unit:	Acres
Contact:	H P CHOU
Contact Title:	OWNER
Contact Phone:	626-961-5811
Contact Phone Ext:	Not reported
Contact Email:	Sinocan@aol.com
Operator Name:	A AND P BUISNESS SERVICES LLC
Operator Address:	14240 DON JULIAN ROAD UNIT B
Operator City:	CITY OF INDUSTRY
Operator State:	California
Operator Zip:	91746
Operator Contact:	H P CHOU
Operator Contact Title:	OWNER
Operator Contact Phone:	626-961-5811
Operator Contact Phone Ext:	Not reported
Operator Contact Email:	Sinocan@aol.com
Operator Type:	Private Business
Developer:	A AND P BUISNESS SERVICES LLC
Developer Address:	14240 DON JULIAN ROAD UNIT B
Developer City:	CITY OF INDUSTRY
Developer State:	California
Developer Zip:	91746
Developer Contact:	H P CHOU
Developer Contact Title:	OWNER
Constype Linear Utility Ind:	N
Emergency Phone:	626-961-5811

TRACT 88205 (Continued) **S111216266**

Emergency Phone Ext:	Not reported
Constype Above Ground Ind:	Not reported
Constype Below Ground Ind:	Not reported
Constype Cable Line Ind:	Not reported
Constype Comm Line Ind:	Not reported
Constype Commertial Ind:	Y
Constype Electrical Line Ind:	Not reported
Constype Gas Line Ind:	Not reported
Constype Industrial Ind:	Not reported
Constype Other Description:	Not reported
Constype Other Ind:	Not reported
Constype Recons Ind:	Not reported
Constype Residential Ind:	Y
Constype Transport Ind:	Not reported
Constype Utility Description:	Not reported
Constype Utility Ind:	Not reported
Constype Water Sewer Ind:	Not reported
Dir Discharge Uswater Ind:	N
Receiving Water Name:	Not reported
Certifier:	Jason Huang
Certifier Title:	CIVIL ENGINEER
Certification Date:	17-JAN-14
Primary Sic:	Not reported
Secondary Sic:	Not reported
Tertiary Sic:	Not reported
NPDES Number:	CAS000002
Status:	Terminated
Agency Number:	0
Region:	4
Regulatory Measure ID:	409289
Order Number:	2009-0009-DWQ
Regulatory Measure Type:	Enrollee
Place ID:	Not reported
WDID:	4 19C360120
Program Type:	Construction
Adoption Date Of Regulatory Measure:	Not reported
Effective Date Of Regulatory Measure:	12/28/2010
Expiration Date Of Regulatory Measure:	Not reported
Termination Date Of Regulatory Measure:	09/17/2016
Discharge Name:	A AND P BUISNESS SERVICES LLC
Discharge Address:	14240 DON JULIAN ROAD UNIT B
Discharge City:	CITY OF INDUSTRY
Discharge State:	California
Discharge Zip:	91746
Received Date:	Not reported
Processed Date:	Not reported
Status:	Not reported
Status Date:	Not reported
Place Size:	Not reported
Place Size Unit:	Not reported
Contact:	Not reported
Contact Title:	Not reported
Contact Phone:	Not reported
Contact Phone Ext:	Not reported
Contact Email:	Not reported
Operator Name:	Not reported

TRACT 88205 (Continued) **S111216266**

Operator Address:	Not reported
Operator City:	Not reported
Operator State:	Not reported
Operator Zip:	Not reported
Operator Contact:	Not reported
Operator Contact Title:	Not reported
Operator Contact Phone:	Not reported
Operator Contact Phone Ext:	Not reported
Operator Contact Email:	Not reported
Operator Type:	Not reported
Developer:	Not reported
Developer Address:	Not reported
Developer City:	Not reported
Developer State:	Not reported
Developer Zip:	Not reported
Developer Contact:	Not reported
Developer Contact Title:	Not reported
Constype Linear Utility Ind:	Not reported
Emergency Phone:	Not reported
Emergency Phone Ext:	Not reported
Constype Above Ground Ind:	Not reported
Constype Below Ground Ind:	Not reported
Constype Cable Line Ind:	Not reported
Constype Comm Line Ind:	Not reported
Constype Commertial Ind:	Not reported
Constype Electrical Line Ind:	Not reported
Constype Gas Line Ind:	Not reported
Constype Industrial Ind:	Not reported
Constype Other Description:	Not reported
Constype Other Ind:	Not reported
Constype Recons Ind:	Not reported
Constype Residential Ind:	Not reported
Constype Transport Ind:	Not reported
Constype Utility Description:	Not reported
Constype Utility Ind:	Not reported
Constype Water Sewer Ind:	Not reported
Dir Discharge Uswater Ind:	Not reported
Receiving Water Name:	Not reported
Certifier:	Not reported
Certifier Title:	Not reported
Certification Date:	Not reported
Primary Sic:	Not reported
Secondary Sic:	Not reported
Tertiary Sic:	Not reported

Name:	SENIOR CONDOMINIUM & COMMERCIAL
Address:	780 FRANCESCA DR
City,State,Zip:	WALNUT, CA 91789
Facility Status:	Not reported
NPDES Number:	Not reported
Region:	Not reported
Agency Number:	Not reported
Regulatory Measure ID:	Not reported
Place ID:	Not reported
Order Number:	Not reported
WDID:	Not reported

TRACT 88205 (Continued) **S111216266**

Regulatory Measure Type:	Construction
Program Type:	Not reported
Adoption Date Of Regulatory Measure:	Not reported
Effective Date Of Regulatory Measure:	Not reported
Termination Date Of Regulatory Measure:	Not reported
Expiration Date Of Regulatory Measure:	Not reported
Discharge Address:	Not reported
Discharge Name:	Not reported
Discharge City:	Not reported
Discharge State:	Not reported
Discharge Zip:	Not reported
Status:	Returned
Status Date:	10/19/2010
Operator Name:	A&P Development LLC
Operator Address:	14240 Don Julian Rd #B
Operator City:	City of Industry
Operator State:	California
Operator Zip:	91746

Name:	TRACT 88205
Address:	780 FRANCESCA DRIVE
City,State,Zip:	WALNUT, CA 91789
Facility Status:	Active
NPDES Number:	CAS000002
Region:	4
Agency Number:	0
Regulatory Measure ID:	516138
Place ID:	Not reported
Order Number:	2009-0009-DWQ
WDID:	4 19C389834
Regulatory Measure Type:	Enrollee
Program Type:	Construction
Adoption Date Of Regulatory Measure:	Not reported
Effective Date Of Regulatory Measure:	03/24/2020
Termination Date Of Regulatory Measure:	Not reported
Expiration Date Of Regulatory Measure:	Not reported
Discharge Address:	18472 E Colima Rd Ste 222
Discharge Name:	Francesca Property LLC
Discharge City:	Rowland Heights
Discharge State:	California
Discharge Zip:	91748
Status:	Not reported
Status Date:	Not reported
Operator Name:	Not reported
Operator Address:	Not reported
Operator City:	Not reported
Operator State:	Not reported
Operator Zip:	Not reported

Name:	TRACT 88205
Address:	780 FRANCESCA DRIVE
City,State,Zip:	WALNUT, CA 91789
Facility Status:	Not reported
NPDES Number:	Not reported
Region:	Not reported
Agency Number:	Not reported
Regulatory Measure ID:	Not reported

TRACT 88205 (Continued) **S111216266**

Place ID:	Not reported
Order Number:	Not reported
WDID:	4 19C389834
Regulatory Measure Type:	Construction
Program Type:	Not reported
Adoption Date Of Regulatory Measure:	Not reported
Effective Date Of Regulatory Measure:	Not reported
Termination Date Of Regulatory Measure:	Not reported
Expiration Date Of Regulatory Measure:	Not reported
Discharge Address:	Not reported
Discharge Name:	Not reported
Discharge City:	Not reported
Discharge State:	Not reported
Discharge Zip:	Not reported
Status:	Active
Status Date:	03/24/2020
Operator Name:	Francesca Property LLC
Operator Address:	18472 E Colima Rd Ste 222
Operator City:	Rowland Heights
Operator State:	California
Operator Zip:	91748

CIWQS:

Name:	SENIOR CONDOMINIUM AND COMMERCIAL
Address:	780 FRANCESCA DRIVE
City,State,Zip:	WALNUT, CA 91789
Agency:	A AND P BUISNESS SERVICES LLC
Agency Address:	14240 DON JULIAN ROAD UNIT B, City Of Industry, CA 91746
Place/Project Type:	Construction - Commercial, Residential
SIC/NAICS:	Not reported
Region:	4
Program:	CONSTW
Regulatory Measure Status:	Terminated
Regulatory Measure Type:	Storm water construction
Order Number:	2009-0009-DWQ
WDID:	4 19C360120
NPDES Number:	CAS000002
Adoption Date:	Not reported
Effective Date:	12/28/2010
Termination Date:	09/17/2016
Expiration/Review Date:	Not reported
Design Flow:	Not reported
Major/Minor:	Not reported
Complexity:	Not reported
TTWQ:	Not reported
Enforcement Actions within 5 years:	0
Violations within 5 years:	0
Latitude:	34.02453
Longitude:	-117.89357

Name:	TRACT 88205
Address:	780 FRANCESCA DRIVE
City,State,Zip:	WALNUT, CA 91789
Agency:	Francesca Property LLC
Agency Address:	18472 E Colima Rd Ste 222, Rowland Heights , CA 91748
Place/Project Type:	Construction - Residential
SIC/NAICS:	Not reported

TRACT 88205 (Continued) **S111216266**

Region:	4
Program:	CONSTW
Regulatory Measure Status:	Active
Regulatory Measure Type:	Storm water construction
Order Number:	2009-0009-DWQ
WDID:	4 19C389834
NPDES Number:	CAS000002
Adoption Date:	Not reported
Effective Date:	03/24/2020
Termination Date:	Not reported
Expiration/Review Date:	Not reported
Design Flow:	Not reported
Major/Minor:	Not reported
Complexity:	Not reported
TTWQ:	Not reported
Enforcement Actions within 5 years:	0
Violations within 5 years:	0
Latitude:	34.02535
Longitude:	-117.892485

A74 **MANNYS AUTOMOTIVE SOLUTION** **HWTS** **S124919626**
Target **778 N NOGALES ST #A** **N/A**
Property **WALNUT, CA 91789**

Site 74 of 107 in cluster A

Actual:
588 ft.

HWTS:

Name:	MANNYS AUTOMOTIVE SOLUTION
Address:	778 N NOGALES ST #A
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000432374
Inactive Date:	Not reported
Create Date:	12/01/2017
Last Act Date:	08/27/2020
Mailing Name:	Not reported
Mailing Address:	778 N NOGALES ST #A
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	MANUEL PEREZ JR
Owner Address:	6011 BONHILL ST
Owner Address 2:	Not reported
Owner City,State,Zip:	JURAPA VALLEY, CA 92509
Contact Name:	MANUEL A PEREZ JR
Contact Address:	6011 BONHILL ST
Contact Address 2:	Not reported
City,State,Zip:	JURAPA VALLEY, CA 92509

NAICS:

EPA ID:	CAL000432374
Create Date:	2017-12-01 11:55:41.553
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2017-12-01 11:55:41.44000
Inactive Date:	Not reported
Facility Name:	MANNYS AUTOMOTIVE SOLUTION
Facility Address:	778 N NOGALES ST #A
Facility Address 2:	Not reported

MANNYS AUTOMOTIVE SOLUTION (Continued) **S124919626**

Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 91789

A75 **SUPER-TEK MOTORS** **FINDS** **1023316624**
Target **750 N NOGALES ST # D** **N/A**
Property **WALNUT, CA 91789**

Site 75 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110066098948

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A76 **TRI CITY AUTO REPAIR** **HWTS** **S124521814**
Target **750 N NOGALES UNIT F** **N/A**
Property **WALNUT, CA 91789**

Site 76 of 107 in cluster A

Actual: **588 ft.**

HWTS:
Name: TRI CITY AUTO REPAIR
Address: 750 N NOGALES UNIT F
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
EPA ID: CA0000348730
Inactive Date: 06/30/1997
Create Date: 12/08/1995
Last Act Date: 07/06/2010
Mailing Name: Not reported
Mailing Address: 750 NOGALES AVE STE F
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917894500
Owner Name: VAN HER ERIC VAN HER RONALD
Owner Address: 914 SEA BISCUIT CT
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 917890000
Contact Name: UNDELIVERABLE PER VQ97 AH
Contact Address: 914 SEA BISCUIT CT
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

A77
Target Property

H A T AUTO SERVICE
750 NOGALES AVE STE C
WALNUT, CA 91789

CERS HAZ WASTE
HWTS

S124626464
N/A

Site 77 of 107 in cluster A

Actual:
588 ft.

CERS HAZ WASTE:

Name:	RES AUTO CARE
Address:	750 NOGALES ST UNIT D
City,State,Zip:	WALNUT, CA 91789
Site ID:	563703
CERS ID:	10836133
CERS Description:	Hazardous Waste Generator

Affiliation:

Affiliation Type Desc:	Document Preparer
Entity Name:	Peter Chiang
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Legal Owner
Entity Name:	Jack Xu
Entity Title:	Not reported
Affiliation Address:	750 Nogales St Unit D
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 215-1596

Affiliation Type Desc:	Parent Corporation
Entity Name:	Res Auto Care
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Environmental Contact
Entity Name:	Peter Chiang
Entity Title:	Not reported
Affiliation Address:	750 Nogales St Unit D
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Operator
Entity Name:	Peter Chiang
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported

H A T AUTO SERVICE (Continued) **S124626464**

Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: (626) 905-0303

Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Identification Signer
Entity Name: Peter Chiang
Entity Title: OperationManager
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 750 Nogales St Unit D
Affiliation City: Walnut
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

HWTS:
Name: RES AUTO CARE
Address: 750 NOGALES ST UNIT D
Address 2: Not reported
City,State,Zip: WALNUT, CA 91789
EPA ID: CAL000452574
Inactive Date: Not reported
Create Date: 02/06/2020
Last Act Date: 07/25/2020
Mailing Name: Not reported
Mailing Address: 750 NOGALES ST UNIT D
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 91789
Owner Name: JACK XU
Owner Address: 19563 EMPTY SADDLE RD
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 91789
Contact Name: PETER CHIANG
Contact Address: 750 NOGALES ST UNIT D
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

H A T AUTO SERVICE (Continued) **S124626464**

NAICS:

EPA ID:	CAL000452574
Create Date:	2020-02-06 14:22:16.607
NAICS Code:	811111
NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2020-02-06 14:22:16.57300
Inactive Date:	Not reported
Facility Name:	RES AUTO CARE
Facility Address:	750 NOGALES ST UNIT D
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

Name:	H A T AUTO SERVICE
Address:	750 NOGALES AVE STE C
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894500
EPA ID:	CAC002771357
Inactive Date:	08/14/2014
Create Date:	05/15/2014
Last Act Date:	08/15/2014
Mailing Name:	Not reported
Mailing Address:	750 NOGALES AVE STE C
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894500
Owner Name:	HTAY NAING
Owner Address:	750 NOGALES AVE STE C
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894500
Contact Name:	HTAY NAING
Contact Address:	750 NOGALES AVE STE C
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894500

A78 **HAT AUTO SERVICE** **HAZNET** **S113106340**
Target **750 NOGALES AVE UNIT C** **HWTS** **N/A**
Property **WALNUT, CA 91789**

Site 78 of 107 in cluster A

Actual: **588 ft.**

HAZNET:

Name:	HAT AUTO SERVICE
Address:	750 NOGALES AVE UNIT C
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
Contact:	MAUNG GYI/OWNER
Telephone:	6268104444
Mailing Name:	Not reported
Mailing Address:	750 NOGALES AVE UNIT C

Year:	2001
Gepaid:	CAL000208853
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10

HAT AUTO SERVICE (Continued) **S113106340**

	percent
Disposal Method:	H01 - Transfer Station
Tons:	0.084
Year:	2000
Gepaid:	CAL000208853
TSD EPA ID:	CAT000613893
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.252

Additional Info:

Year:	2000
Gen EPA ID:	CAL000208853
Shipment Date:	20001205
Creation Date:	1/24/2001 0:00:00
Receipt Date:	20001205
Manifest ID:	20379947
Trans EPA ID:	SCR000075150
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20000620
Creation Date:	8/14/2000 0:00:00
Receipt Date:	20000622
Manifest ID:	20016709
Trans EPA ID:	SCR000075150
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084

HAT AUTO SERVICE (Continued) **S113106340**

Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20000329
Creation Date:	5/17/2000 0:00:00
Receipt Date:	20000329
Manifest ID:	99846982
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2001
Gen EPA ID:	CAL000208853
Shipment Date:	20010227
Creation Date:	4/30/2001 0:00:00
Receipt Date:	20010227
Manifest ID:	20366652
Trans EPA ID:	SCR000075150
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.084
Waste Quantity:	20
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported

HAT AUTO SERVICE (Continued) **S113106340**

Additional Code 4: Not reported
Additional Code 5: Not reported

HWTS:
Name: HAT AUTO SERVICE
Address: 750 NOGALES AVE UNIT C
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
EPA ID: CAL000208853
Inactive Date: 06/30/2008
Create Date: 07/27/1999
Last Act Date: 04/23/2009
Mailing Name: Not reported
Mailing Address: 750 NOGALES AVE UNIT C
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 917890000
Owner Name: MAUNG GYI & KHIN MAW
Owner Address: 750 NOGALES AVE UNIT C
Owner Address 2: Not reported
Owner City,State,Zip: WALNUT, CA 917890000
Contact Name: MAUNG GYI/OWNER
Contact Address: 750 NOGALES AVE UNIT C
Contact Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000

NAICS:
EPA ID: CAL000208853
Create Date: 2002-12-03 15:25:10.000
NAICS Code: 811111
NAICS Description: General Automotive Repair
Issued EPA ID Date: 1999-07-27 00:00:00
Inactive Date: 2008-06-30 00:00:00
Facility Name: HAT AUTO SERVICE
Facility Address: 750 NOGALES AVE UNIT C
Facility Address 2: Not reported
Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 917890000

A79 **ALAMO CAR WASH** **ECHO** **1026212806**
Target **784 NO NOGALES** **N/A**
Property **WALNUT, CA 91789**

Site 79 of 107 in cluster A

Actual:
588 ft.

ECHO:
Envid: 1026212806
Registry ID: 110070798498
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110070798498
Name: ALAMO CAR WASH
Address: 784 NO NOGALES
City,State,Zip: WALNUT, CA 91789

A80
Target Property
H A T AUTO SERVICE
750 N NOGALES ST # C
WALNUT, CA 91789

FINDS **1023363631**
N/A

Site 80 of 107 in cluster A

Actual:
588 ft.

FINDS:
Registry ID: 110066609968

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A81
Target Property
EUROJUNKYS INC
762 NOGALES AVE STE C
WALNUT, CA 91789

CERS HAZ WASTE **S104295104**
LOS ANGELES CO. HMS **N/A**
CERS

Site 81 of 107 in cluster A

Actual:
588 ft.

CERS HAZ WASTE:
Name: EUROJUNKYS INC
Address: 762 NOGALES AVE STE C
City,State,Zip: WALNUT, CA 91789
Site ID: 571165
CERS ID: 10862011
CERS Description: Hazardous Waste Generator

Name: CHEVRON ON THE RUN
Address: 762 NOGALES ST. STE A
City,State,Zip: WALNUT, CA 91789
Site ID: 104815
CERS ID: 10292686
CERS Description: Hazardous Waste Generator

LOS ANGELES CO. HMS:
Name: ALAMO AUTO CENTER
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: I
Facility Id: 008290-I08843
Facility Type: 02
Facility Status: Permit
Area: 6L
Permit Number: 000011105
Permit Status: Closed

Name: ALAMO AUTO CENTER
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: I
Facility Id: 008290-I08843
Facility Type: 02
Facility Status: Permit
Area: 6L
Permit Number: 00011106C

EUROJUNKYS INC (Continued) **S104295104**

Permit Status: Permit

Name: ALAMO AUTO CENTER
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: I
Facility Id: 008290-I08843
Facility Type: 02
Facility Status: Permit
Area: 6L
Permit Number: 000012603
Permit Status: Closed

Name: ALAMO AUTO CENTER
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: I
Facility Id: 008290-I08843
Facility Type: 02
Facility Status: Permit
Area: 6L
Permit Number: 000021397
Permit Status: Permit

Name: NOGALES AUTO CENTER
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: Not reported
Facility Id: 008290-008843
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

Name: PRO CARWORKS
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: Not reported
Facility Id: 008290-029836
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

Name: CHEVRON (NOT UST) UNIT A
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: Not reported
Facility Id: 008290-060544
Facility Type: Not reported

EUROJUNKYS INC (Continued) **S104295104**

Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

CERS:
Name: CHEVRON ON THE RUN
Address: 762 NOGALES ST. STE A
City,State,Zip: WALNUT, CA 91789
Site ID: 104815
CERS ID: 10292686
CERS Description: Chemical Storage Facilities

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY JOAQUIN VEGA
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 03-04-2014
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 04-14-2021
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Laniza, Manager Signature not obtained per COVID-19 protocol
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-07-2015
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Lanuza
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 12-15-2018
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Laniza, Manager
Eval Division: Los Angeles County Fire Department
Eval Program: HW

EUROJUNKYS INC (Continued) **S104295104**

Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 04-14-2021
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Laniza, Manager Signature not obtained per COVID-19 protocol
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 12-15-2018
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Laniza, Manager
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 05-07-2015
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Ligia Lanuza
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 01-08-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: INSPECTED BY A. LUI CONSENT GIVEN BY JOAQUIN VEGA
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Affiliation:
Affiliation Type Desc: Environmental Contact
Entity Name: LIGIA LANIZA
Entity Title: Not reported
Affiliation Address: 762 Nogales St. Ste A
Affiliation City: Walnut
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

EUROJUNKYS INC (Continued) **S104295104**

Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	762 Nogales St. Ste A
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported

Affiliation Type Desc:	Operator
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 965-3714

Affiliation Type Desc:	Document Preparer
Entity Name:	Karen McKabney
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Identification Signer
Entity Name:	DAN GERSTNER
Entity Title:	OWNER
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000

Affiliation Type Desc:	Legal Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	762 Nogales St. Ste A
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	United States

EUROJUNKYS INC (Continued) **S104295104**

Affiliation Zip:	91789
Affiliation Phone:	(626) 965-3714
Affiliation Type Desc:	Parent Corporation
Entity Name:	CHEVRON (ON THE RUN)
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Property Owner
Entity Name:	DAN GERSTNER
Entity Title:	Not reported
Affiliation Address:	762 Nogales St. Ste A
Affiliation City:	Walnut
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(818) 726-5106

A82 **H A T AUTO SERVICE** **RCRA NonGen / NLR** **1025873774**
Target **750 NOGALES ST #C** **CAL000446901**
Property **WALNUT, CA 91789**

Site 82 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20190625
Handler Name:	H A T AUTO SERVICE	
Handler Address:		750 NOGALES ST #C
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAL000446901
Contact Name:		HTAY NAING
Contact Address:		13134 BRETON AVE
Contact City,State,Zip:		CHICO, CA 91710
Contact Telephone:		626-634-5012
Contact Fax:		Not reported
Contact Email:		NAINGAUTO@YAHOO.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		13134 BRETON AVE
Mailing City,State,Zip:		CHICO, CA 91710
Owner Name:		HTAY NAING
Owner Type:		Other
Operator Name:		HTAY NAING
Operator Type:		Other

H A T AUTO SERVICE (Continued) **1025873774**

Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20190729
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

H A T AUTO SERVICE (Continued) **1025873774**

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	HTAY NAING
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	13134 BRETON AVE
Owner/Operator City,State,Zip:	CHICO, CA 91710
Owner/Operator Telephone:	626-634-5012
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	HTAY NAING
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	13134 BRETON AVE
Owner/Operator City,State,Zip:	CHICO, CA 91710
Owner/Operator Telephone:	626-634-5012
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20190625
Handler Name: H A T AUTO SERVICE	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

A83
Target
Property

PRO CARWORKS INC
762 N NOGALES ST # D
WALNUT, CA 91789

FINDS **1023357423**
N/A

Site 83 of 107 in cluster A

Actual:
588 ft.

FINDS:
Registry ID: 110066543039

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A84
Target
Property

1X NOGALES CAR WASH
784 NO NOGALES
WALNUT, CA 91789

HAZNET **S123739979**
HWTS **N/A**

Site 84 of 107 in cluster A

Actual:
588 ft.

HAZNET:

Name:	1X NOGALES CAR WASH
Address:	784 NO NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
Contact:	SHERMAN IVARA/MANAGER
Telephone:	8189657922
Mailing Name:	Not reported
Mailing Address:	--
Year:	1991
Gepaid:	CAC000633648
TSD EPA ID:	CAT080013352
CA Waste Code:	241 - Tank bottom waste
Disposal Method:	R01 - Recycler
Tons:	1.251

HWTS:

Name:	1X NOGALES CAR WASH
Address:	784 NO NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAC000633648
Inactive Date:	10/25/2000
Create Date:	08/29/1991
Last Act Date:	10/25/2000
Mailing Name:	Not reported
Mailing Address:	--
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	DON GERSTNER
Owner Address:	--
Owner Address 2:	Not reported
Owner City,State,Zip:	--, 99 --
Contact Name:	SHERMAN IVARA/MANAGER
Contact Address:	--
Contact Address 2:	Not reported

1X NOGALES CAR WASH (Continued) **S123739979**

City,State,Zip: --, 99 --

A85 **ALAMO CAR WASH** **UST** **U004265474**
Target **784 N NOGALES ST # A** **N/A**
Property **WALNUT, CA 91789**

Site 85 of 107 in cluster A

Actual: **588 ft.**

UST:

Name:	ALAMO CAR WASH
Address:	784 N NOGALES ST # A
City,State,Zip:	WALNUT, CA 91789
Facility ID:	LACoFA0018716
Permitting Agency:	Los Angeles County Fire Department
CERSID:	10309846
Latitude:	34.02459
Longitude:	-117.89413

A86 **CHEVRON CORPORATION** **EDR Hist Auto** **1020651874**
Target **762 NOGALES AVE STE A** **N/A**
Property **WALNUT, CA 91789**

Site 86 of 107 in cluster A

Actual: **588 ft.**

EDR Hist Auto

Year:	Name:	Type:
1994	PRO & NEAT AUTO	General Automotive Repair Shops
1995	PRO & NEAT AUTO	General Automotive Repair Shops
1996	PRO CARWORKS INC	General Automotive Repair Shops
1996	PRO & NEAT AUTO	General Automotive Repair Shops
1997	PRO CARWORKS INC	General Automotive Repair Shops
1997	PRO & NEAT AUTO	General Automotive Repair Shops
1998	PRO & NEAT AUTO	General Automotive Repair Shops
1998	PRO CARWORKS INC	General Automotive Repair Shops
1999	PRO & NEAT AUTO	General Automotive Repair Shops
1999	PRO CARWORKS INC	General Automotive Repair Shops
2000	PRO CARWORKS INC	General Automotive Repair Shops
2009	PRO CARWORKS INC	General Automotive Repair Shops
2010	SINGHS POWER AUTO CENTER	General Automotive Repair Shops
2010	PRO CARWORKS INC	General Automotive Repair Shops
2011	SINGHS POWER AUTO CENTER	General Automotive Repair Shops
2011	PRO CARWORKS INC	General Automotive Repair Shops
2012	CHEVRON CORPORATION	Gasoline Service Stations, NEC
2012	PRO CARWORKS INC	General Automotive Repair Shops
2013	CHEVRON CORPORATION	Gasoline Service Stations, NEC
2013	PRO CARWORKS INC	General Automotive Repair Shops
2014	PRO CARWORKS INC	General Automotive Repair Shops
2014	CHEVRON CORPORATION	Gasoline Service Stations, NEC
2014	GERSTNERS JANE	Gasoline Service Stations

A87 **DAYTONA AUTO REPAIR** **FINDS** **1023252025**
Target **778 N NOGALES ST # B** **ECHO** **N/A**
Property **WALNUT, CA 91789**

Site 87 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110065407606

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1023252025
Registry ID:	110065407606
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110065407606
Name:	DAYTONA AUTO REPAIR
Address:	778 N NOGALES ST # B
City,State,Zip:	WALNUT, CA 91789

A88 **RAM AUTO REPAIR** **RCRA NonGen / NLR** **1024794273**
Target **778 NOGALES AVE #C** **CAL000147223**
Property **WALNUT, CA 91789**

Site 88 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		19980512
Handler Name:	RAM AUTO REPAIR	
Handler Address:		778 NOGALES AVE #C
Handler City,State,Zip:		WALNUT, CA 91789-0000
EPA ID:		CAL000147223
Contact Name:		RENEE MADRIGAL OWNER
Contact Address:		778 NOGALES AVE #C
Contact City,State,Zip:		WALNUT, CA 91789-0000
Contact Telephone:		626-964-6981
Contact Fax:		Not reported
Contact Email:		MONKEYDE@AOL.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		778 NOGALES AVE #C
Mailing City,State,Zip:		WALNUT, CA 91789-0000

RAM AUTO REPAIR (Continued) **1024794273**

Owner Name:	RENEE MADRIGAL
Owner Type:	Other
Operator Name:	RENEE MADRIGAL OWNER
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180905
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No

RAM AUTO REPAIR (Continued) **1024794273**

Manifest Broker: No
Sub-Part P Indicator: No

Handler - Owner Operator:
Owner/Operator Indicator: Owner
Owner/Operator Name: RENEE MADRIGAL
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 778 NOGALES AVE #C
Owner/Operator City,State,Zip: WALNUT, CA 91789-0000
Owner/Operator Telephone: 626-964-6981
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Owner/Operator Indicator: Operator
Owner/Operator Name: RENEE MADRIGAL OWNER
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 778 NOGALES AVE #C
Owner/Operator City,State,Zip: WALNUT, CA 91789-0000
Owner/Operator Telephone: 626-964-6981
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 19980512
Handler Name: RAM AUTO REPAIR
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 811111
NAICS Description: GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A89 **FREY ENVIRONMENTAL INC** **LOS ANGELES CO. HMS** **S113743563**
Target **762 NOGALES AVE** **N/A**
Property **WALNUT, CA 91789**

Site 89 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: FREY ENVIRONMENTAL INC
Address: 762 NOGALES AVE
City,State,Zip: WALNUT, CA 917894532
Region: LA
Permit Category: I
Facility Id: 008290-057839
Facility Type: 02
Facility Status: Closed
Area: 6L
Permit Number: 000021268
Permit Status: Closed

A90 **SCOTT KETCHUM** **LOS ANGELES CO. HMS** **S106668804**
Target **780 S NOGALES ST** **N/A**
Property **CITY OF INDUSTRY, CA 91789**

Site 90 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:
Name: SCOTT KETCHUM
Address: 780 S NOGALES ST
City,State,Zip: CITY OF INDUSTRY, CA 91789
Region: LA
Permit Category: T
Facility Id: 015360-025519
Facility Type: 1
Facility Status: Removed
Area: 6H
Permit Number: 000209255
Permit Status: Removed

A91 **AUTO CARE 101** **RCRA NonGen / NLR** **1024814730**
Target **750 N NOGALES ST STE E** **CAL000310216**
Property **WALNUT, CA 91789**

Site 91 of 107 in cluster A

Actual: **588 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20060810
Handler Name:	AUTO CARE 101	
Handler Address:		750 N NOGALES ST STE E
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAL000310216
Contact Name:		RICHARD YAP
Contact Address:		750 N NOGALES ST STE E
Contact City,State,Zip:		WALNUT, CA 91789-0000
Contact Telephone:		626-810-3252
Contact Fax:		Not reported
Contact Email:		Not reported
Contact Title:		Not reported
EPA Region:		09

AUTO CARE 101 (Continued) **1024814730**

Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	750 N NOGALES ST STE E
Mailing City,State,Zip:	WALNUT, CA 91789-0000
Owner Name:	RICHARD YAP
Owner Type:	Other
Operator Name:	RICHARD YAP
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No

AUTO CARE 101 (Continued) **1024814730**

Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180905
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	RICHARD YAP
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	750 N NOGALES ST STE E
Owner/Operator City,State,Zip:	WALNUT, CA 91789-0000
Owner/Operator Telephone:	626-810-3252
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	RICHARD YAP
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	750 N NOGALES ST STE E
Owner/Operator City,State,Zip:	WALNUT, CA 91789-0000
Owner/Operator Telephone:	626-810-3252
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20060810
Handler Name: AUTO CARE 101	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

AUTO CARE 101 (Continued) **1024814730**

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A92 **ALAMO CAR WASH** **UST** **U004049185**
Target **784 NOGALES AVE STE A** **N/A**
Property **WALNUT, CA 91789**

Site 92 of 107 in cluster A

Actual: **588 ft.**

UST:
Name: ALAMO CAR WASH
Address: 784 NOGALES AVE STE A
City,State,Zip: WALNUT, CA 91789
Facility ID: 15014
Permitting Agency: LOS ANGELES COUNTY
CERSID: Not reported
Latitude: 34.0263668
Longitude: -117.8923046

A93 **CHEVRON ON THE RUN** **UST** **U004292180**
Target **762 NOGALES ST. STE A** **N/A**
Property **WALNUT, CA 91789**

Site 93 of 107 in cluster A

Actual: **588 ft.**

UST:
Name: CHEVRON ON THE RUN
Address: 762 NOGALES ST. STE A
City,State,Zip: WALNUT, CA 91789
Facility ID: LACoFA0018734
Permitting Agency: Los Angeles County Fire Department
CERSID: 10292686
Latitude: 34.02426
Longitude: -117.8938

A94 **ALAMO CAR WASH** **FINDS** **1026441449**
Target **784 NO NOGALES** **N/A**
Property **WALNUT, CA 91789**

Site 94 of 107 in cluster A

Actual: **588 ft.**

FINDS:
Registry ID: 110070798498

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport,

ALAMO CAR WASH (Continued) **1026441449**

and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A95 **FANCY CUTS** **LOS ANGELES CO. HMS** **S108997767**
Target **778 NOGALES AVE #D** **N/A**
Property **WALNUT, CA 91789**

Site 95 of 107 in cluster A

Actual: **588 ft.**

LOS ANGELES CO. HMS:

Name:	FANCY CUTS
Address:	778 NOGALES AVE #D
City,State,Zip:	WALNUT, CA 91789
Region:	LA
Permit Category:	Not reported
Facility Id:	021090-029861
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L
Permit Number:	Not reported
Permit Status:	Not reported

A96 **EUROJUNKYS INC** **HAZNET** **S113058821**
Target **762 N NOGALES ST** **HWTS** **N/A**
Property **WALNUT, CA 91789**

Site 96 of 107 in cluster A

Actual: **588 ft.**

HAZNET:

Name:	MOBIL EXPRESS LUBE
Address:	762 N NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
Contact:	JOAQUIM VEGA
Telephone:	6269656032
Mailing Name:	Not reported
Mailing Address:	762 N NOGALES ST #B
Year:	2013
Gepaid:	CAL000097443
TSD EPA ID:	AZR000509950
CA Waste Code:	221 - Waste oil and mixed oil
Disposal Method:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons:	3.42
Year:	2012
Gepaid:	CAL000097443
TSD EPA ID:	AZR000509950
CA Waste Code:	221 - Waste oil and mixed oil
Disposal Method:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons:	1.463

EUROJUNKYS INC (Continued) **S113058821**

Year: 2007
Gepaid: CAL000097443
TSD EPA ID: CAD099452708
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 5.396

Year: 2007
Gepaid: CAL000097443
TSD EPA ID: CAT080013352
CA Waste Code: 241 - Tank bottom waste
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 2.15172

Year: 2007
Gepaid: CAL000097443
TSD EPA ID: CAT080013352
CA Waste Code: 134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 0.504

Year: 1997
Gepaid: CAL000097443
TSD EPA ID: CAL000113451
CA Waste Code: 343 - Unspecified organic liquid mixture
Disposal Method: H01 - Transfer Station
Tons: 2.839

Year: 1996
Gepaid: CAL000097443
TSD EPA ID: CAL000113451
CA Waste Code: 343 - Unspecified organic liquid mixture
Disposal Method: H01 - Transfer Station
Tons: 4.454

Year: 1995
Gepaid: CAL000097443
TSD EPA ID: CAL000113451
CA Waste Code: 343 - Unspecified organic liquid mixture
Disposal Method: H01 - Transfer Station
Tons: 1.02

Additional Info:
Year: 1995
Gen EPA ID: CAL000097443

Shipment Date: 19951221
Creation Date: 7/26/1996 0:00:00
Receipt Date: 19951221
Manifest ID: 95322229
Trans EPA ID: CAD981694664
Trans Name: Not reported

EUROJUNKYS INC (Continued) **S113058821**

Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.34
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19951018
Creation Date:	7/26/1996 0:00:00
Receipt Date:	19951019
Manifest ID:	95321555
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.408
Waste Quantity:	120
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19950824
Creation Date:	4/3/1996 0:00:00
Receipt Date:	19950825
Manifest ID:	95320411
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station

EUROJUNKYS INC (Continued) **S113058821**

Quantity Tons:	0.102
Waste Quantity:	30
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19950803
Creation Date:	4/1/1996 0:00:00
Receipt Date:	19950804
Manifest ID:	95312858
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.17
Waste Quantity:	50
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1997
Gen EPA ID:	CAL000097443
Shipment Date:	19970702
Creation Date:	12/4/1997 0:00:00
Receipt Date:	19970703
Manifest ID:	96748178
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.34
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970620
Creation Date:	12/4/1997 0:00:00
Receipt Date:	19970620
Manifest ID:	96748050
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.357
Waste Quantity:	105
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970603
Creation Date:	12/4/1997 0:00:00
Receipt Date:	19970604
Manifest ID:	96744418
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.272
Waste Quantity:	80
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970519
Creation Date:	7/17/1997 0:00:00
Receipt Date:	19970520
Manifest ID:	96747612
Trans EPA ID:	CAD981694664

EUROJUNKYS INC (Continued) **S113058821**

Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.306
Waste Quantity:	90
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19970429
Creation Date:	6/26/1997 0:00:00
Receipt Date:	19970429
Manifest ID:	96747432
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.17
Waste Quantity:	50
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19970411
Creation Date:	6/26/1997 0:00:00
Receipt Date:	19970414
Manifest ID:	96747239
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Meth Code:	H01 - Transfer Station
Quantity Tons:	0.221
Waste Quantity:	65
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970325
Creation Date:	6/26/1997 0:00:00
Receipt Date:	19970326
Manifest ID:	96746662
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.255
Waste Quantity:	75
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970311
Creation Date:	6/26/1997 0:00:00
Receipt Date:	19970312
Manifest ID:	96746505
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.187
Waste Quantity:	55
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Shipment Date:	19970225
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19970225
Manifest ID:	96744744
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.204
Waste Quantity:	60
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19970211
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19970212
Manifest ID:	96744594
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.204
Waste Quantity:	60
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2007
Gen EPA ID:	CAL000097443

Shipment Date:	20071022
Creation Date:	1/8/2008 18:31:12
Receipt Date:	20071023
Manifest ID:	000765694FLE
Trans EPA ID:	CAT080016116

EUROJUNKYS INC (Continued) **S113058821**

Trans Name:	NIETO AND SONS TRUCKING INC
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT080013352
Trans Name:	DEMENNO KERDOON
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	241 - Tank bottom waste 251 Still bottoms with halogenated organics
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	2.15172
Waste Quantity:	516
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20070724
Creation Date:	12/28/2007 18:31:22
Receipt Date:	20070727
Manifest ID:	003318555JJK
Trans EPA ID:	CAR000152785
Trans Name:	CALIFORNIA HAZARDOUS SERVICES
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT080013352
Trans Name:	DEMENNO KERDOON
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D001
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.504
Waste Quantity:	120
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20070504
Creation Date:	9/24/2007 18:30:06
Receipt Date:	20070504
Manifest ID:	000268808GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	INDSTRIAL SERVICE OIL COMPANY
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	3.8
Waste Quantity:	1000
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20070406
Creation Date:	8/23/2007 18:30:34
Receipt Date:	20070409
Manifest ID:	000268598GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	INDSTRIAL SERVICE OIL COMPANY
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	1.596
Waste Quantity:	420
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2012
Gen EPA ID:	CAL000097443
Shipment Date:	20121012
Creation Date:	5/21/2013 22:15:06
Receipt Date:	20121018
Manifest ID:	001923241GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY, LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY, LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid

EUROJUNKYS INC (Continued) **S113058821**

	Regeneration, Organics Recovery Ect
Quantity Tons:	0.95
Waste Quantity:	250
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20120929
Creation Date:	5/4/2013 22:15:12
Receipt Date:	20121004
Manifest ID:	001923013GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.513
Waste Quantity:	135
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1996
Gen EPA ID:	CAL000097443
Shipment Date:	19961223
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19961223
Manifest ID:	96280479
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.17
Waste Quantity:	50
Quantity Unit:	G

EUROJUNKYS INC (Continued) **S113058821**

Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19961209
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961210
Manifest ID:	96279507
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.306
Waste Quantity:	90
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19961112
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961112
Manifest ID:	96279230
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.357
Waste Quantity:	105
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19961007
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961007

EUROJUNKYS INC (Continued) **S113058821**

Manifest ID:	96278672
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.459
Waste Quantity:	135
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19960904
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960904
Manifest ID:	96278440
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.34
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19960820
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960820
Manifest ID:	96273090
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.34
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960806
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19960808
Manifest ID:	93407935
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.255
Waste Quantity:	75
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960726
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19960729
Manifest ID:	93407947
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.408
Waste Quantity:	120
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported

EUROJUNKYS INC (Continued) **S113058821**

Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960712
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960712
Manifest ID:	96275673
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.408
Waste Quantity:	120
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960614
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960614
Manifest ID:	95798956
Trans EPA ID:	CAD981694664
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAL000113451
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.255
Waste Quantity:	75
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2013
Gen EPA ID:	CAL000097443
Shipment Date:	20131115
Creation Date:	1/28/2014 22:15:25

EUROJUNKYS INC (Continued) **S113058821**

Receipt Date:	20131120
Manifest ID:	002230906GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	1.14
Waste Quantity:	300
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	20131108
Creation Date:	1/28/2014 22:15:25
Receipt Date:	20131113
Manifest ID:	002230191GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	1.14
Waste Quantity:	300
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	20130104
Creation Date:	7/17/2013 22:15:13
Receipt Date:	20130108
Manifest ID:	001980090GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950

EUROJUNKYS INC (Continued) **S113058821**

Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	1.14
Waste Quantity:	300
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

HWTS:

Name:	MOBIL EXPRESS LUBE
Address:	762 N NOGALES ST
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000097443
Inactive Date:	06/30/2017
Create Date:	12/21/1992
Last Act Date:	02/27/2019
Mailing Name:	Not reported
Mailing Address:	762 N NOGALES ST
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917890000
Owner Name:	DAN GERSTNER
Owner Address:	784 N NOGALES ST
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917894532
Contact Name:	JOAQUIN VEGA
Contact Address:	762 N NOGALES ST
Contact Address 2:	265
City,State,Zip:	WALNUT, CA 91789

NAICS:

EPA ID:	CAL000097443
Create Date:	2014-06-04 08:24:59.350
NAICS Code:	811191
NAICS Description:	Automotive Oil Change and Lubrication Shops
Issued EPA ID Date:	1992-12-21 00:00:00
Inactive Date:	2017-06-30 00:00:00
Facility Name:	MOBIL EXPRESS LUBE
Facility Address:	762 N NOGALES ST
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917890000

EPA ID:	CAL000097443
Create Date:	2004-10-20 10:23:57.043
NAICS Code:	811198
NAICS Description:	All Other Automotive Repair and Maintenance

EUROJUNKYS INC (Continued) **S113058821**

Issued EPA ID Date:	1992-12-21 00:00:00
Inactive Date:	2017-06-30 00:00:00
Facility Name:	MOBIL EXPRESS LUBE
Facility Address:	762 N NOGALES ST
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917890000

Name:	EUROJUNKYS INC
Address:	762 N NOGALES ST
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000456817
Inactive Date:	Not reported
Create Date:	09/17/2020
Last Act Date:	09/17/2020
Mailing Name:	Not reported
Mailing Address:	762 N NOGALES ST
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	EUROJUNKYS INC
Owner Address:	110 N ROCK RIVER DR
Owner Address 2:	Not reported
Owner City,State,Zip:	DIAMOND BAR, CA 91765
Contact Name:	PETE VIZCARRONDO
Contact Address:	110 N ROCK RIVER DR
Contact Address 2:	Not reported
City,State,Zip:	DIAMOND BAR, CA 91765

NAICS:

EPA ID:	CAL000456817
Create Date:	2020-09-17 12:24:02.713
NAICS Code:	999999
NAICS Description:	Not Otherwise Specified
Issued EPA ID Date:	2020-09-17 12:24:02.71300
Inactive Date:	Not reported
Facility Name:	EUROJUNKYS INC
Facility Address:	762 N NOGALES ST
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A97 **ALAMO CAR WASH** **RCRA NonGen / NLR** **1026170482**
Target **784 NO NOGALES** **CAL000454043**
Property **WALNUT, CA 91789**

Site 97 of 107 in cluster A

Actual:
588 ft.

RCRA NonGen / NLR:

Date Form Received by Agency:		20200402
Handler Name:	ALAMO CAR WASH	
Handler Address:		784 NO NOGALES

ALAMO CAR WASH (Continued) **1026170482**

Handler City,State,Zip:	WALNUT, CA 91789-0000
EPA ID:	CAL000454043
Contact Name:	DAN GERSTNER
Contact Address:	784 NO NOGALES
Contact City,State,Zip:	WALNUT, CA 91789-0000
Contact Telephone:	626-483-7584
Contact Fax:	Not reported
Contact Email:	TMANSOURENV@GMAIL.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	784 NO NOGALES
Mailing City,State,Zip:	WALNUT, CA 91789-0000
Owner Name:	GERSTNER DAN
Owner Type:	Other
Operator Name:	DAN GERSTNER
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No

ALAMO CAR WASH (Continued) **1026170482**

TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200408
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	GERSTNER DAN
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	784 NO NOGALES
Owner/Operator City,State,Zip:	WALNUT, CA 91789-0000
Owner/Operator Telephone:	626-483-7584
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	DAN GERSTNER
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	784 NO NOGALES
Owner/Operator City,State,Zip:	WALNUT, CA 91789-0000
Owner/Operator Telephone:	626-483-7584
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20200402
Handler Name: ALAMO CAR WASH	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No

ALAMO CAR WASH (Continued) **1026170482**

Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 454390
NAICS Description: OTHER DIRECT SELLING ESTABLISHMENTS

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A98 Target Property **PREVENTION AUTO CARE** **FINDS** **1023293750**
750 N NOGALES ST # F **N/A**
WALNUT, CA 91789

Site 98 of 107 in cluster A

Actual: 588 ft.

FINDS:
Registry ID: 110065853909

Click Here:

Environmental Interest/Information System:
STATE MASTER

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A99 Target Property **PRO CARWORKS INC** **HWTS** **S124916935**
762 N NOGALES ST STE D **N/A**
WALNUT, CA 91789

Site 99 of 107 in cluster A

Actual: 588 ft.

HWTS:
Name: PRO CARWORKS INC
Address: 762 N NOGALES ST STE D
Address 2: Not reported
City,State,Zip: WALNUT, CA 91789
EPA ID: CAL000428810
Inactive Date: 06/30/2017
Create Date: 06/29/2017
Last Act Date: 06/29/2017
Mailing Name: Not reported
Mailing Address: 762 N NOGALES ST STE D
Mailing Address 2: Not reported
Mailing City,State,Zip: WALNUT, CA 91789
Owner Name: MILAD BAAKLINI
Owner Address: 2485 DIAMOND DR

PRO CARWORKS INC (Continued) **S124916935**

Owner Address 2: Not reported
Owner City,State,Zip: CHINO HILLS, CA 91709
Contact Name: MILAD BAAKLINI
Contact Address: 2485 DIAMOND DR
Contact Address 2: Not reported
City,State,Zip: CHINO HILLS, CA 91709

NAICS:
EPA ID: CAL000428810
Create Date: 2017-06-29 14:10:10.420
NAICS Code: 811111
NAICS Description: General Automotive Repair
Issued EPA ID Date: 2017-06-29 14:10:10.37700
Inactive Date: 2017-06-30 00:00:00
Facility Name: PRO CARWORKS INC
Facility Address: 762 N NOGALES ST STE D
Facility Address 2: Not reported
Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 91789

A100 Target Property **AUTOCARE 101** **LOS ANGELES CO. HMS** **S108997351**
750 NOGALES AVE #E **N/A**
WALNUT, CA 91789

Site 100 of 107 in cluster A

Actual: 588 ft.

LOS ANGELES CO. HMS:
Name: AUTOCARE 101
Address: 750 NOGALES AVE #E
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021074-029825
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

A101 Target Property **RES AUTO CARE** **FINDS** **1026416017**
750 NOGALES ST UNIT D **N/A**
WALNUT, CA 91789

Site 101 of 107 in cluster A

Actual: 588 ft.

FINDS:
Registry ID: 110070729692

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport,

RES AUTO CARE (Continued) **1026416017**

and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

A102 Target Property **MANNYS AUTOMOTIVE SOLUTION**
778 N NOGALES ST #A
WALNUT, CA 91789

RCRA NonGen / NLR **1024863824**
CAL000432374

Site 102 of 107 in cluster A

Actual: 588 ft.

RCRA NonGen / NLR:

Date Form Received by Agency:	20171201
Handler Name:	MANNYS AUTOMOTIVE SOLUTION
Handler Address:	778 N NOGALES ST #A
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000432374
Contact Name:	MANUEL A PEREZ JR
Contact Address:	6011 BONHILL ST
Contact City,State,Zip:	JURAPA VALLEY, CA 92509
Contact Telephone:	626-705-6158
Contact Fax:	Not reported
Contact Email:	MAS.AUTOSOLUTION@YAHOO.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	778 N NOGALES ST #A
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	MANUEL PEREZ JR
Owner Type:	Other
Operator Name:	MANUEL A PEREZ JR
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported

MANNYS AUTOMOTIVE SOLUTION (Continued) **1024863824**

Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180907
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	MANUEL PEREZ JR
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	6011 BONHILL ST
Owner/Operator City,State,Zip:	JURAPA VALLEY, CA 92509
Owner/Operator Telephone:	626-705-6158
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	MANUEL A PEREZ JR
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported

MANNYS AUTOMOTIVE SOLUTION (Continued) **1024863824**

Owner/Operator Address: 6011 BONHILL ST
Owner/Operator City,State,Zip: JURAPA VALLEY, CA 92509
Owner/Operator Telephone: 626-705-6158
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 20171201
Handler Name: MANNYS AUTOMOTIVE SOLUTION
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 811111
NAICS Description: GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

A103 **TEXACO REFINING AND MARKETING INC** **HAZNET** **S113041020**
Target **784 N NOGALES** **HWTS** **N/A**
Property **WALNUT, CA 91789**

Site 103 of 107 in cluster A

Actual: **588 ft.**

HAZNET:
Name: TEXACO REFINING AND MARKETING INC
Address: 784 N NOGALES
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
Contact: ED DINKFELD-DEACT V96/97 -PH
Telephone: 8185052802
Mailing Name: Not reported
Mailing Address: 10 UNIVERSAL CITY PLAZA 7TH FLOOR

Year: 1993
Gepaid: CAL000047441
TSD EPA ID: CAD028409019
CA Waste Code: 134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method: T01 - Treatment, Tank
Tons: 0.252

TEXACO REFINING AND MARKETING INC (Continued) **S113041020**

Additional Info:

Year:	1993
Gen EPA ID:	CAL000047441
Shipment Date:	19930324
Creation Date:	9/6/1995 0:00:00
Receipt Date:	19930325
Manifest ID:	92759362
Trans EPA ID:	CAD095146296
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD028409019
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	Not reported
Meth Code:	T01 - Treatment, Tank
Quantity Tons:	0.252
Waste Quantity:	60
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

HWTS:

Name:	TEXACO REFINING AND MARKETING INC
Address:	784 N NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000047441
Inactive Date:	06/30/1996
Create Date:	04/02/1991
Last Act Date:	08/18/1999
Mailing Name:	EH&S
Mailing Address:	10 UNIVERSAL CITY PLAZA 7TH FLOOR
Mailing Address 2:	Not reported
Mailing City,State,Zip:	UNIVERSAL CITY, CA 916081009
Owner Name:	TEXACO REFINING AND MARKETING
Owner Address:	10 UNIVERSAL CITY PLAZA 7TH FLOOR
Owner Address 2:	Not reported
Owner City,State,Zip:	UNIVERSAL CITY, CA 916081009
Contact Name:	ED DINKFELD-DEACT V96/97 -PH
Contact Address:	10 UNIVERSAL CITY PLAZA 7TH FLOOR
Contact Address 2:	Not reported
City,State,Zip:	UNIVERSAL CITY, CA 916081009

A104 Target Property — **ALAMO RADIATOR AND AIR CONDITIONING**, **778 NOGALES AVE UNIT B**, **WALNUT, CA 91789** — **HAZNET** **S113074802**; **HWTS** **N/A**

Site 104 of 107 in cluster A

Actual: 588 ft.

HAZNET:

Name:	ALAMO RADIATOR AND AIR CONDITIONING
Address:	778 NOGALES AVE UNIT B
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894553
Contact:	OSVALDO A VILLANUA
Telephone:	6269657173
Mailing Name:	Not reported
Mailing Address:	778 NOGALES AVE UNIT B
Year:	1997
Gepaid:	CAL000135925
TSD EPA ID:	CAD981696420
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.42

Additional Info:

Year:	1997
Gen EPA ID:	CAL000135925
Shipment Date:	19970709
Creation Date:	12/4/1997 0:00:00
Receipt Date:	19970710
Manifest ID:	95329415
Trans EPA ID:	CAD982413262
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.42
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

HWTS:

Name:	ALAMO RADIATOR AND AIR CONDITIONING
Address:	778 NOGALES AVE UNIT B
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917894553

ALAMO RADIATOR AND AIR CONDITIONING (Continued) **S113074802**

EPA ID:	CAL000135925
Inactive Date:	06/30/2007
Create Date:	07/09/1997
Last Act Date:	03/20/2008
Mailing Name:	Not reported
Mailing Address:	778 NOGALES AVE UNIT B
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894553
Owner Name:	OSVALDO A VILLANUA
Owner Address:	11917 ORIZABA AVE
Owner Address 2:	Not reported
Owner City,State,Zip:	DOWNEY, CA 902420000
Contact Name:	OSVALDO A VILLANUA
Contact Address:	778 NOGALES AVE UNIT B
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

NAICS:

EPA ID:	CAL000135925
Create Date:	2002-03-14 16:36:28.000
NAICS Code:	811118
NAICS Description:	Other Automotive Mechanical and Electrical Repair and Maintenance
Issued EPA ID Date:	1997-07-09 00:00:00
Inactive Date:	2007-06-30 00:00:00
Facility Name:	ALAMO RADIATOR AND AIR CONDITIONING
Facility Address:	778 NOGALES AVE UNIT B
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	917894553

A105 **ALAMO CAR WASH** **LUST** **S124450847**
Target **784 NOGALES ST.** **Cortese** **N/A**
Property **WALNUT, CA 91789**

Site 105 of 107 in cluster A

Actual:
588 ft.

LUST:

Name:	ALAMO CAR WASH
Address:	784 NOGALES ST.
City,State,Zip:	WALNUT, CA 91789
Lead Agency:	LOS ANGELES RWQCB (REGION 4)
Case Type:	LUST Cleanup Site
Geo Track:	http://geotracker.waterboards.ca.gov/profile_report.asp?global_id=T0603774352
Global Id:	T0603774352
Latitude:	34.02485
Longitude:	-117.894407
Status:	Open - Eligible for Closure
Status Date:	06/04/2018
Case Worker:	NC
RB Case Number:	R-15014
Local Agency:	LOS ANGELES COUNTY
File Location:	Not reported
Local Case Number:	14427-15014
Potential Media Affect:	Soil
Potential Contaminants of Concern:	Gasoline

ALAMO CAR WASH (Continued) **S124450847**

Site History: Not reported

LUST:
Global Id: T0603774352
Contact Type: Local Agency Caseworker
Contact Name: TIM SMITH
Organization Name: LOS ANGELES COUNTY
Address: 900 S. FREMONT AVE.
City: ALHAMBRA
Email: tsmith@dpw.lacounty.gov
Phone Number: Not reported

Global Id: T0603774352
Contact Type: Regional Board Caseworker
Contact Name: NOMAN CHOWDHURY
Organization Name: LOS ANGELES RWQCB (REGION 4)
Address: 320 WEST 4TH STREET, SUITE 200
City: LOS ANGELES
Email: noman.chowdhury@waterboards.ca.gov
Phone Number: 2135766704

LUST:
Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 12/07/2020
Action: Staff Letter

Global Id: T0603774352
Action Type: Other
Date: 09/01/2004
Action: Leak Reported

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/25/2006
Action: Soil and Water Investigation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2006
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2006
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2012
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2012
Action: Monitoring Report - Semi-Annually

ALAMO CAR WASH (Continued) **S124450847**

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2016
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 03/08/2021
Action: Well Destruction Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 11/25/2020
Action: Other Report / Document

Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 10/15/2008
Action: Staff Letter

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2009
Action: Other Report / Document

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2009
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2007
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2016
Action: Soil and Water Investigation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2015
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2014
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2018
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE

ALAMO CAR WASH (Continued) **S124450847**

Date: 04/15/2016
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 09/02/2015
Action: Remedial Progress Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2015
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2017
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2018
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 09/30/2004
Action: Staff Letter

Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 08/22/2017
Action: Clean Up Fund - Case Closure Review Summary Report (RSR)

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2009
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2008
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2009
Action: Soil and Water Investigation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2007
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2005
Action: Other Report / Document

ALAMO CAR WASH (Continued) **S124450847**

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/30/2007
Action: Well Installation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2008
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 09/14/2011
Action: Corrective Action Plan / Remedial Action Plan - Addendum

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2015
Action: Remedial Progress Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2008
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 05/14/2008
Action: Soil and Water Investigation Workplan

Global Id: T0603774352
Action Type: RESPONSE
Date: 11/22/2010
Action: Soil and Water Investigation Workplan

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2011
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2011
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2011
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2011
Action: Remedial Progress Report

Global Id: T0603774352
Action Type: RESPONSE

ALAMO CAR WASH (Continued) **S124450847**

Date: 01/18/2013
Action: CAP/RAP - Feasibility Study Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 09/20/2013
Action: Corrective Action Plan / Remedial Action Plan - Addendum

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2013
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 07/01/2015
Action: Staff Letter

Global Id: T0603774352
Action Type: ENFORCEMENT
Date: 09/25/2020
Action: Notification - Preclosure

Global Id: T0603774352
Action Type: Other
Date: 09/27/2000
Action: Leak Discovery

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2006
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2006
Action: Soil and Water Investigation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2006
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 03/23/2007
Action: Well Installation Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 11/01/2007
Action: CAP/RAP - Feasibility Study Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2007
Action: Monitoring Report - Quarterly

ALAMO CAR WASH (Continued) **S124450847**

Global Id: T0603774352
Action Type: RESPONSE
Date: 04/15/2007
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2008
Action: Monitoring Report - Quarterly

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2010
Action: Remedial Progress Report

Global Id: T0603774352
Action Type: RESPONSE
Date: 10/15/2010
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 07/15/2010
Action: Monitoring Report - Semi-Annually

Global Id: T0603774352
Action Type: RESPONSE
Date: 05/13/2015
Action: Other Workplan - Regulator Responded

Global Id: T0603774352
Action Type: RESPONSE
Date: 11/15/2018
Action: Request for Closure - Regulator Responded

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/15/2017
Action: Monitoring Report - Semi-Annually - Regulator Responded

Global Id: T0603774352
Action Type: RESPONSE
Date: 01/30/2018
Action: Request for Closure - Regulator Responded

Global Id: T0603774352
Action Type: REMEDIATION
Date: 05/14/2012
Action: Dual Phase Extraction

Global Id: T0603774352
Action Type: REMEDIATION
Date: 08/16/2007
Action: Soil Vapor Extraction (SVE)

Global Id: T0603774352
Action Type: REMEDIATION

ALAMO CAR WASH (Continued) **S124450847**

Date: 05/04/2010
Action: Soil Vapor Extraction (SVE)

Global Id: T0603774352
Action Type: REMEDIATION
Date: 12/09/2016
Action: Other (Use Description Field)

Global Id: T0603774352
Action Type: REMEDIATION
Date: 05/07/2014
Action: Dual Phase Extraction

Global Id: T0603774352
Action Type: REMEDIATION
Date: 07/13/2015
Action: Dual Phase Extraction

Global Id: T0603774352
Action Type: REMEDIATION
Date: 05/14/2012
Action: Dual Phase Extraction

Global Id: T0603774352
Action Type: REMEDIATION
Date: 05/07/2014
Action: Dual Phase Extraction

LUST:
Global Id: T0603774352
Status: Open - Case Begin Date
Status Date: 09/27/2000

Global Id: T0603774352
Status: Open - Site Assessment
Status Date: 09/30/2004

Global Id: T0603774352
Status: Open - Site Assessment
Status Date: 06/14/2005

Global Id: T0603774352
Status: Open - Remediation
Status Date: 09/05/2007

Global Id: T0603774352
Status: Open - Site Assessment
Status Date: 05/14/2008

Global Id: T0603774352
Status: Open - Remediation
Status Date: 01/16/2013

Global Id: T0603774352
Status: Open - Eligible for Closure
Status Date: 06/04/2018

ALAMO CAR WASH (Continued) **S124450847**

CORTESE:

Name:	ALAMO CAR WASH
Address:	784 NOGALES ST.
City,State,Zip:	WALNUT, CA 91789
Region:	CORTESE
Envirostor Id:	Not reported
Global ID:	T0603774352
Site/Facility Type:	LUST CLEANUP SITE
Cleanup Status:	COMPLETED - CASE CLOSED
Status Date:	Not reported
Site Code:	Not reported
Latitude:	Not reported
Longitude:	Not reported
Owner:	Not reported
Enf Type:	Not reported
Swat R:	Not reported
Flag:	active
Order No:	Not reported
Waste Discharge System No:	Not reported
Effective Date:	Not reported
Region 2:	Not reported
WID Id:	Not reported
Solid Waste Id No:	Not reported
Waste Management Uit Name:	Not reported
File Name:	Active Open

A106 **H A T AUTO SERVICE** **HWTS** **S124932293**
Target **750 NOGALES ST #C** **N/A**
Property **WALNUT, CA 91789**

Site 106 of 107 in cluster A

Actual:
588 ft.

HWTS:

Name:	H A T AUTO SERVICE
Address:	750 NOGALES ST #C
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000446901
Inactive Date:	06/30/2020
Create Date:	06/25/2019
Last Act Date:	01/04/2021
Mailing Name:	Not reported
Mailing Address:	13134 BRETON AVE
Mailing Address 2:	Not reported
Mailing City,State,Zip:	CHICO, CA 91710
Owner Name:	HTAY NAING
Owner Address:	13134 BRETON AVE
Owner Address 2:	Not reported
Owner City,State,Zip:	CHICO, CA 91710
Contact Name:	HTAY NAING
Contact Address:	13134 BRETON AVE
Contact Address 2:	Not reported
City,State,Zip:	CHICO, CA 91710

NAICS:

EPA ID:	CAL000446901
Create Date:	2019-06-25 08:59:26.513
NAICS Code:	811111

H A T AUTO SERVICE (Continued) **S124932293**

NAICS Description:	General Automotive Repair
Issued EPA ID Date:	2019-06-25 08:59:26.51300
Inactive Date:	2020-06-30 00:00:00
Facility Name:	H A T AUTO SERVICE
Facility Address:	750 NOGALES ST #C
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

A107 **JOSE RODRIGUEZ** **RCRA NonGen / NLR** **1026043680**
SE **727 AMADOR CIR** **CAC003049914**
< 1/8 **WALNUT, CA 91789**
0.010 mi.
55 ft. **Site 107 of 107 in cluster A**

Relative: **Higher**
Actual: **590 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20200107
Handler Name:	JOSE RODRIGUEZ	
Handler Address:		727 AMADOR CIR
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAC003049914
Contact Name:		JOSE RODRIGUEZ
Contact Address:		727 AMADOR CIR
Contact City,State,Zip:		WALNUT, CA 91789
Contact Telephone:		626-890-0181
Contact Fax:		Not reported
Contact Email:		AMARTINO@VIKINGENVIRO.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Not reported
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		727 AMADOR CIR
Mailing City,State,Zip:		WALNUT, CA 91789
Owner Name:		JOSE RODRIGUEZ
Owner Type:		Other
Operator Name:		JOSE RODRIGUEZ
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No
Underground Injection Control:		No
Off-Site Waste Receipt:		No
Universal Waste Indicator:		No
Universal Waste Destination Facility:		No

JOSE RODRIGUEZ (Continued) **1026043680**

Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200210
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	JOSE RODRIGUEZ
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	727 AMADOR CIR
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-890-0181
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

JOSE RODRIGUEZ (Continued) **1026043680**

Owner/Operator Indicator:	Owner
Owner/Operator Name:	JOSE RODRIGUEZ
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	727 AMADOR CIR
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-890-0181
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20200107
Handler Name: JOSE RODRIGUEZ	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	56299
NAICS Description:	ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

108
WSW
< 1/8
0.030 mi.
159 ft.

BEN VICENCIO **RCRA NonGen / NLR** **1026798933**
3126 GABRIELLA STREET **CAC003110734**
WEST COVINA, CA 91792

Relative:
Lower

Actual:
583 ft.

RCRA NonGen / NLR:

Date Form Received by Agency:		20210318
Handler Name:	BEN VICENCIO	
Handler Address:		3126 GABRIELLA STREET
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC003110734
Contact Name:		BEN VICENCIO
Contact Address:		3126 GABRIELLA STREET
Contact City,State,Zip:		WEST COVINA, CA 91792
Contact Telephone:		626-833-6166
Contact Fax:		Not reported
Contact Email:		KARLA@SUPERIORENV.COM
Contact Title:		Not reported

BEN VICENCIO (Continued) **1026798933**

EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	3126 GABRIELLA STREET
Mailing City,State,Zip:	WEST COVINA, CA 91792
Owner Name:	BEN VICENCIO
Owner Type:	Other
Operator Name:	BEN VICENCIO
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported

BEN VICENCIO (Continued) **1026798933**

Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20210322
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	BEN VICENCIO
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	3126 GABRIELLA STREET
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-833-6166
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Owner
Owner/Operator Name:	BEN VICENCIO
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	3126 GABRIELLA STREET
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-833-6166
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20210318
Handler Name: BEN VICENCIO	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	No
Electronic Manifest Broker:	No

List of NAICS Codes and Descriptions:

NAICS Code:	56299

BEN VICENCIO (Continued) **1026798933**

NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

B109 **TEMPO DRY CLEANERS** **RCRA-SQG** **1000348485**
NW **820 N NOGALES** **FINDS** **CAD981650476**
< 1/8 **WALNUT, CA 91789** **ECHO**
0.045 mi. **DRYCLEANERS**
239 ft. **Site 1 of 11 in cluster B** **EMI**
LOS ANGELES CO. HMS
Relative:
Higher

RCRA-SQG:

Actual:
596 ft.

Date Form Received by Agency:		19960901
Handler Name:	TEMPO DRY CLEANERS	
Handler Address:		820 N NOGALES
Handler City,State,Zip:		WALNUT, CA 91789
EPA ID:		CAD981650476
Contact Name:		Not reported
Contact Address:		Not reported
Contact City,State,Zip:		Not reported
Contact Telephone:		Not reported
Contact Fax:		Not reported
Contact Email:		Not reported
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Small Quantity Generator
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		CA
State District:		3
Mailing Address:		820 N NOGALES
Mailing City,State,Zip:		WALNUT, CA 91789
Owner Name:		Not reported
Owner Type:		Not reported
Operator Name:		NOT REQUIRED
Operator Type:		Private
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No
Underground Injection Control:		No
Off-Site Waste Receipt:		No
Universal Waste Indicator:		No
Universal Waste Destination Facility:		No
Federal Universal Waste:		No

TEMPO DRY CLEANERS (Continued) **1000348485**

Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	NN
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20020627
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	Not reported
Manifest Broker:	Not reported
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	DANNY PADILLA
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	NOT REQUIRED
Owner/Operator City,State,Zip:	NOT REQUIRED, ME 99999
Owner/Operator Telephone:	415-555-1212
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

TEMPO DRY CLEANERS (Continued) **1000348485**

Owner/Operator Indicator:	Operator
Owner/Operator Name:	NOT REQUIRED
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	NOT REQUIRED
Owner/Operator City,State,Zip:	NOT REQUIRED, ME 99999
Owner/Operator Telephone:	415-555-1212
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	19960901
Handler Name: TEMPO DRY CLEANERS	
Federal Waste Generator Description:	Small Quantity Generator
State District Owner:	CA
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

Receive Date:	19870112
Handler Name: TEMPO DRY CLEANERS	
Federal Waste Generator Description:	Large Quantity Generator
State District Owner:	CA
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	No
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	81232
NAICS Description:	DRYCLEANING AND LAUNDRY SERVICES (EXCEPT COIN-OPERATED)

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

FINDS:

Registry ID:	110002737325

Click Here:

TEMPO DRY CLEANERS (Continued) **1000348485**

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:

Envid:	1000348485
Registry ID:	110002737325
DFR URL:	http://echo.epa.gov/detailed-facility-report?fid=110002737325
Name:	TEMPO DRY CLEANERS
Address:	820 N NOGALES
City,State,Zip:	WALNUT, CA 91789

DRYCLEANERS:

Name:	TEMPO CLEANERS
Address:	820 N NOGALES ST
City,State,Zip:	WALNUT, CA 917890000
EPA Id:	CAL000025173
NAICS Code:	81232
NAICS Description:	Drycleaning and Laundry Services (except Coin-Operated)
SIC Code:	7211
SIC Description:	Power Laundries, Family and Commercial
Create Date:	05/09/1990
Facility Active:	No
Inactive Date:	06/30/2008
Facility Addr2:	Not reported
Owner Name:	TOM V PHAM
Owner Address:	6126 E SAN LORENZO
Owner Address 2:	Not reported
Owner Telephone:	7142828554
Contact Name:	TOM V PHAM-OWNER
Contact Address:	820 N NOGALES
Contact Address 2:	Not reported
Contact Telephone:	6269659364
Contact Fax:	Not reported
Mailing Name:	Not reported
Mailing Address 1:	820 N NOGALES ST
Mailing Address 2:	Not reported
Mailing City:	WALNUT
Mailing State:	CA
Mailing Zip:	917894170
Owner Fax:	Not reported
Region Code:	3
Latitude:	34.025606
Longitude:	-117.894805

EMI:

Name:	TEMPO DRY CLEANERS, DBA DAMIAN
Address:	820 N NOGALES
City,State,Zip:	WALNUT, CA, CA 917890000

TEMPO DRY CLEANERS (Continued) **1000348485**

Year:	1987
County Code:	19
Air Basin:	SC
Facility ID:	56477
Air District Name:	SC
SIC Code:	7216
Air District Name:	SOUTH COAST AQMD
Community Health Air Pollution Info System:	Not reported
Consolidated Emission Reporting Rule:	Not reported
Total Organic Hydrocarbon Gases Tons/Yr:	0
Reactive Organic Gases Tons/Yr:	0
Carbon Monoxide Emissions Tons/Yr:	0
NOX - Oxides of Nitrogen Tons/Yr:	0
SOX - Oxides of Sulphur Tons/Yr:	0
Particulate Matter Tons/Yr:	0
Part. Matter 10 Micrometers and Smllr Tons/Yr:	0

Name:	TEMPO CLEANERS, TAM PHAM DBA
Address:	820 N NOGALES
City,State,Zip:	WALNUT, CA 917890000
Year:	1990
County Code:	19
Air Basin:	SC
Facility ID:	82804
Air District Name:	SC
SIC Code:	7216
Air District Name:	SOUTH COAST AQMD
Community Health Air Pollution Info System:	Not reported
Consolidated Emission Reporting Rule:	Not reported
Total Organic Hydrocarbon Gases Tons/Yr:	4
Reactive Organic Gases Tons/Yr:	2
Carbon Monoxide Emissions Tons/Yr:	0
NOX - Oxides of Nitrogen Tons/Yr:	0
SOX - Oxides of Sulphur Tons/Yr:	0
Particulate Matter Tons/Yr:	0
Part. Matter 10 Micrometers and Smllr Tons/Yr:	0

LOS ANGELES CO. HMS:

Name:	TEMPO DRY CLEANERS
Address:	820 NOGALES AVE
City,State,Zip:	WALNUT, CA 91789
Region:	LA
Permit Category:	Not reported
Facility Id:	021094-029867
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L
Permit Number:	Not reported
Permit Status:	Not reported

B110 **PRAM TOM** **EDR Hist Cleaner** **1020065592**
NW **820 NOGALES AVE** **N/A**
< 1/8 **WALNUT, CA 91789**
0.045 mi.
239 ft. **Site 2 of 11 in cluster B**

Relative: EDR Hist Cleaner
Higher

Actual:
596 ft.

Year:	Name:	Type:
1992	PRAM TOM	Drycleaning Plants, Except Rugs
1993	PRAM TOM	Drycleaning Plants, Except Rugs
1994	PRAM TOM	Drycleaning Plants, Except Rugs
1995	PRAM TOM	Drycleaning Plants, Except Rugs
1996	PRAM TOM	Drycleaning Plants, Except Rugs
1997	PRAM TOM	Drycleaning Plants, Except Rugs
1998	PRAM TOM	Drycleaning Plants, Except Rugs
1999	PRAM TOM	Drycleaning Plants, Except Rugs
2000	PRAM TOM	Drycleaning Plants, Except Rugs
2001	PRAM TOM	Drycleaning Plants, Except Rugs
2002	PRAM TOM	Drycleaning Plants, Except Rugs
2003	PRAM TOM	Drycleaning Plants, Except Rugs
2004	PRAM TOM	Drycleaning Plants, Except Rugs
2005	PRAM TOM	Drycleaning Plants, Except Rugs
2006	PRAM TOM	Drycleaning Plants, Except Rugs
2007	PRAM TOM	Drycleaning Plants, Except Rugs
2008	PRAM TOM	Drycleaning Plants, Except Rugs
2009	PRAM TOM	Drycleaning Plants, Except Rugs
2010	PRAM TOM	Drycleaning Plants, Except Rugs
2011	PRAM TOM	Drycleaning Plants, Except Rugs
2012	PRAM TOM	Drycleaning Plants, Except Rugs
2013	PRAM TOM	Drycleaning Plants, Except Rugs
2014	PRAM TOM	Drycleaning Plants, Except Rugs

B111 **TEMPO CLEANERS** **DRYCLEANERS** **S121697834**
NW **820 NOGALES** **N/A**
< 1/8 **WALNUT, CA**
0.045 mi.
239 ft. **Site 3 of 11 in cluster B**

Relative: DRYCLEAN SOUTH COAST:
Higher

Actual:
596 ft.

Name:	TEMPO CLEANERS
Address:	820 NOGALES
City,State,Zip:	WALNUT, CA
Facility ID:	43932
Application Number:	121840
Permit Number:	M39602
Status:	O
Representative Name:	YGAL SHARONI
Representative Telephone:	213 9817283
Permit Status:	EXPIRED
BCAT Number:	000234
BCAT Description:	DRY CLEANING EQUIP PERCHLOROETHYLENE
CCAT Number:	10
CCAT Description:	SOLVATION UNIT
UTM East:	0
UTM North:	0
Application Date:	04/25/1984
PO Issue Date:	07/30/1984
NAICS Code:	Not reported
SIC Code:	7216

TEMPO CLEANERS (Continued) **S121697834**

Name:	TEMPO CLEANERS
Address:	820 NOGALES
City,State,Zip:	WALNUT, CA
Facility ID:	43932
Application Number:	139767
Permit Number:	M48052
Status:	O
Representative Name:	YGAL SHARONI
Representative Telephone:	213 9817283
Permit Status:	INACTIVE
BCAT Number:	000234
BCAT Description:	DRY CLEANING EQUIP PERCHLOROETHYLENE
CCAT Number:	04
CCAT Description:	VAPOR RECOVERY UNIT COMPRESS & CONDENSE
UTM East:	0
UTM North:	0
Application Date:	12/18/1985
PO Issue Date:	02/10/1986
NAICS Code:	Not reported
SIC Code:	7216

B112 **TEMPO CLEANERS** **EDR Hist Cleaner** **1018883833**
NW **820 NOGALES ST** **N/A**
< 1/8 **WALNUT, CA 91789**
0.045 mi.
239 ft. **Site 4 of 11 in cluster B**

Relative: EDR Hist Cleaner
Higher

Actual: **596 ft.**

Year:	Name:	Type:
1986	TEMPO CLEANERS	Garment Pressing And Cleaners' Agents
1987	TEMPO CLEANERS	Garment Pressing And Cleaners' Agents

B113 **TEMPO DRY CLEANERS** **DRYCLEANERS** **S121698561**
NW **820 N NOGALES** **N/A**
< 1/8 **WALNUT, CA 91789**
0.045 mi.
239 ft. **Site 5 of 11 in cluster B**

Relative: DRYCLEAN SOUTH COAST:
Higher

Actual: **596 ft.**

Name:	TEMPO DRY CLEANERS
Address:	820 N NOGALES
City,State,Zip:	WALNUT, CA 91789
Facility ID:	56477
Application Number:	155077
Permit Number:	M56174
Status:	S
Representative Name:	DAMIAM PADILLA
Representative Telephone:	213 0000000
Permit Status:	INACT_NR
BCAT Number:	000234
BCAT Description:	DRY CLEANING EQUIP PERCHLOROETHYLENE
CCAT Number:	Not reported
CCAT Description:	Not reported
UTM East:	0
UTM North:	0

TEMPO DRY CLEANERS (Continued) **S121698561**

Application Date:	03/20/1987
PO Issue Date:	04/22/1987
NAICS Code:	812320
SIC Code:	7216

B114 **TEMPO CLEANERS** **DRYCLEANERS** **S121699790**
NW **820 N NOGALES** **N/A**
< 1/8 **WALNUT, CA 91789**
0.045 mi.
239 ft. **Site 6 of 11 in cluster B**

Relative: DRYCLEAN SOUTH COAST:
Higher

Name:	TEMPO CLEANERS
Address:	820 N NOGALES
City,State,Zip:	WALNUT, CA 91789
Facility ID:	82804
Application Number:	241431
Permit Number:	D42624
Status:	A
Representative Name:	TAM PHAM
Representative Telephone:	818 9659364
Permit Status:	INACTIVE
BCAT Number:	000234
BCAT Description:	DRY CLEANING EQUIP PERCHLOROETHYLENE
CCAT Number:	04
CCAT Description:	VAPOR RECOVERY UNIT COMPRESS & CONDENSE
UTM East:	417.5369873
UTM North:	3764.9370117
Application Date:	11/21/1990
PO Issue Date:	09/03/1991
NAICS Code:	812320
SIC Code:	7216

Actual:
596 ft.

C115 **MA BROTHERS DBA MB STARS** **RCRA NonGen / NLR** **1025874028**
NE **788 FRANCESCA DR 1A** **CAL000447157**
< 1/8 **WALNUT, CA 91789**
0.066 mi.
350 ft. **Site 1 of 3 in cluster C**

Relative: RCRA NonGen / NLR:
Higher

Date Form Received by Agency:	20190627
Handler Name:	MA BROTHERS DBA MB STARS
Handler Address:	788 FRANCESCA DR 1A
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000447157
Contact Name:	MICHAEL WANG
Contact Address:	788 FRANCESCA DR 1A
Contact City,State,Zip:	WALNUT, CA 91789
Contact Telephone:	626-913-0780
Contact Fax:	Not reported
Contact Email:	MICHAELWANGUSA2002@GMAIL.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported

Actual:
612 ft.

MA BROTHERS DBA MB STARS (Continued) **1025874028**

Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	788 FRANCESCA DR 1A
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	MICHAEL WANG
Owner Type:	Other
Operator Name:	MICHAEL WANG
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No

MA BROTHERS DBA MB STARS (Continued) **1025874028**

Financial Assurance Required:	Not reported
Handler Date of Last Change:	20190729
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	MICHAEL WANG
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	788 FRANCESCA DR 1A
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-913-0780
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	MICHAEL WANG
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	788 FRANCESCA DR 1A
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	626-913-0780
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20190627
Handler Name:	MA BROTHERS DBA MB STARS
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	811111
NAICS Description:	GENERAL AUTOMOTIVE REPAIR

Facility Has Received Notices of Violations:

MA BROTHERS DBA MB STARS (Continued) **1025874028**

Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

C116 **M B STARS** **CERS HAZ WASTE** **S109117336**
NE **788 FRANCESCA DR # 1A** **LOS ANGELES CO. HMS** **N/A**
< 1/8 **WALNUT, CA 91789** **CERS**
0.066 mi.
350 ft. **Site 2 of 3 in cluster C**

Relative: Higher
Actual: 612 ft.

CERS HAZ WASTE:
Name: M B STARS
Address: 788 FRANCESCA DR # 1A
City,State,Zip: WALNUT, CA 91789
Site ID: 131997
CERS ID: 10294717
CERS Description: Hazardous Waste Generator

Name: VENEGAS AUTO CARE CENTER
Address: 788 FRANCESCA DR UNIT B-4
City,State,Zip: WALNUT, CA 91789
Site ID: 413055
CERS ID: 10717396
CERS Description: Hazardous Waste Generator

LOS ANGELES CO. HMS:
Name: FRANCESCA AUTO
Address: 788 FRANCESCA DR
City,State,Zip: WALNUT, CA 917894557
Region: LA
Permit Category: I
Facility Id: 008492-051167
Facility Type: 01
Facility Status: Permit
Area: 6L
Permit Number: 000571789
Permit Status: Permit

CERS:
Name: VENEGAS AUTO CARE CENTER
Address: 788 FRANCESCA DR UNIT B-4
City,State,Zip: WALNUT, CA 91789
Site ID: 413055
CERS ID: 10717396
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 413055
Site Name: venegas auto care center
Violation Date: 03-11-2020
Citation: HSC 6.95 25507 - California Health and Safety Code, Chapter 6.95, Section(s) 25507
Violation Description: Failure to adequately establish and implement a business plan when storing/handling a hazardous material at or above reportable quantities.

M B STARS (Continued) **S109117336**

Violation Notes:	Returned to compliance on 09/18/2020. OBSERVATION: The business failed to establish and implement a business plan when handling hazardous materials at or above the reportable threshold quantities. CORRECTIVE ACTION: Establish and implement a business plan for the facility. Submit documentation of correction to the unified program agency.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS
Site ID:	413055
Site Name:	venegas auto care center
Violation Date:	10-24-2016
Citation:	HSC 6.5 25250.7 - California Health and Safety Code, Chapter 6.5, Section(s) 25250.7
Violation Description:	Failure to prevent intentional contamination of used oil with other hazardous waste other than minimal amounts of vehicle fuel.
Violation Notes:	Returned to compliance on 10/24/2016. OBSERVATION: Owner/Operator failed to obtain or maintain an active permit. facility is an auto repair shop generating hazardous waste (used oil, coolant, & partwasher). CORRECTIVE ACTION: Every person, business, or business concern within the jurisdiction of the LACoCUPA and subject to the requirements of one or more of the program elements shall be required to pay the applicable annual fees and any applicable late payment penalty and apply for and obtain from the LACoCUPA a unified program facility permit for the program elements applicable to such facility prior to the commencement of any business or activity related to any of the program elements. Upon receipt of full payment from a unified program facility for all the annual fees, including previous unpaid annual fees, any late payment penalties and the state imposed service charge, assessed pursuant to this chapter and provided all of the applicable regulatory requirements for the permit have been met, the [Truncated]
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	413055
Site Name:	venegas auto care center
Violation Date:	10-24-2016
Citation:	HSC 6.95 25508(a)(1) - California Health and Safety Code, Chapter 6.95, Section(s) 25508(a)(1)
Violation Description:	Failure to complete and electronically submit a business plan when storing/handling a hazardous material at or above reportable quantities.
Violation Notes:	Returned to compliance on 09/18/2020. OBSERVATION: A business plan has not been received by the CUPA. The facility has been in business for several years, auto repair services generating used oil (275 gallon tote) and filter. CORRECTIVE ACTION: Submit the business plan electronically in the California Environmental Reporting System (CERS) and implement immediately.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS
Site ID:	413055
Site Name:	venegas auto care center
Violation Date:	03-11-2020

M B STARS (Continued) **S109117336**

Citation:	HSC 6.5 Multiple - California Health and Safety Code, Chapter 6.5, Section(s) Multiple
Violation Description:	Hazardous Waste Generator Program - Administration/Documentation - General
Violation Notes:	Returned to compliance on 09/18/2020. OBSERVATION: Owner/Operator failed to submit the hazardous waste notification electronically to CERS. CORRECTIVE ACTION: Owner/Operator shall submit a notification of hazardous waste generated by the facility in accordance with HSC 25158 electronically to CERS. HSC 25404(e)(4) No later than three years after the statewide information management system is established, each CUPA, PA, and regulated business shall report program data electronically. The secretary shall work with the CUPAs to develop a phased in schedule for the electronic collection and submittal of information to be included in the statewide information management system, giving first priority to information relating to those chemicals determined by the secretary to be of greatest concern. The secretary, in making this determination shall consult with the CUPAs, the California Emergency Management Agency, the State Fire Marshal, and the boards, departments, and offices within the California [Truncated]
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	413055
Site Name:	venegas auto care center
Violation Date:	10-24-2016
Citation:	22 CCR 15 66265.176 - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.176
Violation Description:	Failure to locate reactive and ignitable waste at least 15 meters (50 feet) from the facility's property line.
Violation Notes:	Returned to compliance on 10/24/2016. OBSERVATION: Generator failed to properly handle, manage, label, and/or recycle used oil and fuel filters. Observed missing/faded labels on used oil & coolant containers. CORRECTIVE ACTION: labels provide, correction made at end of inspection.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	413055
Site Name:	venegas auto care center
Violation Date:	10-24-2016
Citation:	HSC 6.5 Multiple - California Health and Safety Code, Chapter 6.5, Section(s) Multiple
Violation Description:	Hazardous Waste Generator Program - Training - General
Violation Notes:	Returned to compliance on 11/23/2016. OBSERVATION: This facility does not have a valid EPA ID number to manage hazardous waste. A hazardous waste generator shall not treat, store, dispose of, transport or offer for transportation, hazardous waste without an EPA ID number. CORRECTIVE ACTION: Immediately obtain an EPA ID number through DTSC to manage hazardous waste and submit evidence to the CUPA within 30 days.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

M B STARS (Continued) **S109117336**

Evaluation:

Eval General Type:	Other/Unknown
Eval Date:	06-16-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	03-11-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Victor Venegas, Owner
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	09-01-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	11-26-2018
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	03-11-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Victor Venegas, Owner
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	06-27-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Other/Unknown
Eval Date:	10-19-2017

M B STARS (Continued) **S109117336**

Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 10-24-2016
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 10-24-2016
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Victor Venegas
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 788 francesca drv unit b-4
Affiliation City: walnut
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

Affiliation Type Desc: Identification Signer
Entity Name: victor venegas
Entity Title: owner
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Legal Owner

M B STARS (Continued) **S109117336**

Entity Name:	victor venegas
Entity Title:	Not reported
Affiliation Address:	788 Francesca dr, unit A
Affiliation City:	walnut
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 961-4459
Affiliation Type Desc:	Operator
Entity Name:	victor venegas
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 961-4011
Affiliation Type Desc:	Document Preparer
Entity Name:	victor venegas
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Environmental Contact
Entity Name:	victor venegas
Entity Title:	Not reported
Affiliation Address:	788 francesca drv unit b-4
Affiliation City:	walnut
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Parent Corporation
Entity Name:	venegas auto care center
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

C117
NE
< 1/8
0.066 mi.
350 ft.

FRANCESCA AUTO SERVICE CENTER
788 FRANCESCA DR
WALNUT, CA 91789

SWEEPS UST **S102056884**
LOS ANGELES CO. HMS **N/A**

Site 3 of 3 in cluster C

Relative:
Higher

Actual:
612 ft.

SWEEPS UST:

Name:	FRANCESCA AUTO SERVICE CENTER
Address:	788 FRANCESCA DR
City:	WALNUT
Status:	Active
Comp Number:	14657
Number:	9
Board Of Equalization:	44-010462
Referral Date:	06-30-89
Action Date:	Not reported
Created Date:	06-30-89
Owner Tank Id:	Not reported
SWRCB Tank Id:	19-000-014657-000001
Tank Status:	A
Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	2

Name:	FRANCESCA AUTO SERVICE CENTER
Address:	788 FRANCESCA DR
City:	WALNUT
Status:	Active
Comp Number:	14657
Number:	9
Board Of Equalization:	44-010462
Referral Date:	06-30-89
Action Date:	Not reported
Created Date:	06-30-89
Owner Tank Id:	Not reported
SWRCB Tank Id:	19-000-014657-000002
Tank Status:	A
Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	Not reported

LOS ANGELES CO. HMS:

Name:	FRANCESCA AUTO SERVICE CENTER
Address:	788 FRANCESCA DR
City,State,Zip:	WALNUT, CA 917894557
Region:	LA
Permit Category:	T
Facility Id:	008492-014657
Facility Type:	0
Facility Status:	Removed
Area:	6L
Permit Number:	00005728T
Permit Status:	Removed

FRANCESCA AUTO SERVICE CENTER (Continued) **S102056884**

Name:	XIAO HONG LI
Address:	788 FRANCESCA DR
City,State,Zip:	WALNUT, CA 917894557
Region:	LA
Permit Category:	Not reported
Facility Id:	008492-051350
Facility Type:	Not reported
Facility Status:	OPEN
Area:	6L
Permit Number:	Not reported
Permit Status:	Not reported

D118 **RAQUEL BALDEMOR** **RCRA NonGen / NLR** **1026801271**
South **2439 GINGER COURT** **CAC003113209**
< 1/8 **WEST COVINA, CA 91792**
0.073 mi.
386 ft. **Site 1 of 2 in cluster D**

Relative: **Lower**
Actual: **567 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20210405
Handler Name:	RAQUEL BALDEMOR	
Handler Address:		2439 GINGER COURT
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC003113209
Contact Name:		RAQUEL BALDEMOR
Contact Address:		2439 GINGER COURT
Contact City,State,Zip:		WEST COVINA, CA 91792
Contact Telephone:		626-482-2416
Contact Fax:		Not reported
Contact Email:		ERNIE@SIRRIS.BIZ
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Not reported
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		2439 GINGER COURT
Mailing City,State,Zip:		WEST COVINA, CA 91792
Owner Name:		RAQUEL BALDEMOR
Owner Type:		Other
Operator Name:		RAQUEL BALDEMOR
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No
Underground Injection Control:		No
Off-Site Waste Receipt:		No
Universal Waste Indicator:		No
Universal Waste Destination Facility:		No

RAQUEL BALDEMOR (Continued) **1026801271**

Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20210415
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	RAQUEL BALDEMOR
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2439 GINGER COURT
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-482-2416
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

RAQUEL BALDEMOR (Continued) **1026801271**

Owner/Operator Indicator:	Owner
Owner/Operator Name:	RAQUEL BALDEMOR
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2439 GINGER COURT
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-482-2416
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20210405
Handler Name: RAQUEL BALDEMOR	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	No
Electronic Manifest Broker:	No

List of NAICS Codes and Descriptions:

NAICS Code:	56299
NAICS Description:	ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

B119 **JIFFY LUBE #374** **UST** **U003940158**
NW **856 NOGALES AVE** **N/A**
< 1/8 **WALNUT, CA 91789**
0.080 mi.
424 ft. **Site 7 of 11 in cluster B**

Relative: Higher
Actual: 604 ft.

UST:

Name:	JIFFY LUBE #374
Address:	856 NOGALES AVE
City,State,Zip:	WALNUT, CA 91789
Facility ID:	14023
Permitting Agency:	LOS ANGELES COUNTY
CERSID:	Not reported
Latitude:	34.0274122
Longitude:	-117.8934726

B120 **WALNUT JIFFY LUBE** **HIST UST** **U001570755**
NW **856 NOGALES AVE** **N/A**
< 1/8 **WALNUT, CA 91789**
0.080 mi.
424 ft. **Site 8 of 11 in cluster B**

Relative:
Higher

Actual:
604 ft.

HIST UST:

Name:	WALNUT JIFFY LUBE
Address:	856 NOGALES AVE
City,State,Zip:	WALNUT, CA 91789
File Number:	Not reported
URL:	Not reported
Region:	STATE
Facility ID:	00000067431
Facility Type:	Other
Other Type:	AUTO LUBE CENTER
Contact Name:	L. CISNEROS
Telephone:	8189654798
Owner Name:	THE OIL SHOPPE, A CALIF. CORP.
Owner Address:	7911 TELEGRAPH RD.
Owner City,St,Zip:	PICO RIVERA, CA 90660
Total Tanks:	0001
Tank Num:	001
Container Num:	1001
Year Installed:	1985
Tank Capacity:	00001000
Tank Used for:	WASTE
Type of Fuel:	5
Container Construction Thickness:	123 2
Leak Detection:	Sensor Instrument

B121 **JIFFY LUBE #374** **AST** **S105512067**
NW **856 N NOGALES ST** **SWEEPS UST** **N/A**
< 1/8 **WALNUT, CA 91789** **HIST UST**
0.080 mi. **LOS ANGELES CO. HMS**
424 ft. **Site 9 of 11 in cluster B**

Relative:
Higher

Actual:
604 ft.

AST:

Name:	OILMEN #2
Address:	856 NOGALES ST
City/Zip:	WALNUT,91789
Certified Unified Program Agencies:	Not reported
Owner:	MARK PATRICK CASTRO
Total Gallons:	Not reported
CERSID:	10286884
Facility ID:	LACoFA0018727
Business Name:	OILMEN #2
Phone:	(626) 965-4798
Fax:	Not reported
Mailing Address:	856 NOGALES ST
Mailing Address City:	WALNUT
Mailing Address State:	CA
Mailing Address Zip Code:	91789
Operator Name:	ROMMEL CASTRO
Operator Phone:	(626) 965-4798
Owner Phone:	(626) 965-4798
Owner Mail Address:	856 NOGALES ST
Owner State:	CA
Owner Zip Code:	91789

JIFFY LUBE #374 (Continued) **S105512067**

Owner Country:	United States
Property Owner Name:	Not reported
Property Owner Phone:	Not reported
Property Owner Mailing Address:	Not reported
Property Owner City:	Not reported
Property Owner Stat :	Not reported
Property Owner Zip Code:	Not reported
Property Owner Country:	Not reported
EPAID:	CAL000273283

SWEEPS UST:

Name:	JIFFY LUBE #374
Address:	856 N NOGALES ST
City:	WALNUT
Status:	Active
Comp Number:	14023
Number:	3
Board Of Equalization:	44-010330
Referral Date:	06-19-90
Action Date:	06-19-90
Created Date:	06-30-89
Owner Tank Id:	Not reported
SWRCB Tank Id:	19-000-014023-000001
Tank Status:	A
Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	1

HIST UST:

Name:	WALNUT JIFFY LUBE
Address:	856 NOGALES STREET
City,State,Zip:	WALNUT, CA 91789
File Number:	00028BCA
URL:	http://geotracker.waterboards.ca.gov/ustpdfs/pdf/00028BCA.pdf
Region:	Not reported
Facility ID:	Not reported
Facility Type:	Not reported
Other Type:	Not reported
Contact Name:	Not reported
Telephone:	Not reported
Owner Name:	Not reported
Owner Address:	Not reported
Owner City,St,Zip:	Not reported
Total Tanks:	Not reported
Tank Num:	Not reported
Container Num:	Not reported
Year Installed:	Not reported
Tank Capacity:	Not reported
Tank Used for:	Not reported
Type of Fuel:	Not reported
Container Construction Thickness:	Not reported
Leak Detection:	Not reported

JIFFY LUBE #374 (Continued) **S105512067**

Click here for Geo Tracker PDF:

LOS ANGELES CO. HMS:
Name: THE OILMEN
Address: 856 NOGALES AVE
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: T
Facility Id: 013625-037574
Facility Type: 0
Facility Status: Removed
Area: 6L
Permit Number: 000345740
Permit Status: Removed

D122 **JESSE MARTINEZ** **RCRA NonGen / NLR** **1025864605**
SSW **2438 E GLORIA ST** **CAC003045432**
< 1/8 **WEST COVINA, CA 91792**
0.080 mi.
425 ft. **Site 2 of 2 in cluster D**

Relative: **Lower**
Actual: **568 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20191202
Handler Name:	JESSE MARTINEZ	
Handler Address:		2438 E GLORIA ST
Handler City,State,Zip:		WEST COVINA, CA 91792-2148
EPA ID:		CAC003045432
Contact Name:		JESSE MARTINEZ
Contact Address:		2438 E GLORIA ST
Contact City,State,Zip:		WEST COVINA, CA 91792-2148
Contact Telephone:		626-230-5941
Contact Fax:		Not reported
Contact Email:		TAMMYHURLEY@ALLIANCE-ENVIRO.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Not reported
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		2438 E GLORIA ST
Mailing City,State,Zip:		WEST COVINA, CA 91792-2148
Owner Name:		JESSE MARTINEZ
Owner Type:		Other
Operator Name:		JESSE MARTINEZ
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No

JESSE MARTINEZ (Continued) **1025864605**

Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20191206
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	JESSE MARTINEZ
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2438 E GLORIA ST
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792-2148

JESSE MARTINEZ (Continued) **1025864605**

Owner/Operator Telephone: 626-230-5941
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Owner/Operator Indicator: Owner
Owner/Operator Name: JESSE MARTINEZ
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 2438 E GLORIA ST
Owner/Operator City,State,Zip: WEST COVINA, CA 91792-2148
Owner/Operator Telephone: 626-230-5941
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 20191202
Handler Name: JESSE MARTINEZ
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

B123 **OILMEN 2** **RCRA-SQG** **1000231339**
NW **856 NOGALES ST** **FINDS** **CAD981167901**
< 1/8 **WALNUT, CA 91789** **ECHO**
0.086 mi.
456 ft. **Site 10 of 11 in cluster B**

Relative:
Higher

Actual:
600 ft.

RCRA-SQG:
Date Form Received by Agency: 19951026
Handler Name: JIFFY LUBE NO 374
Handler Address: 856 NOGALES ST
Handler City,State,Zip: WALNUT, CA 91789
EPA ID: CAD981167901
Contact Name: BILL YIM
Contact Address: 856 NOGALES ST

OILMEN 2 (Continued) **1000231339**

Contact City,State,Zip:	WALNUT, CA 91789
Contact Telephone:	818-965-4798
Contact Fax:	Not reported
Contact Email:	Not reported
Contact Title:	Not reported
EPA Region:	09
Land Type:	County
Federal Waste Generator Description:	Small Quantity Generator
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	CA
State District:	3
Mailing Address:	856 NOGALES ST
Mailing City,State,Zip:	WALNUT, CA 91789
Owner Name:	BILL YIM
Owner Type:	Private
Operator Name:	NOT REQUIRED
Operator Type:	Private
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	NN
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No

OILMEN 2 (Continued) **1000231339**

Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20020627
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	Not reported
Manifest Broker:	Not reported
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	BILL YIM
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	856 NOGALES ST
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	818-965-4798
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	NOT REQUIRED
Legal Status:	Private
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	NOT REQUIRED
Owner/Operator City,State,Zip:	NOT REQUIRED, ME 99999
Owner/Operator Telephone:	415-555-1212
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	19951026
Handler Name: JIFFY LUBE NO 374	
Federal Waste Generator Description:	Small Quantity Generator
State District Owner:	CA
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes

OILMEN 2 (Continued) **1000231339**

Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Codes: No NAICS Codes Found

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

FINDS:
Registry ID: 110002680536

Click Here:

Environmental Interest/Information System:
RCRAInfo is a national information system that supports the Resource Conservation and Recovery Act (RCRA) program through the tracking of events and activities related to facilities that generate, transport, and treat, store, or dispose of hazardous waste. RCRAInfo allows RCRA program staff to track the notification, permit, compliance, and corrective action activities required under RCRA.
STATE MASTER
UORS (California - Used Oil Recycling System). California Integrated Waste Management Board (CIWMB) helps communities establish and promote convenient collection opportunities for used oil and used oil filters.

Click this hyperlink while viewing on your computer to access additional FINDS: detail in the EDR Site Report.

ECHO:
Envid: 1000231339
Registry ID: 110002680536
DFR URL: http://echo.epa.gov/detailed-facility-report?fid=110002680536
Name: OILMEN 2
Address: 856 NOGALES ST
City,State,Zip: WALNUT, CA 91789

B124 **THE OILMEN** **CERS HAZ WASTE** **S113003519**
NW **856 NOGALES ST** **CERS TANKS** **N/A**
< 1/8 **WALNUT, CA 91789** **HAZNET**
0.086 mi. **CERS**
456 ft. **Site 11 of 11 in cluster B** **HWTS**

Relative: Higher
Actual: 600 ft.

CERS HAZ WASTE:
Name: OILMEN #2
Address: 856 NOGALES ST
City,State,Zip: WALNUT, CA 91789
Site ID: 53570
CERS ID: 10286884
CERS Description: Hazardous Waste Generator

CERS TANKS:

THE OILMEN (Continued) **S113003519**

Name: OILMEN #2
Address: 856 NOGALES ST
City,State,Zip: WALNUT, CA 91789
Site ID: 53570
CERS ID: 10286884
CERS Description: Aboveground Petroleum Storage

HAZNET:
Name: JIFFY LUBE #374
Address: 856 NOGALES ST
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
Contact: BETTY ORTEGA
Telephone: 6269654798
Mailing Name: Not reported
Mailing Address: 856 NOGALES AVE

Year: 2013
Gepaid: CAD981167901
TSD EPA ID: AZR000509950
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 3.23

Year: 2012
Gepaid: CAD981167901
TSD EPA ID: AZR000509950
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 2.888

Year: 2007
Gepaid: CAD981167901
TSD EPA ID: CAD099452708
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 2.09

Year: 1996
Gepaid: CAD981167901
TSD EPA ID: CAT080025711
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: R01 - Recycler
Tons: 3.8

Year: 1996
Gepaid: CAD981167901
TSD EPA ID: Not reported
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: R01 - Recycler
Tons: 3.42

Year: 1996
Gepaid: CAD981167901

THE OILMEN (Continued) **S113003519**

TSD EPA ID: CAD099452708
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: R01 - Recycler
Tons: 30.305

Year: 1993
Gepaid: CAD981167901
TSD EPA ID: CAD099452708
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: R01 - Recycler
Tons: 5.32

Year: 1989
Gepaid: CAD981167901
TSD EPA ID: CAD099452708
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: 01 -
Tons: 6.255

Year: 1988
Gepaid: CAD981167901
TSD EPA ID: CAD040370645
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: 14 -
Tons: 0

Year: 1988
Gepaid: CAD981167901
TSD EPA ID: CAD040370645
CA Waste Code: 221 - Waste oil and mixed oil
Disposal Method: H01 - Transfer Station
Tons: 37.7176

Click this hyperlink while viewing on your computer to access
9 additional CA HAZNET: record(s) in the EDR Site Report.

Additional Info:
Year: 2013
Gen EPA ID: CAD981167901

Shipment Date: 20131118
Creation Date: 1/28/2014 22:15:25
Receipt Date: 20131120
Manifest ID: 002230907GBF
Trans EPA ID: CAD983615501
Trans Name: PACIFIC OIL COMPANY
Trans 2 EPA ID: AZR000503789
Trans 2 Name: BOTAVIA ENERGY LLC
TSDF EPA ID: AZR000509950
Trans Name: BOTAVIA ENERGY LLC
TSDF Alt EPA ID: Not reported
TSDF Alt Name: Not reported
Waste Code Description: 221 - Waste oil and mixed oil
RCRA Code: Not reported
Meth Code: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect

THE OILMEN (Continued) **S113003519**

Quantity Tons:	1.425
Waste Quantity:	375
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20131108
Creation Date:	1/28/2014 22:15:25
Receipt Date:	20131113
Manifest ID:	002230190GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.95
Waste Quantity:	250
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20130104
Creation Date:	7/17/2013 22:15:13
Receipt Date:	20130108
Manifest ID:	001980089GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.855
Waste Quantity:	225
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported

THE OILMEN (Continued) **S113003519**

Additional Code 5:	Not reported

Additional Info:

Year:	2007
Gen EPA ID:	CAD981167901
Shipment Date:	20070406
Creation Date:	8/23/2007 18:30:34
Receipt Date:	20070411
Manifest ID:	000268589GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	INDSTRIAL SERVICE OIL COMPANY
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	2.09
Waste Quantity:	550
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1996
Gen EPA ID:	CAD981167901
Shipment Date:	19961209
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961210
Manifest ID:	96037278
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.28
Waste Quantity:	600
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported

THE OILMEN (Continued) **S113003519**

Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19961119
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961120
Manifest ID:	96037094
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.964
Waste Quantity:	780
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19961008
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19961008
Manifest ID:	96036727
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	3.04
Waste Quantity:	800
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960917
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19960917
Manifest ID:	96036519
Trans EPA ID:	CAD981427669
Trans Name:	Not reported

THE OILMEN (Continued) **S113003519**

Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.584
Waste Quantity:	680
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19960803
Creation Date:	5/20/1997 0:00:00
Receipt Date:	19960806
Manifest ID:	96036275
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.66
Waste Quantity:	700
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19960710
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960710
Manifest ID:	95752734
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler

THE OILMEN (Continued) **S113003519**

Quantity Tons:	2.375
Waste Quantity:	625
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960620
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960622
Manifest ID:	95752564
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.432
Waste Quantity:	640
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19960530
Creation Date:	5/30/1997 0:00:00
Receipt Date:	19960531
Manifest ID:	95891944
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	3.23
Waste Quantity:	850
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

THE OILMEN (Continued) **S113003519**

Shipment Date:	19960507
Creation Date:	10/29/1996 0:00:00
Receipt Date:	19960507
Manifest ID:	95891721
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	1.9
Waste Quantity:	500
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19960417
Creation Date:	10/16/1996 0:00:00
Receipt Date:	19960417
Manifest ID:	95753523
Trans EPA ID:	CAD981427669
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	2.47
Waste Quantity:	650
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1993
Gen EPA ID:	CAD981167901

Shipment Date:	19930921
Creation Date:	9/12/1995 0:00:00
Receipt Date:	19930921
Manifest ID:	93052452
Trans EPA ID:	CAD982462871

THE OILMEN (Continued) **S113003519**

Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD099452708
Trans Name:	Not reported
TSDF Alt EPA ID:	CAD099452708
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	5.32
Waste Quantity:	1400
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2012
Gen EPA ID:	CAD981167901
Shipment Date:	20121012
Creation Date:	5/4/2013 22:15:12
Receipt Date:	20121018
Manifest ID:	001923238GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.95
Waste Quantity:	250
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20121005
Creation Date:	5/21/2013 22:15:06
Receipt Date:	20121011
Manifest ID:	001923122GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY, LLC
TSDF EPA ID:	AZR000509950

THE OILMEN (Continued) **S113003519**

Trans Name:	BOTAVIA ENERGY, LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.95
Waste Quantity:	250
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20120929
Creation Date:	5/4/2013 22:15:12
Receipt Date:	20121004
Manifest ID:	001923016GBF
Trans EPA ID:	CAD983615501
Trans Name:	PACIFIC OIL COMPANY
Trans 2 EPA ID:	AZR000503789
Trans 2 Name:	BOTAVIA ENERGY LLC
TSDF EPA ID:	AZR000509950
Trans Name:	BOTAVIA ENERGY LLC
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.988
Waste Quantity:	260
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

CERS:

Name:	OILMEN #2
Address:	856 NOGALES ST
City,State,Zip:	WALNUT, CA 91789
Site ID:	53570
CERS ID:	10286884
CERS Description:	Chemical Storage Facilities

Violations:

Site ID:	53570
Site Name:	OILMEN #2
Violation Date:	06-07-2017
Citation:	HSC 6.67 25270.4.5(a) - California Health and Safety Code, Chapter 6.67, Section(s) 25270.4.5(a)
Violation Description:	Failure to prepare and implement a Spill Prevention Control and Countermeasure (SPCC) Plan.

THE OILMEN (Continued) **S113003519**

Violation Notes:	Returned to compliance on 11/13/2017. OBSERVATION: Failure to prepare SPCC. CORRECTIVE ACTION: Prepare SPCC.
Violation Division:	Los Angeles County Fire Department
Violation Program:	APSA
Violation Source:	CERS
Site ID:	53570
Site Name:	OILMEN #2
Violation Date:	06-22-2020
Citation:	22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description:	Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes:	Returned to compliance on 08/20/2020. OBSERVATION: Uniform Hazardous Waste Manifests for used oil and waste coolant were not available at the time of inspection. CORRECTIVE ACTION: Locate a copy of all manifests for used oil and waste coolant and submit to the CUPA.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS
Site ID:	53570
Site Name:	OILMEN #2
Violation Date:	06-07-2017
Citation:	HSC 6.95 25507 - California Health and Safety Code, Chapter 6.95, Section(s) 25507
Violation Description:	Failure to adequately establish and implement a business plan when storing/handling a hazardous material at or above reportable quantities.
Violation Notes:	Returned to compliance on 11/13/2017. OBSERVATION: Owner/Operator failed to establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet. CORRECTIVE ACTION: Establish and implement a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS
Site ID:	53570
Site Name:	OILMEN #2
Violation Date:	06-22-2020
Citation:	HSC 6.67 25270.4.5(a) - California Health and Safety Code, Chapter 6.67, Section(s) 25270.4.5(a)
Violation Description:	Failure to prepare an SPCC Plan that meets all applicable requirements.
Violation Notes:	Returned to compliance on 08/20/2020. OBSERVATION: Failure to prepare an SPCC Plan that meets all applicable requirements. CORRECTIVE ACTION: Complete or revise SPCC plan that meets all applicable requirements.
Violation Division:	Los Angeles County Fire Department
Violation Program:	APSA
Violation Source:	CERS

THE OILMEN (Continued) **S113003519**

Site ID: 53570
Site Name: OILMEN #2
Violation Date: 06-07-2017
Citation: 22 CCR 15 66265.192(a) - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.192(a)
Violation Description: Failure to obtain and maintain a written assessment reviewed and certified by an independent, qualified, professional engineer prior to placing the tank system in service. The written assessment shall state that, the new hazardous waste tank system has sufficient structural integrity, is acceptable for the transferring, storing and treating of hazardous waste, and that the tanks and containment system including the foundation, structural support, seams, connections, and pressure controls (if applicable) are suitably designed to meet the regulation.
Violation Notes: Returned to compliance on 10/18/2017. OBSERVATION: A written hazardous waste tank assessment has not been obtained for the used oil tank system prior to placing system into service. CORRECTIVE ACTION: Obtain a written hazardous waste tank system assessment for the used oil tank system in accordance with 22 CCR 15 66265.192 and submit a copy to the CUPA.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 53570
Site Name: OILMEN #2
Violation Date: 06-22-2020
Citation: 22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description: Failure to properly label hazardous waste accumulation containers and portable tanks with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes: Returned to compliance on 06/22/2020. OBSERVATION: Drum of waste coolant located in the service bay was observed without a hazardous waste label. CORRECTIVE ACTION: Submit photos to the CUPA demonstrating that the container listed above has been properly labeled.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 53570
Site Name: OILMEN #2
Violation Date: 06-22-2020
Citation: 22 CCR 15 66265.195(c) - California Code of Regulations, Title 22, Chapter 15, Section(s) 66265.195(c)
Violation Description: Failure to conduct and document inspections of hazardous waste tank systems each operating day and retain records of those inspections at the facility.
Violation Notes: Returned to compliance on 08/20/2020. OBSERVATION: Daily inspections of the used oil tank system have not been conducted and documented. CORRECTIVE ACTION: Submit documentation to the CUPA demonstrating that the used oil tank system is being properly inspected and documented.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

THE OILMEN (Continued) **S113003519**

Evaluation:

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-14-2014
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY FRED CASTRO
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-07-2017
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Albert Cruz, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-22-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Rommel Castro, Jr. Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	11-13-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Reviewed corrected SPCC Plan; NOV abated.
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-14-2014
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY FRED CASTRO
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-14-2014
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	INSPECTED BY A. LUI CONSENT GIVEN BY FRED CASTRO
Eval Division:	Los Angeles County Fire Department
Eval Program:	APSA
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-07-2017

THE OILMEN (Continued) **S113003519**

Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Albert Cruz, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	10-18-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Revisit conducted; written tank assessment dated 8/22/17 reviewed; NOV abated.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-22-2020
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Rommel Castro, Jr. Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-22-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Rommel Castro, Jr. Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	10-18-2017
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	1st revisit; met with Albert Cruz, Manager and spoke with Rommel Castro, Owner on the phone; HMBP Chemical Inventory section Not Accepted; advised Mr. Castro to contact Data Ops; followup required.
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	06-07-2017
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Albert Cruz, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	10-18-2017

THE OILMEN (Continued) **S113003519**

Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: SPCC Plan not submitted; draft prepared.
Eval Division: Los Angeles County Fire Department
Eval Program: APSA
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 11-13-2017
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: CERS reviewed; HMBP accepted on 11/2/17; NOV abated.
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Enforcement Action:
Site ID: 53570
Site Name: OILMEN #2
Site Address: 856 NOGALES ST
Site City: WALNUT
Site Zip: 91789
Enf Action Date: 01-14-2014
Enf Action Type: Notice of Violation (Unified Program)
Enf Action Description: Notice of Violation Issued by the Inspector at the Time of Inspection
Enf Action Notes: Not reported
Enf Action Division: Los Angeles County Fire Department
Enf Action Program: UNSPEC
Enf Action Source: CERS

Affiliation:
Affiliation Type Desc: CUPA District
Entity Name: Los Angeles County Fire
Entity Title: Not reported
Affiliation Address: 5825 Rickenbacker Road
Affiliation City: Commerce
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 90040-3027
Affiliation Phone: (323) 890-4000

Affiliation Type Desc: Document Preparer
Entity Name: VICTOR FLORES & BETTY ORTEGA
Entity Title: Not reported
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 856 NOGALES ST
Affiliation City: WALNUT

THE OILMEN (Continued) **S113003519**

Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91789
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	SUERTE OIL INC.
Entity Title:	Not reported
Affiliation Address:	856 NOGALES ST
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 965-4798
Affiliation Type Desc:	Identification Signer
Entity Name:	ELAINE CASTRO
Entity Title:	PRESIDENT
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Parent Corporation
Entity Name:	OILMEN #2
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Environmental Contact
Entity Name:	ROMMEL CASTRO
Entity Title:	Not reported
Affiliation Address:	856 NOGALES STREET
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	91785
Affiliation Phone:	Not reported
Affiliation Type Desc:	Operator
Entity Name:	ROMMEL CASTRO
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 965-4798

THE OILMEN (Continued) **S113003519**

HWTS:

Name:	THE OILMEN
Address:	856 NOGALES ST
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAD981167901
Inactive Date:	06/30/2001
Create Date:	11/14/1986
Last Act Date:	11/14/2014
Mailing Name:	Not reported
Mailing Address:	856 NOGALES AVE
Mailing Address 2:	Not reported
Mailing City,State,Zip:	WALNUT, CA 917894154
Owner Name:	THE OILMEN
Owner Address:	856 N NOGALES
Owner Address 2:	Not reported
Owner City,State,Zip:	WALNUT, CA 917890000
Contact Name:	JULIE ANN CASTRO
Contact Address:	856 N NOGALES
Contact Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000

E125 **FIRESTONE COMPLETE AUTO CARE # 7170** **RCRA NonGen / NLR** **1024830526**
NW **860 NOGALES AVE** **CAL000365642**
< 1/8 **WALNUT, CA 91789**
0.102 mi.
540 ft. **Site 1 of 4 in cluster E**

Relative: **Higher**

Actual: **610 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:	20110714
Handler Name:	FIRESTONE COMPLETE AUTO CARE # 7170
Handler Address:	860 NOGALES AVE
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000365642
Contact Name:	BRIDGESTONE RETAIL OPERATIONS, LLC
Contact Address:	333 EAST LAKE STREET
Contact City,State,Zip:	BLOOMINGDALE, IL 60108
Contact Telephone:	615-937-7515
Contact Fax:	615-493-3310
Contact Email:	ENVGEN@BFRC.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	333 EAST LAKE STREET
Mailing City,State,Zip:	BLOOMINGDALE, IL 60108-0000
Owner Name:	BRIDGESTONE RETAIL OPERATIONS, LLC
Owner Type:	Other
Operator Name:	BRIDGESTONE RETAIL OPERATIONS, LLC
Operator Type:	Other
Short-Term Generator Activity:	No

FIRESTONE COMPLETE AUTO CARE # 7170 (Continued) **1024830526**

Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180906
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

FIRESTONE COMPLETE AUTO CARE # 7170 (Continued) **1024830526**

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	BRIDGESTONE RETAIL OPERATIONS, LLC
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	333 EAST LAKE STREET
Owner/Operator City,State,Zip:	BLOOMINGDALE, IL 60108-0000
Owner/Operator Telephone:	615-937-7515
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	BRIDGESTONE RETAIL OPERATIONS, LLC
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	333 EAST LAKE STREET
Owner/Operator City,State,Zip:	BLOOMINGDALE, IL 60108
Owner/Operator Telephone:	615-937-7515
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20110714
Handler Name:	FIRESTONE COMPLETE AUTO CARE # 7170
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	45299
NAICS Description:	ALL OTHER GENERAL MERCHANDISE STORES

Facility Has Received Notices of Violations:

Violations:	No Violations Found

Evaluation Action Summary:

Evaluations:	No Evaluations Found

E126
NW
< 1/8
0.102 mi.
540 ft.

FIRESTONE TIRE & RUBBER
860 NOGALES AVE
WALNUT, CA 91789

Site 2 of 4 in cluster E

SWEEPS UST **S104537745**
LOS ANGELES CO. HMS **N/A**

Relative:
Higher

Actual:
610 ft.

SWEEPS UST:

Name:	FIRESTONE TIRE & RUBBER
Address:	860 N NOGALES ST
City:	WALNUT
Status:	Active
Comp Number:	7910
Number:	9
Board Of Equalization:	44-008231
Referral Date:	06-30-89
Action Date:	Not reported
Created Date:	06-30-89
Owner Tank Id:	Not reported
SWRCB Tank Id:	19-000-007910-000001
Tank Status:	A
Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	1

LOS ANGELES CO. HMS:

Name:	FIRESTONE TIRE & RUBBER
Address:	860 NOGALES AVE
City,State,Zip:	WALNUT, CA 917894181
Region:	LA
Permit Category:	T
Facility Id:	007522-007910
Facility Type:	0
Facility Status:	Removed
Area:	6L
Permit Number:	00005122T
Permit Status:	Removed

Name:	FIRESTONE COMPLETE AUTO CARE
Address:	860 NOGALES AVE
City,State,Zip:	WALNUT, CA 917894181
Region:	LA
Permit Category:	I
Facility Id:	007522-051488
Facility Type:	01
Facility Status:	Permit
Area:	6L
Permit Number:	000594481
Permit Status:	Permit

E127 **FIRESTONE STORE #27W3** **LUST** **S113027063**
NW **860 NOGALES** **Cortese** **N/A**
< 1/8 **WALNUT, CA 91789** **HAZNET**
0.102 mi. **CERS**
540 ft. **Site 3 of 4 in cluster E** **HWTS**

Relative: Higher
Actual: 610 ft.

LUST:

Name:	BRIDGESTONE/FIRESTONE STORE #7170
Address:	860 NOGALES AVE
City,State,Zip:	WALNUT, CA 91789
Lead Agency:	LOS ANGELES RWQCB (REGION 4)
Case Type:	LUST Cleanup Site
Geo Track:	http://geotracker.waterboards.ca.gov/profile_report.asp?global_id=T10000006819
Global Id:	T10000006819
Latitude:	34.02637
Longitude:	-117.89489
Status:	Completed - Case Closed
Status Date:	09/15/2016
Case Worker:	JC
RB Case Number:	R-07910
Local Agency:	Not reported
File Location:	Not reported
Local Case Number:	Not reported
Potential Media Affect:	Soil
Potential Contaminants of Concern:	Waste Oil / Motor / Hydraulic / Lubricating
Site History:	Not reported

LUST:

Global Id:	T10000006819
Contact Type:	Regional Board Caseworker
Contact Name:	JOSHUA CWIKLA
Organization Name:	LOS ANGELES RWQCB (REGION 4)
Address:	320 W. 4th Street, Suite 200
City:	LOS ANGELES
Email:	joshua.cwikla@waterboards.ca.gov
Phone Number:	2135766713

LUST:

Global Id:	T10000006819
Action Type:	ENFORCEMENT
Date:	07/23/2015
Action:	Staff Letter
Global Id:	T10000006819
Action Type:	ENFORCEMENT
Date:	02/03/2016
Action:	Staff Letter
Global Id:	T10000006819
Action Type:	ENFORCEMENT
Date:	06/07/2016
Action:	Notification - Preclosure
Global Id:	T10000006819
Action Type:	RESPONSE
Date:	03/07/2016
Action:	Preliminary Site Assessment Report
Global Id:	T10000006819

FIRESTONE STORE #27W3 (Continued) **S113027063**

Action Type: RESPONSE
Date: 02/03/2016
Action: Other Report / Document

Global Id: T10000006819
Action Type: RESPONSE
Date: 03/07/2016
Action: Soil and Water Investigation Report

Global Id: T10000006819
Action Type: ENFORCEMENT
Date: 09/15/2016
Action: Closure/No Further Action Letter

Global Id: T10000006819
Action Type: Other
Date: 05/04/2015
Action: Leak Discovery

Global Id: T10000006819
Action Type: RESPONSE
Date: 08/23/2015
Action: Other Report / Document

Global Id: T10000006819
Action Type: ENFORCEMENT
Date: 07/02/2015
Action: Staff Letter

Global Id: T10000006819
Action Type: Other
Date: 05/04/2015
Action: Leak Reported

Global Id: T10000006819
Action Type: ENFORCEMENT
Date: 05/04/2015
Action: Referral to Regional Board

Global Id: T10000006819
Action Type: ENFORCEMENT
Date: 12/07/2015
Action: Staff Letter

Global Id: T10000006819
Action Type: ENFORCEMENT
Date: 09/17/2015
Action: Staff Letter

Global Id: T10000006819
Action Type: Other
Date: 05/04/2015
Action: Leak Began

Global Id: T10000006819
Action Type: RESPONSE
Date: 08/27/2015

FIRESTONE STORE #27W3 (Continued) **S113027063**

Action: Request for Closure - Regulator Responded

Global Id: T10000006819
Action Type: RESPONSE
Date: 11/17/2015
Action: Soil and Water Investigation Workplan - Regulator Responded

LUST:
Global Id: T10000006819
Status: Open - Case Begin Date
Status Date: 05/04/2015

Global Id: T10000006819
Status: Open - Site Assessment
Status Date: 05/04/2015

Global Id: T10000006819
Status: Completed - Case Closed
Status Date: 09/15/2016

CORTESE:
Name: BRIDGESTONE/FIRESTONE STORE #7170
Address: 860 NOGALES AVE
City,State,Zip: WALNUT, CA 91789
Region: CORTESE
Envirostor Id: Not reported
Global ID: T10000006819
Site/Facility Type: LUST CLEANUP SITE
Cleanup Status: COMPLETED - CASE CLOSED
Status Date: Not reported
Site Code: Not reported
Latitude: Not reported
Longitude: Not reported
Owner: Not reported
Enf Type: Not reported
Swat R: Not reported
Flag: active
Order No: Not reported
Waste Discharge System No: Not reported
Effective Date: Not reported
Region 2: Not reported
WID Id: Not reported
Solid Waste Id No: Not reported
Waste Management Uit Name: Not reported
File Name: Active Open

HAZNET:
Name: FIRESTONE STORE #27W3
Address: 860 NOGALES
Address 2: Not reported
City,State,Zip: WALNUT, CA 917890000
Contact: JIM NASTOF
Telephone: 9495985509
Mailing Name: Not reported
Mailing Address: 333 E LAKE ST

FIRESTONE STORE #27W3 (Continued) **S113027063**

Year:	2011
Gepaid:	CAL000015727
TSD EPA ID:	NVT330010000
CA Waste Code:	343 - Unspecified organic liquid mixture
Disposal Method:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons:	0.075
Year:	2011
Gepaid:	CAL000015727
TSD EPA ID:	CAT080013352
CA Waste Code:	222 - Oil/water separation sludge
Disposal Method:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons:	6.255
Year:	2011
Gepaid:	CAL000015727
TSD EPA ID:	NVT330010000
CA Waste Code:	352 - Other organic solids
Disposal Method:	H132 - Landfill Or Surface Impoundment That Will Be Closed As Landfill(To Include On-Site Treatment And/Or Stabilization)
Tons:	0.15
Year:	2010
Gepaid:	CAL000015727
TSD EPA ID:	NVT330010000
CA Waste Code:	352 - Other organic solids
Disposal Method:	H132 - Landfill Or Surface Impoundment That Will Be Closed As Landfill(To Include On-Site Treatment And/Or Stabilization)
Tons:	0.075
Year:	2010
Gepaid:	CAL000015727
TSD EPA ID:	CAT080013352
CA Waste Code:	222 - Oil/water separation sludge
Disposal Method:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons:	5.2125
Year:	2009
Gepaid:	CAL000015727
TSD EPA ID:	CAD981696420
CA Waste Code:	135 - Unspecified aqueous solution
Disposal Method:	H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)
Tons:	0.294
Year:	2007
Gepaid:	CAL000015727
TSD EPA ID:	CAD028409019
CA Waste Code:	343 - Unspecified organic liquid mixture
Disposal Method:	H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)
Tons:	0.051
Year:	2005

FIRESTONE STORE #27W3 (Continued) **S113027063**

Gepaid:	CAL000015727
TSD EPA ID:	CAD981696420
CA Waste Code:	352 - Other organic solids
Disposal Method:	-
Tons:	0.2
Year:	2001
Gepaid:	CAL000015727
TSD EPA ID:	CAD981696420
CA Waste Code:	221 - Waste oil and mixed oil
Disposal Method:	R01 - Recycler
Tons:	3.8
Year:	2000
Gepaid:	CAL000015727
TSD EPA ID:	CAD981696420
CA Waste Code:	134 - Aqueous solution with total organic residues less than 10 percent
Disposal Method:	H01 - Transfer Station
Tons:	0.126

Click this hyperlink while viewing on your computer to access
13 additional CA HAZNET: record(s) in the EDR Site Report.

Additional Info:

Year:	2011
Gen EPA ID:	CAL000015727
Shipment Date:	20110720
Creation Date:	2/7/2012 20:30:12
Receipt Date:	20110728
Manifest ID:	002874411SKS
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	OKD981588791
Trans 2 Name:	TRIAD TRANSPORT
TSDF EPA ID:	NVT330010000
Trans Name:	US ECOLOGY NEVADA
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	0.075
Waste Quantity:	150
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20110720
Creation Date:	2/7/2012 20:30:12
Receipt Date:	20110728

FIRESTONE STORE #27W3 (Continued) **S113027063**

Manifest ID:	002874411SKS
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	OKD981588791
Trans 2 Name:	TRIAD TRANSPORT
TSDF EPA ID:	NVT330010000
Trans Name:	US ECOLOGY NEVADA
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	352 - Other organic solids
RCRA Code:	Not reported
Meth Code:	H132 - Landfill Or Surface Impoundment That Will Be Closed As Landfill(To Include On-Site Treatment And/Or Stabilization)
Quantity Tons:	0.15
Waste Quantity:	300
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20110203
Creation Date:	4/1/2011 18:30:28
Receipt Date:	20110204
Manifest ID:	003817700FLE
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT080013352
Trans Name:	DEMENNO / KERDOON
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	222 - Oil/water separation sludge
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	6.255
Waste Quantity:	1500
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2001
Gen EPA ID:	CAL000015727
Shipment Date:	20011101
Creation Date:	12/17/2001 0:00:00
Receipt Date:	20011101
Manifest ID:	20809232
Trans EPA ID:	CAD982413262
Trans Name:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	3.8
Waste Quantity:	1000
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1996
Gen EPA ID:	CAL000015727
Shipment Date:	19960307
Creation Date:	10/16/1996 0:00:00
Receipt Date:	19960307
Manifest ID:	95861709
Trans EPA ID:	CAL000027724
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	222 - Oil/water separation sludge
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	3.5445
Waste Quantity:	850
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1999
Gen EPA ID:	CAL000015727
Shipment Date:	19990104
Creation Date:	2/26/1999 0:00:00
Receipt Date:	19990104
Manifest ID:	98679071
Trans EPA ID:	ILD984908202
Trans Name:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Trans 2 EPA ID:	SCD987574647
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.0168
Waste Quantity:	4
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19990104
Creation Date:	2/26/1999 0:00:00
Receipt Date:	19990104
Manifest ID:	98679071
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	SCD987574647
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	D039
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.063
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1997
Gen EPA ID:	CAL000015727

Shipment Date:	19971107
Creation Date:	3/18/1998 0:00:00
Receipt Date:	19971112
Manifest ID:	96381520
Trans EPA ID:	CAL000027724
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	2.85
Waste Quantity:	750
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19970619
Creation Date:	12/4/1997 0:00:00
Receipt Date:	19970630
Manifest ID:	96723232
Trans EPA ID:	CAL000027724
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD982444481
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	223 - Unspecified oil-containing waste
RCRA Code:	Not reported
Meth Code:	R01 - Recycler
Quantity Tons:	0.125
Waste Quantity:	250
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1995
Gen EPA ID:	CAL000015727
Shipment Date:	19950919
Creation Date:	7/26/1996 0:00:00
Receipt Date:	19951006
Manifest ID:	95676670
Trans EPA ID:	CAL000027724
Trans Name:	Not reported
Trans 2 EPA ID:	TXD988052494
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD059494310
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	223 - Unspecified oil-containing waste
RCRA Code:	Not reported
Meth Code:	D99 - Disposal, Other
Quantity Tons:	0.05

FIRESTONE STORE #27W3 (Continued) **S113027063**

Waste Quantity:	100
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	19950418
Creation Date:	3/29/1996 0:00:00
Receipt Date:	19950418
Manifest ID:	95288709
Trans EPA ID:	CAL000027724
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	CAD981696420
TSDF Alt Name:	Not reported
Waste Code Description:	222 - Oil/water separation sludge
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	3.753
Waste Quantity:	900
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2010
Gen EPA ID:	CAL000015727
Shipment Date:	20100611
Creation Date:	1/24/2011 18:30:16
Receipt Date:	20100624
Manifest ID:	003347510FLE
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	OKD981588791
Trans 2 Name:	TRIAD
TSDF EPA ID:	NVT330010000
Trans Name:	US ECOLOGY NEVADA
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	352 - Other organic solids
RCRA Code:	Not reported
Meth Code:	H132 - Landfill Or Surface Impoundment That Will Be Closed As Landfill(To Include On-Site Treatment And/Or Stabilization)
Quantity Tons:	0.075
Waste Quantity:	150
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20100128
Creation Date:	4/12/2010 18:31:28
Receipt Date:	20100129
Manifest ID:	002364278SKS
Trans EPA ID:	TXR000050930
Trans Name:	SAFETY-KLEEN SYSTEMS INC
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT080013352
Trans Name:	DEMENNO / KERDOON
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	222 - Oil/water separation sludge
RCRA Code:	Not reported
Meth Code:	H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Quantity Tons:	5.2125
Waste Quantity:	1250
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2007
Gen EPA ID:	CAL000015727
Shipment Date:	20070501
Creation Date:	10/10/2007 18:30:16
Receipt Date:	20070507
Manifest ID:	001826235JJK
Trans EPA ID:	CAD982413262
Trans Name:	EVERGREEN ENVIRONMENTAL SERVICE
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD028409019
Trans Name:	CROSBY & OVERTON
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	343 - Unspecified organic liquid mixture
RCRA Code:	Not reported
Meth Code:	H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)
Quantity Tons:	0.051
Waste Quantity:	15
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Additional Info:

Year:	2005
Gen EPA ID:	CAL000015727
Shipment Date:	20051115
Creation Date:	1/3/2007 18:30:08
Receipt Date:	20051115
Manifest ID:	24338272
Trans EPA ID:	CAD981696420
Trans Name:	EVERGREEN ENVIRONMENTAL SVCS
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	EVERGREEN ENVIRONMENTAL SVCS
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	352 - Other organic solids
RCRA Code:	Not reported
Meth Code:	- Not reported
Quantity Tons:	0.2
Waste Quantity:	400
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1998
Gen EPA ID:	CAL000015727
Shipment Date:	19981106
Creation Date:	1/5/1999 0:00:00
Receipt Date:	19981110
Manifest ID:	97244118
Trans EPA ID:	CAD982413262
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.38
Waste Quantity:	100
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Shipment Date:	19981005
Creation Date:	12/7/1998 0:00:00
Receipt Date:	19981012
Manifest ID:	98641765
Trans EPA ID:	CAD982413262
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	221 - Waste oil and mixed oil
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	3.04
Waste Quantity:	800
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2009
Gen EPA ID:	CAL000015727

Shipment Date:	20090310
Creation Date:	4/14/2009 18:30:30
Receipt Date:	20090310
Manifest ID:	004265023JJK
Trans EPA ID:	CAD982413262
Trans Name:	EVERGREEN ENVIRONMENTAL SERVICES
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	EVERGREEN ENVIRONMENTAL SERVICES
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	135 - Unspecified aqueous solution
RCRA Code:	Not reported
Meth Code:	H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)
Quantity Tons:	0.294
Waste Quantity:	70
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	1993
Gen EPA ID:	CAL000015727

FIRESTONE STORE #27W3 (Continued) **S113027063**

Shipment Date:	19930816
Creation Date:	9/12/1995 0:00:00
Receipt Date:	19930817
Manifest ID:	92146738
Trans EPA ID:	ILD984908202
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	CAT000613893
TSDF Alt Name:	Not reported
Waste Code Description:	341 - Organic liquids (nonsolvents) with halogens
RCRA Code:	D008
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.249
Waste Quantity:	498
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Shipment Date:	19930503
Creation Date:	9/14/1995 0:00:00
Receipt Date:	Not reported
Manifest ID:	92146767
Trans EPA ID:	ILD051060408
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAT000613893
Trans Name:	Not reported
TSDF Alt EPA ID:	CAT000613893
TSDF Alt Name:	Not reported
Waste Code Description:	341 - Organic liquids (nonsolvents) with halogens
RCRA Code:	D008
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.249
Waste Quantity:	498
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

Additional Info:

Year:	2000
Gen EPA ID:	CAL000015727

Shipment Date:	20001211
Creation Date:	3/6/2001 0:00:00
Receipt Date:	20001218
Manifest ID:	20117077
Trans EPA ID:	CAD982413262

FIRESTONE STORE #27W3 (Continued) **S113027063**

Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD028409019
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	352 - Other organic solids
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.015
Waste Quantity:	30
Quantity Unit:	P
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20000323
Creation Date:	5/17/2000 0:00:00
Receipt Date:	20000323
Manifest ID:	98740789
Trans EPA ID:	CAD982413262
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD981696420
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	134 - Aqueous solution with <10% total organic residues
RCRA Code:	Not reported
Meth Code:	H01 - Transfer Station
Quantity Tons:	0.126
Waste Quantity:	30
Quantity Unit:	G
Additional Code 1:	Not reported
Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported
Shipment Date:	20000323
Creation Date:	5/30/2000 0:00:00
Receipt Date:	20000331
Manifest ID:	96551414
Trans EPA ID:	CAD982413262
Trans Name:	Not reported
Trans 2 EPA ID:	Not reported
Trans 2 Name:	Not reported
TSDF EPA ID:	CAD982444481
Trans Name:	Not reported
TSDF Alt EPA ID:	Not reported
TSDF Alt Name:	Not reported
Waste Code Description:	352 - Other organic solids
RCRA Code:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Meth Code: R01 - Recycler
Quantity Tons: 0.0875
Waste Quantity: 175
Quantity Unit: P
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Additional Info:
Year: 1994
Gen EPA ID: CAL000015727

Shipment Date: 19941123
Creation Date: 3/28/1996 0:00:00
Receipt Date: 19941215
Manifest ID: 93582626
Trans EPA ID: CAL000027724
Trans Name: Not reported
Trans 2 EPA ID: TXD988052494
Trans 2 Name: Not reported
TSDF EPA ID: CAD059494310
Trans Name: Not reported
TSDF Alt EPA ID: CAD059494310
TSDF Alt Name: Not reported
Waste Code Description: 223 - Unspecified oil-containing waste
RCRA Code: Not reported
Meth Code: D99 - Disposal, Other
Quantity Tons: 0.125
Waste Quantity: 250
Quantity Unit: P
Additional Code 1: Not reported
Additional Code 2: Not reported
Additional Code 3: Not reported
Additional Code 4: Not reported
Additional Code 5: Not reported

Shipment Date: 19940113
Creation Date: 9/14/1995 0:00:00
Receipt Date: 19940114
Manifest ID: 93034993
Trans EPA ID: ILD984908202
Trans Name: Not reported
Trans 2 EPA ID: Not reported
Trans 2 Name: Not reported
TSDF EPA ID: CAT000613893
Trans Name: Not reported
TSDF Alt EPA ID: CAT000613893
TSDF Alt Name: Not reported
Waste Code Description: 341 - Organic liquids (nonsolvents) with halogens
RCRA Code: D008
Meth Code: H01 - Transfer Station
Quantity Tons: 0.249
Waste Quantity: 498
Quantity Unit: P
Additional Code 1: Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Additional Code 2:	Not reported
Additional Code 3:	Not reported
Additional Code 4:	Not reported
Additional Code 5:	Not reported

CERS:

Name:	BRIDGESTONE/FIRESTONE STORE #7170
Address:	860 NOGALES AVE
City,State,Zip:	WALNUT, CA 91789
Site ID:	272691
CERS ID:	T10000006819
CERS Description:	Leaking Underground Storage Tank Cleanup Site

Affiliation:

Affiliation Type Desc:	Regional Board Caseworker
Entity Name:	JOSHUA CWIKLA - LOS ANGELES RWQCB (REGION 4)
Entity Title:	Not reported
Affiliation Address:	320 W. 4th Street, Suite 200
Affiliation City:	LOS ANGELES
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	2135766713

HWTS:

Name:	FIRESTONE STORE #27W3
Address:	860 NOGALES
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 917890000
EPA ID:	CAL000015727
Inactive Date:	03/20/2012
Create Date:	11/14/1989
Last Act Date:	12/27/2012
Mailing Name:	BSRO DEBRA HAMLIN
Mailing Address:	333 E LAKE ST
Mailing Address 2:	Not reported
Mailing City,State,Zip:	BLOOMINGDALE, IL 601080000
Owner Name:	BFS RETAIL & COMMERICAL LLC
Owner Address:	24031 EL TORO RD STE 250
Owner Address 2:	Not reported
Owner City,State,Zip:	LAGUNA HILLS, CA 926532261
Contact Name:	JIM NASTOF
Contact Address:	24361 EL TORO RD STE 250
Contact Address 2:	Not reported
City,State,Zip:	LAGUNA HILLS, CA 926370000

NAICS:

EPA ID:	CAL000015727
Create Date:	2002-03-14 16:36:27.000
NAICS Code:	4413
NAICS Description:	Automotive Parts, Accessories, and Tire Stores
Issued EPA ID Date:	1989-11-14 00:00:00
Inactive Date:	2012-03-20 00:00:00
Facility Name:	FIRESTONE STORE #27W3
Facility Address:	860 NOGALES
Facility Address 2:	Not reported

FIRESTONE STORE #27W3 (Continued) **S113027063**

Facility City: WALNUT
Facility County: Not reported
Facility State: CA
Facility Zip: 917890000

E128 **FIRESTONE COMPLETE AUTO CARE #006378** **CERS HAZ WASTE** **S123499628**
NW **860 NOGALES ST** **CERS** **N/A**
< 1/8 **WALNUT, CA 91789**
0.111 mi.
584 ft. **Site 4 of 4 in cluster E**

Relative:
Higher

Actual:
604 ft.

CERS HAZ WASTE:
Name: FIRESTONE COMPLETE AUTO CARE #006378
Address: 860 NOGALES ST
City,State,Zip: WALNUT, CA 91789
Site ID: 116637
CERS ID: 10157821
CERS Description: Hazardous Waste Generator

CERS:
Name: FIRESTONE COMPLETE AUTO CARE #006378
Address: 860 NOGALES ST
City,State,Zip: WALNUT, CA 91789
Site ID: 116637
CERS ID: 10157821
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 116637
Site Name: Firestone Complete Auto Care #006378
Violation Date: 06-02-2016
Citation: 22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description: Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes: Returned to compliance on 06/17/2016. Provide disposal receipts/manifests for the disposal of oily solids; absorbents, pads, etc. As observed lacking.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 116637
Site Name: Firestone Complete Auto Care #006378
Violation Date: 06-02-2016
Citation: 40 CFR 1 265.31 - U.S. Code of Federal Regulations, Title 40, Chapter 1, Section(s) 265.31
Violation Description: Failure to maintain and operate the facility to minimize the possibility of a fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water which could threaten human health or the environment.
Violation Notes: Returned to compliance on 06/17/2016. Perform general house-keeping in the waste oil storage room. Observed accumulation of waste oil on top

FIRESTONE COMPLETE AUTO CARE #006378 (Continued) **S123499628**

of the waste oil tank and oily rags and pads on top of and under the waste oil tank.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 12-18-2019
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: George T. Gonzalez, Store Manager
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Other/Unknown
Eval Date: 06-17-2016
Violations Found: No
Eval Type: Other, not routine, done by local agency
Eval Notes: Not reported
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 12-18-2019
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: George T. Gonzalez, Store Manager
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-02-2016
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Tim Adams
Eval Division: Los Angeles County Fire Department
Eval Program: HMRRP
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 06-02-2016
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: Tim Adams
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Affiliation:
Affiliation Type Desc: Environmental Contact
Entity Name: Dain Brandrup-BSRO
Entity Title: Not reported

FIRESTONE COMPLETE AUTO CARE #006378 (Continued) **S123499628**

Affiliation Address:	200 4th Avenue South Attn: Environmental-BSRO
Affiliation City:	Nashville
Affiliation State:	TN
Affiliation Country:	Not reported
Affiliation Zip:	37201
Affiliation Phone:	Not reported
Affiliation Type Desc:	Legal Owner
Entity Name:	Bridgestone Retail Operations, LLC
Entity Title:	Not reported
Affiliation Address:	200 4th Ave South Attn: Environmental-BSRO
Affiliation City:	Nashville
Affiliation State:	TN
Affiliation Country:	United States
Affiliation Zip:	37201
Affiliation Phone:	(615) 937-9520
Affiliation Type Desc:	Operator
Entity Name:	FIRESTONE COMPLETE AUTO CARE
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 965-2224
Affiliation Type Desc:	Parent Corporation
Entity Name:	Bridgestone Retail Operations, LLC. (BSRO)
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Identification Signer
Entity Name:	Nicole Remsburg
Entity Title:	Environmental Scientist
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Property Owner
Entity Name:	Bridgestone Retail Operations, LLC
Entity Title:	Not reported
Affiliation Address:	200 4th Ave South Attn: Environmental-BSRO
Affiliation City:	Nashville
Affiliation State:	TN
Affiliation Country:	United States
Affiliation Zip:	37201
Affiliation Phone:	(630) 259-9379

FIRESTONE COMPLETE AUTO CARE #006378 (Continued) **S123499628**

Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Document Preparer
Entity Name:	Nicole Remsburg
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Facility Mailing Address
Entity Name:	Mailing Address
Entity Title:	Not reported
Affiliation Address:	200 4th Ave South Attn: Environmental-BSRO
Affiliation City:	Nashville
Affiliation State:	TN
Affiliation Country:	Not reported
Affiliation Zip:	37201
Affiliation Phone:	Not reported

F129 **MOBIL STATION** **EDR Hist Auto** **1022050242**
WSW **2422 FELICIA ST** **N/A**
< 1/8 **WEST COVINA, CA 91792**
0.111 mi.
585 ft. **Site 1 of 3 in cluster F**

Relative: EDR Hist Auto
Lower

Actual: **581 ft.**

Year:	Name:	Type:
1986	MOBIL STATION	Gasoline Service Stations
1987	MOBIL STATION	Gasoline Service Stations

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130 **ELMER GIBSON** **RCRA NonGen / NLR** **1026473421**
South **2433 GAIL COURT** **CAC003079087**
< 1/8 **WEST COVINA, CA 91792**
0.115 mi.
606 ft.

Relative: RCRA NonGen / NLR:
Lower

Actual: **561 ft.**

Date Form Received by Agency:		20200812
Handler Name:	ELMER GIBSON	
Handler Address:		2433 GAIL COURT
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC003079087
Contact Name:		ELMER GIBSON

ELMER GIBSON (Continued) **1026473421**

Contact Address:	2433 GAIL COURT
Contact City,State,Zip:	WEST COVINA, CA 91792
Contact Telephone:	626-329-4570
Contact Fax:	Not reported
Contact Email:	KARLA@SUPERIORENV.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Not reported
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	2433 GAIL COURT
Mailing City,State,Zip:	WEST COVINA, CA 91792
Owner Name:	ELMER GIBSON
Owner Type:	Other
Operator Name:	ELMER GIBSON
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	No
Universal Waste Destination Facility:	No
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking

ELMER GIBSON (Continued) **1026473421**

Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20200814
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	ELMER GIBSON
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2433 GAIL COURT
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-329-4570
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	ELMER GIBSON
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2433 GAIL COURT
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	626-329-4570
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20200812
Handler Name: ELMER GIBSON	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No

ELMER GIBSON (Continued) **1026473421**

Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

131
ESE
< 1/8
0.119 mi.
628 ft.

TEXACO CAR CARE CENTER
18935 TRUCKE WAY
WALNUT, CA 91789

EDR Hist Auto **1020651905**
N/A

Relative:
Higher

Actual:
613 ft.

EDR Hist Auto

Year:	Name:	Type:
1995	TEXACO CAR CARE CENTER	Gasoline Service Stations

F132
WSW
1/8-1/4
0.138 mi.
727 ft.

MARGIE URIAS
3114 FAITH ST
WEST COVINA, CA 91792

RCRA NonGen / NLR **1024755381**
CAC002975203

Site 2 of 3 in cluster F

Relative:
Lower

Actual:
582 ft.

RCRA NonGen / NLR:

Date Form Received by Agency:		20180810
Handler Name:	MARGIE URIAS	
Handler Address:		3114 FAITH ST
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC002975203
Contact Name:		MARGIE URIAS
Contact Address:		3114 FAITH ST
Contact City,State,Zip:		WEST COVINA, CA 91792
Contact Telephone:		626-839-5616
Contact Fax:		Not reported
Contact Email:		KC@AQHIINC.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		3114 FAITH ST

MARGIE URIAS (Continued) **1024755381**

Mailing City,State,Zip:	WEST COVINA, CA 91792
Owner Name:	MARGIE URIAS
Owner Type:	Other
Operator Name:	MARGIE URIAS
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180831
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No

MARGIE URIAS (Continued) **1024755381**

Recycler Activity Without Storage: No
Manifest Broker: No
Sub-Part P Indicator: No

Handler - Owner Operator:
Owner/Operator Indicator: Operator
Owner/Operator Name: MARGIE URIAS
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 3114 FAITH ST
Owner/Operator City,State,Zip: WEST COVINA, CA 91792
Owner/Operator Telephone: 626-839-5616
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Owner/Operator Indicator: Owner
Owner/Operator Name: MARGIE URIAS
Legal Status: Other
Date Became Current: Not reported
Date Ended Current: Not reported
Owner/Operator Address: 3114 FAITH ST
Owner/Operator City,State,Zip: WEST COVINA, CA 91792
Owner/Operator Telephone: 626-839-5616
Owner/Operator Telephone Ext: Not reported
Owner/Operator Fax: Not reported
Owner/Operator Email: Not reported

Historic Generators:
Receive Date: 20180810
Handler Name: MARGIE URIAS
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

F133 **ISAGO, SUZANNE** **RCRA NonGen / NLR** **1024769916**
West **2401 FELICIA STREET** **CAC002989815**
1/8-1/4 **WEST COVINA, CA 91792**
0.143 mi.
755 ft. **Site 3 of 3 in cluster F**

Relative: **Higher**
Actual: **594 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:		20181119
Handler Name:	ISAGO, SUZANNE	
Handler Address:		2401 FELICIA STREET
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC002989815
Contact Name:		ISAGO, SUZANNE
Contact Address:		2401 FELICIA STREET
Contact City,State,Zip:		WEST COVINA, CA 91792
Contact Telephone:		909-377-8625
Contact Fax:		Not reported
Contact Email:		ANDREWC@PWSEI.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Handler Activities
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		2401 FELICIA STREET
Mailing City,State,Zip:		WEST COVINA, CA 91792
Owner Name:		ISAGO, SUZANNE
Owner Type:		Other
Operator Name:		ISAGO, SUZANNE
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No
Transporter Activity:		No
Transfer Facility Activity:		No
Recycler Activity with Storage:		No
Small Quantity On-Site Burner Exemption:		No
Smelting Melting and Refining Furnace Exemption:		No
Underground Injection Control:		No
Off-Site Waste Receipt:		No
Universal Waste Indicator:		Yes
Universal Waste Destination Facility:		Yes
Federal Universal Waste:		No
Active Site Fed-Reg Treatment Storage and Disposal Facility:		Not reported
Active Site Converter Treatment storage and Disposal Facility:		Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:		Not reported
Active Site State-Reg Handler:		---
Federal Facility Indicator:		Not reported
Hazardous Secondary Material Indicator:		N
Sub-Part K Indicator:		Not reported
Commercial TSD Indicator:		No
Treatment Storage and Disposal Type:		Not reported
2018 GPRA Permit Baseline:		Not on the Baseline
2018 GPRA Renewals Baseline:		Not on the Baseline
Permit Renewals Workload Universe:		Not reported

ISAGO, SUZANNE (Continued) **1024769916**

Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20181120
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	ISAGO, SUZANNE
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2401 FELICIA STREET
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	909-377-8625
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	ISAGO, SUZANNE
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	2401 FELICIA STREET
Owner/Operator City,State,Zip:	WEST COVINA, CA 91792
Owner/Operator Telephone:	909-377-8625
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

ISAGO, SUZANNE (Continued) **1024769916**

Historic Generators:
Receive Date: 20181119
Handler Name: ISAGO, SUZANNE
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 56299
NAICS Description: ALL OTHER WASTE MANAGEMENT SERVICES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

G134 **WALNUT 76 INC** **CERS HAZ WASTE** **S118495593**
NNW **18702 AMAR RD** **CERS TANKS** **N/A**
1/8-1/4 **WALNUT, CA 91789** **LOS ANGELES CO. HMS**
0.157 mi. **CERS**
828 ft. **Site 1 of 9 in cluster G**

Relative: Higher
Actual: 643 ft.

CERS HAZ WASTE:
Name: WALNUT 76 INC
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 407348
CERS ID: 10286740
CERS Description: Hazardous Waste Generator

CERS TANKS:
Name: WALNUT 76 INC
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 407348
CERS ID: 10286740
CERS Description: Underground Storage Tank

LOS ANGELES CO. HMS:
Name: WALNUT 76 INC
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 917894168
Region: LA
Permit Category: T
Facility Id: 007681-055011
Facility Type: 0

WALNUT 76 INC (Continued) **S118495593**

Facility Status: Permit
Area: 6L
Permit Number: 000658551
Permit Status: Permit

CERS:
Name: WALNUT 76 INC
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 407348
CERS ID: 10286740
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-09-2020
Citation: HSC 6.7 25290.1(c),25290.2(c),25291(a)(2),2529.1(e) - California Health and Safety Code, Chapter 6.7, Section(s) 25290.1(c),25290.2(c),25291(a)(2),2529.1(e)
Violation Description: Failure to maintain secondary containment (e.g., failure of secondary containment testing).
Violation Notes: Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-09-2020
Citation: 23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description: Failure to have current UST Monitoring Plan available on site.
Violation Notes: Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-18-2019
Citation: 23 CCR 16 2712(b)(1)(G) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)(1)(G)
Violation Description: Failure to comply with one or more of the following overfill prevention equipment requirements: Alert the transfer operator when the tank is 90 percent full by restricting the flow into the tank or triggering an audible and visual alarm; or Restrict delivery of flow to the tank at least 30 minutes before the tank overfills, provided the restriction occurs when the tank is filled to no more than 95 percent of capacity; and activate an audible alarm at least five minutes before the tank overfills; or Provide positive shut-off of flow to the tank when the tank is filled to no more than 95 percent of capacity; or Provide positive shut-off of flow to the tank so that

WALNUT 76 INC (Continued) **S118495593**

none of the fittings located on the top of the tank are exposed to product due to overfilling. Install/retrofit overfill prevention equipment that does not use flow restrictors on vent piping to meet overfill prevention equipment requirements when the overfill prevention equipment is installed, repaired, or replaced on and after October 1,- 2018. For USTs installed before October 1, 2018, perform an inspection by October 13, 2018 and every 36 months thereafter. For USTs installed on and after October- 1,- 2018, perform an inspection at installation and every 36 months thereafter. Inspected within 30 days after a repair to the overfill prevention equipment. Inspected using an applicable manufacturer guidelines, industry codes, engineering standards, or a method approved by a professional engineer. Inspected by a certified UST service technician. Maintain records of overfill prevention equipment inspection for 36 months.

Violation Notes: Returned to compliance on 10/23/2019. NOVC:CERS(FRCT,CFO LETTER,UST U&C FORM),TOVFL PERFORMED LATE. UPLOAD CERS CORRECTIONS OUTLINED IN EMAIL.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-16-2018
Citation: HSC 6.7 25284, 25286 - California Health and Safety Code, Chapter 6.7, Section(s) 25284, 25286
Violation Description: Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-16-2018
Citation: 23 CCR 16 2712(f) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(f)
Violation Description: Failure to implement the corrections specified in the inspection report within 30 calendar days of receiving an inspection report from either the UPA or special inspector.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 03-08-2013
Citation: HSC 6.95 25505(a) - California Health and Safety Code, Chapter 6.95, Section(s) 25505(a)
Violation Description: Owner/Operator failed to complete and/or submit a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet.
Violation Notes: Update largest container size
Violation Division: Los Angeles County Fire Department
Violation Program: HMRRP

WALNUT 76 INC (Continued) **S118495593**

Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-03-2014
Citation:	HSC 6.7 25284(a)(3) - California Health and Safety Code, Chapter 6.7, Section(s) 25284(a)(3)
Violation Description:	Failure to submit, maintain, or implement an owner/operator written agreement.
Violation Notes:	Returned to compliance on 10/20/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-18-2017
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Monitoring Plan.
Violation Notes:	Returned to compliance on 07/25/2018.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2715 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2715
Violation Description:	Failure to comply with one or more of the designated operator monthly inspection requirements: failed to inspect the monthly alarm history report; attach a copy of the alarm history; failed to inspect for the presence of liquid or debris in the spill container/spill bucket and under dispenser containment; failed to inspect the under dispenser containment to ensure that monitoring equipment is placed in the proper position; failure to inspect for liquid or debris in the containment sump where an alarm occurred or for which there is no record of a service visit; or failure to check that all testing and maintenance has been completed and documented.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to submit, obtain approval, or maintain a complete/accurate response plan.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

WALNUT 76 INC (Continued) **S118495593**

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-03-2014
Citation:	HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description:	Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes:	Returned to compliance on 10/20/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2638 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2638
Violation Description:	Failure to test leak detection equipment as required every 12 months (VPH, sensor, LLD, ATG, etc.) and/or submit monitoring system certification to the CUPA within 30 days of completion of the test
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-09-2020
Citation:	23 CCR 16 2641(h) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2641(h)
Violation Description:	Failure to have an approved UST Monitoring Plan.
Violation Notes:	Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2712(f) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(f)
Violation Description:	Failure to implement the corrections specified in the inspection report within 30 calendar days of receiving an inspection report from either the local agency or the special inspector.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to maintain on site an approved monitoring plan.

WALNUT 76 INC (Continued) **S118495593**

Violation Notes: Returned to compliance on 09/28/2015.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-18-2017
Citation: 23 CCR 16 2638(d) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2638(d)
Violation Description: Failure to submit the Annual Monitoring System Certification Form to the CUPA within 30 days of completion of the test.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-29-2015
Citation: HSC 6.7 25299 - California Health and Safety Code, Chapter 6.7, Section(s) 25299
Violation Description: Failure to comply with one or more of the operating permit conditions.
Violation Notes: Returned to compliance on 09/28/2015.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-16-2018
Citation: 23 CCR 16 2638(d) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2638(d)
Violation Description: Failure to submit the Annual Monitoring System Certification Form to the UPA within 30 days of completion of the test.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-18-2017
Citation: 23 CCR 6.7 25284, 25286 - California Code of Regulations, Title 23, Chapter 6.7, Section(s) 25284, 25286
Violation Description: Failure to submit a complete and accurate application for a permit to operate a UST, or for renewal of the permit.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-16-2018
Citation: HSC 6.7 25290.1(c)(3),25290.2(c)(3) - California Health and Safety Code, Chapter 6.7, Section(s) 25290.1(c)(3),25290.2(c)(3)

WALNUT 76 INC (Continued) **S118495593**

Violation Description: Failure to keep water out of the secondary containment of UST systems installed on or after July 1, 2003.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-18-2017
Citation: HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description: Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes: Returned to compliance on 07/25/2018.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 01-17-2020
Citation: HSC 6.5 25123.3(h)(1) - California Health and Safety Code, Chapter 6.5, Section(s) 25123.3(h)(1)
Violation Description: Failure to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles) for a generator who generates less than 1000 kilogram per month if all of the following conditions are met: (1) The quantity of hazardous waste accumulated onsite never exceeds 6,000 kilograms. (2) The generator complies with the requirements of 40 Code of Federal Regulations section 262.34(d), (e) and (f). (3) The generator does not hold acutely hazardous waste or extremely hazardous waste in an amount greater than one kilogram for more than 90 days.
Violation Notes: Returned to compliance on 01/29/2020. OBSERVATION: Owner/Operator is a small quantity generator and failed to send hazardous waste offsite for treatment, storage, or disposal within 180 days (or 270 days if waste is transported over 200 miles), or has failed to comply with the conditions of CCR 66262.34(d) and has stored hazardous waste over 90 days. CORRECTIVE ACTION: Dispose of hazardous waste (waste coolant) that has been stored over the applicable time limit and provide documentation that the violation has been corrected.
Violation Division: Los Angeles County Fire Department
Violation Program: HW
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-29-2015
Citation: HSC 6.7 25286(a) - California Health and Safety Code, Chapter 6.7, Section(s) 25286(a)
Violation Description: Failure to submit an complete and accurate application for a permit to operate an underground storage tank, or for renewal of the permit.
Violation Notes: Returned to compliance on 09/28/2015.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

WALNUT 76 INC (Continued) **S118495593**

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-18-2019
Citation:	HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description:	Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes:	Returned to compliance on 10/23/2019. NOVC:CERS(FRCT,CFO LETTER,UST U&C FORM),TOVFL PERFORMED LATE. UPLOAD CERS CORRECTIONS OUTLINED IN EMAIL.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-09-2020
Citation:	HSC 6.7 25293 - California Health and Safety Code, Chapter 6.7, Section(s) 25293
Violation Description:	Failure to maintain UST records in sufficient detail to enable the UPA to determine whether the UST systems are in compliance.
Violation Notes:	Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-03-2014
Citation:	HSC 6.7 25286(a) - California Health and Safety Code, Chapter 6.7, Section(s) 25286(a)
Violation Description:	Failure to submit an complete and accurate application for a permit to operate an underground storage tank, or for renewal of the permit.
Violation Notes:	Returned to compliance on 10/20/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-18-2019
Citation:	23 CCR 16 2715(a)(2) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2715(a)(2)
Violation Description:	Failure to submit the G Underground Storage Tank Statement of Understanding and Compliance Form.G
Violation Notes:	Returned to compliance on 10/23/2019. NOVC:CERS(FRCT,CFO LETTER,UST U&C FORM),TOVFL PERFORMED LATE. UPLOAD CERS CORRECTIONS OUTLINED IN EMAIL.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS

Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-18-2017

WALNUT 76 INC (Continued) **S118495593**

Citation:	23 CCR 16 2712(i) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(i)
Violation Description:	Failure to have a UST Monitoring Plan available on site.
Violation Notes:	Returned to compliance on 07/25/2018.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-16-2018
Citation:	23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description:	Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes:	Returned to compliance on 07/25/2018.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	HSC 6.7 25284.2 - California Health and Safety Code, Chapter 6.7, Section(s) 25284.2
Violation Description:	Failure to test the spill bucket annually.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	23 CCR 16 2711(a)(8) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2711(a)(8)
Violation Description:	Failure to submit, obtain approval, or maintain a complete/accurate plot plan.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC
Violation Date:	07-29-2015
Citation:	HSC 6.75 25299.30-25299.34 - California Health and Safety Code, Chapter 6.75, Section(s) 25299.30-25299.34
Violation Description:	Failure to submit and maintain complete and current Certification of Financial Responsibility or other mechanism of financial assurance.
Violation Notes:	Returned to compliance on 09/28/2015.
Violation Division:	Los Angeles County Department of Public Works
Violation Program:	UST
Violation Source:	CERS
Site ID:	407348
Site Name:	WALNUT 76 INC

WALNUT 76 INC (Continued) **S118495593**

Violation Date: 07-09-2020
Citation: 23 CCR 16 2712(b)(1)(F) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712(b)(1)(F)
Violation Description: "Failure to conduct secondary containment testing, or one or more of the following requirements: Perform the test of the secondary containment system upon installation, within six months of installation and every 36 months thereafter. Perform the test of a secondary containment component within 30 days of a repair or discontinuing vacuum, pressure or hydrostatic monitoring. Use a procedure that demonstrates the system works as well as at installation. Use applicable manufacturer guidelines, industry codes, engineering standard, or professional engineer approval. Performed by a certified service technician. Maintain records of secondary containment testing for 36 months."
Violation Notes: Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-09-2020
Citation: 23 CCR 16 2716(e) - California Code of Regulations, Title 23, Chapter 16, Section(s) 2716(e)
Violation Description: For designated operator (DO) monthly inspections conducted before October 1, 2018, failure to comply with one or more of the following requirements: Be performed by an ICC certified DO. Inspect monthly alarm history report, check that alarms are documented and responded to appropriately, and attach a copy. Inspect for the presence of liquid/debris in spill containers. Inspect for the presence of liquid/debris in under dispenser containment (UDC) and ensure that the monitoring equipment is positioned correctly. Inspect for liquid or debris in containment sumps where an alarm occurred with no service visit. Check that all testing and maintenance has been completed and documented. Verify that all facility employees have been trained in accordance with 23 CCR 2715(c). For designated operator (DO) 30 day inspections conducted on and after October 1, 2018, failure to conduct the designated UST operator visual inspection at least once every 30 days.
Violation Notes: Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS TYPO ERRORS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-09-2020
Citation: 23 CCR 16 2712 - California Code of Regulations, Title 23, Chapter 16, Section(s) 2712
Violation Description: Failure to comply with any of the applicable requirements of the permit issued for the operation of the UST system.
Violation Notes: Returned to compliance on 08/13/2020. CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019|2019 CTLS

WALNUT 76 INC (Continued) **S118495593**

TYPO ERRORS
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-29-2015
Citation: HSC 6.7 25284(a)(3) - California Health and Safety Code, Chapter 6.7, Section(s) 25284(a)(3)
Violation Description: Failure to submit, maintain, or implement an owner/operator written agreement.
Violation Notes: Returned to compliance on 09/28/2015.
Violation Division: Los Angeles County Department of Public Works
Violation Program: UST
Violation Source: CERS

Site ID: 407348
Site Name: WALNUT 76 INC
Violation Date: 07-29-2016
Citation: HSC 6.95 25508(a)(1) - California Health and Safety Code, Chapter 6.95, Section(s) 25508(a)(1)
Violation Description: Failure to complete and electronically submit a business plan when storing/handling a hazardous material at or above reportable quantities.
Violation Notes: Returned to compliance on 08/16/2016. Log onto the California Environmental Reporting System (CERS) to correct the deficiencies in the submittals. Observed the following corrections required; 1. On the section for BUSINESS ACTIVITIES, correct the facility's EPA ID # which should be CAL000355415, 2. On the section for HAZARDOUS MATERIALS INVENTORY, update the following; for the entry for "ANTIFREEZE", the field for "LARGEST CONTAINER" and "MAXIMUM DAILY AMOUNT" should be 55 gal, for the entry for "MOTOR OIL", the field for "LARGEST CONTAINER" should be 1 gal, delete the entry for "WASTE FUEL FILTERS", 3. Revise and resubmit the site map to include all the required components; including the locations of the waste oil tank, new oil containers, fire extinguishers, etc, see sample map.
Violation Division: Los Angeles County Fire Department
Violation Program: HMRRP
Violation Source: CERS

Evaluation:
Eval General Type: Compliance Evaluation Inspection
Eval Date: 03-08-2013
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: Inspected by B. Nasseri, HMS II Consent by Shawn Jahrami
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-03-2014
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: CTLS-7/3/13;SCTR-8/1/13; SENSORS IN PLACE;UDCS/SUMPS/SPBKS:CLEAN/DRYNOVC: FACILTY/TANK FORMS WRONG IN

WALNUT 76 INC (Continued) **S118495593**

	CERS; EXPIRED FRCT; OWNER/OPERATOR
Eval Division:	Los Angeles County Department of Public Works
Eval Program:	UST
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	07-29-2016
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Shawn Jahromi
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	08-16-2016
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-17-2020
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Rommel Elvena, Service Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-17-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Rommel Elvena, Service Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	03-08-2013
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Inspected by B. Nasseri, HMS II Consent by Shawn Jahrami
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	07-09-2020
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	CERS ERRORS:MONITORING PLAN,OWNER/OPERATOR DESIGNATION|SCTR LATE,WAS DUE AUG 2019
Eval Division:	Los Angeles County Department of Public Works

WALNUT 76 INC (Continued) **S118495593**

Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-26-2016
Violations Found: No
Eval Type: Routine done by local agency
Eval Notes: V/R STATING ALL NORMAL, SUMPS/UDC'S CLEAN AND DRY. RECORDS COMPLETE SENSORS CORRECT AND IN PROPER POSITION. CERS ACCEPTED
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-29-2015
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: SUMPS DRY, SENSORS VERTICAL &@ LOW POINT, SECONDARY ABLE TO DRAIN, SEALANT VISIBLE ON PENETRATIONS; NOVC:CERS,OVERDUE CTLS,LOOSE CHAINS
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-16-2018
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC: CERS (FACLTY INF,TNK INF,MONIT PLNS), DEBRIS IN W/O FSMP & 87 FSMP. F&C CHAIN NOT CONNCTD IN UDC 7/10.DIDNT SUBMT CTLS W/IN 30DAYS
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-18-2017
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: CORRECTIONS NEEDED ON CERS(FACILITY INFO,TANK INFO,MONITORING PLAN, OSDO,FRCT,CFO LETTER);2015 CTLS REJECTED DUE TO INACCURATE INFO.
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-19-2019
Violations Found: Yes
Eval Type: Routine done by local agency
Eval Notes: NOVC: CERS(FRCT,CFO LETTER,UST U&C FORM),TOVFL PERFORMED LATE. ALL DOCS ONSITE, VR ALL SYSTEMS NORMAL.
Eval Division: Los Angeles County Department of Public Works
Eval Program: UST
Eval Source: CERS

Eval General Type: Compliance Evaluation Inspection
Eval Date: 07-29-2016
Violations Found: No
Eval Type: Routine done by local agency

WALNUT 76 INC (Continued) **S118495593**

Eval Notes: Shawn Jahromi
Eval Division: Los Angeles County Fire Department
Eval Program: HW
Eval Source: CERS

Coordinates:
Site ID: 407348
Facility Name: WALNUT 76 INC
Env Int Type Code: HMBP
Program ID: 10286740
Coord Name: Not reported
Ref Point Type Desc: Center of a facility or station.
Latitude: 34.027240
Longitude: -117.895060

Affiliation:
Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: 18702 AMAR RD
Affiliation City: WALNUT
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 91789
Affiliation Phone: Not reported

Affiliation Type Desc: UST Tank Owner
Entity Name: T&RS Investment Grp LLC
Entity Title: Not reported
Affiliation Address: 18702 AMAR RD
Affiliation City: walnut
Affiliation State: ca
Affiliation Country: United States
Affiliation Zip: 91789
Affiliation Phone: (626) 810-4688

Affiliation Type Desc: Identification Signer
Entity Name: RASSOL EFTEKHARIAN
Entity Title: owner
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Property Owner
Entity Name: RASSOL EFTEKHARIAN
Entity Title: Not reported
Affiliation Address: 18702 Amar Rd
Affiliation City: Walnut
Affiliation State: CA
Affiliation Country: United States
Affiliation Zip: 91789
Affiliation Phone: (626) 810-4688

WALNUT 76 INC (Continued) **S118495593**

Affiliation Type Desc:	UST Permit Applicant
Entity Name:	RUSSAL EFTCKHARIN
Entity Title:	OWNER
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 810-4688

Affiliation Type Desc:	UST Tank Operator
Entity Name:	RASSOL EFTEKHARIAN
Entity Title:	Not reported
Affiliation Address:	18702 AMAR RD
Affiliation City:	walnut
Affiliation State:	ca
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 810-4688

Affiliation Type Desc:	Document Preparer
Entity Name:	Karen McKabney
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported

Affiliation Type Desc:	Environmental Contact
Entity Name:	Shawn Jahromi
Entity Title:	Not reported
Affiliation Address:	18702 Amar Rd
Affiliation City:	SANTA ANA
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	92704
Affiliation Phone:	Not reported

Affiliation Type Desc:	Legal Owner
Entity Name:	RASSOL EFTEKHARIAN
Entity Title:	Not reported
Affiliation Address:	18702 AMAR RD
Affiliation City:	WALNUT
Affiliation State:	CA
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 810-4688

Affiliation Type Desc:	Parent Corporation
Entity Name:	WALNUT 76 INC
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported

WALNUT 76 INC (Continued) **S118495593**

Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	UST Property Owner Name
Entity Name:	T&RS Investment Grp LLC
Entity Title:	Not reported
Affiliation Address:	18702 AMAR RD
Affiliation City:	walnut
Affiliation State:	ca
Affiliation Country:	United States
Affiliation Zip:	91789
Affiliation Phone:	(626) 810-4688
Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Operator
Entity Name:	RASSOL EFTEKHARIAN
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(626) 810-4688

G135 **WALNUT 76 INC** **RCRA NonGen / NLR** **1024826902**
NNW **18702 AMAR RD** **CAL000355415**
1/8-1/4 **WALNUT, CA 91789**
0.157 mi.
828 ft. **Site 2 of 9 in cluster G**

Relative: RCRA NonGen / NLR:
Higher

Actual: Date Form Received by Agency:		20100804
643 ft. Handler Name:	WALNUT 76 INC	
Handler Address:		18702 AMAR RD
Handler City,State,Zip:		WALNUT, CA 91789-4168
EPA ID:		CAL000355415
Contact Name:		RASSOL EFTEKHARIAN
Contact Address:		18702 AMAR RD
Contact City,State,Zip:		WALNUT, CA 91789
Contact Telephone:		714-470-7676
Contact Fax:		626-965-4814
Contact Email:		EFTEKHAR2000@YAHOO.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported

WALNUT 76 INC (Continued) **1024826902**

Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	18702 AMAR RD
Mailing City,State,Zip:	WALNUT, CA 91789-4168
Owner Name:	WALNUT 76 INC
Owner Type:	Other
Operator Name:	RASSOL EFTEKHARIAN
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported
Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported

WALNUT 76 INC (Continued) **1024826902**

Handler Date of Last Change:	20180905
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Operator
Owner/Operator Name:	RASSOL EFTEKHARIAN
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	18702 AMAR RD
Owner/Operator City,State,Zip:	WALNUT, CA 91789
Owner/Operator Telephone:	714-470-7676
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Owner
Owner/Operator Name:	WALNUT 76 INC
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	18702 AMAR RD
Owner/Operator City,State,Zip:	WALNUT, CA 91789-4168
Owner/Operator Telephone:	714-470-7676
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Historic Generators:

Receive Date:	20100804
Handler Name: WALNUT 76 INC	
Federal Waste Generator Description:	Not a generator, verified
State District Owner:	Not reported
Large Quantity Handler of Universal Waste:	No
Recognized Trader Importer:	No
Recognized Trader Exporter:	No
Spent Lead Acid Battery Importer:	No
Spent Lead Acid Battery Exporter:	No
Current Record:	Yes
Non Storage Recycler Activity:	Not reported
Electronic Manifest Broker:	Not reported

List of NAICS Codes and Descriptions:

NAICS Code:	44719
NAICS Description:	OTHER GASOLINE STATIONS

Facility Has Received Notices of Violations:

Violations:	No Violations Found

WALNUT 76 INC (Continued) **1024826902**

Evaluation Action Summary:
Evaluations: No Evaluations Found

G136 **MARINELAND** **HIST CORTESE** **U002278164**
NNW **6600 PALOS VERDES** **N/A**
1/8-1/4 **RANCHO PALOS VERDES, CA 90274**
0.157 mi.
828 ft. **Site 3 of 9 in cluster G**

Relative: HIST CORTESE:
Higher
Actual: edr_fname: MARINELAND
643 ft. edr_fadd1: 6600 PALOS VERDES
City,State,Zip: RANCHO PALOS VERDES, CA 90274
Region: CORTESE
Facility County Code: 19
Reg By: LTNKA
Reg Id: R-01409

G137 **WALNUT 76 INC** **UST** **U004356567**
NNW **18702 AMAR RD** **N/A**
1/8-1/4 **WALNUT, CA 91789**
0.157 mi.
828 ft. **Site 4 of 9 in cluster G**

Relative: UST:
Higher
Actual: Name: WALNUT 76 INC
643 ft. Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Facility ID: LACoFA0002748
Permitting Agency: Los Angeles County Fire Department
CERSID: 10286740
Latitude: 34.02724
Longitude: -117.89506

G138 **76 PRODUCTS STATION #6857** **LUST** **S100944813**
NNW **18702 AMAR RD** **SWEEPS UST** **N/A**
1/8-1/4 **WALNUT, CA 91789** **Cortese**
0.157 mi. **HIST CORTESE**
828 ft. **Site 5 of 9 in cluster G** **CERS**

Relative: LUST:
Higher
Actual: Name: 76 PRODUCTS STATION #6857
643 ft. Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Lead Agency: LOS ANGELES COUNTY
Case Type: LUST Cleanup Site
Geo Track: http://geotracker.waterboards.ca.gov/profile_report.asp?global_id=T0603704770
Global Id: T0603704770
Latitude: 34.027247
Longitude: -117.895051
Status: Completed - Case Closed
Status Date: 07/31/1997
Case Worker: JOA

76 PRODUCTS STATION #6857 (Continued) **S100944813**

RB Case Number: R-08106
Local Agency: LOS ANGELES COUNTY
File Location: Not reported
Local Case Number: Not reported
Potential Media Affect: Soil
Potential Contaminants of Concern: Gasoline
Site History: Not reported

LUST:
Global Id: T0603704770
Contact Type: Local Agency Caseworker
Contact Name: JOHN AWUJO
Organization Name: LOS ANGELES COUNTY
Address: 900 S FREMONT AVE
City: ALHAMBRA
Email: jawujo@dpw.lacounty.gov
Phone Number: 6264583507

Global Id: T0603704770
Contact Type: Regional Board Caseworker
Contact Name: YUE RONG
Organization Name: LOS ANGELES RWQCB (REGION 4)
Address: 320 W. 4TH ST., SUITE 200
City: Los Angeles
Email: yrong@waterboards.ca.gov
Phone Number: Not reported

LUST:
Global Id: T0603704770
Action Type: Other
Date: 09/21/1994
Action: Leak Reported

Global Id: T0603704770
Action Type: Other
Date: 09/21/1994
Action: Leak Stopped

Global Id: T0603704770
Action Type: Other
Date: 09/21/1994
Action: Leak Discovery

LUST:
Global Id: T0603704770
Status: Open - Case Begin Date
Status Date: 09/21/1994

Global Id: T0603704770
Status: Open - Site Assessment
Status Date: 09/21/1994

Global Id: T0603704770
Status: Completed - Case Closed
Status Date: 07/31/1997

76 PRODUCTS STATION #6857 (Continued) **S100944813**

LUST REG 4:

Region:	4	
Regional Board:	04	
County:	Los Angeles	
Facility Id:	R-08106	
Status:	Case Closed	
Substance:	Gasoline	
Substance Quantity:	Not reported	
Local Case No:	Not reported	
Case Type:	Soil	
Abatement Method Used at the Site:		Not reported
Global ID:	T0603704770	
W Global ID:	Not reported	
Staff:	UNK	
Local Agency:	19000	
Cross Street:	Not reported	
Enforcement Type:	Not reported	
Date Leak Discovered:	9/21/1994	
Date Leak First Reported:		9/21/1994
Date Leak Record Entered:	11/2/1995	
Date Confirmation Began:	9/21/1994	
Date Leak Stopped:	9/21/1994	
Date Case Last Changed on Database:		2/18/1998
Date the Case was Closed:		7/31/1997
How Leak Discovered:	OM	
How Leak Stopped:	Not reported	
Cause of Leak:	Overfill	
Leak Source:	Piping	
Operator:	OLD CASE #951102-06	
Water System:	Not reported	
Well Name:	Not reported	
Approx. Dist To Production Well (ft):		10698.322047207464666819587231
Source of Cleanup Funding:		Piping
Preliminary Site Assessment Workplan Submitted:		Not reported
Preliminary Site Assessment Began:		Not reported
Pollution Characterization Began:		Not reported
Remediation Plan Submitted:		Not reported
Remedial Action Underway:		Not reported
Post Remedial Action Monitoring Began:		Not reported
Enforcement Action Date:		Not reported
Historical Max MTBE Date:		Not reported
Hist Max MTBE Conc in Groundwater:		Not reported
Hist Max MTBE Conc in Soil:		Not reported
Significant Interim Remedial Action Taken:		Not reported
GW Qualifier:	Not reported	
Soil Qualifier:	Not reported	
Organization:	Not reported	
Owner Contact:	Not reported	
Responsible Party:	TOSCO/76 PRODUCTS TEAM	
RP Address:	P.O. BOX 25376, SANTA ANA, CA 92799-5376	
Program:	LUST	
Lat/Long:	34.0271863 / -1	
Local Agency Staff:	Not reported	
Beneficial Use:	Not reported	
Priority:	Not reported	
Cleanup Fund Id:	Not reported	
Suspended:	Not reported	

76 PRODUCTS STATION #6857 (Continued) **S100944813**

Assigned Name: Not reported
Summary: 02/18/98 - RESULTS OF A SOIL GAS SURVEY

SWEEPS UST:
Name: UNION OIL CO
Address: 18702 AMAR RD
City: WALNUT
Status: Active
Comp Number: 8106
Number: 9
Board Of Equalization: 44-000051
Referral Date: 06-30-89
Action Date: Not reported
Created Date: 06-30-89
Owner Tank Id: Not reported
SWRCB Tank Id: 19-000-008106-000001
Tank Status: A
Capacity: Not reported
Active Date: 06-30-89
Tank Use: UNKNOWN
STG: W
Content: Not reported
Number Of Tanks: 4

Name: UNION OIL CO
Address: 18702 AMAR RD
City: WALNUT
Status: Active
Comp Number: 8106
Number: 9
Board Of Equalization: 44-000051
Referral Date: 06-30-89
Action Date: Not reported
Created Date: 06-30-89
Owner Tank Id: Not reported
SWRCB Tank Id: 19-000-008106-000002
Tank Status: A
Capacity: Not reported
Active Date: 06-30-89
Tank Use: UNKNOWN
STG: W
Content: Not reported
Number Of Tanks: Not reported

Name: UNION OIL CO
Address: 18702 AMAR RD
City: WALNUT
Status: Active
Comp Number: 8106
Number: 9
Board Of Equalization: 44-000051
Referral Date: 06-30-89
Action Date: Not reported
Created Date: 06-30-89
Owner Tank Id: Not reported
SWRCB Tank Id: 19-000-008106-000003
Tank Status: A

76 PRODUCTS STATION #6857 (Continued) **S100944813**

Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	Not reported

Name:	UNION OIL CO
Address:	18702 AMAR RD
City:	WALNUT
Status:	Active
Comp Number:	8106
Number:	9
Board Of Equalization:	44-000051
Referral Date:	06-30-89
Action Date:	Not reported
Created Date:	06-30-89
Owner Tank Id:	Not reported
SWRCB Tank Id:	19-000-008106-000004
Tank Status:	A
Capacity:	Not reported
Active Date:	06-30-89
Tank Use:	UNKNOWN
STG:	W
Content:	Not reported
Number Of Tanks:	Not reported

CORTESE:

Name:	76 PRODUCTS STATION #6857
Address:	18702 AMAR RD
City,State,Zip:	WALNUT, CA 91789
Region:	CORTESE
Envirostor Id:	Not reported
Global ID:	T0603704770
Site/Facility Type:	LUST CLEANUP SITE
Cleanup Status:	COMPLETED - CASE CLOSED
Status Date:	Not reported
Site Code:	Not reported
Latitude:	Not reported
Longitude:	Not reported
Owner:	Not reported
Enf Type:	Not reported
Swat R:	Not reported
Flag:	active
Order No:	Not reported
Waste Discharge System No:	Not reported
Effective Date:	Not reported
Region 2:	Not reported
WID Id:	Not reported
Solid Waste Id No:	Not reported
Waste Management Uit Name:	Not reported
File Name:	Active Open

HIST CORTESE:

edr_fname:	76 PRODUCTS STATION #6857
edr_fadd1:	18702 AMAR

76 PRODUCTS STATION #6857 (Continued) **S100944813**

City,State,Zip: WALNUT, CA
Region: CORTESE
Facility County Code: 19
Reg By: LTNKA
Reg Id: R-08106

CERS:
Name: 76 PRODUCTS STATION #6857
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 252537
CERS ID: T0603704770
CERS Description: Leaking Underground Storage Tank Cleanup Site

Affiliation:
Affiliation Type Desc: Local Agency Caseworker
Entity Name: JOHN AWUJO - LOS ANGELES COUNTY
Entity Title: Not reported
Affiliation Address: 900 S FREMONT AVE
Affiliation City: ALHAMBRA
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: 6264583507

Affiliation Type Desc: Regional Board Caseworker
Entity Name: YUE RONG - LOS ANGELES RWQCB (REGION 4)
Entity Title: Not reported
Affiliation Address: 320 W. 4TH ST., SUITE 200
Affiliation City: Los Angeles
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

G139 **TOSCO/UNOCAL #31216** **UST** **U004345882**
NNW **18702 AMAR RD** **N/A**
1/8-1/4 **WALNUT, CA 91789**
0.157 mi.
828 ft. **Site 6 of 9 in cluster G**

Relative: Higher
Actual: 643 ft.

UST:
Name: TOSCO/UNOCAL #31216
Address: 18702 AMAR RD
City,State,Zip: WALNUT, CA 91789
Facility ID: 24734
Permitting Agency: LOS ANGELES COUNTY
CERSID: Not reported
Latitude: 34.028538
Longitude: -117.8937624

G140 **O'REILLY AUTO PARTS STORE 3039** **RCRA NonGen / NLR** **1024842356**
NNW **18724 AMAR RD** **CAL000392759**
1/8-1/4 **WALNUT, CA 91789**
0.162 mi.
854 ft. **Site 7 of 9 in cluster G**

Relative: **Higher**
Actual: **658 ft.**

RCRA NonGen / NLR:

Date Form Received by Agency:	20140114
Handler Name:	O'REILLY AUTO PARTS STORE 3039
Handler Address:	18724 AMAR RD
Handler City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000392759
Contact Name:	JOHN BOUNDS
Contact Address:	233 S. PATTERSON AVE.
Contact City,State,Zip:	SPRINGFIELD, MO 65802
Contact Telephone:	417-520-4589
Contact Fax:	417-874-7102
Contact Email:	JBOUNDS2@OREILLYAUTO.COM
Contact Title:	Not reported
EPA Region:	09
Land Type:	Not reported
Federal Waste Generator Description:	Not a generator, verified
Non-Notifier:	Not reported
Biennial Report Cycle:	Not reported
Accessibility:	Not reported
Active Site Indicator:	Handler Activities
State District Owner:	Not reported
State District:	Not reported
Mailing Address:	233 S PATTERSON
Mailing City,State,Zip:	SPRINGFIELD, MO 65802-0000
Owner Name:	O'REILLY AUTO PARTS
Owner Type:	Other
Operator Name:	JOHN BOUNDS
Operator Type:	Other
Short-Term Generator Activity:	No
Importer Activity:	No
Mixed Waste Generator:	No
Transporter Activity:	No
Transfer Facility Activity:	No
Recycler Activity with Storage:	No
Small Quantity On-Site Burner Exemption:	No
Smelting Melting and Refining Furnace Exemption:	No
Underground Injection Control:	No
Off-Site Waste Receipt:	No
Universal Waste Indicator:	Yes
Universal Waste Destination Facility:	Yes
Federal Universal Waste:	No
Active Site Fed-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site Converter Treatment storage and Disposal Facility:	Not reported
Active Site State-Reg Treatment Storage and Disposal Facility:	Not reported
Active Site State-Reg Handler:	---
Federal Facility Indicator:	Not reported
Hazardous Secondary Material Indicator:	N
Sub-Part K Indicator:	Not reported
Commercial TSD Indicator:	No
Treatment Storage and Disposal Type:	Not reported
2018 GPRA Permit Baseline:	Not on the Baseline
2018 GPRA Renewals Baseline:	Not on the Baseline
Permit Renewals Workload Universe:	Not reported

O'REILLY AUTO PARTS STORE 3039 (Continued) **1024842356**

Permit Workload Universe:	Not reported
Permit Progress Universe:	Not reported
Post-Closure Workload Universe:	Not reported
Closure Workload Universe:	Not reported
202 GPRA Corrective Action Baseline:	No
Corrective Action Workload Universe:	No
Subject to Corrective Action Universe:	No
Non-TSDFs Where RCRA CA has Been Imposed Universe:	No
TSDFs Potentially Subject to CA Under 3004 (u)/(v) Universe:	No
TSDFs Only Subject to CA under Discretionary Auth Universe:	No
Corrective Action Priority Ranking:	No NCAPS ranking
Environmental Control Indicator:	No
Institutional Control Indicator:	No
Human Exposure Controls Indicator:	N/A
Groundwater Controls Indicator:	N/A
Operating TSDF Universe:	Not reported
Full Enforcement Universe:	Not reported
Significant Non-Complier Universe:	No
Unaddressed Significant Non-Complier Universe:	No
Addressed Significant Non-Complier Universe:	No
Significant Non-Complier With a Compliance Schedule Universe:	No
Financial Assurance Required:	Not reported
Handler Date of Last Change:	20180906
Recognized Trader-Importer:	No
Recognized Trader-Exporter:	No
Importer of Spent Lead Acid Batteries:	No
Exporter of Spent Lead Acid Batteries:	No
Recycler Activity Without Storage:	No
Manifest Broker:	No
Sub-Part P Indicator:	No

Handler - Owner Operator:

Owner/Operator Indicator:	Owner
Owner/Operator Name:	O'REILLY AUTO PARTS
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	233 S PATTERSON
Owner/Operator City,State,Zip:	SPRINGFIELD, MO 65802-0000
Owner/Operator Telephone:	417-862-3333
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

Owner/Operator Indicator:	Operator
Owner/Operator Name:	JOHN BOUNDS
Legal Status:	Other
Date Became Current:	Not reported
Date Ended Current:	Not reported
Owner/Operator Address:	233 S. PATTERSON AVE.
Owner/Operator City,State,Zip:	SPRINGFIELD, MO 65802
Owner/Operator Telephone:	417-520-4589
Owner/Operator Telephone Ext:	Not reported
Owner/Operator Fax:	Not reported
Owner/Operator Email:	Not reported

O'REILLY AUTO PARTS STORE 3039 (Continued) **1024842356**

Historic Generators:
Receive Date: 20140114
Handler Name: O'REILLY AUTO PARTS STORE 3039
Federal Waste Generator Description: Not a generator, verified
State District Owner: Not reported
Large Quantity Handler of Universal Waste: No
Recognized Trader Importer: No
Recognized Trader Exporter: No
Spent Lead Acid Battery Importer: No
Spent Lead Acid Battery Exporter: No
Current Record: Yes
Non Storage Recycler Activity: Not reported
Electronic Manifest Broker: Not reported

List of NAICS Codes and Descriptions:
NAICS Code: 44131
NAICS Description: AUTOMOTIVE PARTS AND ACCESSORIES STORES

Facility Has Received Notices of Violations:
Violations: No Violations Found

Evaluation Action Summary:
Evaluations: No Evaluations Found

G141 **O'REILLY AUTO PARTS #3039** **CERS HAZ WASTE** **S103973719**
NNW **18724 AMAR RD** **HAZNET** **N/A**
1/8-1/4 **WALNUT, CA 91789** **LOS ANGELES CO. HMS**
0.162 mi. **CERS**
854 ft. **Site 8 of 9 in cluster G** **HWTS**

Relative: Higher
Actual: 658 ft.

CERS HAZ WASTE:
Name: O'REILLY AUTO PARTS #3039
Address: 18724 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 139269
CERS ID: 10281010
CERS Description: Hazardous Waste Generator

HAZNET:
Name: O'REILLY AUTO PARTS STORE 3039
Address: 18724 AMAR RD
Address 2: Not reported
City,State,Zip: WALNUT, CA 65802
Contact: JOHN BOUNDS
Telephone: 4175204589
Mailing Name: Not reported
Mailing Address: 233 S PATTERSON

Year: 2019
Gepaid: CAL000392759
TSD EPA ID: CAD044429835
CA Waste Code: 181 - Other inorganic solid waste
Disposal Method: H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Tons: 0.10000

Year: 2019
Gepaid: CAL000392759
TSD EPA ID: AZR000003681
CA Waste Code: 223 - Unspecified oil-containing waste
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 0.10000

Year: 2018
Gepaid: CAL000392759
TSD EPA ID: AZR000003681
CA Waste Code: 223 - Unspecified oil-containing waste
Disposal Method: H039 - Other Recovery Of Reclamation For Reuse Including Acid Regeneration, Organics Recovery Ect
Tons: 0.42500

Year: 2018
Gepaid: CAL000392759
TSD EPA ID: CAD044429835
CA Waste Code: 181 - Other inorganic solid waste
Disposal Method: H141 - Storage, Bulking, And/Or Transfer Off Site--No Treatment/Reovery (H010-H129) Or (H131-H135)
Tons: 0.15000

Year: 2016
Gepaid: CAL000392759
TSD EPA ID: UTD981552177
CA Waste Code: 343 - Unspecified organic liquid mixture
Disposal Method: H040 - Incineration--Thermal Destruction Other Than Use As A Fuel
Tons: 0.0125

LOS ANGELES CO. HMS:
Name: KRAGEN AUTO PARTS
Address: 18724 AMAR RD
City,State,Zip: WALNUT, CA 91789
Region: LA
Permit Category: Not reported
Facility Id: 021013-029759
Facility Type: Not reported
Facility Status: OPEN
Area: 6L
Permit Number: Not reported
Permit Status: Not reported

CERS:
Name: O'REILLY AUTO PARTS #3039
Address: 18724 AMAR RD
City,State,Zip: WALNUT, CA 91789
Site ID: 139269
CERS ID: 10281010
CERS Description: Chemical Storage Facilities

Violations:
Site ID: 139269

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Site Name:	O'REILLY AUTO PARTS #3039
Violation Date:	03-08-2013
Citation:	HSC 6.95 25505(a) - California Health and Safety Code, Chapter 6.95, Section(s) 25505(a)
Violation Description:	Owner/Operator failed to complete and/or submit a Hazardous Materials Business Plan when storing hazardous materials at or above the thresholds quantities of 55 gallons/500 lbs/200 cubic feet.
Violation Notes:	Submit to CERS
Violation Division:	Los Angeles County Fire Department
Violation Program:	HMRRP
Violation Source:	CERS

Site ID:	139269
Site Name:	O'REILLY AUTO PARTS #3039
Violation Date:	07-29-2016
Citation:	22 CCR 12 66262.40(a) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.40(a)
Violation Description:	Failure to keep a copy of each properly signed manifest for at least three years from the date the waste was accepted by the initial transporter. The manifest signed at the time the waste was accepted for transport shall be kept until receiving a signed copy from the designated facility which received the waste.
Violation Notes:	Returned to compliance on 10/18/2016. Provide manifests for all hazardous waste disposals for the last 3 years, including the disposal receipts for the waste oil, used oil filters, waste absorbents, and nonsaleable chemical related merchandises. These were not available for review.
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Site ID:	139269
Site Name:	O'REILLY AUTO PARTS #3039
Violation Date:	03-08-2013
Citation:	22 CCR 12 66262.34(f) - California Code of Regulations, Title 22, Chapter 12, Section(s) 66262.34(f)
Violation Description:	Failure to properly label hazardous waste accumulation containers with the following requirements: "Hazardous Waste", name and address of the generator, physical and chemical characteristics of the Hazardous Waste, and starting accumulation date.
Violation Notes:	add starting date to used oil HW container
Violation Division:	Los Angeles County Fire Department
Violation Program:	HW
Violation Source:	CERS

Evaluation:

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-13-2020
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Andre Angeles, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS

Eval General Type:	Compliance Evaluation Inspection
Eval Date:	03-08-2013

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Inspected by B. Nasseri, HMS II Consent by Veronica Martinez
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	01-13-2020
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Andre Angeles, Manager
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	03-08-2013
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Inspected by B. Nasseri, HMS II Consent by Veronica Martinez
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	07-29-2016
Violations Found:	No
Eval Type:	Routine done by local agency
Eval Notes:	Ray Del Rio
Eval Division:	Los Angeles County Fire Department
Eval Program:	HMRRP
Eval Source:	CERS
Eval General Type:	Compliance Evaluation Inspection
Eval Date:	07-29-2016
Violations Found:	Yes
Eval Type:	Routine done by local agency
Eval Notes:	Ray Del Rio
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS
Eval General Type:	Other/Unknown
Eval Date:	10-18-2016
Violations Found:	No
Eval Type:	Other, not routine, done by local agency
Eval Notes:	Not reported
Eval Division:	Los Angeles County Fire Department
Eval Program:	HW
Eval Source:	CERS

Coordinates:

Site ID:	139269
Facility Name:	O'REILLY AUTO PARTS #3039
Env Int Type Code:	HWG
Program ID:	10281010

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Coord Name: Not reported
Ref Point Type Desc: Center of a facility or station.
Latitude: 34.027720
Longitude: -117.894200

Affiliation:
Affiliation Type Desc: Facility Mailing Address
Entity Name: Mailing Address
Entity Title: Not reported
Affiliation Address: Verisk 3E, Reg. Dept/O'Reilly Auto Parts, 3207 Grey Hawk Ct, Ste 200
Affiliation City: Carlsbad
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 92010
Affiliation Phone: Not reported

Affiliation Type Desc: Property Owner
Entity Name: 9429 Walnut Cake LLC
Entity Title: Not reported
Affiliation Address: 16539 SATICOY ST
Affiliation City: VAN NUYS
Affiliation State: CA
Affiliation Country: United States
Affiliation Zip: 91406
Affiliation Phone: (562) 881-5997

Affiliation Type Desc: Parent Corporation
Entity Name: O'Reilly Auto Parts
Entity Title: Not reported
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Document Preparer
Entity Name: Jim Zhao, Agent for O'Reilly Auto Enterprises, L.L.C.
Entity Title: Not reported
Affiliation Address: Not reported
Affiliation City: Not reported
Affiliation State: Not reported
Affiliation Country: Not reported
Affiliation Zip: Not reported
Affiliation Phone: Not reported

Affiliation Type Desc: Environmental Contact
Entity Name: Verisk 3E, Regulatory Department/O'Reilly Auto Parts
Entity Title: Not reported
Affiliation Address: 3207 Grey Hawk Court, Suite 200
Affiliation City: Carlsbad
Affiliation State: CA
Affiliation Country: Not reported
Affiliation Zip: 92010
Affiliation Phone: Not reported

Affiliation Type Desc: Legal Owner

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Entity Name:	O'Reilly Auto Enterprises, L.L.C.
Entity Title:	Not reported
Affiliation Address:	702 E. Bethany Home Road
Affiliation City:	Phoenix
Affiliation State:	AZ
Affiliation Country:	United States
Affiliation Zip:	85014
Affiliation Phone:	(417) 862-3333
Affiliation Type Desc:	CUPA District
Entity Name:	Los Angeles County Fire
Entity Title:	Not reported
Affiliation Address:	5825 Rickenbacker Road
Affiliation City:	Commerce
Affiliation State:	CA
Affiliation Country:	Not reported
Affiliation Zip:	90040-3027
Affiliation Phone:	(323) 890-4000
Affiliation Type Desc:	Identification Signer
Entity Name:	Jim Zhao, Agent for O'Reilly Auto Enterprises, L.L.C.
Entity Title:	Regulatory Compliance Specialist, Verisk 3E
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	Not reported
Affiliation Type Desc:	Operator
Entity Name:	O'Reilly Auto Enterprises, L.L.C.
Entity Title:	Not reported
Affiliation Address:	Not reported
Affiliation City:	Not reported
Affiliation State:	Not reported
Affiliation Country:	Not reported
Affiliation Zip:	Not reported
Affiliation Phone:	(417) 862-3333

HWTS:

Name:	O'REILLY AUTO PARTS STORE 3039
Address:	18724 AMAR RD
Address 2:	Not reported
City,State,Zip:	WALNUT, CA 91789
EPA ID:	CAL000392759
Inactive Date:	Not reported
Create Date:	01/14/2014
Last Act Date:	12/09/2020
Mailing Name:	Not reported
Mailing Address:	233 S PATTERSON
Mailing Address 2:	Not reported
Mailing City,State,Zip:	SPRINGFIELD, MO 65802
Owner Name:	O'REILLY AUTO PARTS
Owner Address:	233 S PATTERSON
Owner Address 2:	Not reported
Owner City,State,Zip:	SPRINGFIELD, MO 658020000

O'REILLY AUTO PARTS #3039 (Continued) **S103973719**

Contact Name:	JOHN BOUNDS
Contact Address:	233 S. PATTERSON AVE.
Contact Address 2:	Not reported
City,State,Zip:	SPRINGFIELD, MO 65802

NAICS:

EPA ID:	CAL000392759
Create Date:	2014-01-14 11:42:56.587
NAICS Code:	44131
NAICS Description:	Automotive Parts and Accessories Stores
Issued EPA ID Date:	2014-01-14 11:42:56.58700
Inactive Date:	Not reported
Facility Name:	O'REILLY AUTO PARTS STORE 3039
Facility Address:	18724 AMAR RD
Facility Address 2:	Not reported
Facility City:	WALNUT
Facility County:	Not reported
Facility State:	CA
Facility Zip:	91789

142
SW
1/8-1/4
0.162 mi.
857 ft.

JUSTIN TUAZON **RCRA NonGen / NLR** **1026824937**
3139 FAITH STREET **CAC003137993**
WEST COVINA, CA 91792

Relative:
Lower

Actual:
581 ft.

RCRA NonGen / NLR:

Date Form Received by Agency:		20210908
Handler Name:	JUSTIN TUAZON	
Handler Address:		3139 FAITH STREET
Handler City,State,Zip:		WEST COVINA, CA 91792
EPA ID:		CAC003137993
Contact Name:		JUSTIN TUAZON
Contact Address:		3139 FAITH STREET
Contact City,State,Zip:		WEST COVINA, CA 91792
Contact Telephone:		626-824-2255
Contact Fax:		Not reported
Contact Email:		JAYOUSTIN21@HOTMAIL.COM
Contact Title:		Not reported
EPA Region:		09
Land Type:		Not reported
Federal Waste Generator Description:		Not a generator, verified
Non-Notifier:		Not reported
Biennial Report Cycle:		Not reported
Accessibility:		Not reported
Active Site Indicator:		Not reported
State District Owner:		Not reported
State District:		Not reported
Mailing Address:		3139 FAITH STREET
Mailing City,State,Zip:		WEST COVINA, CA 91792
Owner Name:		JUSTIN TUAZON
Owner Type:		Other
Operator Name:		JUSTIN TUAZON
Operator Type:		Other
Short-Term Generator Activity:		No
Importer Activity:		No
Mixed Waste Generator:		No