NEW BUSINESS - NEED PA AND PR#s

UNIFIED PROGRAM (UP) FORM

BUSINESS OWNER/OPERATOR IDENTIFICATION (LACoCUPA Form 2730)

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☐ REVISE/UPDATE (EFFECTIVE: 7/1/07) PAGE OF

I. IDENTIFICATION

FACILITY ID# FAC037577 (1) | BEGINNING DATE (100) 07-01-07 | ENDING DATE (101)

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) (3) Genesis trucking | BUSINESS PHONE (102) 323 864-3997

BUSINESS SITE ADDRESS (103) 5035 firestone Bl. #D

CITY South Gate (104) | CA | ZIPCODE 90280 (105)

DUN & BRADSTREET (106) | SIC CODE (4 digit #) 7549 (107)

COUNTY LOS ANGELES (108) | UNINCORPORATED ☐ Yes ☑ No (133a)

BUSINESS OPERATOR NAME (109) | BUSINESS OPERATOR PHONE (110)

OW0047379

II. BUSINESS OWNER

OWNER NAME (111) Henry Garcia | OWNER PHONE (112) 323-864-3997

OWNER MAILING ADDRESS (113) 1582 E 45st.

CITY Los Angeles (114) | STATE CA. (115) | ZIP CODE 90011 (116)

III. ENVIRONMENTAL CONTACT

CONTACT NAME (117) Henry Garcia. | CONTACT PHONE (118) 323-864-3997

CONTACT MAILING ADDRESS (119) 1582 E 45st.

CITY LA (120) | STATE CA (121) | ZIP CODE 90011 (122)

PR0062125

IV. EMERGENCY CONTACTS

PRIMARY		SECONDARY	
NAME	Henry Garcia (123)	NAME	Jose Solis Jr (128)
TITLE	Owner (124)	TITLE	Driver (129)
BUSINESS PHONE	323-864-3997 (125)	BUSINESS PHONE	310-467-8736 (130)
24-HOUR PHONE	323-864-3997 (126)	24-HOUR PHONE	310-467-8736 (131)
PAGER #	(127)	PAGER #	(132)
E-MAIL ADDRESS (if any)	(133b)	E-MAIL ADDRESS (if any)	MOMJSEXYBOY@YAHOO.COM (133b)

V. ADDITIONAL LOCALLY COLLECTED INFORMATION

FEDERAL TAX IDENTIFICATION NUMBER (133)

NAME, POSITION, AND DATE OF BIRTH (133c) | NO. OF EMPLOYEES 5 (133d)

DRIVER'S LICENSE NUMBER AND STATE | BUSINESS CODE 02 (133e)

MAILING/ BILLING INFORMATION

ADDRESS (133f)	CITY (133g)	STATE (133h)	ZIP CODE (133i)
1582 E 45st.	LA.	CA	90011
1582 E 45st.	LA	CA	90011

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE | DATE (134) 10-22-07 | NAME OF DOCUMENT PREPARER (135) Jose Solis Jr

NAME OF SIGNER (print) Jose Solis Jr (136) | TITLE OF SIGNER (137) Driver.

OFFICIAL USE ONLY	UP Form	HW	HM	ARP	APST	UST	TP	CUPA	PA
	✓	1001	3001					✓	

INSPECTOR	DISTRICT	DATE OF INSP.	DIVISION	BATTALION	STATION
OGUNNAYA CY	SE	10/22/07	HHMD		

LOS ANGELES COUNTY FIRE DEPARTMENT

Clerical Facility Update

OWNER FILE INFORMATION

DATE PRINTED: 10/23/2007 1:40:38PM BY: L LEWIS

Owner ID: OW0047379
Tax ID :
Drivers License:

23 2007

ENTERED

Owner Name: HENRY GARCIA
Owner DBA: GENESIS TRUCKING
Owner Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Ownership Type:
Work/Business Phone: 323-864-3997
Billing/Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
ATTN/Care of:

FACILITY FILE INFORMATION

Facility ID: FA0037597
Facility Name: GENESIS TRUCKING
No. of Employee: 5
Site Location: 5035 FIRESTONE BLVD UNIT D
SOUTH GATE, CA 90280
Phone: 323-864-3997
Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Operator/Care of:
Email Address:
District: SE - SOUTHEAST
City Code: SGAT
CUPA Jurisdiction: CO
Operation Hours:
SIC Code: 7549
NOB: AUTOMOTIVE SERVICE, NEC
Business Type / Code: 02
Station (Code 1):
D & B #:
Date 1 (D1): 07/07/07

GENERAL HEALTH PROGRAM ELEMENTS

Record ID #	Program Element	Current Status	EPA #	Effective Date D1 (Beg.) & C1 (End)	Designated Employee	Last Inspection Date
PR0062125	3001 - HM HANDLER, FEE GROUP 01	Active, billable		07/07/07	EE0000139	10/22/2007
PR0062126	1001 - HW GEN, 0-5 EMPLOYEES	Active, billable		07/07/07	EE0000130	10/22/2007

Date run : 10/24/2007 8:53:05AM
Run by : CY
FA0037597 GENESIS TRUCKING

LA County Fire Department
Facility Information Report

OWNER FILE INFORMATION

*Clearly make changes/corrections here.

Owner ID: W0047379
Owner Name: HENRY GARCIA
Owner DBA: GENESIS TRUCKING
Owner Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Work/Business Phone: 323-864-3997
Billing/Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
ATTN/Care of:
Ownership Type:

Tax ID :
Drvr Liens :

FACILITY FILE INFORMATION

Facility ID: FA0037597
Facility Name: GENESIS TRUCKING
No. of Employee: 5
Site Location: 5035 FIRESTONE BLVD # D
SOUTH GATE, CA 90280
Phone: 323-864-3997
Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Operator/Care of: HENRY GARCIA
E-Mail Address:
District: SE - SOUTHEAST
City Code: SGAT **SOUTH GATE**
CUPA Jurisdiction: CO
Operating Hours: Days: Hours:
SIC Code: 7549 Automotive services, nec
Nature of Business: AUTOMOTIVE SERVICE, NEC
Business Type / Code: 02 INDIVIDUAL
Station:
Date First Became Operational: 07/07/07

GENERAL HEALTH PROGRAM ELEMENTS

Record ID	Current Program Element	Current Status	EPA #	Effective Date Beg.	Effective Date End	Changes: Program Element	Changes: Status
PR0062125	3001 - HM HANDLER, FEE GROUP 01	Active, billable		07/07/07			
PR0062126	1001 - HW GEN, 0-5 EMPLOYEES	Active, billable		07/07/07			

Addition Program Element:

CA Waste Code	221	181	223		
RCRA Waste Code					
AMOUNT per quarter	55	120	80		
UNITS (PGIY) Pounds, Gallons, Tons, Yards	Galons	Pounds	Pounds		

CONSENT GIVEN BY: Jose Solisor INSPECTOR SIGNATURE: EMPLOYEE ID: 139

1st DATE & TIME OF INSPECTION: 10/22/07 2nd DATE & TIME OF INSPECTION: 11/26/07

3rd DATE & TIME OF INSPECTION: 01/15/08 4th Date 01/29/08 5th Date 03/19/08

Date run : 3/5/2007 8:15:00AM
Run by :
0037597
FA0614287 ~~ESTRADAS COLLISION CENTER~~
GENESIS TRUCKING

LA County Fire Department
Facility Information Report

Report # : 5302
Page 2 of 2
Version 101906

Field Notes

LIST ORDER OF INSPECTION AS FOLLOWS: I. OPENING CONFERENCE II. WALK THROUGH III. DOCUMENTS IV. CLOSING CONFERENCE V. VIOLATIONS

OPENING CONFERENCE: An inspection consent was given by Lorenzo Gallardo, the facility's Supervisor
TYPE OF BUSINESS Car dismantling facility
WALK THROUGH: I was guided by Lorenzo Gallardo during the walk through inspection
OBSERVATION: HM - The Hazmat inventory tallies with physical inspection observation.
H.W - 1x 250 gal. tote of used oil (~~[illegible]~~ ¼ full) with labels (NOV issued), poor house keeping that involved disorganization of cast off items like engine parts, tires etc. (NOV issued), No Emergency preparedness/prevention posting in the facility (NOV issued), & well labeled oily contaminated shop towels/rags.
DOCUMENTS: Reviewed the following documents at the time of inspection - Manifest # 005949830 JDC for waste oil, quantity - 300 gals, on 01-23-10 by Ricardo Tellez waste oil Services, Manifest # 005449875 JSK for used oil, on 03-16-10 by the same company, quantity - 300 gal Manifest # 001335112 GBE, quantity - 240 gals.

CONSENT GIVEN BY: Lorenzo Gallardo INSPECTOR SIGNATURE: [signature] EMPLOYEE ID: 139
1st DATE & TIME OF INSPECTION: 01/25/11 2nd DATE & TIME OF INSPECTION:
3rd DATE & TIME OF INSPECTION:

Field Notes

LIST ORDER OF INSPECTION AS FOLLOWS: I. OPENING CONFERENCE II. WALK THROUGH III. DOCUMENTS IV. CLOSING CONFERENCE V. VIOLATIONS

On 10-04-10 by the same company. The oily ~~[illegible]~~ contaminated shop rags/towels are managed by Domestic Uniform Rental

CLOSING CONFERENCE: I went through the NOV contents with Lorenzo Gallardo and compliance date was set for 02-15-11.

CONSENT GIVEN BY: Lorenzo Gallardo INSPECTOR SIGNATURE: EMPLOYEE ID: 139

1st DATE & TIME OF INSPECTION: 01/25/11 2nd DATE & TIME OF INSPECTION:

3rd DATE & TIME OF INSPECTION:

REFER REPLY TO:

Los Angeles County Fire Dept • Health Hazardous Materials Division
Certified Unified Program Agency • Participating Agency

Southeast District Office
7300 Alondra Blvd #203
Paramount, CA 90723
(562) 790-1810

INSPECTION REPORT

BUSINESS	GENESIS TRUCKING	OWNER	HENRY GARCIA	DATE	10/22/07
ADDRESS	5035 E. FIREST PL # P SOUTH GATE CA 90280			FA	0003759

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked

Reference: Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6.5, 6.67 and 6.95 of the Health and Safety Code (HSC), and Titles 11 and 12 of the Los Angeles County Code (Co Ord)

	V	HAZARDOUS WASTE GENERATOR SUBJECT	SECTION		V	HAZARDOUS WASTE GENERATOR SUBJECT	SECTION
1		Hazardous waste determination	CCR 66262.11	24		Manifest copies retained for 3 years	CCR 66262.40(a)
2		Proper disposal of hazardous waste	HSC 25189.5 (a)	25		Consolidated manifest requirements	HSC 25160.2
3		Maintain/operate to prevent release/fire	CCR 66265.31	26		Hazardous waste transported by registered hauler	HSC 25163(a)
4		Hazardous waste labeling	CCR 66262.34(f)	27		LDR documents retained onsite	CCR 66268.7(a)(6)
5		Hazardous waste accumulation time	CCR 66262.34(a-d)	28		Hazardous waste analysis retained for 3 years	CCR 66262.40(c)
6		Hazardous materials storage and labeling	CCR 66261.2(f)	29		Personnel training	CCR 66265.16
7		Satellite accumulation	CCR 66262.34(e)	30		Contingency plan	CCR 66265.51
8		Containers leaking or not in good condition	CCR 66265.171	31		Emergency preparedness/prevention	CCR 66265.30-37
9		Hazardous waste containers closed	CCR 66265.173(a)	32		Source Reduction requirements for LQGs	CCR 67100.3
10		Separation of incompatibles	CCR 66265.177	33		Biennial Report requirements	CCR 66262.40-.41
11		Retrograde/accumulated speculatively	CCR 66262.10	34		Excluded recyclable material management	HSC 25143.2/.9
12		Empty containers	CCR 66261.7	35		Recyclable Material Report	HSC 25143.10
13		Used oil management	CHSC 25250.4	36		Site assessment requirements	HSC 25187(a)(1)
14		Used oil filter management	CCR 66266.130	37		Closure requirements	CCR 66265.111/114
15		Used battery management	CCR 66266.81	38		Reckless management of hazardous waste	HSC 25189.6
16		Contaminated textile management	HSC 25144.6	39		Other violation(s)	
17		Container inspection - weekly	CCR 66265.174			**HAZARDOUS MATERIALS HANDLER**	
18		Tank inspection - daily	CCR 66265.195	50	✓	Contingency plan/inventory submitted	HSC 25503.5
19		Tank operating requirements	CCR 66265.194	51		Plan and inventory updated & accurate	HSC 25505
20	✓	EPA ID number[submit DTSC form 1358]	CCR 66262.12	52		Regulated substance registration	HSC 25533(a)
21		Hazardous waste transported with manifest	CCR 66262.20			**ABOVEGROUND PETROLEUM STORAGE TANK**	
22		Hazardous waste manifest complete	CCR 66262.23(a)	60		SPCC Plan Referral to RWQCB (213) 576-6600	HSC 25270.3
23		Manifest copies to DTSC	CCR 66262.23(a)(4)	70		**PERMIT REQUIRED** – Submit UP Forms	Co Ord 12.50.075 HSC 25404.1.1

☐ **NO SIGNIFICANT VIOLATIONS OBSERVED ON DATE OF INSPECTION.**

☑ **NOTICE TO COMPLY: THE VIOLATION(S) CITED MUST BE CORRECTED BY** 11/22/07.

☐ **RETURN CERTIFICATION OF COMPLIANCE FOUND ON BACK OF THIS NOTICE.**

Attention: The items checked are in violation. A reinspection may occur at any time to verify compliance. Non-compliance could result in reinspection fees, permit revocation, and/or administrative/civil/criminal penalties. Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies.

#20 CCR 66262.12 Observed no facility EPA I.D number at the time of inspection. Provide EPA I.D number for the facility.

Inspected By:	Consent Given By: Print Name	Authorized Representative's Signature:
C.Y. CONUNAYA		Jose Solis Jr.

Los Angeles County Fire Dept • Health Hazardous Materials Division
Certified Unified Program Agency • Participating Agency

INSPECTION REPORT
SUMMARY OF VIOLATIONS AND NOTICE TO COMPLY

BUSINESS	FA	DATE
Genesis Trucking		10-22-07

#50 H/SC 25503.5, Observed no contingency plan/Chemical inventory disclosure at the time of inspection. Provide contingency plan/Chemical inventory disclosure for the facility.

Inspected By	Authorized Representative (signature)
C. Cannady	

Field Notes

LIST ORDER OF INSPECTION AS FOLLOWS: I. OPENING CONFERENCE II. WALK THROUGH III. DOCUMENTS IV. CLOSING CONFERENCE V. VIOLATIONS

OPENING CONFERENCE: Inspection consent was given by Jose Solisor, the facility's driver.
TYPE OF BUSINESS: Car dismantling facility.
WALK THROUGH: I was guided by Jose Solisor during the walk through inspection.
OBSERVATION: Hm: 2 cylinders of propane ? 200 lbs.
Hw: 2x55 gal drum container of waste oil (labeled)
2x55 gal drum container of used and drained oil filters. No contingency plan/ chemical inventory disclosure (NOV issued) and no facility EPA ID # (NOV issued).
DOCUMENTS: Gave UP form for completion and submission. A re-check fee notification was given to the facility and also a UP sample booklet
CLOSING CONFERENCE: The facility representative - Jose Solisor was advised to complete and ~~mail~~ mail the EPA I.D # application form immediately. NOV compliance date was set for 11/22/07.

CONSENT GIVEN BY: Jose Solisor INSPECTOR SIGNATURE: EMPLOYEE ID: 139
1st DATE & TIME OF INSPECTION: 11/22/07. 2nd DATE & TIME OF INSPECTION: 11/26/07.
3rd DATE & TIME OF INSPECTION: 01/15/08 4th Date - 01/29/08 5th Date 03/19/08

UNIFIED PROGRAM (UP) FORM
BUSINESS OWNER/OPERATOR IDENTIFICATION

☒ NEW BUSINESS ☐ OUT OF BUSINESS ☐ REVISE/UPDATE (EFFECTIVE 5/12/08) PAGE OF

I. IDENTIFICATION

FACILITY ID# F A0037597		BEGINNING DATE 100: 5-12-08	ENDING DATE 101
BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As): GENESIS TRUCKING		BUSINESS PHONE 102: (323) 541-3997	
BUSINESS SITE ADDRESS 103: 5035 FIRESTONE PL STE R			
CITY 104: SOUTH GATE	CA	ZIP CODE 105: 90280-35	
DUN & BRADSTREET 106		SIC CODE (4 digit #) 107	
COUNTY LOS ANGELES 108		UNINCORPORATED ☐ Yes ☐ No 133a	
BUSINESS OPERATOR NAME 109		BUSINESS OPERATOR PHONE 110	

II. BUSINESS OWNER

OWNER NAME 111: HENRY GARCIA		OWNER PHONE 112: (323) 541-3997
OWNER MAILING ADDRESS 113: 1582 E. 45TH ST		
CITY 114: LOS ANGELES	STATE 115: CA	ZIP CODE 116: 90011

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117: Henry S. Garcia		CONTACT PHONE 118: (323) 541-3997
CONTACT MAILING ADDRESS 119: 1582 E 45th St		
CITY 120: Los Angeles	STATE 121: CA	ZIP CODE 122: 90011

IV. EMERGENCY CONTACTS

-PRIMARY-	-SECONDARY-
NAME 123: Henry Garcia	NAME 128: Maria Garcia
TITLE 124:	TITLE 129: Asst. Manager
BUSINESS PHONE 125: (323) 541-3194	BUSINESS PHONE 130: (323) 397-7819
24-HOUR PHONE 126: (323) 541-3194	24-HOUR PHONE 131: (323) 397-7819
PAGER # 127	PAGER # 132

V. ADDITIONAL LOCALLY COLLECTED INFORMATION 133

NUMBER OF EMPLOYEES 133b: 5	FEDERAL TAX IDENTIFICATION NUMBER 133c

MAILING/ BILLING INFORMATION

ADDRESS 133d: 5035 Firestone Pl	CITY 133e: Los Angeles	STATE 133f: CA	ZIP CODE 133g: 90019
ATTN: 133h			

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE	DATE 134: 5-12-08	NAME OF DOCUMENT PREPARER 135
NAME OF SIGNER (print) 136: Henry A. Garcia	TITLE OF SIGNER 137: Asst. Manager	

RECEIVED

OFFICIAL USE ONLY	INSPECTOR	HW	HM	DISTRICT	INSPECTION DATE	DIV	BATT	STA

PARAMOUNT

Unified Program (UP) Form
CONSOLIDATED CONTINGENCY PLAN

COVER PAGE

FACILITY IDENTIFICATION

BUSINESS NAME 3		FACILITY ID # 1
GENESIS TRUCKING		0037597
SITE ADDRESS 103	CITY 104	ZIP CODE 105
5035 FIRESTONE PL STE R	SOUTH GATE	90280

The Consolidated Contingency Plan provides businesses a format to comply with the emergency planning requirements of the following three written hazardous materials emergency response plans required in California:

- Hazardous Materials Business Plan (HSC Chapter 6.95 Section 25504 (b) and 19 CCR Sections 2729-2732),
- Hazardous Waste Generator Contingency Plan (22 CCR Section 66264.52), and,
- Underground Storage Tank Emergency Response Plan and Monitoring Program (23 CCR Sections 2632 and 2641). These forms are not included in this packet.

This format is designed to reduce duplication in the preparation and use of emergency response plans at the same facility, and to improve the coordination between facility response personnel and local, state and federal emergency responders during an emergency. Use the chart below to determine which sections of the Consolidated Contingency Plan need to be completed for your facility. If you are unsure as to which programs your facility is subject to, refer to the Business Activities Page.

PROGRAMS	SECTION(S) TO BE COMPLETED
Hazardous Materials Business Plan (HMBP)	Cover Page, Section I, and Site Map(s)
Hazardous Waste Generator (HWG)	Cover Page, Section I, and Site Map(s)
Underground Storage Tank (UST)	Cover Page, Sections I and II, and Site Map(s)
HMBP, HWG, UST	Cover Page, Sections I and II, and Site Map(s)

A copy of the plan shall be submitted to your local CUPA and at least one copy of the plan shall be maintained at the facility for use in the event of an emergency and for inspection by the local agency. Describe below where a copy of your Contingency Plan, including the hazardous material inventories and Site Map(s), is located at your business:

I certify under penalty of law that I have personally examined and I am familiar with the information provided by this plan and to the best of my knowledge the information is accurate, complete, and true.

Printed Name of Owner/ Operator	Title of Owner/Operator
HENRY GARCIA	OWNER
Signature of Owner/ Operator	Date
	5-5-08

We appreciate the effort of local businesses in completing these plans and will assist in every possible way. If you have any questions, please contact your local CUPA or PA.

OFFICIAL USE ONLY		DATE RECEIVED		REVIEWED BY		
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

Unified Program (UP) Form
CONSOLIDATED CONTINGENCY PLAN

SECTION I: BUSINESS PLAN AND CONTINGENCY PLAN

G. Emergency Procedures

Briefly describe your business standard operating procedures in the event of a release or threatened release of hazardous materials:

1. **PREVENTION** (prevent the hazard) – Describe the kinds of hazards associated with the hazardous materials present at your facility. What actions would your business take to prevent these hazards from occurring? You may include a discussion of safety and storage procedures.

The most hazardous materials is oil spills and leaks that are contain in containers. They are all stored in safe zone where they won't be spilled. Our employees are well trained to handle these materials using protective equipment like gloves & safety glasses.

2. **MITIGATION** (reduce the hazard) – Describe what is done to lessen the harm or the damage to person(s), property, or the environment, and prevent what has occurred from getting worse or spreading. What is your immediate response to a leak, spill, fire, explosion, or airborne release at your business?

If there is any spills first we remove any materials that would cause more harm. Then remove unnecessary employee and have an well trained employee clean it with the proper materials such as absorbent towels and keep it from soil, water, or ground. With bigger spills that can't be contain our employees will call 911.

3. **ABATEMENT** (remove the hazard) – Describe what you would do to stop and remove the hazard. How do you handle the complete process of stopping a release, cleaning up, and disposing of released materials at your facility?

Our employees are to wear their protective gear for limited spills. They would clean with the correct materials to use and would be disposed properly. The container would be sealed tight and are properly labeled as hazardous material. The hazardous material are lawfully disposed. We would have the necessary notification for the Health hazardous Material Division of Los Angeles Fire Department and to the State Office of Emergency Services (OES).

SITE MAP

A site plan and storage map must be included with your Contingency Plan. For relatively small facilities, these document may be combined into one drawing. Since these drawings are intended for use in emergency response situations, large facilities *(generally those with complex and/or multiple buildings)* should provide an overall site plan and a separate storag map for each building/storage area. A blank Facility Site Map has been provided on the reverse side of this page. You ma complete that page or attach any other drawing(s) which contain(s) the information required below.

1. **Site Plan:** This drawing shall contain, at a minimum, the following information:

   a. Site Orientation (north, south, etc.);
   b. Approximate scale *(e.g. "1 inch = 10 feet".)*;
   c. Date the map was drawn;
   d. Locations of all buildings and other structures;
   e. Parking lots and internal roads;
   f. Hazardous materials loading/unloading areas;
   g. Outside hazardous materials storage or use areas;
   h. Storm drain and sanitary sewer drain inlets;
   i. Wells for monitoring of underground tank systems;
   j. Primary and alternate evacuation routes, emergency exits, and primary and alternate steging areas;
   k. Adjacent property use;
   l. Locations and names of adjacent streets and alleys;
   m. Access and egress points and roads.

2. **Storage Map(s):** The map(s) shall contain, at a minimum, the following information:

   a. General purpose of each section/area within each building *(e.g. "Office Area", "Manufacturing Area", etc.)*;
   b. Location of each hazardous material/waste storage, dispensing, use, or handling area *(e.g. individual underground tanks, aboveground tanks, storage rooms, paint booths, etc.)*. Each area shall be identified by e unique location code number, letter, or name *(e.g. "1", "2", "3", "A", "B", "C", etc.)*;
   c. Entrances to and exits from each building and hazardous material/waste room/area;
   d. Location of each utility emergency shut-off point *(i.e. gas, water, electric.)*;
   e. Location of each monitoring system control panel *(e.g. underground tank monitoring, toxic gas monitoring, etc.)*.

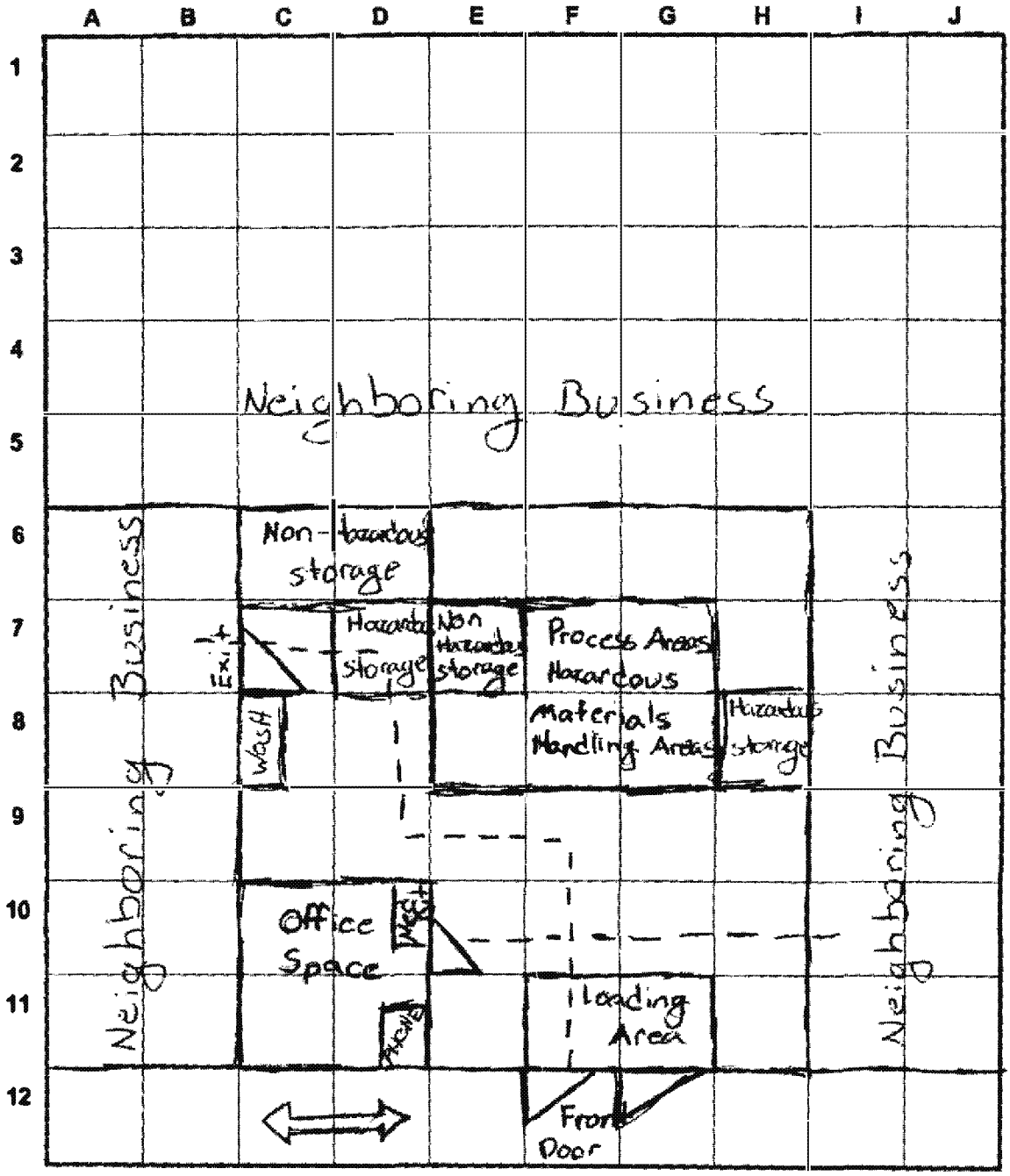
3. **Map Legend**

Item and/or Description	Location Code (LC)
Fire extinguishers	10-C
Emergency exit	7-C
Loading area	11-F + G
Wash	8-C
Hazardous ~~matee~~ waste material storage	7-D + 8-H
Hazardous material Handling area	7-EG + 8-EFG
Non-Hazardous material Storage	6-CD + 7-E
Spill kit	8-E

Unified Program (UP) Form
CO' `OLIDATED CONTINGENCY PLA.

SITE MAP

BUSINESS NAME			3
GENESIS TRUCKING			
SITE ADDRESS 103	CITY 104	ZIP CODE 105	
5035 FIRESTONE PL STE R	SOUTH GATE	90280	
DATE MAP DRAWN	MAP #	FACILITY ID # 1	
5-6-2003		FA0037597	



For Site Map

- Scale of Map
- Loading Areas
- Parking Lots
- Internal Roads
- Storm and Sewer Drains
- Adjacent Property Use
- Locations and Names of Adjacent Streets and Alleys
- Access and Egress Points and Roads
- Primary and Alternate Evacuation Routes

For Sub-Site Map

- Scale of Map
- Location of Each Storage Area
- Location of Each Hazardous Material Handling Area
- Location of Emergency Response Equipment

Scale:
1" = 16 Ft.

North

OFFICIAL USE ONLY			DATE RECEIVED		REVIEWED BY	
DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

Date run 11/18/2008 3:59:25PM
Run by
FA0037597

Los Angeles County Fire Department
Owner/Operator Identification
Beginning Date: 1/1/2008 Ending Date: 12/31/2008

Report #5314
V081007

Please clearly make changes/corrections.

OWNER FILE INFORMATION

Owner ID: OW0047379
Owner Name: HENRY GARCIA
Owner DBA: GENESIS TRUCKING
Owner Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Work/Business Phone: 323-864-3997
Billing/Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
ATTN/Care of:

Dvr Lic No: State:
Tax ID :
Owner Date of Birth:

FACILITY FILE INFORMATION

On Site Regulated Substances : Yes ___ No ___

Facility ID: FA0037597
Facility Name: GENESIS TRUCKING

Site Location: 5035 FIRESTONE BLVD # D
SOUTH GATE, CA 90280
Phone: 323-864-3997
Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Operator/Care of: HENRY GARCIA
SIC Code: 7549
Operating Hours: Days: Hours:
Station:

E-Mail Address:
Nature of Business: AUTOMOTIVE SERVICE, NEC

Date First Became Operational:

ENVIRONMENTAL CONTACT INFORMATION

Contact Name: HENRY GARCIA
1582 E 45TH ST
LOS ANGELES CA 90011
Phone : 323-864-3997

Dun & Bradst.: * Please Fill-Out

EMERGENCY CONTACT INFORMATION

	PRIMARY CONTACT:	SECONDARY CONTACT:
Name :	HENRY GARCIA	JOSE SOLIS JR
Title :	OWNER	DRIVER
Business Phone :	323-864-3997	310-467-8736
24 - Hour Phone :	323-864-3997	310-467-8736
Pager # :	Not Specified	Not Specified

ADDITIONAL INFORMATION

H 13-Aug-08

ASSESSORS PARCEL NUMBER: N/A

Certification: I certify under penalty of law that I have personally examined and am familiar with the information submitted in this inventory and believe the information is true, accurate and complete.

Print Name of Document Preparer : Henry Garcia

Signature of Owner/Operator :

Date: MAY 6, 2009.

CCP Status: 2008 5/15/2008 Received

Date: 11/18/2008

Hazardous Materials Inventory Statement

Report #5316
Run By :

Business Name: GENESIS TRUCKING
(Same as Facility Name or DBA) 5035 FIRESTONE BLVD # D SOUTH GATE

Chemical Location: Unit # 1
(Building/Storage Area) FIXED CONTAINERS ON SITE

Facility ID # : FA0037597

1. Haz Class	2. SIC Code	3. Common Name	Trade Secret	4. Hazardous Components (for mixtures only) Chemical Name	% Weight	EPA	CAS #	5. Type and Physical State	6. Quantities Max Daily	Average Daily	Largest Unit	7. Units	8. Storage Codes Storage Pressure	Storage Temp	9. Hazard Categories
ACETYLENE Sub-Location: MATERIAL HANDLING AREA If EPCRA, sign : H2018702 RS: N CAS # 74-86-2				Components Not Necessary for Pure Chemical				P M: Mix P: Pure W: Waste G L: Liquid S: Solid G: Gas	382 Curies: (If radioactive)	382 Days On Site: 365	382.00 Storage Container:* L	B A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	B A: Ambient B: > Ambient C: < Ambient D: Cryogenic Amt:	A	Y fire reactive Y presure rels. acute health chronic heal. radioactive
PROPANE Sub-Location: W INTERIOR WALL PROPANE OF PROPERTY If EPCRA, sign : H2017103 RS: N CAS #				Components Not Necessary for Pure Chemical				P M: Mix P: Pure W: Waste G L: Liquid S: Solid G: Gas	542 Curies: (If radioactive)	542 Days On Site: 365	271.00 Storage Container:* L	B A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	B A: Ambient B: > Ambient C: < Ambient D: Cryogenic Amt:	A	fire reactive Y presure rels. acute health chronic heal. radioactive
MOTOR OIL 10W-40 Sub-Location: WEST INTERIOR WALL OF PROPERTY If EPCRA, sign : H2017100 RS: N CAS #								M M: Mix P: Pure W: Waste L L: Liquid S: Solid G: Gas	110 Curies: (If radioactive)	55 Days On Site: 365	55.00 Storage Container:* D	A A: Gallons B: Cu. Feet C: Pounds D: Tons Waste Code:	A A: Ambient B: > Ambient C: < Ambient D: Cryogenic Amt:	A	fire reactive presure rels. acute health Y chronic heal. radioactive

* Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type
A	Aboveground Tank	D	Steel Drum	G	Carboy	J	Bag	M	Glass Bottle or Jug	P	Tank Wagon
B	Belowground Tank	E	Plastic/Non-metallic Drum	H	Silo	K	Box	N	Plastic Bottle or Jug	Q	Rail Car
C	Tank Inside Building	F	Can	I	Fiber Drum	L	Cylinder	O	Tote Bin	R	Other

WASTE OIL

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY–CHEMICAL DESCRIPTION (FORM 2731)
(One page per material per building or area)

☒ ADD ☐ DELETE ☐ REVISE REPORTING YEAR 2008 200 Page of

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
GENESIS TRUCKING

CHEMICAL LOCATION 201
WEST INTERIOR WALL OF PROPERTY

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202 ☐ YES ☒ NO

FACILITY ID # FA 0037547 1 MAP# (optional) 203 GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
PETROLIUM LUBRICATING OIL

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
MOTOR OIL 10W-40

EHS* ☐ Yes ☒ No 208

CAS# 209
N/A

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) H1, F1, R-0 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☐ a. PURE ☒ b. MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes ☒ No 212 CURIES NA 213

PHYSICAL STATE (Check one item only) ☐ a. SOLID ☒ b. LIQUID ☐ c. GAS 214

LARGEST CONTAINER 55 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b. REACTIVE ☐ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☒ e. CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
55	110	N/A	N/A

UNITS* (Check one item only) ☒ a. GALLONS ☐ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE 222
365

STORAGE CONTAINER CODE-CHECK THE APPROPRIATE BOX BELOW

☐ a. ABOVEGROUND TANK ☐ e. PLASTIC/NONMETALLIC DRUM ☐ i. FIBER DRUM ☐ m. GLASS BOTTLE ☐ q. RAIL CAR
☐ b. UNDERGROUND TANK ☐ f. CAN ☐ j. BAG ☐ n. PLASTIC BOTTLE ☐ r. OTHER
☐ c. TANK INSIDE BUILDING ☐ g. CARBOY ☐ k. BOX ☐ o. TOTE BIN
☒ d. STEEL DRUM ☐ h. SILO ☐ l. CYLINDER ☐ p. TANK WAGON 223

STORAGE PRESSURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes ☐ No 228	229
2 230	231	☐ Yes ☐ No 232	233
3 234	235	☐ Yes ☐ No 236	237
4 238	239	☐ Yes ☐ No 240	241
5 242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY–CHEMICAL DESCRIPTION (FORM 2731)

(One page per material per building or area)

☒ ADD ☐ DELETE ☐ REVISE REPORTING YEAR 2008 200 | Page of

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As): GENESIS TRUCKING 3

CHEMICAL LOCATION 201: MATERIAL HANDLING AREA

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) 202: ☐ YES ☒ NO

FACILITY ID #: F A 0 0 3 7 5 9 7 1

MAP# (optional) 203: 1

GRID# (optional) 204: 5-E

II. CHEMICAL INFORMATION

CHEMICAL NAME 205: ACETYLENE

TRADE SECRET 206: ☐ Yes ☒ No (If Subject to EPCRA, refer to instructions)

COMMON NAME 207: WELDING GAS

EHS* 208: ☐ Yes ☒ No

CAS# 209: 74-86-2

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) 210: H-4, F-4, R-2

HAZARDOUS MATERIAL TYPE (Check one item only) 211: ☒ a. PURE ☐ b. MIXTURE ☐ c. WASTE

RADIOACTIVE 212: ☐ Yes ☒ No

CURIES 213: N/A

PHYSICAL STATE (Check one item only) 214: ☐ a. SOLID ☐ b. LIQUID ☒ c. GAS

LARGEST CONTAINER 215: 382

FED HAZARD CATEGORIES (Check all that apply) 216: ☒ a. FIRE ☐ b. REACTIVE ☒ c. PRESSURE RELEASE ☐ d. ACUTE HEALTH ☐ e. CHRONIC HEALTH

AVERAGE DAILY AMOUNT 217: 382

MAXIMUM DAILY AMOUNT 218: 382

ANNUAL WASTE AMOUNT 219: N/A

STATE WASTE CODE 220: N/A

UNITS* (Check one item only) 221: ☐ a. GALLONS ☒ b. CUBIC FEET ☐ c. POUNDS ☐ d. TONS
* If EHS, amount must be in pounds

DAYS ON SITE 222: 365

STORAGE CONTAINER CODE-CHECK THE APPROPRIATE BOX BELOW 223:

☐ a. ABOVEGROUND TANK	☐ e. PLASTIC/NONMETALLIC DRUM	☐ i. FIBER DRUM	☐ m. GLASS BOTTLE	☐ q. RAILCAR
☐ b. UNDERGROUND TANK	☐ f. CAN	☐ j. BAG	☐ n. PLASTIC BOTTLE	☐ r. OTHER
☐ c. TANK INSIDE BUILDING	☐ g. CARBOY	☐ k. BOX	☐ o. TOTE BIN	
☐ d. STEEL DRUM	☐ h. SILO	☒ l. CYLINDER	☐ p. TANK WAGON	

STORAGE PRESSURE 224: ☐ a. AMBIENT ☒ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT

STORAGE TEMPERATURE 225: ☒ a. AMBIENT ☐ b. ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d. CRYOGENIC

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes ☐ No 228	229
2 230	231	☐ Yes ☐ No 232	233
3 234	235	☐ Yes ☐ No 236	237
4 238	239	☐ Yes ☐ No 240	241
5 242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

PROPANE

UNIFIED PROGRAM (UP) FORM
HAZARDOUS MATERIALS INVENTORY–CHEMICAL DESCRIPTION (FORM 2731)
(One page per material per building or area)

☒ ADD ☐ DELETE ☐ REVISE REPORTING YEAR 2008 200 Page of

I. FACILITY INFORMATION

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3
GENESIS TRUCKING

CHEMICAL LOCATION WEST INTERIOR WALL 201
PROPANE" OF PROPERTY

CHEMICAL LOCATION CONFIDENTIAL (EPCRA) ☐ YES ☒ NO 202

FACILITY ID # FA 0037597 1 MAP# (optional) 203 GRID# (optional) 204

II. CHEMICAL INFORMATION

CHEMICAL NAME 205
PROPANE

TRADE SECRET ☐ Yes ☒ No 206
If Subject to EPCRA, refer to instructions

COMMON NAME 207
PROPANE" LIQUID PETROLIUM GAS

EHS* ☐ Yes ☒ No 208

CAS# N/A 209

*If EHS is "Yes", all amounts below must be in lbs.

FIRE CODE HAZARD CLASSES (Complete if required by CUPA) H-2, F-4, R-0 210

HAZARDOUS MATERIAL TYPE (Check one item only) ☒ a. PURE ☐ b MIXTURE ☐ c. WASTE 211

RADIOACTIVE ☐ Yes ☒ No 212 CURIES N/A 213

PHYSICAL STATE (Check one item only) ☐ a SOLID ☐ b. LIQUID ☒ c GAS 214

LARGEST CONTAINER 271 215

FED HAZARD CATEGORIES (Check all that apply) ☐ a. FIRE ☐ b REACTIVE ☒ e PRESSURE RELEASE ☐ d ACUTE HEALTH ☐ e CHRONIC HEALTH 216

AVERAGE DAILY AMOUNT 217	MAXIMUM DAILY AMOUNT 218	ANNUAL WASTE AMOUNT 219	STATE WASTE CODE 220
542	542	N/A	NA

UNITS* (Check one item only) ☐ a. GALLONS ☒ b CUBIC FEET ☐ c POUNDS ☐ d TONS 221
* If EHS, amount must be in pounds

DAYS ON SITE: 365 222

STORAGE CONTAINER CODE-CHECK THE APPROPRIATE BOX BELOW

☐ a ABOVEGROUND TANK ☐ e PLASTIC/NONMETALLIC DRUM ☐ i FIBER DRUM ☐ m GLASS BOTTLE ☐ q RAILCAR
☐ b UNDERGROUND TANK ☐ f CAN ☐ j BAG ☐ n PLASTIC BOTTLE ☐ r. OTHER
☐ c TANK INSIDE BUILDING ☐ g CARBOY ☐ k BOX ☐ o TOTE BIN
☐ d. STEEL DRUM ☐ h SILO ☒ l. CYLINDER ☐ p TANK WAGON 223

STORAGE PRESSURE ☐ a. AMBIENT ☒ b ABOVE AMBIENT ☐ c BELOW AMBIENT 224

STORAGE TEMPERATURE ☒ a. AMBIENT ☐ b ABOVE AMBIENT ☐ c. BELOW AMBIENT ☐ d CRYOGENIC 225

%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1 226	227	☐ Yes ☐ No 228	229
2 230	231	☐ Yes ☐ No 232	233
3 234	235	☐ Yes ☐ No 236	237
4 238	239	☐ Yes ☐ No 240	241
5 242	243	☐ Yes ☐ No 244	245

If more hazardous components are present at greater than 1% by weight if non-carcinogenic, or 0.1% by weight if carcinogenic, attach additional sheets of paper capturing the required information.

ADDITIONAL LOCALLY COLLECTED INFORMATION 246

If EPCRA, Please Sign Here
(Facilities reporting Chemicals subject to EPCRA reporting thresholds must sign each Chemical Description page for each EPCRA reported chemical.)

OFFICIAL USE ONLY	DATE RECEIVED	REVIEWED BY

DIV	BN	STA	OTHER	DISTRICT	CUPA	PA

Date: 11/6/2009

Hazardous Materials Inventory Statement

Report #5316
Run By: Melissa Lamb

Business Name: GENESIS TRUCKING
(Same as Facility Name or DBA) 5035 FIRESTONE BLVD # D SOUTH GATE

Chemical Location: Unit # |
(Building/Storage Area) FIXED CONTAINERS ON SITE

Facility ID#: FA0037597

1. Haz. Class	2. Geo Code/Sub	3. Chemical Name	Trade Name	Chemical Name	4. Hazardous Components (For mixtures only) % Weight	RN#	CAS#	5. Type and Physical State	6. Quantities Max. Daily	Average Daily	Largest Cont.	7. Units	8. Storage Codes Storage Pressure	Storage Temp.	9. Hazard Categories
		ACETYLENE		Components Not Necessary for Pure Chemical				P (M: Mix P: Pure W: Waste)	382	382	382.00	B (A: Gallons B: Cu. Feet C: Pounds D: Tons)	B (A: Ambient B: > Ambient C: < Ambient D: Cryogenic)	A	Y fire reactive Y presure rels. acute health chronic heal. radioactive
	Sub-Location: MATERIAL HANDLING AREA							G (L: Liquid S: Solid G: Gas)	Curies: (If radioactive)	Days On Site: 365	Storage Container:* 1.	Waste Code:	Amt:		
If EPCRA, sign:															
8/08/09	RS: N	CAS # 74-86-2													
		PROPANE		Components Not Necessary for Pure Chemical				P (M: Mix P: Pure W: Waste)	542	542	271.00	B (A: Gallons B: Cu. Feet C: Pounds D: Tons)	B (A: Ambient B: > Ambient C: < Ambient D: Cryogenic)	A	Y fire reactive Y presure rels. acute health chronic heal. radioactive
	Sub-Location: W INTERIOR WALL PROPANE OF PROPERTY							G (L: Liquid S: Solid G: Gas)	Curies: (If radioactive)	Days On Site: 365	Storage Container:* L	Waste Code:	Amt:		
If EPCRA, sign:															
8/08/09	RS: N	CAS #													
		MOTOR OIL 10W-40						M (M: Mix P: Pure W: Waste)	110	55	55.00	A (A: Gallons B: Cu. Feet C: Pounds D: Tons)	A (A: Ambient B: > Ambient C: < Ambient D: Cryogenic)	A	Y fire reactive presure rels. acute health Y chronic heal. radioactive
	Sub-Location: WEST INTERIOR WALL OF PROPERTY							L (L: Liquid S: Solid G: Gas)	Curies: (If radioactive)	Days On Site: 365	Storage Container:* D	Waste Code:	Amt:		
If EPCRA, sign:															
8/08/09	RS: N	CAS #													

* Storage Type

Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type	Code	Storage Type
A	Aboveground Tank	D	Steel Drum	G	Carboy	J	Bag	M	Glass Bottle or Jug	P	Tank Wagon
B	Belowground Tank	E	Plastic/Non-metallic Drum	H	Silo	K	Box	N	Plastic Bottle or Jug	Q	Rail Car
C	Tank Inside Building	F	Can	I	Fiber Drum	L	Cylinder	O	Tote Bin	R	Other

Owner Name Change

UNIFIED PROGRAM (UP) FORM
BUSINESS OWNER/OPERATOR IDENTIFICATION

☐ NEW BUSINESS ☐ OUT OF BUSINESS ☒ REVISE/UPDATE (EFFECTIVE / /) PAGE OF

I. IDENTIFICATION

FACILITY ID# FA0037597 | BEGINNING DATE 100 | ENDING DATE 101

BUSINESS NAME (Same as FACILITY NAME or DBA – Doing Business As) 3: GENESIS TRUCKING | BUSINESS PHONE 102: (323) 541-3194

BUSINESS SITE ADDRESS 103: 5035 Firestone Blvd. #D

CITY 104: South Gate | CA | ZIP CODE 105: 90280

DUN & BRADSTREET 106 | SIC CODE (4 digit #) 107

COUNTY LOS ANGELES 108 | UNINCORPORATED ☐ Yes ☐ No 133a

BUSINESS OPERATOR NAME 109: Henry A. Garcia | BUSINESS OPERATOR PHONE 110: (323) 541-3194

II. BUSINESS OWNER

OWNER NAME 111: Henry A. Garcia | OWNER PHONE 112: (323) 541-3194

OWNER MAILING ADDRESS 113: 1582 E. 45th ST

CITY 114: Los Angeles | STATE 115: CA | ZIP CODE 116: 90011

III. ENVIRONMENTAL CONTACT

CONTACT NAME 117 | CONTACT PHONE 118

CONTACT MAILING ADDRESS 119

CITY 120 | STATE 121 | ZIP CODE 122

IV. EMERGENCY CONTACTS

-PRIMARY-		-SECONDARY-	
NAME	123	NAME	128
TITLE	124	TITLE	129
BUSINESS PHONE	125	BUSINESS PHONE	130
24-HOUR PHONE	126	24-HOUR PHONE	131
PAGER #	127	PAGER #	132

V. ADDITIONAL LOCALLY COLLECTED INFORMATION 133

NUMBER OF EMPLOYEES 133b | FEDERAL TAX IDENTIFICATION NUMBER 133c

MAILING/ BILLING INFORMATION

ADDRESS 1582 E. 45th ST. 133d | CITY Los Angeles 133e | STATE CA 133f | ZIP CODE 90011 133g

ATTN: Henry A. Garcia 133h

Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.

SIGNATURE OF OWNER/OPERATOR OR DESIGNATED REPRESENTATIVE | DATE 134: 8/16/10 | NAME OF DOCUMENT PREPARER 135

NAME OF SIGNER (print) 136: Henry A. Garcia | TITLE OF SIGNER 137: Owner/President

RECEIVED AUG 17 2010 PARAMOUNT

OFFICIAL USE ONLY	INSPECTOR	HW	HM	DISTRICT	INSPECTION DATE	DIV	BATT	STA

A County Fire Department
Facility Information Report

OWNER FILE INFORMATION

* Clearly make changes/corrections here.

Owner ID: OW0047379 New Owner ID:
Owner Name: HENRY GARCIA Tax ID :
Owner DBA: GENESIS TRUCKING Drvr Licns :
Owner Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Work/Business Phone: 323-541-3194
Billing/Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
ATTN/Care of: HENRY A GARCIA
Ownership Type: 1

FACILITY FILE INFORMATION

Facility ID: FA0037597 Account ID: AR0046034
Facility Name: GENESIS TRUCKING
No. of Employee: 5
Site Location: 5035 FIRESTONE BLVD # D
SOUTH GATE, CA 90280
Phone: 323-541-3194
Mailing Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Operator/Care of: HENRY GARCIA E-Mail Address: **NO E-Mail Address**
District: SE - SOUTHEAST
City Code: SGAT **SOUTH GATE**
CUPA Jurisdiction: CO
Operating Hours: Days Hours
SIC Code: 7549 - Automotive services, nec
Business Type / Code: 02 INDIVIDUAL
Station:

GENERAL HEALTH PROGRAM ELEMENTS

Record ID	Current Program Element	Current Status	# of Unit	EPA #	Effective Date Beg.	Effective Date End	Changes: Program Element	Changes: Status
PR0062125	3001 - HM HANDLER, FEEGROUP 01	Active, billable			07/07/07			
PR0062126	1801 - HW GEN, 0-5 EMPLOYEES	Active, billable			07/07/07			
PR0065108	8848 - CALIFORNIA ELECTRONIC REGISTRIES EXCHANGE	Active, billable						

Addition Program Element:

CA Waste Code	221	181	223		
RCRA Waste Code					
AMOUNT per quarter	300	135	85		
UNITS (PQTY) Pounds, Gallons, Tons, Yards	Gallons	Pounds	Pounds		

CONSENT GIVEN BY: Lorenzo Gallardo INSPECTOR SIGNATURE: EMPLOYEE ID: 139
1st DATE & TIME OF INSPECTION: 01-25-11 2nd DATE & TIME OF INSPECTION: 03-17-11
3rd DATE & TIME OF INSPECTION:

Los Angeles County Fire Dept • Health Hazardous Materials Division
Certified Unified Program Agency • Participating Agency

REFER REPLY TO:
Southeast District Office
9155 Telegraph Rd. Suite 102
Pico Rivera, CA 90660
P (562) 654-2620
F (562) 654-2628

INSPECTION REPORT

BUSINESS	OWNER	DATE
GENESIS TRACKING	HENRY GARCIA	01-25-11
ADDRESS 5035 FIRESTONE BLVD #D, SOUTH GATE 90280		FA 0037597.

The following items, if applicable, have been inspected. This document constitutes a Summary of Violations and Notice to Comply if the violation (V) column is checked *Reference Titles 19 and 22 of the California Code of Regulations (CCR), Chapters 6.5, 6.67, and 6.95 of the Health and Safety Code (HSC), and Titles 11 and 12 of the Los Angeles County Code (Co Ord)*

	HAZARDOUS WASTE GENERATOR				HAZARDOUS WASTE GENERATOR		
	V	SUBJECT	SECTION		V	SUBJECT	SECTION
1		Hazardous waste determination	CCR 66262.11	24		Manifest copies retained for 3 years	CCR 66262.40(a)
2		Proper disposal of hazardous waste	HSC 25189.5 (a)	25		Consolidated manifest requirements	HSC 25160.2
3	✓	Maintain/operate to prevent release/fire	CCR 66265.31	26		Hazardous waste transported by registered hauler	HSC 25163(a)
4	✓	Hazardous waste labeling	CCR 66262.34(f)	27		LDR documents retained onsite	CCR 66268.7(a)(6)
5		Hazardous waste accumulation time	CCR 66262.34(a-d)	28		Hazardous waste analysis retained for 3 years	CCR 66262.40(c)
6		Hazardous materials storage and labeling	CCR 66261.2(f)	29		Personnel training	CCR 66265.16
7		Satellite accumulation	CCR 66262.34(e)	30		Contingency plan	CCR 66265.51
8		Containers leaking or not in good condition	CCR 66265.171	31	✓	Emergency preparedness/prevention	CCR 66265.30-.37
9		Hazardous waste containers closed	CCR 66265.173(a)	32		Source Reduction requirements for LQGs	CCR 67100.3
10		Separation of incompatibles	CCR 66265.177	33		Biennial Report requirements	CCR 66262.40-.41
11		Retrograde/accumulated speculatively	CCR 66262.10	34		Excluded recyclable material management	HSC 25143.2/.9
12		Empty containers	CCR 66261.7	35		Recyclable Material Report	HSC 25143.10
13		Used oil management	CHSC 25250.4	36		Site assessment requirements	HSC 25187(a)(1)
14		Used oil filter management	CCR 66266.130	37		Closure requirements	CCR 66265.111/114
15		Used battery management	CCR 66266.81	38		Reckless management of hazardous waste	HSC 25189.6
16		Contaminated textile management	HSC 25144.6	39		Other violation(s)	
17		Container inspection - weekly	CCR 66265.174			**HAZARDOUS MATERIALS HANDLER**	
18		Tank inspection - daily	CCR 66265.195	50		Contingency plan/inventory submitted	HSC 25503.5
19		Tank operating requirements	CCR 66265.194	51		Plan and inventory updated & accurate	HSC 25505
20		EPA ID number(submit DTSC form 1358)	CCR 66262.12	52		Regulated substance registration	HSC 25533(a)
21		Hazardous waste transported with manifest	CCR 66262.20			**ABOVEGROUND PETROLEUM STORAGE TANK**	
22		Hazardous waste manifest complete	CCR 66262.23(a)	60		SPCC Plan Referral to RWQCB (213) 576-6600	HSC 25270.3
23		Manifest copies to DTSC	CCR 66262.23(a)(4)	70		**PERMIT REQUIRED** -- Submit UP Forms	Co Ord 12.50.075

☐ **NO SIGNIFICANT VIOLATIONS OBSERVED ON DATE OF INSPECTION.**

☑ **NOTICE TO COMPLY: THE VIOLATION(S) CITED MUST BE CORRECTED BY** 02-15-11.

☐ **RETURN CERTIFICATION OF COMPLIANCE FOUND ON BACK OF THIS NOTICE.**

Attention: The items checked are in violation. A reinspection may occur at any time to verify compliance. Non-compliance could result in reinspection fees, permit revocation, and/or administrative/civil/criminal penalties. Any time granted for correction of the violation(s) does not preclude any enforcement action by this Department or other agencies.

It is improper and illegal for any County officer, employee or inspector to solicit bribes, gifts or gratuities in connection with performing their official duties. Improper solicitations include requests for anything of value such as cash, discounts, free services, paid travel or entertainment, or tangible items such as food or beverages. Any attempt by a County employee to solicit bribes, gifts or gratuities for any reason should be reported immediately to either the County manager responsible for supervising the employee or the Fraud Hotline at (800) 544-6861 or www.lacountyfraud.org.
YOU MAY REMAIN ANONYMOUS.

#3 CCR 66265.31. Observed poor housekeeping operation at the facility at the time of inspection.

Inspected By	Consent Given By:	Authorized Representative's Signature
C. Olivarraya	Lorenzo Gallardo	

Los Angeles County Fire Dept • Health Hazardous Materials Division
Certified Unified Program Agency • Participating Agency

INSPECTION REPORT
SUMMARY OF VIOLATIONS AND NOTICE TO COMPLY

BUSINESS: GENESIS TRUCKING	FA 0037597	DATE: 01-25-11

Properly organize all the cast off materials that are potential fire hazards in the facility.
#4 CCR 66262.34 (f) (k): Observed 1x 250 gal. tote of used/waste oil without label at the time of inspection. Provide appropriate label for the 1x 250 gal. tote of waste oil in the Hazardous waste storage room.
#31 CCR 66265.30-37: Observed no Emergency preparedness/prevention posting in the facility at the time of inspection. Provide an Emergency preparedness/prevention posting in the facility.

Authorized Representative (Signature):

Notes 01-25-11.

Consent — Lorenzo Gallardo, Supervisor.

Type — Car dismantling facility.

Walk through — Guided by Lorenzo Gallardo

Observation — 1 x 250 gal tote of waste oil & without labels (NOV)

— Poor house keeping (NOV)

— No Emergency preparedness/Prevention posting (NOV)

Document — No Manifest copies reviewed

Closing — NOV contents discussed w/ Lorenzo Gallardo.

Date run : 3/21/2011 10:53:43AM
Run by :
FA0037597 GENESIS TRUCKING

LA County Fire Department
Facility Information Report

OWNER FILE INFORMATION

* Clearly make changes/corrections here.

Owner ID: OW0047379 New Owner ID:
Owner Name: HENRY GARCIA Tax ID :
Owner DBA: GENESIS TRUCKING Drvr Licns :
Owner Address: 1582 E 45TH ST
LOS ANGELES, CA 90011
Work/Business Phone: 323-541-3194
Billing/Mailing Address: Personal Matters / Ex. 6
ATTN/Care of: HENRY A GARCIA
Ownership Type: 1

FACILITY FILE INFORMATION

Facility ID: FA0037597 Account ID: AR0046034
Facility Name: GENESIS TRUCKING
No. of Employee: 5 DL
Site Location: 5035 FIRESTONE BLVD # D
SOUTH GATE, CA 90280
Phone: 323-541-3194
Mailing Address: Personal Matters / Ex. 6
Operator/Care of: HENRY GARCIA E-Mail Address: **NO E-Mail Address**
District: SE - SOUTHEAST
City Code: SGAT **SOUTH GATE**
CUPA Jurisdiction: CO
Operating Hours: Days: Hours:
SIC Code: 7549 - Automotive services, nec
Business Type / Code: 02 INDIVIDUAL
Station:

OUT OF BUSINESS
PLEASE INACTIVATE/DELETE
WITH AN EFFECTIVE
DATE OF 03-16-11.

CY

GENERAL HEALTH PROGRAM ELEMENTS

Record ID	Current Program Element	Current Status	# of Unit	EPA #	Effective Date Beg	Effective Date End	Changes: Program Element	Changes: Status
PR0062125	3001 - HM HANDLER, FEE GROUP 01	Active, billable			07/07/07			
PR0062126	1001 - HW GEN, 0-5 EMPLOYEES	Active, billable			07/07/07			
[illegible]	[illegible]	[illegible]						

Addition Program Element:

CA Waste Code					
RCRA Waste Code					
AMOUNT per quarter					
UNITS (PQTY) Pounds, Gallons, Tons, Yards					

CONSENT GIVEN BY: INSPECTOR SIGNATURE: EMPLOYEE ID:

1st DATE & TIME OF INSPECTION: 2nd DATE & TIME OF INSPECTION:

3rd DATE & TIME OF INSPECTION: