



OAKPORT PROPERTY RENTAL 2024 LEASE INFORMATION

11± acres of the EBMUD Oakport Property is available for temporary, short-to-medium term leases on a 'first come-first served' basis to qualified parties.

GENERAL LEASE REQUIREMENTS:

- 2024 Lease Rate \$0.26/sq.ft./month
- Non-Refundable Application Fee \$600.00
- Security Deposit in the form of a Cashiers Check \$10,000.00
- Applicable City of Oakland Land Use Permits
- Commercial General & Auto Liability, Pollution Liability and Workers Compensation Insurance (must be on EBMUD forms)

PROPERTY CONDITION:

Natural, relatively flat dirt lot, rented 'as-is'.

SECURITY FENCING:

- 4' high fencing in place along Oakport Street boundary of property. Lessee is responsible for site security and installation of temporary fencing around the perimeter of the leased area.
- Lessee responsible for the installation and removal of its own locks on the access gate to the Property.

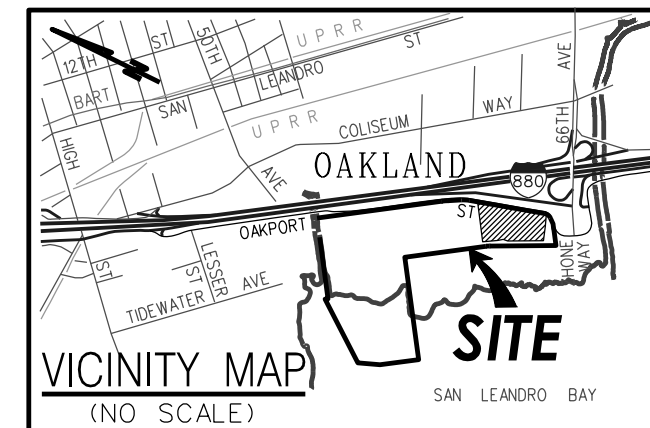
UTILITIES:

- Electrical Lessee responsible at its own cost and expense.
- Water Temporary hydrant meters are available for non-potable uses such as dust control.
- No sewer available Lessee responsible for porta-johns at its own cost and expense.
- No refuse collection Lessee responsible for collection and removal of all refuse at its own cost and expense.

For more information, please contact:

Lea Andalis
(510) 287-1017

lea.andalis@ebmud.com



OAKPORT

ST

- WELL
- WELL

Access gate to Parcel A

Pipeline Training Academy

PARCEL A

Approximately 11 Acres

Property lines in green

100 0 100 200

SCALE: 1" = 100'

EXHIBIT A

REFERENCES:

1. E.B.M.U.D. DRAWINGS: 3816-B, & 4695-G.
2. E.B.M.U.D. PROPERTY NO. 548, RE: 1188, IM: 608, 4/28/1964.

NO.	DATE	REVISION	BY	REC. APP

DRAWN BY	C. CHOU
CHECKED BY	R. HOLMAN
APPROVED	
SURVEYING SUPVR.	
L.S. NO.	

EAST BAY MUNICIPAL UTILITY DISTRICT
OAKLAND , CALIFORNIA

PROPERTY

OAKPORT LEASE AREAS-REVISED

CITY OF OAKLAND - ALAMEDA COUNTY

STRUCTURE, PROJ. CODE,
OR ZONE DESIGNATION

SCALE 1" = 100'

DATE 9 DECEMBER 2014

3836-B

File No: _____

**APPLICATION FOR USE OF EBMUD PROPERTY
OR REQUEST FOR INFORMATION**

(Please complete this form with as much information as possible. Incomplete applications cannot be processed and will result in delays in the District's response time.)

APPLICANT NAME: _____

FIRM (if applicable): _____

ADDRESS: _____

PHONE: Home: _____ Cell: _____

ADDRESS/LOCATION OF EBMUD PROPERTY (Street address, Map exhibit or Assessor's Parcel Number):

USE REQUESTED (Give a complete description of your project. Attach an extra sheet, if necessary):

ARE OTHER COUNTY/CITY APPROVALS OR PERMITS REQUIRED? YES NO

If yes, please give details:

Under the California Environmental Quality Act (CEQA) your request to use EBMUD property may be considered a project which requires completion of environmental documentation. Has any type of environmental documentation (Negative Declaration or Environmental Impact Report) already been completed for this project? If so, please submit a copy of that documentation, highlighting the area(s) which specifically deal with your requested use of EBMUD property.

ADDITIONAL COMMENTS/REMARKS:

NOTE: If your project involves any soils studies, engineering plans or environmental documentation, these documents must be attached in duplicate with this application.

EAST BAY MUNICIPAL UTILITY DISTRICT
OAKPORT PROPERTY RENTAL - ADDITIONAL INFORMATION

Date:

Applicant:

Company:

Address:

Email:

Phone:

Acreage required (inc. preferred shape of rental area):

Dates of operation (inc. setup and packdown):

Hours of operation (eg. 7am - 5pm):

Description of property use (eg. vision, goal, examples of experience with similar uses):

Estimated number of attendees:

Food and drink vendors - Y/N:

- *Alcohol - Y/N (if yes, please list types):*
- *Food vendors (eg. food trucks, mobile kitchens etc.):*
- *Other beverages or hospitality:*
- *Area required:*

Entertainment - Y/N:

- *Types of entertainment:*
- *Area required:*

Utilities required - Y/N:

- *Types of utilities needed:*
- *Contact made with respective provider - Y/N*

Temporary structures, site improvements, other installations - Y/N:

- *Details regarding temporary improvements:*
- *Area required:*

Site security (EBMUD is not responsible for providing event or site security):

Parking spaces (no. of spaces and area required):

Are County or City approvals or permits required - Y/N:

Under the California Environmental Quality Act (CEQA) your request to use EBMUD property may be considered a project which requires completion of environmental documentation. Has any type of environmental documentation (Negative Declaration or Environmental Impact Report) already been completed for this project? If so, please submit a copy of that documentation, highlighting the area(s) which specifically deal with your requested use of EBMUD property.

Any other relevant information to accompany application:

NOTE: If your project involves any soils studies, engineering plans or environmental documentation, these documents must be attached in duplicate with this application.



CERTIFICATE OF COMMERCIAL GENERAL, and AUTO LIABILITY INSURANCE

THIS IS TO CERTIFY TO:

East Bay Municipal Utility District (EBMUD)
Real Estate Services (RL)
375 11th Street, MS: 903
P.O. Box 24055
Oakland, CA 94623-1055

THE FOLLOWING DESCRIBED POLICY HAS BEEN ISSUED TO:District Contract Number: Insured: Address: **LOCATION AND DESCRIPTION OF PROJECT/AGREEMENT:** **TYPE OF INSURANCE:** Commercial General and Automobile Liability Coverage/Endorsements as required by agreement.**LIMITS OF LIABILITY:****(MINIMUM)**

\$2,000,000/Occurrence, Bodily Injury, Property Damage-General Liability
\$2,000,000/Occurrence, Bodily Injury, Property Damage-Auto Liability

SELF INSURED RETENTION (\$):(AUTO) (GL)

(if applicable)

Aggregate Limits (AUTO) (GL)

(if applicable)

INSURANCE COMPANY(IES):(Auto) (GL) **POLICY NUMBER(S):**(Auto) (GL) **POLICY TERM:**

From:

(Auto) (GL)

To:

(Auto) (GL) **THE FOLLOWING COVERAGES OR ENDORSEMENTS ARE INCLUDED IN THE POLICY(IES):**

1. ☒ The District, its Directors, Officers and Employees are *Additional Insureds* in the policy(ies) as to work being performed under this agreement. ENDORSEMENT NO.
2. ☒ The coverage is *Primary and non-contributory* to any other applicable insurance carried by the District.
3. ☒ The policy(ies) covers *contractual liability*.
4. ☒ The policy(ies) is written on an *occurrence* basis.
5. ☒ The policy(ies) covers District's Property in Lessee's care, custody and control.
6. ☒ The policy(ies) covers *personal injury* (libel, slander, and wrongful entry and eviction) liability.
7. ☒ The policy(ies) covers *explosion, collapse, and underground* hazards.
8. ☒ The policy(ies) covers *products and completed operations*.
9. ☒ The policy(ies) covers the use of *owned, non-owned* and hired automobiles.
10. ☒ The policy(ies) and/or a separate pollution liability policy shall cover pollution liability for claims related to the release or the threatened release of pollutants into the environment arising out of or resulting from Lessee's performance under this agreement.
11. ☒ The policy(ies) will not be canceled nor the above coverages/endorsements reduced without 30 days written notice to East Bay Municipal Utility District at the address above.

**IT IS HEREBY CERTIFIED that the above policies provide liability insurance as required by the agreement
between the East Bay Municipal Utility District and the insured.**

Signed Address Firm Date Phone



CERTIFICATE OF POLLUTION LIABILITY INSURANCE

THIS IS TO CERTIFY TO:**East Bay Municipal Utility District (EBMUD)**

Real Estate Services (RL)

375 11th Street, MS: 903

P.O. Box 24055

Oakland, CA 94623-1055

THE FOLLOWING DESCRIBED POLICY HAS BEEN ISSUED TO:

District Contract Number:

Insured:

Address:

LOCATION AND DESCRIPTION OF PROJECT/AGREEMENT:**TYPE OF INSURANCE:** Pollution Liability (If Claims Made Basis, need a three year tail)**MINIMUM LIMITS OF LIABILITY:** \$1,000,000 each claim - \$2,000,000 aggregate.**INSURANCE COMPANY:****POLICY NUMBER:****POLICY TERM:**

From:

To:

POLICY TAIL:

From:

To:

The policy will not be canceled nor the above coverage reduced without 30 days written notice to East Bay Municipal Utility District at the address above.

IT IS HEREBY CERTIFIED the above policy provides insurance as required by the agreement between East Bay Municipal Utility District and the Insured.

Signed:

Authorized Signature of Broker, Agent, or Underwriter

Date:

Firm:

Address:

Phone:

"This certificate or verification of insurance is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate or verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of the policies."



CERTIFICATE OF WORKERS' COMPENSATION INSURANCE

THIS IS TO CERTIFY TO:

East Bay Municipal Utility District (EBMUD)
Real Estate Services (RL)
375 11th Street, MS: 903
P.O. Box 24055
Oakland, CA 94623-1055

THE FOLLOWING DESCRIBED POLICY HAS BEEN ISSUED TO:

District Contract Number

Insured:

Address:

LOCATION AND DESCRIPTION OF PROJECT/AGREEMENT:

TYPE OF INSURANCE: Workers' Compensation Insurance as required by California State Law.

INSURANCE COMPANY:

POLICY NUMBER:

POLICY TERM: From: To:

The policy will not be canceled nor the above coverage reduced without 30 days written notice to East Bay Municipal Utility District at the address above.

IT IS HEREBY CERTIFIED the above policy provides insurance as required by the agreement between East Bay Municipal Utility District and the Insured.

Signed:
Authorized Signature of Broker, Agent, or Underwriter

Date:

Firm:

Address:

Phone:

"This certificate or verification of insurance is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed herein. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate or verification of insurance may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of the policies."