



March 8, 2022

Ms. Nichole Williamson Director, Health and Human Services Alpine County Health Department 75 Diamond Valley Road Markleeville, California 96120-9532

Dear Ms. Williamson:

During October through December, 2021, CalEPA and the state program agencies conducted a performance evaluation of the Alpine County Health Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, and review of regulated facility file documentation and California Environmental Reporting System data.

Upon completion of the evaluation, a preliminary Summary of Findings report was developed to identify various findings: program deficiencies with corrective actions, incidental findings with resolutions and program observations and recommendations. Enclosed, please find the final Summary of Findings report.

Based upon review and completion of the performance evaluation, CalEPA has rated the CUPA's overall implementation of the Unified Program as satisfactory with improvement needed.

To demonstrate progress towards the correction of program deficiencies and incidental findings identified in the final Summary of Findings, the CUPA must submit an Evaluation Progress Report within 60 days from the date of this letter (May 9, 2022), and every 90 days thereafter. Evaluation Progress Reports are required to be submitted to CalEPA until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved. Each Evaluation Progress Report must be submitted to Tim Brandt at timothy.brandt@calepa.ca.gov, or mail.

Thank you for your continued commitment to the protection of public health and the environment through the implementation of the Unified Program.

To ensure the CUPA Performance Evaluation process is as effective and efficient as intended, I kindly request the included evaluation survey to be completed and returned to Melinda Blum within 30 days. If you would like to have specific comments remain anonymous, please indicate so on the survey.

If you have any questions or need further assistance, please contact Melinda Blum at Melinda.Blum@calepa.ca.gov.

Air Resources Board • Department of Pesticide Regulation • Department of Resources Recycling and Recovery • Department of Toxic Substances Control Office of Environmental Health Hazard Assessment • State Water Resources Control Board • Regional Water Quality Control Boards

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Sincerely,

Jason Boetzer, REHS Assistant Secretary

Local Program Coordination and Emergency Response

**Enclosures** 

cc sent via email:

Mr. Dennis Lampson
Director, Environmental Health
Alpine County Health Department
75 Diamond Valley Road
Markleeville, California 96120-9532

Mr. Jerry Sipe CUPA Inspector Alpine County Health Department 75 Diamond Valley Road Markleeville, California 96120-9532

Ms. Cheryl Prowell
Supervising Water Resource Control Engineer
State Water Resources Control Board
P.O. Box 2231
Sacramento, California 95812-2231

Mr. Tom Henderson Engineering Geologist, Acting UST Unit Coordinator State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Ms. Maria Soria Environmental Program Manager Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721

Mr. Ryan Miya Senior Environmental Scientist, Acting Supervisor Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721 Ms. Nichole Williamson Page 3

## cc sent via email:

Mr. James Hosler, Chief CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Jennifer Lorenzo Senior Environmental Scientist (Supervisor) CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Mr. Sean Farrow Environmental Scientist State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Ms. Jenna Hartman, REHS Environmental Scientist State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Mr. Matt McCarron Senior Environmental Scientist, Specialist Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721

Mr. Kevin Abriol Senior Environmental Scientist, Specialist Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721

Mr. Glenn Warner Senior Environmental Scientist, Specialist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Denise Villanueva Environmental Scientist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460 Ms. Nichole Williamson Page 4

cc sent via email:

Mr. John Paine Unified Program Manager California Environmental Protection Agency

Mr. John Elkins Environmental Program Manager California Environmental Protection Agency

Ms. Melinda Blum Senior Environmental Scientist, Supervisor California Environmental Protection Agency

Ms. Elizabeth Brega Senior Environmental Scientist, Supervisor California Environmental Protection Agency

Mr. Garett Chan Environmental Scientist California Environmental Protection Agency

Mr. Tim Brandt Environmental Scientist California Environmental Protection Agency





# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

**CUPA: Alpine County Health Department** 

Evaluation Period: March 2021 – December 2021

**Evaluation Team Members:** 

• CalEPA Team Lead: Timothy Brandt

• **DTSC:** Kevin Abriol, Matthew McCarron, Diana Peebler, Ryan Miya

• Cal OES\*: Jack Harrah, Garett Chan

• State Water Board: Sean Farrow,

Wesley Franks

• CAL FIRE-OSFM: Glenn Warner,

Denise Villanueva

This Final Summary of Findings includes:

- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations
- Examples of outstanding program implementation

The findings contained within this evaluation report are considered final.

Based upon review and completion of the evaluation, the Unified Program implementation and performance of the CUPA is considered **satisfactory with improvements needed**.

Questions or comments regarding this evaluation should be directed to the CalEPA Team Lead:

#### Tim Brandt

CalEPA Unified Program Phone: (916) 323-2204

E-mail: timothy.brandt@calepa.ca.gov

The CUPA is required to submit an Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings Report, and every 90 days thereafter, until all deficiencies and incidental findings have been acknowledged as corrected or resolved.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead and must include a narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report.

Evaluation Progress Report submittal dates for the first year following the evaluation are:

1<sup>st</sup> Progress Report: May 9, 2022 2nd Progress Report: July 11, 2022

3<sup>rd</sup> Progress Report: September 12, 2022 4<sup>th</sup> Progress Report: November 14, 2022

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<sup>\*</sup>Effective July 1, 2021, oversight of the Hazardous Materials Release Response Plans and Inventory and the California Accidental Response Prevention Program transitioned from Cal OES to CalEPA.

# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

Program deficiencies identify specific aspects regarding inadequate implementation of the Unified Program. The CUPA must complete the corrective action indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute.

#### 1. DEFICIENCY:

The CUPA is not inspecting each Hazardous Waste Generator (HWG) facility once every three years, per the inspection frequency established in the Inspection and Enforcement (I&E) Plan.

Review of facility files, inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information from the California Environmental Reporting System (CERS) April 1, 2018 through March 31, 2021, and additional information provided by the CUPA finds:

• 7 of 16 (44%) HWG facilities were not inspected once every three years.

The I&E Plan specifies HWG inspections will be consolidated with other program inspections:

 Page 8: "B. Combined Inspections: It is the practice of the Alpine CUPA to conduct a single inspection event that combines different Unified Program elements when practical. HMRRP, Hazardous Waste Generators and Treatment Facilities, Cal ARP (RMP), and UST program element inspections are routinely completed during one inspection event."

Review of CERS CME information and facility file information finds the following facilities had an inspection for one or more other program elements, however the facility was either overdue for a HWG inspection or in need of an initial HWG inspection, which was not conducted:

# CERS ID 10477579

- A Business Activities submittal on January 10, 2014, indicates the facility is a HWG, however there is no record of a HWG inspection.
- A Hazardous Materials Release Response Plans and Inventories (HMRRP), also known as Business Plan, inspection was conducted on September 17, 2020.

## CERS ID 10477582

- A Business Activities submittal on March 4, 2014, indicates the facility is a HWG, however there is no record of a HWG inspection.
- An HMRRP inspection was conducted on September 17, 2020.

## CERS ID 10477588

- A Business Activities submittal on March 3, 2014 and September 27, 2019, as well as subsequent submittals indicate the facility is a HWG, however there is no record of any HWG inspection.
- An HMRRP inspection was conducted on September 17, 2020.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

# **DEFICIENCIES REQUIRING CORRECTION**

## CERS ID 10490788

- Business Activities submittals on January 2, 2015, February 19, 2020, and March 2, 2021, indicate the facility is a HWG. There is no record of any HWG inspection. This facility has manifested waste since 1994 and submitted EPA ID verification questionnaires in each year, except 2017, indicating the facility is a HWG.
- An HMRRP inspection was conducted on October 21, 2020.

## • CERS ID 10474033

- Business Activities submittals on December 15, 2013, June 12, 2015, and October 30, 2020, indicate the facility is a HWG. The most recent HWG inspection was conducted on June 6, 2014.
- HMRRP and Aboveground Petroleum Storage Act (APSA) inspections were conducted on November 2, 2020.
- The Hazardous Waste Tracking System (HWTS) database indicates this facility has manifested hazardous waste every year since 2011.

#### CERS ID 10476493

- The most recent HWG inspection was conducted on August 4, 2016.
- An Underground Storage Tank (UST) inspection was conducted on October 9, 2017 and August 27, 2020.

# • CERS ID 10473220

- Business Activities submittals on June 16, 2015, June 29, 2019, and March 6, 2021, indicate the facility is a HWG.
- The most recent HWG inspection was conducted on December 20, 2013.
- This facility's EPA ID number has been inactive since June 30, 2014, and has no manifests in HWTS.

Note: This deficiency was incorporated as part of a deficiency issued during the 2018 CUPA Performance Evaluation for not implementing the Hazardous Waste program.

## CITATION:

California Code of Regulations (CCR), Title 27, Section 15200(a)(3)(A) [DTSC]

# **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each HWG facility is inspected per the inspection frequency established in the I&E Plan. The action plan will include a sortable spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG facility that has not been inspected within the last three years. For each HWG facility listed, the spreadsheet will include, at a minimum:

- Facility name;
- CERS ID; and
- Date of the last routine inspection.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated spreadsheet.

## 2. DEFICIENCY:

The CUPA is not ensuring all regulated businesses subject to Business Plan reporting requirements submit a chemical inventory or "no change" certification annually to CERS.

Review of Hazardous Material Business Plans (HMBPs) submitted to CERS by regulated businesses indicates:

 7 of 35 (20%) have not submitted a chemical inventory (including site map) or a no-change certification within the last year.

## CITATION:

Health and Safety Code (HSC), Chapter 6.95, Sections 25505(a)(1) and (2) and 25508(a)(2) and (3) [CalEPA]

# **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, and provide CalEPA with an action plan to ensure that HMBPs are thoroughly reviewed and contain all required elements before being accepted in CERS.

By the 4<sup>th</sup> Progress Report, the CUPA will ensure each regulated business subject to Business Plan reporting requirements submits a complete HMBP to CERS.

## 3. DEFICIENCY:

The CUPA is not inspecting each facility subject to Business Plan requirements at least once every three years.

Review of CERS CME information and additional information provided by the CUPA indicates the following:

• 12 of 35 (34%) Business Plan facilities were not inspected within the last three years.

## CITATION:

HSC, Chapter 6.95, Section 25511(b) [CalEPA]

## **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each Business Plan facility is inspected at least once every three years.

By the 6<sup>th</sup> Progress Report, the CUPA will ensure that all Business Plan facilities have been inspected at least once in the last three years.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

## 4. DEFICIENCY:

The CUPA is not inspecting each Aboveground Petroleum Storage Act (APSA) Program tank facility in accordance with the I&E Plan.

Review of CERS CME information and information provided by the CUPA indicates:

- 3 of 6 (50%) APSA tank facilities that store 10,000 gallons or more of petroleum have not been inspected within the last three years.
- 4 of 10 (40%) other APSA tank facilities have not been inspected within the last three years.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

## CITATION:

HSC, Chapter 6.67, Section 25270.5(a) and (b) [OSFM]

# **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each APSA tank facility is inspected in accordance with the I&E Plan for compliance with the Spill Prevention, Control, and Countermeasure (SPCC) Plan requirements of APSA. The action plan will include at a minimum:

- A proposed schedule to inspect those APSA tank facilities, prioritizing the most delinquent inspections to be completed prior to any other APSA inspection based on a risk analysis of all APSA tank facilities (i.e., large volumes of petroleum, proximity to navigable water).
- Future steps to ensure each APSA tank facility will be inspected in accordance with the I&E Plan.

By the 5<sup>th</sup> Progress Report, the CUPA will have inspected each APSA tank facility identified on the 1<sup>st</sup> Progress Report spreadsheet in accordance with the I&E Plan.

# 5. DEFICIENCY:

The CUPA is not inspecting all Underground Storage Tank (UST) facilities at least once every 12 months

Review of Semi-Annual Report (Report 6) data for the following Fiscal Years (FYs) finds the following UST facilities were not inspected at least once every 12 months:

- FY 2019/2020
  - o 2 of 3 (67%)
- FY 2018/2019
  - o 2 of 3 (67%)

Note: The CUPA completed annual inspections for all UST facilities in FY 2020/2021.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

### CITATION:

HSC, Chapter 6.7, Section 25288(a) [State Water Board]

## **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will develop, implement and provide CalEPA with an action plan to ensure each UST is inspected at least once every 12 months.

By the 3rd Progress Report and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with annual UST compliance inspection reports until all UST facilities are inspected for FY 2021/2022.

## 6. DEFICIENCY:

The CUPA is not consistently following up and documenting return to compliance (RTC) information in CERS for APSA tank facilities cited with violations.

Review of CERS CME information indicates there is no documented RTC for the following APSA Program violations:

### FY 2020/2021

• 6 of 13 (46%)

# **CITATION:**

HSC, Chapter 6.11, Section 25404.1.2(c) HSC, Chapter 6.67, Section 25270.4.5(a) CCR, Title 27, Sections 15185(a) and (c) and 15200(a) and (e) [OSFM]

# **CORRECTIVE ACTION:**

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will prioritize follow-up actions with each APSA tank facility with an open violation based on the level of hazard present to public health and the environment.

By the 4<sup>th</sup> Progress Report, the CUPA will have ensured each APSA tank facility with an open violation has achieved compliance, or the CUPA will have applied appropriate enforcement.

# 7. DEFICIENCY:

The CUPA is not certifying to CalEPA every three years that a complete review of the area plan has been conducted and any necessary revisions have been made.

The last update of the area plan was January 2012.

#### CITATION:

HSC, Chapter 6.95, Section 25503(d)(2) [CalEPA]

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

## **CORRECTIVE ACTION:**

By the 6<sup>th</sup> Progress Report, the CUPA will certify to CalEPA that a complete review of the area plan has been conducted and any necessary revisions have been made. The CUPA will provide CalEPA with the reviewed and revised area plan.

Note: The Governor's Office of Emergency Services (Cal OES) HazMat Section administers the Hazardous Materials Emergency Preparedness (HMEP) grant program. The CUPA may qualify for grant funding to assist with costs associated with the review and update of the Area Plan. Additional information on the HMEP grant program is available at: <a href="https://www.caloes.ca.gov/cal-oes-divisions/fire-rescue/hazardous-materials/HazMat-Emergency-Preparedness-Grant">https://www.caloes.ca.gov/cal-oes-divisions/fire-rescue/hazardous-materials/HazMat-Emergency-Preparedness-Grant</a>.

#### 8. DEFICIENCY:

The CUPA is not ensuring APSA tank facilities annually submit a HMBP to CERS when an HMBP is provided in lieu of a tank facility statement.

Review of HMBPs submitted to CERS by APSA tank facilities in lieu of a tank facility statement indicates:

• 4 of 16 (25%) have not submitted a chemical inventory and site map within the last 12 months.

#### CITATION:

HSC, Chapter 6.67, Section 25270.6(a) [OSFM]

## **CORRECTIVE ACTION:**

By the 3<sup>rd</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure that HMBPs provided in lieu of a tank facility statement are annually submitted to CERS.

By the 5<sup>th</sup> Progress Report, the CUPA will ensure each APSA tank facility has annually submitted an HMBP to CERS when an HMBP is provided in lieu of a tank facility statement, or the CUPA will apply appropriate enforcement.

# 9. DEFICIENCY:

The UST operating permit and permit conditions, issued under the Unified Program Facility Permit (UPFP), is inconsistent with CCR, Title 23, Chapter 16 (UST Regulations) and HSC, Chapter 6.7 requirements.

Review of UST operating permits and permit conditions finds the following inconsistencies with UST Regulations and HSC:

 Permit Condition 1 references HSC, Chapter 6.75 and CCR, Title 23, Chapter 18, however, the CUPA does not have regulatory authority under HSC, Chapter 6.75 or CCR, Title 23, Chapter 18.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

- Permit Condition 2 states the owner or operator must report an unauthorized release occurrence to the CUPA within 24 hours after the release has been detected or should have been detected; however, an owner or operator is required to report a "reportable" release to a CUPA within 24 hours after a release has been detected or should have been detected. Also, the owner or operator shall transmit information regarding the unauthorized release to the CUPA no later than five working days after the date of the occurrence of the unauthorized release. Lastly, the owner or operator must report the unauthorized release to the Office of Emergency Services if emergency response personnel and equipment were involved at any time during the unauthorized release.
- Permit Condition 4 states the approved monitoring program, response plan, plot plan and maintenance records must be maintained on-site per Title 23, Section 2632 (d) (1) & (2); however, the regulatory requirement is to have these plans in CERS. In addition, Section 2712(b) of UST Regulations, reflects the maintenance of records on-site.
- Permit Condition 5 states all permit fees are paid and up to date, however, the condition must accurately reflect HSC, Section 25285(c).

Note: State Water Board correspondence dated April 7, 2017, "Amended Requirements for Unified Program Facility Permits Effective January 1, 2017," may be referenced.

### CITATION:

HSC, Chapter 6.7, Sections 25285(c) and 25295(a)(1) CCR, Title 23, Sections 2650, 2651, 2652, and 2712(b), (c) and (i) [State Water Board]

# **CORRECTIVE ACTION:**

During the evaluation, the CUPA provided a revised UST operating permit template, including UST operating permit conditions, which the State Water Board will review and provide feedback to with the 1<sup>st</sup> Evaluation Progress Report response.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit template and/or UST operating permit conditions, based on feedback from the State Water Board, and will provide the amended UST operating permit template and/or revised UST operating permit conditions to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised UST operating permit and revised UST operating permit conditions under the consolidated UPFP and will provide CalEPA with three UST operating permits issued to UST facilities using the revised UST operating permit template.

As a result of the CUPA permitting cycle, the State Water Board will consider this deficiency corrected upon completion and acceptance of the revised or amended UST operating permit template and permit conditions. Issuance of the revised or amended UST operating permit template and permit conditions will be verified during the next CUPA Performance Evaluation.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

# **DEFICIENCIES REQUIRING CORRECTION**

## 10. DEFICIENCY:

UST submittals are being accepted in CERS by CUPA personnel that have not obtained the required International Code Council (ICC) California UST Inspector certification.

The following is an example:

CERS ID 10476424: CERS UST submittal accepted on February 10, 2018.

Note: The following CERS FAQ may be referenced: "Is ICC Certification Required for Submittal Review?"

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

#### CITATION:

CCR, Title 23, Section 2715(g) [State Water Board]

# **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will revise and provide CalEPA with the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process which identifies only UST inspection staff with ICC California UST Inspector certification may accept UST submittals in CERS.

By the 1st Progress Report, for CERS ID 10476424, the CUPA will require the owner or operator to resubmit CERS UST information and ensure UST inspection staff with ICC California UST Inspector certification, review and either "Accept" or "Not Accept" the submitted CERS UST information. This action is necessary as the CERS UST submittal is out of compliance, and the resubmittal is necessary to demonstrate compliance with UST Regulations and HSC.

By the 2nd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure are necessary based on feedback from State Water Board, the CUPA will provide CalEPA with the amended Data Management Procedure, or other applicable procedure. If no amendments are necessary, the CUPA will implement the revised Data Management Procedure, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure were necessary, the CUPA will implement the amended Data Management Procedure, or other applicable procedure.

Currently, the CUPA only has one staff member who develops and implements the UST policies and program. Therefore, the corrective action will not include training or provision of training documentation. In the event the CUPA employs additional UST inspection staff, the CUPA will ensure the appropriate training occurs and will document the training. Training documentation will consist of an outline of the training conducted and the UST inspection staff in attendance.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

## 11.DEFICIENCY:

The local ordinance, Chapter 8.28 Underground Storage of Hazardous Substance, is inconsistent with UST Regulations and HSC, and the *ALPINE COUNTY HEALTH AND HUMAN SERVICES ENVIRONMENTAL HEALTH SERVICE FEES* schedule.

Review of the local ordinance finds the following inconsistencies:

- 8.28.020 adopts HSC, Chapter 6.75 and the regulations pursuant thereto, as adopted by the State Water Resources Control Board. However, the CUPA does not have regulatory authority under HSC, Chapters 6.75 or 18, as the CUPA is not designated as a Local Oversight Program (LOP) by the State Water Resources Control Board.
- 8.28.040(A)(2) indicates the "fees for the annual permit to operate permit" are "thirty-five dollars per facility per year." In addition, 8.28.040(A)(2) indicates "there will be a fee of thirty dollars per tank per year for each tank located at that facility." The CUPA's fees for the annual permit to operate are not consistent with the ALPINE COUNTY HEALTH AND HUMAN SERVICES ENVIRONMENTAL HEALTH SERVICE FEES schedule adopted September 1, 2009.
- 8.28.040(B) indicates the "Installation/Abandonment" fees are "fifteen dollars per underground tank." The CUPA's fee for installation/abandonment is not consistent with the ALPINE COUNTY HEALTH AND HUMAN SERVICES ENVIRONMENTAL HEALTH SERVICE FEES schedule adopted September 1, 2009.

# **CITATION:**

HSC, Chapter 6.7 Section 25299.2, 25299.3

CCR, Title 23, Section 2620(c)

CCR, Title 27, Sections 15100(b)(1)(C),15160,15330(a) (1) and(a)(2), 15280(c)(5) and 15150(c)(2) [State Water Board]

## **CORRECTIVE ACTION:**

The CUPA will ensure the local ordinance is consistent with UST Regulations, HSC, and the ALPINE COUNTY HEALTH AND HUMAN SERVICES ENVIRONMENTAL HEALTH SERVICE FEES schedule (fee schedule).

By the 1st Progress Report, the CUPA will provide CalEPA with a detailed plan to revise and adopt the local ordinance to be consistent with UST Regulations and HSC, and/or revise the fee schedule, or a combination of both. The plan will at a minimum include:

- A timeline for revising, drafting, and adopting the ordinance;
- If applicable, a time for revising the fee schedule; and
- Provisions for the CUPA to provide the revised local ordinance and/or fee schedule to CalEPA and the State Water Board for analysis to ensure consistency with UST Regulations, HSC, and the fee schedule.

By the 2nd Progress Report, the CUPA will, if necessary, revise the plan, local ordinance, and/or fee schedule based on feedback from the State Water Board.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

Considering the length of time required to draft, revise, and adopt, local ordinances and fee schedules, the State Water Board will consider this deficiency closed, but not corrected, after the CUPA has provided an acceptable plan for the revision and adoption of the revised local ordinance and fee schedule as outlined above. During implementation of the plan, the State Water Board must have an opportunity to review the revised draft of the local ordinance and fee schedule, which will allow the State Water Board to work with the CUPA to ensure the revised draft of the local ordinance and fee schedule are consistent with UST Regulations, HSC, and the fee schedule, the CUPA certification approval, and meets all other requirements.

During the next CUPA performance evaluation, the State Water Board will verify that the revised local ordinance was adopted and/or the fee schedule was revised, or a combination of both.

## 12. DEFICIENCY:

The CUPA is not correctly citing or reporting UST violations in CERS.

The CUPA is not consistently citing violations for failure to conduct an overfill prevention equipment inspection. Initial overfill prevention equipment inspections must have been completed no later than October 13, 2018. Upon adoption of this new provision in UST Regulations, the CUPA did not cite violations to ensure the new provision was implemented.

Review of the annual UST compliance inspection reports, associated Overfill Prevention Equipment Inspection Report Forms, and CERS CME information finds the following overfill prevention equipment inspections were conducted beyond the October 13, 2018, deadline and the CUPA did not cite violations:

- CERS ID 10155541: Overfill Prevention Equipment Inspection Report Form dated July 29, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection July 29, 2019, and provide accurate United States Environmental Protection Agency (U.S. EPA) TCR 9b reporting.
- CERS ID 10476424: Overfill Prevention Equipment Inspection Report Form dated August 29, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection August 27, 2020, and provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10476493: Overfill Prevention Equipment Inspection Report Form dated August 29, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection August 27, 2020. However, the CUPA cited a violation for the failed Overfill Prevention Equipment Inspection and provided accurate U.S. EPA TCR 9b reporting.

# **CITATION:**

HSC, Chapter 6.7, Sections 25288(b), 25299 and 25299.2(a)

CCR, Title 23, Sections 2637.2(a), 2665(b), 2712(c), (e), (g) and 2713(c) and (d)

CCR, Title 27, Section 15290(a)(3)

[State Water Board]

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

## **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will review and revise the I&E Plan, or other applicable procedure to ensure the establishment of a process to delineate how the CUPA will ensure UST inspection staff are trained on new provisions of UST Regulations and HSC, and to consistently and correctly cite violations for failure to implement those provisions. The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2<sup>nd</sup> Progress Report, if amendments to the revised I&E Plan, or other applicable procedure are necessary based on feedback from the State Water Board, the CUPA will provide CaIEPA with the amended I&E Plan, or other applicable procedure. If no amendments are necessary, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 3<sup>rd</sup> Progress Report, if amendments to the revised I&E Plan, or other applicable procedure were necessary, the CUPA will implement the amended I&E Plan, or other applicable procedure.

By the 5<sup>th</sup> Progress Report and with each subsequent Progress Report until considered corrected, the CUPA will provide the State Water Board with the UST compliance inspection reports and Overfill Prevention Equipment Inspection Report Forms for three UST facility records, as requested by the State Water Board, for facilities that have been inspected after implementation of the revised or amended I&E Plan, or other applicable procedure. For each UST facility that has not had a completed overfill prevention equipment inspection, the CUPA will provide CalEPA with a narrative of the applied appropriate enforcement.

Currently, the CUPA only has one staff member who develops and implements the UST policies and program. Therefore, the corrective action will not include training or provision of training documentation. In the event the CUPA employs additional UST inspection staff, the CUPA will ensure the appropriate training occurs and will document the training. Training documentation will consist of an outline of the training and the UST inspection staff in attendance.

## 13. DEFICIENCY:

UST compliance inspection information and facility inventory in Report 6 is inconsistent with CUPA Self-Audit Reports and CERS CME information.

Review of Report 6, CUPA Self-Audit Reports, and CERS CME information for UST facility inspection frequency during each of the following FYs finds:

- UST facilities inspected during FY 2019/2020:
  - Report 6 1 of 3 (33%)
  - CUPA Self-Audit Report 3 of 3 (100%)
  - CERS CME Information 1 of 3 (33%)
- UST facilities inspected during FY 2018/2019:
  - Report 6 3 of 3 (100%)
  - CUPA Self-Audit Report 3 of 3 (100%)
  - CERS CME Information 1 of 3 (33%)

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

### CITATION:

HSC, Chapter 6.11, Section 25404(e)(4) CCR, Title 23, Section 2713(c)(3) CCR, Title 27, Sections 15187(c) and 15290(b) [State Water Board]

# **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will develop and provide CalEPA with an action plan that, at a minimum, includes:

- A thorough analysis and explanation as to how Report 6, CUPA Self-Audit Reports, and CERS CME information have inconsistent UST compliance inspection information; and
- A strategy to ensure UST compliance inspection information in Report 6, CUPA Self-Audit Reports, and CERS will be consistently reported.

By the 1st Progress Report, the CUPA will review and revise the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process, which at a minimum will address how UST compliance inspection information is consistently reported in Report 6, CUPA Self-Audit Reports, and CERS. The CUPA will provide CalEPA with the revised Data Management Procedure, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended Data Management Procedure, or other applicable procedure. If no amendments are necessary, the CUPA will implement the revised Data Management Procedure, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure were necessary, the CUPA will implement the amended Data Management Procedure, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will accurately report UST compliance inspection information in Report 6 and CERS for two consecutive Report 6 reporting periods.

Currently, the CUPA only has one staff member who develops and implements the UST policies and program. Therefore, the corrective action will not include training or provision of training documentation. In the event the CUPA employs additional UST inspection staff, the CUPA will ensure the appropriate training occurs and will document the training. Training documentation will consist of an outline of the training and the UST inspection staff in attendance.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

# **DEFICIENCIES REQUIRING CORRECTION**

## 14. DEFICIENCY:

The CUPA is not ensuring the UST owner or operator submits UST testing and leak detection documents to the CUPA within 30 days of completion.

UST testing and leak detection documents were not found in facility files or in CERS for the following facilities:

- CERS ID 10476424 is missing:
  - 2018 Monitoring System Certification Form
  - 2018 Spill Container Testing Report Form
- CERS ID 10476493 is missing:
  - o 2019 Monitoring System Certification Form
  - o 2019 Spill Container Testing Report Form
  - o 2018 Monitoring System Certification Form
  - 2018 Spill Container Testing Report Form
  - o 2019 Secondary Containment Testing Report Form

Note: The examples provided above may not represent all instances of this deficiency.

# **CITATION:**

HSC, Chapter 6.7, Section 25289(b) CCR, Title 23, Sections 2637(a)(1)(B)(i) and (f), 2637.1(a)(2) and (e), 2637.2(a)(1)(B), (a)(2)(B) and (e), 2638(d), 2643(g), and 2644.1(a)(5) [State Water Board]

# **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure the establishment of a process for the CUPA to require the owner or operator to submit UST testing and leak detection documents to the CUPA within 30 days. The process will include, at a minimum:

- Ensuring owners or operators submit UST testing and leak detection documents within the regulatory time frame.
- Apply appropriate enforcement if the owner or operator fails to submit UST testing and leak detection documents.

The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan. If no amendments are necessary, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure were necessary, the CUPA will implement the amended I&E Plan, or other applicable procedure.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **DEFICIENCIES REQUIRING CORRECTION**

By the 4th Progress Report, and in each subsequent Progress Report until considered corrected, the CUPA will provide up to three UST facility records, if not available in CERS, which have been selected by the State Water Board. The selected records will include, at a minimum, monitoring certifications results, secondary containment test results, spill bucket test results, and any other testing or leak detection documents showing the date the testing and leak detection documents were received by the CUPA.

Currently, the CUPA only has one staff member who develops and implements the UST policies and program. Therefore, the corrective action will not include training or provision of training documentation. In the event the CUPA employs additional UST inspection staff, the CUPA will ensure the appropriate training occurs and will document the training. Training documentation will consist of an outline of the training and the UST inspection staff in attendance.

#### 15. DEFICIENCY:

The Unified Program administrative procedures have components that are missing, inaccurate, or incomplete.

- The following administrative procedures are missing:
  - Financial management
    - A single fee system in compliance with Section 15210
      - The CUPA provided information indicating that a single fee system is in place; however, no procedure or policy was provided.
    - A fee accountability program in compliance with Section 15220
      - The CUPA provided information indicating that a fee accountability program is in place; however, no procedure or policy was provided.
    - A surcharge collection and reimbursement program in compliance with Section 15250
      - The CUPA provided information indicating that a surcharge collection and reimbursement program is in place; however, no procedure or policy was provided.
  - Permitting
    - The CUPA provided several example facility permits; however, no procedure or policy for the permitting program was provided in compliance with Section 15190.
- The following administrative procedures have components that are inaccurate or incomplete:
  - o Public participation
    - The provided procedural document has provisions to ensure receipt and consideration of comments from the public, but not regulated businesses in compliance with Section 15180(e)(1)(A).
    - The provided procedural document has provisions to coordinate, consolidate, and make consistent locally required public hearings related to changes in the CUPA fee schedule, which cannot be applied to any Unified Program element as required in compliance with Section 15180(e)(1)(B).

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

- The provided procedural document has provisions to coordinate, consolidate, and make consistent locally required public notices for changes in the CUPA fee schedule, which cannot be applied to any activities related to any Unified Program Element as required in compliance with Section 15180(e)(1)(C).
- Data Management
  - Collection, retention and management of electronic data and documents in compliance with Section 15185
    - The provided procedures do not indicate that Annual Self-Audit Reports and all enforcement files will be retained for a minimum of five years.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

# CITATION:

CCR, Title 27, Section 15180(e)(5)(A-C) and (7)(A), 15185(b) and (f), 15190 and 15220 [CalEPA]

## **CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will provide CalEPA with the revised Unified Program administrative procedures that adequately incorporate all required components.

By the 2nd Progress Report, if amendments to the revised Unified Program administrative procedures, are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the amended Unified Program administrative procedures. If no amendments are necessary, the CUPA will train CUPA personnel on the revised Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA, which at a minimum will include an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised Unified Program administrative procedures.

By the 3rd Progress Report, if amendments to the revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the amended Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA, which at a minimum will include an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the amended Unified Program administrative procedures.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### INCIDENTAL FINDINGS REQUIRING RESOLUTION

Incidental findings identify specific incidents or activities regarding implementation of the Unified Program. Though incidental findings do not rise to the level of program deficiencies or inadequate implementation of the Unified Program, the CUPA must complete the resolution indicated as required by regulation or statute.

### 1. INCIDENTAL FINDING:

The CUPA is not properly classifying HWG Program violations.

Review of HWG Program facility files and CERS CME information indicates the CUPA is classifying the following Class I or Class II HWG Program violation as a minor violation in the following instance:

- Violation for failure to obtain and maintain a written tank assessment certified by a professional engineer [CCR, Title 22, Section 66265.192(h)] incorrectly classified as a minor violation. Failure to obtain a written tank system assessment certified by a professional engineer poses risks to human health and the environment in the event the tank system is not structurally sound. There is an economic benefit to the facility by not hiring an independent professional engineer to assess the tank system. This does not meet the definition of minor violation as described in HSC, Section 25404(a)(3).
  - o CERS ID 10477480: inspection dated June 23, 2018

# **CITATION:**

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 HSC, Chapter 6.11, Sections 25404(a)(3) CCR, Title 22, Section 66260.10 [DTSC]

## **RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will train inspection staff on the classification of minor, Class I, and Class II violations, as defined in:

- HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6
- HSC Chapter 6.11, Section 25404(a)(3)
- CCR, Title 22, Section 66260.10

The CUPA will train inspection staff on how to properly classify HWG Program violations during inspections and ensure inspection staff review the following:

- Violation Classification Training Video 2014 <a href="https://www.youtube.com/watch?v=RB-5V6RfPH8">https://www.youtube.com/watch?v=RB-5V6RfPH8</a>
- 2020 Violation Classification Guidance for Unified Program Agencies <a href="https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf">https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf</a>

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### INCIDENTAL FINDINGS REQUIRING RESOLUTION

### 2. INCIDENTAL FINDING:

HWG facility inventory and CERS CME information is inconsistent with CUPA Self-Audit Reports and information provided by the CUPA.

CERS identifies 15 HWGs, the CUPA Self-Audit Report for FY 2019/2020 identifies 17 HWGs, the CUPA Self-Audit Report for FY 2020/2021 identifies 15 HWGs, and the CUPA identified 16 HWGs on May 6, 2021.

The CUPA did not report all CME information to CERS for the following facility:

## CERS ID 10480996

- The CUPA submitted information on the Alpine CUPA inventory inspections spreadsheet indicating this facility had a HWG inspection conducted on July 31, 2020. This HWG inspection is not in CERS.
- Note: This facility does not indicate being a HWG on the CERS Business Activities page.

## CITATION:

HSC, Chapter 6.11, Section 25404(e)(4) CCR, Title 27, Sections 15187(c) and 15290(b) [CalEPA, DTSC]

# **RESOLUTION:**

By the 1st Progress Report, the CUPA will have reconciled the local data information, updated CERS and will have reported all CME information to CERS for the HWG facilities identified within the jurisdiction of the CUPA.

#### 3. INCIDENTAL FINDING:

The CUPA is not consistently classifying APSA violations properly.

Review of APSA Program facility files and CERS CME information indicates the CUPA is classifying the following Class I or Class II APSA Program violation as a minor violation in the following instance:

- Not having, or failure to prepare, an SPCC Plan was classified as a minor violation. Facilities that operate without an SPCC Plan present a significant threat to human health or the environment and may benefit economically from noncompliance either by reduced costs or by competitive advantage. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3). In addition, classifying a violation for not having an SPCC Plan as minor is inconsistent with, and less stringent than, the U.S. Environmental Protection Agency (US EPA).
  - FY 2018/2019 through FY 2020/2021 1 of 2 instances (50%) for not having, or failure to prepare, an SPCC Plan was classified as a minor violation.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

Note: The Federal SPCC rule is not delegated to any state. However, APSA requires consistency and compliance with the SPCC rule for SPCC Plan preparation and implementation, as well as consistency with Federal enforcement guidance.

#### CITATION:

HSC, Chapter 6.11, Sections 25404(a)(3), 25404.2(a)(3) and 25404.2(a)(4) HSC, Chapter 6.67, Sections 25270.4.1(c), 25270.4.5(a) CCR, Title 27, Section 15200(a) and (e) [OSFM]

#### **RESOLUTION:**

By the 3<sup>rd</sup> Progress Report, the CUPA will train inspection staff on the definition of minor violation as defined in HSC, Chapter 6.11, Section 25404(a)(3) and how to properly classify violations during compliance inspections as minor, Class I, and Class II. Training should include, at minimum, review of:

- Violation Classification Training Video 2014 (<a href="https://www.youtube.com/watch?v=RB-5V6RfPH8">https://www.youtube.com/watch?v=RB-5V6RfPH8</a>)
- 2020 Violation Classification Guidance for Unified Program Agencies (<a href="https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf">https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf</a>)
- "U.S. EPA Civil Penalty Policy for Section 311(b)(3) and Section 311(j) of the Clean Water Act, August 1998", which specifies that a no SPCC Plan violation is not considered minor (<a href="https://19january2017snapshot.epa.gov/enforcement/civil-penalty-policy-section-311b3-and-section-311j-clean-water-act-cwa-august-1998">https://19january2017snapshot.epa.gov/enforcement/civil-penalty-policy-section-311b3-and-section-311j-clean-water-act-cwa-august-1998</a> .html)

The CUPA will provide CalEPA with training documentation, which will include at a minimum, an outline of the training conducted and a list of inspection staff attending the training.

# 4. INCIDENTAL FINDING:

The CUPA is not consistently ensuring HMBP submittals, provided in lieu of tank facility statements, include site maps and emergency response plans and procedures that contain all applicable required elements.

Review of CERS indicates the following 5 of 10 (50%) APSA tank facilities were missing various site map elements in recently accepted HMBP submittals:

- CERS ID 10000933, 10474033, and 10490788: missing emergency shutoff, emergency response equipment, and evacuation staging area.
- CERS ID 10448170: missing adjacent streets, emergency shutoff and hazardous material handling and storage area.
- CERS ID 10476493: no site map submitted, noted as 'Stored at Regulatory Agency'.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### INCIDENTAL FINDINGS REQUIRING RESOLUTION

Note: Review of CUPA comments associated with some HMBP site map submittals that were previously not accepted in CERS demonstrates the CUPA notified APSA tank facilities appropriately of the missing elements.

Review of CERS indicates the following 2 of 10 (20%) APSA tank facilities were missing various emergency response plans and procedures elements in their recently accepted HMBP submittals:

- CERS ID 10500148
- CERS ID 10476493

## CITATION:

HSC, Chapter 6.67, Section 25270.6(a)(2) 2019 CFC, Chapter 50, Sections 5001.5.1 and 5001.5.2, and Appendix H [OSFM]

## **RESOLUTION:**

By the 1st Progress Report, the CUPA will develop, implement, and provide an action plan to ensure that future HMBP submittals provided in lieu of a tank facility statement are thoroughly reviewed and contain all applicable required elements. The action plan will include steps to follow up with rejected or incomplete submittals.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide a list of APSA tank facilities whose recent HMBP submittals, provided in lieu of tank facility statements, have been reviewed and not accepted for missing applicable required elements. For each tank facility on the list, the CUPA will include follow-up actions, including appropriate enforcement.

By the 4th Progress Report, the CUPA will have ensured each tank facility has submitted all applicable required HMBP elements when an HMBP submittal is provided in lieu of a tank facility statement or the CUPA has applied appropriate enforcement.

## 5. INCIDENTAL FINDING:

Required components of the I&E Plan are inaccurate or incomplete.

- The following components are incomplete:
  - A description of appropriate enforcement (graduated series of informal and/or formal enforcement actions) based on the severity of the violation.
  - Provisions for ensuring sampling capability. Information should include training, identification of sampling equipment, methods to preserve physical evidence obtained through sampling and testing information. This information was required when the CUPA became certified and is necessary to proceed with any potential enforcement actions as needed.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

- The following components are inaccurate:
  - Penalty matrix for the UST Program shows a minimum of \$0, which is inconsistent with HSC. The correct amount is no less than \$500.00 or more than \$5,000.00 per UST, per each day of violation, and per violation.
  - Page 12: The return to compliance citations for the business plan program and CalARP program are incorrect. There are no RTC citations in HSC, Chapter 6.95 or in CCR, Title 19.
  - o Pages 34-35: All HSC citations are obsolete.

Note: This incidental finding was identified as a deficiency during the 2018 CUPA Performance Evaluation and was partially corrected during the Evaluation Progress Report process.

## CITATION:

CCR, Title 27, Section 15200(a) HSC Chapter 6.7, Section 25299(a) [CalEPA, State Water Board]

## **RESOLUTION:**

By the 3<sup>rd</sup> Progress Report, the CUPA will provide CalEPA with the revised I&E Plan that adequately incorporates and correctly addresses all required components.

By the 4<sup>th</sup> Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA and State Water Board, the CUPA will provide CalEPA with the amended I&E Plan. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 5<sup>th</sup> Progress Report, if amendments to the revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the amended Unified Program administrative procedures. Once training is complete, the CUPA will implement the amended Unified Program administrative procedures.

#### 6. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA did not complete an annual Self-Audit Report for FY 2017/2018. A Self-Audit Report is required to be completed by September 30<sup>th</sup> of each year for the preceding FY.

## CITATION:

CCR, Title 27, Section 15280(c) [CalEPA]

# **RESOLUTION: COMPLETED**

During the evaluation, the CUPA provided the Self-Audit report for FY 2020/2021. The Self-Audit report contained all required components and was completed before the mandated deadline of September 30, 2021. This finding is considered resolved. No further action is required.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### INCIDENTAL FINDINGS REQUIRING RESOLUTION

## 7. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The UST Operating Permit does not reflect issuance under a UPFP.

Note: UST Operating Permits issued during 2020 reflect issuance under a UPFP, however the UST Operating Permits issued during 2021, provided for the CUPA performance evaluation, do not reflect issuance under a UPFP.

## CITATION:

CCR Title 27, Section 15190(b) and (h) [CalEPA]

## **RESOLUTION: COMPLETED**

During the evaluation, the CUPA provided a revised UST Operating Permit template that reflects issuance under a UPFP. This finding is considered resolved. No further action is required.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

### **OBSERVATIONS AND RECOMMENDATIONS**

Observations and recommendations identify areas of Unified Program implementation that could be improved and provide suggestions for improvement. Though the CUPA is not required by regulation or statute to apply the recommendations provided, the CUPA would benefit in applying the recommendations provided to improve the overall implementation of the Unified Program.

## 1. OBSERVATION:

Review of overall implementation of the HWG Program, including policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports for April 1, 2018, through March 31, 2021, is summarized below:

- There are 16 regulated HWG facilities, including 2 Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facilities.
- The three-year inspection frequency for all HWG facilities is currently not being met.
  - o The CUPA inspected 9 of 16 (56%) facilities.
- The CUPA conducted 12 routine HWG inspections.
  - 3 of 12 (25%) additional routine inspections were conducted during the evaluation period at two facilities
  - o 9 of 12 (75%) routine inspections had no violations cited
  - o 3 of 12 (25%) routine inspections had at least one violation cited
    - A total of four violations were issued, consisting of:
      - 1 Class II violation and
      - 3 minor violations.
    - The CUPA has ensured RTC for 3 of 4 (75%) issued violations.
- The CUPA completed no formal enforcement actions.
  - The FY 2020/2021 Self-Audit Report stated no formal enforcement actions were taken in FY 2020/2021
- Inspection reports contain detailed comments that note the factual basis of cited violations; however, inspection reports do not indicate whether consent to inspect was requested prior to the inspection.

DTSC was unable to conduct oversight inspections due to Coronavirus (COVID-19) restrictions.

#### RECOMMENDATION:

Continue with the three-year HWG inspection frequency as identified in the I&E Plan. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply appropriate enforcement, per the I&E Plan, for facilities that do not obtain RTC. Document consent to inspect to ensure that statements and evidence are admissible for potential enforcement as warranted. Ensure that complete and thorough inspections are conducted to identify all violations at facilities. Review and correct CERS data to accurately reflect regulated facilities and associated CME information identified in the incidental findings and deficiencies above.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

### 2. OBSERVATION:

On the first line of the CalARP dispute resolution procedure document, "270.1" should be "2780.1."

#### **RECOMMENDATION:**

Revise the CalARP dispute resolution procedure.

# 3. OBSERVATION:

The "Document Request and Review" document does not contain the specific requirements for CalARP.

# **RECOMMENDATION:**

Revise the "Document Request and Review" document to include the specific requirements for CalARP, per CCR, Title 19, Section 2775.5.

## 4. OBSERVATION:

The I&E Plan, dated 2021, contains information that is inaccurate, outdated or may benefit from improvement.

- Page 2: The HMBP Program is omitted from the list of Unified Program elements. The
  citations for the fire code Hazardous Materials Management Plans and Hazardous
  Materials Inventory Statements (HMMP-HMIS) are incorrect. The authority to implement
  and enforce the fire code HMMP-HMIS is found in HSC, Chapter 6.11, Section
  25404(a)(1)(C), and the requirements are found in CCR, Title 24, Part 9. The HMMP-HMIS
  program element is consolidated with the HMBP Program to streamline and ease the
  regulatory burden of doing business in this state.
- Page 12: The APSA RTC timeframe is omitted. For clarity, although there are no
  established timeframes under APSA, Unified Program regulated facilities cited with a minor
  violation have 30 days from the date of the notice to comply, in accordance with HSC,
  Section 25404.1.2(c)(1).
- Page 28: Reference to HSC, Section 25270.5 as violations of APSA should be replaced with HSC, Chapter 6.67 commencing with Section 25270, consistent with the other statements under the AEO section.
- Page 41: An APSA acronym can be added.
- Page 46: The APSA Penalties table mistakenly references HSC, Section 25270.1, which
  does not exist. HSC, Section 25270.12 and HSC, Section 25270.12.1 are better
  references.
- Page 50: HSC, Section 25270.5 is referenced as the CUPA's enforcement authority of the APSA program. HSC, Section 25270.5 requires Unified Program Agencies (UPAs) to inspect tank facilities with 10,000 gallons or more of petroleum for compliance with the SPCC Plan requirements of APSA, or the UPA may develop an alternative inspection and compliance plan, and UPA inspector training requirements. The UPA's enforcement authority of the APSA Program is derived from HSC, Sections 25270.2(c), 25270.4, and 25404(a)(1)(C).

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

• Referral to the APSA program as AST or SPCC was observed on pages 2, 4, 5, 6, 7, 12, 21, and 38.

## RECOMMENDATION:

Update the I&E Plan as indicated above.

#### 5. OBSERVATION:

Some APSA tank facilities submitted an HMBP in lieu of a tank facility statement using the 2011 emergency response and training plans template, which has an obsolete phone number for OSFM.

The 2017 version of the consolidated emergency response and training plans template contains the current OSFM phone number.

# **RECOMMENDATION:**

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template as part of the HMBP submittal, in lieu of the tank facility statement, to use the current 2017 template. The current template is available in CERS.

# 6. OBSERVATION:

The webpage <a href="https://www.alpinecountyca.gov/297/Hazardous-Materials-Mgmt-and-CERS-Report">https://www.alpinecountyca.gov/297/Hazardous-Materials-Mgmt-and-CERS-Report</a> contains the following information that is outdated, incorrect or may benefit from improvement:

- The APSA applicability information is very limited and may be improved by providing a link to the OSFM APSA website.
- The website could clarify the APSA information related to 'aboveground petroleum storage over 1,320 gallons' since there are three different types of tank facilities that may be subject to APSA:
  - o 1) tank facility is subject to the SPCC rule, or
  - o 2) tank facility has 1,320 gallons or more of petroleum, or
  - 3) tank facility has one or more stationary TIUGAs (55-gallon shell capacity or larger) regardless of the 1,320-gallon total aboveground petroleum storage capacity.
- The website could include information that the requirement to prepare an SPCC Plan under APSA does not apply to all tank facilities if certain conditions are met.
- The Unidocs UN-020 HMBP document rev 12/14/10 (under quick links to HMBP forms at <a href="https://www.alpinecountyca.gov/DocumentCenter/View/121/Hazardous-Materials-Business-Plan-Forms?bidId=">https://www.alpinecountyca.gov/DocumentCenter/View/121/Hazardous-Materials-Business-Plan-Forms?bidId=</a>) is missing the site map identification of the following required elements: emergency shutoff (not associated with utility) and emergency response equipment.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

# **RECOMMENDATION:**

Update the information on the website as indicated above. Consider adding website links to the Office of the State Fire Marshal website for more information on the APSA program. Consider adding a website link to the U.S. Environmental Protection Agency website at <a href="https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations">https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations</a> for information on SPCC requirements.

# 7. OBSERVATION:

The CERS reporting requirement is currently set as "APSA Applicable" for 16 tank facilities. The CUPA's local data management system identifies 17 APSA tank facilities.

- 16 APSA tank facilities are identified in both CERS and the CUPA's local data management system.
- One facility identified in the CUPA's local data management system lacks a CERS ID and is in the process of being addressed by the CUPA.

Dialogue in the CUPA's FY 2020/2021 Self-Audit mistakenly interprets the mandated APSA statute requirement to inspect tank facilities maintaining 10,000 gallons or more of AST petroleum capacity triennially. The statute requirement is not specific to individual AST tanks only.

## **RECOMMENDATION:**

Complete the reconciliation of the APSA Program information in the CUPA's local data management system with CERS to ensure all APSA tank facilities are included in both systems.

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