



Gavin Newsom
Governor

Jared Blumenfeld
Secretary for Environmental Protection

July 11, 2022

Mr. Mario Tresieras
Division Chief, Health Hazardous Materials Division
County of Los Angeles Fire Department
5825 Rickenbacker Road
Commerce, California 90040-3027

Dear Mr. Tresieras:

During May 2019 through September 2019, CalEPA and the state program agencies conducted a performance evaluation of the Los Angeles County Fire Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System information, and oversight inspections.

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. The report also includes examples of outstanding Unified Program implementation. 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.

CalEPA recognizes the delay with issuing the final Summary of Findings report. Consequently, as the next CUPA Performance Evaluation is scheduled to begin in October 2022, there is sufficient time for submittal and review of two Evaluation Progress Reports, although the timeframe for completion of corrective actions and resolutions outlined in the Summary of Findings report may extend beyond the remaining time period available for the Evaluation Progress Report process before the subsequent CUPA Performance Evaluation begins.

The CUPA is required to submit the first Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings report. Please provide the Evaluation Progress Report to the CalEPA Team Lead, Timothy Brandt, at Timothy.Brandt@calepa.ca.gov.

The CUPA is strongly encouraged to provide an update detailing as much progress made as possible in accomplishing the corrective actions and resolutions for each identified deficiency and incidental finding, particularly if steps for corrective actions and

resolutions outlined for completion in anticipated subsequent Progress Reports have been completed and addressed at present, or in advance. Any deficiencies that remain uncorrected, and any incidental findings that remain unresolved will be incorporated into the next CUPA Performance Evaluation.

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

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

Sincerely,



Jason Boetzer
Assistant Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

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Mr. Mario Tresieras
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cc sent via email:

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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: Los Angeles County Fire Department

Evaluation Period: May 2019 through September 2019

Evaluation Team Members:

- **CalEPA Team Lead:** Timothy Brandt, Marc Lorentzen
- **DTSC:** Elizabeth Brega, Kevin Abriol
- **Cal OES*/CalEPA:** Jack Harrah
- **State Water Board:** Lisa Jensen, Sean Farrow
- **CAL FIRE-OSFM:** Joann Lai, Glenn Warner

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 improvement 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

CalEPA recognizes the delayed issuance of this Final Summary of Findings report. Consequently, as the next CUPA Performance Evaluation is scheduled to begin in October 2022, there is sufficient time for submittal and review of two Evaluation Progress Reports, although the timeframe for completion of corrective actions may extend beyond submittal of the first Evaluation Progress Report.

The CUPA is required to submit the first Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings Report, no later than **September 13, 2022**, and the second Evaluation Progress Report 90 days thereafter, no later than **December 13, 2022**. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead at timothy.brandt@calepa.ca.gov.

The CUPA is strongly encouraged to provide an update detailing as much progress made as possible in accomplishing the corrective actions and resolutions for each identified deficiency and incidental finding, particularly if steps for corrective actions and resolutions outlined for completion in anticipated subsequent Progress Reports have been completed and addressed at present, or in advance. Any deficiencies that remain uncorrected or incidental findings that remain unresolved will be incorporated into the next CUPA Performance Evaluation.

*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.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**UNIFIED PROGRAM PERFORMANCE EVALUATION
PRELIMINARY 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 issuing a Unified Program Facility Permit (UPFP), which includes the Underground Storage Tank (UST) Operating Permit, prior to or upon the expiration date of an existing UPFP.

UPFPs issued in Fiscal Year (FY) 2017/2018 have an expiration date of October 31, 2018.

UPFPs issued in FY 2018/2019 have an issuance date of November 30, 2018.

Due to the lapse in time between the expiration date of the UPFP issued for FY 2017/2018 and the issuance date of the UPFP issued for FY 2018/2019, regulated USTs were not permitted to operate under a valid UPFP between November 1, 2018, and November 29, 2018.

Note: This deficiency was identified during the 2016 CUPA Performance Evaluation and was corrected during the Progress Report process.

CITATION:

Health and Safety Code (HSC), Chapter 6.7, Section 25284(a)
California Code of Regulations (CCR), Title 23, Section 2712(c)
[State Water Board]

CORRECTIVE ACTION:

During the evaluation, the CUPA began the UPFP issuance cycle for FY 2019/2020. A UPFP for FY 2019/2020 is issued after required fees are remitted to the CUPA. Review of the UPFP issued by the City of Burbank Fire Department Participating Agency (PA) and the UPFP issued by the Pasadena Fire Department PA for FY 2019/2020 finds the UPFP issuance date for the FY 2019/2020 UPFP is prior to the October 31, 2019, expiration date of the FY 2018/2019 UPFP.

By the 1st Progress Report, the CUPA will provide four UPFPs issued by the City of Torrance Fire Department PA and four UPFPs issued by the Los Angeles Department of Public Works (LADPW) PA, to demonstrate UPFP permits for FY 2019/2020 were issued prior to or upon the expiration date of October 31, 2019, for FY 2018/2019 UPFPs.

The CUPA will ensure the City of Torrance Fire Department PA and the LADPW PA issue UPFPs prior to or upon the expiration date of previously issued UPFPs.

2. DEFICIENCY:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA and the City of Pasadena Fire Department PA are inspecting all UST facilities annually.

Review of the Significant Operational Compliance Report (Report 6) finds the following USTs were inspected annually:

City of Burbank Fire Department PA

- FY 2017/2018 – 51 of 64 (80%) UST facilities inspected

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**UNIFIED PROGRAM PERFORMANCE EVALUATION
PRELIMINARY SUMMARY OF FINDINGS REPORT**

DEFICIENCIES REQUIRING CORRECTION

- FY 2016/2017 – 61 of 65 (94%) UST facilities inspected
- FY 2015/2016 – 58 of 67 (87%) UST facilities inspected

City of Pasadena Fire Department PA

- FY 2017/2018 – 54 of 64 (84%) UST facilities inspected
- FY 2016/2017 – 54 of 64 (84%) UST facilities inspected
- FY 2015/2016 – 62 of 64 (97%) UST facilities inspected

Note: This deficiency was identified during the 2016 CUPA Performance Evaluation and was corrected during the Progress Report process.

CITATION:

HSC, Chapter 6.7, Section 25288(a)
CCR, Title 23, Section 2712(e)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will consult with the City of Burbank Fire Department PA and the City of Pasadena Fire Department PA to develop and provide CalEPA with an action plan that at minimum includes:

- A list of UST facilities that have not been inspected within the last twelve months. Identification shall include at minimum: the California Environmental Reporting System (CERS) ID, facility name, and last inspection date;
- A schedule to inspect those facilities, prioritizing the most delinquent inspections to be completed prior to any other annual UST compliance inspection; and
- Future steps to ensure that all UST facilities will be inspected annually.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide an updated list of UST facilities that have not been inspected within the last 12 months.

3. DEFICIENCY:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA is conducting complete annual UST compliance inspections.

Review of facility files and inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information in CERS finds the City of Burbank Fire Department PA did not identify violations for failed components on the inspection report during the following annual compliance inspections:

- CERS ID 10138289
 - The annual Monitoring System Certification results and Pressurized Piping Leak Detection Certification Sheet dated July 25, 2017, identify a retest for failed 87(n) line leak detector.
 - The annual UST compliance inspection report dated June 16, 2017, cites no violation for the failed 87(n) line leak detector identified by the service technician.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- CERS CME information reflects a routine inspection dated June 16, 2017, with a violation for UST Primary Containment.
- CERS ID 10138289
 - The annual Monitoring System Certification results dated June 15, 2016, identify two failures.
 - The annual UST compliance inspection report dated June 15, 2016, cites no violations for failures identified by the service technician.
 - CERS CME information reflects a routine inspection dated June 30, 2016, with violations for automatic tank gauge (ATG) failure.
- CERS ID 10229440
 - The annual Monitoring System Certification results dated July 8, 2016, identify one diesel sensor failure.
 - The annual UST compliance inspection report dated July 8, 2018, cites no violations for failures identified by the service technician.
 - CERS CME information reflects a routine inspection dated July 8, 2016, with two violations for electrical penetration failure and annual sensory.
- CERS ID 10230310
 - The annual Monitoring System Certification results dated February 28, 2018, identify two alarm failures.
 - The annual UST compliance inspection report dated February 28, 2019, cites no violations for failures identified by the service technician.
 - CERS CME information reflects a routine inspection dated February 28, 2018, with no violations.

Note: The City of Burbank Fire Department PA does not use a comprehensive inspection checklist to document annual compliance inspections. Using a comprehensive checklist would benefit the PA inspector in prompting to note a violation if observed as well as the overall site condition. Providing a comprehensive inspection checklist to the UST owner/operator and/or UST facility representative would assist in educating the recipient on the common aspects inspected as well as the inspector's notes regarding the overall site condition during and after the inspection is conducted. The State Water Board recommends the CUPA, in consultation with the City of Burbank Fire Department PA and FIREHOUSE developers, develop a comprehensive UST inspection checklist and incorporate it into the existing FIREHOUSE iPad application used to document annual UST compliance inspections.

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

Note: This deficiency was identified during the 2016 CUPA Performance Evaluation and was corrected during the Progress Report process.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department will revise and provide CalEPA the Inspection and Enforcement (I&E) Plan, or other applicable

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UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

procedure, ensuring a description of activities performed by CUPA and PA personnel to conduct complete annual UST compliance inspections.

The I&E Plan or other applicable procedure should also address:

- CUPA and PA personnel review and follow up of submitted UST testing reports as part of the inspection process;
- How to conduct annual UST inspections in the instance when CUPA personnel is on-site to witness the annual UST monitoring certification and visually confirm all UST components are in compliance; and
- How to conduct annual UST inspections in the instance when CUPA personnel is not on-site and cannot witness the annual UST monitoring certification and cannot visually confirm all UST components are in compliance.

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, will if necessary, amend the I&E Plan, or other applicable procedure, based on feedback from the State Water Board and will provide the amended I&E Plan or other applicable procedure to CalEPA. If no amendments are necessary, the CUPA in consultation with the City of Burbank Fire Department PA, will train PA personnel on the revised I&E Plan or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PA will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, will train PA personnel on the amended I&E Plan or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PA will implement the amended I&E Plan or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA in consultation with the City of Burbank Fire Department PA, will provide UST facility records, including monitoring certifications and all other necessary testing and compliance documentation not found in CERS for five UST facilities, as selected by the State Water Board.

To demonstrate correction of this Deficiency, the CUPA in consultation with the City of Burbank Fire Department PA will, for a one-year period, consistently conduct complete annual UST compliance inspections.

4. DEFICIENCY:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA, and the Los Angeles Department of Public Works (LADPW) PA correctly cite violations for failure to conduct an overflow prevention equipment inspection as required by CCR, Title 23, Division 3, Chapter 16, Sections 2637.2(a) and 2665(b).

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

No later than, October 13, 2018 all overfill prevention equipment must be inspected periodically and after repairs in accordance with CCR, Title 23, Division 3, Chapter 16 Sections 2637.2(a) and 2665(b).

Review of annual UST compliance inspection reports, associated overfill prevention inspection reports, and CERS CME information finds the following instances where the annual compliance inspection report did not include a violation for not conducting the overfill prevention equipment inspection by October 13, 2018:

- City of Burbank Fire Department PA
 - CERS ID 10230217: Annual compliance inspection dated May 22, 2019
 - CERS ID 10229416: Annual compliance inspection dated April 9, 2019
 - CERS ID 10412398: Annual compliance inspection dated March 21, 2019.
- City of Pasadena Fire Department PA
 - CERS ID 10173271: Annual compliance inspection dated May 21, 2019.
 - CERS ID 10307422: Annual compliance inspection dated January 31, 2019.
- City of Torrance Fire Department PA
 - CERS ID 10126267: Annual compliance inspection dated June 26, 2019.
 - CERS ID 10124497: Annual compliance inspection dated June 14, 2019.
 - CERS ID 10124425: Annual compliance inspection dated February 22, 2019.
- LADPW PA
 - CERS ID 10173385: Annual compliance inspection dated April 29, 2019.
 - CERS ID 10175769: Annual compliance inspection dated April 5, 2019.
 - CERS ID 10135840: Annual compliance inspection dated March 20, 2019.
 - CERS ID 10263187: Annual compliance inspection dated October 30, 2018.

Note: As a result of each of the above PAs not reporting violations for not conducting the overfill prevention equipment inspection by October 13, 2018, in Report 6 and CERS CME information, U.S. Environmental Protection Agency Technical Compliance Rate 9b reporting is inaccurate.

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

CITATION:

CCR, Title 23, Section 2637.2(a) and 2665(b)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA, will revise and provide CalEPA with the I&E Plan, or other applicable procedure, to ensure PA personnel consistently and correctly cite all violations during the annual compliance inspection and in CERS.

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, and the City of Torrance Fire Department PA and the LADPW PA, will, if necessary, amend the I&E Plan or other applicable procedure, based on feedback from the State Water Board and will provide the amended I&E Plan or other applicable procedure to CalEPA. If no amendments are necessary, the CUPA in consultation with the City

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UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will train PA personnel on the revised I&E Plan or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PAs will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will train PA personnel on the amended I&E Plan or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PAs will implement the amended I&E Plan or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will each provide five UST facility records, including annual UST compliance inspection reports and overfill prevention inspection information not found in CERS, as selected by the State Water Board.

5. DEFICIENCY:

The CUPA is not properly classifying hazardous waste generator (HWG) violations.

In some cases, the CUPA is citing HWG violations as minor violations that are Class I or II violations. Examples include, but are not limited to:

- Violation for exceedance of authorized accumulation time incorrectly cited as a minor violation. Maximum accumulation time may not be exceeded without a hazardous waste storage permit or grant of authorization from DTSC. An economic benefit is gained by not disposing of waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - CERS ID 10228762: inspection dated November 14, 2018
 - CERS ID 10263499: inspection dated July 12, 2018
 - CERS ID 10122016: inspection dated July 11, 2018
 - CERS ID 10190902: inspection dated February 22, 2018
 - CERS ID 10140763: inspection dated January 16, 2018
 - CERS ID 10263955: inspection dated December 11, 2017
 - CERS ID 10207309: inspection dated April 7, 2017
 - CERS ID 10287238: inspection dated February 16, 2017
 - CERS ID 10140835: inspection dated October 26, 2016
 - CERS ID 10263373: inspection dated October 20, 2016
 - CERS ID 10264078: inspection dated September 21, 2016
 - CERS ID 10285435: inspection dated September 19, 2016

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UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- Violation for failure to provide or conduct training for employees incorrectly cited as a minor violation. Since no training had been provided, employees are not familiar with hazardous waste issues and handling as well as how to respond to emergencies. There may have been an economic benefit to the facility by not providing training. This does not meet the definition of minor violation as defined in HSC, Section 25404 (a)(3).
 - CERS ID 10174367: inspection dated May 15, 2019
 - CERS ID 10151933: inspection dated October 26, 2018
 - CERS ID 10206826: inspection dated October 3, 2018
 - CERS ID 10197118: inspection dated September 27, 2017
 - CERS ID 10190375: inspection dated September 14, 2017
 - CERS ID 10119964: inspection dated March 22, 2017
 - CERS ID 10126207: inspection dated March 17, 2017
 - CERS ID 10128937: inspection dated August 12, 2016
 - CERS ID 10202404: inspection dated August 4, 2016

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6

CCR, Title 22, Sections 66260.10 and 66262.34

[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will train staff on the violation classification terms minor, Class I, and Class II, as defined in HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 and CCR, Title 22, Section 66260.10. The CUPA will ensure staff review the following and will train personnel on when and how to properly cite violations for each program element during routine compliance inspections:

- [Violation Classification Training Video 2014](https://www.youtube.com/watch?v=RB-5V6RfPH8)
(<https://www.youtube.com/watch?v=RB-5V6RfPH8>)
- [Violation Classification Guidance](https://calepa.ca.gov/wp-content/uploads/sites/6/2016/10/Violation-Classification-Guidance-Document-accessible.pdf)
(<https://calepa.ca.gov/wp-content/uploads/sites/6/2016/10/Violation-Classification-Guidance-Document-accessible.pdf>)

The CUPA will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of CUPA personnel in attendance.

By the 2nd Progress Report, the CUPA will provide CalEPA with inspection reports for the facilities cited with hazardous waste violations that were inspected within the last six months:

- CERS ID 10264639
- CERS ID 10279585
- CERS ID 10644496
- CERS ID 10293943
- CERS ID 10272808
- CERS ID 10152167
- CERS ID 10265224

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**UNIFIED PROGRAM PERFORMANCE EVALUATION
PRELIMINARY SUMMARY OF FINDINGS REPORT**

DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10284109
 - CERS ID 10297018
 - CERS ID 10292974
-

6. DEFICIENCY:

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

Review of CERS CME information for business plan facilities listed in CERS finds 15% were not inspected within the last three years.

CITATION:

HSC, Chapter 6.95, Section 25511(b)
[Cal OES]

CORRECTIVE ACTION:

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

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with the number of business plan inspections that were occurred during the previous quarter.

By the 5th Progress Report, the CUPA will have inspected each business plan facility at least once in the last three years.

7. DEFICIENCY:

The CUPA is not properly processing and authorizing each annual Onsite Hazardous Waste Treatment Notification for Permit-By-Rule (PBR) facilities with a Fixed Treatment Unit (FTU) within 45 calendar days of receipt.

During the 45-day review process the CUPA must either:

- Authorize operation of the FTU or;
- Deny authorization of the FTU in accordance with Permit-by-Rule laws and regulations; or,
- Notify the owner/operator that the notification submittal is inaccurate or incomplete.

Review of CERS CME information indicates the following PBR Onsite Hazardous Waste Treatment Notifications were not reviewed by the CUPA within 45 calendar days of receipt:

- CERS ID 10153793:
 - Notification submitted April 3, 2019, not accepted on July 5, 2019.
- CERS ID 10270582:
 - Notification submitted March 27, 2019, not accepted on May 7, 2019.

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UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- Notification submitted April 4, 2018, not accepted on June 12, 2018.
- CERS ID 10295629:
 - Notification submitted August 27, 2018, not accepted on February 2, 2019.
- CERS ID 10271854:
 - Notification submitted April 17, 2018, accepted on August 16, 2018.
 - Notification submitted March 30, 2017, under review on July 7, 2017.
- CERS ID 10283665:
 - Notification submitted April 16, 2018, not accepted on June 8, 2018.
 - Notification submitted August 1, 2017, under review on February 27, 2018.
- CERS ID 10286839:
 - Notification submitted March 30, 2018, not accepted on June 8, 2018.
- CERS ID 10153177:
 - Notification submitted March 15, 2018, not accepted on June 25, 2019.
 - Notification submitted March 15, 2017, not accepted on July 7, 2017.
- CERS ID 10664206:
 - Notification submitted March 1, 2018, not accepted on July 23, 2018
- CERS ID 10270624:
 - Notification submitted February 26, 2018, accepted on July 31, 2018.
- CERS ID 10212694:
 - Notification submitted February 14, 2018, not accepted on April 18, 2018.
- CERS ID 10287454:
 - Notification submitted January 9, 2018, accepted on June 28, 2018.
- CERS ID 10153797:
 - Notification submitted March 13, 2017, not accepted on July 20, 2017.
- CERS ID 10285462:
 - Notification submitted February 27, 2017, under review on June 6, 2017.
- CERS ID 10295797:
 - Notification submitted April 6, 2016, accepted on December 21, 2017.

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

CITATION:

CCR, Title 22, Sections 67450.2(b)(4) and 67450.3(c)(1)
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop and submit to CalEPA an action plan to ensure that all PBR notifications are reviewed and processed within 45 calendar days of receipt.

By the 2nd Progress Report, the CUPA will implement the action plan and train all inspectors involved in the processing of Tiered Permit (TP) submittals on the action plan. The training will include reviewing, processing and authorizing PBR Notifications within 45 calendar days of receipt. The CUPA will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of CUPA personnel in attendance.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**UNIFIED PROGRAM PERFORMANCE EVALUATION
PRELIMINARY SUMMARY OF FINDINGS REPORT**

DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, the CUPA will provide an update on the review and processing of any and all pending PBR Notifications in CERS.

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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 UST Operating Permit, issued under the UPFP, contains language inconsistent with the CUPA's Local Ordinance.

The CUPA's Local Ordinance, *Division 4 – Underground Storage of Hazardous Materials*, Section 11.80.170 contains the following language:

- “The unified program facility permit may be transferred to new owners of the same business only if the new owners accept responsibility...”

The UST Operating Permit contains the following language:

- “This permit is non-transferrable and is void...”

CITATION:

HSC, Chapter 6.7, Section 25284(b) & (c)
[State Water Board]

RESOLUTION:

During the evaluation, the CUPA indicated the conflicting language would be removed from the UST Operating Permit, issued under the UPFP, prior to the next permitting cycle.

Prior to the next permitting cycle, the CUPA will revise and provide CalEPA with the UST Operating Permit, issued under the UPFP, having language consistent with the CUPA's Local Ordinance, *Division 4 – Underground Storage of Hazardous Materials*, Section 11.80.170.

2. INCIDENTAL FINDING:

Review of CERS CME information for the last three FYs finds UST violations issued by the City of Pasadena Fire Department PA and the LADPW PA have taken more than 90-days to return to compliance (RTC). The following are examples:

City of Pasadena Fire Department PA

- FY 2017/2018 – 66 of 125 (53%) reported UST violations have RTC greater than 90-days.
- FY 2016/2017 – 63 of 103 (61%) reported UST violations have RTC greater than 90-days.
- FY 2015/2016 – 79 of 117 (68%) reported UST violations have RTC greater than 90-days.

LADPW PA

- FY 2017/2018 – 4,572 of 16,924 (27%) reported UST violations have RTC greater than 90-days.
- FY 2016/2017 – 9,596 of 18,714 (51%) reported UST violations have RTC greater than 90-days.
- FY 2015/2016 – 10,180 of 15,250 (68%) reported UST violations have RTC greater than 90-days.

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- Note: The LADPW PA has significantly decreased the time for obtaining RTC during the last three FYs.

CITATION:

HSC, Chapter 6.7, Section 25288(d)
CCR, Title 23, Section 2712(f)
[State Water Board]

RESOLUTION:

By the 2nd Progress Report, the CUPA in consultation with the City of Pasadena Fire Department PA and the LADPW PA will review the I&E Plan or other applicable procedure and ensure inspection personnel are applying appropriate enforcement for UST violations having RTC greater than 90-days.

3. INCIDENTAL FINDING:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA and the City of Torrance Fire Department PA accept accurate and complete UST related information in CERS.

Review of the UST Facility/Tank Data Download report obtained from CERS on June 18, 2019, finds the following examples when inaccurate or incomplete UST information was accepted in CERS:

City of Burbank Fire Department PA

- 23 UST systems with USTs incorrectly show not having to conduct annual spill container testing
- 17 UST systems with USTs show no striker plate/bottom protectors
- 21 UST systems with USTs identified with double-wall pressurized product pipe, incorrectly show having no mechanical or electronic line leak detector
- 2 UST systems with USTs identified as having no tank installation date
- 4 UST systems with USTs incorrectly show no spill container being installed
- 1 UST system with USTs installed on, or after, July 1, 2004, have vent piping transition sumps identified as blank or "NONE"
- 1 UST system with USTs installed on, or after, July 1, 2004, have single-wall components listed
- 1 UST system with continuously monitored steel tanks incorrectly identified as being liquid-filled
- 1 UST system with single-wall steel tanks incorrectly show no interior lining being installed

City of Torrance Fire Department PA

- 15 UST systems with USTs incorrectly show not having to conduct annual spill container testing
- 20 UST systems with USTs show no striker plate/bottom protectors
- 10 UST systems with USTs identified with double-wall pressurized product pipe, incorrectly show having no mechanical or electronic line leak detector
- 5 UST systems with USTs identified as having no tank installation date

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- 7 UST systems with USTs incorrectly show no spill container being installed
- 4 UST systems with USTs installed on, or after, July 1, 2004, have vent piping transition sumps identified as blank or “NONE”
- 1 UST system with USTs installed on, or after, July 1, 2004, have single-wall components listed
- 1 UST system with continuously monitored steel tanks incorrectly identified as being liquid-filled

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

Note: The following CERS FAQs may be referenced:

- “General Reporting Requirements for USTs”;
- “When to Issue a UST Operating Permit”;
- “Common CERS Reporting Errors”;
- “Setting Accepted Submittal Status”;
- “When to Review UST Records”, and
- “Which Forms Require Uploading to CERS.”

Note: State Water Board correspondence dated November 29, 2016, “When to Review Underground Storage Tank Records” may be referenced.

Note: This incidental finding was identified as a deficiency during the 2016 CUPA Performance Evaluation and was corrected during the Progress Report process.

CITATION:

HSC, Chapter 6.7, Sections 25286 and 25288(a)
CCR, Title 23, Sections 2632(d)(1), 2634(d)(2) and 2641(g) and (h)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will revise and provide CalEPA with the Data Management Procedure, or other applicable procedure, to ensure PA personnel accept accurate and complete UST related information in CERS.

The Data Management Procedure, or other applicable procedure will delineate the process for managing CERS UST submittals including but not limited to:

- A process for reviewing and not accepting CERS submittals; AND
A process for reviewing and accepting only accurate and complete CERS submittals; OR
- A process for reviewing and accepting submittals with minor errors:
 - A condition is set in CERS requiring the submittal to be corrected and resubmitted within a certain timeframe;
 - If the submittal is not corrected, PA personnel will change the submittal status from “accept” to “not accept.”

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will, if necessary, amend the Data Management Procedure or other applicable procedure, based on feedback from the State Water Board and will submit the revisions to CalEPA. If no amendments are necessary, the CUPA in consultation with

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the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the revised Data Management Procedure or other applicable procedure. Once training is complete, the PAs will implement the revised Data Management Procedure or other applicable procedure.

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the amended Data Management Procedure or other applicable procedure and provide training documentation to CalEPA. Training documentation will include, and not be limited to an outline of the training conducted and a list of personnel attending training. Once training is complete, the PAs will implement the amended Data Management Procedure or other applicable procedure.

4. INCIDENTAL FINDING:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA are accurately collecting, managing, and reporting the number of UST inspections.

Review of Report 6, CERS CME information and CUPA Self-Audit Reports finds the following:

- City of Burbank Fire Department PA
 - FY 2017/2018
 - Report 6 indicates 51 of 64 (80%) UST facilities inspected
 - CERS CME information indicates 64 of 64 (100%) UST facilities inspected
 - CUPA Self-Audit Report indicates 42 of 59 (71%) UST facilities inspected
 - FY 2016/2017
 - Report 6 indicates 61 of 65 (94%) UST facilities inspected
 - CERS CME information indicates 59 of 65 (91%) UST facilities inspected
 - CUPA Self-Audit Report indicates 65 of 156 (42%) UST facilities inspected
 - FY 2015/2016
 - Report 6 indicates 58 of 67 (87%) UST facilities inspected
 - CERS CME information indicates 54 of 67 (81%) UST facilities inspected
 - CUPA Self-Audit Report indicates 56 of 64 (88%) UST facilities inspected
- City of Pasadena Fire Department PA
 - FY 2017/2018
 - Report 6 indicates 54 of 64 (84%) UST facilities inspected
 - CERS CME information indicates 69 of 60 (115%) UST facilities inspected
 - CUPA Self-Audit Report indicates 67 of 60 (112%) UST facilities inspected
 - FY 2016/2017
 - Report 6 indicates 54 of 64 (84%) UST facilities inspected
 - CERS CME information indicates 56 of 60 (93%) UST facilities inspected
 - CUPA Self-Audit Report indicates 54 of 63 (86%) UST facilities inspected
 - FY 2015/2016
 - Report 6 indicates 62 of 64 (97%) UST facilities inspected
 - CERS CME information indicates 62 of 60 (103%) UST facilities inspected
 - CUPA Self-Audit Report indicates 63 of 63 (100%) UST facilities inspected

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- Note: The City of Pasadena Fire Department PA has been approved to electronically submit Report 6 for the period of January 1, 2019, through June 30, 2019. The number of inspections conducted as reported by the PA should be consistent from this point forward.
- City of Torrance Fire Department PA
 - FY 2017/2018
 - Report 6 indicates 56 of 59 (95%) UST facilities inspected
 - CERS CME information indicates 55 of 59 (93%) UST facilities inspected
 - CUPA Self-Audit Report indicates 58 of 51 (114%) UST facilities inspected
 - FY 2016/2017
 - Report 6 indicates 63 of 58 (109%) UST facilities inspected
 - CERS CME information indicates 50 of 58 (86%) UST facilities inspected
 - CUPA Self-Audit Report indicates 54 of 167 (32%) UST facilities inspected
 - FY 2015/2016
 - Report 6 indicates 55 of 59 (93%) UST facilities inspected
 - CERS CME information indicates 54 of 59 (92%) UST facilities inspected
 - CUPA Self-Audit Report indicates 51 of 59 (86%) UST facilities inspected
- LADPW PA
 - FY 2017/2018
 - Report 6 indicates 1,563 of 1,550 (101%) UST facilities inspected
 - CERS CME information indicates 1,561 of 1,605 (97%) UST facilities inspected
 - CUPA Self-Audit Report indicates 1,562 of 1,564 (99%) UST facilities inspected
 - FY 2016/2017
 - Report 6 indicates 1,564 of 1,554 (101%) UST facilities inspected
 - CERS CME information indicates 1,571 of 1,605 (98%) UST facilities inspected
 - CUPA Self-Audit Report indicates 1,564 of 1,555 (101%) UST facilities inspected
 - FY 2015/2016
 - Report 6 indicates 1,562 of 1,566 (99%) UST facilities inspected
 - CERS CME information indicates 1,554 of 1,605 (97%) UST facilities inspected
 - CUPA Self-Audit Report indicates 1,562 of 1,547 (101%) UST facilities inspected

Note: This incidental finding was identified as a deficiency during the 2016 and 2013 CUPA Performance Evaluations and was corrected during each of the Progress Report processes.

CITATION:

CCR, Title 23, Section 2713(c)(3)

CCR, Title 27, Section 15185(a)

[State Water Board]

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RESOLUTION:

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will perform an analysis to determine why and how the collecting, managing, and reporting of the number of UST inspections is inaccurate. The CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will review the Data Management Procedure, or other applicable procedure, and revise as necessary, to ensure the following is addressed:

- Collecting, retaining, managing, and reporting inspection information;
- How personnel report inspection information at the local level; and
- How inspection information is reported to state agencies.

The CUPA will provide the revised Data Management Procedure or other applicable procedure to CalEPA.

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will determine why the reported number of UST inspections differ among Report 6, CERS CME information and CUPA Self-Audit Reports. The CUPA will provide a narrative of the conclusion to CalEPA.

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will, if necessary, amend the Data Management Procedure or other applicable procedure, based on feedback from the State Water Board and will provide the amended Data Management Procedure or other applicable procedure to CalEPA. If no amendments are necessary, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will train PA personnel on the revised Data Management Procedure or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PAs will implement the revised Data Management Procedure or other applicable procedure.

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will train PA personnel on the amended Data Management Procedure or other applicable procedure and will provide training documentation to CalEPA. Training documentation will include, at minimum, an outline of the training conducted and a list of PA personnel in attendance. Once training is complete, the PAs will implement the amended Data Management Procedure or other applicable procedure.

To demonstrate resolution of this Incidental Finding, the CUPA in consultation with the City of Burbank Fire Department PA, the City of Pasadena Fire Department PA, the City of Torrance Fire Department PA and the LADPW PA will consistently report the number of UST inspections conducted in Report 6 and CERS for two consecutive Report 6 reporting periods.

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5. INCIDENTAL FINDING:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA and the City of Torrance Fire Department PA are preparing annual UST compliance inspection reports for every annual UST inspection.

Review of UST facility files finds annual compliance inspection reports are missing for the following:

- City of Burbank Fire Department PA
 - CERS ID 10229860 – inspection conducted on December 19, 2018
- City of Torrance Fire Department PA
 - CERS ID 10117882 – inspection conducted on January 13, 2019
 - CERS ID 10133146 – inspections conducted on June 26, 2019 and June 14, 2018
 - CERS ID 10130713 – inspection conducted on February 15, 2017

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

CITATION:

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

RESOLUTION:

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the I&E Plan or other applicable procedure ensuring an annual UST compliance inspection report is consistently prepared and provide training documentation to CalEPA. Training documentation will include, and not be limited to an outline of the training conducted and a list of personnel attending training. Once training is complete, the PAs will implement the I&E Plan or other applicable procedure.

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will provide inspection reports for annual UST compliance inspections conducted within the previous 90 days at the following facilities:

- City of Burbank Fire Department PA
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
- City of Torrance Fire Department PA
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID

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6. INCIDENTAL FINDING:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA and the City of Torrance Fire Department PA are documenting in sufficient detail whether the UST owner/operator has demonstrated to the satisfaction of the PA, tank closure complies with statute and regulations.

Review of UST facility files finds the City of Burbank Fire Department PA and the City of Torrance Fire Department PA are issuing a “No Further Action” letter, which does not document, in sufficient detail, the satisfaction of the PA that tank closure complies with statute and regulations. The following are examples:

- City of Burbank Fire Department PA
 - CERS ID 10229320 – “No Further Action” letter issued on April 8, 2015
 - CERS ID 10230127 – “No Further Action” letter issue on October 7, 2016
 - CERS ID 10229440 – “No Further Action” letter issued on January 31, 2016
- City of Torrance Fire Department PA
 - CERS ID 10121995 – “No Further Action” letter issued on August 1, 2016

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

CITATION:

HSC, Chapter 6.7, Section 25298(c)
CCR, Title 23, Section 2672(d)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will revise and provide CalEPA with the UST “No Further Action” closure letter template that documents in sufficient detail, to the satisfaction of the PA, tank closure, removal and soil and ground water sampling complies with statute and regulations.

By the 2nd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will, if necessary, amend the UST “No Further Action” closure letter template, based on feedback from the State Water Board. The CUPA will provide the amended UST “No Further Action” closure letter template to CalEPA. If no amendments are necessary, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the revised UST “No Further Action” closure letter template. Training documentation will include, and not be limited to an outline of the training conducted and a list of personnel attending training. Once training is complete, the PAs will utilize the revised UST “No Further Action” closure letter template.

By the 3rd Progress Report, if amendments to the revised UST “No Further Action” closure letter template were necessary, the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will utilize the amended UST “No Further Action” closure letter template. The CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the amended UST “No Further Action” closure letter template. Training documentation will include, and not be limited to an outline of the training

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conducted and a list of personnel attending training. Once training is complete, the PAs will utilize the amended UST “No Further Action” closure letter template.

With respect to facilities which have not been provided UST closure documentation, in the event of a public request for closure documentation, the PA will provide the requested documentation, which will demonstrate the satisfaction of the PA regarding UST closure, removal, and soil sampling complying with statute and regulations.

7. INCIDENTAL FINDING:

The CUPA is not consistently ensuring the City of Burbank Fire Department PA and the City of Torrance Fire Department PA require UST facilities to submit UST testing and leak detection documents.

Review of UST facility files and CERS UST submittal information finds the following examples where UST testing and leak detection documents were not found:

- City of Burbank Fire Department PA
 - CERS ID 10229860
 - 2018 Annual Monitoring Certification test results missing
 - 2015 Secondary Containment test missing
 - CERS ID 10230310
 - 2017 Annual Monitoring Certification test results missing
 - CERS ID 10412398
 - 2018 Overfill Prevention Inspection Report missing
- City of Torrance Fire Department PA
 - CERS ID 10117882
 - 2019 Annual Monitoring Certification test results missing
 - 2018 Overfill Prevention Inspection missing
 - CERS ID 10130713
 - 2019 Annual Monitoring Certification test results missing
 - CERS ID 10133146
 - 2018 Annual Monitoring Certification test results missing

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

CITATION:

HSC, Chapter 6.7, Section 25288(b)
CCR, Title 23, Sections 2637(e), 2638(d), 2643(g) and 2644.1(a)(5)
[State Water Board]

RESOLUTION:

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the I&E Plan or other applicable procedure ensuring UST testing and leak detection documents are submitted by UST owners or operators to the respective PA within 30 days of testing. The CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will train PA personnel on the I&E Plan or other applicable procedure. Training documentation will

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include, and not be limited to an outline of the training conducted and a list of personnel attending training. Once training is complete, the PAs will implement the I&E Plan.

By the 3rd Progress Report, the CUPA in consultation with the City of Burbank Fire Department PA and the City of Torrance Fire Department PA will provide UST facility records, including, but not be limited to, monitoring certification 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, if not otherwise available in CERS. UST facility records will be provided for the following facilities:

- City of Burbank Fire Department PA
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
- City of Torrance Fire Department PA
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID
 - CERS ID

8. INCIDENTAL FINDING:

The I&E Plan has inaccurate information or is missing required components.

The following information is inaccurate:

- Inspection frequencies for the PBR, CA, and CE programs need to be updated to include an “initial inspection within two (2) years of notification and every three years thereafter.”

The following component is missing:

- Provisions for ensuring sampling capability and analysis performed by a state certified laboratory.

CITATION:

CCR, Title 27, Section 15200(a)
[CalEPA, DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will review, revise, and provide CalEPA with the I&E Plan that accurately includes the components identified above.

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9. INCIDENTAL FINDING:

The CUPA is not consistently or correctly reporting all CERS CME information for the HWG Program.

In some instances, the CUPA uses the “General Use” CERS Violation Library violation type rather than the specific CERS Violation Library violation type. Examples include, but are not limited to:

- CERS ID 10191961: inspection dated February 27, 2018
- CERS ID 10266577: inspection dated February 15, 2018
- CERS ID 10266745: inspection dated December 12, 2017
- CERS ID 10267324: inspection dated July 10, 2017

In some instances, the CUPA uses the “General Training” CERS Violation Library violation type when facilities are issued a violation for having an inactive hazardous waste ID number. Having an inactive hazardous waste ID number is not a training related violation. Examples include, but are not limited to:

- CERS ID 10266154: inspection dated April 24, 2017
- CERS ID 10265140: inspection dated February 27, 2017
- CERS ID 10267243: inspection dated February 24, 2017
- CERS ID 10263790: inspection dated February 1, 2017
- CERS ID 10266157: inspection dated February 1, 2017
- CERS ID 10229362: inspection dated January 3, 2017
- CERS ID 10267423: inspection dated October 14, 2016
- CERS ID 10267936: inspection dated October 11, 2016
- CERS ID 10265071: inspection dated August 9, 2016
- CERS ID 10268986: inspection dated August 3, 2016
- CERS ID 10264975: inspection dated July 13, 2016

Inspection data was not reported in CERS for the following:

- CERS ID 10288072: inspection dated March 10, 2017

Note: The examples provided above may not represent all instances of this incidental finding

CITATION:

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

RESOLUTION:

By the 1st Progress Report, the CUPA will review the Data Management Procedure, or other applicable procedure, with all applicable staff. The CUPA will provide a statement that all applicable staff reviewed the Data Management Procedure, or other applicable procedure. The CUPA will ensure that all CME data is correctly entered and uploaded to CERS.

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10. INCIDENTAL FINDING:

The CUPA is not consistently ensuring that all HWG facilities cited for violations RTC.

Review of CERS CME information for FYs2016/2017, 2017/2018 and 2018/2019 indicates 1,472 of 12,866 (11%) violations have no RTC.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 [DTSC]

HSC, Chapter 6.11, Section 25404.1.2(c)

CCR, Title 27, Sections 15185(a) and (c), and 15200(a) and (e)
[DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a sortable spreadsheet of all HWG facilities that have open violations (no RTC). The CUPA will follow-up with the facilities listed in the provided spreadsheet and prioritize follow-up actions based on the level of hazard. At minimum, for each HWG facility, the spreadsheet will include:

- Facility name;
- CERS ID number;
- Inspection and violation date(s);
- Scheduled RTC date;
- Actual RTC date;
- RTC qualifier; and
- in the absence of RTC, follow-up actions taken by the CUPA to obtain RTC, including applied enforcement.

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

By the 3rd Progress Report, the CUPA will have followed-up with all facilities listed in the spreadsheet.

By the 4th Progress Report, the CUPA will provide CalEPA with RTC documentation for the following HWG facilities:

- CERS ID 10229242: inspection dated May 10, 2019
- CERS ID 10229716: inspection dated February 22, 2019
- CERS ID 10300159: inspection dated January 4, 2019
- CERS ID 10713862: inspection dated April 30, 2018
- CERS ID 10151907: inspection dated April 2, 2018
- CERS ID 10299136: inspection dated March 15, 2018
- CERS ID 10283665: inspection dated February 28, 2018

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- CERS ID 10269067: inspection dated August 2, 2017
 - CERS ID 10302973: inspection dated June 28, 2017
 - CERS ID 10153387: inspection dated October 19, 2016
-

11. INCIDENTAL FINDING:

The CUPA is not ensuring inspectors conduct complete and accurate HWG inspections.

The CUPA is not ensuring TP submittal information is correct during TP inspections.

On August 6, 2019, DTSC conducted an oversight inspection with a West District CUPA inspector at a Large Quantity Generator (LQG) facility (CERS ID 10269067).

Prior to arriving at the facility, the inspector demonstrated knowledge of the facility's inspection history, CERS data, and reviewed the Hazardous Waste Tracking System (HWTS). During the inspection, the inspector gained consent to inspect the facility, toured the entire site and asked appropriate operating questions during the walkthrough. The inspector requested and reviewed most required paperwork and cited several appropriate violations.

However, the inspector requested the facility's Biennial Report when the facility was not yet required to have submitted it, and the inspector did not:

- thoroughly review the contents of the contingency plan;
- inquire about the frequency in which the facility inspects all emergency equipment;
- ensure that the training plan met all the requirements outlined in CCR, Title 22, Section 66265.16
- ensure employees were trained in waste feed cut off and shutdown operations.
- cite an observed violation for the storage of hazardous waste in open and unlabeled containers as a violation, until prompted by the accompanying DTSC inspector. During the inspection, it was observed that filter press sludge was left in shallow containers outside before being transferred to a roll off bin.
- cite an observed violation for not having a "date emptied" date on all empty containers, until prompted by the accompanying DTSC inspector. For several years, the facility has been submitting a PBR notification in CERS for chrome reduction treatment. During the inspection, the facility operator stated chrome reduction treatment has never been conducted at the facility. The CUPA has been continually reviewing and accepting this incorrect submittal for those several years

CITATION:

CCR, Title 22, Sections 66262.34, 66265.15-.16, 66265.31-.34, 66265.51-.56 and 67450.3 [DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide HWG and TP training to all CUPA staff who conduct HWG facility inspections and review TP submittals.

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By the 1st Progress Report, the CUPA will ensure all applicable CUPA staff who conduct HWG facility inspections and review TP submittals review the following:

- HWG fact sheets Hazardous Waste Generator Requirements
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/06/HWM_FS_Generator_Requirements.pdf
- Accumulating Hazardous Wastes at Generator Sites
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf
- Fixed Treatment Unit Operating Under Permit by Rule
<https://dtsc.ca.gov/wp-content/uploads/sites/31/2016/01/Fact-Sheet-Fixed-Treatment-Unit-Operating-Under-Permit-By-Rule.pdf>

The CUPA will provide a statement that all applicable staff who conduct HWG facility inspections and review TP submittals reviewed the training material identified above.

12. INCIDENTAL FINDING:

The CUPA is not consistently addressing referred complaints in accordance with the I&E Plan. The CUPA is not always processing and submitting referred complaints within ten days of receipt of the complaint.

The I&E Plan states that the service request and/or complaint (SRC) will be assigned to a Supervising Hazardous Materials Specialist (HMS) within three business days of receipt and then the SRC will be further assigned to an HMS by the Supervising HMS within one business day. Once assigned to an HMS, an inspection shall be conducted as necessary. The inspector shall process the SRC and submit to the Clerk for closure or referral within ten working days from the date the CUPA received the complaint.

Examples include, but may not be limited to:

- Complaint (COMP) - 41413
 - Received by the CUPA from the CalEPA Complaint database on January 14, 2019.
 - The final Finding Report in the CalEPA Complaint database states “Complaint has been referred to SouthWest District Inspection office for review/investigation. Update will be provided.”
 - No other information was provided by the CUPA indicating the complaint was investigated.
- COMP-37724
 - Received by the CUPA from the CalEPA Complaint database on May 15, 2018.
 - The final Finding Report dated July 18, 2019, in the CalEPA Complaint database states “Complaint has been referred to North Office Inspection Office for evaluation. Once evaluated, the status will be updated”.
 - No other information was provided by the CUPA indicating the complaint was investigated.

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- COMP-10136
 - Received by the CUPA from the CalEPA Complaint database on August 4, 2016.
 - The final Finding Report in the CalEPA Complaint database states that the site visit was not conducted until October 7, 2016.

Note: Since December 2018, the CUPA has not followed up on complaints referred by the CalEPA Complaint database. The CUPA has stated the complaint referrals have not been received from the CalEPA Complaint Database.

CITATION:

CCR, Title 27, Section 15200(a)(13)
[DTSC]

RESOLUTION

By the 1st Progress Report, the CUPA will review, and revise as necessary, the complaint procedures outlined in the I&E Plan with all staff to ensure the complaint procedures include how to process the receipt, investigation and closure of a complaint and specify that complaints shall not be closed out without having been investigated, including submitting finding reports in the CalEPA Complaint Database indicating that complaints have been closed out, without having been investigated. The CUPA will process and follow-up with each newly referred complaint within 10 days, as specified in the I&E Plan. The CUPA will provide CalEPA with the updated I&E Plan and a statement that all applicable staff have reviewed the revised I&E Plan.

13. INCIDENTAL FINDING:

The CUPA is not consistently including observations and factual basis for each violation cited on HWG inspection reports.

Review of HWG inspection reports finds inadequate or improper documentation of observations and/or factual basis to support violations cited for employees failing to have met all training requirements.

Observations and/or factual basis in Small Quantity Generator (SQG) facility inspection reports citing violations for the failure of the facility to provide training to employees, should not reference the requirement for maintaining training documentation as training documentation is not required for SQG facilities. Examples below include, but are not limited to:

- CERS ID 10160201: inspection dated March 21, 2019
- CERS ID 10131157: inspection dated March 16, 2019
- CERS ID 10591690: inspection dated January 18, 2019
- CERS ID 10719613: inspection dated November 15, 2018
- CERS ID 10748194: inspection dated September 18, 2018
- CERS ID 10787356: inspection dated July 26, 2018
- CERS ID 10141705: inspection dated December 8, 2017
- CERS ID 10716691: inspection dated September 29, 2017
- CERS ID 10160269: inspection dated August 28, 2017

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- CERS ID 10636711: inspection dated April 21, 2017
- CERS ID 10173425: inspection dated January 19, 2017

CITATION:

HSC, Chapter 6.5, Section 25185(c)(2)(A)
[DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide inspection report writing training to each CUPA inspector to ensure that all violations cited in HWG inspection reports include observations and factual basis. The CUPA will provide CalEPA with a statement that all applicable inspection staff have reviewed the above fact sheets.

14. INCIDENTAL FINDING:

The CUPA is not consistently citing correct HWG violations in accordance with hazardous waste control law and regulations.

In some cases, the CUPA is requiring SQG facilities to provide documentation of weekly container inspections. Documentation for weekly container inspections is not required. Examples include, but are not limited to:

- CERS ID 10197118: inspection dated September 27, 2017
- CERS ID 10275409: inspection dated October 17, 2018
- CERS ID 10767457: inspection dated July 3, 2018
- CERS ID 10283800: inspection dated July 3, 2018
- CERS ID 10749841: inspection dated March 7, 2018
- CERS ID 10746097: inspection dated January 17, 2018
- CERS ID 10280809: inspection dated February 15, 2017

CITATION:

CCR, Title 22, Section 66262.34
Code of Federal Regulations (CFR), Title 40, Section 262.16 (previously Section 262.34)
[DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will ensure CUPA inspection staff review the HWG fact sheets below:

- [Hazardous Waste Generator Requirements](https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/06/HWM_FS_Generator_Requirements.pdf)
(https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/06/HWM_FS_Generator_Requirements.pdf)
- [Accumulating Hazardous Wastes at Generator Sites](https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf)
(https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf)

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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 the I&E Plan indicates the following information is inaccurate:

- Aboveground Petroleum Storage Act (APSA) Program
 - Page 1: In the Introduction section, HSC, Section 25270.5(a) is cited as the authority to inspect and enforce the APSA program. This citation is the APSA mandated inspection frequency. The Unified Program Agency (UPA) is required to implement and enforce the APSA program as described in HSC, Division 20, Chapter 6.67 (commencing with Section 25270), with UPA implementation authority provided in HSC, Section 25270.4.
 - Page 3: In the Frequency of Inspection table, the triennial statutory inspection frequency applies to APSA facilities storing 10,000 gallons or more of petroleum. It is most accurate to cite HSC 25270.5(a) when referencing these APSA mandated inspections. Also, if the CUPA implements an alternative inspection plan (for example, inspecting all APSA facilities including those storing less than 10,000 gallons of petroleum triennially), then it is appropriate to also reference HSC 25270.5(b).
 - Page 33: The APSA statute reference in the Aboveground Petroleum Storage Act Penalty Assessment section should be HSC, Section 25270.12.1 as it relates to administrative penalty, rather than HSC, Section 25270.12, which relates to civil penalties.
- Hazardous Materials Business Plan (HMBP) and California Accidental Release Prevention (CalARP) Programs
 - Page 1: The authority for the Hazardous Materials Release Response Plan (HMRRP) is cited as HSC, Section 25508(a), which pertains to business plan submittals. HSC, Section 25502 grants authority for the CUPA to implement the program. HSC, Section 25511(b) is the authority for inspection. HSC, Sections 25515-25515.8 are the authority for enforcement.
 - Page 1: The authority for the CalARP Program is cited as HSC, Section 25534.5, which states that a stationary source must allow access for inspection. HSC, Section 25533(a) grants authority for the CUPA to implement the program. HSC, Section 25537 is the authority for inspection. HSC, Sections 25540-25541.3 are the authority for enforcement.
 - Page 8: The authority for RTC is cited as HSC, Section 25508(a)(2), which applies to deficiencies in submittals, not inspection violations. HSC, Chapter 6.95 does not have a citation for inspection violation RTC.

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Additionally, the CalEPA link to the violation classification guidance document on page 12 is no longer valid.

RECOMMENDATION:

Update the Program information in the I&E Plan.

2. OBSERVATION:

The CUPA has various webpages that contain various resources and information for the regulated community and general public. However, some information on the following websites is outdated or inaccurate:

Aboveground Storage Tank (AST) webpage (<https://www.fire.lacounty.gov/hhmd-2/apsa>):

- Assembly Bill (AB) 1130 did not create HSC, Chapter 6.67. AB 1130 amended HSC, Chapter 6.67 and granted the authority to Unified Program Agencies to administer the APSA program within their jurisdictions.
- The discussion of total petroleum storage capacity in the section titled 'Applicability' will benefit by referencing the inclusion of any piping that is integral to the tanks.
- In addition to the hazardous waste tanks permitted by DTSC, in the 'Exemptions' paragraph, hazardous waste tanks with a permit by rule authorization from the CUPA are also now excluded from the definition of an aboveground storage tank under APSA.
- The APSA conditional exemption discussion in the section titled 'Exemptions' may confuse the regulated community. APSA regulates conditionally exempt facilities; these facilities are not exempt from the APSA program. While conditionally exempt from the APSA requirement to prepare and implement an SPCC Plan, the conditionally exempt facility owner or operator is still subject to APSA program fees, the APSA state surcharge, Tank Facility Statement/Business Plan submission, conducting daily visual inspections of aboveground petroleum storage tanks, allowing the CUPA to conduct periodic inspection of the facility, and installation of secondary containment for each tank or group of tanks if the CUPA deems it necessary to protect waters of the state.
- The discussion in the section titled 'Reporting Requirements' incorrectly states that a business plan (inventory submittal) must identify each storage tank that exceeds 10,000 gallons in storage capacity. While this statement is accurate relative to the tank facility statement, a complete HMBP submittal is sufficient to meet the tank facility statement reporting requirement, as allowed under HSC, Section 25270.6(a)(2).
- The State Fire Marshal (OSFM) link is no longer valid.

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The Forms section of the CUPA's CERS Info webpage:

- The Tier I and Tier II templates should not be titled APSA (SPCC is appropriate).
- The Tier II Qualified Facility SPCC Plan template 5-19-10 CUPA Forum version has been superseded by the OSFM version dated April 2021.

The APSA section of the Guidance Documents, Fact Sheets and Forms webpage:

- The Petroleum Storage Act links to a 2010 version, which is outdated
- The APSA Reporting requirements link to the 2010 version, which is outdated
- The APSA factsheet dated January 2010 is outdated
- The 2009 document titled 'Compliance Guideline for Hazardous Wastes and Materials' contains outdated or inaccurate information in the Chapter 4 APSA section (pages 97- 101). Additionally, the outdated Uniform Fire Code is referenced on pages 3 and 80; the current fire code adopted by the state is the 2019 edition of the California Fire Code, effective January 1, 2020.

RECOMMENDATION:

Update the information on and within the various webpages.

3. OBSERVATION:

CERS identifies approximately 1,268 facilities as APSA applicable, while the CUPA's Envision Connect (EC) database identifies about 1,221 APSA facilities.

OSFM estimates that approximately 1,153 APSA facilities are identified as APSA applicable in CERS and are also identified as an APSA facility in the CUPA's EC database.

There are about 115 APSA facilities identified in CERS as APSA applicable that are not identified as APSA facilities in the CUPA's EC database. While not all 115 facilities meet the standards for APSA applicability, it is likely that some do, as 27 facilities have previously had an APSA inspection. OSFM has provided the CUPA with the MS Excel spreadsheets downloaded from CERS to support these observations.

RECOMMENDATION:

Complete the reconciliation of the APSA Program information in the CUPA's EC database with CERS to ensure that all APSA facilities are regulated and included in the CUPA's EC database as well as CERS.

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4. OBSERVATION:

Review of CERS UST submittals “Accepted” by the LADPW PA finds 22% are taking greater than 60-days for acceptance.

- 24 instances when acceptance of a UST submittal took between 600 – 931 days
- 30 instances when acceptance of a UST submittal took between 400 – 600 days
- 465 instances when acceptance of a UST submittal took between 100 – 400 days
- 333 instances when acceptance of a UST submittal took between 61 – 100 days
- 3,005 instances when acceptance of a UST submittal took between 0 – 60 days

Note: State Water Board Correspondence “*When to Review Underground Storage Tank (UST) Records*” dated November 29, 2016 may be referenced.

RECOMMENDATION:

Review State Water Board Correspondence *When to Review Underground Storage Tank (UST) Records* (dated November 29, 2016) and review UST testing and maintenance records as soon as possible upon submittal.

5. OBSERVATION:

Review of Annual Routine Compliance Inspections reported in CERS finds the CUPA’s EC database is not consistently and correctly electronically transferring or exchanging information to CERS.

Examples where a facility has multiple inspections occurring on the same date include, but are not limited to:

- City of Burbank Fire Department PA
 - 2018: 2 facilities with 2 inspections on the same date
 - 2017: 2 facilities with 2 inspections on the same date
- City of Torrance Fire Department PA
 - 2018: 1 facility with 3 inspections on the same date
 - 2017: 1 facility with 3 inspections on the same date
 - 2016: 1 facility with 2 inspections on the same date

RECOMMENDATION:

Ensure the CUPA’s EC database is consistently and correctly electronically transferring or exchanging information to CERS. Ensure facilities do not have more than one inspection reported for the same date in CERS. Increased accuracy in reporting inspection and violation data will affect Report 6 and TCR information provided by the PA to the CUPA, and by the CUPA to the State Water Board. In addition, ensuring information is consistently and correctly electronically transferred from the CUPA’s EC database to CERS correct will have a direct impact on Incidental Finding #6.

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6. OBSERVATION:

Review of CERS finds the following UST systems within the jurisdiction of the CUPA may need to be permanently closed by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- Within the jurisdiction of the City of Burbank Fire Department PA
 - CERS ID 10138289
 - CERS ID 10229383
 - CERS ID 10397452

- Within the jurisdiction of the City of Pasadena Fire Department PA
 - CERS ID 10307191
 - CERS ID 10307749

- Within the jurisdiction of the City of Torrance Fire Department PA
 - CERS ID 10122532
 - CERS ID 10132234
 - CERS ID 10133851

- Within the jurisdiction of the LADPW PA
 - CERS ID 10284541
 - CERS ID 10138201: Application has been received by the CUPA to remove USTs and install new USTs
 - CERS ID 10263277

Note: The examples provided above may not represent all UST systems which may need to be permanently closed by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05.

RECOMMENDATION:

Continue to provide verbal reminders to UST facility owners/operators and consider providing written notification of the December 31, 2025 requirements for permanent closure of single-wall USTs . The notification should inform the facility owners/operators that, in order to stay in compliance and avoid fines, UST owners/operators must replace or remove single-wall USTs by December 31, 2025. Additional information about single-wall UST closure requirements may be found at: http://waterboards.ca.gov/water_issues/programs/ust/single_walled/

UST facility owners/operators should be notified that Replacing, Removing, or Upgrading Underground Storage Tanks (RUST) Program grants and loans are available to assist eligible small businesses with the costs necessary to remove, replace, or upgrade project tanks. Additional information on funding sources may be found at: http://www.waterboards.ca.gov/water_issues/programs/ustcf/rust.shtml

7. OBSERVATION:

Review of the Area Plan finds the following minor errors or omissions:

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- Pages 81-82: No mention is made of HM-11, a Cal OES-sponsored Type II hazmat rig assigned to the Los Angeles County Fire Department, and no mention is made of HM-12, a similar Cal OES-sponsored hazmat rig assigned to the Los Angeles City Fire Department.
- Page 93: In several places, the reference to Fish and Game should now be Fish and Wildlife.
- Page 101: In several places, the reference to Cal EMA should now be Cal OES.

RECOMMENDATION:

Revise the above minor errors and omissions with the next review and revision of the Area Plan.

8. OBSERVATION:

On August 2, 2019, DTSC conducted a SQG oversight inspection with an East District inspector at CERS ID 10307932. During the inspection, the inspector gained consent to inspect the facility, toured the entire site, and asked appropriate operating questions during the walkthrough. The inspector requested all appropriate documentation. The inspector concluded the inspection by issuing a summary of violations which included a hazardous waste labeling violation.

On August 6, 2019, DTSC conducted a LQG oversight inspection with a North District inspector at CERS ID 10266652. The inspector was well prepared for the inspection. The inspector asked for consent to conduct the inspection and established rapport with facility staff. The inspector identified labeling and open container violations during the walk through. The inspector requested required paperwork, however not all documents were available for review at the time of the inspection (biennial report, tank assessment, SB 14 documentation and analytical test results for several waste streams). The inspector took several photographs but did not take photos of all observed labeling violations.

On August 6, 2019, DTSC conducted a LQG oversight inspection with an East District inspector at CERS ID 10283653. Prior to arriving at the facility, the inspector demonstrated knowledge of the facility's inspection history, reviewed CERS data, and reviewed of the HWTS. During the inspection, the inspector gained consent to inspect the facility, toured the entire site and asked appropriate operating questions during the walkthrough. The inspector took photographs as evidence of violations. The inspector requested all appropriate PBR and Resource Conservation and Recovery Act (RCRA) LQG paperwork and reviewed all available documentation for the facility. Not all documents were available for review at the time of the inspection. Some PBR documents available in CERS were reviewed prior to the inspection. At the conclusion of the inspection, the inspector provided the facility with a list of issues and documents to be provided. Some questions and issues were not resolved the week of the inspection including: current tank integrity assessments (last available document in CERS was 2013), and the conveyance methods and ancillary piping used to transport corrosive wastes to the treatment system (some of which is underground). Other issues found during the inspection included a failure to properly

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manage bag house dust (which may have resulted in a release) and facility-wide hazardous waste labeling issues. The accompanying DTSC inspectors provided some guidance to the CUPA inspector regarding de minimis quantities of used oil and the regulation of the facility's PBR unit. The inspection report requested a total petroleum hydrocarbons (TPH) test for the oily water identified at the facility to determine whether or not it is considered hazardous waste. However, TPH testing will not provide information on whether a waste is hazardous or not. If the oily water only contained de minimis quantities of oil pursuant to HSC, Section 25250(a)(1)(C)(ii)(II) then the oily water would not be considered used oil. The oily water could be identified as a hazardous waste if it failed the acute aquatic toxicity test per HSC, Section 66261.24(a)(6), also known as the fish bioassay test.

On August 7, 2019, DTSC conducted a SQG oversight inspection with a West District inspector at CERS ID 10124938. Prior to arriving at the facility, the inspector demonstrated knowledge of the facility's inspection history, reviewed CERS data, and reviewed the HWTS. During the inspection, the inspector gained consent to inspect the facility, toured the entire facility and asked appropriate operating questions. The inspector requested and reviewed all appropriate documentation. The inspector did not conduct a thorough review of the contingency plan. The submitted inspection report is contradictory as it notes both that there are no violations and cites a Land Disposal Restriction (LDR) violation.

On August 7, 2019, DTSC conducted a LQG oversight inspection with a North District inspector at CERS ID 10229569. The inspector was well prepared for the inspection. The inspector asked for consent to conduct the inspection and established rapport with facility staff. The inspector conducted a thorough walkthrough and identified violations including improperly labeling of hazardous waste and universal waste containers. The inspector took photographs as evidence of labeling violations. The facility was conducting daily tank inspections; however, the log did not reflect this. The facility was not able to provide a tank assessment for the above ground tank. There was a below ground tank that was not in use and the inspector requested additional information for this tank, to include a tank assessment. Following the inspection, the inspector requested several documents for review in order to complete the inspection report. Information that was provided does not appear in the inspection report. The inspection report provided to the facility was dated August 14, 2019, and indicated that four minor labelling violations were corrected onsite, however these violations were observed on the first date of the inspection, August 7, 2019. In CERS, the first violation in the inspection report was cited using a General CERS Violation Library type when a specific CERS Violation Library type should have been used.

RECOMMENDATION:

Continue to conduct thorough inspections and document violations with appropriate evidence, observations, and factual basis. Review tank requirements in CCR, Title 22, Sections 66265.192, 66265.193, 66265.194, and 66265.195, including a review of ancillary equipment and tanks that are underground.

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9. OBSERVATION:

The CUPA's "Envision Procedure Manual" portion of the Data Management Procedures has not been updated since November 19, 2002.

RECOMMENDATION:

Review the Data Management Procedures on a more regular basis to ensure accuracy.

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EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION

Examples of outstanding program implementation highlight efforts and activities of the CUPA that are considered above and beyond the standard expectations for implementation of the Unified Program.

1. CERS OUTREACH PROGRAM:

The CUPA has implemented a proactive process that supports the regulated business and community within the jurisdiction of the CUPA to maintain compliance with the requirement to make annual CERS HMBP submittals. Each facility is sent an Annual CERS Submittal Reminder email several months before the established submittal due date. A second reminder email is sent to each facility several weeks before the established submittal due date. CUPA staff then monitor facility compliance. Non-compliant facilities are sent a Delinquency notice by mail. CUPA staff provide workshop opportunities that support facilities in making annual HMBP CERS submittals. Facilities that remain non-compliant several months after the established submittal due date are issued a Penalty notice, and CUPA staff may provide additional follow-up in support of achieving compliance.

2. ACCURATE AND COMPLETE CERS UST SUBMITTALS

The LADWP PA has developed and implemented a procedure which incorporates field verification of CERS UST submittals as part of the annual UST compliance inspection. This procedure has increased the accuracy of LADPW PA inspection personnel in accepting accurate and complete CERS UST submittals.
