

March 6, 2025

Scott Meyer, REHS III, Director
Amador County Environmental Health CUPA
810 Court Street
Jackson, California 95642-2132

Dear Mr. Meyer:

During April 2024 through January 2025, CalEPA and the Unified Program state agencies conducted a performance evaluation of the Amador County Environmental Health 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 acknowledgement of accomplishments and challenges, as well as 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.

To demonstrate progress towards the correction of program deficiencies and resolution of incidental findings identified in the final Summary of Findings report, the CUPA must submit an Evaluation Progress Report approximately 60 days from the date of this letter. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response, until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved by each issuing state agency. An Evaluation Progress Report template will be provided by the CalEPA Team Lead. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead, Kaeleigh Pontif, via email at Kaeleigh.Pontif@calepa.ca.gov, or uploaded to the established SharePoint website.

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

Mr. Scott Meyer
Page 2

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, at Melinda.blum@calepa.ca.gov. 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.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jason Boetzer".

Jason Boetzer
Deputy Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

Tom Henderson
UST Leak Prevention Unit and
Office of Tank Tester Licensing Manager
State Water Resources Control Board

Julie Pettijohn
Environmental Program Manager
CUPA Enforcement Branch
Department of Toxic Substances Control

Ryan Miya, Ph.D.
Senior Environmental Scientist, Supervisor
Department of Toxic Substances Control

Jennifer Lorenzo
Senior Environmental Scientist, Supervisor
CAL FIRE - Office of the State Fire Marshal

Mary Wren-Wilson
Environmental Scientist
CAL FIRE - Office of the State Fire Marshal

Brennan Ko-Madden
Senior Environmental Scientist
Department of Toxic Substances Control

Mr. Scott Meyer
Page 3

cc sent via email:

Kaitlin Cottrell
Environmental Scientist
State Water Resources Control Board

Michelle Suh
Environmental Scientist
State Water Resources Control Board

John Paine
Unified Program Manager
California Environmental Protection Agency

John Elkins
Environmental Program Manager
California Environmental Protection Agency

Elizabeth Brega
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Melinda Blum
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Julie Unson
Environmental Scientist
California Environmental Protection Agency

Kaeleigh Pontif
Environmental Scientist, Unified Program Evaluation Team Lead
California Environmental Protection Agency

**UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT****CUPA:** Amador County Environmental Health CUPA**Evaluation Period:** April 2024 – January 2025**Timeframe Evaluated:** July 1, 2019, through December 31, 2023**Evaluation Team Members:**

- **CalEPA Team Lead:** Kaeleigh Pontif
- **CalEPA:** Julie Unson
- **DTSC:** Brennan Ko-Madden
- **State Water Board:** Michelle Suh
- **CAL FIRE-OSFM:** Mary Wren-Wilson

This Final Summary of Findings includes:

- Accomplishments/Outstandings/Challenges
- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations

The findings contained within this evaluation report are considered final. 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:

Kaeleigh Pontif
CalEPA Unified Program
Phone: (916) 803-0623
E-mail: Kaeleigh.pontif@calepa.ca.gov

The CUPA shall submit each Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Final Summary of Findings Report or Evaluation Progress Report response. For each identified deficiency and incidental finding, the CUPA shall complete the corrective action and resolution as indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute. The Evaluation Progress Report process will continue until all deficiencies and incidental findings have been acknowledged as corrected or resolved by each issuing Unified Program state agency.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead via email at Kaeleigh.pontif@calepa.ca.gov, or uploaded to the established SharePoint website. A narrative stating the status of correcting each deficiency and resolving each incidental finding identified in the Final Summary of Findings Report, and any applicable supporting documentation must be included with each Evaluation Progress Report.

The submittal date for the 1st Evaluation Progress Report is **May 9, 2025**.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

ACCOMPLISHMENTS, CHALLENGES, AND EXAMPLES OF OUTSTANDING IMPLEMENTATION

Various accomplishments, outstanding efforts, and challenges that impact and/or enhance the overall ability of the CUPA to implement the Unified Program. Recognition of aspects such as response to local emergency declarations and statewide recovery efforts, which illustrate the accomplishments and challenges the CUPA manages in the efforts to continue implementation of the Unified Program.

1. 2020 CUPA PERFORMANCE EVALUATION DEFICIENCY CORRECTED:

In conducting the assessment for the 2024 CUPA Performance Evaluation, the following Deficiency previously identified as partially corrected upon closure of the 2020 CUPA Performance Evaluation is now considered corrected and no longer requires further action:

The CUPA's Standard Operating Procedure (SOP) #2 does not follow the requirements of the CUPA's local ordinance Chapter 7.25, Section 7.25.110 for implementing the issuance and renewal of Unified Program Facility Permits (UPFPs), which includes the UST operating permit. The UST operating permit, issued under the UPFP template, contains incorrect HSC reference citations that require correction.

During the Evaluation Progress Report process, the CUPA provided an acceptable revised SOP #2, and a revised UPFP template. Review of facility files finds the CUPA is utilizing the revised UPFP template to issue permits to underground storage tank (UST) facilities.

2. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM IMPLEMENTATION:

Since the 2020 CUPA Performance Evaluation, the CUPA has met the mandated triennial inspection frequency for APSA tank facilities storing 10,000 gallons or more of petroleum. The CUPA has also maintained triennial inspections on APSA tank facilities with less than 10,000 gallons of petroleum in accordance with the Inspection Plan.

3. LIMITED STAFFING:

Over the last several years, the CUPA has experienced challenges due to limited staff. The CUPA is budgeted for one inspector position, which is currently vacant as the senior inspector recently filled the Environmental Health Department's Director position. The Director position was vacant for approximately two years, with the County Administrative Officer (CAO) acting as the Interim Director. The CUPA is working to fill the inspector position.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

A program deficiency is considered a major deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a systemic problem in implementation of one or more program elements, a deficiency is likely to have an impact on the safety and protection of human health and the environment. Program deficiencies identify specific aspects regarding implementation of the Unified Program.

1. DEFICIENCY:

The CUPA is not consistently conducting complete annual UST compliance inspections.

The CUPA is not correctly citing nor documenting non-compliance and is not citing UST violations identified during annual UST compliance inspections, in inspection reports, and/or is not correctly reporting UST violations to CERS when violations are cited, including technical compliance rate (TCR) criteria.

The CUPA is not consistently ensuring technicians performing UST testing and/or equipment inspections of UST systems are International Code Council (ICC) UST Compliance Inspector Certified and/or trained and certified by the manufacturer of the equipment.

Review of UST compliance inspection reports, associated testing and leak detection documents, and inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information in the California Environmental Reporting System (CERS) between August 20, 2020, and March 1, 2024, finds the following discrepancies:

- Non-compliance was not observed in an inspection report, and no violation was reported to CERS:
 - CERS ID 10238755
 - A letter to the facility dated July 15, 2021, states “The Amador County Environmental Health Department conducted a routine underground storage tank facility inspection at the above-mentioned facility on July 15, 2021. Several violations were noted at the time of inspection.”
 - No violations were cited in the inspection report or reported to CERS.
 - Monitoring System Certification forms dated July 26, 2022, and July 27, 2023, note “7/8 UDC sensor failed - replaced sensor like for like.”
 - No violation was cited in the inspection report or reported to CERS for Unified Program Violation Library Violation Type Number 2030043 – Monitoring Equipment (USEPATCR 9d).
 - Spill Container Testing Reports dated July 15, 2021, and July 26, 2022, note “87 and 91 buckets failed, Diesel Bucket - replaced drain valve and retested”.
 - No violation was cited in the inspection report or reported to CERS for Unified Program Violation Library Violation Type Number 2060020 - Spill Container (USEPATCR 9a).
 - CERS ID 10238758
 - Spill Container Testing Reports dated September, 1 2022, and August 24, 2023, note failed components.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- No violation was cited in the inspection reports or reported to CERS for Unified Program Violation Library Violation Type Number 2060020 - Spill Container (USEPATCR 9a)
- CERS ID 10239031
 - Monitoring System Certification forms and Spill Container Testing Reports dated March 29, 2022, March 21, 2023, and March 20, 2024, are missing two tanks (CERS tank ID 10239031-004 and CERS tank ID 10239031-005) that are identified in CERS as “cleaned & empty” on CERS.
 - No violation was cited in the inspection reports or reported to CERS for Unified Program Violation Library Violation Type Number 2030002 – Leak Detection Equipment Maintenance (USEPATCR 9d) nor Unified Program Violation Library Violation Type Number 2060020 – Spill Container (USEPATCR 9d) for late Spill Container Testing.
- Non-compliance was cited in an inspection report; however, no violation was reported to CERS:
 - CERS ID 10238977
 - Inspection Report dated October 27, 2022, cites Unified Program Violation Library Violation Type Number 2030002 - Leak Detection Equipment Maintenance (USEPATCR 9d).
 - No violation is reported to CERS.
 - CERS ID 10863754
 - Technical Compliance Rate (TCR) criteria violation was not reported to CERS for an abandoned UST inspected in 2021, 2022, and 2023.
 - CERS ID 10863757
 - TCR criteria violation was not reported to CERS for an abandoned UST inspected in 2021, 2022, and 2023.
- Non-compliance was incorrectly cited in an inspection report and incorrectly reported to CERS:
 - Unified Program Violation Library Violation Type Number 2030035 - Unsafe UST Operation (USEPA Priority) was incorrectly cited in lieu of Unified Program Violation Library Violation Type Number 2030036 - Overfill Prevention (USEPATCR 9b).
 - CERS ID 10238728
 - Violation cited in the inspection report dated September 10, 2020, no RTC has been reported to CERS.
 - This is a repeat violation that was not cited as part of the compliance inspection performed in 2021, nor is the violation reported to CERS.
 - CERS ID 10238764
 - Violation cited in the inspection report dated October 29, 2020, no RTC has been reported to CERS.
 - This is a repeat violation that was not cited as part of the compliance inspections performed in 2021, 2022, and 2023, nor is the violation reported to CERS.
 - CERS ID 10747981

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- Violation cited in the inspection report dated October 29, 2020, no RTC has been reported to CERS.
- This is a repeat violation that was not cited as part of the compliance inspection performed in 2021, nor is the violation reported to CERS.
- CERS ID 10238854
 - Violation cited in the inspection report dated April 21, 2021, no RTC has been reported to CERS.
 - This is a repeat violation that was not cited as part of the compliance inspections performed in 2022 and 2023, nor is the violation reported to CERS.
- Unified Program Violation Library Violation Type Number 2030003 - Audible and Visual Alarm (USEPA Priority) was incorrectly cited in lieu of Unified Program Violation Library Violation Type Number 2030027 - Line Leak Detector (LLD) - Single-Walled Pressurized Pipe (USEPATCR 9d):
 - CERS ID 10238758
 - Violation cited in the inspection report dated September 7, 2021, for “91 ELD not functioning. Repair of line leak detector scheduled in 3 days.”

The CUPA's TCR in comparison with the average TCR for California indicates not all UST violations are being cited as the TCR reported by the CUPA is significantly higher in comparison to the average TCR for California.

- The TCR is a measurement determined by the United States Environmental Protection Agency (U.S. EPA) as to the compliance of a UST facility, including the frequency of UST equipment failures, and the ability of a CUPA to identify and cite violations.
 - A low TCR indicates a low rate of compliance.
 - A high TCR indicates a high rate of compliance.
- When a CUPA's TCR is significantly higher than the average TCR for California, it is indicative that the CUPA is not citing UST violations at the same frequency as other CUPAs in the state.
- Inaccurate inspection information affects the TCR reported.

The CUPA's TCR is reported as follows:

- July – December 2023
 - Amador County CUPA: 100%
 - California average: 60%
- January – June 2023
 - Amador County CUPA: 80%
 - California average: 60%
- July – December 2022
 - Amador County CUPA: 68%
 - California average: 60%
- January – June 2022
 - Amador County CUPA: 100%
 - California average: 60%

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- July – December 2021
 - Amador County CUPA: 91%
 - California average: 60%
- January – June 2021
 - Amador County CUPA: 71%
 - California average: 59%
- Review of testing results for the following facilities finds incomplete or inaccurate information:
 - CERS ID 10238758
 - Monitoring System Certification forms dated September 7, 2021, September 1, 2022, and August 24, 2023, cite “NA” for “Does the turbine automatically shut down if the piping secondary containment monitoring system detects a release? Which sensors initiate positive shut down?” with both Sump and under dispenser containment (UDC) being marked.
 - CERS ID 10238764
 - Monitoring System Certification forms dated October 26, 2022, and October 29, 2023, cite “No” for “Were all LLDs confirmed operational within regulatory requirements?” but marked that all line leak detectors (LLDs) passed.
 - CERS ID 10238797
 - Monitoring System Certification forms dated August 5, 2022, and August 8, 2023, cite “Yes” for “Does the flow or fuel stop at the dispenser if a release is detected in the under-dispenser containment?” and “Does the turbine automatically shut down if the piping secondary containment monitoring system detects a release?” with UDC being marked.
 - Monitoring System Certification forms dated August 2, 2021, August 5, 2022, and August 8, 2023, do not cite test results in section 6 for the waste oil tank annular sensor.
- Review of the following facilities finds inconsistent identification of UST construction and inspection information:
 - CERS ID 10238758
 - Monitoring System Certification forms dated September 7, 2021, September 1, 2022, and August 24, 2023, has the following discrepancies:
 - Marked “Yes” for “Does the flow of fuel stop at the dispenser if a release is detected in the under-dispenser containment?” in Section 5 while CERS notes 208 sensors.
 - Section 6 notes “No sensors” while CERS cites UDCs using 208 sensors.
 - Overfill Prevention Equipment Inspection Report dated September 7, 2021, cites the method as “Audible/Visual Alarm” while CERS states “Fill Tube Shut-off Valve.”
 - CERS ID 10238764
 - Monitoring Plan cites the UDC using 208 sensors while the Monitoring System Certification forms dated October 29, 2021, October 26, 2022, and October 19, 2023, notes in Section 5 that the flow of fuel stops at the dispenser if a release is detected in the UDC.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

- CERS ID 10238797
 - Tank ID 10238797-001 UST Tank Information page lists Vent and Vapor Secondary Containment as “Steel” while Primary Containment is blank.
 - Tank Information page cites “None” for Riser Pipe Secondary Containment and “Yes” for Containment Sump.
- CERS ID 10206799
 - Monitoring System Certification form dated April 9, 2024, notes that tank gauging is used only for inventory control in Section 8 when the facility has single-walled tanks.

Review of testing documents finds unapproved forms being used by ICC technicians for the following facilities:

- CERS ID 10206799
 - Monitoring System Certification forms dated April 8, 2022, and April 11, 2023
- CERS ID 10238977
 - Monitoring System Certification forms dated September 22, 2021, and October 28, 2022

Review of UST facility files finds the certification of the service technician was missing or expired prior to the date of testing for the following facilities:

- CERS ID 10238755
 - Monitoring System Certification forms completed July 15, 2021, July 26, 2022, and July 27, 2023, by a technician with no training or certification provided for the LLD test.
 - Overfill Prevention Equipment Inspection Report completed September 27, 2022, by a technician with an ICC certification that expired August 26, 2022, in Section 2 and missing expiration date in Section 3.
- CERS ID 10238758
 - Monitoring System Certification forms completed September 7, 2021, September 1, 2022, and August 24, 2023, by a technician with no training or certification provided for the LLD test.
 - Overfill Prevention Equipment Inspection Report completed September 7, 2021, by a technician with no training or certification provided.
 - Secondary Containment Testing Report completed September 21, 2022, by a technician with an ICC certification that expired August 26, 2022.
- CERS ID 10238977
 - Overfill Prevention Equipment Inspection Report completed December 4, 2023, with no ICC certification or expiration date provided.

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

Note: The following State Water Board documents may be referenced:

- Local Guidance Letter 164-4: Semi-Annual UST Program Report, “Reporting Technical Compliance Rate,” dated June 30, 2020
https://www.waterboards.ca.gov/ust/leak_prevention/lgs/docs/lg_164_4.pdf

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- Inspection of Abandoned USTs Guidance Letter, dated April 30, 2019:
https://www.waterboards.ca.gov/ust/docs/abandoned_storage/abust_inspection_letter_and_checklist.pdf

CITATION:

Health and Safety Code (HSC), Chapter 6.7, Sections 25288(b) and 25299
California Code of Regulations (CCR), Chapter 16, Sections 2637, 2637.1, 2637.2, 2638, 2711(d), 2713(c) and (d), 2715(f)(2)
CCR, Title 27, Section 15290(a)(3)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with an analysis and explanation as to why complete annual UST compliance inspections are not consistently conducted. The analysis and explanation will include, at minimum:

- Discussion of what procedures and tools may be needed to consistently conduct complete annual UST compliance inspections and correctly report UST CME information to CERS
 - e.g. identifying areas of the annual UST compliance inspection checklist that can be improved (refer to the California CUPA Forum Board “UST Inspection Checklist,” at <https://calcupa.org/inspection-checklist/index.html>;
- Identification of the types and frequency of training needed to consistently conduct complete UST compliance inspections, identify non-compliance, and ensure CME information is reported to CERS;
- A plan to address all reasons why complete annual UST compliance inspections are not consistently conducted.

By the 2nd Progress Report, based on the findings identified in the CUPA's analysis and explanation, the CUPA will review and revise the Inspection Plan, or other applicable procedure, to ensure, the establishment of a process for consistently conducting complete annual UST compliance inspections and correctly reporting UST CME information (including TCR criteria), to CERS. The revised Inspection Plan, or other applicable procedure will, at minimum include a process for:

- Conducting complete annual UST compliance inspections at all UST facilities, including single-walled UST facilities;
- Review of and follow-up with UST testing and leak detection documents submitted by UST owners or operators as part of the annual UST compliance inspection;
- Documenting observed non-compliance identified during annual UST compliance inspections in UST compliance inspection reports;
- Reporting all inspections, observed non-compliance identified in UST compliance inspection reports and CME information to CERS;
- Conducting annual UST compliance inspections when UST inspection staff are on-site to witness the monitoring system certification and visually inspect all UST required components;
- Conducting annual UST compliance inspections when UST inspection staff are not on-site and cannot witness the monitoring system certification and visually confirm all UST requirements are met;

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- Reviewing the annual UST compliance inspection checklist for thoroughness to capture citations in accordance with UST Regulations, HSC, and the Unified Program Violation Library in CERS;
- Accurate U.S. EPA TCR reporting, including abandoned USTs; and
- Quality assurance to ensure violation data used as part of the semi-annual report (Report 6) is accurately reported to CERS.

The CUPA will provide CalEPA with the revised Inspection Plan, or other applicable procedure. The CUPA will contact the State Water Board for any assistance needed.

By the 3rd Progress Report, if amendments to the revised Inspection Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended Inspection Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised Inspection Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at minimum, will include the date training was conducted, an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised Inspection Plan, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three UST facility records, as requested by the State Water Board, including, at minimum, annual UST compliance inspection reports and associated testing and leak detection documents.

2. DEFICIENCY:

The CUPA is not consistently ensuring UST Program related information in CERS is accurate and complete.

Review of the UST Facility/Tank Data Download report obtained from CERS on July 7, 2024, finds the UST construction and monitoring information is incorrect as follows:

- 3 of 54 (6%) CERS IDs with Continuous Electronic Tank Monitoring Where Tank Secondary Containment System is "blank" or "None"
- 2 of 31 (6%) CERS IDs with UST systems with double-wall pressurized pipe identified without either MLLD (mechanical line leak detector) or ELLD (electronic line leak detector)
- 3 of 13 (23%) VPH Systems with Secondary Containment Testing listed as "Yes"
- 10 of 32 (31%) CERS IDs with double-wall piping installed between January 2, 1984 and June 30, 2004 without continuous interstitial monitoring
- 5 of 47 (11%) Single-walled product piping, except safe suction, installed after 7/2/1987
- 4 of 22 (18%) Single-walled pressurized piping without pipeline integrity test
- 5 of 19 (26%) Single-walled steel tank with impressed current listed as "No" for corrosion protection logs

CITATION:

HSC, Chapter 6.7, Sections 25290.1

CCR, Title 23, Sections 2632(d)(1), 2634(d), 2711(d)

[State Water Board]

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review the Data Management Procedure, or other applicable procedure, and revise as necessary, to ensure the establishment of a process for UST inspection staff to review CERS UST submittal information regarding construction and monitoring requirements for accuracy and completeness before being accepted in CERS. The procedure will, at minimum include the following:

- When CERS UST submittal information is identified as correct, the submittal will be accepted.
- When CERS UST submittal information is identified as incorrect, the submittal will be:
 - accepted with minor errors using a condition set in CERS requiring the submittal to be corrected and resubmitted within a certain timeframe or;
 - not accepted with comments provided requiring resubmittal within a specified timeframe.
 - When the CERS UST submittal information is not corrected and resubmitted within the timeframe specified, enforcement will be applied per the Inspection Plan.

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

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 train UST inspection staff on the revised Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at minimum, will include the date training was conducted, an outline of the training conducted, and a list of UST inspection staff in attendance. Once training is complete, 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 train UST inspection staff on the amended Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at minimum, will include the date training was conducted, an outline of the training conducted, and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended Data Management Procedure, or other applicable procedure.

With respect to UST submittals already accepted in CERS, the CUPA will review UST related information and require accurate and complete UST Program submittals when the next submittal is made, but no later than the next annual UST compliance inspection, to ensure information is accurate and complete regarding construction and monitoring requirements before being accepted.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the State Water Board will review five UST submittals accepted by the CUPA in CERS, after UST inspection staff receive training on the revised or amended Data Management Procedure, or other applicable procedure.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

3. DEFICIENCY:

The CUPA is not consistently citing nor requiring the correction of construction violations identified in State Water Board Local Guidance (LG) Letter 150, dated February 2021, for existing UST systems.

Review of the UST Facility/Tank Data Download report obtained from CERS on July 11, 2024, finds:

- the following UST system has single-walled vent or tank riser piping, and does not meet the secondary containment exemption requirements of CCR, Chapter 16, Section 2636(a) for vent and riser pipe to have overfill prevention equipment (OPE) meeting the requirements specified in CCR, Chapter 16, Section 2635(c)(1)(B) or (C):
 - CERS ID 10238854-004
- the following UST systems, were installed between July 1, 1987, and June 30, 2003, with single-walled vent or riser/fill piping and are equipped with only OPE Performance Measure 1, Audible/Visual alarms with no Ball Float or Fill Tube Shut-off valve:
 - CERS ID 10206799-001
 - CERS ID 10206799-002
 - CERS ID 10206799-003
 - CERS ID 10206799-004
 - CERS ID 10239205-001
- the following UST systems indicate “No” for Audible/Visual Alarms, Ball Floats, Fill Tube Shut-off Valve, and Exempt: CERS ID 10238797-003
 - CERS ID 10239022-005
 - CERS ID 10747981-002

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

Note: The following may be referenced:

- State Water Board CUPA Evaluation Guidance Documents, Single-Walled Vent or Riser Piping: <https://www.waterboards.ca.gov/ust/single-walled-vent-riser.html>
- State Water Board LG 150-3, “Underground Storage Tank Overfill Prevention Equipment”: https://www.waterboards.ca.gov/water_issues/programs/ust/leak_prevention/lgs/docs/150-3.pdf.

CITATION:

CCR, Chapter 16, Sections 2631(a), 2636(a), and 2635 (c)(1)
[State Water Board]

CORRECTIVE ACTION:

The CUPA must ensure UST systems are properly constructed, meet the secondary containment requirements of CCR, Chapter 16, Section 2636(a), and meet OPE requirements specified in CCR, Chapter 16, Section 2635(c).

By the 1st Progress Report, the CUPA will identify and provide CalEPA with a list of UST facilities (including the CERS ID and CERS UST Tank ID) which are incorrectly utilizing the overfill prevention equipment (OPE) method and exemption.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

The CUPA will provide written correspondence addressed to the UST facility owners/operators to inform the UST owners/operators of the requirement for installation of the correct OPE, or to construct secondary containment for single-walled vent and tank risers. The written correspondence will include language stating that failure to comply with OPE requirements specified in CCR, Chapter 16, Section 2635(c)(1)(B) or (C), or secondary containment exemptions in CCR, Chapter 16, Section 2636(a) will lead to enforcement. The CUPA will include the State Water Board as a carbon copy recipient on the correspondence.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated list, indicating the status of each UST obtaining compliance. If appropriate steps have not been taken by the UST owners/operators to remedy the construction violations, the CUPA will apply enforcement. The CUPA will provide CalEPA with documentation of the applied enforcement.

By the 3rd Progress Report, if appropriate steps have not been taken by the UST owners/operators to remedy the construction violations, the CUPA will apply enforcement, including but not limited to revocation of the UST operating permit portion of the "Permit to Operate" (issued as the Unified Program Facility Permit) and issuance of red tags, which will prohibit the deposit and withdrawal of hazardous substances. The CUPA will provide CalEPA with documentation of the applied enforcement.

The State Water Board will consider this Deficiency corrected when the UST owners/operators install the correct OPE, or secondarily contain the vent and fill piping.

4. DEFICIENCY:

The CUPA is not consistently ensuring Hazardous Materials Business Plan (HMBP) submittals are thoroughly reviewed and contain all applicable required elements before being accepted in CERS.

Review of 15 HMBP CERS submittals provided by regulated businesses subject to Business Plan reporting requirements, finds 9 were accepted with missing or incomplete required elements.

Review of 10 HMBP CERS submittals provided by APSA tank facilities in lieu of tank facility statements, finds 6 were accepted with missing or incomplete required elements.

The following HMBP CERS submittals were accepted with missing or incomplete required elements:

- CERS ID 10404190
 - Emergency Response and Training Plans submitted on October 18, 2023, and accepted on October 24, 2023
 - Emergency Response Plan is missing the earthquake vulnerability
 - Inventory submitted on October 18, 2023, and accepted on October 24, 2023
 - Site map is missing evacuation staging area and emergency response equipment

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- CERS ID 10650178
 - Emergency Response and Training Plans submitted and accepted on March 25, 2024
 - Emergency Response Plan is missing earthquake vulnerability and hazard mitigation, prevention, and abatement
 - Employee Training Plan is missing
 - Inventory submitted and accepted on March 25, 2024
 - Site map is missing north orientation, access and exit points, emergency shutoff, emergency response equipment, and evacuation staging area
 - Site map reflects an 8,000-gallon refueling truck, while the inventory reflects a 2,000-gallon refueling truck
- CERS ID 10238794
 - Inventory submitted on January 30, 2024, and accepted on January 31, 2024
 - Site map missing north orientation, emergency shutoff, and emergency response equipment
- CERS ID 10238707
 - Emergency Response and Training Plans submitted on July 21, 2021, and accepted on July 22, 2021
 - Missing Emergency Response and Training Plans
 - Inventory submitted on July 21, 2021, and accepted on July 22, 2021
 - Site map missing emergency shutoff and internal road(s)
- CERS ID 10238713
 - Inventory submitted on August 6, 2020, and accepted on December 8, 2020
 - Site map missing adjacent streets, emergency shutoffs, evacuation staging areas, emergency response equipment
- CERS ID 10238878
 - Emergency Response and Training Plans submitted and accepted on January 10, 2022
 - Emergency Response Plan is missing earthquake vulnerability
 - Inventory submitted and accepted on January 10, 2022
 - Site map missing evacuation staging area, access and exit points
- CERS ID 10239043
 - Inventory submitted and accepted on January 13, 2023
 - Site map missing adjacent streets, access and exit points, and emergency response equipment.
- CERS ID 10239139
 - Inventory submitted on November 8, 2022, and accepted on November 22, 2022
 - Site map missing evacuation staging areas and emergency response equipment.
- CERS ID 10239346
 - Emergency Response and Training Plans submitted, accepted, and certified on February 8, 2024
 - Emergency Response Plan missing immediate notification contacts to the appropriate local emergency response personnel and to the unified program agency.
 - Employee Training Plan missing procedures in the event of a release or threatened release of a hazardous material, including, but not limited to, familiarity with the plans and procedures.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- Inventory submitted, accepted, and certified on February 8, 2024
 - Site map missing evacuation staging areas and emergency response equipment
- CERS ID 10238905
 - Inventory submitted, accepted, and certified on January 9, 2023
 - Site map missing adjacent streets.
- CERS ID 10239148
 - Emergency Response and Training Plans submitted and accepted on February 5, 2024
 - Employee Training Plan missing procedures in the event of a release or threatened release of a hazardous material, including, but not limited to, familiarity with the plans and procedures.
 - Inventory submitted and accepted on February 5, 2024
 - Site map missing emergency response equipment
- CERS ID 10734448
 - Inventory submitted on February 28, 2024, and accepted on March 4, 2024
 - Site map missing evacuation staging areas.

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

CITATION:

HSC, Chapter 6.95, Sections 25505(a), and 25508(a)(3) and (4)

HSC, Chapter 6.67, Section 25270.6(a)(2)

California Fire Code (CFC), Chapter 50, Sections 5001.5.1 and 5001.5.2, and Appendix H [CalEPA, OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each future HMBP submittal is thoroughly reviewed and contains all applicable required elements before being accepted in CERS. The action plan will include:

- Steps to follow up with regulated businesses having an HMBP submittal that was reviewed and not accepted due to identified missing or incomplete elements; and
- Steps to follow up with APSA tank facilities having an HMBP submittal that was reviewed and not accepted due to identified missing or incomplete elements, when an HMBP was provided in lieu of a tank facility statement.

The CUPA will train personnel on the steps in the action plan and the Business Plan components as described in HSC Section 25505. The CUPA will provide training documentation to CalEPA, which at minimum will include the date training was conducted, and a list of CUPA personnel in attendance.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide a narrative update on the implementation of the action plan.

By the 4th Progress Report, the CUPA will ensure:

- each regulated business subject to Business Plan reporting requirements has annually submitted a complete HMBP to CERS, or the CUPA will have applied enforcement, and

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- each APSA tank facility has annually submitted a complete HMBP to CERS, when an HMBP is provided in lieu of a tank facility statement, or the CUPA will have applied enforcement.

5. DEFICIENCY:

The CUPA is not consistently conducting complete HMBP Program inspections.

Review of facility file information and CERS CME information obtained from CERS on June 13, 2024, between April 1, 2021, and March 31, 2024, and observations made during the oversight inspection conducted on October 7, 2024, finds:

- 253 of 256 (99%) of routine inspections had no violations;
- Violations are not consistently identified and cited during HMBP inspections; and
- Non-compliance was observed and no violation were cited on inspection reports nor reported to CERS for the following facilities:
 - CERS ID 10239022
 - Inspection report dated May 17, 2023, states: "On site today for routine Hazardous Materials Business Plan and Hazardous Waste Inspections. CERS submittal is due. Submit HMBP & HW portions in CERS. <https://cers.calepa.ca.gov>. Add CO2 training for safe handling and emergency response."
 - CERS ID 10238833
 - Inspection report dated November 4, 2022, states: "Not associated with an inspection. Facility has failed to report electronically."
 - Inspection report dated June 10, 2021.
 - Facility last submitted a chemical inventory (including site map) on February 14, 2019, and emergency response and employee training plans on January 25, 2019.
 - CERS ID 10238704
 - Inspection report dated July 19, 2022
 - Facility last submitted a chemical inventory (including site map) on April 20, 2018, and emergency response and employee training plans on April 19, 2018.
 - CERS ID 10238878
 - Inspection report dated March 24, 2021
 - Facility last submitted a chemical inventory (including site map) and emergency response and employee training plans on April 12, 2019.
 - CERS ID 10239031
 - Inspection report dated June 16, 2021
 - Facility last submitted a chemical inventory (including site map) on September 30, 2019, and emergency response and employee training plans on September 27, 2019.
 - CERS ID 10239043
 - Inspection report dated February 7, 2022
 - Facility last submitted a chemical inventory (including site map) and emergency response and employee training plans on June 11, 2018.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- CERS ID 10239139
 - Inspection report dated November 17, 2021
 - Facility last submitted a chemical inventory (including site map) and emergency response and employee training plans on March 17, 2020.
- CERS ID 10239346
 - Inspection report dated February 25, 2020
 - Facility last submitted a chemical inventory (including site map) and emergency response and employee training plans on April 12, 2019.
 - Comments state: “We would ask that you update your site map for this facility and follow the Inventory Section Site Map Business Plan Guidelines and requirements sent to you on April 12, 2019. Thank you. If you have any questions at all please do not hesitate to contact this office.”

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

CITATION:

HSC, Chapter 6.5, Section 15185
CCR, Title 27, Section 15290(a)(3)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with an analysis and explanation as to why complete HMBP inspections are not consistently conducted. The analysis and explanation will include, at minimum;

- discussion of what procedures and tools may be needed to consistently conduct complete HMBP inspections and correctly report HMBP CME information to CERS;
- identification of the types and frequency of training needed to consistently conduct HMBP compliance inspections, identify non-compliance, and ensure CME information is reported to CERS;
- a plan to address each identified aspect as to why complete HMBP inspections are not consistently conducted.

By the 2nd Progress Report, based on the findings identified in the CUPA’s analysis and explanation, the CUPA will review and revise the Inspection Plan, or other applicable procedure, to ensure, at minimum, the establishment of a process for consistently conducting complete HMBP inspections and correctly reporting CME information, to CERS. The revised Inspection Plan, or other applicable procedure will, at minimum include a process for:

- conducting complete HMBP inspections at facilities subject to HMBP Program requirements;
- documenting observed non-compliance identified during HMBP inspections in HMBP inspection reports;
- reporting all inspections and observed non-compliance identified in HMBP inspection reports and any associated CME information to CERS;

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- reviewing the HMBP inspection checklist for thoroughness to capture citations in accordance with HMBP Program requirements of CCR, HSC, and the Unified Program Violation Library in CERS;

The CUPA will provide CalEPA with the revised Inspection Plan, or other applicable procedure. The CUPA will contact the CalEPA for any assistance needed.

By the 3rd Progress Report, if amendments to the revised Inspection Plan, or other applicable procedure, are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the amended Inspection Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train inspection staff on the revised Inspection Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at minimum, will include the date training was conducted, an outline of the training conducted and a list of inspection staff in attendance. Once training is complete, the CUPA will implement the revised Inspection Plan, or other applicable procedure.

By the 4th Progress Report, if amendments to the revised Inspection Plan, or other applicable procedure were necessary, the CUPA will train inspection staff on the amended Inspection Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which at minimum, will include the date training was conducted, an outline of the training conducted and a list of inspection staff in attendance. Once training is complete, the CUPA will implement the amended Inspection Plan, or other applicable procedure.

By the 5th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with HMBP facility records, for three HMBP facilities, as requested by CalEPA.

6. DEFICIENCY:

The CUPA is not ensuring all businesses subject to Business Plan reporting requirements annually submit an HMBP or a no-change certification to CERS.

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

On June 13, 2024, review of HMBPs submitted to CERS between April 14, 2023, and June 13, 2024, by businesses subject to Business Plan reporting requirements finds:

- 66 of 260 (25%) Business Plan facilities have not annually submitted a chemical inventory (including site map) or a no-change certification.
- 70 of 260 (27%) Business Plan facilities have not annually submitted emergency response and employee training plans or a no-change certification.

On July 16, 2024, review of HMBPs submitted to CERS between March 8, 2023, and April 8, 2024, by APSA tank facilities in lieu of tank facility statements finds:

- 11 of 47 (23%) APSA tank facilities have not submitted a chemical inventory and site map
- 12 of 47 (26%) APSA tank facilities have not submitted emergency response and employee training plans

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

CITATION:

HSC, Chapter 6.67, Section 25270.6(a)
HSC, Chapter 6.95, Sections 25505(a), 25508(a), and 25508.2
[CalEPA, OSFM]

CORRECTIVE ACTION:

During the evaluation, additional APSA tank facilities submitted an HMBP to CERS in lieu of a tank facility statement. On January 23, 2025, review of HMBPs submitted to CERS by APSA tank facilities, in lieu of tank facility statements reflects:

- 9 of 47 (19%) APSA tank facilities have not submitted a chemical inventory and site map
- 9 of 47 (19%) APSA tank facilities have not submitted emergency response and training plans

This deficiency is considered corrected with respect to the APSA Program.

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure all businesses subject to Business Plan reporting requirements annually submit an HMBP or a no-change certification to CERS. The action plan, at minimum, will include how the CUPA will follow up with facilities that have not annually submitted an HMBP or a no change certification to CERS.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a narrative update on the follow-up actions, including any applied enforcement, to ensure an HMBP or no-change certification is annually submitted to CERS.

By the 4th Progress Report, the CUPA will ensure each business subject to Business Plan reporting requirements has annually submitted an HMBP or a no change certification to CERS, or the CUPA will have applied enforcement.

7. DEFICIENCY:

The 2022 area plan is missing required elements.

Review of the 2022 area plan finds the following required elements are missing:

- Notification and Coordination
 - Procedures, developed in consultation with the Local Health Officer, to ensure access to health care within 24 hours of an exposure resulting from a pesticide drift exposure incident and up to a week after the incident, as required by [CCR, Title 19, Section 5020.4\(e\)](#).
- Training
 - Provisions for training of emergency response personnel in the following area, as required by [CCR, Title 19, Section 5020.5\(a\)](#):
 - Identification of medical facilities capable of providing treatment appropriate for hazardous material incidents, to include pesticide drift exposure incidents;
 - Provisions for documenting personnel training described in CCR, Title 19, Section 5020.5(a), as required by [CCR, Title 19, Section 5020.5\(b\)\(1\)](#).

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

- Provisions for joint field or table-top exercises, with affected organizations, with voluntary participation of business representatives, as required by [CCR, Title 19, Section 5020.5\(b\)\(2\)](#).
- Public Safety and Information
 - Procedures to identify all languages known to be spoken in the administering agency's county or city, as the case may be, and ensure that any individual is able to access services in their native language, as required by [CCR, Title 19, Section 5020.6\(d\)](#). The area plan will outline what these services are and how they will be provided in the languages identified.
 - Provisions for evacuation plans. Evacuation planning shall provide for the following elements, as required by [CCR, Title 19, Section 5020.6\(g\)](#):
 - Facility characteristics, topography, meteorology, and demography of potentially affected areas;
 - Ingress and egress routes and alternatives

Note: The CUPA's area plan was last updated in March of 2022. The next triennial revision should be completed by March of 2027.

CITATION:

HSC, Chapter 6.95, Section 25503(c)
CCR, Title 19, Division 5, Article 2, Sections 5020.1-5020.8
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the revised area plan that includes all required elements.

8. DEFICIENCY:

Required components of the Inspection Plan and the Enforcement Plan are missing, incomplete or inaccurate.

The CUPA did not conduct an annual review of the Inspection Plan, nor the Enforcement Plan.

- The Inspection Plan was reviewed and updated in July 2021.
- The Enforcement Plan was reviewed and updated in March 2022.

Review of the Inspection Plan finds the following components are incomplete:

- Section VIII: Sampling Capability and Analysis
 - Provisions for ensuring the CUPA has 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.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

Review of the Inspection Plan finds the following components are inaccurate:

- Section III: Frequency of Inspections
 - HMBP Program references HSC, Section 25511(c).
 - The correct citation is HSC, Section 25511(b).
 - California Accidental Release Prevention (CalARP) Program references CCR, Title 19, Section 2775.3 for audit of Risk Management Plan (RMP).
 - The correct citation is CCR, Title 19, Section 5140.2.
 - CalARP Program does not include a reference to an inspection frequency.
 - The correct reference citations for CalARP Program inspection frequency are HSC, Chapter 6.95, Section 25537 and CCR, Title 19, Section 5140.4.
 - Information on Silver Only Conditionally Exempt Small Quantity Generators (CESQGs) is outdated.
 - All hazardous waste generators are required to have an inspection frequency. For the most up to date requirements, refer to the DTSC letter dated October 11, 2021, and addressed to all CUPAs, "Clarification of Conditionally Exempt Small Quantity Generators Inspection Frequency, Status of Silver Only Generators, and Universal Waste Handlers."
 - All references to CESQGs should be replaced with reference to Very Small Quantity Generators (VSQGs). An inspection frequency will need to be established for VSQGs.
 - The inspection frequency for Tiered Permitting (TP) facilities is incorrect.
 - The correct inspection frequency is "within two years of initial notification and every three years thereafter".
 - Information on Conditionally Exempt Small Quantity Universal Waste Generators and Small Quantity Universal Waste Generators (CESQUWG/SQUWG) is inaccurate.
 - California has not adopted the Federal definitions for CESQUWG and SQUWG. The references to CESQUWG/SQUWG should be removed.
- Section VI: CESQGs
 - All references to CESQGs should be replaced with reference to Very Small Quantity Generators (VSQGs). An inspection frequency will need to be established for VSQGs. An inspection frequency will need to be established for VSQGs.

Review of the Enforcement Plan finds the following components are inaccurate:

- Section II: Statutory Authority
 - Section II states, "Underground Storage Tank Program: H&SC §25280 et seq. Not including violations of corrective action requirements established by or issued pursuant to §25296.10."
 - The correct citation is HSC, Sections 25280 through 25296 and 25298 through 25299.6.
- Section V: Definitions, H. Violations (Hazardous Waste, Aboveground Petroleum Storage, Business Plan, and Accidental Release Programs)
 - The Class I Violation (significant deviation) definition is incomplete and has no citation referenced. The definition must be updated to include the complete

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

definition and, for hazardous waste violations, should reference HSC, Section 25110.8.5.

- Section V: Definitions, J. Violations- Underground Storage Tank Program
 - The Significant Violation (Class I Violation) and Chronic Violation (Class II Violation) definitions reference HSC as “Chapter 6.7, not including the corrective action requirements in §25296.10...”
 - The reference to Section 25296.10 in each definition should be replaced with Sections 25280 through 25296 and 25298 through 25299.6.
- Section XV: Administrative Penalties, Section C: Initial Penalties (Amounts)
 - USTs
 - Section ii states, “For violations of H&SC §25299 (c), the respondent is liable for no more than \$5,000 per day, per violation, per Underground Storage Tank.”
 - The correct penalty amount per HSC, Section 25299(c) is “not more than five thousand dollars (\$5,000) for each underground storage tank.”
 - Failure to Report Unauthorized Spill or Release of Hazardous Material or Waste
 - The Initial Penalty Matrix references HSC, Sections 25514.5 and 25514.5(a).
 - The correct citation is HSC, Section 25515.3.
 - Penalties identify an amount not to exceed \$2,000 per day for each violation, or greater than \$5,000 for each day in which the violation occurs for any business that knowingly violates after reasonable notice of the violation.
 - The penalties must reflect the amounts as applicable for when a violation occurs per HSC, Section 25515.3:
 - Not more than twenty-five thousand dollars (\$25,000) for each day of violation. Not less than two thousand dollars (\$2,000) or more than fifty thousand dollars (\$50,000) per day of violation, if the conviction is for a violation committed after a first conviction.
 - Not more than fifty thousand dollars (\$50,000) for knowingly failing to report an oil spill occurring in waters of the state, other than marine waters.
 - CalARP Program
 - Reference to HSC, Section 25540(a) identifies a penalty amount of not less than \$2,000 per day in which the violation occurs.
 - The penalty amount must reflect the amount as applicable for when the violation occurs per HSC, Section 25540(a)(1) and (2):
 - For a violation that occurs on or before December 31, 2018, not more than two thousand dollars (\$2,000) for each day in which the violation occurs.
 - For a violation that occurs on or after January 1, 2019, not more than five thousand dollars (\$5,000) for each day in which the violation occurs.
- Section X: Revocation, Modification, or Suspension of Permit
 - The words “suspend,” “suspended,” and “suspension” are used.
 - The UST Operating permit cannot be suspended.
 - Section X states, “Any permit issued by the Amador County CUPA pursuant to California Health and Safety Code (H&SC), Chapter 6.11, §25404.1.1 may be

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

revoked, modified or suspended during its term for obtaining the permit by misrepresentation or intentional failure to fully disclose all relevant facts, a change in condition that requires modification or termination of the operation in question, or violation of any permit condition.”

- The UST Operating permit can only be withheld if the facility has a red tag affixed to a tank or is subject to enforcement action.
- Section XII: UST Red Tag Procedures
 - HSC, Section 2715.3 is referenced.
 - HSC, Section 2715.3 is unrelated to USTs.
 - Section XII states, “In accordance with H&SC § 25292.3, no owner or operator of an underground storage tank system may deposit or allow for the deposit of any petroleum product into a tank, which has a red tag affixed to the fill pipe.”
 - The following statements from HSC, Section 25292.3 must also be included:
 - “A person shall not deliver a hazardous substance into an underground storage tank system that has a red tag affixed to its fill pipe” and
 - “A person shall not input into or withdraw from an underground storage tank system that has a red tag affixed to its fill pipe, except to empty the underground storage tank pursuant to a directive issued”

CITATION:

HSC Chapter 6.7 Sections 25280 through 25296 and 25298 through 25299.6
CCR, Title 27, Section 15200(a)
CCR, Chapter 16, Sections 2610 through 2717.7
[CalEPA, DTSC, State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the revised Inspection Plan and Enforcement Plan components of the Inspection and Enforcement Plan that adequately incorporate and correctly address all required components.

By the 2nd Progress Report, if amendments to the revised Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan are necessary based on feedback from CalEPA, DTSC, and/or the State Water Board, the CUPA will provide CalEPA with the amended Inspection Plan and Enforcement Plan components of the Inspection and Enforcement Plan. If no amendments are necessary, the CUPA will train CUPA personnel on the revised Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan and provide CalEPA with training documentation that includes, at minimum, a description of the training, the date training was conducted, and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan.

By the 3rd Progress Report, if amendments to the revised Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan were necessary, the CUPA will train CUPA personnel on the revised Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan and provide CalEPA with training documentation that includes, at minimum, a description of the training, the date training was conducted, and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the amended Inspection Plan and/or Enforcement Plan components of the Inspection and Enforcement Plan.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

9. DEFICIENCY:

The CUPA is not consistently classifying Hazardous Waste Generator (HWG) Program violations properly.

Review of facility files and CME information obtained from CERS on May 24, 2024, between January 1, 2021, and December 31, 2023, finds the following non-minor violation was classified as a minor violation:

- Violation for exceedance of authorized accumulation time, per CCR, Title 22, Sections 66262.16(b) or 66262.17(a), 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 hazardous waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Sections 25117.6 and 25404(a).
 - 10 of 11 (91%) violations cited were classified as Minor.

Note: Implementation of the Generator Improvements Rule (GIR) on July 1, 2024, changed the citations for exceedance of authorized accumulation time from Section 66262.34(d) to Section 66262.16(b) [Small Quantity Generators], and from Section 66262.34(a) to Section 66262.17(a) [Large Quantity Generators]. The examples provided above may not represent all instances of this Deficiency. This Deficiency was previously identified in the 2020 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6

HSC, Chapter 6.11, Section 25404(a)(3)

CCR, Title 22, Sections 66262.16(b) and 66262.17(a)

[DTSC]

CORRECTIVE ACTION:

The CUPA will ensure violations are correctly classified and appropriate enforcement actions are pursued for non-minor (Class I and Class II) violations. Future citations of Unified Program Violation Library Violation Type Numbers 3030010 and 3030012 should not be classified as minor, unless there is sufficient evidence that an economic benefit is not gained.

By the 1st 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 Class I and Class II violations as defined in HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6, and CCR, Title 22, Section 66260.10.

The CUPA will train inspection staff on how to properly classify HWG Program violations as minor, Class I and Class II. Training should include, at minimum, review of the following:

- 2020 Violation Classification Guidance for Unified Program Agencies
<https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Documents-accessible.pdf>.
 - This document provides examples of what are considered minor versus non-minor violations.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

The CUPA will provide training documentation to CalEPA, which at minimum will include, the date training was conducted, an outline of the training conducted and the personnel in attendance.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least one HWG Program violation, for three HWG Program facilities, as requested by DTSC, that have been inspected after training has been completed. Each inspection report will contain observations, factual basis, citations, and corrective actions to correctly identify and classify each observed HWG Program violation.

10. DEFICIENCY:

The CUPA is not consistently conducting complete HWG compliance inspections.

The CUPA is not correctly citing nor documenting non-compliance and is not citing HWG Program violations identified during routine HWG compliance inspections, and in inspection reports.

Review of HWG compliance inspection reports, the Hazardous Waste Tracking System (HWTS) and CERS CME information between January 1, 2021, and December 31, 2023, and observations made during oversight inspections conducted on September 17, 2024, finds:

- 124 of 138 (90%) routine inspections had no violations cited
- Violations are not consistently identified and cited during HWG inspections
 - During the September 17, 2024, oversight inspection at CERS ID 10990721, the CUPA failed to identify and cite three violations
- Violations are not consistently cited when a facility's Hazardous Waste ID number or EPA ID number has become inactive. A violation should have been cited for an inactive ID number during each inspection at the following facilities:
 - CERS ID 10238728: ID number has been inactive since June 30, 2016.
 - Inspections dated September 7, 2018, and June 10, 2021, cite no violation for an inactive ID number.
 - CERS ID 10239223: ID number has been inactive since June 30, 2015.
 - Inspections dated December 3, 2015, November 15, 2018, and June 16, 2021, cite no violation for an inactive ID number.
- Inspection reports to not consistently identify violations
- A written summary of violations is not consistently provided to the facility operator upon conclusion of the inspection

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

CITATION:

HSC, Chapter 6.11, Section 25185(c)

CCR, Title 22, Sections 66262.13, 66262.16, 66262.17, 66262.18, and 66262.40

CCR, Title 27, Section 15100(b)(3)

[DTSC]

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will train inspection staff on how to properly conduct an HWG compliance inspection and associated HWG requirements. Training will include, at minimum, review of:

- CCR, Title 22, Sections 66252.15, 66260.10, 66262.13, 66262.16, 66262.17, 66262.32, 66265.192, and 66266.130
- Generator Requirements Fact Sheet:
<https://dtsc.ca.gov/hazardous-waste-generator-requirements-fact-sheet/>
- Managing Used Oil Filters For Generators:
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/RAG_Used-Oil-Filters_Generators1.pdf
- Hazardous Waste Generator Requirements:
<https://dtsc.ca.gov/accumulating-hazardous-wastes-at-generator-sites/>
- Accumulating Hazardous Wastes at Generator Sites:
<https://dtsc.ca.gov/hazardous-waste-accumulation-time-for-generators/>

The CUPA will provide training documentation to CalEPA, which at minimum will include, the date training was conducted, an outline of the training conducted and the inspection staff in attendance.

By the 2nd Progress Report, the CUPA will coordinate with DTSC (Brennan.Ko-Madden@dtsc.ca.gov) to schedule and conduct HWG Program oversight inspections within the jurisdiction of the CUPA. For each oversight inspection conducted, the CUPA will cite violations and apply any appropriate enforcement, when applicable.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least one HWG violation, for three HWG facilities, as requested by DTSC, that have been inspected after training has been completed and within the last three months. Each inspection report will contain observations, factual basis, citations, and corrective actions to correctly identify and classify each observed HWG violation.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

INCIDENTAL FINDINGS REQUIRING RESOLUTION

An incidental finding is considered a minor deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a minor issue that may be problematic in implementation of one or more program elements, an incidental finding is not likely to have an impact on the safety and protection of human health and the environment.

1. INCIDENTAL FINDING:

The CUPA is not consistently implementing UST closure requirements.

The CUPA is not documenting in sufficient detail whether the UST owner or operator has demonstrated to the satisfaction of the CUPA that UST permanent closure complies with CCR, Title 23, Division 3, Chapter 16 (CCR, Chapter 16) and HSC, Division 20, Chapter 6.7.

Review of UST facility files finds the CUPA did not provide the UST Permanent Closure Notification to the owner or operator upon completion of UST closure activities for the following:

- CERS ID 10863754
 - Tank ID 10863754-001 was removed on July 23, 2024
 - No documentation of proper disposal for residual liquid, solids, or sludges, removed.
 - No documentation of proper disposal of the removed USTs
 - No UST Closure Notification letter
- CERS ID 10238734
 - Tank IDs 10238734-001, 10238734-002, and 10238734-003 were removed on April 24, 2023, however the UST Reporting element for each Tank ID reflects “Applicable”.
 - Note: The new tank installation information has been incorrectly reported under the old UST Tank IDs. The “CERS Knowledge Base Help” regarding the UST CERS Unique Tank ID Number may be referenced: <https://cers.calepa.ca.gov/wp-content/uploads/sites/11/2019/04/CERS-3-Underground-Storage-Tanks-UST-CERS-Tank-ID-Number.pdf>
- CERS ID 10239031
 - Tank IDs 10239031-004 and 10239031-005 are listed as 'cleaned and empty' since the CERS submittal dated August 29, 2013.
 - The USTs have not been closed in accordance with regulations.
 - The tanks are currently not being tested or monitored in accordance with UST regulations and the Health and Safety Code.
 - The CUPA has not issued violations or pursued enforcement actions.

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

CITATION:

HSC Chapter 6.7, Section 25298(c)
CCR, Chapter 16, Sections 2670 and 2672(d)
[State Water Board]

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

RESOLUTION:

During the evaluation, the CUPA ensured information reported to CERS for Tank IDs 10238734-001, 10238734-002, and 10238734-003 reflects accurate tank and closure information.

By the 1st Progress Report, the CUPA will review and revise the UST closure procedure or other applicable procedure, to ensure the establishment of a process, which will include at minimum, how the CUPA will:

- Require documentation from the UST owner/operator that all residual liquid, solids, or sludges removed were handled as hazardous waste or recyclable materials in accordance with HSC, Chapter 6.5
- Ensure CERS submittals are reviewed for accuracy before accepting closure information.

Additionally, the CUPA will begin to utilize the UST closure letter template provided by the State Water Board, or develop a UST closure notification template for sites with and without contamination, if separate notifications are issued for those scenarios to include the following:

- Site Address,
- CERS tank ID(s),
- Date(s) of removal or permanent closure, and
- Confirmation that UST(s) have permanently closed in accordance with CCR, Chapter 16 and HSC. The following language is an example: "The Amador County CUPA has reviewed the UST closure documentation and finds the UST closure as properly completed in accordance with CCR, Chapter 16, and HSC, Chapter 6.7, Section 25298(c)."

The CUPA will provide the revised UST closure procedure, or other applicable procedure and the developed UST closure notification template to CalEPA.

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide the closure permit for Tank IDs 10239031-004 and 10239031-005, or enforcement documentation, which will include issuing violations for non-compliance with UST testing and monitoring requirements.

By the 2nd Progress report, if amendments to the revised UST closure procedure or other applicable procedure and/or revisions to the UST closure notification template are necessary, based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended UST closure procedure or other applicable procedure and/or the revised UST closure notification template. If no amendments or revisions are necessary, the CUPA will train UST inspection staff on the revised UST closure procedure or other applicable procedure and/or the developed UST closure notification template. Once training is complete, the CUPA will implement the revised UST closure procedure or other applicable procedure.

By the 3rd Progress Report, or until considered corrected, for the next UST closure, the CUPA will provide CalEPA with the UST closure documentation, including sampling results, that demonstrate to the satisfaction of the CUPA that UST permanent closure and soil and/or groundwater sampling complies with CCR, Chapter 16 and HSC. If no UST closures have occurred by the 4th Progress Report, the State Water Board will consider this Incidental Finding closed but not resolved upon completion of training, and implementation of the revised/amended UST closure procedure and developed/revised UST closure notification template(s) determined acceptable by the State Water

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

Board. The State Water Board will verify proper sampling and analysis of soil and/or groundwater occurred during or immediately after UST closure activities with the next CUPA Performance Evaluation.

Opportunities to conduct UST closure activities are limited within the CUPA's jurisdiction, therefore, this deficiency may unnecessarily remain open while waiting for USTs to undergo closure. The State Water Board will consider this deficiency corrected upon completion of the developed or revised UST closure procedure or other applicable procedure and/or the developed or revised UST closure letter template(s). The State Water Board will verify the CUPA is utilizing the developed or revised UST closure procedure and issuing the developed or revised UST closure letter template(s) during the next CUPA Performance Evaluation.

With respect to facilities which have not been provided adequate UST closure documentation, the CUPA will use the UST closure Notification template(s) determined acceptable by the State Water Board and will provide the updated closure documentation upon request.

2. INCIDENTAL FINDING:

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

Review of CME information obtained from CERS on July 25, 2024, between January 1, 2021, and December 31, 2023, finds there is no documented RTC for the following HWG Program violations classified as minor:

- 5 of 21 (24%), open (no RTC) since June 2021
 - 4 of 16 (25%) minor violations did not obtain RTC within 30 days.
- Note: 2 of 2 (100%) HWG Program violations classified as non-minor obtained RTC.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6, 25187.8(b) and (g) and 25508(a)(4)
HSC, Chapter 6.11, Section 25404.1.2(c)
[DTSC]

RESOLUTION:

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the CUPA's data management system or CERS that includes at minimum the following information for each HWG Program facility with an open HWG violation (no RTC) cited between January 1, 2021, and December 31, 2023:

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date;
- Actual RTC date (when applicable);
- RTC qualifier, and
- In the absence of obtained RTC, the spreadsheet should include a narrative of any applied enforcement or follow-up activity to ensure the facility obtains RTC.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three HWG Program facility records, as requested by DTSC, that include RTC documentation, or a narrative of the follow-up activity and any enforcement applied in the absence of RTC.

3. INCIDENTAL FINDING:

The CUPA is not inspecting each HWG facility once every three years.

Review of facility files on July 12, 2024, information provided by the CUPA, and CME information obtained from CERS on July 11, 2024, between January 1, 2021, and December 31, 2023, finds:

- 17 of 136 (13%) HWG facilities were not inspected once every three years.
 - The following HWG facilities have never been inspected:
 - CERS ID 10239217
 - CERS ID 10239226
 - CERS ID 10617556
 - CERS ID 10866355
 - CERS ID 10901386
 - CERS ID 10902979
 - CERS ID 10890721
 - CERS ID 10918669

CITATION:

HSC, Chapter 6.5, Section 25201.4(b)(2)
CCR, Title 27, Section 15200(a)(2)(A)
[DTSC]

RESOLUTION:

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

- An analysis and explanation as to why the inspection frequency is not being met. Factors to consider include existing inspection staff resources and the number of facilities scheduled to be inspected each year, response to declared emergencies such as wildfire response and recovery efforts and impacts of the Coronavirus (COVID-19).
- A sortable spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG facility that has not been inspected once every three years, including each HWG facility that has never been inspected. For each HWG facility listed, the sortable spreadsheet will include at minimum:
 - Facility name;
 - CERS ID;
 - Date of the last routine inspection; and
 - A schedule to inspect each facility subject to HWG requirements that has not been inspected within the last three years, prioritizing the most delinquent inspections to be completed prior to any other HWG facility inspection based on risk. For each facility, the schedule to inspect should reflect an estimated date or date range.
- Future steps to ensure each HWG facility will be inspected at least once every three years.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated sortable spreadsheet and a narrative as to how the CUPA is continuing to ensure HWG facility will be inspected at least once every three years.

By the 5th Progress Report, the CUPA will have inspected each HWG facility identified in the sortable spreadsheet provided with the 1st Progress Report.

4. INCIDENTAL FINDING:

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

Review of CME information obtained from CERS on June 13, 2024, between April 1, 2021, and March 31, 2024, finds:

- 44 of 260 (17%) facilities subject to HMBP requirements were not inspected within the last three years.

CITATION:

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

RESOLUTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each facility subject to HMBP requirements is inspected at least once every three years. The action plan will include, at minimum:

- A schedule to inspect each facility subject to HMBP requirements that has not been inspected within the last three years, prioritizing the most delinquent inspections to be completed prior to any other HMBP facility inspection based on risk. For each facility, the schedule to inspect should reflect an estimated date or date range.
 - The inspection schedule can be incorporated into the spreadsheet provided by CalEPA upon conclusion of the evaluation.
- Future steps to ensure all facilities subject to HMBP requirements will be 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 an updated sortable spreadsheet and a narrative update as to how the CUPA is continuing to ensure all facilities subject to HMBP requirements will be inspected at least once every three years.

By the 5th Progress Report, the CUPA will have inspected each facility subject to HMBP requirements identified in the sortable spreadsheet provided with the 1st Progress Report.

5. INCIDENTAL FINDING:

The Amador County local ordinance for Hazardous Materials (Chapter 7.25) is inconsistent with HMBP regulatory requirements and HSC.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

Review of the local ordinance finds the following inconsistencies:

- Chapter 7.25.010 Short title—Definitions:
 - The "Facility" definition references HSC, Section 25501(x) and HSC, Section 25404(c)
 - The correct citations are HSC, Section 25501(v) and HSC, Section 25404(a)(5), respectively.
 - The "Hazardous substance" definition references HSC, Section 25501(p)
 - The correct citation is HSC, Section 25505(n)
 - The "Hazardous waste" definition incorrectly references HSC, Section 25505(q) and is also not defined in HSC, Chapter 6.95, Article 1, Section 25500 et seq.
- Chapter 7.25.050 Operations permit required:
 - The threshold levels reference HSC, Section 25503.5, which no longer exists.
 - The correct citation is HSC, Section 25507
- Chapter 7.25.180 Exemptions:
 - Reference is made to Section 25503.5 (c)(2), (3), and (4), which no longer exist.
 - The correct citations are HSC, Section 25507(c), (d), and (e), respectively.

CITATION:

HSC, Sections 25404.2(a)(2), and 25507(a) and (b)(5)
[CalEPA]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a plan to revise and adopt the revised local ordinance or repeal the existing local ordinance. The revised local ordinance will be consistent with HMBP regulatory requirements and HSC. The plan will at minimum include:

- A timeline for revising and adopting the revised local ordinance, including:
 - providing the revised local ordinance draft to CalEPA for review (before being adopted), to allow CalEPA to work with the CUPA to ensure the revised local ordinance draft is consistent with HMBP regulatory requirements and HSC, the CUPA certification approval, and meets all other requirements.
 - finalizing the revisions of the local ordinance
 - presenting the revised local ordinance to the Board of Supervisors for review, approval, and adoption;

OR

- A timeline for repealing the existing local ordinance.

By the 2nd Progress Report, the CUPA will, if necessary, revise the plan, based on feedback from CalEPA, or provide the revised local ordinance draft to CalEPA for review (before being adopted).

Considering the length of time required to revise and adopt the revised local ordinance, or repeal the existing local ordinance, CalEPA will consider this Incidental Finding closed, but not resolved, after the CUPA has provided an acceptable plan for the revision and adoption of the revised local ordinance and an opportunity for CalEPA to review a draft of the revised local ordinance, or after the CUPA has provided an acceptable plan for repealing the existing local ordinance as outlined above.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

During the next CUPA Performance Evaluation, CalEPA will verify that the revised local ordinance was adopted or that the existing local ordinance was repealed.

6. INCIDENTAL FINDING:

The CUPA has not established all Unified Program administrative procedures.

The established Unified Program administrative procedures have components that are incomplete.

The following administrative procedure has not been established:

- Forwarding Hazardous Material Release Response Plan (HMRRP) Information
 - Though first responders have been instructed to set up user accounts in CERS, the CUPA has not established procedures for forwarding HMRRP information to emergency response personnel and other appropriate government entities in accordance with HSC, Section 25504(c).

The following administrative procedure has components that are incomplete:

- Public Participation
 - Public hearings and notices
 - The Public Participation Policy does not include a procedure or discussion of how the CUPA coordinates, consolidates, and makes consistent locally required public hearings and notices.

CITATION:

CCR, Title 27, Sections 15180(e) and 15185(b)
[CalEPA]

RESOLUTION:

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

By the 2nd Progress Report, if revisions and/or amendments to the developed and/or revised Unified Program administrative procedures, are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the revised and/or amended Unified Program administrative procedures. If no revisions and/or amendments are necessary, the CUPA will train CUPA personnel on the developed and/or revised Unified Program administrative procedures. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the developed and/or revised Unified Program administrative procedures.

By the 3rd Progress Report, if revisions and/or amendments to the developed and/or revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the revised and/or amended Unified Program administrative procedures. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the revised and/or amended Unified Program administrative procedures.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

7. INCIDENTAL FINDING:

The CUPA did not complete a Self-Audit Report for Fiscal Year (FY) 2021/2022.

The Self-Audit Reports for FYs 2020/2021 and 2022/2023 have components that are missing or incomplete.

- The following components are missing:
 - An indication that the report is completed by September 30th of each year.
 - The annual review and update of the fee accountability program as required by CCR, Title 27, Section 15220.
- The following components are incomplete:
 - A narrative summary of the effectiveness of activities including, but not limited to:
 - Permitting
 - Minimal information was included in this section for the HMBP Program. Other Unified Program elements were not discussed.
 - Inspections
 - Minimal information was included in this section for the HMBP Program and UST Program. Other Unified Program elements were not discussed.
 - Enforcement
 - The section is not specific to the applicable FY and does not discuss enforcement efforts.
 - Single Fee System
 - The information provided is procedural and is not specific to the applicable FY.

CITATION:

CCR, Title 27, Section 15280
[CalEPA]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a completed Self-Audit Report for FY 2023/2024 that contains all required components, including a September 30th date of completion. For each subsequent FY, the CUPA will complete a Self-Audit Report that contains all required components.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
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 CERS finds the following UST facilities have single-walled components which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- CERS ID 10206799
- CERS ID 10238734
- CERS ID 10238755
- CERS ID 10238758
- CERS ID 10238764
- CERS ID 10239031
- CERS ID 10407295
- CERS ID 10863754
- CERS ID 10863757
- CERS ID 10238773

Note: Of the USTs within California, 6% are single-walled USTs. Of the USTs within the jurisdiction of the Amador County CUPA, 30% are single-walled USTs.

The CUPA must ensure that all permits to operate for single-walled UST facilities expire on or before December 31, 2025, and must take enforcement action on any single-walled UST that is not permanently closed by December 31, 2025.

RECOMMENDATION:

Provide verbal and written reminders to all applicable UST facility owners or operators regarding the December 31, 2025, requirement for permanent closure of single-walled USTs.

Ensure enforcement action is outlined in the Enforcement Plan and adhered to when necessary to ensure compliant closure of all single-walled USTs.

Note: The State Water Board provided a single-walled UST enforcement guidance letter to the CUPAs in December 2023. The following may be referenced:

<https://www.waterboards.ca.gov/ust/docs/2023/upa-sw-enforcement-2023.pdf>

2. OBSERVATION:

The information below is a summary of the overall implementation of the HWG Program, and the CUPA's hazardous waste related activities based upon review of policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports between January 1, 2021, and December 31, 2023:

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

- CERS reflects 138 regulated HWG facilities, including 4 Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facilities, 1 TP facility, 1 Household Hazardous Waste Collection Facility (HHWCF), and 0 Hazardous Waste Recyclers (Recyclers) within the jurisdiction of the CUPA.
- The CUPA's data management system identifies 115 regulated HWG facilities, including 1 HHWCF. It is not possible to determine the number of RCRA LQGS, nor TP facilities utilizing the information provided by the CUPA.
 - The difference between the total number of HWGs reflected in CERS and in the CUPA's data management system suggests there are 23 HWG facilities identified in CERS that need to be included in the CUPA's data management system and incorporated into the HWG Program (if not already regulated).
- CERS reflects the CUPA inspected 121 of 138 (87%) regulated HWG facilities (including TP facilities) and conducted 138 HWG routine inspections and 2 HWG "Other" inspections.
 - Conducting more HWG routine inspections than there are HWG facilities indicates the CUPA inspected some HWG facilities more often than once every three years.
 - 124 of 138 (90%) routine inspections had no violations cited.
 - 14 of 138 (10%) routine inspections had at least one violation cited.
 - In the 14 routine inspections conducted having at least one violation, a total of 20 violations were cited, consisting of:
 - 0 (0%) Class I violations
 - 2 (10%) Class II violations
 - 18 (90%) Minor violations
 - The CUPA has ensured RTC for 18 of 23 (78%) violations cited (including 3 additional minor violations cited during "Other" inspections).
- CERS reflects no formal enforcement actions for hazardous waste related violations were completed, resulting in \$0 penalties.
- Inspection reports do not document whether consent to inspect was requested prior to beginning the inspection.
- Inspection reports do not document violation classifications of cited violations (i.e. Class I, Class II, Minor).
- Violation observations and comments are consistently being reported to CERS.

RECOMMENDATION:

Continue with efforts to meet the HWG inspection frequency and apply enforcement as established in the Enforcement Plan.

Ensure inspection reports contain a detailed description of observations and factual basis for each cited violation and ensure comments in CERS reflect the detailed observations and factual basis for each violation cited in inspection reports to support any applicable enforcement efforts. Descriptions of observations and factual basis to support alleged violations, should be detailed enough to clearly demonstrate how a regulatory requirement was not met and support the violation classification. It is also recommended that consent to inspect and violation classifications are documented in inspection reports.

Periodically review CERS Business Activities submittals to identify new HWG facilities and facilities that fail to correctly self-identify as an HWG. The CERS Facility Listing (Details) download can be useful for this purpose.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

Utilize the U.S. EPA RCRAInfo database to identify RCRA LQGs within the jurisdiction of the CUPA by confirming if a facility has submitted Biennial Reports through RCRAInfo. Follow up with all 23 HWGs that are reporting to CERS but are not yet accounted for in the CUPA's data management system.

3. OBSERVATION:

On September 17, 2024, HWG oversight inspections were conducted with the sole CUPA inspector at CERS ID 10419772 and CERS ID 10990721, both Small Quantity Generator (SQG) facilities. The inspections were scheduled with each facility in advance.

Prior to each inspection, the inspector reviewed CERS and hard copy facility files, however a review of the HWTs or the U.S. EPA RCRAInfo database. was not conducted. The inspector did not bring any hazardous waste (HW) guidance as a personal reference nor as informational material for the facility representatives.

The oversight inspection at CERS ID 10419772, included all HW storage areas and the point of generation at the pharmacy. The inspector only reviewed one year of HW manifests, instead of three years and did not inquire about or review HW training documentation, the contingency plan, or the emergency response plan.

The oversight inspection at CERS ID 10990721, included all HW storage areas, however, not all points of generation were adequately inspected, namely the red mobile used oil containers used to drain oil from automobiles. The facility operator mentioned HW used oil is burned for energy recovery in a wall mounted heater unit. The inspector failed to recognize this unit as conducting illegal treatment of HW. The inspector also mentioned seeing this unit at other facilities and did not know it was an issue. No HWG violations were cited or discussed with the facility at the conclusion of the inspection.

During the inspection, DTSC noted three violations including illegal treatment of HW, HW container labeling, and SQG HW accumulation limit. After the inspection, DTSC explained to the inspector which violations should have been cited and the inspector ultimately cited the violations in the final inspection report.

Neither an inspection report nor a written summary of violations was provided to the facility representative at the conclusion of either inspection. However, the inspector obtained digital signatures for the inspection reports and sent the reports via email at a later date. In each inspection report the inspector cited violations concerning the facility site map and CERS inventory submittal for both facilities inspected. These violations should be cited as HMBP program violations, not HWG program violations.

Overall, the inspections were handled professionally and conducted in a timely manner but were not complete. The pre-inspection preparation was more suited for conducting an HMBP inspection and incomplete for conducting a routine HWG inspection. Consent to conduct the inspections was not explicitly requested.

RECOMMENDATION:

Different categories of HWG facilities, such as SQG and LQG facilities, have slightly different requirements. Before conducting an HWG inspection, the inspector should prepare for each inspection by determining the generator category of the facility, becoming familiar with the HW

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

requirements of the applicable generator category, and preparing for the relevant violations that could be identified when conducting the inspection, such as those applicable to used oil filters, consolidated manifesting, tanks versus containers, and general SQG and LQG specific requirements.

For pre-inspection preparation, ensure adequate time is allocated to review HW manifests from the HWTS as U.S. EPA RCRAInfo database, and to prepare a list of manifests to review during the inspection while at the facility. Reviewing HW manifests before conducting an inspection is not only useful to compare with copies of HW manifests maintained onsite at the facility, but also to determine the category of the generator being inspected (SWG or LQG).

Consent to inspect should always be requested prior to conducting inspections, even for scheduled inspections.

Ensure that violations are classified properly. For example, a minor violation for accumulating HW past the applicable accumulation time limit can only be cited if the circumstances of the violation align with the statutory definition of a minor violation and should otherwise be cited as a Class II or Class I violation. Additionally, it is recommended that inspectors incorporate field notes in inspection reports, including but not limited to, relevant conversations with the facility operator, descriptions of the facility operations, and HW generation activities and take photographs during inspections.

Whenever possible, provide inspectors with Hazardous Waste refresher training, encourage inspectors to attend external Hazardous Waste training, and have inspectors complete the DTSC free Hazardous Waste Classification Training (<https://dtsc.ca.gov/businesses-hazardous-waste-generators#Training>) as well as review the many guidance documents available on the DTSC website (<https://dtsc.ca.gov/generators/>).

4. OBSERVATION:

The Inspection Plan, revised in July 2021, contains information that may benefit from improvement.

- Section I: General Information
 - Remove “Uniform” from “California Uniform Fire Code”
- Section II: CERS Data Submittals
 - D. APSA: Replace “APSA Certification” with “APSA Facility Information”
- Section III: Frequency of Inspections
 - iii: Replace “AST” with “APSA” and include HSC, Section 25270.5(a) and (b)
- Section V: Inspector Training
 - Include APSA Basic Inspector Training

RECOMMENDATION:

Update the Inspection Plan as indicated above.

5. OBSERVATION:

The area plan contains the following information that is incomplete, inaccurate or outdated and may benefit from improvement.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

- Part I – Basic Plan, A.2.: The list of Unified Program elements is missing the Hazardous Materials Management Plans (HMMP) and Hazardous Materials Inventory Statements (HMIS) requirements, which is consolidated with the HMBP requirements.
- Part III – Appendices:
 - Glossary of Terms Appendix A-1: The glossary identifies OSFM as having responsibility for interstate and intrastate hazardous liquid pipelines in California. OSFM oversees intrastate hazardous liquid pipelines. Interstate hazardous liquid pipelines are under the authority of the US Department of Transportation – Pipeline and Hazardous Materials Safety Administration.
 - Resource/Emergency Contractor Phone List, Appendix R-2: Update the ‘California Fire – Pipeline Safety/Failure Investigation’ to OSFM Pipeline Safety and update the phone number (916) 324-8922 to (916) 568-3800. Update the OSFM (Sacramento) phone number (916) 445-8477 to (916) 568-3800.

RECOMMENDATION:

With the next revision, update the area plan as indicated above.

6. OBSERVATION:

Some APSA tank facilities submitted an HMBP to CERS in lieu of a tank facility statement using an outdated consolidated emergency response and training plans template, which contains obsolete information.

An APSA tank facility (CERS ID 10238878) submitted a Spill Prevention, Control, and Countermeasure (SPCC) Plan as part of the HMBP (Emergency Response and Training Plans) submittal in lieu of a tank facility statement. SPCC Plans are not required to be provided as part of any CERS submittal; therefore, SPCC Plans should not be uploaded to CERS.

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template to use the current version, when an HMBP is submitted in lieu of a tank facility statement. The current template is available in CERS, CERS Central, on the Businesses webpage at <https://cers.calepa.ca.gov/businesses/> and on the CalEPA Unified Program Publications and Guidance webpage at <https://calepa.ca.gov/cupa/publications/>.

Utilize the regulator comments field in CERS to inform APSA tank facilities that SPCC Plans should not be included in future CERS submittals.

7. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 47 APSA tank facilities. The CUPA’s data management system identifies 46 APSA tank facilities.

- 42 APSA tank facilities are identified in both CERS and the CUPA’s data management system.
- 5 facilities identified as “APSA Applicable” in CERS that, according to the submitted inventory, should not be regulated under APSA.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

- 4 facilities identified as APSA tank facilities in the CUPA's data management system are not identified in CERS as APSA tank facilities.

RECOMMENDATION:

Review the list of APSA tank facilities identified as "APSA Applicable" in CERS and determine if each facility is regulated under APSA.

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

8. OBSERVATION:

The CUPA has webpages that contain various resources for the public and regulated community. However, the following information is outdated, incorrect, or may benefit from improvement.

Hazardous Materials (CUPA) webpage at

<https://www.amadorgov.org/departments/environmental-health/hazardous-materials-cupa>:

- The APSA Program and the California Fire Code HMMP/HMIS links incorrectly go to the Inspection Plan document.
- Remove "Uniform" from "California Uniform Fire Code."

APSA webpage at <https://www.amadorgov.org/departments/environmental-health/hazardous-materials-cupa/aboveground-petroleum-storage-tank-program>:

- First paragraph, second sentence: Update the sentence to state that an APSA tank facility is required to annually file a tank facility statement or an HMBP in lieu of a tank facility statement.
- First paragraph, last sentence: The SPCC link goes to the U.S. EPA webpage for the Tier I qualified facility SPCC Plan template. The link should go to the general U.S. EPA SPCC website at <https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations>. Update the sentence and link, as not all APSA tank facilities can use the Tier I qualified facility SPCC Plan template and not all APSA tank facilities are required to prepare an SPCC Plan under APSA.

HMBP webpage at <https://www.amadorgov.org/departments/environmental-health/hazardous-materials-cupa/hazardous-materials-business-plans>:

- Replace the outdated consolidated emergency response and training plans template (2011) with the current version (<https://calepa.ca.gov/wp-content/uploads/sites/6/2022/03/Emergency-Response-Plan-corrected-6-27-22.pdf>).

RECOMMENDATION:

Update the webpages as indicated above.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

9. OBSERVATION:

On October 7, 2024, the same inspector conducted an HMBP oversight inspection at CERS ID 10239184 and at CERS ID 10239034.

For the oversight inspection conducted at CERS ID 10239184, the inspector was prepared for the inspection and reviewed relevant information prior to arriving at the facility. The inspector established rapport with the facility operator, toured the entire site, verified inventory, and emergency response plan information and training on site, and effectively communicated technical information to the facility operator. The inspector identified and disclosed all observed violations.

For the oversight inspection conducted at CERS ID 10239034, the inspector reviewed relevant information prior to arriving at the facility. The inspector established rapport with the facility operator, toured the entire site, verified inventory, and effectively communicated technical information to the facility operator. The inspector did not have the most recent site map that was uploaded to CERS by the facility, did not review emergency response plan information and training on site, and did not identify and disclose all observed violations, such as the failure of the facility to provide an annual HMBP submittal/certification to CERS.

RECOMMENDATION:

For all non-compliance observed during an inspection, ensure violations are cited in inspection reports and reported to CERS.

10. OBSERVATION:

Existing references to citations in CCR, Title 19, Division 2, Chapters 4 and 4.5 in administrative procedures, standard operating procedures and other documents associated with the HMBP and CalARP Programs may be outdated.

Effective July 22, 2021, Assembly Bill 148 (Chapter 115, Statutes of 2021), transferred the oversight responsibility of the HMBP and CalARP Programs from the California Governor's Office of Emergency Services (Cal OES) to CalEPA.

As a result, on March 6, 2024, the Office of Administrative Law (OAL) approved a rulemaking package submitted by CalEPA to amend and relocate portions of CCR, Title 19, Division 2, Chapters 4 and 4.5 into a new Division (Division 5). The rulemaking does not materially alter any requirement, right, responsibility, condition, prescription, or other regulatory element. The final regulatory text for the rulemaking package revising the citations is available as follows:

- For HMBP Program requirements: https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-1-Final_Underline_Strikeout.pdf
- For CalARP Program requirements: https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-2-Final_Underline_Strikeout.pdf

RECOMMENDATION:

Update any applicable policies, procedures, or other documents to reflect the new citation references to CCR, Title 19 for the HMBP and CalARP Programs using the "regulatory crosswalk," developed by CalEPA, as Guidance Document 24-01, available at:

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

- <https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/Guidance-Document-24-01-Regulatory-Crosswalk-for-HMBP-and-CalARP-Title-19-Changes.pdf>
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11. OBSERVATION:

On July 30, 2024, an oversight inspection was conducted with the sole CUPA inspector, during the annual monitoring system certification and the spill container testing at two fueling stations, CERS ID 10239058 and CERS ID 10238791.

During each inspection, the service technician provided the inspector with the tank set up and alarm history print out prior to opening any UST components. The inspector maintained a strong rapport with the technician and asked pertinent questions when clarification on the UST system was needed.

Review of the inspection report and testing documents for each facility inspected finds the following violations were not cited upon completion of the inspection:

- CERS ID 10239058: At the time of inspection, the diesel UST was not programmed for positive shut down at the UDCs
 - Unified Program Violation Type Number 2030043- Monitoring Equipment (USEPATCR 9d)
- CERS ID 10238791: At the time of inspection, the facility did not have a copy of Monitoring Certification System forms, Overfill Prevention Equipment Inspection reports, Secondary Containment Testing Report forms, and the current copy of the Monitoring Plan accessible
 - Unified Program Violation Type Number 2030001- Release Detection Monitoring and Maintenance Records (USEPATCR 9d)
 - Unified Program Violation Type Number 2030069- Overfill Prevention (USEPATCR 9b)
 - Unified Program Violation Type Number 2030033- Monitoring Plan Available
 - Unified Program Violation Type Number 2030048- Secondary Containment Testing (USEPATCR 9d)

RECOMMENDATION:

For all non-compliance observed during an inspection, ensure violations are cited in inspection reports and reported to CERS.

12. OBSERVATION:

Informal enforcement efforts of the CUPA to ensure facilities with open violations obtain RTC include mailing a reminder to each facility in the form of a Notice of Violation (NOV) letter a few weeks to a few months following the inspection during which the violation was cited.

The NOV letter issued to CERS ID 10238731, dated October 26, 2021, states:

- “On July 16, 2021, a Hazardous Materials Business Plan inspection was conducted at the [name of facility]. At the time of the inspection there was full 55-gallon drums of hazardous waste which exceeded the 180-day storage time limit. This is a violation of Health and Safety Code Ch. 6.5 25123.3(h)(1), 22 CCR, Ch. 662.62.34(d).”

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

The following information in the NOV letter template regarding the HWG Program is inaccurate:

- The NOV incorrectly states a HMBP inspection was conducted and references an HWG Program violation. The NOV should state a HWG Inspection was conducted. Since HMBP & HWG inspections are likely conducted on the same date the CUPA should ensure the correct inspection is referenced when sending the NOV letter.
- The citation “22 CCR, Ch. 662.62.34(d)” is incorrect. The correct citation is CCR, Title 22, Chapter 66262.34(d).
 - Note: Implementation of the GIR on July 1, 2024, changed the citations for exceedance of authorized accumulation time from Section 66262.34(d) to Section 66262.16(b) [Small Quantity Generators], and from Section 66262.34(a) to Section 66262.17(a) [Large Quantity Generators]

Note: The example provided above may not represent all instances of this Observation.

RECOMMENDATION:

Revise the inaccuracies within the NOV letter template, including updating reference to the new Title 22 citations following the July 1, 2024, implementation of the GIR.

13. OBSERVATION:

A written summary of all violations is not routinely provided to the facility operator prior to leaving the facility at the conclusion of the inspection. The existing procedure in the Inspection Plan requires the inspector to issue the inspection form to the facility unless the inspector is unable, in which case the inspector will return to the office to finalize the inspection report upon completion of the HWG facility inspection, and once finalized, the inspection report is mailed or delivered in person the facility.

RECOMMENDATION:

When an HWG facility inspection is conducted, HSC, Section 25185(c)(1) requires a written summary of all violations to be provided to the facility operator prior to the conclusion of the HWG inspection.

At minimum, the inspector should review the inspection report and/or inspection checklist with the facility operator and discuss any questions the facility operator may have. If an electronic inspection report is utilized, the inspector should review the electronic report with the facility operator at the conclusion of the inspection and email the finalized inspection report to the facility operator upon returning to the office.

Develop a NOV or other applicable form, which summarizes all violations documented during the inspection, and can be provided to the facility operator upon conclusion of the inspection while awaiting the final inspection report to be provided via email or mail.

14. OBSERVATION:

The CUPA is currently utilizing an unsupported version of the EnvisionConnect program to conduct inspections and electronically transfer CME information to CERS. The GIR went into effect on July 1, 2024, and changed several HWG citations in CCR, Title 22. The Unified Program Violation Library in CERS will be updated to reflect these changes on October 1, 2024.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY
UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

The CUPA may experience issues with continuing to utilize the unsupported version of EnvisionConnect, as it cannot be updated to reflect the GIR changes in CCR, Title 22. This could also result in outdated citations being reflected in inspection reports, meaning the CUPA will not be able to correctly cite HWG Program violations. This may also impact the ability of the EnvisionConnect to accurately electronically transfer CME information to CERS.

RECOMMENDATION:

Prioritize replacement of the unsupported version of EnvisionConnect with utilization of a supported data management. Download the Unified Program Violation Library in CERS when it is updated on October 1, 2024, to reflect the GIR changes in CCR, Title 22. Utilize the downloaded Unified Program Violation Library from CERS as a reference to update inspection report templates to include the most current HWG Program citations. In lieu of downloading the updated Unified Program Violation Library from CERS, the DTSC GIR Crosswalk (<https://dtsc.ca.gov/regs/gir>) and the GIR FAQ webpage (<https://dtsc.ca.gov/faqs-for-the-adoption-or-gir/>) may be used.