

May 30, 2025

Lars Seifert
Environmental Health Director
County of Santa Barbara Public Health Department
225 Camino del Remedio
Santa Barbara, California 93110-1334

Dear Mr. Seifert:

During August 2024, through April 2025, CalEPA and the Unified Program state agencies conducted a performance evaluation of the County of Santa Barbara Public Health Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System information, and oversight inspections.

Upon completion of the evaluation, no program deficiencies were identified. A preliminary Summary of Findings report was developed to identify 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 meets Unified Program standards.

I commend you and your team in the successful implementation of the Unified Program despite the numerous challenges over the past few years, including the response and management efforts of the Coronavirus (COVID-19) pandemic. The CUPA has managed to do an exemplary job of keeping up with the desirable Unified Program performance rating.

To demonstrate progress towards the 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.

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,



Jason Boetzer
Deputy Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

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CUPA/Supervising Hazardous Materials Specialist
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cc sent via email:

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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:** County of Santa Barbara Public Health Department**2024 Evaluation Assessment:** August 2024 through April 2025**Timeframe Evaluated:** January 1, 2021, through June 30, 2024**Evaluation Team Members:**

- **CalEPA Team Lead:** Kaeleigh Pontif
- **CalEPA:** Alexa Kostrikin
- **DTSC:** Brennan Ko-Madden
- **State Water Board:** Michelle Suh, Magnolia Busse
- **CAL FIRE-OSFM:** Mary Wren-Wilson

This Final Summary of Findings includes:

- Accomplishments, Examples of Outstanding Implementation, and Challenges
- 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: meets Unified Program standards.

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 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 August 4, 2025.

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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. HAZARDOUS WASTE GENERATOR (HWG) PROGRAM RETURN TO COMPLIANCE (RTC) AND INSPECTION REPORTS:

The CUPA has successfully enforced the HWG Program and obtained compliance from facilities that have been cited with violations. Between July 1, 2021, and June 30, 2024, the CUPA has ensured RTC for over 90% of regulated HWG facilities and has completed two formal hazardous waste enforcement cases.

The contents of HWG inspection reports contain detailed observations and comprehensive violation comments. Violations cited in inspection reports contain supporting evidence and clear corrective actions.

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 of other APSA tank facilities in accordance with the Inspection and Enforcement (I&E) Plan.

In addition, the CUPA has successfully enforced the APSA Program and obtained a high rate of compliance from facilities that have been cited for violations.

The CUPA ensured APSA tank facilities annually submitted a tank facility statement or a Hazardous Materials Business Plan (HMBP), in lieu of a tank facility statement, to the California Environmental Reporting System (CERS).

3. QUALITY OF ADMINISTRATIVE AND PROCEDURAL DOCUMENTS AND CONSISTENCY IN REPORTING:

The Unified Program administrative and procedural documents established by the CUPA consistently meet or surpass the requirements set forth in California Code of Regulations (CCR), Title 27. The CUPA is consistent in adhering to the requirements for reporting information to CERS and CalEPA.

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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 reporting Technical Compliance Rate (TCR) criteria in CERS and the Semi-Annual Report (Report 6) for abandoned Underground Storage Tanks (USTs).

Review of CERS inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information on November 24, 2024, and Report 6 finds the CUPA is not consistently reporting TCR criteria to CERS for the following facility:

- CERS ID 10869934
 - TCR criteria violation was not reported to CERS for an abandoned UST inspected in 2021, 2022, and 2023

Note: The following may be referenced:

- State Water Board correspondence dated April 27, 2017 “[Conclusion of the Abandoned Underground Storage Tank Initiative, and Unified Program Agency Inspection and Reporting Requirements](https://www.waterboards.ca.gov/ust/docs/abandoned_storage/2017/abust_closeout_letter.pdf)” (https://www.waterboards.ca.gov/ust/docs/abandoned_storage/2017/abust_closeout_letter.pdf)
- California Environmental Reporting System (CERS) [FAQ: “Reporting Abandoned USTs”](https://www.waterboards.ca.gov/ust/cers/ru06_abandoned_usts.html) (https://www.waterboards.ca.gov/ust/cers/ru06_abandoned_usts.html)

CITATION:

Health and Safety Code (HSC), Chapter 6.7, Sections 25298 and 25299(a)(5) and (b)(3)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will develop an action plan to properly inspect abandoned USTs annually and report TCR criteria in CERS and Report 6. The CUPA will provide CalEPA with the action plan.

By the 1st Progress Report, the CUPA will review and revise the Inspection and Enforcement (I&E) Plan or other applicable procedure to include how the CUPA inspects abandoned USTs. The process at minimum will address:

- Conducting annual UST compliance inspections;
- Reporting TCR information in Report 6 and CERS;
- Applying appropriate enforcement when necessary; and
- Ensuring future abandoned USTs are reported to CERS and have the UST element set to “Applicable” in CERS until UST closure is completed.

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

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

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, for each abandoned UST, the CUPA will provide CalEPA with annual UST compliance inspection reports, and consistently report TCR criteria in CERS and Report 6. If applicable, the CUPA will provide CalEPA with UST closure records.

2. INCIDENTAL FINDING:

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

Review of UST compliance inspection reports, associated testing and leak detection documents, and CERS CME information between January 1, 2021, and December 31, 2023, finds the following discrepancies:

- Incomplete or inaccurate testing information
 - CERS ID 10209115
 - Monitoring System Certification Forms dated February 23, 2022, and February 14, 2022, do not cite results in Section 6 for the under dispenser containment (UDC) float and chain.
- Inconsistent identification of UST construction and inspection information
 - CERS ID 10209007
 - Monitoring System Certification Forms dated June 29, 2022, June 20, 2023, and June 13, 2024, have the following discrepancies:
 - Section 5 is marked “Yes” for “Does the flow of fuel stop at the dispenser if a release is detected in the under-dispenser containment?” while CERS notes 208 sensors.
 - Section 7 notes 848480-001 sensors being used while CERS notes 848480-003 sensors.
 - CERS ID 10211464
 - Monitoring System Certification Forms dated April 1, 2022, April 5, 2023, and April 12, 2024, have the following discrepancy:
 - Section 5 is marked “Yes” for “Does the turbine automatically shut down if the piping secondary containment monitoring system fails to operate or is electrically disconnected?” and Section 5 is marked “Yes” for “Does the turbine automatically shut down if the piping secondary containment monitoring system detects a release?”, while the USTs have a conventional suction system with no turbine.
 - CERS IDS 10210678
 - Monitoring System Certification Forms dated March 7, 2022, March 14, 2023, and March 27, 2024, cite 420 sensors being used while CERS notes the waste oil annular using a 208 sensor and the diesel annular using a 205 sensor.

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- Certification of the service technician was missing for the following facilities:
 - CERS ID 10209028
 - Monitoring System Certification Forms completed February 24, 2022, September 20, 2023, and September 18, 2024, by a technician with no training or certification provided for the line leak detector (LLD) test.
 - CERS ID 10210678
 - Monitoring System Certification Forms completed March 7, 2022, March 14, 2023, and March 27, 2024, by a technician with no training or certification provided for the LLD test.

CITATION:

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

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]

RESOLUTION:

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:

- Identification of the types and frequency of training inspectors need to consistently conduct complete UST compliance inspections; and
- 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 of the analysis and explanation, the CUPA will review and revise the I&E Plan, or other applicable procedure, to establish a process for consistently conducting complete annual UST compliance inspections. The revised I&E 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; and
- 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;

The CUPA will provide CalEPA with the revised I&E 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 I&E Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan, or other applicable procedure. Once training is complete, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered resolved, the CUPA will provide CalEPA with 3 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.

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3. INCIDENTAL FINDING:

Required components of the I&E Plan are inaccurate.

Review of the I&E Plan finds the following components are inaccurate:

- Pages 2 and 24 state “Underground Storage Tank (UST) Program Authority: H&SC, Chapter 6.7 and Title 23 CCR” without the specific code sections
 - The specific code sections are:
 - HSC, Division 20, Chapter 6.7, Sections 25280 through 25296; and 25298 through 25299.6, and
 - CCR, Title 23, Division 3, Chapter 16, Sections 2610 through 2717.7
- Page 6 (AEO Penalty Matrix – IE Plan Call Out) 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 statement is “not more than five thousand dollars (\$5,000) for each underground storage tank”.
- Page 8 Section (a). “Pursuant to H&SC § 25540(a), any station source that violates this article shall be liable in the amount of not more than \$2,000 per day in which the violation occurs”.
 - Per HSC, Section 25540(a)(2), the minimum penalty amount is \$5,000.
- Page 15, Section VI includes an inactive website link -
<https://services.cdtfa.ca.gov/boeweb services/verification.jsp>.

CITATION:

HSC, Chapter 6.7, Sections 25280 through 25296; and 25298 through 25299.6
CCR, Title 23, Sections 2610 through 2717.7
CCR, Title 27, Section 15200
[CalEPA, State Water Board]

RESOLUTION:

With the proposed rewrite of Chapter 16, new requirements for the I&E Plan will be introduced. The State Water Board plans to provide a guidance document outlining the new requirements by the end of 2025.

By the 2nd Progress Report, the CUPA will revise the I&E Plan to adequately incorporate and correctly address all required components, including the date of revision and new Chapter 16 requirements. The CUPA will provide the revised I&E Plan to CalEPA.

By the 3rd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA or the State Water Board, the CUPA will provide the amended I&E Plan to CalEPA. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 4th Progress Report, if amendments to the revised I&E Plan were necessary, the CUPA will train CUPA personnel on the amended I&E Plan. Once training is complete, the CUPA will implement the amended I&E Plan. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the amended I&E Plan.

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4. INCIDENTAL FINDING:

The CUPA is not consistently citing nor requiring the correction of construction violations identified in State Water Board Local Guidance Letter 150-3, dated February 2021, at UST systems.

Review of the UST Facility/Tank Data Download report obtained from CERS on November 21, 2024, finds the following:

- USTs with single-walled vent or riser piping utilizing the overfill prevention equipment exemption:
 - CERS ID 10209631-002
 - CERS ID 10209511-004
- UST systems, installed between July 1, 1987, and June 30, 2003, with single-walled vent or riser/fill piping and equipped with only Audible/Visual alarms with no Ball Float or Fill Tube Shut-off Valve:
 - CERS ID 10209028-001
 - CERS ID 10209814-001
- UST system with single-walled vent or riser piping and equipped with only Ball Float and no Audible/Visual alarm or Fill Tube Shut-off Valve:
 - CERS ID 10210678-003

CITATION:

CCR, Title 23, Sections 2635(d), 2636(a), and 2665(c)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will identify and provide CalEPA with a list of UST facilities, including the CERS UST tank ID, with incorrect or incomplete overfill prevention equipment (OPE) construction.

By the 1st Progress Report, the CUPA will provide written correspondence addressed to the UST facility owners/operators, informing the UST owners/operators of the requirement for installation of OPE, or to construct secondary containment for single-walled vent and fill 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 (D) 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 of UST facilities with incorrect or incomplete OPE construction, indicating the status of each UST obtaining compliance. If appropriate steps have not been taken by the UST owners/operators to resolve the construction violations, the CUPA will apply enforcement, including but not limited to revocation of the UST Operating Permit and issuance of red tags, which prohibit the deposit and withdrawal of product.

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

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5. INCIDENTAL FINDING:

The UST Operating Permit, issued as the Unified Program Facility Permit (UPFP), includes components that are inconsistent with CCR, Title 23, Division 3 (CCR, Chapter 16), and HSC, Division 20, Chapter 6.7 requirements.

Review of the UPFP and the Permit to Operate Underground Tank Facility finds the following inconsistencies with CCR, Chapter 16 and HSC, Chapter 6.7:

- Pages 1 and 2 state the following
 - Page 1: "Permits and annual fee payments are not transferable, permits become void on change of ownership."
 - Page 2: "This permit is non-transferable"
 - The UST Operating permit is transferable.
- Page 2 references HSC and CCR, Chapter 16 but does not specify the applicable code sections as CCR, Title 23, Sections 2610 through 2717.7 and HSC, Chapter 6.7, Sections 25280 through 25296 and 25298 through 25299.6:
 - "Reports documenting any testing, monitoring, and/or changes to the underground storage tanks shall be submitted to this Agency or maintained by the owner/operator in accordance with 23 CCR and 6.7 HSC"
 - "If required to do so, the facility owner/operator shall submit financial responsibility compliance documentation through CERS in accordance with CCR 23 and HSC 6.7."
 - "Issuance of this permit to the above named underground hazardous materials storage tank owner and/or operator subjects the owner and operator to all applicable State UST requirements including the California Health and Safety Code, Chapter 6.7; the California Code of Regulations Title 23, Division 3, Chapters 16"
- Page 2 states "All unauthorized release must be reported to this office within 24 hours"
 - The correct statement is, "All reportable unauthorized release must be reported..."

CITATION:

HSC, Chapter 6.7, Sections 25294 and 25295
CCR, Chapter 16, Sections 2650(e), 2651, 2652, 2711, and 2712
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will revise the UPFP and the Permit to Operate Underground Tank Facility template, to be consistent with CCR, Chapter 16 and HSC, Chapter 6.7. An example UST Operating Permit and permit conditions template has been made available by the State Water Board at:

https://www.waterboards.ca.gov/water_issues/programs/ust/docs/permit-template2.docx

The CUPA will contact the State Water Board for assistance with revising the UPFP and the Permit to Operate Underground Tank Facility template, if necessary. The CUPA will provide the revised UPFP and Permit to Operate Underground Tank Facility template to CalEPA.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UPFP and Permit to Operate Underground Tank Facility template, based on feedback from the State Water Board. The CUPA will provide the amended UPFP and Permit to Operate Underground Tank Facility template to CalEPA. If no amendments are necessary, the CUPA will issue the UPFP and the Permit to Operate Underground Tank Facility using the revised template.

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By the 3rd Progress Report, if amendments to the revised UPFP and Permit to Operate Underground Tank Facility template were necessary, the CUPA will issue the UPFP and the Permit to Operate Underground Tank Facility using the amended template.

6. INCIDENTAL FINDING:

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

On December 5, 2024, review of HMBPs submitted to CERS between June 14, 2023, and August 13, 2024, by businesses subject to Business Plan reporting requirements finds:

- 340 of 2,055 (17%) Business Plan facilities have not submitted a chemical inventory (including site map) or a no-change certification.
- 385 of 2,045 (19%) Business Plan facilities have not submitted emergency response and employee training plans or a no-change certification.

CITATION:

HSC, Chapter 6.95, Sections 25505(a), 25508(a), and 25508.2
[CalEPA]

RESOLUTION:

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 sortable spreadsheet obtained from the CUPA's data management system or CERS, that includes at minimum the following information for each business subject to Business Plan reporting requirements that has not annually submitted an HMBP or a no-change certification to CERS:

- Facility name;
- CERS ID;
- Follow-up actions including:
 - Enforcement applied by the CUPA 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. INCIDENTAL FINDING:

The annual California Accidental Release Prevention (CalARP) performance audit report for Fiscal Year (FY) 2023-2024 has an incomplete required element.

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The following element is incomplete:

- A summary of the personnel and personnel years (PYs) necessary to directly implement, administer, and operate the CalARP Program.
 - The PYs necessary to implement the CalARP Program should be reported as a product of the number of positions needed and the full-time percentage allocated for each of those positions. For example, assuming one inspector position, working in the CalARP Program, at a half-time percentage, the PYs would be 0.5 (1 personnel position x 0.5 position years = 0.5 personnel years).

CITATION:

CCR, Title 19, Section 5150.5(b)
[CalEPA]

RESOLUTION:

By the 2nd Progress Report, the CUPA will provide CalEPA with the most recent annual CalARP performance audit report, including the incomplete element identified above.

8. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The 2023 area plan is missing a required element.

Review of the 2023 area plan finds the following required element is missing:

- Provisions for training of emergency response personnel in the following areas, 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;
 - Procedures for informing the public during emergencies; and

CITATION:

HSC, Chapter 6.95, Section 25503(c)
CCR, Title 19, Sections 5020.1 through 5020.8
[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the CUPA provided CalEPA with an updated area plan which contained all required elements.

9. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not inspecting each HWG facility once every three years and each Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) once every two years, per the inspection frequency established in the I&E Plan.

Review of CERSCME information on November 19, 2024, finds:

- 172 of 1,285 (13%) HWGs, excluding RCRA LQGs, were not inspected once every three years between July 1, 2021, and June 30, 2024.

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- 4 of 43 (9%) RCRA LQGs were not inspected once every two years between July 1, 2021, and June 30, 2023.
- 7 of 43 (16) RCRA LQGs were not inspected once every two years between July 1, 2022, and June 30, 2024.

CITATION:

HSC, Chapter 6.5, Section 25201.4(b)(2)
CCR, Title 27, Section 15200(a)(3)(A)
[DTSC]

RESOLUTION: COMPLETED

During the evaluation, the CUPA completed additional inspections to ensure 98% of all HWGs and RCRA LQGs were inspected once within three years or two years, respectively.

This incidental finding is considered resolved.

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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 10209115 with 2 single-walled USTs
- CERS ID 10209631 with 2 single-walled USTs
- CERS ID 10210678 with 2 single-walled USTs
- CERS ID 10869934 with 1 unknown UST

RECOMMENDATION:

Continue to provide verbal and written reminders to all applicable UST owners/operators regarding the December 31, 2025, deadline for permanent closure of single-walled USTs.

Manually amend permit validity dates of UST systems to expire on December 31, 2025.

2. OBSERVATION:

Review of CERS CME information on November 25, 2024, finds return to compliance (RTC) was entered as “Not Resolvable” for approximately 6% of UST Program violations. The following are examples:

- CERS ID 10211305
 - Routine Inspection dated July 19, 2023
 - Unified Program Violation Library Violation Type Number 2030008 - Water in Secondary Containment
- CERS ID 10457752
 - Routine Inspection dated April 27, 2023
 - Unified Program Violation Library Violation Type Number 2030062 - Tampering with Leak Detection Equipment (USEPATCR 9d)
- CERS ID 10209379
 - Routine Inspection dated October 9, 2023
 - Unified Program Violation Library Violation Type Number 2030002 - Leak Detection Equipment Maintenance (USEPATCR 9d)

Note: The examples provided above do not represent all instances of this observation.

RECOMMENDATION:

RTC Violation qualifier “Not Resolvable” is intended for more unique situations where the initial violation cannot be resolved. UST Program violations for missed testing, and/or failures in testing for leak detection equipment are resolvable. “Not Resolvable” will be added to the Data Dictionary in 2026, and these current procedures will be incorrect.

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3. OBSERVATION:

On November 14, 2024, an oversight inspection was conducted during the annual monitoring system certification and the spill container testing at CERS ID 10151575 (a fueling station).

During the 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 demonstrated strong knowledge of the UST Program and was well-prepared, having conducted a comprehensive file review prior to the inspection. The inspector performed a detailed inspection, which included engaging with the facility operator through questions, verifying the layout of the UST system, ensuring that all required UST documents were available for review, and confirming the operability of the UST monitoring system and sensors.

RECOMMENDATION:

Continue to conduct thorough UST inspections.

4. 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 July 1, 2021, and June 30, 2024:

- There are 1,330 regulated HWG facilities, including 45 RCRA LQG facilities, 9 Household Hazardous Waste Collection Facilities (HHWCF), and 14 Tiered Permit (TP) facilities.
- The CUPA inspected 1,149 HWG facilities and performed 1,674 HWG inspections (1,500 Routine & 174 Other).
 - 1,149 of 1,330 (86%) HWG facilities were inspected.
 - Of the 1,500 Routine inspections conducted, 970 (65%) had no violations cited and 530 (35%) had at least one violation cited.
- 1,034 total violations were cited, consisting of:
 - 19 Class I violations,
 - 547 Class II violations, and
 - 468 minor violations
- 956 of 1,034 (93%) violations have obtained returned to compliance.
- CERS reflects 2 enforcement actions for hazardous waste related violations with a cumulative total penalty amount of \$314,500 and a Supplemental Environmental Project totaling \$80,000.
- Inspection reports generally contain detailed comments that note the factual basis of cited violations and indicate whether consent to inspect was requested prior to the inspection.
- Violation comments are not consistently entered into CERS.
- The I&E Plan does not explicitly list the per day maximum penalty amount for HW violations.

RECOMMENDATION:

Continue with the inspection frequencies identified in the I&E Plan. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply enforcement when facilities do not RTC, per the I&E Plan. Continue to ensure complete and thorough inspections are conducted to

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identify all violations at facilities. Improve the quality of CERS violation data by including violation comments. Update the I&E Plan to include the per day maximum penalty amount of \$70,000 for HW violations (HSC section 25188).

Ensure new sections pursuant to the U.S. EPA Generator Improvement Rule (GIR) requirements are included in inspection checklists, available factsheets and other resources utilized for the implementation of the HWG Program as well as those made publicly available. The CERS violation library was updated on October 1, 2024, to incorporate the changes to CCR, Title 22 caused by California's adoption of the GIR on July 1, 2024. Update inspection reports to reference the most current version of the CERS violation library.

5. 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.

Additionally, at least one tank facility submitted an SPCC Plan to CERS as part of the APSA tank facility statement submittal. SPCC Plans are not required to be provided as part of an APSA 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.

6. OBSERVATION:

The Hazardous Materials webpage (<https://www.countyofsb.org/2171/Hazardous-Materials>) contains resources for the public and regulated community. However, the APSA Program information may benefit from improvement.

- The following statement is limited to one type of tank facility subject to APSA (HSC, Section 25270.3(b)), "A facility is required to prepare a Spill Prevention Control and Countermeasure (SPCC) Plan if a single AST containing a petroleum-based product or the aggregate quantity of petroleum-based products in multiple ASTs or 55-gallon drums exceeds 1,320 gallons." Also, not all APSA tank facilities are required to prepare an SPCC Plan.

RECOMMENDATION:

Update the applicability information to include the two other types of tank facilities subject to APSA in accordance with HSC, Section 25270.3(a) and (c) and include information about tank facilities that may be exempt from preparing an SPCC Plan under APSA if certain conditions are met in accordance with HSC, Section 25270.4.5(b).

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7. OBSERVATION:

The area plan contains information that may benefit from improvement:

- Page 15: The Unified Program elements list is missing the Hazardous Materials Management Plans (HMMP) and Hazardous Materials Inventory Statements (HMIS) requirements, which is consolidated with the HMBP requirements to streamline the regulatory requirements for regulated facilities.
- Page 21: The APSA Program information is inconsistent with statute.

RECOMMENDATION:

Revise the area plan as indicated above, including updating the applicability information to include the two other types of tank facilities subject to APSA and include information about tank facilities that may be exempt from preparing an SPCC Plan under APSA if certain conditions are met.

8. OBSERVATION:

On January 8, 2025, an HMBP oversight inspection was conducted at CERS ID 10624327 and at CERS ID 10210420, with different inspectors.

Prior to the inspection at CERS ID 10624327, the inspector demonstrated thorough review of previous inspection reports and reviewed CERS information.

During the inspection, the inspector explained the purpose of the visit and requested for consent to conduct the inspection, take photographs, and review any relevant compliance documentation. For safety purposes, the inspector inquired about the safety protocols of the facility in the event an emergency should occur during the inspection. Training documentation was reviewed prior to the facility walkthrough and the inspector verified the appropriate training was being conducted annually and documented for the last three years. The inspector discussed and acknowledged with the facility representative that a recent HMBP submittal had been received but also educated the facility representative that annual certification of the HMBP information must also be submitted to CERS.

A full walkthrough of the facility was conducted to verify the reported information in the hazardous materials inventory and observe all areas where hazardous materials may be stored and handled. The facility site map was also verified for accuracy during the walkthrough and the inspector notified the facility representative of identified inaccuracies in the map.

The violations observed during the inspection were cited in the inspection report. The inspection report also included observations and corrective actions. The inspector demonstrated good knowledge of the program and handled the inspection professionally.

Prior to the inspection at CERS ID 10210420, the inspector demonstrated thorough preparation, by:

- reviewing the violation history of the facility and adjacent facilities under the same management,
- researching the changes in management and environmental personnel over the years,

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- reviewing similar industries within other CUPA jurisdictions for familiarization of the process,
- reviewing the DTSC Hazardous Waste Tracking System (HWTS) to compare with the reported hazardous materials inventory,
- reviewing the hazardous materials release history,
- researching the worst-case scenario based on the highest hazard of the inventory onsite, and
- reviewing published articles for incidents related to hazardous materials.

During the inspection, the purpose and intent of the site visit was explained to the facility representative. The inspector requested consent to conduct the inspection, take photographs, and review any relevant documentation related to the inspection. Due to a major changeover in management and personnel at the facility, the inspector inquired about the employee training being conducted over the last three years and identified the current personnel that should be updated as the emergency contact.

A full walkthrough of the facility was conducted to verify the reported hazardous materials inventory. The inspector inquired about any possible unreported hazardous materials from welding activities onsite and storage of solar panel batteries. The facility site map was verified for accuracy and the boundary of the map was verified to distinguish the facility from adjacent facilities under the same management.

The violations observed were disclosed with the facility representative at the end of the inspection and were cited in the report which includes observations made by the inspector and corrective actions to achieve compliance. The inspector demonstrated great knowledge of the program and utilized supplement information from other CUPA programs and other databases with hazardous materials information in order to conduct a thorough inspection.

On January 9, 2025, a CalARP oversight inspection was conducted at CERS ID 10208827 for a Program Level 2 process at a stationary source.

Prior to the inspection, the inspector reviewed relevant documentation including the most recent Risk Management Plan (RMP) and noted that recommendations for the hazard review were missing dates of completion.

During the inspection, the inspector stated the purpose and intent of the site visit and requested consent to conduct the inspection, take photographs, obtain samples, and review documentation relevant to the inspection. The inspector inquired about missing dates for the recommendations of the recent hazard review to ensure the facility is addressing any identified issues.

The inspector reviewed the training program for employees that are involved with the operating process of the ammonia system, calibration records for the ammonia sensors, and inspection logs. A walkthrough of the ammonia system throughout the facility was conducted.

Pending violations were disclosed with the facility representative at the end of the inspection and were to be reviewed by management prior to issuing the inspection report. The inspection report cited a violation for failing to document results of the hazard review recommendations and failure to certify the compliance audit every three years.

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RECOMMENDATION:

Continue conducting thorough HMBP and CalARP inspections.

To better understand industry codes and standards that apply to CalARP sites, inspectors will benefit from increased familiarity with engineering, operation, and maintenance codes, technical reports, and overall recommended best practices, all of which assist with understanding the industry and are made available as published resources by standard-setting organizations such as:

- The American National Standards Institute (ANSI)
- American Petroleum Institute (API)
- American Society of Heating, Refrigeration, and Air Conditioning Engineers (ASHRAE)
- American Society of Mechanical Engineers (ASME)
- American Society of Testing and Materials (ASTM)
- National Fire Protection Association (NFPA)
- Instrument Society of America (ISA)
- International Institute of Ammonia Refrigeration (IIAR)
 - IIAR 9, published in 2021, discusses minimum safety requirements for existing ammonia refrigeration systems, including standards for machinery room eyewash/safety showers (Section 7.3.8) and machinery room entrances and exits (Section 7.3.9), among other guidelines for ammonia refrigeration.
- The Chlorine Institute (CI)
 - CI provides guidance documents that discuss personnel protective equipment (Pamphlet 65), chlorine scrubber systems (Pamphlet 89), an operators chlorine handbook (Pamphlet 155), and other additional guides for chemical properties, safe handling, use, and transportation.

9. OBSERVATION:

HWG oversight inspections were conducted with three different lead inspectors from the CUPA. On January 15, 2025, an oversight inspection was conducted at CERS ID 10209052, a Household Hazardous Waste Collection Facility (HHWCF) and on January 16, 2025, an oversight inspection was conducted at CERS ID 10210552, a non-RCRA Small Quantity Generator (SQG) and Conditionally Exempt Commercial Laundry (CE-CL).

Prior to each inspection, inspectors demonstrated adequate pre-inspection preparation, including using both CERS and the DTSC Hazardous Waste Tracking System (HWTS) to gather information on the activities and hazardous waste shipments of each facility inspected. Previous inspection reports and other regulatory guidance documents, such as the DTSC HHWCF Checklist were also utilized. Additional research could have been conducted regarding requirements for secondary containment for HW containers at an HHWCF. Overall, the pre-inspection preparation was appropriate for the nature of the facilities.

During each inspection, the inspectors clearly asked for and obtained consent to inspect and explained the purpose of the inspection. A full walkthrough of both facilities was conducted, and the inspectors observed all areas where hazardous waste was generated and managed. Each inspector took notes and asked pertinent questions while maintaining control of the inspection. For the HHWCF facility inspection, the inspector did not adequately review engineer

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assessments for HW tanks and container storage areas. All other documents required of HHWCF, LQG, and CE-CL facilities were requested and reviewed or noted as violations when not available for review. Overall, the inspections were handled professionally and were conducted in a timely manner.

The violations observed during each inspection were reviewed with the facility representative(s) upon conclusion of each inspection, however a written notice of the violations was not provided before leaving the site. Violations later cited in each of the inspection reports contained the inspector's observations and corrective actions.

In terms of understanding HWG Program requirements, the lead inspectors demonstrated each is well versed in a range of hazardous waste topics, including the following, that were encountered and applied during the oversight inspections: hazardous waste determinations, hazardous waste treatment, manifest requirements, and general HWG requirements.

RECOMMENDATION:

For more complex HWG facilities, such as facilities that perform onsite treatment, inspectors should apply a process-based approach when conducting the inspection. For example, conducting the inspection from the beginning of the processes at a facility and following the processes through the end of the inspection (i.e., starting with the inputs to the process and ending with the outputs of the process). The process-based inspection guide prepared by U.S. EPA is a helpful reference and is available at <https://www.epa.gov/sites/default/files/documents/process-basedguide.pdf>.

Review of tank assessment requirements and secondary containment requirements at HHWCF should also be conducted ahead of inspections at HHWCF's. Inspectors should consider providing education to facilities on the new GIR requirements or be citing violations for non-compliance with the new regulations.

10. OBSERVATION:

A written summary or notice of all violations (NOV) is not routinely provided to the facility operator prior to leaving the facility at the conclusion of the inspection. The existing procedure of the CUPA is to issue a full report via email, usually within 1-2 business days.

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.

An NOV or other applicable form may be developed, to summarize 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.