

July 7, 2025

Daniel Pistor
Deputy Chief
Sunnyvale Department of Public Safety
505 W. Olive Avenue, Suite 150
Sunnyvale, California 94086-7651

Dear Mr. Pistor:

During August 2024, through April 2025, CalEPA and the Unified Program state agencies conducted a performance evaluation of the Sunnyvale Department of Public Safety 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: a program deficiency 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 the program deficiency 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, Tim Brandt, via email at Timothy.Brandt@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,

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:

Stephanie Huang
Assistant Fire Marshal
Sunnyvale Department of Public Safety
505 W. Olive Avenue, Suite 150
Sunnyvale, California 94086-7651
Shuang@sunnyvale.ca.gov

Crystal Lee
Senior Hazardous Materials Inspector
Sunnyvale Department of Public Safety
505 W. Olive Avenue, Suite 150
Sunnyvale, California 94086-7651
Clee@sunnyvale.ca.gov

Tom Henderson
UST Leak Prevention Unit and
Office of Tank Tester Licensing Manager
State Water Resources Control Board
Tom.Henderson@waterboards.ca.gov

Julie Pettijohn
Environmental Program Manager
CUPA Enforcement Branch
Department of Toxic Substances Control
Julie.Pettijohn@dtsc.ca.gov

Ryan Miya, Ph.D.
Senior Environmental Scientist, Supervisor
Department of Toxic Substances Control
Ryan.Miya@dtsc.ca.gov

cc sent via email:

Jennifer Lorenzo
Senior Environmental Scientist, Supervisor
CAL FIRE - Office of the State Fire Marshal
Jennifer.Lorenzo@fire.ca.gov

Denise Villanueva
Environmental Scientist
CAL FIRE - Office of the State Fire Marshal
Denise.Villanueva@fire.ca.gov

Brennan Ko-Madden
Senior Environmental Scientist
Department of Toxic Substances Control
Brennan.Ko-Madden@dtsc.ca.gov

Mia Goings
Senior Environmental Scientist
Department of Toxic Substances Control
Mia.Goings@dtsc.ca.gov

Kaitlin Cottrell
Environmental Scientist
State Water Resources Control Board
Kaitlin.Cottrell@waterboards.ca.gov

John Paine
Environmental Program Manager
California Environmental Protection Agency
John.Paine@calepa.ca.gov

John Elkins
Environmental Program Manager
California Environmental Protection Agency
John.Elkins@calepa.ca.gov

Melinda Blum
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency
Melinda.Blum@calepa.ca.gov

Elizabeth Brega
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency
Elizabeth.Brega@calepa.ca.gov

Julie Unson
Environmental Scientist
California Environmental Protection Agency
Julieann.unson@calepa.ca.gov

cc sent via email:

Tim Brandt

Environmental Scientist, Unified Program Evaluation Team Lead

California Environmental Protection Agency

Timothy.Brandt@calepa.ca.gov

UNIFIED PROGRAM PERFORMANCE EVALUATION PRELIMINARY SUMMARY OF FINDINGS REPORT

CUPA: Sunnyvale Department of Public Safety

2024 Evaluation Assessment: August 2024 through April 2025

Timeframe Evaluated: December 20, 2018, through June 30, 2024

Evaluation Team Members:

- CalEPA Team Lead: Tim Brandt
- DTSC: Mia Goings, Brennan Ko-Madden
- CalEPA: Julie Ann Unson
- State Water Board: Kaitlin Cottrell
- CAL FIRE-OSFM: Denise Villanueva

This Final Summary of Findings includes:

- Accomplishments, Examples of Outstanding Implementation, and 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 improvements needed.

The CUPA shall submit the first Evaluation Progress Report to CalEPA 60 days from receipt and subsequent Progress Reports in accordance with the specified due date until each Deficiency and Incidental Finding is acknowledged by CalEPA as being corrected or resolved.

With each Progress Report, the CUPA will continue to revise and/or submit any plan, policy, document, or facility information required for any Deficiency or Incidental Finding until acknowledged by CalEPA as being corrected.

Each Progress Report must be submitted to the CalEPA Team Lead via email or uploaded to the established SharePoint website. Questions or comments regarding this evaluation should be directed to the CalEPA Team Lead.

Tim Brandt

Phone: (916) 323-2204

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

The submittal date for the 1st Evaluation Progress Report is **October 10, 2025**.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

ACCOMPLISHMENTS, CHALLENGES, AND EXAMPLES OF OUTSTANDING IMPLEMENTATION

Various accomplishments and outstanding efforts, as well as challenges that impact the CUPA's overall ability to implement the Unified Program.

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

Since the 2018 CUPA Performance Evaluation, the CUPA met the mandated triennial inspection frequency for APSA tank facilities storing 10,000 gallons or more of petroleum, as well as the triennial inspection frequency for other APSA tank facilities in accordance with the Inspection and Enforcement (I&E) Plan.

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).

2. CUPA COLLABORATION WITH REGULATORY PARTNERS:

The CUPA is an active participant in a number of CUPA Forum Board (CFB) Technical Advisory Groups (TAGs), Steering Committees, Workgroups, and other collaborative entities related to the implementation and further development of the Unified Program.

In particular, the CUPA is involved in the UST, HazWaste, and HMBP TAG(s), and the development and instruction of courses at the California Unified Program Annual Training Conference.

The CUPA also participates in the Santa Clara County Chiefs Hazardous Materials Subcommittee, the Unidocs information sharing program with other regional Hazardous Materials, Hazardous Waste, and Fire Prevention/Safety regulators, and the Santa Clara County District Attorney's Environmental Enforcement Task Force.

3. UNDERGROUND STORAGE TANK (UST) PROGRAM IMPLEMENTATION:

The CUPA has maintained a 100% inspection rate for the UST Program from 2020 through 2023. At the time of the evaluation, the CUPA was on track to complete 100% of 2024 inspections. Additionally, review of UST information in CERS finds inspectors are assisting owners/operators with timely reporting, accepting accurate information, and maintaining a strong UST Program for the community. The CUPA Manager was quick to provide follow up information and very supportive of UST Program staff.

4. 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. As a result of this attention to detail, CalEPA cited no

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deficiencies and only two minor findings relating to the administrative, procedural, and reporting requirements of Title 27 during this Performance Evaluation.

5. CUPA STAFFING CHALLENGES:

The CUPA has experienced inconsistent staffing levels during this evaluation period for both inspection and administrative support positions. One of the Hazardous Materials (HazMat) Inspector positions was vacant from January to June of 2020, and the Senior HazMat Inspector position was vacant from January to October of 2022. In February of 2025, the Senior HazMat Inspector left the program, bringing the total number of CUPA inspectors down to two out of a budgeted three positions.

In addition, the Public Safety Specialist was unable to provide full support as the CUPA Technical Specialist from November 2021 to May 2024, and the Senior Office Assistant position was vacant prior to April 2020 (unknown duration), from October 2022 to November 2022, and from September 2024 to the present. Currently, the CUPA is experiencing vacancies for administrative support positions totaling 1.75 Full-Time Equivalent (FTE) hours.

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DEFICIENCIES REQUIRING CORRECTION

Deficiency “is a major deviation in implementation of one or more Unified Program elements from the expected standards set forth in statute or regulation. It is a systemic problem that could impact the safety and protection of human health and the environment.” (Cal. Code Regs., tit. 27, § 15100, subd. (k).) In addition, recommendations may be provided.

1. DEFICIENCY:

The CUPA is not consistently including all observations, citations, and factual basis for each violation cited in Hazardous Waste Generator (HWG) and/or Tiered Permit (TP) inspection reports.

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

Review of HWG inspection reports, inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information in CERS, and Notices of Violation (NOVs) finds inadequate or improper documentation of cited violations for the following facilities:

- CERS ID 10080397: Routine inspection dated September 8, 2021.
 - A Class II violation cited for failure to make a hazardous waste determination includes the following observation, “Clear liquid found in generator area waste pH strip tested and came back at a base, ~12-14. Make a determination if the liquid is a hazardous waste.”
 - Further instructions are not provided in the event the liquid is determined to be a hazardous waste.
- CERS ID 10081270: Routine inspection dated March 31, 2021.
 - The following observations should have been cited as individual violations:
 - “Used oil caddy and used coolant caddy in auto shop did not have a complete hazardous waste label affixed to it. Both caddy were full and were not being emptied to main hazardous waste storage area.”
 - “Hazardous waste area labels were all faded and illegible.”
 - Specific violations are not adequately documented relative to the corrective actions, observations and factual basis noted.
 - The observations describe two separate violations; however, both are cited as one labeling violation. Corrective actions are not included for either of the observed satellite accumulation and labeling violations.
- CERS ID 10081270: Routine inspection dated January 5, 2023.
 - Corrective actions are not included for the cited Class II violation for failing to provide manifests.
 - A Class II violation cited for exceeding accumulation time limit includes the following observation, “Failure to meet the storage time limit as stated above for the Chemistry Lab Hazardous Waste Storage Area for containers 3, 4, 7, 8, 9, and 10. Also write dates including the day and not just month and year.”

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- The observation describes two separate violations; however, both are cited as one accumulation time violation. Corrective actions are not included for the accumulation time violation.
 - There is no description of the initial accumulation date, nor how long the container(s) were on-site.
- A Minor violation cited for labeling includes the following observation, "Hazardous waste labels did not meet the minimum requirements as listed above in the following areas: Auto Shop 1. Waste coolant caddy was not labeled for emptied daily. 2. Used oil caddy had a label of 4/1/2021 but not emptied daily. Need clarification if waste coolant and used oil caddy are being used as satellite accumulation or as regular storage. Auto Shop Haz Waste Storage Area 3. Waste drums were not empty. Missing both hazardous properties/description and accumulation start dates. Chemistry Hazardous Waste Storage Area 4. Hazardous waste containers 11 and 12 were not empty but were missing accumulation start dates."
 - Corrective actions are not included for the cited violation.
- CERS ID 10081837: Routine inspection dated April 17, 2023.
 - Corrective actions are not included for 5 of 6 violations.
- CERS ID 10081837: Routine inspection dated June 17, 2024.
 - Corrective actions are not included for 3 of 4 violations.
 - E-mail correspondence between the CUPA and the facility operator provides a summary of the violations, but no corrective actions.
- CERS ID 10082542: Routine inspection dated June 1, 2021.
 - A Class II violation cited for improperly labeling a waste solvent tank includes the following observation, "The solvent tank was observed improperly labeled," and the following corrective action, "Properly label waste solvent tank."
 - The observation does not describe how the facility failed to meet the requirements of the regulations and corrective actions are not included.
- CERS ID 10441126: Routine inspection dated October 28, 2021.
 - Corrective actions are not included for a Minor violation cited for a missing hazardous waste label.
- CERS ID 10441126: Routine inspection dated May 7, 2024.
 - Corrective actions are not included for 3 of 5 violations.
 - A violation relating to Department of Transportation (DOT) training was improperly cited as a waste accumulation violation using CCR, Title 22, Section 66262.16(b)(2), formerly 66262.34(d)(2).
 - The observations noted in the inspection report state, "Representative signing the manifests has not received DOT training."
 - The observations noted in the report support citing a violation for Code of Federal Regulations, Title 49, Chapter 1, Section 173.1(b), for "Failure to ensure that each employee is training in accordance with the requirements prescribed in this subchapter."

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- A violation relating to spilled solder waste was improperly cited as a satellite accumulation violation using CCR, Title 22, Section 66262.15(a), formerly 66262.34(e).
 - The observations noted in the inspection report state, "Solder station (lead and lead free solder) have solder drippings on the ground. Area must be cleaned with all items contaminated with hazardous waste disposed of as hazardous waste."
 - The observations noted in the report support citing a violation for CCR, Title 22, Section 66262.16(b)(6)(A); CFR, Title 40, Chapter 1, Sections 262.16(b)(8) and (9), for "Failure to maintain and operate the facility to minimize the possibility of a fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water which could threaten human health or the environment."
- CERS ID 10441852: Routine inspection dated June 20, 2023.
 - Corrective actions are not included for 2 of 3 violations.
- CERS ID 10441852: Routine inspection dated June 4, 2024.
 - A Class II violation cited for hazardous waste training includes the following observation, "Hazardous waste training occurred >1 year ago."
 - Corrective actions are not included for the violation.
- CERS ID 10475851: Routine inspection dated September 12, 2022.
 - Corrective actions are not included for each of the 3 violations.
 - A violation relating to spilled solder waste was improperly cited as a satellite accumulation violation using CCR, Title 22, Section 66262.15(a), formerly 66262.34(e).
 - The observations noted in the inspection report state, "Current waste management system is inadequate to prevent solder waste from spilling onto tables. Solder waste was observed on desks throughout." The observations noted in the report support citing a violation for CCR, Title 22, Section 66262.16(b)(6)(A) and CFR, Title 40, Chapter 1, Sections 262.16(b)(8) and (9), for "Failure to maintain and operate the facility to minimize the possibility of a fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents to air, soil, or surface water which could threaten human health or the environment."
- CERS ID 10476073: Routine inspection dated January 31, 2022.
 - A Minor violation cited for labeling includes the following observation, "Throughout facility - hazardous waste storage containers have inaccurate or missing accumulation dates."
 - The observation does not describe how the facility failed to meet the requirements of the regulations and corrective actions are not included.
- CERS ID 10623112: Routine inspection dated June 26, 2020.
 - Corrective actions are not included for either of the 2 violations.

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- The following observations should have been cited as individual violations:
 - “Solder waste is collected in a bin with no lid” and,
 - “no hazardous waste label.”
 - The observations describe two separate violations; however, both are cited as one labeling violation. Corrective actions are not included for either of the observed open container and labeling violations.

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

CITATION:

California Health & Safety Code (HSC), Chapter 6.5, Section 25185(c)(2)(A)
HSC, Chapter 6.11, Section 25185
CCR, Title 22, Sections 66262.20, 66262.23(a), and 66262.34(a) and (d)
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will ensure HWG Program inspectors receive inspection report writing training to include observations, factual basis, citations and corrective actions for each violation cited in HWG and/or TP inspection reports by reviewing:

- Elements of a Violation Training (presentation provided by DTSC);
- DTSC Hazardous Waste Generator Requirements Fact Sheet
 - <https://dtsc.ca.gov/hazardous-waste-generator-requirements-fact-sheet/>
- Accumulating Hazardous Wastes at Generator Sites
 - https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf
- HSC, Section 25185(c)(2)(A)
- Universal Waste Fact Sheet:
<https://dtsc.ca.gov/universal-waste-fact-sheet/>
- Managing Used Oil Filters for Generators Fact Sheet:
<https://dtsc.ca.gov/managing-used-oil-filters-for-generators/>
- Management of Spent Lead-Acid Batteries Fact Sheet
<https://dtsc.ca.gov/management-of-spent-lead-acid-batteries/>
- Generator Summary Chart:
<https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/05/California-Generator-Chart.pdf> and
https://www.acgov.org/forms/aceh/Generator_Requirements_Summary_Chart.pdf

The CUPA will provide CalEPA with training documentation, which at minimum will include the date training and review was conducted, an outline of the training and review conducted, and a list of CUPA inspection staff 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 violation, for three HWG facilities, as requested by DTSC, that have been inspected

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after training and review 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.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

“Incidental finding is a minor deviation in implementation of one or more Unified Program elements from the expected standards set forth in statute or regulation. It is a limited, non-systemic problem.” (Cal.Code Regs., tit. 27, § 15110, subd. (f).) In addition, recommendations may be provided.

1. INCIDENTAL FINDING:

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

Review of CERS CME information between December 20, 2020, and June 30, 2024, finds the following Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facility inspections should have been reported to CERS as “HWLQG” inspections, and were incorrectly reported to CERS as HW inspections:

- CERS ID 10420222: HW inspection dated February 22, 2023.
 - Submittals accepted between August 1, 2019, and September 18, 2023, indicate that the facility reports as a RCRA LQG.
- CERS ID 10861885: HW inspection dated February 7, 2023.
 - Submittals accepted between May 8, 2021, and May 31, 2024, indicate that the facility reports as a RCRA LQG.
- CERS ID 10473295: HW inspection dated June 3, 2024.
 - 2023 Biennial Report submitted to RCRAInfo.
- CERS ID 10082542: HW inspection dated February 14, 2019.
 - 2019 Biennial Report submitted in RCRAInfo.
 - 2017 Biennial Report submitted in RCRAInfo.
- CERS ID 10457719: HW inspection dated April 17, 2019.
 - 2019 Biennial Report submitted in RCRAInfo.
 - 2017 Biennial Report submitted in RCRAInfo.
- CERS ID 10197223: HW inspection dated July 30, 2020.
 - 2019 Biennial Report submitted in RCRAInfo.
- CERS ID 10082749: HW inspection dated July 17, 2020.
 - 2019 Biennial Report submitted in RCRAInfo.
- CERS ID 10469656: HW inspection dated May 8, 2019.
 - 2019 Biennial Report submitted in RCRAInfo.
 - 2017 Biennial Report submitted in RCRAInfo.

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

CITATION:

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

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RESOLUTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan for reporting RCRA LQG facility inspections consistently and correctly to CERS. The action plan will include, at a minimum, the following:

- Identification and correction of the cause(s) of RCRA LQG facility inspections missing or incorrectly reported to CERS, including any data transfer from the CUPA's data management system or portal to CERS to ensure all RCRA LQG facility inspection information is consistently reported completely and accurately to CERS;
- Review and revision of the existing CME reporting component of the Data Management Procedure, or other applicable procedure, to ensure RCRA LQG facility inspections are consistently reported completely and accurately to CERS as "HWLQG" inspections;
- Identification of RCRA LQG facility inspections not previously reported to CERS, or reported to CERS incorrectly between December 20, 2020, and June 30, 2024;
- A process for correctly reporting RCRA LQG facility inspections identified as previously reported incorrectly to CERS, including CME information for any revised inspection reports;
- Future steps to ensure all RCRA LQG facility inspections are consistently reported to CERS as "HWLQG" inspections.

By the 2nd Progress Report, if amendments to the revised CME reporting component of the Data Management Procedure, or other applicable procedure are necessary based on feedback from DTSC, the CUPA will provide CalEPA with the amended CME reporting component of the Data Management Procedure or other applicable procedure. If amendments are not necessary, the CUPA will train CUPA personnel on the revised CME reporting component of the Data Management Procedure, or other applicable procedure. Once training is complete, the CUPA will implement the revised CME reporting component of the Data Management Procedure or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised CME reporting component of the Data Management Procedure, or other applicable procedure were necessary, the CUPA will provide CalEPA with the amended CME reporting component of the Data Management Procedure or other applicable procedure. The CUPA will train CUPA personnel on the amended CME reporting component of the Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA which will include, at a minimum, an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the amended CME reporting component of the Data Management Procedure or other applicable procedure.

By the 5th Progress Report, the CUPA will consistently and correctly report all current and previous RCRA LQG facility inspections to CERS completely and accurately as "HWLQG" inspections. The CUPA will provide a statement confirming all RCRA LQG facility inspections not previously reported to CERS, or previously reported incorrectly to CERS,

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between December 20, 2020, and June 30, 2024, are currently and correctly being reported to CERS as “HWLQG” inspections.

2. INCIDENTAL FINDING:

The CUPA is not consistently ensuring 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 the following 5 were accepted with missing or incomplete required elements:

- CERS ID 10449355
 - Inventory submitted on July 2, 2024, and accepted on July 15, 2024
 - Missing required site map elements such as evacuation staging areas.
- CERS ID 10461643
 - Inventory submitted on June 25, 2024, and accepted on July 17, 2024
 - Missing required site map elements such as evacuation staging areas.
- CERS ID 10197145
 - Inventory submitted on February 28, 2024, and accepted on March 21, 2024
 - Missing required site map elements such as evacuation staging areas.
- CERS ID 10081837
 - Inventory submitted on July 17, 2024, and accepted on July 18, 2024
 - Missing required site map elements such as evacuation staging areas.
- CERS ID 10485217
 - Inventory submitted on January 24, 2024, and accepted on March 15, 2024
 - Missing required site map elements such adjacent streets.

CITATION:

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

RESOLUTION:

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

- steps to ensure future HMBP submittals are thoroughly reviewed and contain all applicable required elements before being accepted in CERS; and
- steps to follow-up with regulated businesses whose HMBP submittals were reviewed and identified with missing or incomplete components.

By the 2nd Progress Report, the CUPA will train CUPA personnel on the action plan. The CUPA will provide CalEPA with a statement that training has been conducted.

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By the 4th Progress Report, the CUPA will ensure each HMBP facility has annually submitted a complete HMBP to CERS, or the CUPA will have applied enforcement.

3. INCIDENTAL FINDING:

The annual California Accidental Release Prevention (CalARP) performance audit report for Fiscal Years (FYs) 2021/2022, FY 2022/2023, and 2023/2024 are missing required elements.

The following elements are missing:

- an executive summary and a brief description of how the UPA is meeting the requirements of the program as listed in Section 5150.3
- a summary of enforcement actions initiated by the UPA identifying each stationary source.
- a summary of the personnel and personnel years necessary to directly implement, administer, and operate the CalARP program.
- a list of those stationary sources determined by the UPA to be exempt from the chapter pursuant to Section 25534(b)(2).

Note: The annual CalARP performance audit report is integrated into the annual CUPA self-audit report.

CITATION:

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

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the most recent annual CalARP performance audit report, including the missing elements identified above.

In each future CalARP performance audit report, accurately report the personnel years (PYs) necessary to implement the CalARP program 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).

4. INCIDENTAL FINDING:

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

On April 1, 2025, review of CERS CME information between July 1, 2018, and June 30, 2024, reflects there is no documented RTC for the following APSA Program violations:

- 8 of 27 (30%) cited between July 1, 2023, and June 30, 2024

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CITATION:

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

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 APSA tank facility with an open violation (no RTC) cited between July 1, 2023, and June 30, 2024.

- 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, a narrative of any applied enforcement or follow-up activity to ensure the facility obtains RTC.

The CUPA will prioritize follow-up actions with each facility based on the level of hazard present to public health and the environment.

5. 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 5, 2021, at UST facilities.

Review of the UST Facility/Tank Data Download report obtained from CERS on November 5, 2024, finds:

- The following UST with single-walled vent or riser piping utilizing the overfill prevention equipment (OPE) exemption:
 - CERS Tank ID 10418590-004
- 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 Audible/Visual alarms with no Ball Float or Fill Tube Shut-off Valve
 - CERS Tank ID 10402834-005
 - CERS Tank ID 10446142-001
- The following UST systems indicate "No" for Audible/Visual Alarms, Ball Floats, Fill Tube Shut-off Valve, and Exempt:
 - CERS Tank ID 10457740-001
 - CERS Tank ID 10448701-005

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

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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 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, 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. 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 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 CUPA will provide CalEPA with documentation of the applied enforcement.

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.

6. INCIDENTAL FINDING:

The CUPA is not accurately reporting UST compliance information in the Semi-Annual Report (Report 6). UST compliance inspection information in Report 6 is inconsistent with the CERS UST CME Data Download and facility files.

Review of Report 6 and the CERS UST CME Data Download obtained October 24, 2024, identifies the following USEPA technical compliance rate (TCR) violations have no documented RTC and were not reissued during the subsequent routine UST inspection:

- CERS ID 10469749
 - Overfill Prevention Equipment (OPE) Inspection completed October 8, 2021, indicates failures for Tank 1-87 and Tank 2-87.

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- o No follow-up passing results were provided. No subsequent violations for failures were issued in 2022 or 2023 for Unified Program Violation Type Number 2030026 – Overfill Prevention (USEPATCR 9b).

Note: The CUPA has been approved for paperless Report 6 reporting, where the UST inspection information in Report 6 is derived directly from CERS CME information. This omission results in inaccurate TCR submittals in Report 6, which is a requirement of the Federal Energy Policy Act of 2005 and is integral for receiving federal grant funding for California's UST Program. Additionally, multiple Routine inspections will adversely affect the TCR and UST facility inspection counts submitted in the Report 6.

CITATION:

CCR, Title 23, Section 2713(c)(4)
[State Water Board]

RESOLUTION:

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

- A thorough analysis and explanation as to how Report 6 and CERS CME information have inconsistent UST compliance inspection information; and
- A strategy to ensure the UST compliance inspection information in Report 6 and CERS will be accurately reported.

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

By the 2nd Progress report, if amendments to the revised Data Management procedure, are necessary based on the 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 an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised Data Management Procedure or other applicable procedure.

Until considered corrected, the CUPA will accurately report UST compliance inspection information in Report 6 and CERS for two consecutive Report 6 periods. Subsequent to the submission of each Report 6, the CUPA will submit facility files for three UST facilities that had a routine annual compliance inspection conducted during the respective Report 6 reporting period.

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7. INCIDENTAL FINDING:

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

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

- Provisions for ensuring sampling capability and analysis performed by a state certified laboratory pursuant to HSC, Chapter 6.5, Section 25198. 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.
- Provisions for addressing complaints, including but not limited to the receipt, investigation, enforcement, and closure of a complaint.

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

- Section X. Red Tag Procedures (USTs only)
 - Red tag procedures do not reflect the amendments to HSC that became effective January 1, 2019. The correct language includes:
 - “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 in accordance with subparagraph (A) of paragraph (2) of subdivision (a).”
- Table 5 – UST Penalties
 - Minimum penalty cites \$0, and average penalty cites \$250
 - HSC, Section 25299 (a) and (b) call for penalties no less than \$500 or no more than \$5,000 per day, per violation, per UST.

CITATION:

CCR, Title 27, Section 15200(a)

HSC, Chapter 6.7, Sections 25285(b), 25292.3(a)(2)(A) and (c)(1)(C), and 25299 (a) and (b)

[CalEPA, DTSC, State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will revise the I&E Plan to adequately incorporate and correctly address all required components. The CUPA will provide the revised I&E Plan to CalEPA.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA, DTSC, and/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 a statement to CalEPA indicating that training has been completed. Once training is complete, the CUPA will implement the revised I&E Plan.

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By the 3rd Progress Report, if amendments to the revised I&E Plan were necessary, the CUPA will train CUPA personnel on the amended I&E Plan. The CUPA will provide a statement to CalEPA indicating that training has been completed. Once training is complete, the CUPA will implement the amended I&E Plan.

8. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA did not provide CalEPA with a Formal Enforcement Summary Report for each formal enforcement case that received a final judgement.

Review of CERS CME information between December 20, 2018, and June 30, 2024, finds Formal Enforcement Summary Reports were not provided for the following formal enforcement cases:

- CERS ID 10082542: enforcement dated April 22, 2019
- CERS ID 10447543: enforcement dated October 2, 2019
- CERS ID 10446142: enforcement dated November 4, 2020
- CERS ID 10418590: enforcement dated July 14, 2021
- CERS ID 10476064: enforcement dated September 1, 2021
- CERS ID 10449355: enforcement dated November 18, 2021
- CERS ID 10861885: enforcement dated February 23, 2022
- CERS ID 10082542: enforcement dated March 13, 2023

CITATION:

CCR, Title 27, Section 15290(a)(5)
[CalEPA]

RESOLUTION: COMPLETED

During the Evaluation, the CUPA submitted Formal Enforcement Summary Reports to CalEPA for each of the enforcement actions identified above as having received a final judgement.

Going forward, the CUPA will ensure a Formal Enforcement Summary Report is completed and provided to CalEPA within 30 days of any future final judgment being issued. The following information relates to the completion and submittal of a Formal Enforcement Summary Report:

- The Formal Enforcement Summary Report template is available at: <https://calepa.ca.gov/wp-content/uploads/sites/6/2016/10/CUPA-Documents-eReporting-Template-ADA-05.2019.pdf?emrc=d24388>
- Instructions for completing the Formal Enforcement Summary Report template are available at: https://calepa.ca.gov/wp-content/uploads/sites/6/2016/10/CUPA-Documents-eReporting-Instructions_9.9.2021.pdf?emrc=dc4518
- Completed Formal Enforcement Summary Reports shall be submitted via email to CUPA@calepa.ca.gov

This Incidental Finding is considered resolved.

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9. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

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 August 5, 2024, review of HMBPs submitted to CERS between June 6, 2023, and August 5, 2024, by businesses subject to Business Plan reporting requirements finds:

- 63 of 622 (10%) Business Plan facilities have not submitted a chemical inventory (including site map) or a no-change certification.
- 67 of 622 (11%) 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: COMPLETED

During the Evaluation, as of May 21, 2025, review of HMBPs submitted to CERS between March 21, 2024, and May 21, 2025, by businesses subject to Business Plan reporting requirements finds:

- 28 of 622 (5%) Business Plan facilities have not submitted a chemical inventory (including site map) or a no-change certification.
- 29 of 622 (5%) Business Plan facilities have not submitted emergency response and employee training plans or a no-change certification.

This Incidental Finding is considered resolved.

10. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The 2024 area plan is missing a required element.

Review of the 2024 area plan finds the following required element is missing:

- 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 required by Section 11135 of the Government Code per [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.

The CUPA's area plan contains the following outdated information that may benefit from improvement:

- Page 35: Reference to Cal EMA should be replaced with Cal OES.
- Pages 18, 32: Reference to the Department of Fish and Game should be replaced with the Department of Fish and Wildlife.

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Note: The area plan was last updated on August 1, 2024. The next triennial revision should be completed by August 1, 2027.

CITATION:

HSC, Chapter 6.95, Section 25503(c)

CCR, Title 19, Division 5, Article 2, Sections 5020.1 through 5020.8

[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the area plan shared with the Santa Clara County Department of Environmental Health was revised to address the missing and outdated information identified above.

This Incidental Finding is considered resolved.

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OBSERVATIONS AND RECOMMENDATIONS

Observations identify areas of Unified Program implementation that could be improved, and recommendations provide suggestions for improvement. Although the CUPA is not legally required to implement the recommendations, the CUPA's program would likely benefit from doing so.

1. OBSERVATION:

The CUPA is not consistently reviewing each Onsite Hazardous Waste Treatment Notification for accuracy. Review of CERS CME information finds the following Onsite Hazardous Waste Treatment Notifications submitted between December 20, 2018, and June 30, 2024, were not properly reviewed, processed, or authorized by the CUPA:

- CERS ID 10080397
 - 6 Permit-By-Rule (PBR) Notifications accepted between March 6, 2019, and March 29, 2024.
 - The notifications incorrectly check "Yes" to having a Facility Permit (a state or federal hazardous waste facility full permit).
 - 2 PBR Notifications accepted between March 2, 2023, and March 29, 2024
 - The notifications were submitted with an outdated certification date of February 21, 2021.
- CERS ID 10441852
 - 7 PBR Notifications accepted between March 27, 2019, and March 14, 2024.
 - The notifications incorrectly check "Yes" to having a Facility Permit (a state or federal hazardous waste facility full permit).
 - 2 notifications accepted between April 10, 2023, and March 14, 2024, submitted with outdated certification dates of March 1, 2021.
- CERS ID 10918240
 - 7 Conditionally Exempt Commercial Laundries (CE-CL)/ Conditionally Authorized (CA) Notifications accepted between March 30, 2022, and March 1, 2023
 - The notifications incorrectly check "Yes" to having a Facility Permit (a state or federal hazardous waste facility full permit).
 - A notification received on March 8, 2024, was rejected due to incorrectly checking "Yes" to having a Facility Permit

RECOMMENDATION:

Ensure all Onsite Hazardous Waste Treatment Notifications are reviewed for technical accuracy, as much as feasible, before being accepted or not accepted. Ensure certification dates are current and that facilities without Federal Permits are not incorrectly checking "Yes" to having a Facility Permit.

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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 on review of policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports between December 20, 2018, and June 30, 2024:

- CERS reflects 407 regulated HWG facilities, including 74 RCRA LQGs, and 22 Tiered Permitting (TP) facilities within the jurisdiction of the CUPA.
- CERS reflects the CUPA inspected 380 of 416 unique HWG facilities between July 1, 2021, and June 30, 2024, and conducted a total of 2,010 inspections between December 20, 2018, and June 30, 2024, consisting of 1,812 HWG routine inspections and 198 "other" HWG inspections.
 - 1,030 of 1,812 (57%) "Routine" inspections had no violations cited.
 - 782 of 1,812 (43%) "Routine" inspections had at least one violation cited.
 - In the 782 inspections conducted having at least one violation, 1,287 total violations were cited, consisting of:
 - 3 (>1%) Class I violations,
 - 588 (46%) Class II violations, and
 - 696 (54%) minor violations
- CERS reflects five formal enforcement actions for hazardous waste related violations having a cumulative total penalty amount of \$89,858.
- Inspection reports document whether consent to inspect was requested prior to beginning the inspections.
- Violation observations and comments are consistently being reported to CERS.

RECOMMENDATION:

Continue to meet the established HWG inspection frequency for the different types of HWG facilities and apply enforcement efforts as established in the I&E Plan. Continue to generate inspection reports with detailed comments for describing the factual basis for cited violations, ensuring a detailed description of observations and factual basis for each cited violation is included and reported to CERS, to support any applicable enforcement efforts. Ensure that inspection reports include clear instructions for return to compliance and discuss violations with facility operators prior to concluding an inspection. As needed, follow up with facilities that have not obtained RTC by the scheduled RTC date and apply enforcement, per the I&E Plan.

3. OBSERVATION:

Review of the local ordinance finds references to HMBP and CalARP regulations and statutes are inaccurate, including but not limited to the following:

- Charter of the City of Sunnyvale, Title 16, Chapter 16.52, Section 16.52.5001 (Hazardous Materials: general)
 - The reference to Title 19, Division 2, Chapter 4 should be updated to Title 19, Division 5, Chapter 1.

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- Charter of the City of Sunnyvale, Title 20, Chapter 20.10, Section 20.10.080 (Enforcement)
 - The reference to the Health & Safety Code, Section 25514.5 should be updated to Section 25515.2.

RECOMMENDATION:

Update the local ordinance to reflect accurate references to CCR, Title 19 and HSC for the HMBP and CalARP Programs.

4. OBSERVATION:

The I&E Plan contains information that is inaccurate and may benefit from improvement.

- Page 1: The list of Unified Program elements is missing the Hazardous Materials Management Plans (HMMP) and Hazardous Materials Inventory Statements (HMIS) requirements, which are consolidated with the HMBP requirements to streamline the regulatory requirements for regulated facilities.
- Pages 1 and 14: Change Above Ground Storage Tank Program (AST) to Aboveground Petroleum Storage Act (APSA) Program.
- Page 2: HSC, Section 25270.4.5(b)(2) is incorrectly referenced as the authority to inspect APSA tank facilities storing more than 10,000 gallons of petroleum. The appropriate citation is Section 25270.5(b). HSC, Section 25270.4.5(b)(2) may be referenced for periodically inspecting conditionally exempt APSA tank facilities. Change Above Ground Storage Tank (AST) Facilities to APSA facilities.
- Page 8: An RTC timeframe is not included for the APSA Program. There are no established RTC times for APSA violations. However, when cited with a minor violation, Unified Program regulated facilities, including APSA tank facilities, have 30 days from the date of the notice to return to compliance in accordance with HSC, Section 25404.1.2(c)(1).
- Pages 14 and 29: HSC, Section 25270.5 is incorrectly referenced as APSA violations. Use HSC, Chapter 6.67 (commencing with Section 25270).
- Page 41: HSC, Section 25270.12.1(a) is incorrectly referenced as APSA violations. Replace Section 25270.12.1(a) with Chapter 6.67 (commencing with Section 25270). The penalty amounts for violations of APSA are described in Sections 25270.12 and 25270.12.1.

RECOMMENDATION:

Update the I&E Plan as indicated above.

5. OBSERVATION:

As of August 5, 2024, the CERS reporting requirement is currently set as "APSA Applicable" for 102 APSA tank facilities for the CUPA.

The CUPA's data management system identifies 97 APSA tank facilities, including 9 facilities that have aboveground petroleum storage capacity of 10,000 gallons or more

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and 88 facilities that have aboveground petroleum storage capacity of 9,999 gallons or less.

- 95 APSA tank facilities are identified in both CERS and the CUPA's data management system.
- 7 tank facilities within the CUPA's jurisdiction are reported as "APSA Applicable" in CERS but are not identified as an APSA tank facility in the CUPA's data management system.
- 2 tank facilities are identified as APSA tank facilities in the CUPA's data management system but are not identified in CERS as APSA facilities.

RECOMMENDATION:

Complete the reconciliation of the APSA Program information in the CUPA's data management system with CERS to ensure all APSA tank facilities are consistently identified in the CUPA data management system and in CERS.

6. OBSERVATION:

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

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template to use the current 2023 version, when an HMBP is submitted in lieu of a tank facility statement. The current template is available in CERS, on the CERS Central – Business webpage at <https://cers.calepa.ca.gov/businesses/> and the CalEPA Unified Program Publications and Guidance webpage at <https://calepa.ca.gov/cupa/publications/>.

7. 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 10466908 with four single-walled USTs at a motor vehicle fueling facility
- CERS ID 10468534 with one single-walled Emergency Generator at a government owned facility

Note: The CUPA issues UST Operating permits every 5 years. SW UST systems that are required to be permanently closed will not be lawfully permitted to operate beginning January 1, 2026.

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. Amend permit validity dates of SW UST systems that currently extend beyond the

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January 1, 2026, closure requirement. Additionally, confirm all single walled safe suction piping listed in CERS meets the exemption criteria.

8. OBSERVATION:

Review of the UST Facility Search report obtained from CERS on October 29, 2024, finds CERS ID 10447543 has not had an accepted UST Submittal for the tank removal that took place on May 1, 2024. The following UST Submittals were rejected as follows:

- July 11, 2024
 - "This submission was not reviewed because a more recent submission has been received. This is an administrative action, not a determination that the data/documents do not meet state or local reporting requirements."
- September 10, 2024
 - "Please update type of action for USTs from: UST Permanent Closure on Site to UST removal."
- October 10, 2024
 - "Incorrect information listed for UDCs"

RECOMMENDATION:

Continue to provide reminders to Owners and Operators submitting UST removal information in CERS to do so in a timely manner. Ensure all EPA Act, Report 6, and UST compliance inspection information is accurate. This tank will be reporting as an active UST Facility until it has had an accepted UST Submittal outlining the removal.

9. OBSERVATION:

On January 27, 2025, two HWG oversight inspections were conducted, with one inspector. The inspector was well prepared and reviewed relevant information prior to each inspection. The inspector prepared for each inspection by reviewing past inspection reports, previous violation history, and previous accepted submittals in CERS to ensure completeness, to ensure that the facility had a current tank assessment where applicable, and to review the flow process. Additionally, the inspector reviewed RCRAInfo and the DTSC Hazardous Waste Tracking System (HWTS) to verify generator status, confirm that the EPA ID number was active, note the number of manifests in each of the previous three years, and review the Biennial Report and Quick Reference Guide. The pre-inspection preparation activities were appropriate for the facilities being inspected.

The first inspection was conducted at CERS ID 10176193, a Conditionally Authorized/RCRA large quantity generator that manufactures semiconductor chips for electronics and flat panel displays for computers, smartphones, televisions and solar products. The inspector asked for consent to inspect before beginning the inspection and conducted a thorough walkthrough of the facility that covered all hazardous waste storage areas and points of generation. The inspector asked questions to better understand the facility operations and determine compliance, conducted a thorough document review onsite, and identified all existing violations. The inspector clearly documented all violations and appropriate corrective actions in the inspection report.

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The second inspection was conducted at CERS ID 10467289, a small quantity generator that manufactures semiconductor chips. The inspector was well prepared, built a rapport with the facility operator and asked for consent to inspect before beginning the inspection. The inspector conducted a thorough document review and a thorough walkthrough of the facility. No HWG Program violations were noted during the inspection.

The CUPA inspector displayed extensive knowledge of HWG regulations and statute which resulted in complete and thorough compliance inspections. The inspections were handled professionally and conducted in a timely manner, and the inspector provided a copy of the inspection report to the corresponding facility operators prior to the conclusion of each site visit. The inspector clearly described violations to the facility operators, the reasoning behind violation classifications, and corrective actions. Interactions between the inspector and facility operators were professional and courteous.

RECOMMENDATION:

Continue with current pre-inspection and inspection procedures. When writing inspection reports, ensure that all relevant notes and details related to violation observations are included, and that corresponding corrective actions are clearly documented. When drafting violation observations, it is best practice to describe the following, if relevant:

- Number and type of containers/tanks
- Type of waste(s) involved
- Location in the facility
- Dates (ex: training dates, initial accumulation dates, etc.)
- Any details necessary to demonstrate how non-compliance of a regulatory/statutory requirement exists.

10. OBSERVATION:

On January 22, 2025, a UST oversight inspection was conducted in conjunction with the facility compliance inspection performed during the annual monitoring system certification (AMC) and spill container (SC) testing at CERS ID 10405414. The inspector was prepared for the inspection and knowledgeable about the site construction and monitoring plan. The inspector introduced themselves to facility staff and reviewed the inspection procedures. The inspector confirmed the certifications of the technicians on site, location of sensors, and printouts of the site information prior to start of testing. The inspector kept thorough notes for the site summary.

The inspector confirmed operability of sensors and line leak detectors required for the CERS tank information and monitoring plan. Upon receipt of the results of the AMC, SC, and CUPA Inspection Report, the following was observed and reported to CERS: Unified Program Violation Library Violation Type Number 2030012 – Facility Employee Training

The inspector documented the same day RTC for the facility employee who had not yet received Designated Operator training.

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The inspector provided the facility with a summary of findings and obtained a signature from the facility representative. Compliance inspection reports were provided to the CUPA within 30 days.

RECOMMENDATION:

Continue to perform thorough UST Compliance inspections.

11. OBSERVATION:

On February 27, 2025, an HMBP inspection was conducted with the same inspector at CERS ID 10176193 and CERS ID 10467289, in conjunction with an HWG inspection.

Prior to the HMBP inspection at CERS ID 10176193, the inspector demonstrated a thorough review of CERS information and the last three HMBP inspection reports. The inspector noted being on-site at the facility nearly weekly due to the oversight of other programs the Department of Public Safety is involved in.

During the unannounced inspection, the inspector explained the purpose of the visit and requested for consent to conduct the inspection, take photographs, take samples and review any relevant compliance documentation. For safety purposes, the inspector inquired about the facilities safety protocols in the event that an emergency would occur during the inspection. A full walkthrough of the facility was conducted although the site map and hazardous materials inventory were not verified at the time of inspection. During the walkthrough, the inspector asked for Safety Data Sheets (SDSs) of a few specific materials. Training documentation was reviewed after the facility walkthrough, and it was verified that the appropriate training was being conducted annually and documented.

After the inspection was conducted, the inspector was asked how they verified the inventory and site map. The inspector explained that they looked at the SDS and the facility pulls from those to report to CERS. At the end of the inspection, CalEPA suggested to the inspector that they verify the inventory and site maps(s) during HMBP inspections.

Prior to the HMBP inspection at CERS ID 10467289, the inspector demonstrated thorough review of CERS information and the last three inspection reports.

During the unannounced inspection, the inspector explained the purpose of the visit and requested for consent to conduct the inspection, take photographs, take samples and review any relevant compliance documentation. For safety purposes, the inspector inquired about the facilities safety protocols in the event that an emergency would occur during the inspection. A full walkthrough of the facility was conducted including verifying the site map and hazardous materials inventory. Training documentation was reviewed after the facility walkthrough, and it was verified that the appropriate training was being conducted annually and documented.

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RECOMMENDATION:

Verify the inventory and site maps(s) during HMBP inspections, review HSC, Chapter 6.95 and CCR, Title 19 before conducting HMBP inspections, and attending HMBP 101 and 201 courses at the Annual Unified Program Training Conference and utilize the CUPA Forum Board Learning Management System (LMS) for HMBP review.

12. OBSERVATION:

CalEPA was unable to conduct a CalARP oversight inspection with the CUPA. However, on February 27, 2025, CalEPA discussed the implementation of the CalARP program with the CUPA inspector.

The inspector spoke about the CalARP program, the types of stationary sources and program levels regulated, the RMP review process, and the overall compliance of the stationary sources. The inspector was made aware of the requirements for hazard reviews and process hazard analyses and that the stationary sources should be consulting with the CUPA when conducting these requirements, even if the CUPA may not be able to attend.

RECOMMENDATION:

Notify program level 2 and 3 stationary sources of the requirement to consult the CUPA while conducting hazard reviews and process hazard analyses. Reviewing CCR, Title 19, Sections 5090.2 and 5100.2.
