

February 26, 2026

Clark Allen Pickell  
Director of Environmental Health  
Yuba County Environmental Health Department  
915 8<sup>th</sup> Street, Suite 123  
Marysville, California 95901-5273

Dear Mr. Pickell:

From May 2025, through February 2026, CalEPA, in coordination with the Department of Toxic Substances Control (DTSC), Office of the State Fire Marshall (OSFM), and State Water Resources Control Board (State Water Board), conducted an evaluation of the Yuba County Environmental Health Department Certified Unified Program Agency (CUPA) to assess the CUPA's performance and implementation of the Unified Program (2025 CUPA Performance Evaluation).

During the 2025 CUPA Performance Evaluation, a Preliminary Summary of Findings Report was provided to the CUPA that identified the initial findings. Please find the enclosed Final Summary of Findings Report.

CalEPA has rated the CUPA's overall performance and implementation of the Unified Program for the 2025 CUPA Performance Evaluation as *satisfactory with improvement needed*. The CUPA has done an exemplary job of maintaining a strong and commendable Unified Program performance rating.

The CUPA shall submit the first Evaluation Progress Report to CalEPA 90 days from the date of this letter (as approved by the CalEPA Secretary pursuant to California Code of Regulations, title 27, section 15330, subdivision (b)(6)(A)) and any required subsequent Progress Reports in accordance with the specified due date. 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. An Evaluation Progress Report template will be provided by the CalEPA Team Lead. Each Progress Report must be submitted to the CalEPA Team Lead via email 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](mailto: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](mailto: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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## UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Yuba County Environmental Health Department

Evaluation Assessment: May 2025 – February 2026

Timeframe Evaluated: April 1, 2022 – March 31, 2025

(Note: Timeframe evaluated by OSFM is July 1, 2020 – March 31, 2025)

Evaluation Team Members:

- CalEPA Team Lead: Kaeleigh Pontif
- CalEPA: Garrett Chan
- DTSC: Brennan Ko-Madden, Daniel Speer
- State Water Board: Michelle Suh
- CAL FIRE-OSFM: Mary Wren-Wilson

Rating: The Unified Program implementation and performance of the CUPA is considered *satisfactory with improvement needed*.

The CUPA shall submit the first Evaluation Progress Report to CalEPA 90 days after the issuance of this report (as approved by the CalEPA Secretary pursuant to California Code of Regulations, title 27, section 15330, subdivision (b)(6)(A)) and any required subsequent Progress Reports in accordance with the specified due date. 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.

The 1<sup>st</sup> Evaluation Progress Report is due on June 29, 2026.

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.

Kaeleigh Pontif

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**CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY**

**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.

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**1. CUPA PARTICIPATION:**

The CUPA Manager serves as Chair of the CUPA Forum Board, as well as Chair for the Northern Region Underground Storage Tank (UST) Training Advisory Group (TAG).

The CUPA has also been an active participant in other workgroups including:

- Local Emergency Planning Commission (LEPC) Chair
- Strategic Plan Workgroup for Attracting and Retaining Highly Skilled Staff

The CUPA's attendance and participation in these meetings and workgroups demonstrates commitment to consistency in implementing the Unified Program.

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**2. HAZARDOUS WASTE GENERATOR (HWG) PROGRAM IMPLEMENTATION:**

The CUPA has only 1 full-time inspector on staff who conducts inspections for all authorized Unified Program elements. The inspector's workload can be interrupted to provide necessary assistance in response and recovery efforts for emergencies, such as wildfires, locally and in adjacent counties. Additionally, the inspection frequency of facilities over the course of the timeframe evaluated has been affected due to the impacts of medical leave taken by the inspector. Despite these workload demands, the inspector has diligently implemented the HWG Program within the CUPA's regulated community and has made significant progress in maintaining the established inspection frequency and ensuring return to compliance (RTC) is obtained for facilities cited with violations. The work of the inspector and other CUPA staff to successfully implement the HWG Program is appreciated and recognized.

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**3. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM IMPLEMENTATION:**

Since the 2021 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 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). The CUPA also ensured APSA tank facilities submitted the APSA Facility Information to CERS.

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**CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY**

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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.

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**1. DEFICIENCY:**

The CUPA has not inspected 148 of 546 (27%) facilities subject to the HMBP Program at least once every three years. See the list of facilities that were not inspected in Attachment 1.

**CITATION(S):**

Health & Saf. Code, § 25511, subd. (b); [CalEPA]

**CORRECTIVE ACTION:**

During the evaluation, the CUPA inspected 48 of 148 facilities identified in Attachment 1; 100 facilities remain uninspected.

Inspect all HMBP facilities as identified in Attachment 1.

During each Progress Report until the Deficiency is acknowledged by CalEPA as being corrected, CalEPA will review information in CERS to verify the HMBP facilities identified in Attachment 1 have been inspected.

CalEPA recommends that the CUPA:

- Determine why the inspection frequency was not met and establish processes and/or secure resources to prevent this from reoccurring.
  - Prioritize the inspections that are the most overdue and/or based on risk to public health, safety, and the environment.
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**2. DEFICIENCY:**

The CUPA has not inspected 2 of 6 (33%) facilities subject to the California Accidental Release Prevention (CalARP) Program at least once every three years.

- CERS ID 10401304: last routine inspection on August 4, 2020
- CERS ID 10414945: last routine inspection on September 23, 2021

**CITATION(S):**

Health & Saf. Code, § 25537, subd. (a); Cal. Code Regs., tit. 19, § 5140.4; [CalEPA]

**CORRECTIVE ACTION:**

During the evaluation, the CUPA inspected 1 of 2 facilities identified above, 1 facility remains uninspected.

Inspect all CalARP facilities, as identified above.

During each Progress Report until the Deficiency is acknowledged by CalEPA as being corrected, CalEPA will review information in CERS to verify the CalARP facilities identified above have been inspected.

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CalEPA recommends that the CUPA:

- Determine why the inspection frequency was not met and establish processes and/or secure resources to prevent this from reoccurring.
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**3. DEFICIENCY:**

The CUPA has not inspected 90 of 289 (31%) facilities subject to the HWG Program at least once every three years as required by the inspection frequency established in the Inspection and Enforcement (I&E) Plan. See the list of facilities that were not inspected in Attachment 2.

Note: This Deficiency was identified in the 2021 Performance Evaluation and was corrected during the Progress Report process.

**CITATION(S):**

Health & Saf. Code, § 25201.4, subd. (b)(2); Cal. Code Regs., tit. 27, §§ 15185, subd. (a), 15200, subds. (a)(2)(A), (a)(2)(B), & (e); [DTSC]

**CORRECTIVE ACTION:**

During the evaluation, the CUPA inspected 25 of 90 facilities identified in Attachment 2; 65 facilities remain uninspected.

Note: 3 additional HWG facilities have opened since the evaluation timeframe ended and are not included in the count of 90 facilities not inspected, or the 289 total facilities identified above.

Inspect all HWG facilities, as identified in Attachment 2.

During each Progress Report until the Deficiency is acknowledged by CalEPA as being corrected, DTSC will review information in CERS to verify the HWG facilities identified in Attachment 2 have been inspected.

DTSC recommends that the CUPA:

- Determine why the inspection frequency was not met and establish processes and/or secure resources to prevent this from reoccurring.
  - Prioritize the inspections that are most overdue and/or based on risk to public health, safety, and the environment.
- 

**4. DEFICIENCY:**

The CUPA has not consistently conducted complete annual UST compliance inspections.

Noncompliance not cited as a violation in an inspection report or CERS:

- CERS ID 10129405
  - No violation for Monitoring System Certification not performed in 2022 and 2023. Violation Library Type Number 2030002 (USEPATCR 9d) was not cited.
- CERS ID 10123156
  - No violation for late Monitoring System Certification performed November 6, 2023, when the annual date is August 3. Violation Library Type Number 2030002 was not cited.

## CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

- CERS ID 10128736
  - Monitoring System Certification Form dated May 23, 2024, states "Replaced the Diesel STP 208 sensor due to it failing functionality testing." Violation Library Type Number 2030043 (USEPATCR 9d) was not cited.

Violation incorrectly cited:

- CERS ID 10123156
  - Violation Library Type Number 2030065 (USEPATCR 9d) was incorrectly cited in the inspection report dated November 3, 2023, in lieu of Violation Library Type Number 2030043 (USEPATCR 9d).

UST testing and leak detection violations have not obtained RTC within 60 days. Cited violations during the following years have not obtained RTC:

- 2023
  - 2 of 13 (14%)
- 2024
  - 4 of 10 (40%)

As identified below, the CUPA's Technical Compliance Rate (TCR) was consistently higher than the California average, which may indicate that the CUPA is not citing or not observing violations:

- January – June 2023
  - CUPA: 77.3%
  - CA Avg: 60.4%
- July – December 2023
  - CUPA: 80.0%
  - CA Avg: 60.0%
- January – June 2024
  - CUPA: 76.2%
  - CA Avg: 61.8%
- July – December 2024
  - CUPA: 86.4%
  - CA Avg: 59.4%

UST construction and inspection information was inconsistent:

- CERS ID 10122490
  - Monitoring System Certification Forms dated September 1, 2022, and August 15, 2024, cite 409 sensors being used in Section 6 for all three USTs, however, CERS cites 407 sensors
- CERS ID 10123141
  - Monitoring System Certification Forms dated August 30, 2022, August 21, 2023, and August 20, 2023, marked "Yes"" for "Does the flow of fuel stop at the dispenser if a release is detected in the under dispenser containment," however, CERS cites 208 sensors
- CERS ID 10127800
  - CERS states no corrosion protection, however tanks are steel
  - CERS states no UDC Panel Manufacturer and UDC Panel Model #, however UDCs are on site

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- CERS ID 10128736
  - CERS states no UDC Panel Manufacturer and UDC Panel Model #, however UDCs are on site

UST testing documents indicate International Code Council (ICC) technicians did not use required forms:

- CERS ID 10172821
  - Overfill Prevention Equipment (OPE) Inspection Form dated May 31, 2022
- CERS ID 10123108
  - Monitoring System Certification Form dated September 13, 2022
- CERS ID 10127800
  - Monitoring System Certification Form dated February 14, 2023

UST facility files indicate the service technician had no training and/or the ICC certification of the technician was expired prior to conducting the UST testing:

- CERS ID 10122490
  - Monitoring System Certification Form was completed September 1, 2022, by a technician with an ICC Certification that expired on February 17, 2022
  - Spill Containment Testing Report Form was completed September 1, 2022, by a technician with an ICC Certification that expired on February 17, 2022
- CERS ID 10123156
  - Monitoring System Certification Form was completed August 9, 2022, by a technician with an ICC Certification that expired on August 2, 2022
  - Spill Containment Testing Report Form was completed August 9, 2022, by a technician with an ICC Certification that expired on August 2, 2022

Note: This Deficiency was identified as a combination of Deficiencies in the 2021 Performance Evaluation, which were partially corrected during the Progress Report process.

#### **CITATION(S):**

Health & Saf. Code, §§ 25288, subd. (b), 25299; Cal. Code Regs., tit. 23, §§ 2637, 2637.1, 2637.2, 2638, 2711, subd. (d), 2713, subds. (c) & (d), 2715, subd. (f)(2); [State Water Board]

#### **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report and with each subsequent Progress Report until the Deficiency is acknowledged by CalEPA as being corrected, submit UST facility records, including the most recent annual UST compliance inspection report, and associated testing and leak detection documents, and all enforcement correspondence between the CUPA and the UST owner/operator for the three most recently inspected UST facilities.

State Water Board recommends that the CUPA:

- Determine why complete annual UST compliance inspections have not been consistently conducted.
- Establish procedures and develop tools to ensure complete annual UST compliance inspections are conducted and compliance, monitoring, and enforcement (CME) information is correctly reported to CERS
- Identify types and frequency of training for conducting complete UST inspections. The CUPA may also request additional training from the State Water Board.
- Revise the I&E Plan or other applicable procedure, to establish a process for:
  - Conducting complete annual UST compliance inspections at all UST facilities.

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- Reviewing and following up with UST testing and leak detection documents submitted by UST owners or operators as part of the annual UST compliance inspection.
  - Documenting observed non-compliance identified during annual UST compliance inspections in UST compliance inspection reports.
  - Reporting all inspections, noncompliance identified in inspection reports, and CME information to CERS.
  - Conducting on-site annual UST compliance inspections to witness the monitoring system certification and visually inspect all UST required components.
  - Conducting remote annual UST compliance inspections when the CUPA is not on-site and cannot witness the monitoring system certification and visually confirm all UST requirements are met.
  - Rejecting documentation that is incomplete or requires correction before accepting;
  - Ensuring and confirming equipment manufacturer certifications of technicians conduct testing.
  - Ensuring accurate USEPA TCR reporting.
- 

#### **5. DEFICIENCY:**

The local ordinance, Chapter 7.08 – Underground Storage Tanks, is inconsistent and less stringent than state law as detailed in the 2021 Performance Evaluation Final Summary of Findings Report.

Note: This Deficiency was identified in the 2021 Performance Evaluation and was considered closed, not corrected during the Progress Report process as the CUPA deferred revision of the local ordinance to the finalized rewrite of Chapter 16.

#### **CITATION(S):**

Health & Saf. Code, §§ 25295, 25299.2, 25299.3; Cal. Code Regs., tit. 23, §§ 2620 subd. (c), 2652, 2671, 2711 subd. (c); [State Water Board]

#### **CORRECTIVE ACTION:**

Do not implement the provisions of the local ordinance identified above that are less stringent or inconsistent with state law. If the CUPA plans to make any additional changes to the ordinance that modify the construction, monitoring, or testing provisions to California Code of Regulations, title 23, chapter 16, the CUPA will provide the State Water Board with an opportunity to review.

By the 1<sup>st</sup> Progress Report and with each subsequent Progress report until the Deficiency is acknowledged by CalEPA as being corrected:

- submit an update on the status of the local ordinance being amended, or repealed.
- submit a copy of the amended local ordinance to the State Water Board for review.

State Water Board recommends that the CUPA:

- Develop an action plan and timeline to amend or repeal the local ordinance.
  - After the ordinance has been amended or repealed, notify UST owners and operators of the change in the law.
  - Review the State Water Board guidance document outlining the new requirements for local ordinances and regulations as a result of the Chapter 16 rewrite.
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## CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

#### 6. DEFICIENCY:

The CUPA issued UST Permits, under the Unified Program Facility Permit (UPFP), that included components that are inconsistent with applicable statutes and regulations:

- UPFP, Page 1: does not include specific code sections:
  - Health and Safety Code, sections 25280-25296; and 25298-25299.6
  - California Code of Regulations, title 23, sections 2610-2717.7 (UST Regulations)
- UPFP, Page 2 states "This permit may be suspended or revoked by the Health Officer for cause"
  - The UST permit cannot be suspended.
- UPFP, Page 2 states "This permit is not transferable and becomes void upon sale or change of operator."
  - The UST permit is transferable.
- UPFP, Page 2 states "This permit shall be displayed in public view in the facility."
  - The UST Regulations require the permit to be readily accessible at the facility.
- UST Permit, Page 1 states "Permits to operate are not transferable and may be suspended or revoked for cause"
  - The UST permit is transferable and cannot be suspended.
- UST Permit, Page 2 states "The permit holder must notify the CUPA within 30 days of any changes to the permit, ownership of tanks, chapter of operator, or change to the UST systems"
  - This is inconsistent with UST Regulations, as it combines requirements from multiple sections.
- UST Permit, Page 2 states "Owner must obtain a State Board of Equalization UST Stage Fee Account number."
  - The correct statement is "Owner must obtain a California Department of Tax and Fee Administration number."
- UST Permit, Page 2 references HSC 6.75
  - The CUPA does not have the authority to implement cleanup of USTs as a Local Oversight Program agency, and therefore cannot cite Health and Safety Code, chapter 6.75
- UST Permit, Page 2 states "Any unauthorized release shall be reported to the CUPA within 24 hours after the release has been detected per 2652 of the Underground Storage Tank Regulations"
  - The correct statement is "Any reportable unauthorized release shall be reported..."
- UST Permit, Page 2 states "All monitoring records must be maintained on site by the operator for a period of at least three years from the date the monitoring was performed."
  - The UST Regulations allow monitoring records to be maintained on or off site at a readily accessible location if approved by the local agency, for the specified period.

Note: This Deficiency was identified in the 2021 Performance Evaluation and was corrected during the Progress Report process.

#### CITATION(S):

Health & Safe. Code §§ 25285.1, 25294, 25295, 25297.01; Cal. Code Regs., tit. 23, §§ 2651, 2652, 2711, 2712 [State Water Board]

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**CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, submit a revised UPFP and UST Permit template that address the issues identified above. A State Water Board UST Permit template is available at: [https://www.waterboards.ca.gov/water\\_issues/programs/ust/docs/permit-template2.docx](https://www.waterboards.ca.gov/water_issues/programs/ust/docs/permit-template2.docx). If needed, the CUPA may contact the State Water Board for assistance with revising the UPFP and UST Permit templates.

Once the revised UPFP and UST Permit templates are determined acceptable by the State Water Board, submit the UPFP and UST Permit issued to three UST facilities using the revised templates.

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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.

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**1. INCIDENTAL FINDING:**

The CUPA has not consistently followed up and documented RTC information in CERS for HWG facilities cited with violations. See the list of facilities with violations having no documented RTC in Attachment 3.

As of June 11, 2025, there is no documented RTC for:

- 50 of 140 (39%) cited violations, consisting of:
  - 7 of 26 (27%) Class 2
  - 43 of 111 (39%) Minor
- The average time for HWG facilities to obtain RTC (not including open violations) is 79 days
  - 72 of 140 (51%) violations did not obtain RTC within 60 days
  - 68 of 111 (61%) Minor violations did not obtain RTC within 35 days

Note: This Incidental Finding was identified in the 2021 Performance Evaluation as a Deficiency and was corrected during the Progress Report process.

**CITATION(S):**

Health & Saf. Code, §§ 25185, subd. (c), 25187.8, subds. (a)-(b) & (g)-(i), 25110.8.5, 25117.6; Cal. Code Regs., tit. 27, §§ 15185, subds. (a) & (c), 15200, subds. (a), (e), & (g); [DTSC]

**RESOLUTION:**

During the evaluation, as of August 21, 2025, RTC was obtained for 8 HWG violations identified in Attachment 3, 42 have no documented RTC.

Ensure each facility identified in Attachment 3 obtains RTC and apply enforcement as established in the I&E Plan for facilities that do not obtain RTC. Ensure RTC and enforcement actions are reported to CERS.

During each Progress Report until the Incidental Finding is acknowledged by CalEPA as being corrected, DTSC will review information in CERS to verify each violation identified in Attachment 3 has obtained RTC. In the absence of RTC, an indication as to whether formal enforcement has been initiated for any violation identified without RTC may be provided as a narrative or by utilizing Attachment 3.

DTSC recommends that the CUPA:

- Determine why facilities cited with violations have not obtained RTC and establish processes and/or secure resources to prevent this from reoccurring.
  - Prioritize RTC is obtained or enforcement is applied for facilities cited with violation(s) that pose the most risk to public health, safety, and the environment (e.g., Class I violations).
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**2. INCIDENTAL FINDING:**

The CUPA has not properly classified each HWG violation.

Violation improperly classified as minor violation:

- Exceedance of authorized accumulation time (Cal. Code Regs., tit. 22, §§ 66262.15, subd. (a)(9), 66262.16, subd. (b), 66262.17, subd. (a))
  - Economic benefit: delayed or avoided cost of transportation and/or disposal
    - 8 of 23 (35%) violations cited were classified as minor
- Failure to provide or conduct training for employees (Cal. Code Regs., tit. 22, § 66262.16)
  - Employees not familiar with management of hazardous waste and how to respond to emergencies could result in failure to (1) prevent releases of hazardous waste or constituents, (2) ensure early detection of releases of hazardous waste or constituents, and (3) perform emergency cleanup operations of, or other corrective action for, releases
  - Economic benefit: delayed or avoided cost of training
    - 5 of 6 (83%) violations cited were classified as minor

**CITATION(S):**

Health & Saf. Code, §§ 25110.8.5, 25117.6, 25404, subd. (a)(3); Cal. Code Regs., tit. 22, § 66262.10; [DTSC]

**RESOLUTION:**

Ensure each violation is properly classified and apply enforcement as established in the I&E Plan.

By the 1st Progress Report, submit an inspection report citing at least one HWG Program violation for three HWG facilities that were inspected after August 27, 2025. Each inspection report will contain observations, citations, factual basis, and corrective actions to correctly identify and classify each observed HWG Program violation.

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**3. INCIDENTAL FINDING:**

The CUPA has not consistently included all observations, citations, factual basis, and corrective actions for each violation cited HWG inspection reports:

- No observations for cited violations
  - CERS ID 10154391: Inspection report dated October 10, 2024
  - CERS ID 10159665: Inspection report dated February 14, 2019
  - CERS ID 10159665: Inspection report dated June 15, 2023
  - CERS ID 10310668: Inspection report dated September 23, 2015
  - CERS ID 10310668: Inspection report dated February 17, 2022
- No corrective action for cited violations
  - CERS ID 10124359: Inspection report dated November 1, 2017

**CITATION(S):**

Health & Saf. Code, § 25185, subd. (c)(2)(A); [DTSC]

**RESOLUTION:**

By the 1st Progress Report, submit an inspection report citing at least one HWG Program violation for three HWG facilities that were inspected after August 27, 2025. Each inspection report will

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contain observations, citations, factual basis, and corrective actions to correctly identify and classify each observed HWG violation.

DTSC recommends that the CUPA:

- Document consent in each inspection report. Consent was not documented in any of the inspection reports identified above.
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**4. INCIDENTAL FINDING:**

The I&E Plan is incomplete and inaccurate:

- Page 33 states "No owner or operator of an underground storage tank system may deposit or allow for the deposit of any petroleum product into a tank which has a red tag affixed."
  - The following statement from Health and Safety Code section 25292.3 must also be included: "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"
- Page 41 states "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 \$5,000 for each underground storage tank for which notification is not given or false information is submitted."

The following citations are missing:

- Page 3 does not cite the specific Health and Safety Code and California Code of Regulation sections
  - The citations are:
    - Health and Safety Code sections 25280-25296 and 25298-25299.6
    - California Code of Regulations, title 23, sections 2610-2717.7 (UST Regulations)

The following citation is inaccurate:

- Page 33 cites Health and Safety Code section 2717.3
  - The correct citation is California Code of Regulations, title 23, section 2715.3

**CITATION(S):**

Cal. Code Regs., tit. 27, § 15200 [DTSC, State Water Board]

**RESOLUTION:**

By the 1st Progress Report, submit a revised I&E Plan that addresses the incomplete and inaccurate information identified above.

State Water Board recommends that the CUPA:

- Review the State Water Board guidance document outlining the new requirements for local ordinances and regulations as a result of the Chapter 16 rewrite.
  - Train staff on the revised I&E Plan once the Incidental Finding is acknowledged by CalEPA as being corrected.
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**5. INCIDENTAL FINDING:**

The CUPA has not consistently cited and/or required the correction of construction UST violations identified in State Water Board Local Guidance (LG) Letter 150-3 dated February 2021.

UST Facility/Tank Data Download report (July 25, 2025) indicates:

- UST systems installed between July 1, 1987, and June 30, 2003, with single-walled vent and/or riser/fill piping and equipped with only audible/visual alarms with no ball float or fill tube shut-off valve:
  - CERS Tank IDs 10122961-001, -002, -003
  - CERS Tank IDs 10399768-001, -002, -003

**CITATION(S):**

Cal. Code Regs., tit. 23, §§ 2635, subd. (d), 2636, subd. (a), and/or 2665, subd. (c); [State Water Board]

**RESOLUTION:**

Ensure UST owners/operators of each facility identified above installs and corrects OPE or secondarily contains vent and riser piping and apply enforcement (e.g., revocation of UST Permit and issuance of red tag), as established in the I&E Plan for facilities that do not obtain compliance. Ensure RTC and enforcement actions are reported to CERS.

By the 1st Progress Report, and with each subsequent Progress Report until the Incidental Finding is acknowledged by CalEPA as being corrected, submit a list of UST facilities utilizing the incorrect or incomplete OPE construction including CERS Tank IDs.

During each Progress Report until the Incidental Finding is acknowledged by CalEPA as being corrected, the State Water Board will review information submitted by the CUPA and in CERS to verify each UST has the correct method of OPE installed or vent and riser piping is secondarily contained.

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**6. INCIDENTAL FINDING:**

The CUPA has not ensured UST Program related information in CERS is accurate and complete.

UST Facility/Tank Data Download report (July 25, 2025):

- 11 of 67 (16%) VPH systems with Secondary Containment Testing listed as "Yes"
- 3 of 11 (27%) Single-walled piping listed as "Yes" for continuous secondary monitoring
- 7 of 7 (100%) Single-walled steel UST that is not marked as "Steel + Internal Lining" or "Steel + Bladder" under Tank Construction

See the list of inaccurate and incomplete information in CERS in Attachment 4.

**CITATION(S):**

Health & Saf. Code, §§ 25290.1; Cal. Code Regs., tit. 23, §§ 2632 subd. (d), 2634, subd. (d), 2711, subd. (d); [State Water Board]

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**RESOLUTION:**

During each Progress Report until the Incidental Finding is acknowledged by CalEPA as being corrected, State Water Board will review information in CERS to verify that the inaccurate information identified above has been addressed.

State Water Board recommends that the CUPA

- Determine why CERS submittals are inaccurate.
  - Review and revise the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process for UST inspection staff to review CERS UST submittal information regarding construction and leak detection requirements for accuracy and completeness based on the UST installation date, which includes the following:
    - When UST CERS submittal information is identified as incorrect, the CUPA will either:
      - Accept UST CERS submittals with minor errors utilizing a condition set in CERS requiring the submittal to be corrected and resubmitted within a certain timeframe or;
      - Not accept UST CERS submittals and provide comments with the requirement to resubmit UST information within a specified time.
    - When the UST CERS submittal is not corrected and resubmitted within the time specified by the CUPA, the CUPA will apply enforcement per the I&E Plan.
  - Request for CERS data training from the State Water Board
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**7. INCIDENTAL FINDING:**

The CUPA has not consistently followed up and documented RTC information in CERS for APSA tank facilities cited with violations. See the list of facilities with violations having no documented RTC in Attachment 5.

As of May 5, 2025, there is no documented RTC for:

- 10 of 12 (83%) violations cited between July 1, 2021, and June 30, 2022, including:
  - 1 violation cited for failure to prepare an SPCC Plan

**CITATION(S):**

Health & Saf. Code, §§ 25270.4.5, subd. (a); Cal. Code Regs., tit. 19, § 1612, subds. (d), (e) & (f); Cal. Code Regs., tit. 27, §§ 15185, subds. (a)-(c), 15200, subds. (a), (e), & (g); [OSFM]

**RESOLUTION:**

Ensure each APSA tank facility identified in Attachment 6 obtains RTC and apply enforcement as established in the I&E Plan for facilities that do not obtain RTC. Ensure RTC and enforcement actions are reported to CERS.

During each Progress Report until the Incidental Finding is acknowledged by CalEPA as being corrected, OSFM will review information in CERS to verify each violation identified in Attachment 7 has obtained RTC. In the absence of RTC, an indication as to whether formal enforcement has been initiated for any violation identified without RTC may be provided as a narrative or by utilizing Attachment 5.

# CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

## UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

OSFM recommends that the CUPA:

- Determine why facilities cited with violations have not obtained RTC and establish processes and/or secure resources to prevent this from reoccurring.
- Prioritize RTC is obtained or enforcement is applied for facilities cited with violation(s) that pose the most risk to public health, safety, and the environment (e.g., Class I violations).

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### 8. INCIDENTAL FINDING:

The CUPA has not inspected 20 of 81 (25%) Aboveground Petroleum Storage Act (APSA) tank facilities that store less than 10,000 gallons of petroleum and APSA tank facilities that are conditionally exempt from Spill Prevention, Control, and Countermeasure (SPCC) Plan requirements at least once every three years for compliance with APSA Program requirements.

See the list of facilities that were not inspected in Attachment 6.

#### CITATION(S):

Health & Saf. Code, §§ 25270.4.5, subd. (b)(2), 25270.5, subd. (b); Cal. Code Regs., tit. 19, §§ 1609 & 1610; Cal. Code Regs., tit. 27, §15200, subd. (a)(2)(F); [OSFM]

#### RESOLUTION:

During the evaluation, the CUPA inspected 1 of 21 APSA tank facilities identified in Attachment 6; 20 facilities remain uninspected.

Inspect all APSA tank facilities identified in Attachment 6, for compliance with the APSA Program.

During each Progress Report until the Deficiency is acknowledged by CalEPA as being corrected, OSFM will review information in CERS to verify the APSA tank facilities identified in Attachment 6 have been inspected.

OSFM recommends that the CUPA:

- Determine why the inspection frequency was not met and establish processes and/or secure resources to prevent this from reoccurring.
- Prioritize the inspections that are most overdue and/or based on risk to public health, safety, and the environment.

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### 9. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA has not correctly reported CME information to CERS for the HWG Program.

Cited violation in inspection report and CERS are inconsistent:

- CERS ID 10130350:
  - Inspection report dated March 22, 2023: 3 violations cited
  - CERS: 3 violations cited
  - 1 violation cited in the inspection report is inconsistent with CERS
- CERS ID 10154391:
  - Inspection report dated October 10, 2024: 4 violations cited
  - CERS: 4 violations cited
  - 2 violations cited in the inspection report are inconsistent with CERS

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- CERS ID 10310668
  - Inspection report dated February 17, 2022: 3 violations cited
  - CERS: 1 violation cited
  - 1 violation cited in the inspection report is inconsistent with CERS
- CERS ID 10159665:
  - Inspection report dated June 15, 2023: 9 violations cited
  - CERS: 7 violations cited
  - 2 violations cited in the inspection report and not in CERS

**CITATION(S):**

Health & Saf. Code, §§ 25404, subd. (e)(4), 25404.1.2, subd. (c); Cal. Code Regs., tit. 27, §§ 15187, subds. (a)(2) & (c), 15290, subd. (d); [DTSC]

**RESOLUTION: COMPLETED**

During the evaluation, the CUPA correctly reported CME information to CERS for the facilities identified above. This Incidental Finding is considered corrected.

DTSC recommends that the CUPA:

- Identify and correct the cause(s) for incorrectly reporting CME information to CERS and establish processes and/or secure resources to prevent this from reoccurring.
- Implement a quality assurance and quality control process to ensure CME information is correctly reported to CERS.
- Review and revise Data Management Procedure or other applicable procedure to ensure CME information is correctly reported to the local data management system and CERS. Train personnel and inspectors on data management procedures.

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**10. INCIDENTAL FINDING: RESOLVED DURING EVALUATION**

The CUPA did not submit a Formal Enforcement Summary report for each formal enforcement case after a final judgement:

- CERS ID # 10127800
- CERS ID # 10134436

**CITATION(S):**

CCR, Title 27, Section 15290(c); [CalEPA]

**RESOLUTION: COMPLETED**

During the evaluation, a Formal Enforcement Summary Report was submitted for each formal enforcement case listed above. The CUPA will provide CalEPA with a Formal Enforcement Summary Report within 30 days of final judgment for each future formal enforcement case. This Incidental Finding is considered corrected.

**ATTACHMENT(S)**

To obtain a copy of any attachment(s) identified in the Final Summary of Findings Report, please contact [CUPA@calepa.ca.gov](mailto:CUPA@calepa.ca.gov).