

May 4, 2026

Ronald Browder, Director
Alameda County Department of Environmental Health
1131 Harbor Bay Parkway
Alameda, California 94502-6577

Dear Mr. Browder:

From July 2025, through March 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 Alameda County Department of Environmental Health 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.

Based upon review and completion of the 2025 CUPA Performance Evaluation, CalEPA has determined the CUPA meets or exceeds overall implementation of the Unified Program. I commend you and your team for the successful implementation of the Unified Program despite the numerous challenges faced over the past several years. The CUPA has done an exemplary job of maintaining a strong and commendable Unified Program performance rating.

Pursuant to California Code of Regulations, title 27, section 15330, subdivision (b)(6), the CUPA shall submit each Evaluation Progress Report to CalEPA 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. If you would like to have specific comments remain anonymous, please indicate so on the survey.

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

Sincerely,



Jason Boetzer
Deputy Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Alameda County Department of Environmental Health

2025 Evaluation Assessment: July 2025 through March 2026

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

Note: Timeframe evaluated by OSFM is July 1, 2021, through March 31, 2025

Evaluation Team Members:

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

Rating: The Unified Program implementation and performance of the CUPA is considered to *meet or exceed* Unified Program standards.

In accordance with California Code of Regulations, title 27, section 15330, subdivision (b)(6), **the CUPA shall submit the first Evaluation Progress Report to CalEPA on August 17, 2026**. An Evaluation Progress Report template will be provided by the CalEPA Team Lead.

Any required subsequent Progress Report shall be submitted to CalEPA in accordance with the specified due date. With each subsequent 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.

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:

Jessica Snow

Phone: (916) 460-2394

E-mail: jessica.snow@calepa.ca.gov

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

ACCOMPLISHMENTS, EXAMPLES OF OUTSTANDING IMPLEMENTATION, AND CHALLENGES

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 2021 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).

2. PARTICIPATION AND LEADERSHIP IN THE UNIFIED PROGRAM:

The CUPA regularly participates in the CUPA Forum Board and various workgroups such as Technical Advisory Groups (TAGs), Steering Committees, Bay Area CUPA Forum Board Regional Meetings, and the Unified Program Administration and Advisory Group (UPAAG). The CUPA also holds leadership roles within the CUPA Forum Board, Hazardous Waste TAG, and the Annual Unified Program Training Conference Planning Committee.

3. STAFFING CHALLENGES:

As of November 2025, the CUPA is approximately 50% staffed. The 2023/2024 Self-Audit report identifies 7 positions becoming vacant, 5 of which were occupied by staff for 2 years or less. The salaries of positions within the CUPA are not competitive with the salaries of positions within other CUPAs of the Bay Area region. Thus, often times the CUPA hires staff, ensures staff are fully trained and shortly thereafter, staff leave the CUPA for employment opportunities at other surrounding area CUPAs or within the environmental health field to obtain employment at a higher paying salary. The constant cycle of recruiting, hiring, onboarding, training, offboarding, meeting with human resources, and the general administrative workload associated with hiring and staff departures significantly detracts from the time and resources allocated for implementation of the Unified Program. Additionally, the inability to effectively retain staff has a direct impact on the CUPA's ability to build on the knowledge and expertise needed to successfully implement each of the six program elements within the Unified Program, ensure compliance and apply enforcement.

4. Hazardous Waste GENERATOR (HWG) and Tiered Permit (TP) Program Implementation:

During the timeframe evaluated, the CUPA inspected 100% of TP facilities and over 90% of HWG facilities. The CUPA completed one Administrative Enforcement Order (AEO) for the HWG Program, with penalties totaling \$7,800. The CUPA's HWG and TP Program inspection reports are thorough and contain detailed observations and factual basis to support each cited violation. CUPA inspectors conducted professional and complete HWG Program oversight inspections, demonstrating in-depth understanding of the Program's regulations and statutes. Inspectors were able to promptly answer questions and clearly explain regulatory requirements when challenged by facility operators. Such an achievement is considerably notable considering the challenges the CUPA continuously encounters with staff recruitment and retention.

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5. HAZARDOUS MATERIALS BUSINESS PLAN (HMBP) PROGRAM IMPLEMENTATION:

Since the 2021 Performance Evaluation, the CUPA has met the mandated HMBP triennial inspection frequency and has ensured that facilities annually submit an HMBP to the California Environmental Reporting System (CERS). The CUPA has continued to provide assistance to the regulated community to achieve and maintain compliance by providing guidance to properly report required HMBP information to CERS.

Additionally, the CUPA provides ongoing training to the local fire departments to increase awareness of disclosed hazardous materials information to assist during responses to chemical-related incidents.

In 2024, the CUPA participated in the 25th California Unified Program Annual Conference, presented a course on the Top 10 HMBP Violations. The course also provided guidance to attendees highlighting common compliance pitfalls with HMBP reporting requirements in order to prevent recurring failures of regulated HMBP facilities. In 2025, the Chief of the Hazardous Materials Division participated in the 26th California Unified Program Annual Conference as a Track Coordinator for the HMBP Program and assisted in curating relevant and up-to-date training courses. The Chief remains active in the Unified Program Administration and Advisory Group (UPAAG) HMBP Steering Committee and various workgroups to improve resources and implementation of the HMBP Program.

6. CALIFORNIA ACCIDENTAL RELEASE PREVENTION (CALARP) PROGRAM IMPLEMENTATION

Since the 2021 Performance Evaluation, the CUPA has met the mandated CalARP triennial inspection frequency. Since 2024, the Chief of the Hazardous Materials Division has participated in the development of the CalARP Program Inspector Guidance Document and participated in the UPAAG CalARP Steering Committee, which includes various work groups.

7. NEW UNDERGROUND STORAGE TANK (UST) REGULATIONS

Changes to California Code of Regulations, title 23, division 3, chapter 16, went into effect January 1, 2026. For additional information see https://www.waterboards.ca.gov/ust/leak_prevention/chapter16/rewrite.html. It is anticipated that this will result in an additional workload for the CUPA. For example, the CUPA will need to update all documents related to UST regulations, including but not limited to, the I&E Plan, UST Operating Permits, applicable local ordinances, internal procedural documents, and documents issued to owner/operators. Additionally, UST inspectors will need to be trained on new inspection and enforcement procedures as a result of the regulatory changes.

UNIFIED PROGRAM PERFORMANCE EVALUATION
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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: CORRECTED DURING EVALUATION

The CUPA has incorrectly cited violations under the authority of the HMBP Program.

Violation Library Type Numbers 1030, 1040, 1045, 1010001, and 1020002, were cited for Fire Code and HWG program violations, see Attachment 1.

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); [CalEPA]

CORRECTIVE ACTION: COMPLETED

The CUPA is no longer citing violations of the Fire Code and HWG Program under the authority of the HMBP Program. This Deficiency is considered corrected.

CalEPA recommends that the CUPA:

- Review and revise facility inspection checklists to include applicable Violation Library Violation Type Number for each violation observed.
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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 has not consistently conducted complete annual UST compliance inspections.

Violation incorrectly cited:

- CERS ID 10601803
 - Violation Library Type Number 2030047 was incorrectly cited in the inspection report dated November 9, 2022, in lieu of Violation Library Type Number 2060020 (USEPATCR 9a)
- CERS ID 10477384
 - Violation Library Type Number 2010018 was incorrectly cited in the inspection report dated December 29, 2023, in lieu of Violation Library Type Number 2030036 (USEPATCR 9b)
- CERS ID 10189155
 - Violation Library Type Number 2030001 (USEPATCR 9d) was incorrectly cited in the inspection report dated August 16, 2023, in lieu of Violation Library Type Number 2030048 (USEPATCR 9d)

UST Testing results include complete or inaccurate information:

- CERS ID 10402984
 - Monitoring System Certification Forms dated January 12, 2022, January 12, 2023, November 15, 2023, and October 24, 2024, do not include in Section 6 for the float and chains reported to CERS.
- CERS ID 10477384
 - Monitoring System Certification Form dated December 29, 2022, does not include results in Section 6 for the 406 sensors reported to CERS

UST construction and inspection information was inconsistent:

- CERS ID 10188637
 - Monitoring System Certification Forms dated March 10, 2022, March 14, 2023, and March 7, 2024, marked “Yes” for “Does the flow of fuel stop at the dispenser if a release is detected in the under dispenser containment” however, CERS states 208 sensors.
- CERS ID 10601803
 - Monitoring System Certification Forms dated November 20, 2023, and November 19, 2024, marked “Check this box if tank gauging is used only for inventory control”, however CERS states facility has single-walled USTs.
- CERS ID 10454188
 - Monitoring System Certification Forms dated October 6, 2022, October 11, 2023, and October 15, 2024, cite LD 2000 in Section 7, however CERS states STP-MLD

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CITATION(S):

Before January 1, 2026: Health & Saf. Code, §§ 25288, subd. (b), 25299; Cal. Code Regs., tit. 23, §§ 2637, 2637.1, 2638, 2711, subd. (d), 2713, subds. (c) & (d); [State Water Board]

As of January 1, 2026: Health & Saf. Code, §§ 25288, subd. (b), 25299 Cal. Code Regs., tit. 23, §§ 2663, 2664, 2666, 2690, subd. (a), 2692, (a) & (b); [State Water Board]

RESOLUTION:

By the 1st Progress Report, and with each subsequent Progress Report, 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 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.
- Reject documentation that is incomplete or requires correction before accepting.
- Ensure accurate USEPA Technical Compliance Rate (TCR) reporting.

2. INCIDENTAL FINDING:

The CUPA has not consistently implemented proper UST temporary closure requirements:

- CERS Tank ID 10188247-004
 - Placed into temporary closure on June 25, 2024
 - Temporary Closure exceeds the 12-month limit without conducting a site assessment or being brought back into compliance.
 - Documentation of quarterly inspections and proper disposal for residual liquids, solids, or sludges not provided to CUPA
- CERS Tank IDs 10499461-001, -002 and -003
 - Placed into temporary closure in September 2019
 - Temporary Closure exceeds the 12-month limit without conducting a site assessment or being brought back into compliance.
 - Documentation of quarterly inspections and proper disposal for residual liquids, solids, or sludges not provided to CUPA

CITATION(S):

Before January 1, 2026: Health & Saf. Code, § 25298, subd. (b); Cal. Code Reg., tit. 23, §§ 2670, 2671; [State Water Board]

As of January 1, 2026: Health & Saf. Code, § 25298, subd. (b); Cal. Code Reg., tit. 23, § 2680; [State Water Board]

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RESOLUTION:

Rescind all UST temporary closure permits that do not comply with the requirements. Require the UST owner or operator to RTC or obtain a UST permanent closure permit.

By the 1st Progress Report, and with each subsequent Progress Report, submit:

- A list of all USTs in temporary closure and the following documentation for each UST facility:
 - CERS ID
 - Facility address
 - Date UST was placed into temporary closure
 - Sampling assessment allowing extension of 12 months, if temporary closure extends beyond 12 months
 - Annual UST compliance inspection reports
 - Temporary closure permit
- Documentation that each temporary closure permit identified above has been rescinded, enforcement has been applied, USTs have returned to compliance or obtained a closure permit and accurately report the status of the USTs to Report 6.

State Water Board recommends that the CUPA revise the temporary closure procedure to ensure the establishment of a process, which includes how the CUPA will:

- Promptly issue temporary closure permits upon application and adhere to the initial 12 month maximum.
- Issue temporary closure extensions for a maximum additional period of up to 12 months only after the CUPA reviews and approves a site assessment conducted by the owner or operator.
- Require documentation from the owner or operator to show inspections were conducted at least once every three months while the UST was in temporary closure.
- Review the quarterly inspections during the UST compliance inspection to ensure the owner or operator is complying with the temporary closure permit requirements.

3. INCIDENTAL FINDING:

The CUPA is not ensuring all USTs are in compliance with the design, construction, monitoring, and testing requirements.

UST facility files indicate:

- The following tanks have not completed a certification of monitoring equipment, spill containment test, overfill prevention equipment inspection, and secondary containment test since 2019.
 - CERS Tank IDs 10499461-001, -002, -003 installed on January 1, 1989

CITATION(S):

Before January 1, 2026: Cal. Code Regs., tit. 23, §§ 2637, 2637.1, 2637.2, 2638 [State Water Board]

As of January 1, 2026: Cal. Code Regs., tit. 23, §§ 2663, 2664, 2665, 2666 [State Water Board]

RESOLUTION:

Ensure UST owners/operators of the facility identified above is in compliance with design, construction, monitoring, and testing requirements, and apply enforcement (e.g., revocation of

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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 USTs utilizing the incorrect or incomplete construction and testing that includes the CERS UST Tank IDs and a narrative describing the follow-up actions and applied enforcement taken to ensure USTs are in compliance with requirements described above.

4. INCIDENTAL FINDING:

The CUPA has not accurately reported UST compliance inspection, enforcement action, and closure information in Paperless Report 6 and CERS.

- The number of red tags reported during the timeframe evaluated:
 - Report 6: 12
 - Red Tag Facility Detail Report (October 2, 2025): 31
- UST facility had more than 1 routine inspection reported to CERS:
 - 2022
 - CERS IDs 10188327, 10188375, 10188515, 10189547, 10417669, 10460557, 10489729, 10601269, 10757434
 - 2023
 - CERS IDs 10188223, 10188903, 10189007, 10402984, 10417669, 10930837
 - 2024
 - CERS IDs 10166015, 10188921, 10417669, 10457764, 10464319
- UST facility not properly closed in CERS:
 - See Attachment 2
 - Note: Column F should be “N,” column H should be “Not Applicable,” and column L should have a date entered.]

CITATION(S):

Before January 1, 2026: Health & Saf. Code, § 25404, subd. (e)(4); Cal. Code Regs., tit. 23, §§ 2713, subds. (c)(3) & (d), and (e); [State Water Board]

As of January 1, 2026: Health & Saf. Code, § 25404, subd. (e)(4); Cal. Code Regs., tit. 23, §§ 2692, subd. (a)(3), (b), & (c); [State Water Board]

RESOLUTION:

Accurately report UST compliance inspection information to CERS to ensure Report 6 is accurate.

During each Progress, the State Water Board will review Report 6 for two consecutive Report 6 reporting periods.

Ensure all improperly closed UST facilities and CERS Tank IDs are properly closed out in CERS.

State Water Board recommends that the CUPA:

- Determine why Report 6 and CERS CME information have inconsistent UST compliance inspection information and establish processes and/or secure resources to ensure accurate reporting.
- Review and revise the UST closure procedure, or other applicable procedure, to ensure CERS submittals are reviewed for accuracy before accepting closure information by International Code Council (ICC) Certified personnel.

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- Review and revise the Data Management procedure or other applicable procedure to ensure the establishment of a process, which addresses collecting, retaining, managing, and reporting inspection information to CERS, and how UST compliance information is accurately reported in Report 6.
-

5. INCIDENTAL FINDING:

The CUPA has not consistently followed up and documented return to compliance (RTC) information in CERS for HWG facilities cited with violations. See the list of facilities with violations having no documented RTC in Attachment 4.

As of September 25, 2025, there is no documented RTC for:

- 646 of 2,717 (24%) cited violations, consisting of:
 - 50 of 161 (31%) Class 1
 - 385 of 1,635 (24%) Class 2
 - 211 of 921 (41%) Minor

Note: This Deficiency was identified in the 2021 Performance Evaluation 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 each Progress Report, DTSC will review information in CERS to verify each violation identified in Attachment 4 has obtained RTC. In the absence of RTC, an indication as to whether informal or formal enforcement has been initiated for any violation identified without RTC may be provided as a narrative or by utilizing Attachment 4.

DTSC recommends that the CUPA:

- 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).
-

6. INCIDENTAL FINDING: CORRECTED DURING EVALUATION

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 3.

As of July 21, 2025, there is no documented RTC for:

- 45 of 116 (39%) violations cited between July 1, 2024, and March 31, 2025, including:
 - 1 violation cited for failure to prepare a Spill Prevention, Control, and Countermeasure (SPCC) Plan

CITATION(S):

Health & Saf. Code, §§ 25270.4.5, subd. (a) & 25404.1.2, subd. (c); 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]

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RESOLUTION: COMPLETED

During the evaluation, as of January 16, 2026, RTC was obtained for 31 APSA violations identified in Attachment 3, including 1 violation for failure to prepare an SPCC Plan; 14 have no documented RTC. This Incidental Finding is considered corrected.

7. INCIDENTAL FINDING: CORRECTED DURING EVALUATION

The I&E Plan did not include:

- A schedule of the inspection frequency for:
 - HWG Program
 - Each APSA tank facility that stores less than 10,000 gallons of petroleum
 - Each conditionally exempt APSA tank facility

The I&E Plan is incomplete:

- Uniform and coordinated application of enforcement standards that include identification of penalties and enforcement actions that are consistent and predictable for similar violations and no less stringent than California statutes and regulations.
 - Page 15, "Initial Penalty Adjustment"
 - There is no Penalty Matrix for the HWG Program
 - Definitions for potential harm and extent of deviation for the HWG Program are missing.
 - Reference to 22 CCR 66272.62 would incorporate the penalty matrix and definitions that are missing for the HWG Program.

CITATION(S):

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

RESOLUTION: COMPLETED

During the evaluation, the CUPA provided a revised I&E Plan. This Incidental Finding is considered corrected.
