CalEPA
California Environmental
Protection Agency

Gavin Newsom
Governor

Yana Garcia
Secretary for Environmental Protection

September 1, 2026

Tia Branton, Director
Tehama County Department of Environmental Health
633 Washington Street, Room 36
Red Bluff, California 96080-3355

Dear Ms. Branton:

From November 2025, through June 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 Tehama 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.

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*.

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: Tehama County Department of Environmental Health

2025 Evaluation Assessment: November 2025 through June 2026

Timeframe Evaluated: October 1, 2022, through September 30, 2025
(Note: the timeframe evaluated by OSFM is January 1, 2022, through September 30, 2025)

Evaluation Team Members:

- CalEPA Team Lead: Kaeleigh Pontif
- CalEPA: Garett Chan
- DTSC: Jessica Harris
- State Water Board: Kaitlin Cottrell
- CAL FIRE- OSFM: Denise Villanueva

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

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 December 11, 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:

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

ACCOMPLISHMENTS AND CHALLENGES

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

1. **NEW 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.

2. **ABOVEGROUND PETROLEUM STORAGE ACT (APSA) INSPECTIONS:**
   Since the 2021 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.

3. **STAFFING CHALLENGES:**
   The CUPA continues to experience significant understaffing. Though 2.4 Full Time Equivalent (FTE) positions are needed to fully implement the Unified Program, staffing levels have remained between 1.7 and 0.8 FTE. Recurring vacancies continuously challenge the ability of the CUPA to meet inspection frequencies and apply enforcement. In the interim, while the Hazardous Materials Specialist position remains vacant, an Environmental Health Aide (EHA) has been trained to review Hazardous Materials Business Plan (HMBP) submittals in the California Environmental Reporting System (CERS), as time permits.

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 ensured each facility subject to HMBP reporting requirements has annually submitted an HMBP or no-change certification to CERS as identified in Attachment 1. In summary:
   - 94 of 348 (27%) HMBP facilities have not submitted an inventory or a no-change certification
   - 99 of 348 (28%) HMBP facilities have not submitted emergency response and employee training plans or a no-change certification

   Note: This Deficiency was identified as a component of Deficiency 5 in the 2021 Performance Evaluation and was corrected during the Progress Report process.

   CITATION(S):
   Health & Saf. Code §§ 25505, subd. (a), 25508, 25508.2 [CalEPA]

   CORRECTIVE ACTION:
   During the evaluation:
   - 20 of 94 HMBP facilities submitted an inventory or a no-change certification; 74 have not submitted or certified
   - 21 of 99 HMBP facilities submitted emergency response and employee training plans or a no-change certification; 78 have not submitted or certified.

   Ensure each facility identified in Attachment 1 submits an HMBP or no-change certification to CERS, and apply enforcement as established in the I&E Plan for facilities that do not submit an HMBP or no-change certification to CERS.

   During each Progress Report, CalEPA will review information in CERS to verify each facility identified in Attachment 1 has submitted an HMBP or no-change certification. In the absence of an HMBP submittal or no-change certification, an indication as to whether informal or formal enforcement has been initiated may be provided as a narrative or by utilizing Attachment 1.

   CalEPA recommends that the CUPA develop and implement a procedure for following up with each facility that has not annually submitted an HMBP or no-change certification to CERS, including, but not limited to, notifying the facility and applying enforcement.

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2. **DEFICIENCY:**
   The CUPA has not certified to CalEPA every three years that a complete review of the Area Plan has been conducted and any necessary revisions have been made. The last certification of the Area Plan was October 2022.

   Note: This Deficiency was identified and corrected as Deficiency 14 for the June 2017 Area Plan in the 2021 Performance Evaluation.

CITATION(S):
Health & Saf. Code, § 25503, subd. (d)(2); [CalEPA]

CORRECTIVE ACTION:
By the 1st Progress Report, submit certification that a complete review of the Area Plan has been conducted and any necessary revisions have been made.

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3. DEFICIENCY:
The 2021Area Plan is missing required elements:
Pre-Emergency Planning

- Procedures, developed in consultation with the Local Health Officer, to inform medical providers regarding eligibility for reimbursement pursuant to Food and Agricultural Code, section 12997.5, where applicable.
- Provisions for access to state approved and permitted hazardous waste disposal facilities and emergency response contractors.

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.
- Provisions for informing medical and health facilities of the nature of the incident and the substance(s) involved in an incident.

Note: This Deficiency was identified as a component of Deficiency 7 in the 2021 Performance Evaluation and was not corrected during the Progress Report process.

CITATION(S):
Health & Saf. Code, § 25503, subd. (c); Cal. Code Regs., tit. 19, §§ 5020.3, 5020.4, 5020.6 [CalEPA]

CORRECTIVE ACTION:
During the evaluation, the provided update addressed the following missing required elements:
Notification and Coordination

- Procedures, developed in consultation with the Local Health Officer, to ensure access to health care within 24 hours of an exposure resulting from a pesticide drift exposure incident and up to a week after the incident.

Public Safety and Information

- Ensure that any individual is able to access services in their native language, as required by required by Government Code section 11135. The Area Plan will outline what these services are and how they will be provided in the languages identified.

By the 1st Progress Report, submit a revised Area Plan that address the missing information identified above.

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4. DEFICIENCY:
The local ordinance, *Chapter 6.28 Underground Storage of Hazardous Substances*, is inconsistent with and less stringent than state law as detailed in the 2022 Performance Evaluation Final Summary of Findings Report.

Note: This Deficiency was identified as Deficiency 11 in the 2022 Performance Evaluation and was closed, not corrected during the Progress Report process. During the 2022 Performance Evaluation Progress Report process, the CUPA provided a timeline to revise, draft and repeal the local ordinance.

CITATION(S):
Before January 1, 2026: HSC, Chapter 6.7 Sections 25299.2 and 25299.3 & CCR, Title 23, Section 2620(c)

As of January 1, 2026: Health & Saf. Code, §§ 25299.2, 25299.3; Cal. Code Regs., title 23, §§ 2620, subd. (c), and 2621 [State Water Board]

CORRECTIVE ACTION:
Do not implement the provisions of the local ordinance that are inconsistent with and less stringent than state law. If the CUPA plans to amend the LO provide the State Water Board with an opportunity to review.

By the 1st Progress Report, and with each subsequent Progress Report, submit an update on the status of the local ordinance being amended, or reappealed.

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 (https://www.waterboards.ca.gov/ust/leak_prevention/lgs/docs/lg201.pdf) outlining the new requirements for local ordinances and regulations as a result of the revisions to California Code of Regulations, title 23, chapter 16.

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5. DEFICIENCY:
The CUPA has not ensured each APSA tank facility subject to HMBP reporting requirements has annually submitted an HMBP to CERS as identified in Attachment 2. In summary:
- 38 of 93 (42%) APSA tank facilities have not submitted an inventory, including 2 that have never submitted
- 42 of 93 (46%) APSA tank facilities have not submitted emergency response and employee training plans, including 3 that have never submitted

CITATIONS:
Health & Saf. Code, §§ 25270.6, subd. (a), 25508, subd. (a)(1)(B); [OSFM]

CORRECTIVE ACTION:
During the evaluation:
- 12 of 38 APSA tank facilities submitted an inventory; 26 have not submitted.
- 14 of 42 APSA tank facilities submitted emergency response and employee training plans; 28 have not submitted.

Ensure each APSA tank facility identified in Attachment 3 submits an HMBP to CERS, and apply enforcement as established in the I&E Plan for facilities that do not submit an HMBP to CERS.

During each Progress Report, OSFM will review information in CERS to verify each APSA tank facility identified in Attachment 3 has submitted an HMBP. In the absence of an HMBP submittal, an indication as to whether formal enforcement has been initiated may be provided as a narrative or by utilizing Attachment 2.

OSFM recommends that the CUPA develop and implement a procedure for following up with each APSA tank facility that has not annually submitted an HMBP to CERS including, but not limited to, notifying the facility and applying enforcement.

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6. DEFICIENCY:

The CUPA has not consistently followed up and documented return to compliance (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 December 1, 2025, there is no documented RTC for:

- 2 of 7 (29%) violations cited between January 1, 2022, and December 31, 2022
    - 1 violation cited for failure to prepare a Spill Prevention, Control, and Countermeasure (SPCC) Plan
- 11 of 36 (31%) violations cited between January 1, 2023, and December 31, 2023
    - 1 violation cited for failure to prepare an SPCC Plan
- 2 of 9 (22%) violations cited between January 1, 2024, and December 31, 2024

CITATIONS:

Health & Saf. Code, § 25404.1.2, subd. (c); Cal. Code Regs., tit. 19, § 1612, subds. (e) & (f); Cal. Code Regs., tit. 27, §§ 15185, subds. (a)-(c), 15200, subds. (a), (e), & (g); [OSFM]

CORRECTIVE ACTION:

During the evaluation, as of May 14, 2026, RTC was obtained for 1 APSA violation identified in Attachment 3.

During each Progress Report, OSFM 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 APSA violation identified without RTC may be provided as a narrative or by utilizing Attachment 3.

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 follow-up and enforcement to ensure RTC is obtained by facilities cited with violations that pose the most risk to public health, safety, and the environment (e.g., Class I violations.

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 inspected 46 of 348 (13%) facilities subject to the HMBP Program at least once every three years. See the list of facilities that were not inspected in Attachment 4.

Note: This Deficiency was identified as a component of Deficiency 6 in the 2021 Performance Evaluation and was corrected during the Progress Report process.

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

RESOLUTION:
During the evaluation, as of June 23, 2026, the CUPA inspected 4 of 46 facilities identified in Attachment 4; 42 facilities remain uninspected.

Inspect all HMBP facilities, as identified in Attachment 4.

During each Progress Report, CalEPA will review information in CERS to verify the HMBP facilities identified in Attachment 4 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. **INCIDENTAL FINDING:**
The CUPA has not properly classified each HWG and APSA violation. Violations improperly classified as minor violations:
- 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
    - 17 of 45 (38%) violations cited were classified as minor
- Failure to prepare an SPCC Plan
  - Inconsistent with California Code of Regulations, title 19, section 1612, subdivision (d) and enforcement guidance
    - CERS ID 10457110: Inspection dated September 15, 2023

CITATION(s):
Health & Saf. Code, §§ 25110.8.5, 25117.6, 25404, subd. (a)(3); Cal. Code Regs., tit. 22, § 66260.10; [DTSC]

Health & Saf. Code, § 25404, subd. (a)(3); [OSFM]

RESOLUTION:
Ensure each violation is properly classified.

By the 1st Progress Report, train inspection staff on:

- The definitions of Class I (Health & Saf. Code, § 25110.8.5, subd. (a)), Class II (Cal. Code Regs., tit. 22, § 66260.10), and minor (Health & Saf. Code, § 25117.6) violations
- The definition of minor (Health & Saf. Code, § 25404)
- How to properly classify HWG and APSA Program violations as Class I, Class II, and minor violations, including a review of:
    - Violation Classification Guidance for Unified Program Agencies: https://calepa.ca.gov/wp-content/uploads/2020/06/Violation-Classification-Guidance-Document-accessible.pdf
    - Violation Classification – Focus on Hazardous Waste (and in particular, slides 7, 21-27, 29-36, and 135-137): https://calcupa.org/CMS15/upload-manager/presentations/CUPA-2022/6152-20542-e-3-23-violation-classification.pdf
    - Violation Classification Training Video (1 of 2): https://www.youtube.com/watch?v=yfm3_nXXiPY&list=PLC6C167034352AA02
    - Violation Classification Training Video (2 of 2): https://www.youtube.com/watch?v=cuKbIKkhQcA
    - SPCC violation classifications in the USEPA Civil Penalty Policy: https://www.epa.gov/enforcement/civil-penalty-policy-section-311b3-and-section-311j-clean-water-act-cwa-august-1998

By the 1st Progress Report and with each subsequent Progress Report, submit an inspection report citing at least one HWG Program violation for three HWG facilities that were inspected after training was completed and within the last three months. 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 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 5.

As of March 18, 2026, there is no documented RTC for:

- 40 of 265 (15%) cited violations consisting of:
    - 21 of 74 (28%) Class 2
    - 19 of 186 (10%) Minor

This Incidental Finding was identified as a component of Deficiency 4 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 5 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 5.

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4. INCIDENTAL FINDING:

The CUPA has not inspected 33 of 207 (16%) facilities subject to the Hazardous Waste Generator (HWG) Program at least once every 3 years as required by the inspection frequency established in the I&E Plan. See the list of facilities that were not inspected in Attachment 6.

Note: This Deficiency was identified Deficiency 1 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]

RESOLUTION:

Inspect all HWG facilities, as identified in Attachment 6.

During each Progress Report, DTSC will review information in CERS to verify the HWG facilities identified in Attachment 6 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.

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5. INCIDENTAL FINDING:

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 10149241
  - Annual Monitoring System Certification dated October 10, 2024, was completed late. Violation Library Type Number 2030002 (USEPATCR 9d) was not cited.
- CERS ID 10357279
  - Annual Monitoring System Certification dated April 16, 2024, states “91 LLD failed, adjusted and passed”. Violation Library Type Number 2030043 (USEPATCR 9d) was not cited.
- CERS ID 10406599
  - Spill Containment test report form dated July 31, 2025, states “Tank 2 DELVAC failed”. Violation Library Type Number 2060020 (USEPATCR 9a) was not cited.
- CERS ID 10459363
  - Secondary Containment test results dated May 15, 2023, states “Failures 87 N, 91 N, and UDCs 1-2, 3-4, 5-6, 7-8, 9-10, 11-12.” Violation Library type number 2030047 was not cited in subsequent annual inspection dated January 31, 2023.
    - Note: RTC was reported to CERS March 4, 2024.

- CERS ID 10357279
    - Financial Responsibility mechanism states "State Fund and CFO Letter". No accepted submittal with annual Chief Financial Officer information was reported to CERS in 2025. Violation Library Type Number 2010007 (USEPATCR 11) was not cited.
- CERS ID 10459753
    - Financial Responsibility mechanism states "State Fund and CFO Letter". No accepted submittal with annual Chief Financial Officer information was reported to CERS in 2023, 2024, 2025. Violation Library Type Number 2010007 (USEPATCR 11) was not cited.
- CERS ID 10472368
    - Financial Responsibility mechanism states "State Fund and CFO Letter". No accepted submittal with annual Chief Financial Officer information was reported to CERS in 2023, 2024, 2025. Violation Library Type Number 2010007 (USEPATCR 11) was not cited.
- CERS ID 10472446
    - Financial Responsibility mechanism states "State Fund and CFO Letter". No accepted submittal with annual Chief Financial Officer information was reported to CERS in 2019 through 2025. Violation Library Type Number 2010007 (USEPATCR 11) was not cited.
- CERS ID 10472449
    - Financial Responsibility mechanism states "State Fund and CFO Letter". No accepted submittal with annual Chief Financial Officer information was reported to CERS in 2023, 2024, 2025. Violation Library Type Number 2010007 (USEPATCR 11) was not cited.

UST construction and inspection information was inconsistent:

- CERS ID 10149241
    - Overfill Prevention Equipment Inspection dated September 26, 2024, does not contain results for tanks -005 and -006, however CERS cites "Fill tube shut off"
- CERS ID 10406599
    - Overfill Prevention Equipment Inspection dated October 29, 2024, does not contain results for tank -010, however CERS cites "Fill tube shut off"

CITATION(s):
Before January 1, 2026: Health & Saf. Code, § 25288, subd. (b), 25292.2; Cal. Code Regs., tit. 23, §§ 2636, subds. (f)(1) and (f)(2), 2640.1; [State Water Board]

As of January 1, 2026: Health & Saf. Code, § 25288, subd. (b), 25292.2; Cal. Code Regs., tit. 23, §§ 2640, subd. (a)(1)(D), 2652(a)(1)(B); [State Water Board]

RESOLUTION:
By the 1st Progress Report, and with each subsequent Progress, 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 3 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 CME information is correctly reported to CERS.
- Revise the I&E Plan or other applicable procedure to establish a process for:
  - Conducting complete annual UST compliance inspections at all UST facilities
  - 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.
  - Reporting all inspections, noncompliance identified in inspection reports, and CME information to CERS.
  - Ensuring UST facility owners or operators submit UST testing and leak detection documents to the CUPA within 30 days of testing.
  - Applying and documenting enforcement if the UST owner or operator fails to submit UST testing and leak detection documents to the CUPA within the required timeframe.
  - Applying and documenting enforcement if the UST owner or operator fails to submit required information to CERS in a timely manner
  - Ensuring accurate USEPA TCR

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6. INCIDENTAL FINDING:

The 2024 UST Compliance Inspection Report was received after the regulatory deadline of January 31, 2025.

- Note: 10 of 41 compliance inspections for the period of October 2024 through December 2024, were reported to CERS February 4, 2025.

CITATION(s):

Before January 1, 2026: Cal. Code Regs., tit. 23, § 2713, subd. (d)(1); Cal. Code Regs., tit. 27, § 15290, subd. (e); [State Water Board]

As of January 1, 2026: Cal. Code Regs., tit. 23, § 2692, subd. (b)(1); Cal. Code Regs., tit. 27, § 15290, subd. (e); [State Water Board]

RESOLUTION:

Ensure UST Compliance Inspection Reporting is submitted in accordance with the regulatory deadline.

During each Progress Report, the State Water Board will ensure UST Compliance Inspection Reporting has been submitted by the regulatory deadline.

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7. INCIDENTAL FINDING:

The I&E Plan did not include:

- A schedule of the inspection frequency for the APSA Program:
  - Each APSA tank facility that stores less than 10,000 gallons of petroleum, including those that store less than 1,320 gallons of petroleum and have one or more tanks in an underground area
  - Each conditionally exempt APSA tank facility

CITATION(s):

Health & Saf. Code, §§ 25270.4.5, subd. (b)(2), 25270.5, subd. (b); tit. 19, §§ 1609, 1610; [OSFM]

RESOLUTION:
By the 1st Progress Report, submit a revised I&E Plan that addresses the missing information identified above.

ATTACHMENT(S)

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