November 6, 2026

Aaron McAlister
Fire Chief
Contra Costa County Fire Protection District
4005 Port Chicago Hwy, Suite 250
Concord, California 94520

Dear Mr. McAlister:

From October 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 Contra Costa County Health Services 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.*

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: Contra Costa County Health Services Department

2025 Evaluation Assessment: October 2025 through June 2026

Timeframe Evaluated: July 1, 2022, through June 30, 2025
(Note: The timeframe evaluated by OSFM and the CalEPA HMBP/CalARP Unit is July 1, 2021, through June 30, 2025)

Evaluation Team Members:

- CalEPA Team Lead: Jessica Snow
- DTSC: Brennan Ko-Madden
- CalEPA: Alexa Kostrikin
- State Water Board: Kaitlin Cottrell
- CAL FIRE- OSFM: Mary Wren-Wilson

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 February 15, 2027.** 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

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.

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1. 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.

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2. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) IMPLEMENTATION:

Since the 2021 Performance Evaluation, the CUPA met the biennial inspection frequency, established in the Inspection and Enforcement (I&E) Plan, for APSA tank facilities with an aboveground petroleum storage capacity greater than or equal to 10,000 gallons and less than 100,000,000 gallons, which also meets 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.

In addition, the CUPA has been an active participant in committees and workgroups including:

- APSA Advisory Committee, with a CUPA staff fulfilling the co-chair role
- Inspection Report Writing Guidance Workgroup
- Instructing and developing APSA courses at the Annual Unified Program Training Conference, including a CUPA staff fulfilling the APSA track coordinator role
- APSA Technical Advisory Group (TAG)
- Unified Program Violation Library Workgroup
- Unified Program Training Framework Group

The attendance and participation of CUPA staff in these meetings and workgroups demonstrates commitment to consistency in implementing the APSA Program.

A CUPA staff member received the 'Outstanding CUPA Individual' award from the CUPA Forum Board in 2022 for their significant contributions to the APSA Program.

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3. HAZARDOUS WASTE GENERATOR (HWG) AND TIERED PERMIT (TP) PROGRAM INSPECTIONS:

The HWG and TP Program inspection reports are thorough and contain detailed observations and factual basis to support each cited violation. Inspection reports consistently include general observations that document aspects of inspections that don't directly relate to violations and provide important information regarding the operations of the facility. Such as, including but not limited to, descriptions of hazardous waste generation activities, hazardous waste generated

onsite, areas inspected, documents requested and reviewed, and conversations with facility operators. CUPA inspectors conduct professional and complete HWG facility inspections that are detailed and process-based, demonstrating an in-depth understanding of regulations and statutes. Inspectors are able to promptly answer questions and clearly explain regulatory requirements to facility operators. Inspections of Conditionally Authorized and Conditionally Exempt onsite treatment facilities are conducted more frequently than is required by statute.

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4. CUPA REORGANIZATION:

In December 2024, under the leadership structure of the Hazardous Materials Division in the Health Department, 3 new Supervising Hazardous Materials Specialists positions were successfully established and filled. This improved leadership structure allowed for 7 Hazardous Materials Specialist positions to report to each of the 3 Hazardous materials Specialist Supervisor positions, and each of the 3 Hazardous Materials Specialist Supervisor positions report to the Assistant Director. Previously, each of the 21 Hazardous Materials Specialist positions reported to the Assistant Director. This change has allowed for process improvements and over the next few years should bring many more positive changes to the overall CUPA and implementation of the Unified Program.

On June 24, 2025, the Contra Costa County Board of Supervisors, which also serves as the governing body for the Contra Costa County Fire Prevention District (CCCFPD), approved the transfer of CUPA responsibilities from the Hazardous Materials Division of the County Health Department to the CCCFPD. As required, the CUPA provided notice of the change and an application for recertification to the CalEPA Secretary. On July 1, 2026, in alignment with the effective date of the transition, the CalEPA Secretary approved the application for recertification.

Transferring the responsibility of Unified Program implementation to the CCCFPD reflects the County's effort to further streamline hazardous materials management, emergency response, and regulatory oversight under a single operational structure. The CCCFPD also serves as the County's lead agency for hazardous materials emergency response, hazardous materials storage permitting, and prevention program enforcement within the unincorporated areas and 13 cities of the County. CCCFPD has assumed all programmatic, administrative, and fiscal responsibilities for CUPA implementation, and has absorbed all CUPA inspectors, administrative staff, and supervisors. The change will require significant resources to ensure a smooth transition while also ensuring core CUPA objectives are met.

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5. ADMINISTRATIVE AND PROCEDURAL DOCUMENT QUALITY:

The administrative and procedural documents established by the CUPA consistently meet or surpass the requirements set forth in California Code of Regulations (CCR), Title 27. As a result of this attention to detail, CalEPA cited no deficiencies or findings relating to the administrative, procedural, and reporting requirements of Title 27 for this evaluation.

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 correctly reported compliance, monitoring and enforcement (CME) information to CERS for the California Accidental Release Prevention (CalARP) Program.

Cited deficiencies in inspection reports and violations in CERS are inconsistent:

- CERS ID 10014274
  - Inspection report dated December 2, 2021: 3 deficiencies and 13 partial deficiencies cited
    - CERS: 0 violations cited
  - Inspection report dated June 3, 2024: 1 deficiency and 13 partial deficiencies cited
    - CERS: 0 violations cited
- CERS ID 10481488
  - Inspection report dated March 17, 2022: 6 deficiencies and 12 partial deficiencies cited
    - CERS: 0 violations cited
  - Inspection report dated May 28, 2025: 6 deficiencies and 7 partial deficiencies cited
    - CERS: 0 violations cited
- CERS ID 10005181
  - Inspection report dated September 21, 2021: 4 partial deficiencies cited
    - CERS: 0 violations cited
  - Inspection report dated February 17, 2025: 8 partial deficiencies cited
    - CERS: 0 violations cited
- CERS ID 10019530
  - Inspection report dated August 15, 2022: 4 partial deficiencies cited
    - CERS: 0 violations cited
  - Inspection report dated September 15, 2025: 4 partial deficiencies cited
    - CERS: 0 violations cited
- CERS ID 10154059
  - Inspection report dated April 7, 2022: 2 partial deficiencies cited
    - CERS: 0 violations cited

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:

During each Progress Report, CalEPA will review information in CERS to verify the CME information for the facilities identified above has been corrected.

By the 2nd Progress Report, ensure all CME information for the CalARP Program between July 1, 2021, and June 30, 2025, is reported to CERS.

By the 2nd Progress Report and with each subsequent Progress Report:

- Submit a narrative summarizing efforts to ensure successful reporting of all CalARP CME information to CERS, including CalARP deficiencies identified as part of the Industrial Safety Ordinance
- Ensure all CME information for the CalARP Program between July 1, 2021, and June 30, 2025, is reported to CERS.

CalEPA 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.
- Ensure CUPA personnel and inspectors review the most current violations and citations of the local data management system and Violation Library Violation Numbers.
- Review and revise the 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.
- Review and revise facility inspection checklists to include applicable Violation Library Violation Type Number for each violation observed.
- Ensure all CME information for the CalARP Program prior to July 1, 2021, is reported to CERS.

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2. 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 10007800
  - Annual Monitoring System Certification dated August 26, 2024, states "91, 87-1 fill, 87-2 fill, DSL fill, 87-2 STP, 208 sensors were either lifted or laying on their sides. 87-2 fill had 20 gal of liquid in the sump and the sensor was lifted and tied up." Violation Library Type Number 2030062 (USEPATCR 9d) was not cited.
- CERS ID 10006420
  - Spill Containment Testing Report Forms dated June 27, 2023, and June 18, 2024, states "failures of T1 DSL." Violation Library Type Number 2060020 (USEPATCR 9a) was not cited.
- CERS ID 10006726
  - Annual Monitoring System Certification dated December 22, 2022, states "T1 Regular leak detector failed." Violation Library Type Number 2030025 (USEPATCR 9d) was not cited.
- CERS ID 10008052
  - Annual Monitoring System Certification dated September 18, 2024, states "91 PLLD failed." Violation Library Type Number 2030025 (USEPATCR 9d) was not cited.
  - Spill Containment Testing Report Form dated September 18, 2024, states "87-2 and 91 failed." Violation Library Type Number 2060020 (USEPATCR 9a) was not cited.
- CERS ID 10008391
  - Annual Monitoring System Certification dated October 17, 2023, states "L1 Diesel annular and L3 unleaded annular sensors failed." Violation Library Type Number 2030043 (USEPATCR 9d) was not cited

- Spill Containment Testing Report Form dated October 15, 2024, states "Diesel failure." Violation Library Type Number 2060020 (USEPATCR 9a) was not cited.

UST testing results include incomplete or inaccurate information:

- CERS ID 10006420
  - Annual Monitoring System Certification dated June 27, 2023, does not include results in section 8 for the in-tank gauging identified in CERS
- CERS ID 10006684
  - Overfill Prevention Equipment Inspection dated February 15, 2024, does not include results for "Are flow restrictors installed on vent piping that may interfere with the OPE operation?"
- CERS ID 10007209
  - Annual Monitoring System Certification dated February 6, 2023, does not include results in section 6 for the float and chains identified in CERS
  - Annual Monitoring System Certification dated February 4, 2025, does not include results in section 6 for the float and chains, and does not include results in section 8 for the in-tank gauging identified in CERS

UST construction and inspection information was inconsistent:

- CERS ID 10007095
  - Overfill Prevention Equipment Inspection dated November 13, 2023, marked "Shuts off Flow", however, CERS indicates only "Audible/Visual".
- CERS ID 10018975
  - Overfill Prevention Equipment Inspection dated August 5, 2025, marked "Shuts off Flow", however, CERS indicates "Audible/Visual and Ball Float".

UST facility files indicate the service technician had no training and/or the International Code Council (ICC) certification of the technician was missing or expired prior to conducting the UST testing:

- CERS ID 10004485
  - Annual Monitoring System Certification and Spill containment Test was completed on March 22, 2023, by a technician with ICC Certification that expired on February 25, 2023
- CERS ID 10006420
  - Spill Containment test was completed on June 18, 2024, by a technician with no ICC certification and no manufacturer certification for the spill containment.

Note: The CUPA has confirmed in subsequent test report forms that the technician's certifications were up to date, and the forms should have been rejected and resubmitted.

CITATION(S):
Before January 1, 2026: Health & Saf. Code, §§ 25288, subd. (b), 25290.1, subd. (c)(3); Cal. Code Regs., tit. 23, §§ 2630, subd.(d), 2635, subd. (b), 2636, subd. (f), 2637.2, 2711, subd. (d)[State Water Board]

As of January 1, 2026: Health & Saf. Code, §§ 25288, subd. (b), 25290.1, subd. (c)(3); Cal. Code Regs., tit. 23, §§ 2651, subd. (c)(1), 2640, subd. (e), 2652, subd. (a), 2665, subd. (a), 2613, subd. (a)[State Water Board]

CORRECTIVE ACTION:
By the 1st Progress Report, and with each subsequent Progress Report, submit UST facility records, including the most recent annual UST compliance inspection report, associated testing and release detection documents, and all enforcement correspondence between the CUPA and the UST owner/operator for the 5 most recently inspected UST facilities.

State Water Board recommends that the CUPA:

- Establish procedures and develop tools to ensure complete annual UST compliance inspections are conducted, and 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.
    - Reviewing and following up with UST testing and release detection documents submitted by UST owners or operators as part of the annual UST compliance inspection.
    - Documenting observed noncompliance identified during annual UST compliance inspections in UST compliance inspection reports.
    - Conducting on-site annual UST compliance inspections to witness the monitoring system certification and visually inspect all UST required components.
    - Ensuring accurate USEPA TCR reporting
    - Rejecting documentation that is incomplete or requires correction before accepting.
    - Ensuring and confirming equipment manufacturer certifications of technicians conduct testing.

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3. DEFICIENCY:
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 1.

As of January 6, 2026, there is no documented RTC for:

- 410 of 1,414 (29%) cited violations

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]

CORRECTIVE ACTION:
During the evaluation, as of May 26, 2026, RTC was obtained for 67 violations identified in Attachment 1.

During each Progress Report, DTSC will review information in CERS to verify each violation identified in Attachment 1 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 1.

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 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).

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4. DEFICIENCY:

The CUPA has not inspected facilities subject to the HWG Program as required by the inspection frequency established in the I&E Plan.

- Facilities that generate 250 tons or more of hazardous waste per year were not inspected at least once every year (excluding Permit-By-Rule Onsite Treatment facilities)
  - July 1, 2022, through June 30, 2023
    - 6 of 17 (35%) facilities were not inspected
  - July 1, 2023, through June 30, 2024
    - 7 of 17 (41%)
  - July 1, 2024, through June 30, 2025
    - 4 of 17 (24%)
- Facilities that generate less than 250 tons of hazardous waste per year were not inspected at least once every two years (excluding all CA & CE facilities)
  - July 1, 2022, through June 30, 2024
    - 405 of 1,598 (25%)
  - July 1, 2023, through June 30, 2025
    - 457 of 1,598 (29%)
- Very Small Quantity Generators (VSQGs) that do not generate Resource Conservation and Recovery Act (RCRA) waste were not inspected at least once every five years
  - July 1, 2019, through June 30, 2025
    - 82 of 691 (12%)

See the list of facilities that were not inspected in Attachment 2.

Note: The inspection frequency for Permit-By-Rule (PBR) Onsite treatment facilities is more stringent than the statutory requirement of an initial inspection within two years and every three years thereafter. All PBR Onsite treatment facilities were inspected at least once every three years during July 1, 2022, through June 30, 2025.

Note: This Deficiency was identified as Incidental Finding 3 in the 2021 Performance Evaluation and was corrected during the Evaluation 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:

Inspect all HWG facilities, as identified in Attachment 2.

During each Progress Report, 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

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5. DEFICIENCY:

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 October 20, 2025, there is no documented RTC for:

- 32 of 138 (23%) violations cited between July 1, 2024, and June 30, 2025, including:
  - 3 violations cited for failure to prepare a Spill Prevention, Control, and Countermeasure (SPCC) Plan
- 43 of 225 (23%) violations cited between July 1, 2023, and June 30, 2024, including:
  - 1 violation cited for failure to prepare an SPCC Plan
- 1 of 2 (50%) violation(s) cited between July 1, 2021, and June 30, 2022, 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]

CORRECTIVE ACTION:

During the evaluation, as of May 22, 2026, RTC was obtained for the following violations identified in Attachment 3:

- 1 APSA violation cited between July 1, 2024, and June 30, 2025; 31 have no documented RTC, including 3 violations for failure to prepare an SPCC Plan
- 1 APSA violation cited between July 1, 2023, and June 30, 2024, for failure to prepare an SPCC Plan; 42 have no documented RTC

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 accurately reported UST compliance inspection, technical compliance rate (TCR), and the number of regulated USTs in Paperless Report 6 and CERS.
   - UST facility had more than 1 routine inspection reported to CERS:
     - 2022
       - CERS ID 10006426
       - CERS ID 10006699
       - CERS ID 10006726
       - CERS ID 10006795
       - CERS ID 10007542
       - CERS ID 10007833
       - CERS ID 10008319
       - CERS ID 10008649
       - CERS ID 10009804
       - CERS ID 10014352
       - CERS ID 10122928
       - CERS ID 10851247
       - CERS ID 10854619
     - 2023
       - CERS ID 10005634
       - CERS ID 10005808
       - CERS ID 10006426
       - CERS ID 10007800
       - CERS ID 10008745
       - CERS ID 10014352
       - CERS ID 10129198
       - CERS ID 10153041
     - 2024
       - CERS ID 10005841
       - CERS ID 10006273
       - CERS ID 10007218
       - CERS ID 10008724
       - CERS ID 10017256
       - CERS ID 10482406
       - CERS ID 10851097
   - UST facility not properly closed in CERS:
     - CERS IDs 10005823 and 10854619
       - Duplicate tank records

- Review of Defensive Logistics Agency Comprehensive Environmental Review (December 2025) finds twelve Government Owned Tanks (GOT) installed in 1959 were not reported to CERS, do not have a CERS ID, were never closed out of the UST Program, and have not been inspected annually.
    - USEPA TCR violations that were not reissued during the subsequent routine UST inspections and are not reported in Report 6

CITATION(S):
Before January 1, 2026: Health & Saf. Code, § 25288, subd. (a); Cal. Code Regs., tit. 23, § 2713, subds. (c)(3) and (d)(1)[State Water Board]

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

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

Ensure all tanks that do not meet TCR receive a failing TCR criteria during annual compliance inspections.

By the 1st Progress Report, and with each subsequent Progress Report, submit facility files, including associated testing documentation, for five UST facilities that were inspected during the corresponding Report 6 period.

State Water Board recommends that the CUPA:

- 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.
- Train UST inspection staff on the revised Data Management Procedure or other applicable procedure.
- Ensure all annual compliance inspection information is reported to CERS by the Report 6 deadlines of March 1 and September 1.

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2. INCIDENTAL FINDING:
The CUPA has not properly processed 19 of 39 (49%) annual Onsite Hazardous Waste Treatment Notifications for Permit-By-Rule (PBR) facilities with a Fixed Treatment Unit (FTU) within 45 calendar days of receipt.

- CERS ID 10004467:
    - Notification submitted on March 13, 2023, and reviewed on January 23, 2024
- CERS ID 10004617:
    - Notification submitted on March 13, 2023, and reviewed on January 23, 2024
- CERS ID 100071345:
    - Notification submitted on May 5, 2023, and reviewed on September 15, 2023
- CERS ID 10012096:
    - Notification submitted on February 28, 2025, and reviewed on June 11, 2025
    - Notification submitted on April 9, 2025, and reviewed on June 11, 2025

- CERS ID 10012429:
  - Notification submitted on February 26, 2024, and reviewed on August 9, 2024
  - Notification submitted on February 20, 2025, and reviewed on June 11, 2025
- CERS ID 10012690:
  - Notification submitted on February 14, 2024, and reviewed on July 25, 2024
  - Notification submitted on February 20, 2025, and reviewed on May 1, 2025
- CERS ID 10154059:
  - Notification submitted on March 1, 2023, and reviewed on June 20, 2023
  - Notification submitted on March 15, 2023, and reviewed on August 8, 2023
  - Notification submitted on March 1, 2024, and reviewed on January 29, 2025
- CERS ID 10154063:
  - Notification submitted on February 21, 2023, and reviewed on January 31, 2024
  - Notification submitted on February 27, 2024, and reviewed on May 10, 2024
  - Notification submitted on February 21, 2025, and reviewed on May 1, 2025
- CERS ID 10476676:
  - Notification submitted on February 28, 2024, and reviewed on April 26, 2024
- CERS ID 10483471:
  - Notification submitted on May 13, 2022, and reviewed on July 6, 2022
  - Notification submitted on August 7, 2024, and reviewed on October 17, 2024
  - Notification submitted on February 28, 2025, and reviewed on May 1, 2025

Note: The statistics above do not include PBR notifications from schools operating Household Hazardous Waste.

CITATION(S):
Health & Saf. Code §§ 25200.3, subd. (e)(3), 25201.5, subd. (d)(7); Cal. Code Regs, tit. 22, §§ 67450.2, subd. (b)(4), 67450.3, subds. (c)(1) & (d); [DTSC]

RESOLUTION:
During each Progress Report, DTSC will review information in CERS to verify recently submitted notifications are processed within 45 days.

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3. INCIDENTAL FINDING:
The local ordinance (LO), *Chapter 450-6 Underground Storage of Hazardous Substances* is inconsistent with state law:

- Permitting requirements state "Violation of any requirement or regulation set forth in Health and Safety Code Chapter 6.7, regulations adopted thereunder, or this chapter."
  - This is inconsistent with Health and Safety Code.

CITATION(S):
Health & Saf. Code, §§ 25285.1, 25299.2, 25404.2, subd. (a)(2); [State Water Board]

RESOLUTION:
Note: The local ordinance requires revisions to align with the regulatory updates to chapter 16, effective January 1, 2026. The CUPA is required to rescind the local ordinance or update the local ordinance to align with the 2026 UST regulation amendments. The State Water Board will verify that the updated local ordinance is consistent with the new UST regulations.

Do not implement any provision of the local ordinance that is inconsistent with or less stringent than state law. If the CUPA plans to amend the ordinance provide the State Water Board with an opportunity to review. Any proposed ordinance that implements additional standards to construction, monitoring and/or testing must be presented to the Board, and the Board must conduct and investigation and public hearing on the proposed standards.

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

If the CUPA plans to amend the ordinance, by the 1st Progress Report, contact Water Board and schedule a meeting with management and legal to discuss necessary changes and process.

The State Water Board recommends that the CUPA:

- Develop an action plan and timeline to amend or rescind the local ordinance, in coordination with the CUPA's legal counsel.
- Review the State Water Board guidance document LG 201, 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.

After the ordinance has been amended or rescinded, notify UST owners and operators of the change in the law.

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4. INCIDENTAL FINDING: CORRECTED DURING THE EVALUATION

The CUPA has not inspected 602 of 3,241 (19%) facilities subject to the HMBP Program at least once every three years. See the list of facilities that were not inspected in Attachment 4.

CITATION(S):

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

RESOLUTION: COMPLETED

During the evaluation, as of June 8, 2026, the CUPA inspected 300 of 602 facilities identified in Attachment 4; 302 facilities remain uninspected. This Incidental Finding is considered corrected.

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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5. INCIDENTAL FINDING: CORRECTED DURING THE EVALUATION

The CUPA has not ensured each HMBP submittal contains all required elements before being accepted in CERS. In some instances, the CUPA did not ensure the submittal contained all required elements at the time of inspection.

- CERS ID # 10005181
    - Emergency response and training plans submitted on January 17, 2025
        - Training plan is missing provisions for ensuring all employees receive training in safety procedures in the event of a release or threatened release of a hazardous material, including, but not limited to, familiarity with the

emergency response plans and procedures; methods for safe handling of hazardous materials; procedures for coordination with local emergency response organizations; and use of emergency response equipment and supplies under the control of the handler.
- No violations issued during inspection conducted on September 25, 2025

- CERS ID # 10154059
  - Inventory submitted on March 19, 2024
    - Site map is missing, adjacent streets, access and exit points.
      - No violations cited during inspection conducted on January 17, 2025
- CERS ID # 10009711
  - Inventory submitted on January 7, 2024
    - Site map is missing evacuation staging area(s).
      - No violations cited during inspection conducted on April 23, 2024
- CERS ID # 10008313
  - Inventory submitted on December 4, 2023
    - Site map is missing evacuation staging area(s).
  - Emergency response and training plans submitted on January 17, 2025
    - Training plan is missing provisions for ensuring all employees receive training in safety procedures in the event of a release or threatened release of a hazardous material, including, but not limited to, familiarity with the emergency response plans and procedures; methods for safe handling of hazardous materials; procedures for coordination with local emergency response organizations; and use of emergency response equipment and supplies under the control of the handler.
      - No violations cited during inspection conducted on December 4, 2023
- CERS ID # 10664164
  - Inventory submitted on February 7, 2025
    - Site map is missing access and exit points, hazardous material handling and storage areas, emergency response equipment.
      - No violations cited during inspection conducted on May 21, 2025
- CERS ID # 10857637
  - Inventory submitted on February 28, 2025
    - Site map is missing adjacent streets.
      - No violation cited during inspection conducted on November 18, 2025
- CERS ID # 10017469
  - Inventory submitted on August 8, 2023
    - Site map is missing, adjacent streets, access and exit points.
      - No violations cited during inspection conducted on November 17, 2023

CITATION(S):
Health & Saf. Code, §§ 25505, subd. (a), 25508, subds. (a)(3) & (4); Cal. Code Regs., tit. 19, §§ 5030.3, 5030.9, 5030.10; [CalEPA]

RESOLUTION: COMPLETED
During the evaluation, CalEPA reviewed 15 recently accepted HMBP submittals and verified each contains all required elements. This Incidental Finding is considered corrected.

Ensure each HMBP submittal is accurate and contains all required elements before being accepted in CERS. During each on-site HMBP inspection, verify whether the information in the HMBP is accurate.

CalEPA recommends that the CUPA:

- Use the HMBP checklist in Attachment 5 to ensure each HMBP submittal is accurate and contains all required elements before being accepted in CERS.
- Have CUPA staff complete refresher training on HMBP submittal requirements.
- Ensure each HMBP submittal is accurate and contains all required elements before being accepted in CERS and verify the information in the HMBP submittal is accurate during each on-site inspection conducted.

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6. INCIDENTAL FINDING: CORRECTED DURING EVALUATION
The CUPA has not inspected APSA tank facilities with 100,000,000 gallons or more of petroleum at least once every year.

- CERS ID 10004875: last routine inspections on April 29, 2025, April 1, 2022, and February 22, 2021
- CERS ID 10153029: last routine inspections on June 25, 2024, April 26, 2023, and April 5, 2022

CITATION(S):
Health & Saf. Code, § 25270.5, subds. (b); Cal. Code Regs., tit. 27, § 15200, subd. (a)(2)(F); [OSFM]

RESOLUTION: COMPLETED
During the evaluation, as of May 21, 2026, the CUPA inspected the APSA tank facilities identified above. This Incidental Finding is considered corrected.

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7. INCIDENTAL FINDING: CORRECTED DURING EVALUATION
The Annual Single Fee Summary Reports have incorrectly reported information.

- The Annual Single Fee Summary Report for FYs 2022/2023, 2023/2024 and 2024/2025 incorrectly reported the total Single Fees billed and collected. The Single Fees were listed as the same amount as the total State Surcharges billed and collected.

Note: This Incidental Finding was identified as Incidental Finding 3 in the 2021 Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION(S):
CCR, Title 27, Section 15290(a)(2)
[CalEPA]

RESOLUTION: COMPLETED
During the evaluation, the CUPA met with the financial team to discuss the reporting discrepancy and ensure all future fees will be correctly reported. The CUPA submitted a revised

Annual Single Fee Summary Report for FY 2024/2025. 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.