

October 11, 2021

Mr. Jason Rizzi
Fire Marshal
Roseville City Fire Department
316 Vernon Street, Suite 480
Roseville, California 95678-2653

Dear Mr. Rizzi:

During December 2018 through May 2019, CalEPA and the Unified Program state agencies conducted a performance evaluation of the Roseville City Fire Department Certified Unified Program Agency (Roseville CUPA). The Roseville CUPA 2019 performance evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System data, and oversight inspections.

Due to extraordinary circumstances and at no fault of the Roseville CUPA, CalEPA has been unable to issue the enclosed Final Summary of Findings (FSOF) report for the 2019 performance evaluation until now. The Roseville CUPA remains responsible for adhering to the standards established in state law for the implementation of each of the six Unified Program elements, including addressing the deficiencies and incidental findings identified in the Preliminary Summary of Findings report issued to the Roseville CUPA during the Exit Briefing meeting on May 9, 2019. Based upon review and completion of the 2019 performance evaluation, CalEPA has rated the Roseville CUPA's overall implementation of the Unified Program as satisfactory with improvement needed.

As a result of the delayed issuance of the FSOF report for the 2019 performance evaluation, CalEPA recognizes there is insufficient time before the onset of the subsequent performance evaluation for the Roseville CUPA to fully utilize the quarterly Evaluation Progress Report process to demonstrate correction of identified deficiencies and resolution of incidental findings. However, CalEPA is requesting the Roseville CUPA to provide one Evaluation Progress Report, utilizing the enclosed template, to summarize the corrective actions and resolutions completed since the conclusion of the 2019 performance evaluation. While the timeframe for completion of corrective actions and resolutions outlined in the FSOF report may extend beyond the submittal of one Evaluation Progress Report, the CUPA is strongly encouraged to include as much detail as possible regarding the progress made through present day, not limiting responses to what is requested with the first progress report.

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The Evaluation Progress Report shall be provided to CalEPA no later than January 17, 2022, via email to: Samuel.Porras@calepa.ca.gov. Any deficiencies that remain uncorrected and any incidental findings that remain unresolved will be carried forward to the 2021 performance evaluation, which is scheduled to begin February 7, 2022.

Thank you for your continued commitment to the protection of public health and the environment through the implementation of the Unified Program.

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

Sincerely,



Jason Boetzer
Assistant Secretary
Local Program Coordination and Emergency Response

Enclosures

cc sent via email:

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Mr. Sam Porras
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Cc sent via email:

Mr. Garrett Chan
Environmental Scientist
California Environmental Protection Agency

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Roseville City Fire Department

Evaluation Period: December 2018 through May 2019

Evaluation Team Members:

- **CalEPA Team Lead:** Kareem Taylor, Samuel Porras
- **DTSC:** Kevin Abriol, Asha Arora
- **Cal OES:** Fred Mehr, Garrett Chan
- **State Water Board:** Sean Farrow
- **CAL FIRE-OSFM:** Glenn Warner

This Final Summary of Findings includes:

- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations
- Examples of outstanding program implementation

The findings contained within this evaluation report are considered final.

Based upon review and completion of the evaluation, the CUPA's Unified Program implementation and performance is considered satisfactory with improvements needed.

Questions or comments regarding this evaluation should be directed to the CalEPA Team Lead:

Samuel Porras
CalEPA Unified Program
Phone: (916) 327-9557
E-mail: Samuel.Porras@calepa.ca.gov

Due to the delayed issuance of this Final Summary of Findings (FSOF) report for the 2019 performance evaluation, CalEPA recognizes there is insufficient time before the onset of the subsequent performance evaluation for the Roseville City Fire Department CUPA to fully utilize the quarterly Evaluation Progress Report process to demonstrate correction of identified deficiencies and resolution of incidental findings.

However, CalEPA is requesting the CUPA to provide one Evaluation Progress Report to summarize the corrective actions and resolutions completed since the conclusion of the 2019 performance evaluation. While the timeframe for completion of corrective actions and resolutions outlined in this FSOF report may extend beyond the submittal of one Evaluation Progress Report, the CUPA is strongly encouraged to include as much detail as possible regarding the progress made through present day, not limiting responses to what is requested with the first progress report.

The Evaluation Progress Report shall be provided to CalEPA no later than **January 17, 2022**, via email to: Samuel.Porras@calepa.ca.gov.

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DEFICIENCIES REQUIRING CORRECTION

Program deficiencies identify specific aspects regarding inadequate implementation of the Unified Program. The CUPA must complete the corrective action indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute.

1. DEFICIENCY:

The Unified Program administrative procedures within the “Certified Unified Program Policies and Procedures Manual” are either missing required components or have components that are inaccurate or incomplete or have not been established.

The following administrative procedures are missing components:

- Records maintenance procedures
 - The component for proper disposal methods is missing.
- Financial management procedures
 - Page 12: The Single Fee System procedure within the Fee Accountability section is missing the following key components:
 - Consolidation of all fees currently mandated in statute and regulation used for local implementation of the Unified Program.
 - Billing statements that itemize fees by program element, if those fee elements are calculated separately.
 - Fees for non-recurring activities of the CUPA such as, but not limited to, the fee for an initial permit or special inspection, which may be billed separately from the single fee billing.
 - Page 12: The Surcharge Collection and Reimbursement procedure is missing components for the billing, collecting, and waiving of the state surcharge.

The following administrative procedures have inaccurate or incomplete components:

- Financial management procedures
 - Page 12: The Fee Accountability section is not an actual fee accountability program procedure. The following statement references the development of a procedure, but no fee accountability program procedure followed: “The procedure of accounting for the fee schedule, the amount billed, and the revenue collected was developed through a process of public hearings and evaluation of actual personnel time needed to perform inspection, permit processing and administrative functions.”
- Information request procedure
 - Page 14: The last paragraph contains an incorrect citation: Title 27, Section 15180(a)(1)(A) and (B), which does not exist. The correct citation for this procedure is CCR, Title 27, Section 15180(e)(3).

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The following administrative procedure has not been established:

- Procedure for forwarding the hazardous materials release response plan information to emergency response personnel and other appropriate government entities.
 - Though the CUPA does provide emergency response personnel with CERS access to hazardous materials release response plan information, there is no established procedure.

CITATION:

California Code of Regulations (CCR), Title 27, Section 15180(e)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will revise and provide CalEPA with the Unified Program administrative procedures listed in this deficiency above. The procedures will correctly and completely include all required components. The CUPA will develop and provide CalEPA with a Unified Program administrative procedure for forwarding the hazardous materials release response plan information to emergency response personnel and other appropriate government entities.

By the 2nd Progress Report, the CUPA will, if necessary, amend the procedures, based on feedback from CalEPA. The CUPA will provide the amended procedures to CalEPA.

By the 3rd Progress Report, the CUPA will implement the revised or amended procedures and train personnel on the revised or amended procedures. The CUPA will provide training documentation to CalEPA that will include, but not be limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

2. DEFICIENCY:

The CUPA is not assessing and collecting the correct state surcharge fee amount from all Underground Storage Tank (UST) Program and California Accidental Release Prevention (CalARP) Program facilities. The following are examples:

- CERS ID 10397080: In Fiscal Year (FY) 2018/2019, the facility was billed a UST state surcharge in the amount of \$60 for a total of five USTs. The UST state surcharge fee in FY 2018/2019 was \$20 per UST. The facility should have been billed a UST state surcharge in the amount of \$100 for a total of five USTs.
- CERS ID 10188013: In FY 2017/2018, the facility was billed a UST state surcharge in the amount of \$80 for a total of six USTs. The UST state surcharge fee in FY 2017/2018 was \$20 per UST. The facility should have been billed a UST state surcharge in the amount of \$120 for a total of six USTs.
- CERS ID 10188013: In FY 2017/2018, the facility was billed a CalARP state surcharge in the amount of \$275.40. The CalARP state surcharge in FY 2017/018 was \$270 per business. The facility should have been billed a CalARP state surcharge in the amount of \$270.

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

CITATION:

CCR, Title 27, Section 15250(a)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with a plan to assess and collect the correct UST Program and CalARP Program state surcharge fees. The plan will include, but not be limited to:

- Identification of all UST Program and CalARP Program facilities that were not assessed the correct state surcharge fees in previous billing cycles, whether undercharged or overcharged, and
- The steps and timeframes to assess and collect the correct UST Program and CalARP Program state surcharge fees from the facilities identified as being undercharged.
 - This includes assessment, collection and remittance of the amount of state surcharge fees not previously assessed, collected and remitted in previous billing cycles.
- The steps and timeframes to reimburse identified UST Program and CalARP Program facilities identified as being overcharged.

By the 3rd Progress Report, the CUPA will provide CalEPA with a copy of the most recent invoices for three UST Program facilities and for three CalARP Program facilities that show the correct applicable state surcharge being assessed in the correct amount. The CUPA will provide documentation to demonstrate appropriate reimbursement or crediting of the overcharged amount for the CalARP Program state surcharge fee in FY 2017/2018 to CERS ID 10188013.

3. DEFICIENCY:

The CUPA is not remitting the collected state surcharge revenues with the Surcharge Transmittal Report to CalEPA within 30 days of the end of each fiscal quarter.

- State surcharge revenues collected during the first and second fiscal quarter of FY 2018/2019 were not remitted within the required timeframe.
- All state surcharge revenues collected during FY 2017/2018 were remitted in October 2018 rather than within 30 days of the end of each fiscal quarter collected. Though a Surcharge Transmittal Report was provided with the requested evaluation information, it does not appear a Surcharge Transmittal Report was submitted with the state surcharge revenue remittance in October 2018.

CITATION:

CCR, Title 27, Section 15250(b)
[CalEPA]

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CORRECTIVE ACTION:

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a copy of the quarterly state surcharge remittance check and a Surcharge Transmittal Report for the amount of state surcharge collected the previous fiscal quarter. The CUPA will ensure that state surcharge remittance and a Surcharge Transmittal Report are provided to CalEPA no later than 30 days of the end of each fiscal quarter during which the state surcharge was collected.

4. DEFICIENCY:

The CUPA's Inspection and Enforcement (I&E) Plan has inaccurate or incomplete information or is missing required components.

The following components of the I&E Plan are inaccurate or incomplete:

- Page 3: The general guideline for an inspector to have "discretion to work with facilities to gain compliance in a cooperative manner," in order for facilities cited with UST violations to return to compliance can lead to instances of excessive timeframes of return to compliance or no return to compliance. UST Regulations and HSC have specific requirements for owners/operators to return to compliance.
- Page 3: The second paragraph states, "In the case of major violations and/or lack of cooperation from the facility then the inspector can choose to revoke/suspend the permit for the facility in accordance with the statutes and regulations listed in the operating permit." The Permit to Operate that the CUPA issues includes in the "Permit Type" section, Permit By Rule. A CUPA does not have regulatory jurisdiction to revoke a Tiered Permitting permit per CCR, Title 22, Section 67450.9. Only DTSC has this authority.
- Page 4: In reference to conducting annual UST compliance inspections, the procedure specifically includes language regarding the completion of an annual monitoring certification in the absence of UPA inspection personnel. However, there is no language requiring an inspector to review the annual monitoring certification for failures identified by the service technician who completed testing within a specific timeframe. With the absence of this language, failures of the monitoring system can go on with no follow-up by the CUPA, when follow-up is required.
- Page 4: In the first paragraph in the Hazardous Waste and Tiered Permitting section, CCR, Title 22, Section 66265.17 is incorrectly referenced for container management standards. CCR, Title 22, Section 66265.17 refers to requirements for ignitable, reactive or incompatible wastes. Container management standards are found in CCR, Title 22, Sections 66265.170-178 and Code of Federal Regulations, Title 40, Section 262.16.
- Page 5: The inspection frequency for Onsite Waste Treatment facilities is inaccurately listed as "3 years." The frequency for all Onsite Waste Treatment facilities should state "initial inspection within two years of notification and every three years thereafter."
- Page 5: In the Frequency of Inspection table, the triennial statutory inspection frequency applies to Aboveground Petroleum Storage Act (APSA) facilities storing 10,000 gallons or more of petroleum. It is most accurate to cite HSC, Section 25270.5(a) when referencing these APSA mandated inspections. If an alternative inspection plan is implemented, then it is appropriate to also reference HSC, Section 25270.5(b), for example, inspecting all

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APSA facilities including those storing less than 10,000 gallons of petroleum triennially. If the table is meant to include the approximate number of regulated facilities, then the corresponding numbers are missing from the table.

- Page 5: In the Enforcement paragraph, the APSA statute reference should be HSC, Chapter 6.67 (commencing with Section 25270), rather than HSC, Section 25270.4.5 (a).
- Page 5: In the first paragraph, the following sentence is not clear: “LQG sites must also comply personnel training pursuant to Title 22 Section 662625.16, and tiered permitting operating under Permit-By-Rule are subject to cost closure and insurance.” The sentence should be revised to clearly state what training provisions are applicable to large quantity generators (LQGs) and what financial assurance and closure cost requirements permit by rule (PBR) facilities are subject to.
- Page 5: In the second paragraph, a statement is made regarding the approximate number of regulated businesses in 2017/2018, yet there is no number of businesses provided. Additionally, the inspection frequency table has a “State Mandate” column and lists three years for Hazardous Waste Generator (HWG) and Resource Conservation and Recovery Act Large Quantity Generator (RCRA LQG) facilities. There is no state mandated inspection frequency for HWG or RCRA LQG facilities.
- Page 6: In the last sentence in the second paragraph, citation “Title 22” is incorrect. The correct citation is Title 27.
- Pages 6 and 7: Information regarding Class I and Class II violation classifications are only in reference to HWG violations. The Class I and Class II classifications are applied to all Unified Program element violations.
- Page 8: Reference to reporting Release Detection (RD) and Release Prevention (RP) information to State Water Board does not include amendments to UST Regulations effective October 1, 2018, to no longer report RD and RP but rather to report Technical Compliance Rate (TCR).
- Page 8: Reference to affixing red tags to fill pipe of USTs does not include amendments to HSC effective January 1, 2019, such as an owner/operator no longer being able to withdraw gasoline when a red tag is affixed and the ability for the CUPA to require an owner/operator to remove contents from USTs, which have a red tag affixed.
- Page 8: In paragraphs three and four, the Title 27, Section 15200(f) reference is used incorrectly in two places. This section refers to Title 27 not limiting the authority of a state agency to investigate alleged violations of state law. The correct citation for paragraph three regarding return to compliance (RTC) of minor violations is HSC, Chapter 6.11, Section 25404.1.2.
- Page 13: The procedures for addressing complaints do not include a procedure for the closure of a complaint. Additionally, the procedures do not address complaints received through the CalEPA environmental complaint system. The appropriate CUPA personnel do have access to the CalEPA complaint system as of March 2019.
- Page 15: Section O does not accurately state APSA program requirements, including the appropriate petroleum storage capacity threshold (1,320 gallons or more) relative to recent tanks in underground areas (TIUGA) updates, nor does it include conditionally exempt APSA tank facilities that are not required to prepare and implement a Spill Prevention Control and Countermeasure (SPCC) Plan under APSA. APSA statute (HSC Chapter

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- 6.67, commencing with Section 25270) should be referenced, while reference to SPCC Plans should be avoided due to US EPA responsibility in that area.
- Page 16: In the last paragraph, the Title 27, Section 15100(c)(3)(B-C) reference section is incorrect. The correct reference is HSC Sections 25404(c)(1)(A)(i) and 25201.4.
 - Page 16: In section P, CCR, Title 22, Section 67450.2(b)(4) is incorrectly referenced for the requirement of the CUPA to use a minimum of 5% of its resources to regulate universal waste handlers. CCR, Title 22, Section 67450.2(b)(4) relates to TP submittals and reviews. There is no statutory or regulatory requirement for CUPAs to use a certain percentage of resources for universal waste handlers. CUPAs must include oversight of universal wastes when encountered during routine or complaint inspections of HWG facilities and must investigate all complaints regarding the illegal disposal of universal waste.
 - Several instances of referral to the APSA program as aboveground, AST or SPCC were observed, including multiple instances on Page 5 and the Table of Contents Section O. Section R is referenced in the Table of Contents, but is missing from the document.

The following components of the I&E Plan are missing:

- Provisions for multimedia enforcement;
- Provisions for ensuring the CUPA has sampling capability and ensuring the analysis of any material is performed by a state certified laboratory. Though the CUPA does have sampling equipment, it is not clear if samples are analyzed at a state certified lab.

Note: This deficiency was identified during the 2016 CUPA Performance Evaluation and was considered corrected during the Progress Report process.

CITATION:

CCR, Title 27, Section 15200(a)
[CalEPA, DTSC, OSFM, State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review, revise, and provide CalEPA with the corrected I&E Plan that includes revisions to the inaccurate and incomplete, and development of the missing information.

5. DEFICIENCY:

The CUPA is not ensuring that personnel meet the required minimum training requirements.

All Unified Program personnel have not completed or maintained health and safety training.

CITATION:

CCR, Title 27, Section 15260
[CalEPA]

CORRECTIVE ACTION:

During the evaluation, the CUPA enrolled Unified Program personnel into the appropriate health and safety training course.

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By the 1st Progress Report, the CUPA will establish and implement an action plan to ensure all personnel meet the required minimum training requirements.

By the 3rd Progress Report, the CUPA will provide CalEPA with the training certificates of completion for the personnel that were enrolled in health and safety training.

6. DEFICIENCY:

The CUPA is not consistently ensuring hazardous materials business plan (HMBP) submittals, in lieu of a tank facility statement, include site maps that contain all applicable required elements.

Review of the California Environmental Reporting System (CERS) indicates the following 4 of 11 (36%) APSA tank facilities were missing various site map elements in recently accepted HMBP submittals:

- CERS ID 10753135: missing the location of emergency shutoffs, evacuation staging areas, and location of emergency response equipment.
- CERS ID 10501558: missing north orientation, storm and sewer drains, the location of emergency shutoffs, evacuation staging areas, and location of emergency response equipment.
- CERS ID 10619398: missing north orientation, adjacent streets, and the location of emergency shutoffs.
- CERS ID 10152127: missing the location of emergency shutoffs and evacuation staging areas.

CITATION:

Health and Safety Code (HSC), Chapter 6.67, Section 25270.6(a)
[OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure that future HMBP submittals in lieu of tank facility statements are thoroughly reviewed and site maps contain all applicable required elements before being accepted. The action plan will include steps to follow up with facilities whose site map submittals were not accepted due to not containing all required elements.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a list of APSA tank facilities that have recently submitted an HMBP with a site map that was reviewed and accepted. For APSA tank facilities with site map submittals that were not accepted due to not containing all applicable required elements, the CUPA will provide a list of follow-up actions, including any formal enforcement.

By the 3rd Progress Report, the CUPA will ensure each APSA tank facility that has submitted an HMBP in lieu of a tank facility statement has provided a site map containing all applicable required elements or the CUPA will have applied appropriate enforcement to obtain compliance with this requirement.

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7. DEFICIENCY:

The CUPA is not consistently and correctly reporting compliance, monitoring, and enforcement information, also known as CME information, to CERS.

Review of APSA facility file information indicates CME data was not reported consistently or correctly to CERS for the following facilities:

- CERS ID 10152127
 - An inspection report dated December 10, 2015, cites a violation. CERS has no record of the inspection or violation.
 - An inspection was conducted on December 13, 2016. CERS has no record of the inspection.
- CERS ID 10501558
 - CERS has no record of any APSA inspection at this facility. However, the CUPA facility file includes an APSA permit, an SPCC Plan for the facility, dialogue that establishes this is an APSA facility storing more than 1,320 gallons of petroleum, and some SPCC Plan review checklists that may be associated with APSA inspections that were performed.

Review of CERS CME information for the following HWG inspections indicates the CUPA does not consistently use the specific CERS violation code from the CERS Violation Library and instead uses a “General Use” CERS Violation Library violation code:

- CERS ID 10212577
 - An inspection conducted on February 16, 2017, uses a general CERS violation code instead of the specific CERS violation code citing illegal disposal. The comment noted in CERS states: “Observed new oil quarts with pourable oil thrown into the trash.”
- CERS ID 10228942
 - An inspection conducted on November 18, 2016, uses a general CERS violation code instead of the specific CERS violation code citing open containers. The comment noted in CERS states: “Obtain lid for drum containing used filters.”
- CERS ID 10412800
 - An inspection conducted on May 6, 2016, uses a general CERS violation code instead of using two specific CERS violation codes for failure to inspect containers weekly and tanks daily. The comment noted in CERS states: “Failure to inspect containers weekly and tanks daily.”
- CERS ID 10399567
 - An inspection conducted on January 17, 2016, uses a general CERS violation code instead of using two specific CERS violation codes for failure to inspect containers weekly and tanks daily. The comment noted in CERS states: “inspect containers weekly, tanks daily.”
- CERS ID 10401820
 - An inspection conducted on January 6, 2016, uses a general CERS violation code instead of using two specific CERS violation codes for failure to inspect containers

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weekly and tanks daily. The comment noted in CERS states: “Inspect containers weekly and tanks daily and note the frequency of removal of used batteries”.

Review of CERS CME information for the following PBR inspections indicates the CUPA does not consistently use the specific CERS violation code from the CERS Violation Library and instead uses a “General Use” CERS Violation Library violation code:

- CERS ID 10488649
 - An inspection conducted on April 19, 2016, uses a general CERS violation code for unauthorized treatment and lists this CERS violation code as being in the Tiered Permitting program. This facility does not have a tiered permit. The comment noted in CERS states: “Staff currently treating battery acid with baking soda and throwing into regular trash. Acid waste is now disposed as hazardous waste.”
- CERS ID 10454692
 - An inspection conducted on November 24, 2015, uses a general CERS violation code for failure to update closure cost estimate for financial assurance. The comment noted in CERS states: “Update financial assurance document.”

CITATION:

HSC, Chapter 6.11, Section 25404(e)(4)
CCR, Title 27, Section 15290(b)
[DTSC, OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report the CUPA will develop, implement, and provide CalEPA with an action plan to consistently and correctly report CME information to CERS. The action plan will include, but not be limited to, the following:

- Revision to the existing CME component of the Data Management Procedure, or other applicable procedure, to establish a process for ensuring inspection report information is consistent with information in CERS and for ensuring the most appropriate CERS violation code is used to cite violations;
- Identification of CME information that was not previously consistently and correctly reported to CERS and a process for reporting it to CERS;

By the 1st Progress Report, the CUPA will provide CalEPA with a sortable spreadsheet from the CUPA’s local data management system that contains all APSA, HWG, and TP facility inspections and associated violations. The spreadsheet will include the following:

- Identification of the CME information for all APSA, HWG, and TP facility inspections (routine and other) that have been conducted since July 2015.
- Date of each inspection
- Violations cited during each inspection
- Scheduled RTC date
- Actual RTC date, if applicable
- Type of facility inspection (routine and other)

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By the 2nd Progress Report, if no amendments to the Data Management Procedure or other applicable procedure are necessary, the CUPA will implement and train personnel on the revised Data Management Procedure or other applicable procedure. The CUPA will provide training documentation to CalEPA that will include, but not be limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

By the 5th Progress Report, the CUPA will have consistently and correctly reported all CME information to CERS that was not consistently and correctly previously reported as required.

8. DEFICIENCY:

The CUPA is not properly classifying HWG violations.

The CUPA is citing the following HWG violations as minor violations that are Class I or Class II violations:

- Violation for exceedance of authorized accumulation time incorrectly cited as a minor violation. Maximum accumulation time may not be exceeded without a hazardous waste storage permit or grant of authorization from DTSC. An economic benefit is gained by not disposing of waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3). Below are SQG facility examples:
 - CERS ID 10483096: inspection conducted on October 16, 2017.
 - CERS ID 10460293: inspection conducted on October 6, 2016.
 - CERS ID 10447468: inspection conducted on September 4, 2016.
- Violation for failure to provide or conduct training for employees incorrectly cited as a minor violation. Since no training has been provided, employees are not familiar with hazardous waste management and handling, as well as, how to respond to emergencies. There may have been an economic benefit to the facility by not providing training. This does not meet the definition of minor violation as defined in HSC, Section 25404 (a)(3). Below are LQG facility examples:
 - CERS ID 10404868: inspection conducted on March 2, 2016.
 - CERS ID 10444630: inspection conducted on November 6, 2015.
- Failure to conduct weekly hazardous waste containers (storage area) inspections, failure to conduct daily tank inspection of the discharge system, monitoring equipment, and tank levels. There may have been an economic benefit to the facility by not conducting weekly and/or daily inspections. Below are LQG facility examples:
 - CERS ID 10404868: inspections conducted on March 8, 2017, and January 12, 2017.
 - CERS ID 10416550: inspection conducted on March 7, 2017.
 - CERS ID 10466233: inspection conducted on August 7, 2016.

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

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CITATION:

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6
CCR, Title 22, Sections, 66260.10, 66262.34(a)(4); 66262.34(d)(2); 66265.16
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will train personnel on the terms: minor, Class I, and Class II violations, as described in HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6; and CCR, Title 22, Section 66260.10, and how to properly classify hazardous waste violations during compliance inspections. The CUPA will provide training documentation to CalEPA that will include, but is not limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

Note: CUPA inspectors can review the document titled, "Violation Classification Guidance for Unified Program Agencies," Available at: <https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violaiton-Classification-Guidance-Document-accessible.pdf>, which provides examples of what is considered a minor vs. non-minor violation. CUPA inspectors can also review violation classification classes available in the video library on the CalCUPA Youtube website at: <https://www.youtube.com/user/orangetreeweb/videos>.

By the 2nd Progress Report, or after the CUPA has provided the above training to inspection staff, the CUPA will provide CalEPA with HWG inspection reports for inspections conducted within the last three months, citing at least one HWG violation for five HWG facilities.

9. DEFICIENCY:

The CUPA is not properly reviewing, processing, and authorizing each annual Onsite Hazardous Waste Treatment Notification for PBR facilities with a Fixed Treatment Unit (FTU) within 45 calendar days of receiving it.

During the 45-day review process the CUPA must either:

- Authorize operation of the FTU; or
- Deny authorization of the FTU in accordance with Permit-by-Rule laws and regulations; or
- Notify the owner/operator that the notification submittal is inaccurate or incomplete.

CERS data indicates that one of two (50%) PBR Onsite Hazardous Waste Treatment Notifications were not reviewed by the CUPA within 45 days.

- CERS ID 10180219: was submitted on January 8, 2019, and has not yet been accepted.

CITATION:

HSC, Chapter 6.5, Sections 25201.5
CCR, Title 22, Sections 67450.2(b)(4) and 67450.3(c)(1)
[DTSC]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide inspectors with TP training regarding how to review, process, and authorize Onsite Hazardous Waste Treatment Notifications. The CUPA will provide training documentation to CalEPA that will include, but is not limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

By the 2nd Progress Report, the CUPA will review and process all pending Onsite Hazardous Waste Treatment Notifications in CERS and notify CalEPA of the progress. The CUPA will also follow up with the facilities listed in this deficiency to obtain an Onsite Hazardous Waste Treatment Notification, if required.

By the 3rd Progress Report, the CUPA will review each Onsite Hazardous Waste Treatment Notification to ensure that annual notification submittals are done accurately and represent the actual waste treatment systems used at that facility.

10. DEFICIENCY:

The CUPA's inspection reports do not consistently detail all observations made at the facility, all alleged violations (no violation citations were provided), the factual basis for alleging those violations, and any corrective actions that should be taken by the operator of the facility.

There is inadequate or improper documentation on inspection reports for the following facilities that were cited with violations:

- CERS ID 10454692: inspection conducted March 26, 2019
 - DTSC conducted an oversight inspection with the CUPA at this RCRA LQG/PBR facility.
 - The inspection report provided to the facility after the inspection was conducted only provided statements such as:
 - "Ensure all hazardous waste tanks are properly identified."
 - "Provide Phase I Environmental Assessment. (Note – as the CUPA is not delegated for the corrective action program, any Phase I Assessment would be required to be submitted to DTSC with a copy to the CUPA)."
 - The inspection report did not include any of the following:
 - full detail of each observation made at the facility;
 - violation citations;
 - factual basis for observed violations;
 - corrective actions for each violation cited to be taken by the operator of the facility to ensure return to compliance.
- CERS ID 10626280: inspection conducted March 20, 2019
 - DTSC conducted an oversight inspection with the CUPA at this LQG facility.
 - The inspection report provided to the facility after the inspection was conducted only provided statements such as:
 - "(in sump) used antifreeze containers both need to be labeled"
 - "(in sump) used antifreeze label needs to be properly filled out"
 - "(in sump) emergency light needs to be repaired or replaced" Note: this is not a hazardous waste violation.

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DEFICIENCIES REQUIRING CORRECTION

- “(in sump oil filter can crusher area) free liquid on top of drained oil drum needs to be addressed”
- “(in sump) what is the cleaning schedule on the oil catch”
- “please verify that weekly tank inspections have a list that spells out what you are checking”
- “your last waste tank assessment needs: life expectancy of tank in years, civil engineer stamp required”
- The inspection report did not include any of the following:
 - full detail of each observation made at the facility;
 - violation citations;
 - factual basis for observed violations;
 - corrective actions for each violation cited to be taken by the operator of the facility to ensure return to compliance.
- CERS ID 10121593: inspections conducted on February 4, 2019, January 25, 2019, November 22, 2017, November 18, 2017, and September 25, 2017
- CERS ID 10488649: inspections conducted on July 11, 2018, July 10, 2018, June 16, 2018, June 5, 2018, April 13, 2018, March 21, 2018, December 27, 2017, July 27, 2017, and March 27, 2017.
 - The CUPA submitted an inspection report for a different facility with the same address.
- CERS ID 10450429: inspections conducted on June 19, 2018, and April 10, 2018.
- CERS ID 10398097: inspections conducted on March 22, 2018, and December 13, 2017.
- CERS ID 10206964: inspections conducted on May 27, 2018, April 25, 2018, April 11, 2018, and February 13, 2018.
- CERS ID 10479883: inspections conducted on March 20, 2018, and November 15, 2016.
- CERS ID 10465564: inspection conducted on March 15, 2018.
- CERS ID 10155163: inspection conducted September 11, 2017.
- CERS ID 10452625: inspection conducted on July 16, 2015.

CITATION:

HSC, Chapter 6.5, Section 25185(c)(2)(A)
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide inspection report writing training to each CUPA inspector to ensure that all violations cited in HWG inspection reports include observations, violation citations, factual basis, and corrective actions. The CUPA will provide training documentation to CalEPA that will include, but is not limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, after the CUPA has provided the above training to inspection staff, the CUPA will provide CalEPA with HWG inspection reports, for inspections conducted within the last three months, having at least one cited HWG violation, for five HWG facilities.

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FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

The inspection reports will include observations, violation citations, factual basis, and corrective actions for each violation cited.

11. DEFICIENCY:

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

Review of CERS CME data finds the following examples where the CUPA incorrectly cites HWG violations:

- The CUPA incorrectly requires businesses to provide a log of conducting weekly container inspections. There is no regulatory requirement for HWGs to maintain a log of weekly container inspections. The following examples include, but are not limited to:
 - CERS ID 10398589: inspection conducted on April 10, 2018.
 - CERS ID 10450420: inspection conducted on April 10, 2018.
 - CERS ID 10450429: inspection conducted on April 10, 2018.
 - CERS ID 10157873: inspection conducted on February 28, 2018.
 - CERS ID 10412200: inspection conducted on January 17, 2018.
 - CERS ID 10444630: inspection conducted on August 30, 2017.
- The CUPA incorrectly requires businesses to post a sign indicating frequency of removal of used batteries. There is no regulatory requirement for a sign to be posted regarding removal of batteries:
 - CERS ID 10478065: inspection conducted on November 17, 2016.
 - CERS ID 10197061: inspection conducted on November 16, 2016.
 - CERS ID 10448818: inspection conducted on June 8, 2016.
 - CERS ID 10152475: inspection conducted April 13, 2016.

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

CITATION:

CCR, Title 22, Sections 66262.34(a), 66265.175 and 66266.81
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will ensure all CUPA inspectors review the DTSC HWG fact sheets listed below. The CUPA will provide CalEPA with a narrative statement, including an outline of all the DTSC HWG fact sheet training material that each CUPA inspector has reviewed, and a signature from the inspector and the date the training was completed.

DTSC HWG fact sheet training material:

- Accumulation Time Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf
- Universal Waste Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2016/01/UW_Factsheet1.pdf

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DEFICIENCIES REQUIRING CORRECTION

- Managing Used Oil Filters for Generators Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/RAG_Used-Oil-Filters_Generators1.pdf
 - Management of Spent Lead-Acid Batteries Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_DutyOfficer_LeadAcidBatteries1.pdf
 - Generator Summary Chart
<https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/05/California-Generator-Chart.pdf>
and https://www.acgov.org/forms/aceh/Generator_Requirements_Summary_Chart.pdf
-

12. DEFICIENCY:

The CUPA did not conduct an annual audit of its CalARP Program activities or compile a CalARP performance audit report for FYs 2017/2018, 2016/2017, or 2015/2016.

CITATION:

CCR, Title 19, Section 2780.5
[CalEPA, Cal OES]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide the annual CalARP performance audit report for FY 2018/2019 to CalEPA.

13. DEFICIENCY:

The CUPA is not consistently collecting, retaining, and managing information necessary to implement the Unified Program.

Review of CERS CME information and information provided by the CUPA indicates that inspection reports are missing from the following facility files:

- CERS ID 10609726
 - CERS reflects routine inspections conducted in 2019 and 2017. The facility file has no inspection reports for these inspections.
- CERS ID 10467403
 - CERS reflects APSA inspections conducted on October 9, 2018, and October 25, 2017. The facility file has no inspection reports for these inspections.
- CERS ID 10396339
 - CERS reflects APSA inspections conducted on August 29, 2018, November 27, 2017, and November 22, 2016. The facility file has no inspection reports for these inspections.
- CERS ID 10670191
 - CERS reflects APSA inspections conducted on August 14, 2018, and August 24, 2017. The facility file has no inspection reports for these inspections.

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10206679
 - CERS reflects APSA inspections conducted on May 31, 2018, June 1, 2017, and May 18, 2016. The facility file has no inspection reports for these inspections.
- CERS ID 1061939
 - CERS reflects APSA inspections conducted on March 21, 2018, and April 29, 2016. The facility file has no inspection reports for these inspections.
- CERS ID 10180219
 - CERS reflects routine RCRA LQG and PBR inspections conducted in 2018 and 2017. The facility file has no inspection reports for these inspections.
- CERS ID 10130767
 - CERS reflects routine RCRA LQG inspections conducted in 2018 and 2017. The facility file has no inspection reports for these inspections.
- CERS ID 10454692
 - CERS reflects routine RCRA LQG and PBR inspections conducted in 2018 and 2016. The facility file has no inspection reports for these inspections.
- CERS ID 10412800
 - CERS reflects an APSA inspection conducted on August 3, 2017. The facility file has no inspection report for this inspection.
- CERS ID 10152127
 - CERS reflects routine CE inspections conducted in 2016 and 2015. The facility file has no inspection reports for these inspections.

CITATION:

CCR, Title 27, Section 15185(a)
[DTSC, OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop and provide CalEPA with an action plan to ensure that all inspection reports and related violation and enforcement documentation are appropriately collected, retained, and managed. The action plan will specify timelines for completing each of the following aspects:

- Revision to the existing Record Maintenance Procedure, or other applicable procedure, to address the root causes of the inconsistent collection, retention, and management of inspection reports and related violation and enforcement documentation, ensuring consistent collection, retention and management of inspection reports and related violation and enforcement documentation; and
- Steps for adjusting the local facility file and data management systems to ensure complete electronic storage of inspection reports and related violation and enforcement documentation.

By the 2nd Progress Report, if no amendments to the Record Maintenance Procedure, or other applicable procedure are necessary, the CUPA will implement and train personnel on the revised

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DEFICIENCIES REQUIRING CORRECTION

Record Maintenance Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA that will include, but not be limited to, an outline of the training conducted and a list of CUPA personnel in attendance.

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, after the CUPA has revised the Record Maintenance Procedure, and after the CUPA has trained inspection staff on the revised Record Maintenance Procedure, the CUPA will provide CalEPA with inspection reports for inspections conducted within the last three months for five HWG facilities and for the following APSA facilities, as selected by OSFM:

- APSA Facilities
 - CERS ID 10448722
 - CERS ID 10398589
 - CERS ID 10618375
 - CERS ID 10208176
 - CERS ID 10449196
-

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

Incidental findings identify specific incidents or activities regarding implementation of the Unified Program. Though incidental findings do not rise to the level of program deficiencies or inadequate implementation of the Unified Program, the CUPA must complete the resolution indicated as required by regulation or statute.

1. INCIDENTAL FINDING:

The Self-Audit Reports for FYs 2017/2018, 2016/2017, and 2015/2016 are missing a required component and components do not adequately address the requirements.

The following component is missing:

- A report of deficiencies with a plan of correction.

The following components do not adequately address the requirements:

- The narrative summary of the annual review and update of the fee accountability program does not convey the details of the review and the related outcome (i.e. update fees, resources or no actions required).
- The narrative for the following components is written as a procedure rather than a summary of the effectiveness of Unified Program activities:
 - Single fee system
 - Permitting
 - Annual review and update of the fee accountability program

The Self-Audit Reports for FYs 2017/2018, 2016/2017, and 2015/2016 appear to be duplicates of one another, with minor differences between each report. It is unclear if all of the information in each report is applicable to the FY of the report.

CITATION:

CCR, Title 27, Section 15280
[CalEPA]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the completed Self Audit Report for FY 2018/2019 that adequately addresses each of the required components.

2. INCIDENTAL FINDING:

The CUPA is issuing the UST operating permit, under the Unified Program Facility Permit (UPFP), to non-compliant UST facilities.

Review of UST operating permits, issued under the UPFP, finds permits were issued to UST facilities prior to the January 1, 2019, effective date of HSC amendments, allowing the CUPA to issue a UST operating permit to a non-compliant UST facility so long as the UST facility is not under current enforcement activities.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

The following UST facilities were issued a UST operating permit when HSC prohibited issuance of a UST operating permit to a UST facility that was not in compliance:

- CERS ID 10152127: UST operating permit indicates being issued on September 8, 2017. The routine inspection dated May 17, 2017, indicates UST violations with an RTC date of October 29, 2017, which is 51 days after UST operating permit issuance.
- CERS ID 10458904: UST operating permit indicates being issued on September 8, 2017. The routine inspection dated August 30, 2017, indicates UST violations with an RTC date of January 19, 2018, which is 133 days after UST operating permit issuance.

Review of CERS finds instances where UST facilities did not provide a UST submittal to CERS in 2017. However, the CUPA issued UST operating permits. The following are examples:

- CERS ID 10505968: UST operating permit indicates being issued on September 8, 2017. The last accepted CERS UST submittal for this facility is dated July 8, 2016. There are no subsequent CERS UST submittals.
- CERS ID 10629643: UST operating permit indicates being issued on September 8, 2017. The last accepted CERS UST submittals for this facility are dated April 11, 2018, and May 4, 2016. There are no CERS UST submittals for 2017.

Note: CERS FAQ “When to Issue a UST Operating Permit” may be referenced.

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

CITATION:

HSC, Chapter 6.7, Section 25285(b)
HSC, Chapter 6.11, Section 25404.2(a)(1)(A)
CCR, Title 23, Section 2712(c) and (e)
[State Water Board]

RESOLUTION:

As HSC was amended in 2019, allowing UST operating permit issuance to non-compliant USTs, no further action is necessary regarding issued permits unless the facility is under enforcement.

By the 2nd Progress Report, the CUPA will revise and provide CalEPA with the procedure for issuing UST operating permits, under the UPFP, based on the January 1, 2019, amendments to HSC, Chapter 6.7. The procedure will address UST operating permit issuance when a red tag is affixed and when a UST facility is subject to an enforcement action.

3. INCIDENTAL FINDING:

The CUPA is not ensuring UST violations RTC within 90 days.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

Review of CERS for the last three FYs finds the following reported UST violations have taken more than 90days to RTC:

- FY 2017/2018: 32 of 166 (19%)
- FY 2016/2017: 15 of 150 (10%)
- FY 2015/2016: 10 of 112 (9%)

The following are specific examples of reported UST Violations taking more than 90 days to RTC:

- CERS ID 10458904
 - Violations dated August 30, 2017, for Record Keeping: General (CERS Violation Type Number 2010012) and Monitoring and Maintenance Records (RD) (CERS Violation Type Number 2030001).
 - RTC dates are reported as:
 - January 19, 2018; 142 days to RTC and
 - January 9, 2018; 132 days to RTC.
- CERS ID 10405522
 - Violation dated July 5, 2017, for Monitoring and Maintenance Records (RD) (CERS Violation Type Number 2030001).
 - RTC date is reported as October 23, 2017; 110 days to RTC.
- CERS ID 10404403
 - Violation dated August 7, 2017, for Designated Operator (DO) - Monthly Inspection (CERS Violation Type Number 2030013) and Automatic Tank Gauging - Single-Walled Tank (RD) (CERS Violation Type Number 2030006).
 - RTC dates are reported as:
 - November 20, 2017; 105 days to RTC and
 - November 15, 2017; 100 days to RTC.

CITATION:

HSC, Chapter 6.7, Section 25288(d)
CCR, Title 23, Section 2712(f)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will review the I&E Plan or other applicable procedure and ensure inspection personnel are implementing appropriate graduated series of enforcement for violations consistent with UST Regulations and HSC.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

To demonstrate resolution of this incidental finding, the CUPA will consistently report UST Program information in CERS for two consecutive reporting periods showing RTC timeframes consistent with UST Regulations and HSC or the implementation of a graduated series of enforcement as applied informal or formal enforcement, per the CUPA's I&E Plan.

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OBSERVATIONS AND RECOMMENDATIONS

Observations and recommendations identify areas of Unified Program implementation that could be improved and provide suggestions for improvement. Though the CUPA is not required by regulation or statute to apply the recommendations provided, the CUPA would benefit in applying the recommendations provided to improve the overall implementation of the Unified Program.

1. OBSERVATION:

Review of accounting information finds for the last three FYs, collected CUPA revenues cover approximately half of Unified Program expenses. The rest of the Unified Program expenses are covered by the City of Roseville general fund budget.

- FY 2017/2018: \$881,557 in collected CUPA revenues covered 47% of Unified Program expenses (\$1,889,014).
- FY 2016/2017: \$828,132 in collected CUPA revenues covered 47% of Unified Program expenses (\$1,763,520).
- FY 2015/2016: \$816,220 in collected CUPA revenues covered 52% of Unified Program expenses (\$1,569,469).

RECOMMENDATION:

Review the fee accountability program and develop a plan to incrementally adjust the CUPA fee schedule over the next few years so that more of the necessary and reasonable costs to implement the Unified Program are covered by assessed and collected CUPA revenues.

2. OBSERVATION:

Review of UST testing and leak detection test results finds the following instance where testing results indicate one or more failures of tested components:

- CERS ID 10458904: secondary containment test results dated October 21, 2016, indicate failure of the secondary pipe #2. However, there is no follow-up secondary containment test showing passing results of failed components.

Further, review indicates there has been no follow up by the CUPA or UST owner/operator regarding repairing and retesting of failed components.

RECOMMENDATION:

Ensure failures identified in testing and leak detection test results are repaired and retested as appropriate.

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FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

3. OBSERVATION:

Review of CERS finds the following USTs/UST systems within the jurisdiction of the CUPA may need to be permanently closed by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- CERS ID 10197085
- CERS ID 10404403
- CERS ID 10505968

Note: The examples provided above may not identify all USTs/UST systems which may need to be permanently closed by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05.

RECOMMENDATION:

Continue to provide verbal and written reminders to UST facility owners/operators of the December 31, 2025, requirements for permanent closure of single-walled USTs. The notification should inform the facility owners/operators that, in order to stay in compliance with the law and avoid fines, owners/operators must replace or remove single-walled USTs by December 31, 2025. Additional information on the single-walled UST closure requirements may be found at:

http://waterboards.ca.gov/water_issues/programs/ust/single_walled/

Notify UST facility owners/operators that Replacing, Removing, or Upgrading Underground Storage Tanks (RUST) Program grants and loans are available to assist eligible small businesses with the costs necessary to remove, replace, or upgrade project tanks. Additional information on funding sources May be found at:

http://www.waterboards.ca.gov/water_issues/programs/ustcf/rust.shtml

4. OBSERVATION:

Review of CERS finds a limited number of instances where CERS UST data may not be accurate or complete. Data review is based on the UST Facility/Tank Data Download report obtained from CERS on January 10, 2019.

Data review indicates the following:

- Five tanks indicate “no” for striker plate/bottom protector installed.
- Two tanks indicate “blank” for piping primary containment.
- Three tanks with double-wall pressurized product pipe indicate having no mechanical or electronic line leak detector installed.
- Six tanks with construction dates post July 1, 2004, identified as having to conduct secondary containment testing.

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FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

- Three tanks with construction dates post July 1, 2004, identified as having single-wall components installed.

RECOMMENDATION:

Provide refresher training for UST inspection staff who review CERS UST facility submittals for accuracy and continue to assist facility owners or operators with reporting accurate and complete UST facility submittals with the next CERS submittal, but no later than one year.

5. OBSERVATION:

Review of the CUPA's permit to operate finds the permit identifies types of UST testing to be completed by owners/operators. This includes annual maintenance certification, triennial secondary containment testing, etc.

RECOMMENDATION:

During the next permitting cycle in 2022, consider adding the new triennial overfill inspection requirement to the list of types of testing which became effective October 1, 2018.

6. OBSERVATION:

Review of UST facility information in the CERS "Facility Listing (Details)" report, finds facility latitude or longitude coordinates are missing for the following facilities:

- CERS ID 10169777 – no latitude or longitude coordinates are provided.
- CERS ID 10212631 – no latitude or longitude coordinates are provided.
- CERS ID 10399081 – no latitude or longitude coordinates are provided.

Missing latitude or longitude coordinates directly impact a facility's location in CERS. Incorrect location of a facility impacts an emergency responder's ability to rely on CERS as a facility location tool in the event of a natural disaster or other emergency.

Note: U.S. EPA expects the Facility Location Map data provided in CERS for each UST facility to accurately reflect the geographic location of the facility. The reference point for each facility should be located in the center of the parcel map and may not be directly on top of the UST system.

RECOMMENDATION:

Ensure geolocation of facilities is correctly reflected in CERS. The CUPA or the UST facility owner/operator may do this by relocating the location drop pin in "Location Map" in CERS.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

7. OBSERVATION:

Review of Report 6 regarding annual UST compliance inspections finds the following for the last three FYs:

- FY 2017/2018: 49 of 51 (96%) annual UST compliance inspections were conducted.
- FY 2016/2017: 50 of 51 (98%) annual UST compliance inspections were conducted.
- FY 2015/2016: 51 of 52 (98%) annual UST compliance inspections were conducted.

RECOMMENDATION:

Review annual UST compliance inspection data and ensure each regulated UST facility is inspected annually.

8. OBSERVATION:

SPCC Plan submittals were accepted by the CUPA for CERS IDs 10467403, 10501558, 10619398, and 10753135.

SPCC Plans are not required as part of an APSA CERS submittal; therefore, SPCC Plans should not be uploaded to CERS, and should not be accepted by the CUPA if erroneously submitted by a regulated facility.

The APSA documentation section in CERS is for annual tank facility statement submittals, unless a business plan is already submitted, or other local reporting requirements.

RECOMMENDATION:

Do not accept SPCC Plans submitted in CERS by a regulated facility.

9. OBSERVATION:

The City of Roseville AST webpage contains inaccurate or outdated information as follows: (https://www.roseville.ca.us/government/departments/fire_department/fire_and_life_safety/hazardous_materials_inspections_cupa/aboveground_storage_tanks):

- The APSA Tank Facility Statement, APSA Flyer, and Roseville Fire Department Fee Schedule links are broken.
- Not all APSA regulated businesses must meet the federal SPCC rule requirements, some regulated businesses may be exempt.

RECOMMENDATION:

Ensure the links to the APSA Tank Facility Statement, APSA Flyer, and Roseville Fire Department Fee Schedule are active and consider adding links to the Office of the State Fire

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OBSERVATIONS AND RECOMMENDATIONS

Marshal website (<https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/>) for more information on the APSA program and the U.S. Environmental Protection Agency website (<https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations>) for information on SPCC requirements.

Include information related to tank facilities with tanks in underground areas that are now regulated under APSA.

10. OBSERVATION:

CUPA staff occasionally provide comments to facilities upon review of CERS APSA submittals when a facility provides an APSA submittal in lieu of Tank Facility Statement. The comments instruct the facilities to use the CERS Document Upload Option 'Stored at Facility', rather than 'Provided Elsewhere in CERS' with submittal element 'Hazardous Material Inventory' selected.

RECOMMENDATION:

Encourage facilities that annually submit a complete HMBP in CERS (in lieu of providing an annual Tank Facility Statement) to use the CERS Document Upload Option 'Provided Elsewhere in CERS' with submittal element 'Hazardous Material Inventory' selected.

11. OBSERVATION:

The CUPA does not utilize a comprehensive APSA specific inspection checklist.

The CUPA has performed incomplete and inconsistent APSA inspections, generally with the use of a Hazardous Materials inspection checklist that includes only some APSA violations. Occasionally, an SPCC review checklist is also used to conduct APSA inspections.

The CUPA has been provided the APSA TAG inspection checklists, consisting of four types of APSA facilities, for use at Conditionally Exempt facilities, Tier I qualified facilities, Tier II qualified facilities, and full SPCC Plan facilities.

RECOMMENDATION:

Utilize the provided comprehensive APSA inspection checklists for each of the four types of APSA facilities and ensure that the checklist used for each APSA inspection is applicable to the tank facility being inspected.

12. OBSERVATION:

On March 20, 2019, DTSC conducted a non-RCRA LQG oversight inspection with the CUPA at CERS ID 10626280. Prior to arriving at the facility, the inspector demonstrated knowledge of the facility's inspection history and CERS data. During the inspection, the inspector gained consent to inspect the facility, toured the entire site noting violations during the walkthrough, reviewed all

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applicable documentation for LQGs, described facility issues with the operator, and issued an inspection report on the day of the inspection. However, the tank integrity assessment was not requested and reviewed until DTSC informed the inspector that the documents should be reviewed. The inspector cited the facility with violations for open HW containers, failure to properly label all HW containers, failure to include job titles and description of the position within the training plan, failure to document daily tank inspection details, failure to include the life expectancy of the tank in the tank integrity assessment, and failure to maintain and operate a facility to minimize the possibility of a fire, explosion, or release. Also during the inspection, DTSC explained drained used oil filter requirements. No photographs were taken during the inspection.

DTSC noted that this facility is inspected annually and in each inspection conducted since 2016, no hazardous waste generator violations were cited. Violations relating to the training plan, daily tank inspections, and the tank integrity assessment would have been violations in previous inspections. The inspector did not bring a checklist, or other materials for reference or note-taking during the inspection.

On March 26, 2019, DTSC conducted a PBR oversight inspection with the CUPA at CERS ID 10454692. The inspector was well prepared for the inspection. Prior to arriving at the facility, the inspector demonstrated knowledge of the facility's inspection history and CERS data. The inspector did not request consent to conduct the inspection, however the inspection was previously scheduled and the operators were aware of the purpose of the visit. During the inspection, the inspector toured the entire site noting violations during the walkthrough, reviewed all applicable documentation for PBR and RCRA LQGs, described facility issues with the operator, and issued an inspection report on the day of the inspection. The inspector cited the facility with violations of PBR and RCRA LQG requirements including: closure plan, waste analysis plan, closure cost estimate, phase I assessment, training, tank integrity assessment, PBR notification submittal, biennial report, tank labeling, labeling, and hazardous waste determinations. Previous inspections conducted in 2015, 2016, 2017, and 2018 only noted one PBR violation related to financial assurance/closure cost estimates. The other violations noted in this March 26, 2019, oversight inspection would have been violations in previous inspections. Some training was provided to the CUPA by DTSC during this inspection. No photographs were taken during the inspection.

DTSC noted that the CUPA inspectors did not have regulatory access to the DTSC Hazardous Waste Tracking System (HWTS) and therefore used the public access in HWTS to prepare for the inspections.

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RECOMMENDATION:

Always have inspectors ask for consent of the facility prior to conducting the inspection, have inspectors take photographs as evidence of violations and bring materials with them in order to take notes and document specifics of violations during inspections. Have inspectors review CCR, Section 66266.130, Management of Used Oil Filters, and request HWTS training from DTSC.

13. OBSERVATION:

A review of inspection reports indicates most, if not all, program elements are inspected at the same time. However, individual violations are not specified for each program element (APSA, UST, HWG, HWG-TP, etc.) It is difficult to determine which violations are identified for each program element on inspection reports.

RECOMMENDATION:

Designate a separate section on inspection reports to identify violations for each program element. This will assist the HWG facilities being inspected to understand which violations pertain to which program element.

14. OBSERVATION:

The CUPA does not note that consent was received by the facility to conduct the inspection on the HWG inspection report.

RECOMMENDATION:

Document "Consent to Inspect" was obtained and include the name of the person who consented to the inspection on the HWG inspection report.

15. OBSERVATION:

The CUPA does not include a section in the HWG inspection report to specify the CERS ID, the EPA ID and the size of the HWG (CESQG, SQG, LQG, RCRA LQG, or TP).

RECOMMENDATION:

Noting the size of the HWG on the inspection report will be helpful in determining the correct violations that would be pertinent to the HWG being inspected.

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EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION

Examples of outstanding program implementation highlight efforts and activities of the CUPA that are considered above and beyond the standard expectations for implementation of the Unified Program.

1. APSA PROGRAM PARTICIPATION:

The CUPA staff serves on the APSA Advisory committee and actively participates in APSA program workgroups providing knowledge and expertise on aboveground tanks from both an APSA and Fire Code aspect. Most notably, the CUPA has been instrumental in the development of the tanks in underground areas regulations and in providing fire code classes on aboveground storage tanks at the Annual Unified Program Training conference.