



Gavin Newsom
Governor

Jared Blumenfeld
Secretary for Environmental Protection

January 20, 2022

Mr. Silvio Lanzas
Fire Chief
Glendale City Fire Department
780 Flower Street
Glendale, California 91201-3057

Dear Chief Lanzas:

During February 2021 through November 2021, CalEPA and the state program agencies conducted a performance evaluation of the Glendale City Fire Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, and California Environmental Reporting System data.

Upon completion of the evaluation, a preliminary Summary of Findings report was developed to identify various findings: program deficiencies with corrective actions, incidental findings with resolutions and program observations and recommendations. The report also includes examples of outstanding Unified Program implementation. Enclosed, please find the final Summary of Findings report.

Based upon review and completion of the performance evaluation, CalEPA has rated the CUPA's overall implementation of the Unified Program as satisfactory with improvement needed.

To demonstrate progress towards the correction of program deficiencies and incidental findings identified in the final Summary of Findings, the CUPA must submit an Evaluation Progress Report within 60 days from the date of this letter (January 20, 2022), and every 90 days thereafter. Evaluation Progress Reports are required to be submitted to CalEPA until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead at Timothy.Brandt@calepa.ca.gov.

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 (Melinda.Blum@calepa.ca.gov) within 30 days. If you would like to have specific comments remain anonymous, please indicate so on the survey.

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

Sincerely,



Jason Boetzer, REHS
Assistant Secretary
Local Program Coordination and Emergency Response

Enclosures

cc sent via email:

Mr. Jeff Ragusa
Fire Marshal
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Mr. Jovan Diaz
Principal Fire Environmental Safety Specialist
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Glendale, California 91201-3057

Ms. Cheryl Prowell
Supervising Water Resource Control Engineer
State Water Resources Control Board
P.O. Box 2231
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Ms. Laura Fisher
Senior Environmental Scientist, Supervisor
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Ms. Maria Soria
Program Manager
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700 Heinz Avenue, Suite 210
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cc sent via email:

Mr. Ryan Miya
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Mr. James Hosler, Chief
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Ms. Jennifer Lorenzo
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Mr. Sean Farrow
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Mr. Kevin Abriol
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Ms. Mary Wren-Wilson
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cc sent via email:

Mr. John Paine
Unified Program Manager
California Environmental Protection Agency

Mr. John Elkins
Environmental Program Manager
California Environmental Protection Agency

Ms. Melinda Blum
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Mr. Garrett Chan
Environmental Scientist
California Environmental Protection Agency

Mr. Tim Brandt
Environmental Scientist
California Environmental Protection Agency

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

CUPA: Glendale City Fire Department

Evaluation Period: February 2021 – November 2021

Evaluation Team Members:

- **CalEPA Team Lead:** Timothy Brandt
- **DTSC:** Kevin Abriol, Brennan Ko-Madden
- **CalEPA*:** Garrett Chan
- **State Water Board:** Sean Farrow, Wesley Franks
- **CALFIRE-OSFM:** Glenn Warner, Mary Wren-Wilson

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 Unified Program implementation and performance of the CUPA is considered satisfactory with improvement needed.

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

Tim Brandt
CalEPA Unified Program
Phone: (916) 323-2204
E-mail: timothy.brandt@calepa.ca.gov

The CUPA is required to submit an Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings Report, and every 90 days thereafter, until all deficiencies and incidental findings have been acknowledged as corrected or resolved.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead and must include a narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report.

Evaluation Progress Report submittal dates for the first year following the evaluation are:

1st Progress Report: March 21, 2022 **2nd Progress Report:** June 20, 2022
3rd Progress Report: September 19, 2022 **4th Progress Report:** December 26, 2022

*Effective July 1, 2021, oversight of the Hazardous Materials Release Response Plans and Inventory and the California Accidental Response Prevention Program transitioned from Cal OES to CalEPA.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

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 CUPA is not consistently ensuring return to compliance (RTC) for Hazardous Waste Generator (HWG) Program facilities cited with violations.

Review of inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information, in the California Environmental Reporting System (CERS) and the CUPA's local data management system indicates there is no documented RTC for the following violations:

- January 1, 2018 – December 31, 2020: 56 of 398 (14%)
- July 1, 2014 – December 31, 2018: 47 of 418 (11%)
 - 1 of 20 (5%) Class II HWG violations remain out of compliance
 - 32 of 394 (8%) Minor HWG violations remain out of compliance.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

Health and Safety Code (HSC), Chapter 6.5, Sections 25110.8.5, 25117.6, and 25187.8(b) and (g)

HSC, Chapter 6.7, Section 25288(d)

HSC, Chapter 6.11, Section 25404.1.2(c)

California Code of Regulations (CCR) Title 27, Sections 15200(a) and (e) and 15185(a) and (c) [DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a spreadsheet obtained from the CUPA's local data management system or CERS, that includes, at a minimum, the following information for each HWG facility with open violations (no RTC):

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date;
- Actual RTC date (when applicable);
- RTC qualifier; and
- In the absence of obtained RTC, a narrative of the appropriate enforcement taken by the CUPA to ensure RTC.

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**UNIFIED PROGRAM PERFORMANCE EVALUATION
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DEFICIENCIES REQUIRING CORRECTION

The CUPA will prioritize follow-up actions with each facility based on the level of hazard violations present to public health and the environment.

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three HWG facility records, as requested by DTSC, that include documentation of RTC or the appropriate enforcement taken by the CUPA.

2. DEFICIENCY:

The CUPA is not consistently reporting complete and accurate CME information, to CERS for the HWG Program.

Review of CERS CME information, inspection reports, and other information provided by the CUPA finds the following:

- CERS ID 10473448: Inspection dated February 11, 2019, documents three violations with RTC observed on March 26, 2019, and April 16, 2019. However, no “Other” inspections were entered into CERS.
- CERS ID 10645009: Inspection dated December 11, 2018, documents four violations with RTC observed on August 9, 2019. However, no “Other” inspections were entered into CERS.
- CERS ID 10470757: Inspections dated September 26, 2018, and February 11, 2020, are not documented in CERS.
- CERS ID 10420846: Inspection dated February 11, 2020, does not correctly document violations in CERS. Violation code 3230082 (Conditional Authorization violation for failure to provide secondary containment for treatment in containers) was cited under the Permit By Rule inspection program.
- CERS ID 10594075: Inspection and violations dated August 6, 2018, were not correctly documented in CERS. The inspection comments in CERS dated August 7, 2018, state that the inspection was part 2 of a multiday inspection, however the inspection was coded in CERS as a “Routine” inspection.

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

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation. Though the CUPA provided an updated Data Management Procedure to CalEPA on February 10, 2021, during the Evaluation Progress Report process, review of CERS indicated not all incorrect HWG CME was identified and corrected in CERS, thus the deficiency remained uncorrected.

CITATION:

HSC, Chapter 6.11, Section 25404(e)
CCR, Title 27, Sections 15187(c) and 15290(a)(3) and (b)
[DTSC]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop and provide CalEPA with an action plan for reporting HWG Program CME information consistently and correctly to CERS. The action plan will include, at a minimum, the following:

- Review of CERS Guidance Letter: Reporting Re-inspections and Related Violations: <https://cers.calepa.ca.gov/wp-content/uploads/sites/11/2017/04/reporting-re-inspections.pdf>;
- Review of CERS Guidance Letter: Reporting Multi-Day Inspections: https://cers.calepa.ca.gov/wp-content/uploads/sites/11/2017/04/how-to-report-multi-day-inspections-in-cers_general.pdf;
- Identification and correction of the cause(s) of incorrect HWG Program CME information reported to CERS, including any data transfer issues from the local data management system to CERS to ensure all CME information is consistently reported completely and accurately to CERS;
- Identification of HWG Program CME incorrectly reported to CERS from January 1, 2018, through December 31, 2020;
- A process for reporting HWG Program CME information identified as being previously reported incorrectly to CERS;

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, if not available in CERS, the CUPA will provide CalEPA with an inspection report for an inspection conducted during the previous three months or RTC documentation obtained during the previous three months for up to three HWG Program facilities as requested by DTSC.

By the 5th Progress Report, the CUPA will consistently and correctly report complete and accurate HWG Program CME information to CERS. The CUPA will provide a statement confirming the completion of all prior HWG Program CME information not previously reported to CERS, or previously reported incorrectly to CERS, from January 1, 2018, through December 31, 2020, as currently and correctly being reported to CERS.

3. DEFICIENCY:

The CUPA did not consistently include all observations, factual basis, and corrective action documentation for each violation cited on HWG and/or Tiered Permit (TP) inspection reports.

Review of HWG and TP inspection reports, CERS CME information, and Notices of Violation indicates inadequate or improper documentation of cited violations for the following facilities:

- CERS ID 10420846: Inspection dated February 11, 2020, cites a violation for failure to meet required secondary containment requirements for hazardous waste tank systems or components, with a comment that states, "Secondary has material," but does not provide a description or quantity of waste, and does not provide a detailed corrective action required to return to compliance.

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10470757: Inspection dated February 11, 2020, cites a violation for maintaining training records, with a comment that states, “Need Documents,” but does not describe what the records shall include, and does not provide a detailed corrective action required to return to compliance.
- CERS ID 10500895: Inspection dated January 30, 2020, cites violations for hazardous waste accumulation container labeling, with a note that states, “Drums need labels,” but does not describe the contents of the drums, locations, or what is required on the label.
- CERS ID 10645765: Inspection dated April 16, 2021, cites a violation for failure to post emergency information containing location of equipment, contact names and numbers, and does not provide a detailed corrective action required to return to compliance.

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

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation. DTSC provided HWG training to the CUPA on November 19 and 20, 2019, which included inspection report writing topics. The above examples occurred subsequent to the training provided, thus the deficiency remained uncorrected during the Evaluation Progress Report process.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will ensure that each inspector reviews the “CalEPA Inspection Report Writing Guidance” (<https://calepa.ca.gov/wp-content/uploads/sites/6/2016/10/CUPA-Documents-Inspection-InspectionRpt-accessible.pdf>).

The CUPA will provide CalEPA with documentation of CUPA personnel that reviewed the above mentioned Guidance, which includes at a minimum the name of each inspector and the date the information was reviewed.

By the 2nd Progress Report, and with each subsequent progress report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least two HWG violations, for three HWG facilities, as requested by DTSC, that have been inspected after CUPA personnel reviewed the “CalEPA Inspection Report Writing Guidance” and within the last three months. Each inspection report will contain observations, factual basis, and necessary corrective actions to be taken for each observed HWG violation.

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DEFICIENCIES REQUIRING CORRECTION

4. DEFICIENCY:

The CUPA is not consistently following up and documenting RTC information in CERS for Aboveground Petroleum Storage Act (APSA) tank facilities cited with violations.

Review of CERS CME information indicates there is no documented RTC for the following violations:

- Fiscal Year (FY) 2020/2021:
 - 2 of 12 (16%) violations, including 1 violation for not having, or failure to prepare, a Spill Prevention, Control, and Countermeasure (SPCC) Plan.

Note: During the evaluation, the CUPA was able to successfully follow up and document RTC for all outstanding violations for FYs 2017/2018, 2018/2019, and 2019/2020.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

HSC Chapter 6.11, Section 25404.1.2(c)

HSC, Chapter 6.67, Section 25270.4.5(a)

CCR, Title 27, Sections 15185(a) and (c) and 15200(a) and (e)

[OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the local data management system or CERS, that includes, at a minimum, the following information for each APSA tank facility with open violations (no RTC) cited July 1, 2020, through June 30, 2021:

- Facility name;
- CERS ID;
- Inspection and violation dates;
- Scheduled RTC date;
- Actual RTC date (when applicable);
- RTC qualifier; and
- In the absence of obtained RTC, a narrative of the appropriate enforcement taken by the CUPA.

The CUPA will prioritize follow-up actions with each facility based on the level of hazard present to public health and the environment.

By the 3rd Progress Report and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three APSA tank facility records, as requested by OSFM, that include RTC documentation or a description of the appropriate enforcement taken by the CUPA.

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DEFICIENCIES REQUIRING CORRECTION

By the 4th Progress Report, the CUPA will have ensured each APSA tank facility identified in the 1st Progress Report with an open violation for no SPCC Plan has achieved compliance, or the CUPA will have taken appropriate enforcement.

5. DEFICIENCY:

The UST operating permit, and UST operating permit conditions, issued under the Unified Program Facility Permit (UPFP), are inconsistent with UST Regulations and HSC.

Review of UST operating permits and UST operating permit conditions, issued under the UPFP, finds the following inconsistencies with UST Regulations and HSC:

- The CUPA is issuing an annual permit however, the CUPA does not have the authority to issue an annual permit.
- Permit conditions state UST owners or operators shall notify the CUPA of changes in substance stored within 30 days, while the regulatory requirement is to notify the CUPA 30 days *prior* to any change in substance stored.
- Permit conditions state hard copies of UST operating permits shall be maintained on-site, while the regulatory requirement is for permits to be maintained as a hard copy on-site, or electronically.
- Permit conditions reference HSC Chapters, 6.75 and 18, however the CUPA does not have regulatory authority under HSC Chapters, 6.75 or 18.
- Permit conditions state “monitoring, emergency, response, and plot plans must be maintained onsite,” which is inconsistent with HSC, Section 25293, allowing for records of monitoring, testing, repairing, and closure to be kept in sufficient detail to enable the local agency to determine whether the UST is in compliance.
- Permit conditions state “the permittee must perform the required annual maintenance testing of all leak detection and spill equipment and provide documentation of testing to this office.” Not all testing of leak detection is required to be performed annually, and the requirement to provide documentation cannot be enforced because there is no timeframe outlined.

Note: State Water Board correspondence dated April 7, 2017, “Amended Requirements for Unified Program Facility Permits Effective January 1, 2017” may be referenced.

CITATION:

HSC, Chapter 6.7, Sections 25284 and 25285
CCR, Title 23, Sections 2712(c) and (i)
CCR, Title 27, Section 15190(h)
[State Water Board]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

During the evaluation, the CUPA provided CalEPA with a revised UST operating permit template and UST operating permit conditions, issued under the UPFP. State Water Board will review the UST operating permit template and UST operating permit conditions, issued under the UPFP, and will provide feedback with the 1st Progress Report.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit template and/or UST operating permit conditions, based on feedback from the State Water Board and CalEPA, and will provide the amended UST operating permit template and/or UST operating permit conditions to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised UST operating permit and/or revised UST operating permit conditions under the UPFP and will provide CalEPA with five UPFPs issued to UST facilities using the revised UST operating permit template and revised UST operating permit conditions.

By the 3rd Progress Report, if amendments to the revised UST operating permit template and/or UST operating permit conditions were necessary, the CUPA will begin to issue the amended UST operating permit and/or amended UST operating permit conditions under the UPFP. The CUPA will provide CalEPA with five UPFPs issued to UST facilities using the amended UST operating permit template and/or amended UST operating permit conditions.

6. DEFICIENCY:

The CUPA is not consistently conducting complete annual UST compliance inspections.

Review of the Technical Compliance Rate (TCR) indicates not all UST violations are being cited, as the TCR for the CUPA is significantly higher in comparison to the average TCR for California, the average TCR nationally, and the TCR of an equivalent CUPA.

- The TCR is a measurement of how a UST facility complies with performance measures as determined by the United States Environmental Protection Agency (U.S. EPA).
 - A low TCR indicates a low rate of compliance.
 - A high TCR indicates a high rate of compliance.
- Therefore, a significantly higher TCR than the California average, the national average, and that of an equivalent CUPA is indicative of not citing UST violations at the same frequency as other CUPAs.

Review of the CUPA's TCR information in comparison with the average TCR for California and the TCR of an equivalent CUPA for the following reporting periods finds the following:

- January – June 2019
 - Glendale City Fire Department: 29/33 (88%)
 - California average: 3039/7540 (40%)
 - Equivalent CUPA: 20/38 (53%)

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DEFICIENCIES REQUIRING CORRECTION

- July – December 2019:
 - Glendale City Fire Department: 13/26 (50%)
 - California average: 2902/6141 (47%)
 - Equivalent CUPA: 12/28 (43%)
- January – June 2020:
 - Glendale City Fire Department: 27/32 (84%)
 - California average: 4036/6646 (60%)
 - Equivalent CUPA: 18/28 (64%)
- July – December 2020:
 - Glendale City Fire Department: 22/25 (88%)
 - California average: 3698/6048 (61%)
 - Equivalent CUPA: 27/35 (77%)

Review of the National TCR average (which includes all states and territories under the authority of U.S. EPA) for the following reporting periods finds the following:

- April 2020 – March 2021: 59%
- October 2018 – September 2019: 44%

Note: Although the National TCR is reported on a different reporting cycle than that of the CUPA, comparison with the TCR rate of the CUPA demonstrates how the CUPA's TCR is higher than the reported averages for the State of California and on a National level.

In comparison with the California and National TCR averages, and in comparison with an equivalently sized CUPA, the high TCR of the CUPA is indicative of the CUPA not consistently observing non-compliance during the annual UST compliance inspection, not consistently citing and documenting violations in annual UST compliance inspection reports and/or in CERS, which provides inaccurate U.S. EPA TCR reporting, impacting the assessment of national compliance with UST Program requirements.

Review of annual UST compliance inspection reports, associated testing and leak detection documents, and CERS CME information finds the following examples where the CUPA did not consistently conduct complete annual UST compliance inspections:

- CERS ID 10401184
 - Annual Monitoring Certification (AMC) dated January 28, 2021, identifies "91 turbine not turning off when testing sensors for positive shutdown."
 - The UST inspection staff did not observe non-compliance, cite a violation for failure of the leak detection equipment to be installed, calibrated, operated, and/or maintained properly in the annual UST compliance inspection report dated January 28, 2021.
 - The CUPA did not provide accurate U.S. EPA TCR 9d reporting.
- CERS ID 10166763
 - AMC dated January 12, 2019, identifies "Replaced 87 AUX submersible turbine pump sump sensor model 208"
 - The UST inspection staff did not observe non-compliance, cite a violation for failure of the leak detection equipment to be installed, calibrated, operated, and/or

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DEFICIENCIES REQUIRING CORRECTION

maintained properly in the annual UST compliance inspection report dated January 12, 2019.

- The CUPA did not provide accurate U.S. EPA TCR 9d reporting.
- CERS ID 10133116
 - Overfill Prevention Equipment inspection was conducted late.
 - The UST inspection staff did not observe non-compliance, cite a violation for failure to conduct the Overfill Prevention Equipment inspection on time in the annual UST compliance inspection report dated June 16, 2020.
 - The CUPA did not provide accurate U.S. EPA TCR reporting.

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

Note: The following State Water Board documents may be referenced:

- Local Guidance letter 159 “Annual Underground Storage Tank Compliance Inspection,” dated November 29, 2016.
- “When to Review Underground Storage Tank Records,” dated July 1995.
- “Petroleum Underground Storage Tank Financial Responsibility Guide,” dated Month Day, Year.

CITATION:

HSC, Chapter 6.7, Section 25288(b), 25292.2 and 25299
CCR, Title 23, Section 2713(c)(4), 2711(a)(11), and 2809(a)
CCR, Title 27, Section 15290(a)(3)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will perform a thorough analysis of the UST element of the Unified Program and identify why complete annual UST compliance inspections are not consistently conducted. This analysis shall include, at a minimum:

- discussion of what procedures and tools may be needed to consistently conduct complete annual UST compliance inspections (e.g. identifying areas of the annual UST compliance inspection checklist that can be improved); the California CUPA Forum “UST Inspection Checklist,” may be referenced (<https://calcupa.org/inspection-checklist/index.html>).
- a plan for addressing all the reasons why complete annual UST compliance inspections are not consistently conducted.
- identification of the types of training needed to consistently conduct complete UST compliance inspections.

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DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, based on the findings identified in the CUPA's analysis, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure, at minimum:

- the establishment of a process directing UST inspection staff to conduct complete annual UST compliance inspections;
- a process for the review and follow-up of submitted testing and leak detection documents by the owner or operator as part of the annual UST compliance inspection;
- a process to document and report the observed noncompliance in annual UST compliance inspection reports and in CERS;
- a process for conducting annual UST compliance inspections when UST inspection staff are on-site to witness the monitoring system certification and visually inspect all UST required components;
- a process for conducting annual UST compliance inspections when UST inspection staff are not on-site and cannot witness the monitoring system certification and visually confirm all UST requirements are met;
- a process for reviewing the annual UST compliance inspection checklist for thoroughness to capture citations in accordance with UST Regulations, HSC, and the CERS violation library.

The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 4th Progress Report, if amendments were necessary, the CUPA will train UST inspection staff on the amended I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan, or other applicable procedure.

By the 5th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide UST facility records for five UST facilities, as selected by the State Water Board, including, at a minimum, annual UST compliance inspection reports and associated testing, and leak detection documents.

By the 6th Progress Report, and with each subsequent Progress Report until considered corrected, the State Water Board will review TCR information in Report 6 and CERS for two consecutive Report 6 reporting periods to determine if the CUPA is consistently conducting complete UST compliance inspections.

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FINAL SUMMARY OF FINDINGS REPORT**

DEFICIENCIES REQUIRING CORRECTION

7. DEFICIENCY:

The CUPA is not consistently citing violations for failure to conduct an overfill prevention equipment inspection.

Initial overfill prevention equipment inspections must have been completed no later than October 13, 2018.

The CUPA did not consistently cite violations to ensure the new provision in UST Regulations was implemented upon adoption.

Review of annual UST compliance inspection reports, associated Overfill Prevention Equipment Inspection Report Forms, and CERS CME information finds the following overfill prevention equipment inspections were conducted after the October 13, 2018, deadline and the CUPA did not cite violations:

- CERS ID 10166761: Overfill Prevention Equipment Inspection Report Form dated November 13, 2018. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection December 12, 2018, nor provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10460578: Overfill Prevention Equipment Inspection Report Form dated November 16, 2018. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection November 16, 2018, nor provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10488010: Overfill Prevention Equipment Inspection Report Form dated January 1, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection July 23, 2019, nor provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10502788: Overfill Prevention Equipment Inspection Report Form dated May 28, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection May 28, 2019, nor provide accurate U.S. EPA TCR 9b reporting.

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

CITATION:

HSC, Chapter 6.7, Sections 25288(b), 25299, and 25299.2(a)

CCR, Title 23, Sections 2637.2(a), 2665(b), 2712(c), (e), (g) and 2713(c) and (d)

CCR, Title 27, Section 15290(a)(3)

[State Water Board]

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure the establishment of a process directing UST inspection staff to correctly cite all UST violations on annual UST compliance inspection reports, report all UST violations in CERS, and provide accurate TCR reporting to the State Water Board. The process will delineate how the CUPA will ensure UST inspection staff are trained on new provisions of UST Regulations and HSC, and on how to consistently and correctly cite violations for failure to implement those provisions. The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with a copy of the amended I&E Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 3rd Progress Report, if amendments were necessary, the CUPA will train UST inspection staff on the amended I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide the State Water Board with the UST compliance inspection report and Overfill Prevention Equipment Inspection Report Form for up to five UST facilities, as requested by the State Water Board, that have been inspected after training has been completed.

8. DEFICIENCY:

The CUPA is not correctly citing and reporting UST violations in CERS.

Review of CERS CME information finds the CUPA reported 15 UST violations as “General” violations (CERS Violation Library citation 2010) from July 1, 2017, through May 6, 2021, when a specific CERS Violation Library citation was available. The following are examples:

- CERS ID 10491061: The correct CERS Violation Library citation for failure to maintain monitoring certification records for release detection is 2030001.
- CERS ID 10506997: The correct CERS Violation Library citation for failure to maintain monitoring certification records for release detection is 2030001.
- CERS ID 10501135: The correct CERS Violation Library citation for failure to maintain alarm log records is 2030020.
- CERS ID 10451518: The correct CERS Violation Library citation for failure to maintain monitoring certification records for release detection is 2030001.

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10470199: The correct CERS Violation Library citation for failure of leak detection equipment to be installed, calibrated, operated, and/or maintained properly is 2060027.

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

CITATION:

HSC, Chapter 6.7, Sections 25288(b), 25299, and 25299.2(a)
CCR, Title 23, Sections 2712(c), (e), (g), and 2713(c) and (d)
CCR, Title 27, Section 15290(a)(3)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review and revise the I&E Plan, or other applicable procedure, to ensure the establishment of a process directing UST inspection staff to correctly cite all UST violations on annual UST compliance inspection reports and correctly report all UST violations in CERS. The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure, are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with a copy of the amended I&E Plan, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised I&E Plan, or other applicable procedure were necessary, the CUPA will train UST inspection staff on the amended I&E Plan, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, if not available in CERS, the CUPA will provide the State Water Board with the UST compliance inspection report for five UST facility records, as requested by the State Water Board, that have been inspected after training has been completed. For each UST facility that has not had a completed overfill prevention equipment inspection, the CUPA will provide CalEPA with a narrative of the applied appropriate enforcement.

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DEFICIENCIES REQUIRING CORRECTION

9. DEFICIENCY:

The CUPA is not consistently ensuring RTC is obtained within 60 days or is not consistently following up and documenting RTC information in CERS for UST testing or leak detection violations.

Review of CERS CME information finds the following testing and leak detection violations did not obtain RTC within 60 days:

- FY 2017/2018
 - 16 of 22 (72%)
- FY 2018/2019
 - 38 of 56 (68%)
- FY 2019/2020
 - 56 of 79 (71%)

Below are examples of the testing and leak detection violations with no RTC in CERS within 60 days:

- CERS ID 10460578: UST compliance inspection report dated January 30, 2020, indicates failure to maintain the interstitial space such that a breach in the primary or secondary containment is detected before the liquid or vapor phase of the hazardous substance stored in the UST tank is released into the environment, i.e., vapor, pressure, hydrostatic (VPH) monitoring.
- CERS ID 10166761: UST compliance inspection report dated December 5, 2019, indicates failure to maintain secondary containment.
- CERS ID 10417078: UST compliance inspection report dated December 23, 2019, indicates failure to maintain monitoring records for release detection and/or maintain records of appropriate follow-up actions.
- CERS ID 10485307: UST compliance inspection report dated March 16, 2020, indicates failure to submit a copy of the overfill prevention equipment inspection results on the Overfill Prevention Equipment Inspection Report Form to the CUPA within 30 days after the inspection.

Note: The examples provided above may not represent all instances of this deficiency and only include testing and leak detection violations.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

HSC, Chapter 6.7, Section 25288(d)
[State Water Board]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review and revise the I&E Plan or other applicable procedure, to ensure establishment of a process for UST inspection staff to document RTC and follow-up actions taken by the CUPA within 60 days for applying appropriate enforcement. The CUPA will provide CalEPA with the revised I&E Plan, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised I&E Plan or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, if amendments to the I&E Plan or other applicable procedure were necessary, the CUPA will train UST inspection staff on the amended I&E Plan or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with UST facility records for five UST facilities, as selected by the State Water Board, that include RTC or documentation of an applied appropriate enforcement.

The State Water Board will consider this deficiency corrected when RTC percentages improve and indicate the CUPA is consistently ensuring RTC is obtained within 60 days or is consistently following up and documenting RTC information in CERS for UST testing or leak detection violations.

10. DEFICIENCY:

The CUPA is not documenting in sufficient detail whether the UST owner or operator has demonstrated to the satisfaction of the CUPA, UST closure and soil and/ or groundwater sampling complies with UST Regulations and HSC.

The following CERS IDs were issued UST closure letters that do not document in sufficient detail, that the owner or operator demonstrated proper closure to the satisfaction of the CUPA and in accordance with UST Regulations and HSC:

- CERS ID 10772350 – Closure letter dated June 22, 2018
- CERS ID 10132948 – Closure letter dated January 12, 2020
- CERS ID 10500709 – Closure letter dated August 22, 2016

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DEFICIENCIES REQUIRING CORRECTION

Additionally, the closure letters provided by the CUPA identify “no further action” based on site conditions as required, however, the CUPA is not a certified Local Oversight Program (LOP), therefore the CUPA does not have the regulatory authority to issue a “no further action” letter.

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

Note: State Water Board UST Program Leak Prevention [Frequently Asked Question 15](https://www.waterboards.ca.gov/ust/leak_prevention/faq15.shtml) (https://www.waterboards.ca.gov/ust/leak_prevention/faq15.shtml) may be referenced.

CITATION:

HSC, Chapter 6.7, Section 25298(c)
CCR, Title 23, Section 2672(d)
[State Water Board]

CORRECTIVE ACTION:

During the evaluation, the CUPA developed a UST closure letter template, which was provided to CalEPA and the State Water Board. The State Water Board will review the UST closure letter template and provide feedback with the 1st Progress Report.

By the 1st Progress Report, the CUPA will develop and provide CalEPA with a UST closure procedure or other applicable procedure, to ensure the establishment of a process for UST closure, which will include, at a minimum, how the CUPA will:

- Provide UST closure documentation to the UST owner or operator which demonstrates to the satisfaction of the CUPA, UST closure and soil and/or groundwater sampling complies with UST Regulations and HSC.

By the 2nd Progress Report, if amendments to the revised UST closure procedure or other applicable procedure and/or revised UST closure letter template are necessary, based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended UST closure procedure or other applicable procedure and/or the amended UST closure letter template. If no amendments to the revised UST closure procedure or other applicable procedure and/or the revised UST closure letter template are necessary, the CUPA will train UST inspection staff on the revised UST closure procedure or other applicable procedure and/or the revised UST closure letter template. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised UST closure procedure or other applicable procedure and/or the revised UST closure letter template.

By the 3rd Progress Report, if amendments to the revised UST closure procedure or other applicable procedure and/or the revised UST closure letter template were necessary, the CUPA will train UST inspection staff on the amended UST closure procedure or other applicable procedure and/or the amended UST closure letter template. The CUPA will provide training documentation to CalEPA, which, at minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended UST closure procedure or other applicable procedure and/or the amended UST closure letter template.

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DEFICIENCIES REQUIRING CORRECTION

With respect to facilities which have not been provided adequate UST closure documentation, the CUPA will use the finalized UST closure letter template and provide documentation upon request.

For the next two UST closures, or until considered corrected, the CUPA will provide CalEPA with a copy of the UST closure documentation demonstrating UST closure and soil and/or groundwater sampling complies with UST Regulations and HSC to the satisfaction of the CUPA.

11. DEFICIENCY:

UST compliance inspection information and facility inventory in Report 6 is inconsistent with CUPA Self-Audit Reports and CERS CME information.

Review of Report 6, CUPA Self-Audit Reports, and CERS CME UST facility inspection frequency information finds UST facilities were inspected for the following years:

- FY 2017/2018
 - Report 6 – 59 of 61 (97%)
 - CUPA Self-Audit Report – Identified as reported in CERS
 - CERS CME Information – 45 of 62 (73%)
- FY 2018/2019
 - Report 6 – 60* of 60 (100%)
 - CUPA Self-Audit Report – 59 of 61 (97%)
 - CERS CME Information – 53 of 62 (85%)
- FY 2019/2020
 - Report 6 – 58 of 59 (98%)
 - CUPA Self-Audit Report – 59 of 59 (100%)
 - CERS CME Information – 55 of 62 (89%)

* State Water Board identifies 60 UST facilities inspected in FY 2018/2019 instead of 62 as routine compliance inspections cannot be conducted at a rate of more than 100%.

CITATION:

HSC, Chapter 6.11, Section 25404(e)(4)
CCR, Title 23, Section 2713(c)(3)
CCR, Title 27, Sections 15187(c) and 15290(b)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop and provide CalEPA with an action plan that, at a minimum, includes:

- A thorough analysis and explanation as to how Report 6, CUPA Self-Audit Reports, and CERS CME information have inconsistent UST compliance inspection information; and
- A strategy to ensure UST compliance inspection information in Report 6, CUPA Self-Audit Reports, and CERS will be consistently reported.

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DEFICIENCIES REQUIRING CORRECTION

By the 1st Progress Report, the CUPA will review and revise the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process, which, at a minimum, will address how UST compliance inspection information is consistently reported in Report 6, CUPA Self-Audit Reports, and CERS. The CUPA will provide CalEPA with the revised Data Management Procedure, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended Data Management Procedure, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the revised Data Management Procedure, or other applicable procedure.

By the 3rd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure were necessary, the CUPA will train UST inspection staff on the amended Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended Data Management Procedure, or other applicable procedure.

By the 4th Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will consistently report UST compliance inspection information in Report 6 and CERS for two consecutive Report 6 reporting periods.

12. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not ensuring all regulated businesses subject to Business Plan reporting requirements annually submit a Hazardous Materials Business Plan (HMBP) or a no-change certification to CERS. An established and maintained HMBP includes a chemical inventory, site map, and emergency response and employee training plans.

Review of HMBPs submitted to CERS by regulated businesses subject to Business Plan reporting requirements indicates:

- 77 of 578 (13%) regulated businesses have not submitted a chemical inventory or a no-change certification within the last 12 months.

CITATION:

HSC, Chapter 6.95, Sections 25505(a) and 25508(a)
[CalEPA]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA made significant progress toward ensuring all regulated businesses subject to Business Plan reporting requirements annually submit a chemical inventory or no-change certification to CERS. As of August 31, 2021, 38 of 577 (7%) regulated businesses have not submitted a chemical inventory or no-change certification within the last 12 months. The CUPA will continue to ensure all regulated businesses subject to Business Plan requirements annually submit a HMBP or no-change certification to CERS. No further action is required.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

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:

Required components of the Inspection and Enforcement (I&E) Plan are inaccurate or incomplete.

The following components are inaccurate:

- Inspection frequencies for the Permit By Rule (PBR), Conditionally Authorized (CA), and Conditionally Exempt (CE) portions of the HWG Program need to be updated to include an “initial inspection within two years of notification and every three years thereafter.” The I&E Plan recognizes the mandated inspection frequency but is not updated under the inspection frequency of the CUPA.
- Identification of penalties and enforcement citations that are consistent and predictable for similar violations and no less stringent than state statute and regulations.
 - The Penalty Matrix specifies a minimum penalty for UST violations is \$0, when the minimum UST penalty is no less than \$500, per UST, per violation, per each day of violation.
- Identification of all available enforcement options.
 - The I&E Plan references several informal and formal enforcement actions in the context of different classes of violations; however, the I&E Plan does not define all enforcement actions that can be applied to facilities.
- The I&E Plan outlines reporting requirements for Significant Operation Compliance when the correct reporting method is done through TCR.
- The I&E Plan outlines that UST operating permits, issued under UPFPs, are only issued to UST facilities that are in compliance with UST Regulations and HSC, while HSC only allows permits to be withheld or not issued if the UST facility has a red tag affixed to a UST, is subject to an enforcement action, or has not paid permit fees.

The following components are incomplete:

- Provisions for ensuring sampling capability and analysis performed by a state certified laboratory.
 - The CUPA references sample analysis by a laboratory for certain class I violations; however, a general sampling procedure, which includes analysis by a state certified laboratory to be applied across all program elements, is not discussed.
 - Information should include details specific to the CUPA’s internal process for performing training, identifying applicable sampling equipment, any methods to preserve physical evidence obtained through sampling and testing information. This information was required when the CUPA became certified and is necessary to proceed with any potential enforcement actions as needed.

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**UNIFIED PROGRAM PERFORMANCE EVALUATION
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INCIDENTAL FINDINGS REQUIRING RESOLUTION

- The I&E Plan does not reflect HSC, Chapter 6.7, provisions for the red tag authority, which prevents the withdrawal of fuel from a UST. Beginning January 1, 2019, no person shall withdraw fuel from a UST that has a red tag affixed to its fill pipe, except to empty the UST pursuant to a directive from the CUPA or State Water Board.

Note: State Water Board Local Guidance Letter 164-4, "Semi-Annual Underground Storage Tank Program Report," may be referenced.

CITATION:

HSC, Chapter 6.7, Sections 25285(b) and 252952.3(a)(2)(A) and (c)(1)(C)
CCR, Title 23, Sections 2712(c) and 2713(c)
CCR, Title 27, Section 15200(a)
[CalEPA, DTSC, State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a revised I&E Plan that adequately addresses inconsistencies and incorporates all required components.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA, DTSC, and the State Water Board, the CUPA will provide CalEPA with the amended I&E Plan. If no amendments are necessary, the CUPA will train CUPA personnel, including UST inspection staff, on the revised I&E Plan. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of CUPA personnel, including UST inspection staff, in attendance. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 3rd Progress Report, if amendments to the revised I&E Plan were necessary, the CUPA will train CUPA personnel, including UST inspection staff, on the amended I&E Plan. The CUPA will provide training documentation to CalEPA, which, at a minimum, will include an outline of the training conducted and a list of CUPA personnel, including UST inspection staff, in attendance. Once training is complete, the CUPA will implement the amended I&E Plan.

2. INCIDENTAL FINDING:

The CUPA is not consistently classifying APSA Program violations properly.

Review of facility files and CERS CME information indicates the CUPA is classifying not having, or failure to prepare, a SPCC Plan as a minor violation as follows:

- FY 2018/2019 through FY 2020/2021 – 1 of 6 (17%)

Facilities that operate without an SPCC Plan present a significant threat to human health or the environment and may benefit economically from noncompliance either by reduced costs or by competitive advantage. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3). In addition, classifying a violation for not having an SPCC Plan as minor is inconsistent with, and less stringent than, the U.S. EPA.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

Note: The Federal SPCC rule is not delegated to any state. However, APSA requires consistency and compliance with the SPCC rule for SPCC Plan preparation and implementation, as well as consistency with Federal enforcement guidance.

CITATION:

HSC, Chapter 6.11, Sections 25404(a)(3), 25404.2(a)(3) and 25404.2(a)(4)
HSC, Chapter 6.67, Sections 25270.4.1(c), 25270.4.5(a)
CCR, Title 27, Section 15200(a) and (e)
[OSFM]

RESOLUTION:

By the 1st Progress Report, the CUPA will train its inspectors on the definition of minor violation as defined in HSC, Chapter 6.11, Section 25404(a)(3) and how to properly classify violations during compliance inspections as minor, Class I, and Class II. Training should include, at a minimum, review of:

- Violation Classification Training Video 2014 (<https://www.youtube.com/watch?v=RB-5V6RfPH8>)
- 2020 Violation Classification Guidance for Unified Program Agencies (<https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf>)
- The “U.S. EPA Civil Penalty Policy for Section 311(b)(3) and Section 311(j) of the Clean Water Act, August 1998 for SPCC violations,” which specifies that a no SPCC Plan violation is not considered minor (https://19january2017snapshot.epa.gov/enforcement/civil-penalty-policy-section-311b3-and-section-311j-clean-water-act-cwa-august-1998_.html).

The CUPA will provide CalEPA with training documentation, which will include, at a minimum, an outline of the training conducted and a list of CUPA personnel attending the training.

3. INCIDENTAL FINDING:

The CUPA is not submitting quarterly Surcharge Transmittal Reports to CalEPA within 30 days after the end of each fiscal quarter when state surcharge revenues are remitted.

The following quarterly Surcharge Transmittal Reports were not received by the required due date:

- FY 2017/2018
 - The CUPA provided one Quarterly Surcharge Transmittal Report for the complete FY on November 6, 2018. Though remittance of collected state surcharge revenues were transmitted sometime after the end of the 4th Fiscal Quarter, it is unclear from the information provided if the surcharges were collected during any of the previous fiscal quarters.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

- FY 2018/2019
 - The CUPA provided one Quarterly Surcharge Transmittal Report for the complete FY on January 6, 2020. Though remittance of collected state surcharge revenues were transmitted sometime after the end of the 4th Fiscal Quarter, it is unclear from the information provided if the surcharges were collected during any of the previous fiscal quarters.
- FY 2019/2020
 - The CUPA provided one Quarterly Surcharge Transmittal Report for the complete FY on November 9, 2020. Though remittance of collected state surcharge revenues were transmitted sometime after the end of the 4th Fiscal Quarter, it is unclear from the information provided if the surcharges were collected during any of the previous fiscal quarters.
- FY 2020/2021
 - The CUPA provided Quarterly Surcharge Transmittal Reports for the first three fiscal quarters, regardless of whether or not any state surcharge revenues were collected.
 - The Quarterly Surcharge Transmittal Report for the 1st fiscal quarter was provided on February 2, 2021, approximately three months late.
The Quarterly Surcharge Transmittal Report reflected remittance of \$0.

CITATION:

CCR, Title 27, Section 15250(b)(1) and (2)
[CalEPA]

RESOLUTION:

By the 1st Progress Report, the CUPA will have submitted to CalEPA the 3rd Quarterly Surcharge Transmittal Report for FY 2021/2022 by the required due date using the current template. Thereafter, the CUPA will submit each Quarterly Surcharge Transmittal Report to CalEPA no later than 30 days after the end of each fiscal quarter.

The current Quarterly Surcharge Transmittal Report template can be found at:

https://calepa.ca.gov/wp-content/uploads/sites/6/2021/07/SURCHARGE-TRANSMITTAL-REPORT_20210709-ADA.pdf

4. INCIDENTAL FINDING:

The CUPA is not inspecting all UST facilities at least once every 12 months.

Review of Report 6 data for each FY finds the following UST facilities were not inspected:

- FY 2017/2018
 - 2 of 61 (3%)
- FY 2019/2020
 - 1 of 59 (2%)

Note: This incidental finding was identified as a deficiency during the 2018 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

CITATION:

HSC, Chapter 6.7, Section 25288(a)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will develop and provide CalEPA with a list of UST facilities that have not been inspected at least once every 12 months. The list will include, at a minimum, the CERS ID number, UST facility name, and last UST inspection date.

By the 2nd Progress Report, the CUPA will have completed annual UST compliance inspections for UST facilities identified as not being inspected within the past 12 months, prioritizing the most delinquent UST facilities first and UST facilities with single-walled components within 1000-foot radius of a public drinking water well. The CUPA will provide CalEPA with a copy of the annual UST compliance inspection report for the completed inspections.

5. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The Unified Program administrative procedures have components that are inaccurate.

The following component of the Records Maintenance administrative procedures is inaccurate:

- Minimum retention times
 - The CUPA stipulates in the Data Management procedures that all records related to hazardous waste enforcement actions after the enforcement action has been resolved will be maintained for at least three years. The minimum retention time for this type of information is five years.

CITATION:

CCR, Title 27, Sections 15180(e), 15185(b) and (f)
[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the CUPA provided CalEPA with a revised Records Maintenance procedure that includes the correct retention time for records related to hazardous waste enforcement actions. No further action is required.

6. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

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 receipt.

During the 45-day review process the CUPA must:

- 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.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

CERS data indicates the following PBR Onsite Hazardous Waste Treatment Notification was not reviewed, processed, or authorized by the CUPA within 45 days of receipt:

- CERS ID 10132924: PBR submittal on January 27, 2021, was marked as “Under Review” on March 22, 2021, and has not been marked as “Accepted” or “Not Accepted.” A subsequent submittal was made on March 23, 2021, and was Marked as “Accepted” on April 15, 2021.

Note: This incidental finding was identified as a deficiency during the 2018 CUPA Performance Evaluation and though on February 10, 2021, the CUPA provided CalEPA with an action plan for ensuring timely reviews of Onsite Hazardous Waste Treatment Notification submittals, the deficiency was not considered corrected during the Evaluation Progress Report process.

CITATION:

CCR, Title 22, Sections 67450.2(b)(4), 67450.3(c)(1), and 67450.3(d)
[DTSC]

RESOLUTION: COMPLETED

During the evaluation, the CUPA marked the submittal for the cited facility as “Not Accepted.” No further action is required.

7. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not properly reviewing, processing, and authorizing each annual Onsite Hazardous Waste Treatment Notification for onsite treatment facilities with a FTU.

Review of FTU submittals in CERS finds the following:

- CERS ID 10828303
 - Conditional Authorization submittal on December 13, 2019, was marked as “Accepted” on July 1, 2020.
 - The ‘Specific Waste Type Treated’ narrative states, “Printed Circuit board line. The waste that will be treated will be an acid and alkaline waste stream with and without metals.”
 - The ‘Treatment Process Description’ narrative states, “We will be doing a pH adjustment and Ion exchange. There will be 3 streams. Acidic, alkaline, and non-metal bearing.”
 - This unit likely does not qualify under the CA tier since the waste type treated and the treatment process indicates that the waste stream is being treated by both neutralization of acidic and alkaline wastes and pH adjustment of aqueous waste containing metals. Wastes that qualify under the CA tier must be hazardous solely due to a single constituent.

CITATION:

CCR Title 22, Sections 67450.2(b)(4) and 67450.3(c)
HSC, Chapter 6.5, Section 25200.3(e)(3) and 25201.5(d)(7)
[DTSC]

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RESOLUTION: COMPLETED

During the evaluation, the CUPA followed up with CERS ID 10828303 and determined that the submittals identifying the facility as falling into the CA tier were submitted and accepted in error. The CUPA worked with the facility to revise the CERS submittals to correctly identify the facility as falling into the PBR tier, as well as including additional documentation relating to the tank certification requirements. This information was submitted to CERS on January 3, 2022, and was subsequently reviewed and accepted by the CUPA. No further action is required.

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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 overall implementation of the HWG program, including CERS data, and facility file information between January 1, 2018, through December 31, 2020, is summarized below:

- CERS indicates 539 routine HWG inspections were conducted.
 - 201 of 539 (37%) routine inspections resulted in one or more violations being cited.
 - 338 of 539 (63%) routine inspections had no violations cited.
- CERS indicates 6 Class I violations were cited.
- CERS indicates 17 Class II violations were cited.
- CERS indicates 364 minor violations were cited.
- CERS indicates the CUPA did not complete any formal enforcement on HWG facilities.

DTSC was unable to conduct oversight inspections due to Coronavirus (COVID-19) restrictions.

U.S. EPA conducted an inspection with the CUPA on August 6, 2019. As a result of that inspection, U.S. EPA cited multiple violations (failure to make a hazardous waste determination, transportation without a manifest, exceedance of accumulation time frame, labelling, and open containers). The penalty assessed to the facility was \$49,706.

RECOMMENDATION:

Ensure complete and thorough inspections are conducted to identify all violations at facilities. Ensure inspection reports are detailed and include all observations, factual basis of violations, and corrective actions. Follow the I&E Plan to follow up with facilities that have not returned to compliance by the scheduled RTC date and, pursuant to the I&E Plan, apply appropriate enforcement for facilities that do not RTC.

2. OBSERVATION:

HWG inspection checklists have outdated CERS Violation Library citations. Examples include:

- 3010001 expired on May 31, 2016
- 3030052 expired on May 31, 2016
- 3210001 expired on May 31, 2016

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

RECOMMENDATION:

Revise all HWG checklists, including those for Small Quantity Generators (SQGs), Non-Resource Conservation and Recovery Act (RCRA) Large Quantity Generators (LQGs), and RCRA LQGs, to ensure each is current with CERS Violation Library citations.

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3. OBSERVATION:

The I&E Plan dated 2019 contains information that is inaccurate, outdated, or may benefit from improvement.

- Page 2 – The CUPA has authority for the APSA program only. Unified Program Agency inspectors do not have the authority to enforce the federal SPCC rule and not all APSA tank facilities are required to prepare an SPCC Plan. For clarity, the SPCC reference should be removed.
- Page 6 – The Frequency of Inspections table references a mandated frequency for APSA facilities storing >1,320 gallons; however, the mandated frequency per the APSA statute applies only to tank facilities storing 10,000 gallons or more of petroleum.
- Page 14 section 5.c – The APSA RTC timeframe is omitted. For clarity, although there are no established timeframes under APSA, Unified Program regulated facilities cited with a minor violation have 30 days from the date of the notice to comply, in accordance with HSC Section 25404.1.2(c)(1).
- Pages 14 and 25 – The APSA program is improperly referenced as APSA/SPCC.
- Page 26 – The APSA program is improperly referenced as AST.
- Page 27 – The APSA program enforcement authority provided under HSC 25270.12 references SPCC. Unified Program Agency inspectors do not have the authority to enforce the federal SPCC rule. The SPCC reference should be removed.
- Pages 31 and 40 – The APSA program is improperly referenced as Above Ground Storage Tank.

RECOMMENDATION:

Update the I&E Plan as indicated above.

4. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 48 tank facilities. The CUPA’s local data management system identifies 37 APSA tank facilities.

- 37 APSA tank facilities are identified in both CERS and the CUPA’s local data management system.
- 11 tank facilities are reported as “APSA Applicable” in CERS but are not identified as APSA tank facilities in the CUPA’s local data management system. These facilities are likely not APSA regulated. Change the CERS APSA reporting requirement to “APSA Not Applicable” for each of these facilities.
- Investigate three additional facilities currently reported in CERS as “APSA Not Applicable” to determine if any are actual APSA tank facilities.

RECOMMENDATION:

Complete the reconciliation of the APSA Program information in the CUPA’s local data management system with CERS to ensure all APSA tank facilities are included in both systems.

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5. OBSERVATION:

The CUPA's website contains various resources for the public and regulated community, however, the CUPA's Hazardous Materials Business Plan webpage at: <https://www.glendaleca.gov/government/departments/fire-department/fire-prevention/environmental-management-center/hazardous-materials-business-plan> has a broken link for the CERS website.

RECOMMENDATION:

Update the CUPA's website with the correct link to CERS: <https://cers.calepa.ca.gov/>.

6. OBSERVATION:

Multiple APSA tank facilities submitted an HMBP in lieu of a tank facility statement using the 2011 emergency response and training plans template, which has an obsolete phone number for OSFM.

An additional two APSA tank facilities were missing site map elements in recently accepted HMBP submittals.

- CERS ID 10481092: missing emergency response equipment and evacuation staging area.
- CERS ID 10501135: missing north orientation, emergency shutoff, emergency response equipment, and evacuation staging area.

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the consolidated emergency response and training plans template to use the current 2017 version, when an HMBP is submitted in lieu of a tank facility statement. The current template is available in CERS.

Consistently ensure HMBP submittals, in lieu of tank facility statements, include site maps that contain all applicable required elements.

7. OBSERVATION:

The CUPA has not included personnel years necessary to implement, administer, and operate the California Accidental Release Prevention (CalARP) program in the performance audits for the past three fiscal years in accordance with CCR, Title 19, Section 2780.5(b)(7).

RECOMMENDATION:

Include the personnel years in future performance audits to satisfy the requirements of the program.

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8. OBSERVATION:

The CUPA's Area Plan has outdated information.

- Pages 352, 354, 549, and 551: The correct Cal OES Warning Center phone number is (916) 845-8911, not (916) 262-1621 and (916) 262-1685.
- Page 354: The correct Cal OES HazMat Unit phone number is (916) 845-8911, not (916) 464-3230/3231.
- Page 354: The phone numbers for the Cal OES Regions are outdated.
- Throughout the Area Plan, citations for CCR, Title 19 are numbered incorrectly (Sections 2720, 2722-2732).
- Page 93: HSC, Section 25505 is the correct citation in place of HSC, Section 25504.

RECOMMENDATION:

With the next review, revise the Area Plan to address outdated information.

9. OBSERVATION:

Review of CERS finds CERS ID 10166761 (Tank ID 4) and CERS ID 10400827 (Tank ID 5) as the only UST systems having single-walled components which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05. All other UST systems having single-walled components that may otherwise not be represented in CERS require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05.

RECOMMENDATION:

Continue to provide verbal reminders to all applicable UST facility owners or operators regarding the December 31, 2025, requirements for permanent closure of single-walled USTs. Consider providing written notification of the requirement to all applicable UST facility owners or operators. The written notification should inform facility owners or operators that in order to remain in compliance, owners or operators must replace or remove single-walled USTs by December 31, 2025. Additional information regarding single-walled UST closure requirements may be found at: http://waterboards.ca.gov/water_issues/programs/ust/single_walled/.

Notify facility owners or 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 USTs. More information on funding sources may be found at:

https://www.waterboards.ca.gov/water_issues/programs/ustcf/rust.html.

10. OBSERVATION:

The CUPA provides comprehensive guidance documentation and procedures for its implementation of the UST Program, and these guidance documents include reference to California Fire Code. The following is an example:

- Underground Storage Tank Installation Application Package

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Pursuant to CCR, Title 27, Section 25404(a)(6), CUPAs are explicitly not permitted to include California Fire Code or the California Building Code on Unified Program Operating Permits. The CUPA is permitted to reference provisions of these Codes in comprehensive guidance documents for inclusiveness, however, the CUPA must ensure that these Codes are not referenced in such a way as to impact the UST Program. It is not permissible to make permitting or other UST requirements contingent upon compliance with these Codes.

Note: The example provided above may not include all instances of this observation.

RECOMMENDATION:

Ensure that comprehensive guidance documentation, provided to CUPA personnel, UST inspection staff, and the public, are clear, consistent, and delineated to assist in making sure all UST Program requirements are met. Additional requirements under other applicable laws, including but not limited to California Fire Code or California Building Code, must be identified separately and not merged into the UST Program requirements. References to these Codes must be worded carefully to avoid the implication that these additional requirements are UST requirements. Language indicating that a UST Program requirement or issuance of the UST operating permit is contingent upon these additional requirements should not be used.

11. OBSERVATION:

Review of the UST Facility/Tank Data Download report obtained from CERS on May 6, 2021, indicates there are a limited number of instances where CERS monitoring and construction data are incorrect as follows:

- 2 of 9 (22%) USTs installed on, or after, July 1, 2004, listed as having secondary containment testing.
- 18 of 160 (11%) USTs show no striker plate/bottom protectors.
- 9 of 124 (7%) USTs identified with double-wall pressurized product pipe, incorrectly show having no mechanical or electronic line leak detector.

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

Note: The following may be referenced:

- “General Reporting Requirements for USTs,”
- “When to Issue a UST Operating Permit,”
- “Common CERS Reporting Errors,”
- “Setting Accepted Submittal Status,”
- “Which Forms Require Uploading to CERS,” and
- State Water Board correspondence dated November 29, 2016, “When to Review Underground Storage Tank Records.”

RECOMMENDATION:

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

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12. OBSERVATION:

The information below is a comparison of the total number of regulated facilities within each Unified Program element upon certification of the CUPA with present-day circumstance and the degree to which the number of regulated facilities has increased or decreased. The information is sourced from the following:

- Glendale City Fire Department CUPA Application from September 1996
- CERS “Summary Regulated Facilities by Unified Program Element Report,” generated July 19, 2021
- CERS “UST Inspection Summary Report (Report 6),” generated July 19, 2021
- The Glendale City Fire Department CUPA Fiscal Year 2019/2020 Annual Self-Audit Report
- The Glendale City Fire Department Fee Accountability Program Policy Document (12/2020 Revision)

- Total Number of Regulated Businesses and Facilities:
 - In 1996: 682
 - Current CUPA Evaluation: 636
 - A decrease of **46** facilities

- Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Program Regulated Businesses and Facilities:
 - In 1996: 682
 - Current CUPA Evaluation: 602
 - A decrease of **80** facilities

- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - In 1996: 112
 - Current CUPA Evaluation: 60
 - A decrease of **52** facilities

- Total Number of Regulated USTs:
 - In 1996: 300
 - Current CUPA Evaluation: 159
 - A decrease of **141** USTs

- Total Number of Regulated Hazardous Waste Generator (HWG) Facilities:
 - In 1996: 361
 - Current CUPA Evaluation: 427
 - An increase of **66** facilities

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- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - In 1996: Not specified
 - Current CUPA Evaluation: 1
 - Comments: The difference between the current and historic number of facilities cannot be determined at this time.
- Total Number of Regulated Tiered Permitting (TP) Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):
 - In 1996: 48
 - Current CUPA Evaluation: 7
 - A decrease of **41** facilities
- Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) Facilities:
 - In 1996: Not specified
 - Current CUPA Evaluation: 13
 - Comments: The difference between the current and historic number of facilities cannot be determined at this time.
- Total Number of Regulated Risk Management Prevention Plan (RMPP), also known as California Accidental Release Prevention (CalARP) Program Facilities:
 - In 1996: 8
 - Current CUPA Evaluation: 2
 - A decrease of **6** facilities
- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities
 - In 1996: 13
 - Current CUPA Evaluation: 37
 - An increase of **24** facilities

Since the receipt of the CUPA application in 1996, an expansion of responsibilities in the HWG and APSA programs has occurred, increasing the total regulated facility count and attributing to an increased workload undertaken by the CUPA to further implement regulatory oversight of each of these programs. The number of regulated facilities for some program elements has notably decreased, including UST facilities (a decrease of 52 facilities, or 46%), TP Facilities (a decrease of 41 facilities, or 85%), and CalARP facilities (a decrease of 6 facilities, or 75%). Conversely, HWG facilities increased by 66, or 19%, and APSA program facilities increased by 24, or 185%. Despite the variability across program elements, the overall trend shows the number of regulated facilities managed by the CUPA as of FY 2020/2021 is approximately 7% less than it was at the time the CUPA application was received in 1996.

The information below is a comparison of the overall full-time equivalent (FTE) of CUPA personnel allocated to the implementation of the Unified Program upon certification of the CUPA with present-day circumstance and the degree to which allocated inspection and supervisory/management staff has increased or decreased. The information is sourced from the

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Glendale City Fire Department CUPA Application (Submitted September 1996) and recent information provided by the CUPA.

- Inspection and Supervisory Staff:
 - In 1996:
 - 2 Supervisors and 6 Inspectors totaling 8 FTE
 - Note: The original CUPA application indicates eight personnel will be allocated full time for the CUPA program.
 - Currently:
 - Glendale Fire Department has 7.05 FTE budgeted for the Hazardous Material Section, which includes, but is not limited to, CUPA activities.
 - The CUPA program is specifically budgeted for 4.35 FTE, of which:
 - 3.0 FTE is currently allocated for one CUPA program supervisor and six staff, including inspection staff.
 - Below are the allocated available supervisory and inspection staffing resources (FTEs) of similarly sized CUPAs as reported in 2020 and 2021 CUPA performance evaluations:
 - CUPA #1: 557 facilities, 3.5 budgeted FTEs
 - CUPA #2: 473 facilities, 5 budgeted FTEs
 - CUPA #3: 486 facilities, 5 budgeted FTEs

Though additional program element responsibilities have been incorporated into the implementation of the Unified Program and the number of facilities regulated by the CUPA has changed since the CUPA first applied for certification, the full-time equivalent of inspection and supervisory personnel has significantly decreased by approximately 63%.

RECOMMENDATION:

The comparison of the implementation of the program upon certification with present-day circumstance reveals that, at present, CUPA performance appears to be hindered by staffing resources as related to the total number of regulated facilities and/or the implementation of Unified Program elements. This evaluation concludes that the CUPA is deficient in maintaining inspection frequency and obtaining RTC for violations relative to most program elements. In addition, a number of findings related to the administrative implementation of the CUPA program were identified.

Reevaluate the current budget, including revenue sources and expenditures, single fee assessment for each regulated entity, and funding allocation for program services. Determine if it is necessary to increase the single fee for program elements to ensure revenue is reasonably adequate for implementing the Unified Program and CUPA operations, regarding the need to acquire support of additional staff or other resources as necessary and reasonable to ensure adequate implementation of program services and regulatory oversight for each program element.

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Examine how current CUPA resources are being allocated, specifically in areas of inspection and enforcement, and ensure that required program elements are implemented as a first priority before supplemental efforts that may not be specifically required or associated with the Unified Program.

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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. PARTICIPATION IN TAGS:

Glendale City Fire Department supports and promotes the participation of several inspection staff in the following Unified Program Administration and Advisory Group (UPAAG) technical advisory groups (TAGs) to actively foster statewide coordination and consistent implementation of the Unified Program among all CUPAs:

- UST TAG: Four CUPA inspection staff
- Hazardous Waste TAG: Three CUPA inspection staff
- APSA TAG: Two CUPA inspection staff
- CalARP TAG: One CUPA inspection staff

Additionally, the Glendale City Fire Department CUPA manager fulfilled the role of Secretary for the Southern California Region UST TAG from 2016 to 2018.

2. TARGETED TRAINING FOR AUTOMOTIVE REPAIR FACILITIES:

Automotive repair facilities represent the largest sector overseen by the CUPA, the majority of which are small, standalone operations. To ensure compliance with the Unified Program requirements, the CUPA has developed a free training program geared specifically towards this type of facility. The program is designed to educate automotive repair facility owners and operators on hazardous waste generator requirements, hazardous material handler requirements, and industrial wastewater discharge requirements that typically apply to these types of facilities, as well as discussing frequently encountered violations and how to avoid them.
