



February 9, 2022

Ms. Vicki Jones Environmental Health Director Merced County Health Department Division of Environmental Health 260 East 15<sup>th</sup> Street Merced, California 95341-6216

Dear Ms. Jones:

During November 2018 through April 2019, CalEPA and the state program agencies conducted a performance evaluation of the Merced County Health Department, Division of Environmental Health Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System data, and oversight inspections.

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 an example 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.

CalEPA recognizes the delay with issuing the final Summary of Findings report.

Consequently, as the next CUPA Performance Evaluation is scheduled to begin in May 2022, there is sufficient time for submittal and review of one Evaluation Progress Report, although the timeframe for completion of corrective actions and resolutions may extend beyond submittal of the first Evaluation Progress Report.

The CUPA is required to submit the Evaluation Progress Report 60 days from the receipt of this final Summary of Findings Report. Please submit the Evaluation Progress Report to Timothy Brandt at <a href="mailto:timothy.brandt@calepa.ca.gov">timothy.brandt@calepa.ca.gov</a>.

The CUPA is strongly encouraged to provide an update detailing as much progress made as possible in accomplishing the corrective actions and resolutions for each identified deficiency and incidental finding, particularly if steps for corrective actions and resolutions outlined for completion in anticipated subsequent Progress Reports have

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been completed and addressed at present. Any deficiencies that remain uncorrected will be incorporated into the next performance evaluation.

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.

Sincerely,

Jason Boetzer Assistant Secretary

Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

Ms. Cheryl Prowell
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#### cc sent via email:

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Mr. John Paine Unified Program Manager California Environmental Protection Agency

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

Ms. Elizabeth Brega Senior Environmental Scientist, Supervisor California Environmental Protection Agency Ms. Vicki Jones Page 4

cc sent via email:

Mr. Garett 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:** Merced County Health Dept. Division of Environmental Health

**Evaluation Period:** November 2018 through April 2019

## **Evaluation Team Members:**

• CalEPA Team Lead: Timothy Brandt, Christopher Moon

• DTSC: Matthew McCarron

• Cal OES\*: Fred Mehr, Garett Chan

• State Water Board: Lisa Jensen,

Sean Farrow

• CAL FIRE-OSFM: Joann Lai,

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 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**

Phone: (916) 323-2204

E-mail: timothy.brandt@calepa.ca.gov

CalEPA recognizes the delayed issuance of this final Summary of Findings report. Consequently, as the next CUPA Performance Evaluation is scheduled to begin in May 2022, there is sufficient time for submittal and review of one Evaluation Progress Report, although the timeframe for completion of corrective actions may extend beyond submittal of the first Evaluation Progress Report.

The CUPA is required to submit an Evaluation Progress Report 60 days from the receipt of this Final Summary of Findings Report. The Evaluation Progress Report must be submitted to the CalEPA Team Lead at <a href="mailto:timothy.brandt@calepa.ca.gov">timothy.brandt@calepa.ca.gov</a> no later than **April 22, 2022**.

The CUPA is strongly encouraged to provide an update detailing as much progress made as possible in accomplishing the corrective actions and resolutions for each identified deficiency and incidental finding, particularly if steps for corrective actions and resolutions outlined for completion in anticipated subsequent Progress Reports have been completed and addressed at present, or in advance. Any deficiencies that remain uncorrected or incidental findings that remain unresolved will be incorporated into the next CUPA Performance Evaluation.

\*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.

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# 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(s) indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute.

## 1. DEFICIENCY:

The CUPA is not consistently requiring Underground Storage Tank (UST) facilities to submit UST testing and leak detection documents.

Review of facility files and compliance, monitoring, and enforcement (CME) information in the California Environmental Reporting System (CERS) finds the following examples where UST testing and leak detection documents were not found:

- CERS ID: 10497538
  - Last two secondary containment test results
  - Last three annual monitoring certification test reports
- CERS ID: 10453057
  - 2018 secondary containment test results
- CERS ID: 10492171
  - o 2018 secondary containment test results

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

## CITATION:

Health and Safety Code (HSC), Chapter 6.7, Sections 25288(b)
California Code of Regulations (CCR), Title 23, Sections 2637(e), 2638(d), 2643(g) and 2644.1(a)(5)
[State Water Board]

#### CORRECTIVE ACTION:

By the 1<sup>st</sup> Progress Report, the CUPA will provide CalEPA with a revised Inspection and Enforcement (I&E) Plan, or other applicable procedure, that describes the following activities performed by the CUPA to:

- Ensure UST owners/operators submit UST testing and leak detection documents within the prescribed time frame;
- Initiate appropriate enforcement for failure to submit UST testing and leak detection documents within the prescribed time frame.

By the 2<sup>nd</sup> Progress Report, the CUPA will, if necessary, amend the revised I&E Plan, or other applicable procedure, based on feedback from the State Water Board and will provide the amended I&E Plan, or other applicable procedure to CalEPA.

By the 3<sup>rd</sup> Progress Report, the CUPA will implement and train UST personnel on the revised or amended I&E Plan or other applicable procedure and will provide training documentation to

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

CalEPA. Training documentation will include, but not be limited to, an outline of the training conducted and a list of UST personnel in attendance.

By the 4<sup>th</sup> Progress Report, the CUPA will develop and provide outreach program materials to CalEPA. When provided to CalEPA, the CUPA will outline how and when the outreach materials will be provided to the regulated community (both UST owners/operators and testers). The outreach materials must explain the requirement to submit the appropriate UST testing and leak detection documents in the timeframe required by statute and regulation.

By the 5<sup>th</sup> Progress Report, the CUPA will have completed the distribution of the outreach materials to the regulated community as notification of the requirements to submit appropriate UST testing and leak detection documents to the CUPA. The CUPA will provide CalEPA with a final copy of the outreach program materials and a list of businesses the materials were sent to.

By the 5<sup>th</sup> Progress Report and with each subsequent Progress Report until considered corrected, the CUPA will provide five facility records, as selected by the State Water Board. The selected UST facility records will include, but not be limited to, monitoring certification results, secondary containment test results, spill bucket test results, and any other testing or leak detection documents showing the date the testing and leak detection documents were received by the CUPA subsequent to completion of distribution of outreach materials. Provide records for the following UST facilities:

- CERS ID 10033552
- CERS ID 10132726
- CERS ID 10146177
- CERS ID 10155175
- CERS ID 10155177

## 2. DEFICIENCY:

The UST Operating Permit, issued under the Unified Program Facility Permit (UPFP), does not contain all required UST elements.

Review of UST Operating Permits, issued under the UPFP, finds the following required elements are missing:

- CERS Identification
- Tank Identification

Note: Effective January 1, 2017, Title 23 included revisions for permit conditions in section 2712(c). State Water Board correspondence dated April 7, 2017, "Amended Requirements for Unified Program Facility Permits Effective January 1, 2017," may be referenced.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

#### CITATION:

CCR, Title 23, Section 2712(c) CCR, Title 27, Section 15190(h) [State Water Board]

## CORRECTIVE ACTION:

By the 1<sup>st</sup> Progress Report, the CUPA will provide CalEPA with a revised UST Operating Permit template, to be issued under the UPFP, which includes the required components listed in this deficiency.

By January 1, 2020, the CUPA will have begun issuing the revised UST Operating Permit, issued under the UPFP, and will provide CalEPA with five UPFPs issued to UST facilities.

#### 3. DEFICIENCY:

The CUPA is not inspecting all facilities at the required frequencies for the APSA Program, HMBP Program, California Accidental Release Prevention (CalARP) Program and Hazardous Waste Generator (HWG) Program, including the Tiered Permitting (TP) component.

Review of facility files, CERS CME information, and information provided by the CUPA indicates:

# APSA Program

 24 of 85 (28%) APSA tank facilities that store 10,000 gallons or more of petroleum have not been inspected within the last three years.

## HMBP Program

40% of business plan facilities were not inspected within the last three years.

## CalARP Program

36% of CalARP facilities were not inspected within the last three years.

# Hazardous Waste Generator (HWG) Program

- The I&E plan specifies the inspection frequency for HWG facilities as at least once every three years.
- 506 of 791 (64%) HWG facilities were not inspected during calendar years 2016 through 2018

# TP component of the HWG Program:

- The I&E plan specifies the inspection frequency for HWG facilities as at least once every three years.
- 8 of 15 (53%) TP facilities were not inspected during calendar years 2016 through 2018

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

Note: Because this deficiency is based on CERS CME data, the actual number of HWG inspections may be different from what is noted.

## **CITATION:**

HSC, Chapter 6.5, Section 25201.4(b)(2)

HSC, Chapter 6.67, Section 25270.5(a)

HSC, Chapter 6.95, Sections 25511(b) and 25537(a)

CCR, Title 19, Section 2775.3

CCR, Title 27, Section 15200(a)(3)

[CalEPA, DTSC, OSFM]

## CORRECTIVE ACTION:

During the CUPA Performance Evaluation, the CUPA performed sufficient inspections at previously delinquent APSA Program facilities. No further action is required relative to the APSA Program.

By the 1<sup>st</sup> Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure HMBP, CalARP, HWG, and TP facilities are inspected at the frequency required and consistent with the I&E Plan. The action plan will include, at a minimum, for the HMBP Program, CalARP Program, HWG Program, and TP component of the HWG Program:

- A sortable spreadsheet, exported from the CUPA's data management system or CERS, of facilities identified as having not been inspected at the frequency required and consistent with the I&E Plan. For each identified facility, the spreadsheet will include: facility name, CERS ID number, and the date of the last routine inspection;
- A proposed schedule to inspect each identified facility by prioritizing the most delinquent inspections to be completed prior to any other inspection; and
- Future steps to ensure that all identified facilities will be inspected at the frequency required and consistent with the I&E Plan.

With the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated version of the spreadsheet for the HMBP Program, CalARP Program, HWG Program, and TP component of the HWG Program.

By the 4<sup>th</sup> Progress Report, the CUPA will have inspected each CalARP Program facility at least once within the last three years.

## 4. DEFICIENCY:

The CUPA is not properly classifying HWG violations.

In some cases, the CUPA is citing HWG violations as minor violations that are Class I or II violations. The following examples include, but are not limited to:

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

- Violation for exceedance of authorized accumulation time (illegally stored hazardous waste) 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).
  - CERS ID 10498144: Inspection dated April 1, 2016
  - o CERS ID 10492366: Inspection dated December 10, 2018
  - o CERS ID 10500382: Inspection dated October 3, 2018

## CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 CCR, Title 22, Sections 66260.10 and 66262.3 [DTSC]

## **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will train staff on the violation terms: minor, Class I, and Class II, as described in HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6 and CCR, Title 22, Section 66260.10. The CUPA will train personnel on when and how to properly cite violations for each program element during routine compliance inspections, including review the following:

- <u>Violation Classification Training Video 2014</u>
   https://www.youtube.com/watch?v=RB-5V6RfPH8
- <u>Violation Classification Guidance</u>
   <u>https://calepa.ca.gov/wp-content/uploads/sites/6/2020/06/Violation-Classification-Guidance-Document-accessible.pdf</u>

The CUPA will provide training documentation to CalEPA. Training documentation will include, but not limited to, an outline of the training conducted and a list of personnel in attendance.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with three inspection reports for HWG facilities inspected within the last six month and cited with hazardous waste violations.

#### 5. DEFICIENCY:

The CUPA is not ensuring that chemical inventories and/or site maps are submitted annually by each handler.

Review of CERS information indicates:

 425 of 1183 (36%) business plan facilities have not submitted chemical inventories and/or site maps within the past year.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

## **DEFICIENCIES REQUIRING CORRECTION**

#### CITATION:

HSC, Chapter 6.95, Sections 25505(a)(3) and 25508(a)(2) and (3) [CalEPA]

## **CORRECTIVE ACTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will develop, and provide CalEPA with a list of all business plan facilities that have not submitted a chemical inventory and/or site map within the past year.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will update the list with the status of business compliance and provide it to CalEPA.

By the 4<sup>th</sup> Progress Report, the CUPA will follow up with each business plan facility identified as having not submitted a chemical inventory and/or site map and will require a resubmittal of the chemical inventory and/or site map to obtain the missing information, or the CUPA will initiate appropriate enforcement for those businesses that have not submitted the required changes within 30 days.

## 6. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not consistently following up and documenting return to compliance (RTC) for Aboveground Petroleum Storage Act (APSA) tank facilities cited with violations in inspection reports.

Review of CERS CME information indicates the following:

- Fiscal Year (FY) 2016/2017
  - 3 of 3 (100%) minor violations are without RTC and 2 of 3 (67%) non-minor violations are without RTC.
- FY 2015/2016
  - 11of 38 (29%) minor violations are without RTC and 9 of 21 (43%) non-minor violations are without RTC.

Review of CERS CME information demonstrates a lack of RTC at facilities that were cited for not having a Spill Prevention, Control, and Countermeasure (SPCC) Plan (CERS violation library code #4010001). Facilities that operate without an SPCC Plan present a significant threat to human health or the environment, and the violator may benefit economically from the noncompliance either by reduced costs or competitive advantage.

- FY 2016/2017
  - o 2 facilities cited for violation #4010001 have no reported RTC in CERS.
- FY 2015/2016
  - 4 facilities cited for violation #4010001 have no reported RTC in CERS.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **DEFICIENCIES REQUIRING CORRECTION**

#### CITATION:

HSC Chapter 6.11, Section 25404.1.2(c) CCR, Title 27, Sections 15185(a) and (c), and 15200(a) [OSFM]

## **CORRECTIVE ACTION: COMPLETED**

During the CUPA Performance Evaluation, the CUPA followed up and documented RTC for a sufficient number of violations cited at APSA facilities to correct this deficiency. No further action is required.

## 7. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not consistently ensuring that all APSA tank facilities electronically submit a complete hazardous materials business plan (HMBP), when an HMBP is provided in lieu of a tank facility statement.

Review of HMBPs provided in lieu of a tank facility statement indicates:

- 127 of 266 (48%) APSA tank facilities have not submitted a chemical inventory and site map within the past 12 months.
- 134 of 264 (51%) APSA tank facilities have not submitted emergency response and employee training plans within the past 12 months.

#### CITATION:

HSC, Chapter 6.67, Section 25270.6(a) [OSFM]

#### CORRECTIVE ACTION: COMPLETED

During the CUPA Performance Evaluation, a sufficient number of APSA facilities submitted a complete HMBP to correct this deficiency. No further action is required.

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# 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(s) indicated as required by regulation or statute.

## 1. INCIDENTAL FINDING:

The CUPA did not complete a Self-Audit Report for FYs 2015/2016 and 2016/2017.

Note: The CUPA did complete the Self Audit Report for FY 2017/2018 which identifies the CUPA experiencing a complete turnover in staff, leaving the CUPA supervisor position still vacant. The inspection numbers reported in the Self-Audit Report are closely reflective of the turnover in staff, as inspection numbers in CERS drop dramatically after FY 2015/2016. The CUPA has reported that the most recent inspection data demonstrates a dramatic increase in inspections.

## CITATION:

CCR, Title 27, Section 15280(a) [CalEPA]

## **RESOLUTION:**

By September 30, 2019, and each year thereafter, the CUPA will complete an annual Self-Audit Report.

By the 2<sup>nd</sup> Progress Report, the CUPA will provide CalEPA with the completed Self-Audit Report for FY 2018/2019, which will address the requirement for including "a report of deficiencies with a plan of correction."

## 2. INCIDENTAL FINDING:

The CUPA is not consistently ensuring UST related information in CERS is accurate and complete.

Review of CERS UST facility submittals and the UST Facility/Tank Data Download report obtained from CERS on January 17, 2019, indicates:

- 22 USTs identified as having no tank installation date
- 7 USTs incorrectly show no spill container being installed
- 7 USTs installed on, or after, July 1, 2004, and have single-wall components listed
- 33 USTs show no striker plate/bottom protectors
- 10 USTs incorrectly show "no" to periodic spill bucket testing
- 9 USTs with continuously monitored piping systems do not identify secondary containment
- 12 UST systems indicate there is no overfill protection
- 10 USTs with double-wall piping systems installed between January 1, 1984, and June 30, 2004, indicate there is no continuous interstitial monitoring
- 4 UST systems with double-wall pressurized pipe identified without either MLLD or ELLD (excluding emergency generators)

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

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

Note: Please reference the following CERS FAQs:

- "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."

Note: State Water Board correspondence dated November 29, 2016, "When to Review Underground Storage Tank Records," may be referenced.

## CITATION:

HSC, Chapter 6.7, Sections 25286 and 25288(a) CCR, Title 23, Sections 2632(d)(1), 2634(d)(2) and 2641(g) and (h) [State Water Board]

## **RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will train personnel on the procedure for ensuring UST related information in CERS is accurate and complete. The CUPA will provide training documentation to CalEPA, which will include, but not be limited to, an outline of the training conducted and a list of CUPA personnel attending training.

With respect to UST submittals already accepted in CERS, the CUPA will review UST related information and require accurate and complete submittals when the next submittal is made, but no later than the next annual UST facility compliance inspection.

## 3. INCIDENTAL FINDING:

A limited number of instances were identified where the CUPA is not inspecting all UST facilities annually.

Review of the Significant Operational Compliance Report (Report 6) finds:

- FY 2016/2017
  - o 8 of 114 (7%) UST facilities did not have a routine inspection within 12 months
- FY 2015/2016
  - CERS CME inspection data indicates 23 of 113 (20%) UST facilities did not have a routine inspection within 12 months

## CITATION:

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

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

#### RESOLUTION:

With the 1<sup>st</sup> Progress Report, the CUPA will develop and provide CalEPA with a list of UST facilities that have not had a routine inspection within 12 months. For each UST facility listed, include:

- CERS ID, facility name, and date of the last routine inspection;
- A schedule to inspect the identified UST facilities, prioritizing the most delinquent inspections to be completed prior to any other annual UST compliance inspection; and
- Steps to ensure that all UST facilities will be inspected once every 12 months.

By the 2<sup>nd</sup> Progress Report and with each subsequent Progress Report, the CUPA will provide an updated list of the UST facilities that have not been inspected within the last 12 months.

By the 3<sup>rd</sup> Progress Report, the CUPA will have inspected each UST facility once within the last 12 months.

To demonstrate correction of this finding, the CUPA will consistently and correctly report inspections in Report 6 and CERS for two Report 6 reporting periods.

## 4. INCIDENTAL FINDING:

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

The CUPA uses a "General - Local Ordinance" violation to report UST violations when the CUPA does not have a Local Ordinance to cite.

- CERS ID 10339336: violation issued March 1, 2018
- CERS ID 10635559: violation issued February 27, 2019
- CERS ID 10497382: violation issued January 24, 2019
- CERS ID 10491442: violation issued July 31, 2018

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

Note: When a General, or Local Ordinance, violation is used the CUPA must include a violation description and proper ordinance citation in the "comments" section of CERS.

## CITATION:

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

CCR, Title 23, Sections 2712(c), (e), and (g) and 2713(c) and (d)

CCR, Title 27, Section 15290(b)(1)

[State Water Board]

### RESOLUTION:

By the 1<sup>st</sup> Progress Report, the CUPA will train personnel on the use of General, or local ordinance, violations in CERS.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### INCIDENTAL FINDINGS REQUIRING RESOLUTION

#### 5. INCIDENTAL FINDING:

The I&E Plan has incomplete information and is missing required components.

The following information is incomplete:

- The inspection frequency for Conditionally Exempt Small Quantity Generators (CESQGs) is unclear. Does the same inspection frequency apply to all CESQGs or only those that handle Silver waste and Universal Waste?
  - Note: A memo distributed by the CUPA Forum Board is in conflict with existing law and references requested changes that were not adopted in statute.

The following components are missing:

 An adequate narrative of how the CUPA addresses complaints including receiving, investigating, enforcing, and closing the complaint.

## CITATION:

CCR, Title 27, Section 15200(a)(1)-(14) [CalEPA, DTSC]

## **RESOLUION:**

By the 1<sup>st</sup> Progress Report, the CUPA will provide CalEPA with a revised I&E plan to clearly reflect the inspection frequency for CESQGs.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **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 CERS finds that there are one, or more, UST systems within the jurisdiction of the CUPA which may need to be permanently closed by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05.

The following are examples of facilities that may require permanent closure, and may not include all systems subject to the 2025 Single-Walled closure requirements:

CERS ID 10165799: Tank IDs 1 - 3

CERS ID 10402969: Tank IDs Tank 1 – Tank 3

• CERS ID 10497538: Tank IDs 24-000-1 - 24-000-3

## **RECOMMENDATION:**

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

http://waterboards.ca.gov/water issues/programs/ust/single walled/.

# 2. OBSERVATION:

Review of CERS UST facility information finds facilities are improperly located using GPS coordinates. Incorrect location of a UST 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. Examples are provided below:

- CERS ID 10496536: latitude and longitude within the county are provided. The geolocation indicates the facility is located in an empty field behind a residential property.
- CERS ID 10498342: latitude and longitude within the county are provided. The geolocation indicates the facility is located in the street.
- CERS ID 10453057: latitude and longitude within the county are provided. The
  geolocation indicates the facility is located in an undeveloped area approximately 14
  kilometers from the facility location, 618 meters from the Los Banos Reservoir, and 987
  meters from Bonita Road.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

- CERS ID 10402795: no latitude or longitude coordinates are provided, or the coordinates are 0, 0 placing the facility in South Atlantic Ocean off the coast of the African continent.
- CERS ID 10418710: no latitude or longitude coordinates are provided, or the coordinates are 0, 0 placing the facility in South Atlantic Ocean off the coast of the African continent.
- CERS ID 10497946: no latitude or longitude coordinates are provided, or the coordinates are 0, 0 placing the facility in South Atlantic Ocean off the coast of the African continent.
- CERS ID 10638886: no latitude or longitude coordinates are provided, or the coordinates are 0, 0 placing the facility in South Atlantic Ocean off the coast of the African continent

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

Note: The U.S. EPA expects the Facility Location Map data provided in CERS for each 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 UST facilities is correctly reflected in CERS. The CUPA or the facility owner/operator may do this by relocating the location drop pin in Location Map in CERS.

#### 3. OBSERVATION:

Review of Report 6 for the period July 1, 2018, through December 31, 2018, finds the CUPA did not correctly calculate the total number of UST facilities in compliance with U.S. EPA Technical Compliance Rate (TCR) 9a through 9e reporting. The CUPA reported the U.S. EPA TCR 9e as eight when it should be seven.

### RECOMMENDATION:

Review TCR reporting data and ensure the numbers reported accurately reflect the number of facilities in compliance with each reporting element.

### 4. OBSERVATION:

The I&E Plan contains the following inaccurate/incomplete APSA information:

Page 7: The CUPA identifies the inspection frequency as once every three years for AST facilities; however, correspondence with the CUPA addressed the inspection frequency for AST facilities with 10,000 gallons or more of petroleum every three years. The frequency table in the I&E Plan does not specify inspecting only those AST facilities with 10,000 gallons or more of petroleum, or all facilities, including those with less than 10,000 gallons of petroleum or at least one tank in an underground area.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **OBSERVATIONS AND RECOMMENDATIONS**

## **RECOMMENDATION:**

Update the I&E Plan to include a more specific APSA inspection frequency.

## 5. OBSERVATION:

The CUPA utilizes the CUPA Forum Board inspection checklists for various types of APSA tank facilities. However, the APSA tank facility inspection checklist utilized for conditionally exempt facilities includes a violation for proper closure of permanent tanks, which is not applicable to these tank facilities.

## **RECOMMENDATION:**

Update the APSA tank facility checklists as necessary to reflect changes made to the CERS violation library and review all applicable violations listed in the current CERS violation library.

#### 6. OBSERVATION:

DTSC attended two oversight inspections on March 19, 2019. At both locations the inspectors were well prepared, built a rapport with the facility, and conducted thorough inspections. The inspectors asked for consent to inspect, reviewed appropriate documents, and conducted a comprehensive site walk through. The inspectors identified all the violations and documented locations of violations with photographs. The inspectors clearly explained the violations and corrective actions to the facility staff at the end of the inspections. The inspection reports were comprehensive in the violation descriptions and references. The inspectors also provided the facilities with additional information and support materials as needed.

#### RECOMMENDATION:

Continue to conduct thorough inspections.

## 7. OBSERVATION:

There are no written Financial Management Procedures, however the CUPA does actively account for and track the financial implementation of the program as demonstrated in the review process of the single fee system reflected in annual Self-Audit Reports.

Note: The absence of written Financial Management Procedures in the 2022 CUPA Performance Evaluation will likely result in a deficiency or incidental finding.

## **RECOMMENDATION:**

Develop written Financial Management Procedures to reflect the current fiscal management process. In the event of a large staff turnover, procedures act as a foundation and as a record of past practices for reference when little institutional knowledge exists.

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# UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

#### **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. EXAMPLE: Merced County Environmental Compliance Training

The CUPA implements a robust training program to serve the regulated community. The CUPA has collaborated with NES Global to offer a variety of courses related to educating the regulated community on how to meet applicable program requirements. The courses are held at least monthly, are free for businesses, and can accommodate up to 35 students. The classes are presented by professional trainers from NES. The following is a list of courses being offered for 2019:

- Hazardous Materials Business Plans/ CERS
- SPCC Plans for APSA sites
- Basic Hazardous Waste Management
- Universal Waste Management
- UST Owner/Operator
- Hazardous Waste Management for the Auto Industry
- Advanced Hazardous Waste Management
- DOT Hazardous Waste Manifest

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