



Gavin Newsom
Governor

Jared Blumenfeld
Secretary for Environmental Protection

February 9, 2022

Mr. Clark Allen Pickell
Director of Environmental Health
Yuba County Environmental Health Department
915 8th Street, Suite 123
Marysville, California 95901-5273

Dear Mr. Pickell:

During March through November, 2021, CalEPA and the state program agencies conducted a performance evaluation of the Yuba County Environmental Health 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 (April 11, 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 samuel.porras@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 within 30 days at melinda.blum@calepa.ca.gov. If you would like to have specific comments remain anonymous, please indicate so on the survey.

Mr. Clark Allen Pickell
Page 2

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. Gary Cantwell
Environmental Health Supervisor/CUPA Manager
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Mr. Jason Hemsmeier
Environmental Health Specialist II
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Ms. Cheryl Prowell
Supervising Water Resource Control Engineer
State Water Resources Control Board
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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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Mr. Clark Allen Pickell
Page 3

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. John Paine
Unified Program Manager
California Environmental Protection Agency

Mr. Clark Allen Pickell
Page 4

cc sent via email:

Mr. John Elkins
Environmental Program Manager
California Environmental Protection Agency

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

Ms. Elizabeth Brega
Senior Environmental Scientist, Supervisor
California Environmental Protection Agency

Mr. Garrett Chan
Environmental Scientist
California Environmental Protection Agency

Mr. Samuel Porras
Environmental Scientist
California Environmental Protection Agency

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Yuba County Environmental Health Department

Evaluation Period: March 2021 through November 2021

Evaluation Team Members:

- **CalEPA Team Lead:** Samuel Porras
- **DTSC:** Kevin Abriol
- **Cal OES*:** Jack Harrah, Garrett Chan
- **State Water Board:** Jessica Botsford, Sean Farrow
- **CAL FIRE-OSFM:** Glenn Warner, Denise Villanueva

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 improvements needed.

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

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

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: April 11, 2022 **2nd Progress Report:** July 13, 2022
3rd Progress Report: October 14, 2022 **4th Progress Report:** January 20, 2023

*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 has not established nor implemented all Unified Program administrative procedures. Established Unified Program administrative procedures have components that are incomplete.

The following administrative procedures have not been established nor implemented:

- Public Participation Procedures relative to any Unified Program as follows:
 - Ensure receipt and consideration of comments from regulated businesses and the public.
 - Coordinate, consolidate, and make consistent locally required public hearings related to any Unified Program element.
 - Coordinate, consolidate, and make consistent locally required public notices for activities related to any Unified Program element.
 - Note: The CUPA has established Public Participation Procedures for the exemption of handlers pursuant to Health and Safety Code (HSC) 25507(d) and (e) and the release and updating of Risk Management Plans (RMPs).
- Financial Management Procedures that include:
 - Single fee system,
 - Fee accountability program, and
 - Surcharge collection and reimbursement program.

The following procedures have components that are incomplete:

- The Records Retention Policy does not include training records as a requirement of being kept for the five-year minimum retention time.
- The CUPA's "Public Request for Information" policy does not address the California Accidental Release Prevention (CalARP) Program.

CITATION:

California Code of Regulations (CCR), Title 19, Section 2775.5
CCR, Title 27, Sections 15180(e)(1), (e)(4) and 15185(b)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the established and revised Unified Program administrative procedures that adequately incorporate all required components.

By the 2nd Progress Report, if revisions to the established Unified Program administrative procedures and/or amendments to the revised Unified Program administrative procedures are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the revised and/or amended Unified Program administrative procedures. If no revisions and/or amendments

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

are necessary, the CUPA will train CUPA personnel on the established and/or revised Unified Program administrative procedures. 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 in attendance. Once training is complete, the CUPA will implement the revised and/or amended administrative procedures.

By the 3rd Progress Report, if amendments to the established and/or revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the amended Unified Program administrative procedures. 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 in attendance. Once training is complete, the CUPA will implement the amended administrative procedures.

2. DEFICIENCY:

The CUPA is not inspecting each facility subject to hazardous material business plan (HMBP) requirements at least once every three years.

Review of facility files, inspection, violation and enforcement information, also known as compliance, monitoring, and enforcement (CME) information from the California Environmental Reporting System (CERS), and additional information provided by the CUPA indicates:

- 161 of 532 (30%) facilities subject to HMBP requirements were not inspected within the last three years.

CITATION:

HSC, Chapter 6.95, Section 25511(b)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each facility subject to HMBP requirements is inspected at least once every three years. The action plan will include, at minimum:

- An explanation as to why the triennial compliance inspection requirement for facilities subject to HMBP requirements is not being met.
- A spreadsheet exported from the CUPA's data management system or CERS, containing only HMBP facilities that have not been inspected within the last three years. For each facility listed, the spreadsheet will include, at minimum:
 - Facility name;
 - CERS ID; and
 - Date of the last inspection.
- A proposed schedule to inspect those facilities subject to HMBP requirements based on risk, prioritizing the most delinquent inspections.
- Future steps to ensure that all facilities subject to HMBP requirements will be inspected at least once every three years.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated spreadsheet.

By the 5th Progress Report, the CUPA will have inspected each facility subject to HMBP requirements at least once in the last three years.

3. DEFICIENCY:

The CUPA's Fee Accountability Program does not include details for allocating revenues to properly fund the Unified Program.

The CUPA provided Self-Audit Reports for Fiscal Years (FYs) 2017/2018, 2018/2019 and 2019/2020 that incorporate a calculation of the total expenditures and revenues allocated to fund the Unified Program.

- FY 2017/2018:
 - The CUPA reported expenditures of \$483,578 and single fee revenues of \$268,176.78. The CUPA received a grant for \$100,000 from the Rural Reimbursement Account. The CUPA has a budget deficit of \$115,176.78.
- FY 2018/2019:
 - The CUPA reported expenditures of \$468,631 and single fee revenues of \$242,048.21. The CUPA received a grant for \$60,000 from the Rural Reimbursement Account. The CUPA has a budget deficit of \$166,582.79.
- FY 2019/2020:
 - The CUPA reported expenditures of \$468,631 and single fee revenues of \$251,044.75. The CUPA received a grant for \$60,000 from the Rural Reimbursement Account. The CUPA has a budget deficit of \$157,586.25.

Note: This deficiency was identified as an observation during the 2018 CUPA Performance Evaluation.

CITATION:

CCR, Title 27, Sections 15180(e)(5) and 15220
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a narrative description of the Fee Accountability Program that specifically identifies the funding sources and financial amounts used to supplement the CUPA's expenditures accrued in the implementation of the Unified Program for FYs 2017/2018, 2018/2019 and 2019/2020. The narrative will also identify reliable funding sources and financial amounts to be utilized in the future for continually supplementing the CUPA's expenditures accrued in the implementation of the Unified Program.

By the 1st Progress Report, the CUPA will review and revise the Financial Management Procedures to adequately incorporate the identification of supplemental financial resources within

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

the Fee Accountability Program. The CUPA will provide the revised Financial Management Procedures to CalEPA.

By the 2nd Progress Report, if amendments to the revised Financial Management Procedures are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the amended Financial Management Procedures.

By the 3rd Progress Report, or September 30, 2022, whichever occurs first, the CUPA will provide the Self-Audit Report for FY 2021/2022, which will include details for allocating revenues to properly fund the implementation of the Unified Program, specifically, identifying reliable funding sources and financial amounts utilized to supplement the accrued expenditures. Each subsequent Self-Audit Report will include a review of the Fee Accountability Program including, but not limited to, identifying the funding sources and financial amounts used to supplement the accrued expenditures if applicable.

4. DEFICIENCY:

The CUPA is not inspecting each Hazardous Waste Generator (HWG) facility once every three years, per the inspection frequency established in the Inspection and Enforcement (I&E) Plan.

Review of facility files, CERS CME information between April 1, 2018, through March 31, 2021, and additional information provided by the CUPA finds:

- 81 of 282 (29%) HWG facilities were not inspected once every three years.

CITATION:

CCR, Title 27, Section 15200(a)(3)(A)
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each HWG facility is inspected per the inspection frequency established in the I&E Plan. The action plan will include, at a minimum:

- An analysis and explanation as to why the inspection frequency for the HWG program is not being met. Factors to consider include existing inspection staff resources and how many facilities each inspector is scheduled to conduct each year.
- A spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG facility that has not been inspected once every three years. For each HWG facility listed, the spreadsheet will include, at a minimum:
 - Facility name,
 - CERS ID, and
 - Date of the last routine inspection.
- A schedule to inspect those HWG facilities, prioritizing the most delinquent inspections to be completed prior to any other HWG inspection,
- Future steps to ensure that all HWG facilities will be inspected once every three years.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, the CUPA will, if necessary, revise the action plan, based on feedback from DTSC. The CUPA will provide the revised action plan to CalEPA.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with an updated spreadsheet.

By the 5th Progress Report, the CUPA will have inspected each HWG facility once every three years.

5. DEFICIENCY:

The CUPA is not consistently ensuring return to compliance (RTC) is obtained for HWG Program facilities cited with violations.

Review of CERS CME information, and the CUPA's data management system finds there is no documented RTC for the following HWG violations:

- April 1, 2018 – March 31, 2021
 - 15 of 47 (32%) HWG violations remain out of compliance as of July 6, 2021.
- July 1, 2014 – March 30, 2018
 - 80 HWG violations remain out of compliance as of July 6, 2021, consisting of:
 - 20 Class II violations and 60 Minor violations
- October 9, 2012 – June 30, 2014
 - 26 HWG violations remain out of compliance as of July 6, 2021, consisting of:
 - 1 Class II violation and 25 Minor 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 6.5, 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)

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

[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review, revise and provide CalEPA with the I&E Plan, which includes a delineated process to:

- ensure facilities cited with violations RTC through appropriate enforcement;
- address follow-up actions with facilities having open violations (no RTC); and
- document RTC in CERS.

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 data

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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. 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 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA and DTSC, the CUPA will provide CalEPA with the amended I&E Plan. If no amendments to the I&E Plan are necessary, the CUPA will train CUPA personnel 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 in attendance. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 3rd Progress Report, if amendments to the I&E Plan were necessary, the CUPA will train CUPA personnel 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 in attendance. Once training is complete, the CUPA will implement the amended I&E Plan.

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

6. DEFICIENCY:

The CUPA is not consistently conducting thorough HWG inspections or identifying all violations at HWG facilities.

Review of CERS CME information between April 1, 2018, through March 31, 2021, indicates:

- 28 of 208 (13%) routine HWG inspections conducted resulted in one or more violations being cited.
 - 46 total HWG violations were cited

Note: Conducting thorough process-based inspections and having an in-depth knowledge of hazardous waste control law and regulations would result in more violations being identified and cited.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

Note: The statewide average number of routine HWG inspections in CERS that resulted in one or more violations between April 1, 2018, through March 31, 2021, was 40%.

CITATION:

HSC, Chapter 6.5, Section 25101(d)
HSC, Chapter 6.11, Section 25404.2(a)(1)(A)
CCR, Title 27, Sections 15100(b)(3)
[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, each CUPA inspector that conducts HWG inspections will review the United States Environmental Protection Agency (U.S. EPA) Process-Based Investigation Guidance document: <https://www.epa.gov/sites/production/files/documents/process-basedguide.pdf>.

By the 2nd Progress Report, each CUPA inspector that conducts HWG inspections will:

- coordinate with another CUPA (such as Sacramento County Environmental Management Department CUPA, Riverside County Department of Environmental Health CUPA, or the Orange County Environmental Health CUPA), to shadow five HWG inspections conducted within the jurisdiction of the other CUPA.
 - The Yuba County CUPA will provide CalEPA with a summary of each shadowed inspection, which will include, at a minimum:
 - the name of the CUPA that conducted the inspection
 - the name of the inspector conducting the inspection
 - the name of the Yuba County CUPA inspector shadowing the inspection
 - the CERS ID of the facility inspected
 - the date the inspection was conducted
 - the violations cited at each facility during the observed inspection.

By the 3rd Progress Report and after all shadowed inspections have been conducted, and with each subsequent progress report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least two HWG Program violations, for three HWG Program facilities, that have been inspected after training has been completed and within the last three months. Each inspection report will contain observations, factual basis, and corrective actions to correctly identify and classify each observed HWG Program violation.

7. 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.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

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

- FY 2018/2019
 - 4 of 14 (29%) APSA violations, including one violation for not having, or failure to prepare, a Spill Prevention, Control, and Countermeasure (SPCC) Plan
- FY 2016/2017
 - One violation for not having, or failure to prepare an SPCC Plan.
- FY 2015/2016
 - Two violations for not having, or failure to prepare an SPCC Plan.

Note: This deficiency was identified during the 2018 CUPA Performance Evaluation and was not corrected for FY 2015/2016 and FY 2016/2017 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 spreadsheet obtained from the CUPA's data management system or CERS, that includes at a minimum the following information for each APSA tank 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 the facility obtains RTC.

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 includes documentation of RTC or a description of the applied appropriate enforcement.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

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 applied appropriate enforcement.

8. 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 for the following FYs finds the following testing and leak detection violations did not obtain RTC within 60 days:

- FY 2019/2020
 - 28 of 44 (64%)
- FY 2018/2019
 - 16 of 26 (61%)
- FY 2017/2018
 - 11 of 29 (38%)

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

- CERS ID 10123021: Violation dated December 18, 2019, indicated failure to take appropriate action to repair and retest leaking UST components which were discovered from an ELD Test.
- CERS ID 10135294: Violation dated June 8, 2020, indicated failure to comply overfill prevention equipment requirements.
- CERS ID 10122490: Violation dated August 31, 2018, indicated failure to perform an annual line integrity test.
- CERS ID 10122442: Violation dated January 17, 2018, indicated failure to continuously monitor the interstitial space of a double-walled UST with an audible visual alarm.

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

CITATION:

HSC, Chapter 6.7, Section 25288(d)
[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 establishment of a process for UST inspection staff to document 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.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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.

9. DEFICIENCY:

The CUPA is not correctly reporting UST violations, including technical compliance rate (TCR) criteria, in CERS when UST violations are cited during the annual UST compliance inspection.

Review of annual UST compliance inspection reports, associated monitoring certifications, and CME information in CERS finds the following:

- CERS ID 10122982: Annual Monitoring Certification and the annual UST compliance inspection report, dated July 27, 2018, identifies Line Leak Detector (LLD) of the 87 fuel UST. No violation was reported in CERS.
- CERS ID 10123108: Annual Monitoring Certification and the annual UST compliance inspection report, dated July 26, 2019, identifies the 87 and Diesel spill buckets failed. The violation reported in CERS was for failure of overfill prevention equipment.
- CERS ID 10128736: Annual Monitoring Certification and the annual UST compliance inspection report, dated May 4, 2018, identifies the regular and midgrade spill bucket failed. UST inspection staff altered the initial CERS report on July 14, 2020, to include the violation.
- CERS ID 10122442: The annual UST compliance inspection report dated February 12, 2020, cites violations for failures of LLDs, spill buckets, overfill prevention equipment, to report a new designated operator (DO), to maintain DO records, of the DO to preform training of facility employees, owner/operator did not maintain leak detection logs, and to test secondary containment. The violations cited in CERS are for failure to report a new DO, and two violations for failure to maintain DO records.

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

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

CITATION:

CCR, Title 23, Section 2713(c)(4) and(d)
CCR, Title 27, Section 15290(a)(3)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will revise the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process directing UST inspection staff to correctly report all violations, including TCR criteria, in 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 provide five UST facility records, as selected by the State Water Board, including annual UST compliance inspection reports, associated monitoring certifications, spill container testing, and any other necessary testing and compliance documentation not found in CERS.

10. 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. Upon adoption of this new provision in UST Regulations, the CUPA did not consistently cite violations to ensure the new provision was implemented.

Review of the 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 beyond the October 13, 2018, deadline and the CUPA did not cite violations:

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10122442: Overfill Prevention Equipment Inspection Report Form dated September 11, 2019. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection in the UST CERS report dated September 11, 2019, nor provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10127830: Overfill Prevention Equipment Inspection Report Form dated October 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 November 20, 2019, and provide accurate U.S. EPA TCR 9b reporting.
- CERS ID 10399768: Overfill Prevention Equipment Inspection Report Form dated November 1, 2018. UST inspection staff did not cite the violation for failure to conduct the Overfill Prevention Equipment Inspection during the annual UST compliance inspection June 27, 2019, and provide accurate U.S. EPA TCR 9b reporting.

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

CITATION:

CCR, Title 23, Section 2637.2(a) and 2665(b)
[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 to delineate how the CUPA will ensure UST inspection staff are trained on new provisions of UST Regulations and HSC, and 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 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.

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 and Overfill Prevention Equipment Inspection Report Form for five UST facility records that have been inspected after training has been completed, as requested by the State Water Board. For each UST facility that has not had a completed overfill prevention

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

equipment inspection, the CUPA will provide CalEPA with a narrative of the applied appropriate enforcement.

11. DEFICIENCY:

The CUPA is not conducting complete annual UST compliance inspections. The CUPA is not observing and documenting noncompliance and/or citing violations during the annual UST compliance inspection, in annual UST compliance inspection reports and in CERS.

Review of annual UST compliance inspection reports, associated testing and leak detection documents, and CERS information finds the following:

- CERS ID 10123108: Monitoring System Certification (AMC) Form dated July 26, 2019, identifies spill bucket failure, non-compliance was not observed and/or violation issued for failure of the spill buckets in CERS.
- CERS ID 10829854: Overfill Prevention Equipment inspection was completed on November 11, 2019. Non-compliance was not observed and/or a violation was not issued for late overfill prevention equipment inspection in the annual UST compliance inspection Report or CERS.
- CERS ID 10133854: AMC Form dated August 16, 2018, listed T-2 spill bucket failed. Non-compliance was not observed and/or a violation was not issued for spill bucket failure in CERS. Additionally, the annual UST compliance inspection report noted the service technician, installer, and/or employee did not obtain and maintain proper license. Non-compliance was not observed and/or a violation was not issued for service technician, installer, and/or employee not obtaining and maintaining proper license in CERS.
- CERS ID 10127800: Overfill Prevention Equipment inspection was completed on March 10, 2020. Non-compliance was not observed and/or a violation was not issued for late overfill prevention equipment inspection in CERS. Additionally, the annual UST compliance inspection report noted the line leak detectors failed to detect a leak, spill bucket failures, and the owner or operator failed to report any changes of DO to the CUPA within 30 days. Non-compliance was not observed and/or a violation was not issued for any of the four mentioned failures in the annual UST compliance inspection report in CERS.

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

Note: Local Guidance letter 159 “Annual Underground Storage Tank Compliance Inspection” and State Water Board correspondence dated November 29, 2016, “When to Review Underground Storage Tank Records” may be referenced.

CITATION:

HSC, Chapter 6.7, Section 25288(b) and 25299
CCR, Title 23, Section 2713(c)(4)
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 the following processes for:

- directing UST inspection staff to conduct complete annual UST compliance inspections;
- directing UST inspection staff to document violations observed in annual UST compliance inspection reports and in CERS;
- reviewing and following-up with testing and leak detection documents submitted by the owner or operator as part of the annual UST compliance inspection;
- documenting and reporting observed noncompliance in annual UST compliance inspection reports and in CERS;
- conducting annual UST compliance inspections when UST Inspection staff are on-site to witness the monitoring system certification and visually inspecting all UST required components;
- 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;
- 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 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 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 in each subsequent Progress Report until considered corrected, the CUPA will provide UST facility records, for five UST facilities, if not available in CERS, as selected by the State Water Board, including, at a minimum, annual UST compliance inspection reports and associated testing, and leak detection document.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

12. DEFICIENCY:

The local ordinance, Chapter 7.08 – Underground Storage Tanks, is inconsistent and less stringent with UST Regulations and HSC.

Review of the local ordinance finds the following inconsistencies and provisions that are less stringent than UST Regulations and HSC:

- Section 7.08.040(b)(1) states the Environmental Health Department shall prepare a form which provides for the acceptance of the obligations of a transferred permit. The CUPA does not prepare this form and this section should be removed.
- Section 7.08.050(a) states “An application for a permit to operate an underground storage tank, or for renewal of the permit, shall be made by the owner or operator on a form supplied by the Environmental Health Department, and submitted with the appropriate fee, as specified herein.” The CUPA is no longer supplying the form and this language shall be removed or changed to reflect current practices.
- Section 7.08.050(b) states “Each permittee shall complete an annual report form detailing any changes in the usage of any underground storage tanks.” The CUPA is no longer requiring this form and this language shall be removed or changed to reflect current practices.
- Section 7.08.050(c) states “If a permittee stores a hazardous substance which is not identified in the application, the permittee shall apply for a new or amended permit within 30 days after commencing the storage of that hazardous substance.”, which is less stringent than UST Regulations. UST Regulations require owners and/or operators to notify the CUPA 30 days prior to any change in substance stored.
- Section 7.08.050(d) reference “he” when referring to the owner or operator, this shall be updated to be gender inclusive, such as “their.”
- Section 7.08.080(a) states “All owners/operators of existing underground storage tanks shall prepare a written plan for routine monitoring and emergency response.” The CUPA is no longer requiring the owner/operators to prepare a written plan.
- Section 7.08.100 states the CUPA shall inspect every UST annually, however, UST Regulations require that all USTs be inspected at least “once every 12 months.”
- Section 7.08.130 and Section 7.08.140 state “Each underground storage tank shall comply with the technical and monitoring requirements set forth in the Health and Safety Code and the California Code of Regulations.” However, it is unclear which HSC and California Code of Regulations are being referenced. This shall be updated to reflect proper code citations.
- Section 7.08.150 states “The owner or operator shall, within 24 hours of discovery, report to the Environmental Health Department any unauthorized release, spill, or overfill.” However, only reportable releases need to be reported within 24 hours.
- Section 7.08.150(d)(1)-(5) is inconsistent with HSC, Chapter 6.7, Section 25295 and shall be updated to reflect Section 25295 requirements.
- Section 7.08.170(b) states that a UST that is placed in temporary closure “may” be used again, which is less stringent than UST Regulations, Section 2671, which requires USTs placed in temporary closure to be used at the end of temporary closure.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

CITATION:

HSC, Chapter 6.7 Section 25299.2, 25299.3

CCR, Title 23, Section 2620(c)

CCR, Title 27, Sections 15100(b)(1)(C), 15160, 15330(a) (1) and (a)(2), 15280(c)(5) and 15150(c)(2)
[State Water Board]

CORRECTIVE ACTION:

The CUPA will no longer implement provisions of the local ordinance that are less stringent or inconsistent, with UST Regulations and HSC, including but not limited to, those listed above.

By the 1st Progress Report, the CUPA will provide CalEPA with a detailed plan to revise and adopt the revised local ordinances to be consistent with UST Regulations and HSC. The plan will at a minimum include:

- a timeline for revising and adopting the revised ordinance;
- provisions for the CUPA to provide the revised local ordinance to CalEPA and the State Water Board for legal analysis to ensure consistency with UST Regulations and HSC;
- steps to reconcile any USTs identified as having been previously excluded from the definition of a UST, pursuant to the local ordinance provisions identified above; and
- provisions for the State Water Board to work with the CUPA to establish compliance with USTs previously excluded from the definition of a UST, pursuant to the local ordinance.

By the 2nd Progress Report, the CUPA will, if necessary, revise the plan based on feedback from the State Water Board.

Considering the length of time required to draft, revise, and adopt local ordinances, the State Water Board will consider this deficiency closed, but not corrected, after the CUPA has provided an acceptable plan for the revision and adoption of the revised local ordinance as outlined above. During implementation of the plan, the State Water Board must have an opportunity to review the revised draft of the local ordinance, which will allow the State Water Board to work with the CUPA to ensure the revised draft of the local ordinance is consistent with UST Regulations and HSC, the CUPA certification approval, and meets all other legal requirements.

During the next CUPA performance evaluation, the State Water Board will verify that the revised local ordinances were adopted, and timely compliance was achieved for those UST facilities identified as not meeting UST Regulations or HSC as a result of the initial ordinance.

13. DEFICIENCY:

UST operating permits, required to be issued under the Unified Program Facility Permit (UPFP), are not issued prior to or upon the expiration date of the existing consolidated permit.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

Review of facility file information finds the following facilities were issued a UST operating permit substantially beyond the start date identified on the consolidated permit:

- CERS ID 10127830
 - UPFP issued on January 15, 2021
 - UST operating permit is valid from November 28, 2018, to November 28, 2022.
- CERS ID 10122961
 - UPFP issued on January 15, 2021
 - UST operating permit is valid from March 8, 2021, to March 8, 2026.
- CERS ID10122490
 - UPFP issued on January 15, 2021
 - UST operating permit is valid from September 27, 2017, to September 27, 2022.
- CERS ID 10123021
 - UPFP issued on January 15, 2021
 - UST operating permit is valid from November 5, 2016, to November 5, 2021.

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

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 25285
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review, revise, and provide CalEPA with the UST Permit to Operate Issuance Procedure, which will address inconsistencies in issuance of a UST operating permit beyond the start date identified on the permit.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST Permit to Operate Issuance Procedure, based on feedback from the State Water Board, and will submit the amendments to CalEPA. If no amendments are necessary, the CUPA will train CUPA personnel and UST inspection staff on the revised UST Permit to Operate Issuance Procedure and provide training documentation to CalEPA which will include, at a minimum, an outline of the training conducted and a list of CUPA personnel and UST inspection staff attending training. Once training is complete, the CUPA will implement the revised UST Permit to Operate Issuance Procedure.

By the 3rd Progress Report, if amendments to the revised UST Permit to Operate Issuance Procedure were necessary, the CUPA will train UST inspection staff on the amended UST Permit to Operate Issuance Procedure and provide training documentation to CalEPA which will include, at a minimum, an outline of the training conducted and a list of UST inspection staff attending training. Once training is complete, the CUPA will implement the amended UST Permit to Operate Issuance Procedure.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

By the 3rd Progress Report, or once training on the revised or amended UST Permit to Operate Issuance Procedure has been completed, whichever occurs first, the CUPA will begin using the revised UST operating permit template, and permit conditions and will provide CalEPA with a copy of five UST operating permits issued to facilities.

14. DEFICIENCY:

The CUPA is not requiring UST facilities with double-walled UST components within a 1,000-foot radius of a public drinking water well to implement one-time ELD testing.

Review of UST facility files finds the following UST facility has not completed one-time ELD testing:

- CERS ID 10135294

Note: State Water Board has distributed the following Local Guidance Letters (LGs) to CUPAs regarding the requirement for UST facilities to implement triennial or complete one-time ELD testing:

- LG 161: distributed September 18, 2001, to provide notification of Senate Bill 989 requirements
- LG 161-2: distributed May 15, 2003, to provide an update on ELD testing requirements and responses to questions
- LG 161-3: distributed October 23, 2006, to provide an update on ELD testing requirements and responses to questions
- LG 161-4: distributed June 12, 2007, to provide an update on ELD testing requirements and responses to questions
- LG-161-5: distributed March 25, 2008, to provide an update on ELD testing requirements and responses to questions

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 25292.4
CCR, Title 23, Section 2640(e) and 2644.1
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will identify and provide CalEPA with a list of UST facilities with double-walled UST components within a 1,000-foot radius of a public drinking water well which have not implemented one-time ELD testing. In addition, the CUPA will draft and provide to CalEPA written correspondence to be addressed to each UST facility owner or operator to inform the UST owner or operator of the requirement to either complete one-time ELD testing within 60 days or submit a request for reconsideration (RFR) to the State Water Board within 30

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

days. The written correspondence will include language stating that failure to conduct one-time ELD testing within 60 days or submit an RFR application to the State Water Board within 30 days will lead to appropriate enforcement, including but not limited to revocation of the UST operating permit portion of the UPPF. The CUPA will include both CalEPA and the State Water Board on the correspondence.

By the 2nd Progress Report, if ELD testing has not been conducted within 60 days of notification, or if an RFR has not been submitted to the State Water Board within 30 days of notification, the CUPA will apply appropriate enforcement, including but not limited to revocation of the UST operating permit portion of the UPPF and issuance of red tags.

The State Water Board will consider this deficiency corrected if ELD testing has been completed, and the CUPA provides CalEPA with a copy of the ELD testing results.

The State Water Board will consider this deficiency closed, but not corrected, and will verify that ELD testing was conducted during the next CUPA evaluation if the UST owner or operator does not conduct ELD testing or does not submit an RFR to the State Water Board and the CUPA has applied administrative, appropriate enforcement.

15. DEFICIENCY:

The CUPA is not consistently maintaining UST testing and leak detection documents and/or annual UST compliance inspection reports.

Review of UST facility files finds the following testing and leak detection documents and/or annual UST compliance inspection reports missing from facility records and/or not provided to the State Water Board as required:

- CERS ID 10122442: 2018 annual UST compliance inspection report not maintained or provided.
- CERS ID 10123108: Overfill Prevention Equipment inspection form not maintained or provided.
- CERS ID 10133974: 2019 AMC not maintained or provided.

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

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will revise and provide CalEPA with the Data Management Procedure, or other applicable procedure, that ensures the establishment of a process for UST inspection staff to maintain records of UST compliance inspection reports, and all UST testing and leak detection reports for all UST compliance inspections.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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 a copy of 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.

16. DEFICIENCY:

The UST operating permit and permit conditions, issued under the UPPF, are inconsistent with UST Regulations and HSC. The UST operating permit, issued under the UPPF, is missing components required by UST Regulations and HSC.

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

- Permit condition 2 states the owner or operator must notify the CUPA within 30 days of any change in substance stored. UST Regulations require the owner or operator to notify the CUPA 30 days prior to any change in substance stored.
- Permit condition 4 states the owner or operator must report any unauthorized release to the CUPA within 24 hours. UST Regulations require any reportable releases to be reported to the CUPA within 24 hours.
- Permit condition 4 references HSC, Chapters 6.67 and 6.75, however, the CUPA does not have authority under Chapters 6.67 and 6.75.
- Permit condition 5 states inspections for UST facilities must be conducted annually. UST Regulations require UST facilities to be inspected at least once every 12 months.
- Permit conditions state the response plans, monitoring records, and compliance records must be maintained on-site. The response plan is required to be maintained in CERS.
- Permit conditions state a new owner or operator must apply and pay for a new permit *prior* to beginning operation, otherwise penalties will be assessed, which conflicts with the CUPA's local ordinance. The CUPA's local ordinance states a new owner has 30 days after taking ownership to apply for and pay permit fees.
- Permit conditions state the permittee must comply with the laws, ordinances, or regulations enforced by the United States Government, however, the CUPA does not have authority to enforce federal laws, ordinances, or regulations.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

- The permit states “This permit shall be displayed in public view in the facility”, which is more stringent than UST Regulations and HSC, and for which there is no local ordinance authority.

Review of UST operating permits, issued under the UPFP, finds the following missing components required by UST Regulations and HSC:

- CERS identification numbers
- Tank identification numbers

CITATION:

HSC, Chapter 6.7
CCR, Title 23, Sections 2712(c) and (i)
[State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a revised UST operating permit template and revised UST operating permit conditions, issued under the UPFP, consistent with UST Regulations and HSC.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit template and/or revised UST operating permit conditions, issued under the UPFP, based on feedback from the State Water Board, 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 revised UST operating permit conditions, issued under the UPFP.

As a result of the five-year permitting cycle, the State Water Board will consider this deficiency corrected upon completion and acceptance of the revised or amended UST operating permit template and revised or amended permit conditions, issued under the UPFP. Issuance of the revised or amended UST operating permit template and UST permit conditions under the UPFP will be verified during the next CUPA Performance Evaluation.

17. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not inspecting each facility subject to the California Accidental Release Prevention (CalARP) Program requirements at least once every three years.

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

- 1 of 6 (17%) CalARP facilities was not inspected within the last three years.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

CITATION:

HSC, Chapter 6.95, Section 25537(a)
CCR, Title 19, Section 2775.3
[CalEPA]

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA inspected the CalARP facility. CERS indicates that 6 of 6 (100%) CalARP facilities have been inspected during the last three years. The CUPA will continue to make efforts to inspect each CalARP facility subject to the CalARP Program at least once every three years. No further action is required.

18. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not inspecting each APSA tank facility at least once every three years in accordance with the I&E Plan.

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

- 4 of 23 (17%) tank facilities that store 10,000 gallons or more of petroleum have not been inspected within the last three years.
- 33 of 165 (20%) other tank facilities have not been inspected within the last three years.

CITATION:

HSC, Chapter 6.67, Section 25270.5(a) and (b)
[OSFM]

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA made significant progress inspecting each APSA tank facility at least once every three years in accordance with the I&E Plan. No further action is required.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

**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:

The CUPA is issuing a “Consolidated Permit,” to combine the issuance of various Unified Program permits in place of the required UPFP.

CITATION:

CCR, Title 27, Section 15190(a) and (b)
[CalEPA]

RESOLUTION:

By the 1st Progress Report, the CUPA will rename the “Consolidated Permit” template to the “Unified Program Facility Permit” template and provide the template to CalEPA. The CUPA will rename, review, and revise the Permitting Procedure to reflect issuance of the “Unified Program Facility Permit Plan” and not the “Consolidated Permit Plan.” The CUPA will provide the revised Permitting Procedure to CalEPA.

By the 2nd Progress Report, the CUPA will, if necessary, revise the “Unified Program Facility Permit” template and amend the Permitting Procedure based on feedback from CalEPA. If no revisions to the “Unified Program Facility Permit” template and/or no amendments to the Permitting Procedure are necessary, the CUPA will provide CalEPA with three UPFPs issued to facilities within the previous three months using the revised “Unified Program Facility Permit” template.

2. INCIDENTAL FINDING:

The CUPA is not consistently classifying APSA violations properly.

Review of CERS CME information indicates the CUPA is classifying Class I or Class II APSA Program violations as minor violations in the following instances:

- Not having, or failure to prepare, an SPCC Plan was cited as a minor violation. 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.

- FY 2017/2018 through FY 2020/2021 – 1 of 1 instance (100%)

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

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 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 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>), and
- 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 in attendance.

3. INCIDENTAL FINDING:

The CUPA is not consistently ensuring HMBP submittals, provided in lieu of tank facility statements, include site maps and emergency response plans and procedures that contain all applicable required elements.

Review of CERS indicates the following 9 of 14 (64%) APSA tank facilities were missing various site map elements in recently accepted HMBP submittals.

- CERS IDs 10122904, 10134928, 10159361, 10441363, and 10419637: missing emergency shutoff, emergency response equipment, and evacuation staging area.
- CERS IDs 10159357 and 10416910: missing emergency response equipment and evacuation staging area.
- CERS IDs 10134862 and 10672378: missing emergency shutoff and evacuation staging area.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

Review of CERS indicates the following 7 of 14 (50%) APSA tank facilities did not address earthquake vulnerability in recently accepted emergency response plans and procedures:

- CERS IDs 10399552, 10419637, 10159357, 10159361, 10134862, 10416910, and 10134928

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

CITATION:

HSC, Chapter 6.67, Section 25270.6(a)(2)

2019 California Fire Code (CFC), Chapter 50, Sections 5001.5.1 and 5001.5.2, and Appendix H [OSFM]

RESOLUTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide an action plan to ensure that future HMBP submittals, provided in lieu of a tank facility statement, are thoroughly reviewed, and contain all applicable required elements. The action plan will include steps to follow-up with rejected or incomplete HMBP submittals.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide a list of APSA tank facilities whose recent HMBP submittals, provided in lieu of tank facility statements, have been reviewed and not accepted for missing applicable required elements. For each listed tank facility, the CUPA will include follow-up actions, including appropriate enforcement.

By the 4th Progress Report, the CUPA will have ensured each tank facility has submitted all applicable required HMBP elements when an HMBP is provided in lieu of a tank facility statement or the CUPA will have applied appropriate enforcement.

4. INCIDENTAL FINDING:

The I&E Plan has components that are inconsistent with HSC, Chapter 6.7 and has obsolete citations and minor errors.

The following components are inconsistent with HSC, Chapter 6.7:

- The penalty matrix for the UST Program shows a minimum of \$0, which is inconsistent with HSC. The correct amount is no less than \$500 or no more than \$5,000 per UST, per each day of violation, and per violation.
- Red tag procedures do not indicate the State Water Board may also issue a red tag.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

The following are obsolete citations and minor errors:

- Page 4: While CCR, Title 19, Section 2775.3 is a correct citation for inspection authority, HSC, Section 25537 is a much more appropriate.
- Page 9: HSC, Section 25508 concerns submittals, not inspections.
- Page 10: CCR, Title 19, Section 2775.2 concerns audits only, not inspections.
- Page 43: The citation for failure to report releases is HSC, Section 25515.3, not Section 25515. In addition, the fiscal penalty for violation of HSC, Section 25510 is not to exceed \$25,000 per day for the first offense.
- Page 44: HSC, Section 25540(a) has no subsections. A better reference to HSC, Section 25540(a)(2) is HSC, Section 25540(a), and the maximum penalty is \$2000, not \$5000. Reference to HSC, Section 25540(a)(4) should be Section 25540(b).
- Page 45: The matrix does not reflect the correct maximum penalties.

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

CITATION:

HSC, Chapter 6.7, Section 25299(a)
CCR, Title 27, Section 15200
[State Water Board]

RESOLUTION:

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

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. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan. 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 on the amended I&E Plan. Once training is complete, the CUPA will implement the amended I&E Plan.

5. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA has not provided the local code citation for all local reporting requirement information collected in CERS.

The local reporting requirements include:

- Hazardous Materials Inventory – “Regulated facilities in this jurisdiction are required to report the amount, type, and disposal location of any amount of hazardous waste.”
- Tiered Permitting – “Regulated facilities in this jurisdiction are required to report the amount, type, and disposal location of any amount of hazardous waste. The Hazardous Waste Generator Statement can be completed and uploaded to CERS.”

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

CITATION:

CCR, Title 27, Section 15187(d)
[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the CUPA requested the removal of the above local reporting requirements from CERS. The local reporting requirements were removed from CERS. No further action is required.

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:

The CUPA assesses the Unified Program Oversight Surcharge at the end of each calendar year. The CUPA has not yet assessed regulated facilities the Unified Program Oversight Surcharge in the amount of \$84, which became effective July 1, 2021.

RECOMMENDATION:

Assess the new \$84 Oversight surcharge on all regulated businesses beginning December 2022.

Effective June 25, 2021, CalEPA increased the Unified Program Oversight Surcharge by a total of \$35, from \$49 to \$84. The \$35 increase includes a \$27 allocation to fund the CERS NextGen Project support staff and resources for minimizing the risk of failure of the current CERS system and for the statewide transition to the CERS 3.0 system.

If the \$84 surcharge amount is assessed to each regulated business starting FY 2021/2022, the Oversight Surcharge will be reduced to \$57 starting FY 2024/2025 to cover the ongoing maintenance and operations costs of CERS 3.0. The \$84 surcharge amount must be assessed and collected for four years before it is reduced to \$57.

To easily reflect the portion of the Oversight Surcharge assessed and collected, utilize the most current quarterly Surcharge Transmittal Report template available at:

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

2. OBSERVATION:

The Self-Audit Reports for FYs 2017/2018, 2018/2019, and 2019/2020 include duplicative descriptive information and are missing the following information:

- A report of deficiencies with a plan of correction.
- A summary of new programs being included in the Unified Program, if applicable.

RECOMMENDATION:

Ensure future Self-Audit Reports have current information and include all applicable information.

3. OBSERVATION:

The information provided 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:

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

- Information provided by Yuba County Environmental Health Department 2001 Application for Certification
- CERS “Summary Regulated Facilities by Unified Program Element Report” generated on July 2, 2021
- CERS “UST Inspection Summary Report (Report 6),” generated on July 2, 2021
- Total Number of Regulated Businesses and Facilities:
 - In 2001: **263**
 - Currently: **557**
 - An increase of **294** facilities
- Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Regulated Businesses and Facilities:
 - In 2001: **250**
 - Currently: **555**
 - An increase of **305** facilities
- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - In 2001: **65**
 - Currently: **43**
 - A decrease of **22** facilities
- Total Number of Regulated Underground Storage Tanks (USTs):
 - In 2001: **191**
 - Currently: **123**
 - A decrease of **68** Underground Storage Tanks
- Total Number of Regulated Hazardous Waste Generator (HWGs) Facilities:
 - In 2001: **131**
 - Currently: **293**
 - An increase of **162** facilities
- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - In 2001: None specified
 - Currently: **1**
 - Comments: HHW Facilities were regulated under the Unified Program upon certification, though no count was provided in the application for certification. The difference between the current and historic number of facilities cannot be determined at this time.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

- Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):
 - In 2001: none specified
 - Currently: **1**
 - Comments: Tiered Permitting Facilities were regulated under the Unified Program upon certification, though no count was provided in the application for certification. The difference between the current and historic number of facilities cannot be determined at this time.

- Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) Facilities:
 - In 2001: none specified
 - Currently: **3**
 - Comments: RCRA LQG Facilities were regulated under the Unified Program upon certification, though no count was provided in the application for certification. 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) or California Accidental Release Prevention (CalARP) Program Facilities:
 - In 2001: **4**
 - Currently: **6**
 - An increase of **2** facilities

- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
 - In 2001: none specified
 - Currently: **189**

Since the CUPA applied for certification in 2001, an expansion of responsibilities in the Business Plan, HWG, RCRA LQG, CalARP, 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 most significant increases have occurred in the Business Plan and HWG programs. The number of facilities in the Business Plan and HWG programs has increased by 55%. The number of CalARP facilities has increased by 33%. The total number of regulated businesses and facilities has increased by 53%.

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 Yuba County Environmental Health Department 2001 Application for Certification and recent information provided by the CUPA.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

CUPA Personnel:

- Inspection and other Staff
 - Upon Certification in 2001:
 - 6 Staff, each Part Time = 1.9 FTE
Comment: This includes personnel from the Yuba County Office of Emergency Services. In 2004, the CUPA Program was integrated into the Yuba County Environmental Health Department and no longer included personnel from the Yuba County Office of Emergency Services.
 - Currently:
 - 4 Staff, each Part Time = 2.6 FTE
- Supervisory and Management Staff
 - Upon Certification in 2001:
 - 1 Staff at Part Time = 0.25 FTE
 - Currently:
 - 1 Staff at Part Time = 0.90 FTE

RECOMMENDATION:

Conduct a fee accountability study to determine the current necessary and reasonable costs to implement all aspects of the Unified Program with the existing regulated businesses and facilities within each program element. The last fee study was conducted in 2005 and the fee schedule was last updated in 2019. Based on the provided analysis, CalEPA recommends the CUPA reevaluate the allotted budget, single fee assessment for each entity, and funding allocation for program services so that the CUPA is able to justify the need to increase fees, staff levels, and other resources as necessary and reasonable to adequately implement each program element. As part of this evaluation, CalEPA also recommends the CUPA examine how its current resources are being used to ensure that required program elements are prioritized first before any supplemental tasks that may not be specifically required are undertaken.

The ability to apply each aspect of inspection, compliance, monitoring and enforcement for all Unified Program activities is not only vital to the success of the program, but it further ensures the protection of health and safety of the community and environment at large. Once the CUPA has the necessary resources to obtain and maintain an adequate staff, it is likely the issues causing the identified and recurring deficiencies, such as falling short of meeting the mandated inspection frequency for various program elements, will be addressed.

4. OBSERVATION:

The CUPA's CalARP Performance Audits do not correctly address CCR, Title 19, Section 2780.5(b)(7), the summary of the personnel and personnel years necessary to directly implement, administer and operate the CalARP Program. The summary is not to include names and resumes of staff, but rather how much staff time is required to administer the program. For example, if there are three inspectors, each devoting 10% time to CalARP, the proper answer would be "3 personnel, 0.3 PY (person-years)".

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

RECOMMENDATION:

Beginning with the upcoming CalARP Performance Audit, tailor the response as outlined above.

5. OBSERVATION:

The CUPA's area plan is generally excellent, but there are minor errors or obsolete information as follows:

- Throughout the document, OSFM is referred to as the California State Fire Marshal (CSFM).
- Page 22, Part I, when Office of Spill Prevention and Response (OSPR) is meant, then OSPR should be referred to rather than DFW.
- Page 26, Part I, the existing link for ICS forms, [HTTP://www.firescope.org/ics-forms.htm](http://www.firescope.org/ics-forms.htm) does not work. The current link is: [HTTPS://firescope.caloes.ca.gov/publications](https://firescope.caloes.ca.gov/publications).
- Page 109, Part III, the phone number provided for the California State Warning Center (CSWC), 916-324-9822, is not a CSWC number. The local number for the CSWC is 916-845-8911.

RECOMMENDATION:

With the next review and revision of the area plan, correct the minor errors and obsolete information.

6. OBSERVATION:

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

- CERS indicates that 209 routine HWG inspections were conducted.
 - 28 of 209 (13%) routine inspections resulted in one or more violations being cited.
 - 180 of 209 (86%) routine inspections had no violations cited.
- CERS indicates that 0 Class I violations were cited.
- CERS indicates that 30 Class II violations were cited.
- CERS indicates that 17 minor violations were cited.
- CERS indicates that the CUPA did not complete any formal enforcement on HWG facilities.
- CERS indicates that 3 facilities self-identified as RCRA LQGs.

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

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 apply appropriate enforcement for facilities that do not RTC.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

7. OBSERVATION:

The I&E Plan version dated 2020 contains information that is inaccurate, outdated or may benefit from improvement.

- Page 3, Section 1.1, the Unified Program elements list does not include the fire code Hazardous Materials Management Plan (HMMP)-Hazardous Materials Inventory Statements (HMIS) program element. The HMMP-HMIS program is consolidated with the HMBP Program to streamline the regulatory requirements for regulated businesses.
- Page 4, Section 2.3, the Frequency of Inspections shows the minimum mandated inspection frequency for APSA is applicable to tank facilities storing *greater than* 10,000 gallons (of petroleum) once every three years. The mandated inspection frequency applies to APSA tank facilities storing *greater than or equal to* 10,000 gallons of petroleum.
- Page 34, Section 3.6.2, the Procedures to Access Administrative Law Judge item 2 associates Section 25270 with HSC Chapter 6.95. A separate bullet item specific to the APSA program could be added as follows: “Division 20, Chapter 20, Chapter 6.67, commencing with Section 25270.”
- Section 3.7.3 discusses administrative penalties and the APSA initial penalty matrix is presented in item 6 on page 46. Reference to HSC 25270.12 for violations of APSA should be replaced with “HSC Chapter 6.67 commencing with Section 25270”. Also, include HSC 25270.12.1 when referencing APSA administrative penalties. HSC 25270.12 is specific to civil penalties.
- Page 3 of Table of Contents and Sections 1.1, 2.2, 2.3, 2.6, 3.1 and 3.7.3.6 – The APSA program is improperly referenced as Above Ground Storage Tank.
- The I&E Plan has comments in the margins of the document.

RECOMMENDATION:

Finalize any edits, remove the comments from the margins of the document, and update the I&E Plan as indicated above.

8. OBSERVATION:

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

The 2017 version of the consolidated emergency response and training plans template contains the current OSFM phone number.

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. Update the CUPA’s emergency response and training plans template.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

OBSERVATIONS AND RECOMMENDATIONS

9. OBSERVATION:

SPCC Plan submittals were accepted by the CUPA for CERS IDs 10159357 and 10441363.

SPCC Plans are not required as part of an APSA CERS submittal; therefore, SPCC Plans should not be uploaded to CERS.

The APSA documentation section in CERS is for annual tank facility statement submittals (unless an HMBP is already submitted), or other local reporting requirements.

RECOMMENDATION:

Provide feedback using the regulator comments field in CERS, to advise the facility to not include SPCC Plans in future CERS submittals.

10. OBSERVATION:

The CUPA regulates some farms. Effective January 1, 2016, Senate Bill (SB) 612 aligned the applicability threshold for farms with that of the Federal SPCC rule, which has increased to 2,500 gallons of oil or 6,000 gallons of oil (with no reportable discharge history) per the Federal Water Resources Reform and Development Act (WRRDA) of 2014.

The OSFM information on APSA and farms is available at:

<https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/farms/>.

More information on farms under the Federal SPCC rule may be found on the U.S. EPA website at: <https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations/spill-prevention-control-and-countermeasure-spcc>.

RECOMMENDATION:

Review the list of conditionally exempt tank facilities at farms, verify if the total oil storage capacity meets the WRRDA thresholds, and determine if each facility is still regulated as a conditionally exempt tank facility under APSA.

Farms that are no longer regulated under APSA due to SB 612 oil applicability thresholds should be identified in CERS as "APSA Not Applicable". The CUPA is encouraged to change the CERS APSA facility reporting requirement from "Applicable" to "Not Applicable" for such farms.

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

11. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 188 tank facilities. The CUPA’s local data management system identifies 176 APSA tank facilities.

- 159 APSA tank facilities are identified in both CERS and the CUPA’s local data management system.
- 26 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. Some of these facilities are likely not APSA regulated, and the CUPA should change the CERS APSA reporting requirement to “APSA Not Applicable” for each facility. Some of these facilities are APSA regulated, and the CUPA should update the local data management system appropriately.
- 7 facilities identified as APSA tank facilities in the CUPA’s local data management system are not in the CERS list of APSA facilities. The CUPA should investigate if the facilities really are APSA facilities. Those that aren’t should have the APSA reporting requirement set to “Not Applicable,” and not be identified as APSA tank facilities in the CUPA’s local data management system. Those that are APSA regulated should have the APSA reporting requirement set to “Applicable.”
- The CUPA’s data management system contains a duplicate CERS ID for multiple APSA facilities. Correct the association of the revised CERS IDs for approximately 7 facilities.
- There are approximately 16 small farm facilities being regulated as APSA facilities (4001 - AST PROGRAM CONDITIONALLY EXEMPT) whose total oil storage capacity meets the WRRDA exemption threshold. Farms that are no longer regulated under APSA due to SB 612 oil applicability thresholds should be identified in CERS as “APSA Not Applicable”.

RECOMMENDATION:

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

12. OBSERVATION:

Review of CERS finds the following USTs or UST systems as having single-walled components which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- CERS ID 10172821 (Tank IDs 1 - 8);
- CERS ID 10133974 (Tank IDs 1 - 3); and
- CERS ID 10122490 (Tank IDs 58-000-OES025-1 - 58-000-OES025-3).

RECOMMENDATION:

Continue to provide written and 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

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

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.

13. OBSERVATION:

Review of the UST Facility/Tank Data Download report obtained from CERS on June 4, 2021, indicates there are a limited number of instances where CERS monitoring, and construction data are incorrect as follows:

- 7 of 39 (18%) Vapor, pressure, and hydrostatic (VPH) systems have secondary containment testing listed
- 3 of 39 (8%) list Enhanced Leak Detection (ELD) testing is required
- 10 of 126 (8%) list no periodic spill bucket testing
- 9 of 126 (7%) list no spill buckets installed

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

RECOMMENDATION:

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

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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. WILDFIRE RECOVERY EFFORTS:

Yuba CUPA has assisted surrounding counties and communities with fire recovery efforts including the Carr Fire in 2018, the Camp Fire in 2018, and the Hopkins Fire in 2020. Within Yuba County, CUPA staff have assisted during fire recovery efforts in 2017 and 2020 with evaluation and clean-up of debris from damaged structures.

2. LEAD PARTICIPANT IN ADVISORY COMMITTEES:

CUPA staff are key participants and leaders in the continuous improvement and implementation of the Unified Program. Staff members are active representatives in several statewide groups and committees including:

- Beale Air Force Base Restoration Advisory Board
 - CUPA Forum Board
 - Unified Program Annual Training Conference: Emergency Response Track (planning and presenting)
 - Unified Program Annual Training Conference: Student Day Coordinator
 - Northern California UST Issue Coordinator
 - UST Technical Advisory Group (TAG) Chair
 - Co-Issue Coordinator for Emergency Response
 - CalEPA Emergency Support Function (ESF) 10 Pilot Program
 - Unified Program Administration and Advisory Group (UPAAG) Strategic Plan
 - Goal Steward for *Attracting and Retaining Highly Qualified Staff*
 - California Conference of Directors of Environmental Health (CCDEH) Hazardous Materials Committee
 - Information Technology (IT) Committee
 - Emergency Response Committee
 - Yuba Sutter Hazardous Materials Response Team Operations Committee
 - Region III Local Emergency Planning Committees (LEPC) Chair
-