



August 23, 2022

Mr. Jeff Schach Fire Chief Petaluma City Fire Department 11 English Street Petaluma, California 94952-2610

Dear Mr. Schach:

During September 2021 through May 2022, CalEPA and the state program agencies conducted a performance evaluation of the Petaluma City Fire Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, and California Environmental Reporting System information.

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 (October 24, 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, or mail.

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. If you would like to have specific comments remain anonymous, please indicate so on the survey.

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

Sincerely,

Jason Boetzer, REHS Assistant Secretary

Local Program Coordination and Emergency Response

Enclosures

cc sent via email:

Ms. Jessica Power Fire Marshal/CUPA Manager Petaluma City Fire Department 11 English Street Petaluma, California 94952-2610

Ms. Cheryl Prowell
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State Water Resources Control Board
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Mr. Tom Henderson Engineering Geologist, UST Unit Coordinator State Water Resources Control Board P.O. Box 2231 Sacramento, California 95812-2231

Ms. Maria Soria Environmental Program Manager Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721

Mr. Ryan Miya Senior Environmental Scientist, Acting Supervisor Department of Toxic Substances Control 700 Heinz Avenue, Suite 210 Berkeley, California 94710-2721 Mr. Schach Page 3

cc sent via email:

Mr. James Hosler, Chief CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Jennifer Lorenzo Senior Environmental Scientist (Supervisor) CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Jenna Hartman, REHS
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Mr. Schach Page 4

cc sent via email:

Mr. Glenn Warner Senior Environmental Scientist, Specialist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Ms. Denise Villanueva Environmental Scientist CAL FIRE - Office of the State Fire Marshal P.O. Box 944246 Sacramento, California 94244-2460

Mr. John Paine Unified Program Manager California Environmental Protection Agency

Mr. John Elkins Environmental Program Manager California Environmental Protection Agency

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

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

Mr. Garett Chan Environmental Scientist California Environmental Protection Agency

Mr. Sam Porras Environmental Scientist California Environmental Protection Agency





UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: Petaluma City Fire Department

Evaluation Period: September 2021 through May 2022

Evaluation Team Members:

CalEPA Team Lead: Samuel Porras
 DTSC: Brennan Ko-Madden. Kevin Abriol

• CalEPA*: Garett Chan

State Water Board: Sean FarrowCAL FIRE-OSFM: Denise Villanueva,

Glenn Warner

This Final Summary of Findings includes:

- Program deficiencies
- Incidental findings requiring resolution
- Program 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: October 24, 2022 2nd Progress Report: February 1, 2023 2nd Progress Report: July 31, 2023 2nd Progress Report: July 31, 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.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

Program deficiencies identify specific aspects regarding inadequate implementation of the Unified Program. The CUPA must complete the corrective action 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 that:
 - 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, and
 - Coordinate, consolidate, and make consistent public notices for activities related to any Unified Program element.

The following administrative procedures have components that are incomplete:

- The procedure for providing Hazardous Materials Release Response Plan (HMRRP) information does not include provisions for providing HMRRP information to other appropriate government entities in accordance with Health and Safety Code (HSC) Section 25504(c).
- The Records Maintenance Procedure does not identify the following documents required to be retained for a minimum of five years:
 - o Copies of self-audits, inspection reports, and enforcement files
 - All records related to hazardous waste enforcement actions from the date the enforcement action is resolved
 - Detailed records used to produce the summary reports submitted to the state
 - Surcharge billing and collection records following closure of any billing period, or until completion of any audit process, whichever is longer
 - Training records required by section 15260 and any other required training records specific to each program element
- The Fee Dispute Resolution Policy does not address mechanisms for ensuring fee disputes referred to the Secretary shall be made in writing and include a recommendation for resolution.

CITATION:

California Code of Regulations (CCR), Title 27, Sections 15180(e)(1), (e)(4) and (e)(5), 15185(b), and 15210(k)(1) [CalEPA]

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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 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 are necessary, the CUPA will train CUPA personnel on the established and 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 established and revised administrative procedures.

By the 3rd Progress Report, if revisions to the established Unified Program administrative procedures or amendments to the revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the revised and/or 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 revised and amended administrative procedures.

2. DEFICIENCY:

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

The following components are missing:

- There are no provisions for addressing complaints, including the receipt, investigation, enforcement, and closure of a complaint.
 - Note: The absence of provisions for addressing complaints was included as part of a deficiency for missing components of the I&E Plan during the 2017 CUPA Performance Evaluation. Though during the Evaluation Progress Report process the CUPA developed and provided a sufficient Complaint Procedures document, and the deficiency was noted as corrected, a condition of correction was incorporating the developed Complaint Procedures document into the I&E Plan. The I&E Plan should include or reference the Complaint Procedures document.
- Provisions for ensuring sampling capability. Information should include training, identification of sampling equipment, methods to preserve physical evidence obtained through sampling and testing information. This information was required when the CUPA became certified and is necessary to proceed with any potential enforcement actions as needed.

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DEFICIENCIES REQUIRING CORRECTION

The following component is inaccurate:

 Page 10, Item 1, states, "HSC Section 25285(b) states that the local agency shall not issue or renew a permit if the local agency inspects the tank and determines that the tank does not comply with the UST laws." The provisions of HSC Section 25285 were amended and became effective January 1, 2019. As written, the I&E Plan is not consistent with the requirements for permit issuance.

CITATION:

Health and Safety Code (HSC), Chapter 6.7, Section 25285(b) CCR, Title 27, Section 15200(a)(13) and (14) [CalEPA, DTSC, State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the revised I&E Plan that addresses the identified missing and inaccurate components.

By the 2nd Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA, DTSC, and/or 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. 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 revised 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.

3. DEFICIENCY:

The CUPA did not complete an annual Self-Audit Report for Fiscal Years (FYs) 2019/2020 and 2020/2021.

CITATION:

CCR, Title 27, Section 15280 [CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a completed Self-Audit Report for FY 2021/2022, which will include all required components, and incorporate a date of completion to demonstrate compilation by September 30, 2022. For each subsequent FY, the CUPA will complete a Self-Audit Report, which will include all required components, and incorporate a date of completion to reflect compilation by September 30th.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

4. DEFICIENCY:

The CUPA is not ensuring all personnel involved with Unified Program implementation meet applicable education requirements.

The hiring qualifications for Fire Inspector Unified Program personnel do not specify the following minimum educational requirements must be met:

- Thirty semester units earned from an accredited college or institution from one or more of the following disciplines:
 - Biology or microbiology
 - o Chemistry, chemical engineering
 - o Physics, physical science
 - o Environmental science
 - Geology or soil science
 - Environmental health
 - Environmental or sanitary engineering
 - Toxicology
 - Industrial hygiene
 - o Hazardous materials management
 - Fire science, fire technology;

OR:

- Equivalent to graduation from an accredited college or university or equivalent degree with major course work in the disciplines listed in paragraph (a)(1)(A)(i);
 OR;
- Qualifying experience in hazardous materials management, regulation, analysis, or research; environmental research, monitoring, surveillance or enforcement; or resource recovery may be substituted for the required education, on the basis of one year of qualifying experience for 15 units of college course work authorized pursuant to paragraph (a)(1)(A)(i), for up to a maximum of 15 units.

CITATION:

CCR, Title 27, Section 15260(a)(1)(A) [CalEPA]

CORRECTIVE ACTION:

During the evaluation, the CUPA began working with Petaluma City Fire Department Human Resources to develop a separate classification in the Fire Inspector series to ensure all CUPA personnel meet the Unified Program education, training and experience requirements under Title 27, Section 15260.

By the 1st Progress Report, the CUPA will ensure all personnel involved with Unified Program implementation meet the applicable education, training and experience requirements and will provide an update on the development of the Fire Inspector series classification hiring qualifications that specify minimum applicable education, training, and experience requirements for CUPA personnel.

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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 update regarding the status of revising the hiring qualifications for CUPA personnel to ensure applicable education, training and experience requirements are met.

5. DEFICIENCY:

The CUPA is not consistently including observations, details of cited violations, factual basis for each violation cited, nor providing the applicable regulatory citation(s) for each violation in Hazardous Waste Generator (HWG) inspection reports.

Review of HWG inspection reports finds the following instances where the CUPA did not consistently include observations, details of cited violations, factual basis for each violation cited, or the applicable regulatory citation(s) of each violation:

- California Environmental Reporting System (CERS) ID 10121236: HWG inspection report
 dated February 25, 2019, states the following corrective actions with no observations or
 factual basis: "All waste containers must be tightly closed when not adding to or emptying."
 "Provide annual training and document." "Dispose of waste oil and provide manifest." No
 regulatory citations are included in the report.
- CERS ID 10125958: HWG inspection report dated January 29, 2020, states the following corrective actions with no observations or factual basis: "All waste streams are required to have waste accumulation start date. Either sticker or create log on clipboard." "Remove compromised waste oil barrel and dispose of as hazwaste." "Provide annual hazwaste training to employees." No regulatory citations are included in the report.
- CERS ID 10129279: HWG inspection report dated February 26, 2020, states the following corrective actions with no observations or factual basis: "Oily/flammable rags required to be kept in proper receptacle. Ensure tight fitting lid. Pick up rags on floor." "Waste Oil' sign required on waste trailer." "All waste streams required to be disposed of. Last date of accumulation was in Feb. 18." "Training records needed for personnel handling waste streams. Training required annually and within 30 days of date of hire for new employees." No regulatory citations are included in the report.
- CERS ID 10120858: HWG inspection report dated August 20, 2020, states the following corrective actions with no observations or factual basis: "Dispose of old waste oil drum. Dispose of hazwaste through waste hauler. Scan copy of manifest to me when complete." No regulatory citations are included in the report.
- CERS ID 10651939: HWG inspection report dated November 16, 2020, states the following corrective actions with no observations or factual basis: "Hazwaste labels need start accumulation date." No regulatory citations are included in the report.
- CERS ID 10136173: HWG inspection report dated November 19, 2020, states the
 following corrective actions with no observations or factual basis: "Schedule pickup for
 waste oil with Safety Kleen." "All waste oil to be in waste drum." "All 5 gal buckets must
 have tight fitting lid on them at all times for liquids (waste streams)." No regulatory
 citations are included in the report.

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10156291: HWG inspection report dated July 8, 2021, states the following corrective actions with no observations or factual basis: "Take bead blast to haz waste disposal site." No regulatory citations are included in the report.
- CERS ID 10130029: HWG inspection report dated August 11, 2021, states the following corrective actions with no observations or factual basis: "Manage spent fluoro tubes as universal waste and mark with initial accumulation start date." "Keep eye wash station with valve on." "Mount fire extinguisher." No regulatory citations are included in the report.

Note: This deficiency was identified during the 2017 CUPA Performance Evaluation and was not corrected during the Progress Report process. As part of the corrective action for the deficiency issued in 2017, the CUPA provided a training sign-in sheet indicating that the CalEPA Inspection Report Writing Guidance document was reviewed by all HWG Program inspectors. The CalEPA Inspection Report Writing Guidance document states that "Each alleged violation that is identified must be adequately supported and accompanied by a statutory or regulatory citation." The CUPA also provided three HWG inspection reports, which did not consistently contain observations, details of cited violations, factual basis for each violation cited, and/or the applicable regulatory citation(s) for each violation and/or corrective actions.

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

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide inspection report writing training to each CUPA inspector to ensure each HWG inspection report consistently includes observations, details of cited violations, factual basis for each violation cited, the applicable regulatory citation(s) for each violation, and corrective action(s). The CUPA may include review of the "CalEPA Inspection Report Writing Guidance" document as part of the inspector training.

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

By the 2nd Progress Report, the CUPA will provide CalEPA with an inspection report citing at least one HWG violation, for three HWG facilities, as requested by DTSC, that have been inspected after training has been completed and within the last three months. Each inspection report will include observations, details of cited violations, factual basis for each violation cited, the applicable regulatory citation(s) for each violation, and corrective actions.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

6. DEFICIENCY:

The CUPA is not inspecting each HWG facility per the inspection frequency established in the I&E Plan.

Review of facility files, inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information from CERS between October 1, 2018, and September 30, 2021, and additional information provided by the CUPA finds:

• 49 of 200 (25%) HWG facilities were not inspected once every three years.

CITATION:

CCR, Title 27, Section 15200(a)(3)(A) HSC, Chapter 6.5, Section 25201.4(b)(2) [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.
- A spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG facility that has not been inspected per the inspection frequency established in the I&E Plan. For each HWG facility listed, the spreadsheet will include, at a minimum:
 - Facility name,
 - o CERS ID, and
 - o Date of the last routine inspection.
- A schedule to inspect the HWG facilities identified as having not been inspected per the inspection frequency established in the I&E Plan, 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 per the inspection frequency established in the I&E Plan (for example, the generation of a list of all HWG facilities and the anniversary date(s) of the next routine HWG inspection according to the inspection frequency established in the I&E Plan.

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 identified in the spreadsheet upon establishment of the action plan.

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DEFICIENCIES REQUIRING CORRECTION

7. DEFICIENCY:

The CUPA is not inspecting each Aboveground Petroleum Storage Act (APSA) tank facility that stores 10,000 gallons or more of petroleum for compliance with the Spill Prevention, Control, and Countermeasure (SPCC) Plan requirements of APSA at least once every three years.

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

• 1 of 4 (25%) tank facilities that store 10,000 gallons or more of petroleum has not been inspected within the last three years.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each APSA tank facility that stores 10,000 gallons or more of petroleum is inspected at least once every three years for compliance with the SPCC Plan requirements of APSA. The action plan will include at minimum:

- An analysis and explanation as to why the inspection frequency requirement for the APSA program is not being met. Existing inspection staff resources and how many facilities are scheduled to be inspected each year are factors to address in the explanation.
- A proposed schedule to inspect the one remaining APSA tank facility that was not inspected within the last three years.
- Future steps to ensure each APSA tank facility that stores 10,000 gallons or more of petroleum will be inspected at least once every three years.

By the 2nd Progress Report, the CUPA will provide CalEPA with a narrative update on the implementation of the action plan developed as part of the 1st Progress Report.

By the 3rd Progress Report, the CUPA will have inspected the one remaining APSA tank facility identified on the 1st Progress Report at least once every three years.

8. DEFICIENCY:

The local ordinance, *Chapter 17.21 Certified Unified Program Agency (CUPA)*, is less stringent than HSC and is inconsistent with itself, as well as with CCR, Title 23, Division 3, Chapter 16 (UST Regulations), and HSC, Division 20, Chapter 6.7.

Review of the local ordinance finds the following provision is less stringent than HSC:

• Section 17.21.110(B) references construction requirements for HSC, Sections 25291 and 25292. Since the adoption of section 17.21.110(B), Sections 25209.2 and 25290.1 became effective resulting in design, construction, and monitoring requirements to better protect human health and the environment. USTs with an installation date of October 1, 2003,

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

shall be designed, constructed, and monitored to meet the provisions of Section 25209.2 and USTs with an installation date of January 1, 2006, shall be designed, constructed, and monitored to meet the provisions of Section 25290.1.

Review of the local ordinance finds the following provisions are inconsistent with itself as well as with CCR and HSC:

- Section 17.21.010(C) references "California Code of Regulations, Title 23, Division 3."
 This general reference includes all chapters listed under Title 23, Division 3, including
 Chapter 18 regarding UST cleanup. The CUPA does not have regulatory authority to
 implement the cleanup of USTs as a Local Oversight Program (LOP) agency, and
 therefore cannot reference CCR, Title 23, Division 3, Chapter 18.
- Section 17.21.040(G) references "State Forms A and B" and requires these forms to be submitted to the CUPA. However, these forms are required to be submitted electronically to CERS.
- Sections 17.21.041(D) [Certified Unified Program Agency Permit] and 17.21.110(A) [USTs] indicate the permit is not transferable. This is inconsistent with section 17.21.042(A) [Permit Transfer] of the local ordinance, which states, "...Any person who is to assume the ownership of a hazardous materials storage facility from the previous owner shall complete an approved form accepting the obligations of the permit and submit the completed form to the CUPA within thirty days after ownership is transferred."
- Section 17.21.170 states, "The CUPA may make periodic inspections of persons or businesses...underground storage tank systems and all persons or businesses where the CUPA has reasonable..." This is inconsistent with the annual inspection requirement for USTs in accordance with HSC, Section 25288(a). The use of periodic inspections in this way can be considered more or less frequent than annually.

CITATION:

HSC, Chapter 6.7 Section 25299.2, 25299.3

CCR, Title 23, Section 2620(c)

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with a detailed plan to revise and adopt, or repeal, the local ordinance to be consistent with itself, as well as with UST Regulations and HSC.

The plan will at a minimum include:

- A timeline for revising, drafting, and adopting, or repealing, the ordinance; and
- Provisions for the CUPA to provide the revised local ordinance to the State Water Board for review to ensure consistency with UST Regulations and HSC.

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DEFICIENCIES REQUIRING CORRECTION

By the 1st Progress Report, the CUPA will identify any UST facilities not currently meeting the requirements of UST Regulations and HSC as a result of the local ordinance being less stringent and inconsistent with UST Regulations and HSC.

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, or repeal 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's certification, and all other legal requirements.

During the next CUPA Performance Evaluation, the State Water Board will verify that the local ordinance was revised and adopted or repealed. The State Water Board will also verify timely compliance was achieved for those UST facilities identified as not meeting the requirements of UST Regulations and HSC as a result of the local ordinance being less stringent and inconsistent with UST Regulations and HSC.

9. DEFICIENCY:

The UST operating permit, issued under the Unified Program Facility Permit (UPFP) is missing a required component.

The UST operating permit and permit conditions, issued under the UPFP, are inconsistent with UST Regulations and HSC requirements.

Review of issued UST operating permits finds the following required component is missing:

CERS ID number

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

- UST citations reflect, "CHSC Division 20, Chapter 6.7, 6.75 and Title 23 CCR Chapter 16 and 18." However, the CUPA does not have regulatory authority under HSC, Division 20, Chapter 6.75 or CCR, Title 23, Division 3, Chapter 18.
- Permit Condition D indicates notifying the CUPA within 30 days after changes are made to the UST system; however, the requirement is to notify the CUPA 30 days prior to any change in substance stored.
- Permit Condition G indicates maintaining documents for 3 years; however, permit conditions must indicate 36 months.

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

CITATION:

HSC, Chapter 6.7 CCR, Title 23, Sections 2711(c), 2712(b) and (c) [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, consistent with UST Regulations and HSC, which will be issued under the UPFP.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit template and/or UST operating permit conditions, to be issued under the UPFP template, based on feedback from the State Water Board. The CUPA 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 UST operating permit conditions under the UPFP and will provide CalEPA with five UPFPs issued to UST facilities using the revised UST operating permit and UST operating permit conditions.

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

10. DEFICIENCY:

The CUPA is not implementing UST closure requirements.

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

Review of UST facility files indicates the following:

 CERS ID 10132633: CUPA did not provide UST closure documentation to the owner or operator upon completion of UST closure activities.

Information to be included in closure documentation includes, but is not limited to:

- UST identification (i.e., size of the USTs, what each UST contained, UST ID#);
- Citations (UST Regulation Sections 2670 and 2672 and HSC, Section 25298);
- Date(s) of removal or closure in place and all closure activity that occurred;
- Whether or not the USTs were closed in place or removed; and

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

A statement that closure has been completed in accordance with UST Regulations.

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

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

CITATION:

HSC, Chapter 6.7, Section 25298(c) CCR, Title 23, Section 2670 and 2672 [State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review and revise the *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST)* procedure, to ensure the establishment of a process, which will include at a minimum, how the CUPA will:

- Document in sufficient detail the owner or operator has demonstrated to the satisfaction of the CUPA that UST closure and soil and/or groundwater sampling complies with UST Regulations and HSC.
- Provide UST closure documentation to the UST owner or operator which demonstrates to the satisfaction of the CUPA, UST closure and soil and/or groundwater sampling complies with UST Regulations and HSC.

The CUPA will provide the revised *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST)* procedure to CalEPA.

By the 1st Progress Report, the CUPA will develop a UST closure letter template for sites with and without contamination, if separate letters are issued for those scenarios. The CUPA may consider including the following language in the UST closure letter template: "The City of Petaluma Fire Department CUPA has reviewed the UST closure documentation and approves the UST closure as properly completed in accordance with HSC, Section 25298(c) and UST Regulations, Sections 2670 and 2672." The CUPA will provide the developed UST closure letter template to CalEPA.

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

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DEFICIENCIES REQUIRING CORRECTION

By the 3rd Progress Report, if amendments to the revised *Closure/Removal of Underground Storage Tanks (UST)* and *Temporary Closure of Underground Storage Tanks (UST)* procedure and/or UST closure letter template were necessary, the CUPA will train UST inspection staff on the amended procedure and/or UST closure letter template. The CUPA will provide training documentation to CalEPA, which at a minimum, will include an outline of the training conducted and a list of UST inspection staff in attendance. Once training is complete, the CUPA will implement the amended procedure and/or begin issuing the amended UST closure letter template.

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

For the next UST closure, or until considered corrected, the CUPA will provide CalEPA with the UST closure documentation demonstrating the CUPA's satisfaction that UST closure and soil and/or groundwater sampling complies with UST Regulations and HSC.

Opportunities to conduct UST closure activities are limited within the CUPA's jurisdiction. The State Water Board will consider this deficiency corrected upon completion of the approved Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) procedure and UST closure letter template to avoid keeping this deficiency unnecessarily open while waiting for USTs to undergo closure. State Water Board will verify the CUPA is utilizing the revised UST closure letter during the next CUPA Performance Evaluation.

11. DEFICIENCY:

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

The CUPA's Technical Compliance Rate (TCR) indicates not all UST violations are being cited as the TCR reported by the CUPA is notably higher in comparison to the average TCR for California and the Nation.

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

The CUPA's TCR information in comparison with the average TCR for California during the specified reporting periods identifies the following trend:

- January June 2019:
 - Petaluma City Fire Department CUPA: 6 of 10 (60%)

California average: 3,046 of 7,559 (40%)

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- July December 2019:
 - Petaluma City Fire Department CUPA: 3 of 5 (60%%)
 - o California average: 2,902 of 6,141 (47%)
- January June 2020:
 - Petaluma City Fire Department CUPA: 2 of 4 (50%)
 - California average: 4,036 of 6,646 (61%)
- July December 2020:
 - Petaluma City Fire Department CUPA: 11 of 12 (92%)
 - o California average: 3,698 of 6,048 (61%)
- January June 2021:
 - o Petaluma City Fire Department CUPA: 5 of 8 (63%)
 - o California average: 4,178 of 7,292 (57%)

The National TCR average (which includes all states and territories under the authority of U.S. EPA) during the specified reporting periods identifies the following trend:

- October 2018 September 2019: 43%
- October 2019 September 2020: 58%
- October 2020 September 2021: 58%

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

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

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

- CERS ID 10133068: The Monitoring System Certification Form dated May 12, 2021, indicates the sensor in under-dispenser containment (UDC) 9/10 was replaced due to malfunction. This failure was not reported in CERS.
- CERS ID 10132312: The Spill Container Testing Report Form dated May 13, 2020, indicates the spill containers for 87, 91, and diesel failed. These failures were not reported in CERS.
- CERS ID 10123033: The Monitoring System Certification Form dated June 25, 2020, indicates the 91 annular tank sensor was replaced. This failure was not reported in CERS.

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

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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

- Local Guidance (LG) letter 159 "Annual Underground Storage Tank Compliance Inspection," dated November 29, 2016
- LG letter 164-4, dated June 30, 2020
- "When to Review Underground Storage Tank Records," dated November 29, 2016
- "Petroleum Underground Storage Tank Financial Responsibility Guide," dated July 1995

CITATION:

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

CORRECTIVE ACTION:

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

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

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

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

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

 A process for reviewing the annual UST compliance inspection checklist for thoroughness to capture citations in accordance with UST Regulations, HSC, and the CERS violation library.

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

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

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

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

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

12. DEFICIENCY:

The CUPA is not ensuring all regulated businesses subject to Business Plan reporting requirements annually submit a Hazardous Materials Business Plan (HMBP) or a no-change certification to CERS.

Review of HMBPs submitted to CERS by regulated businesses subject to HMBP reporting requirements finds:

- 76 of 341 (22%) business plan facilities have not submitted a chemical inventory (including site map) or a no-change certification within the last 12 months.
- 77 of 341 (23%) business plan facilities have not submitted emergency response and employee training plans or a no-change certification within the last 12 months.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

CITATION:

HSC, Chapter 6.95, Sections 25505(a), 25508(a), and 25508.2 [CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop and provide CalEPA with an action plan to ensure that all regulated businesses subject to HMBP reporting requirements have annually submitted an HMBP or a no-change certification, and that each HMBP submitted to CERS is thoroughly reviewed and contains all required elements before being accepted in CERS.

By the 2nd 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 regulated business subject to HMBP reporting requirements that has not submitted an HMBP or no-change certification containing all required components within the last 12 months:

- Facility name:
- CERS ID;
- Follow-up actions including:
 - o Recent review, acceptance, and rejection of HMBP or no-change certifications
 - For those businesses that have not complied, the appropriate enforcement taken by the CUPA to ensure a complete HMBP is annually submitted to CERS

By the 4th Progress Report, the CUPA will follow up with each regulated business subject to HMBP reporting requirements identified in the action plan, to ensure an HMBP or a no-change certification has been submitted to CERS, or the CUPA will apply appropriate enforcement.

13. DEFICIENCY:

The CUPA is not inspecting each facility subject to HMBP requirements at least once every three years.

Review of CERS CME information between October 1, 2018, to September 30, 2021, finds:

 74 of 341 (22%) 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 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 a minimum:

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- An analysis and explanation as to why the triennial compliance inspection requirement is not being met for Business Plan facilities. Existing inspection staff resources and the number of facilities scheduled to be inspected each year are factors to address in the explanation.
- A spreadsheet exported from the CUPA's data management system or CERS, identifying each HMBP facility that has not been inspected within the last three years.
 For each HMBP facility listed, the spreadsheet will include, at a minimum:
 - Facility name;
 - o CERS ID; and
 - o Date of the last routine inspection
- A schedule to inspect those HMBP facilities, prioritizing the most delinquent inspections to be completed prior to any other Business Plan inspection based on risk.
- Future steps to ensure that all HMBP facilities will be inspected at least once every three years.

By the 2nd Progress Report, the CUPA will, if necessary, revise the action plan based on feedback from CalEPA. 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 CaIEPA 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.

14. DEFICIENCY:

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

Review of CERS CME information between October 1, 2018, to September 30, 2021, finds:

• 1 of 1 (100%) facilities subject to CalARP Program requirements was not inspected within the last three years.

CITATION:

HSC, Chapter 6.95, Section 25537(a), CCR, Title 19, Section 2775.3 [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 CalARP Program requirements is inspected at least once every three years. The action plan will include, at minimum:

An analysis and explanation as to why the compliance inspection requirement is not being
met for CalARP Program facilities. Existing inspection staff resources and the number of
facilities scheduled to be inspected each year are factors to address in the explanation.

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DEFICIENCIES REQUIRING CORRECTION

- A spreadsheet exported from the CUPA's data management system or CERS, identifying each CalARP facility that has not been inspected within the last three years. For each CalARP facility listed, the spreadsheet will include, at a minimum:
 - Facility name;
 - o CERS ID; and
 - Date of the last routine inspection
- A schedule to inspect those CalARP facilities, prioritizing the most delinquent inspections to be completed prior to any other CalARP inspection based on risk.
- Future steps to ensure that all CalARP facilities will be inspected at least once every three years.

By the 2nd Progress Report, the CUPA will, if necessary, revise the action plan based on feedback from CalEPA. 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 CaIEPA with an updated spreadsheet.

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

15. DEFICIENCY:

The annual CalARP performance audit report was not completed each FY.

The annual CalARP performance audit does not accurately address each required component.

The annual CalARP performance audit report was not completed for the following FYs:

- FY 2019/2020
- FY 2020/2021

The annual CalARP performance audit report did not accurately address the personnel and personnel years component required to directly implement, administer, and operate the CalARP program for the following FY:

• FY 2018/2019

CITATION:

CCR, Title 19, Section 2780.5(b) [CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide CalEPA with the annual CalARP performance audit report for FY 2021/2022 that includes all required components.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

16. DEFICIENCY:

The CUPA is not consistently and correctly reporting CERS CME information.

A comparison of information in facility files, Self-Audit Reports, and CERS CME information finds CME information was not reported consistently and correctly in FY 2014/2015 for the HMBP, APSA, HWG, and UST Programs.

UST compliance inspection information and facility inventory in the Semi-Annual Report (Report 6) is inconsistent with CUPA Self-Audit Reports.

A comparison of information in facility files, Self-Audit Reports, and CERS CME information finds CME information was not reported consistently and correctly for the HWG Program as follows:

- CERS ID 10121236: HWG inspection report dated February 25, 2019, lists the corrective action, "Dispose of waste oil and provide manifest," however there is no corresponding violation reported in CERS.
- CERS ID 10120858: HWG inspection reports provided by the CUPA reflect HWG inspections conducted on April 30, 2019, and August 20, 2020, however there are no corresponding inspections reported in CERS.
- CERS ID 10125958: HWG inspection report dated January 29, 2020, lists the following corrective actions, however there are no corresponding violations reported in CERS:
 - "All waste streams are required to have waste accumulation start dates. Either sticker or create log on clipboard."
 - "Remove compromised waste oil barrel and dispose of as hazwaste."
 - o "General housekeeping needs to occur in waste..."
- CERS ID 10129279: HWG inspection report dated February 26, 2020, lists the following corrective actions, however there are no corresponding violations reported in CERS:
 - "Oily/flammable rags required to be kept in proper receptacle. Ensure tight fitting lid. Pick up rags on floor."
 - o "Waste Oil sign required on waste trailer."
- CERS ID 10130029: HWG inspection report provided by the CUPA reflects an HWG inspection conducted on September 23, 2020, however there is no corresponding inspection reported in CERS.
- CERS ID 10136273: HWG inspection report dated November 19, 2020, lists the
 corrective action, "Schedule pick up for waste oil w/Safety Kleen," however there is no
 corresponding violation reported in CERS.
- CERS ID 10156291: HWG inspection report dated July 8, 2021, lists the corrective action, "Take bead blast to haz waste disposal site," however there is no corresponding violation reported in CERS.
- CERS ID 10454161: HWG inspection report provided by the CUPA reflects an HWG inspection conducted on July 15, 2021, however there is no corresponding inspection reported in CERS.

Note: This deficiency was identified during the 2017 CUPA Performance Evaluation regarding the HMBP, APSA, HWG and UST Programs, was corrected for the APSA Program and was

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

partially corrected for the HMBP, HWG and UST Programs during the Evaluation Progress Report process.

During the Progress Report process of the 2017 CUPA Performance Evaluation, the CUPA provided the following procedures and documents ensuring how CUPA personnel consistently and correctly report CME information in CERS, including the collection, retention, management and reporting of CME information:

- Fire Prevention CUPA Procedure: Data Management,
- Fire Prevention Bureau Inspection & Enforcement Program Plan,
- Fire Prevention CUPA Procedure: Underground Storage Tank Inspection,
- City of Petaluma Records Retention Schedule, and
- Petaluma Fire Department Record Retention Policy.

On December 11, 2018, the CUPA provided training to staff on the provided data management related procedures and documents, however training was conducted before the procedures and documents were revised in May 2019 to clarify processes and procedures for collection, retention, management, and reporting of CME information, and prior to being approved as sufficient by CalEPA, DTSC, and the State Water Board.

Current review of UST Program CME information, UST facility inventory in the Semi-Annual Report (Report 6), and CUPA Self-Audit Reports finds the CUPA is consistently and correctly reporting CERS CME information.

CITATION:

HSC, Chapter 6.11, Section 25404(e)(4) CCR, Title 23, Section 2713(c) CCR, Title 27, Section 15290(b) [CalEPA, DTSC, State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will implement and train personnel on the revised procedures and policies identified above to ensure CUPA personnel consistently and correctly report CME information in CERS, including the collection, retention, management and reporting of CME information. 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. In the instance that a staff member is on leave and out of the office for an extended period of time it is acceptable and a common practice to provide training to staff who are in the office and identify that staff on leave will be trained upon return to the office.

By the 2nd Progress Report, the CUPA will correct or enter the missing CME information in CERS and will provide CalEPA with a statement confirming the completion or correction of CERS CME information for the following facilities:

- CERS ID 10121236
- CERS ID 10120858

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10125958
- CERS ID 10129279
- CERS ID 10130029
- CERS ID 10136273
- CERS ID 10156291
- CERS ID 10454161

By the 2nd Progress Report, the CUPA will provide CalEPA with an update on the progress of consistently and correctly reporting all current Unified Program CME information to CERS, and all CME information not previously reported to CERS, or previously reported incorrectly to CERS from July 1, 2013.

By the 5th Progress Report, the CUPA will provide a statement confirming the complete entry of all CME information not previously reported to CERS, or previously reported incorrectly to CERS from July 1, 2013, to present.

17. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not consistently ensuring APSA tank facilities annually submit an HMBP to CERS, when an HMBP is provided in lieu of a tank facility statement.

Review of HMBP submittals to CERS in lieu of tank facility statement submittals indicates:

- 6 of 25 (24%) tank facilities have not submitted a chemical inventory and site map within the past 12 months, including 2 tank facilities that have never submitted.
- 6 of 25 (24%) tank facilities have not submitted an emergency response and employee training plan within the past 12 months, including 2 tank facilities that have never submitted.

CITATION:

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

CORRECTIVE ACTION: COMPLETED

During the CUPA Performance Evaluation a sufficient number of APSA tank facilities that had not submitted a chemical inventory and site map or emergency response and employee training plans within the last 12 months did submit an HMBP to CERS, in lieu of a tank facility statement. This deficiency is considered corrected. No further action is required.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

INCIDENTAL FINDINGS REQUIRING RESOLUTION

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

1. INCIDENTAL FINDING:

The CUPA is not utilizing the current quarterly Surcharge Transmittal Report template, effective July 1, 2018.

Note: Effective June 25, 2021, the quarterly Surcharge Transmittal Report template was updated to reflect the increased CUPA Oversight state surcharge, which includes an assessment for the CERS NextGen Project.

CITATION:

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

RESOLUTION:

By the 1st Progress Report, the CUPA will have submitted to CalEPA the 1st quarterly Surcharge Transmittal Report for FY 2022/2023 by the required due date using the current quarterly Surcharge Transmittal Report template. Thereafter, the CUPA will submit each quarterly Surcharge Transmittal Report to CalEPA at cupa@calepa.ca.gov no later than 30 days after the end of each fiscal quarter. The current quarterly Surcharge Transmittal Report template can be found at: https://calepa.ca.gov/wp-content/uploads/sites/6/2021/07/SURCHARGE-TRANSMITTAL-REPORT 20210709-ADA.pdf. Each line item on the Surcharge Transmittal Report template should be completed, including the check number for remittance to CalEPA.

2. INCIDENTAL FINDING:

The CUPA's Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) Procedure and CUPA Consolidated Permit Program Procedure are inconsistent with HSC, Chapter 6.7.

Review of the Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) Procedure finds:

 Page 3, regarding temporary closure, does not include provisions for disconnecting power from pumps associated with use of the UST, except for power to maintain corrosion protection, which is inconsistent with HSC, Chapter 6.7.

Review of the Consolidated Permit Program Procedure finds:

 Page 1, regarding permit issuance, indicates a permit will not be issued until all programs are in compliance with regulations which is inconsistent with HSC, Chapter 6.7 requirements for permit issuance.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

INCIDENTAL FINDINGS REQUIRING RESOLUTION

CITATION:

HSC, Chapter 6.7, Sections 25285(b) CCR, Title 23, Section 2671(a)(5) [State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will revise the *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) Procedure* and *Consolidated Permit Program Procedure*, to address the inconsistencies with HSC, Chapter 6.7 identified above. The CUPA will provide the revised Procedures to CalEPA.

By the 2nd Progress Report, if amendments to the revised *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) Procedure* and/or *Consolidated Permit Program Procedure* are necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended procedure(s). If no amendments are necessary, the CUPA will train UST inspection staff on the revised *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST) Procedure* and/or *Consolidated Permit Program Procedure*. Once training is complete, the CUPA will implement the revised procedure(s).

By the 3rd Progress Report, if amendments were necessary, the CUPA will train UST inspection staff on the amended *Closure/Removal of Underground Storage Tanks (UST) and Temporary Closure of Underground Storage Tanks (UST)Procedure* and/or *Consolidated Permit Program Procedure*. Once training is complete, the CUPA will implement the amended procedure(s).

3. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not consistently following up and documenting RTC information in CERS for APSA tank facilities cited with violations.

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

Fiscal Year (FY) 2018/2019: 2 of 3 (67%) violations

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]

RESOLUTION: COMPLETED

During the evaluation the CUPA followed up with the APSA facility having both open violations identified above (no RTC). Review of CERS CME information on April 2022 indicates documented RTC for both violations. This incidental finding is considered resolved. No further action is required.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

OBSERVATIONS AND RECOMMENDATIONS

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

1. OBSERVATION:

As a result of a clerical error when completing the Annual Single Fee Summary Reports, the CUPA reported significant changes in the number of HWG, Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG), Small Quantity Generator (SQG), and Large Quantity Generator (LQG) facilities in the Annual Single Fee Summary Reports between various fiscal years.

FY 2018/2019 to FY 2019/2020:

- RCRA LQGs increased from 0 to 6 facilities;
- SQGs decreased from 153 to 0 facilities;
- LQGs decreased from 32 to 0 facilities.

FY 2019/2020 to FY 2020/2021:

HWGs increased from 198 to 283 facilities.

RECOMMENDATION:

When reporting significant changes in the number of regulated businesses and/or facilities during the current year or in the upcoming year with the Annual Single Fee Summary Report, provide a cover letter that accompanies the Annual Single Fee Summary Report that includes an estimate and explanation of the change in the number of regulated businesses and/or facilities.

2. OBSERVATION:

Annual Single Fee Summary Reports indicate the following disparities between the Single Fee amounts billed versus the amounts collected from regulated businesses for the following FYs:

- FY 2018/2019: \$294,584 billed, \$285,923 collected (~2.9% not collected)
- FY 2019/2020: \$314,341 billed, \$283,783.50 collected (~10% not collected)
- FY 2020/2021: \$324,945 billed, \$235,716 collected (~28% not collected)

The disparities in the amounts billed and collected for FYs 2019/2020 and 2020/2021 were due to the closure of several businesses imposed by the COVID-19 pandemic beginning March 2020. The City of Petaluma instructed the CUPA to waive single fees for facilities that were permanently closed or were unable to pay single fees due to the CUPA being unable to conduct inspections during this time. The CUPA has begun sending reminders to facilities to submit invoice payments and is actively pursuing collection of billed fees.

RECOMMENDATION:

Increase efforts to collect all single fees which are billed to ensure the CUPA has adequate revenue to implement the Unified Program.

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OBSERVATIONS AND RECOMMENDATIONS

3. OBSERVATION:

Review of overall implementation of the HWG Program, including policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports for October 1, 2018, to September 30, 2021, is summarized below:

- There are 200 regulated HWG facilities, 5 RCRA LQG facilities, and 0 Tiered Permitted facilities.
- The CUPA inspected 154 HWG facilities and performed 175 HWG routine inspections.
 - o 122 of 175 (70%) routine inspections had no violations cited
 - 53 of 175 (30%) routine inspections had at least one violation cited.
 - 92 total violations were cited, consisting of:
 - 14 Class II violations
 - 78 minor violations
 - The State average for inspections with at least one violation cited is 40%.
 - The CUPA has ensured return to compliance for 87 of 92 (95%) violations cited.
- No formal enforcement actions for hazardous waste related violations were completed.
- Inspection reports do not contain detailed comments that note the factual basis of cited violations and do not always document whether consent to inspect was requested prior to the inspection, as is required by the I&E Plan.

RECOMMENDATION:

Continue with the three-year HWG inspection frequency and applied enforcement efforts in addition to generating better quality inspection reports. Ensure that detailed factual basis of a violation is included in the inspection reports and in the data transferred to CERS, to support any enforcement efforts. Follow up with facilities that have not returned to compliance by the scheduled RTC date and apply appropriate enforcement per the I&E Plan. Ensure inspectors follow the HWG Inspection Procedures found in the I&E Plan and document consent to inspect in each HWG inspection report.

4. OBSERVATION:

The CUPA's website (https://cityofpetaluma.org/fire-cupa/) contains various resources for the public and regulated community; however, it contains information that is incorrect or may benefit from improvement.

- The CUPA-Petaluma Fire webpage (https://cityofpetaluma.org/fire-cupa/) should refer to the APSA Program as Aboveground Petroleum Storage Act Program to be consistent with the statute.
- The CERS Guidance on the Forms and Documents webpage
 (https://cityofpetaluma.org/fire-prevention-forms-documents/) contains broken links for the (1) site map instructions and template and (2) Emergency Response and Training Plan template.

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OBSERVATIONS AND RECOMMENDATIONS

RECOMMENDATION:

Update the information on the webpages as indicated above.

5. OBSERVATION:

The I&E Plan contains information that is inaccurate or may benefit from improvement:

- Table of contents, under 'Program Specific Enforcement Violations': SPCC is noted as the APSA Program. Change SPCC to APSA.
- Page 1, section B 'Frequency of Inspections': AST Facilities is noted as the APSA
 Program. This should be corrected to Aboveground Petroleum Storage Act or APSA. Also,
 add language to clarify that APSA tank facilities with 10,000 gallons or more of petroleum
 are inspected every three years, consistent with HSC, Section 25270.5(a).
- Page 16, the first paragraph states: "All qualified facilities in Petaluma must have an SPCC Plan." While this statement is true, not all APSA tank facilities in Petaluma meet the "qualified facility" criteria under the SPCC rule. It would be more accurate to edit the statement or include additional information, such as, "With the exception to tank facilities that meet certain conditions as described in HSC, Section 25270.4.5(b), all APSA tank facilities must have an SPCC Plan."
- Page 19, section D: SPCC facilities should be changed to APSA facilities. This section could add the statement, "If the owner or operator commits a second or subsequent violation, a civil penalty of not more than ten thousand dollars (\$10,000) for each day on which the violation continues may be imposed." HSC, Sections 25270.12.5 and 25270.12.5 are other citations that could also be added to section D.
- Page 26, under the acronyms section: it would be helpful to include the APSA acronym.

RECOMMENDATION:

Update the I&E Plan as indicated above and ensure reference to the APSA Program is consistent with the statute.

6. OBSERVATION:

The CERS reporting requirement is currently set as "APSA Applicable" for 25 tank facilities. The CUPA's data management system identifies 18 APSA tank facilities.

- 16 APSA tank facilities are identified in both CERS and the CUPA's data management system.
- 9 tank facilities are reported as "APSA Applicable" in CERS but are not identified as APSA tank facilities in the CUPA's 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.

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OBSERVATIONS AND RECOMMENDATIONS

- 2 facilities identified as APSA tank facilities in the CUPA's data management system are not in the CERS list of APSA facilities. The CUPA should determine if the facilities really are APSA facilities.
 - Those that are not APSA regulated should have the APSA reporting requirement set to "Not Applicable," and not be identified as APSA tank facilities in the CUPA's data management system.
 - Those that are APSA regulated should have the APSA reporting requirement set to "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.

7. OBSERVATION:

Some APSA tank facilities submitted an HMBP in lieu of a tank facility statement using the 2011 emergency response and training plans template, which contains obsolete information, including but not limited to the OSFM phone number.

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the emergency response and training plans template as part of the HMBP submittal, in lieu of the tank facility statement, to use the current 2022 template, which is available in CERS Central.

8. OBSERVATION:

The CUPA's APSA inspection checklist contains at least 39 violations for Tier I qualified facilities, Tier II qualified facilities, tank facilities with professional engineer certified SPCC Plans, and conditionally exempt tank facilities.

The current Unified Program violation library contains 99 APSA violations, which includes:

- 10 general violation codes,
- 5 violations specific to conditionally exempt tank facilities,
- 51 violations for Tier I qualified facilities,
- 79 violations for Tier II qualified facilities, and
- 78 violations for tank facilities with professional engineer certified SPCC Plans.

Review of facility files indicates one instance (CERS ID 10112515) when an inspector noted in a correspondence, dated July 6, 2021, "The facility has two 'closed' tanks (one used oil and one gasoline). They are listed in the SPCC Plan as not used. If these two unused tanks are to be permanently closed the 40 CFR [Code of Federal Regulations] 112.11 must be followed. The CUPA APSA inspection does not have an item for closure so therefore was not cited as a violation."

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RECOMMENDATION:

Utilize the current, consolidated, and comprehensive checklists to ensure each inspector is consistent in conducting compliance inspections. Consider utilizing the latest version of the CUPA Forum Board APSA inspection checklists when conducting APSA tank facility inspections and ensure the checklist utilized is applicable to the facility being inspected.

9. OBSERVATION:

The information below is a comparison of the total number of regulated facilities within each Unified Program element as identified in the FY 2007/2008 Self Audit Report of Petaluma City Fire Department with present-day circumstance and the degree to which the number of regulated facilities has increased.

The information is sourced from the following:

- Petaluma City Fire Department FY 2020/2021 Self-Audit Report; and
- CERS "Summary Regulated Facilities by Unified Program Element" report, generated on February 8, 2022; and
- CERS "UST Inspection Summary Report (Report 6)," generated on February 8, 2022.
- Total Number of Regulated Businesses and Facilities:
 - o In FY 2007/2008: **254**
 - o Currently: 354
 - o An increase of 100 facilities
- <u>Total Number of Hazardous Materials Release Response Plan and Inventory (Business</u> Plan) Regulated Businesses and Facilities:
 - o In FY 2007/2008: **254**
 - o Currently: 338
 - An increase of 84 facilities
- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - o In FY 2007/2008: **24**
 - o Currently: 19
 - A decrease of 5 facilities
- Total Number of Regulated Underground Storage Tanks (USTs):
 - o In FY 2007/2008: **70**
 - o Currently: 67
 - A decrease of 3 Underground Storage Tanks
- Total Number of Regulated Hazardous Waste Generator (HWGs) Facilities:
 - o In FY 2007/2008: **187**
 - o Currently: 200
 - o An increase of 13 facilities

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OBSERVATIONS AND RECOMMENDATIONS

- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - o In FY 2007/2008: **0**
 - o Currently: 1
 - An increase of 1 facility
- <u>Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):</u>
 - o In FY 2007/2008: **0**
 - o Currently: 0
 - No change in the number of facilities.
- <u>Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large</u> <u>Quantity Generator (LQG) Facilities:</u>
 - o In FY 2007/2008: **0**
 - o Currently: 5
 - An increase of 5 facilities.
- Total Number of California Accidental Release Prevention (CalARP) Program Facilities:
 - o In FY 2007/2008: 1
 - o Currently: 1
 - No change in the number of facilities.
- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
 - o In FY 2007/2008: none specified
 - o Currently: 25
 - Comments: The difference between the current and historic number of facilities cannot be determined at this time.

The total number of businesses and facilities regulated by the CUPA has increased by 39%.

The most significant increases have occurred in the Business Plan Program, with and increase by 33% in the number of facilities subject to Business Plan requirements.

The information below is a comparison of the overall full-time equivalent (FTE) of CUPA personnel allocated to the implementation of the Unified Program as identified in the FY 2007/2008 Self Audit Report of Petaluma City Fire Department with present-day circumstance and the degree to which allocated inspection and supervisory/management staff has increased.

The information is sourced from the Petaluma City Fire Department FY 2007/2008 Self-Audit Report and recent information provided by the CUPA.

- Inspection and other Staff
 - o In FY 2007/2008:
 - 2 Staff, each working Full Time and 2 Staff working Part Time = 3.0 FTE
 - One Secretary position providing support to the CUPA is not included in the above FTE count.

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- Note: The FY 2007/2008 Self-Audit Report notes that staffing levels will be reduced due to budget constraints in FY 2008/2009. In FY 208/2009, staffing was reduced to one inspector.
- Currently:
 - 5 Staff, each working Full Time = 5.0 FTE
 - Note: Two of the five positions are currently vacant. One position is currently occupied by a recently hired inspector who is new to fire prevention and the Unified Program. One vacant position is a Fire Inspector classification, the other is an Assistant Fire Marshal classification. The CUPA is working diligently to fill the vacant Assistant Fire Marshal and Fire Inspector positions.
- Supervisory and Management Staff
 - o In FY 2007/2008:
 - 1 Supervisor/Management Staff, working Full Time = 1.0 FTE
 - Currently:
 - 1 Supervisor/Management Staff, working Full Time = 1.0 FTE

RECOMMENDATION:

The CUPA provided Financial Management Procedures detailing the analysis used to document and determine the necessary and reasonable costs to implement the Unified Program Each fiscal year, the City of Petaluma adjusts the master fee schedule for all city fees in accordance with the Consumer Price Index (CPI) to account for rising costs and inflation. With the most recent adjustment of the master fee schedule, there was an increase of 3.8% to Unified Program single fees. Other than the CPI adjustments, the Unified Program single fees were last increased in 2017.

Though the CUPA has not performed a fee study in quite some time, the CUPA's expenditure and revenue reports for the last three FYs demonstrate the CUPA is maintaining a well-funded program that covers the necessary and reasonable costs to implement the Unified Program. Occasionally, the City of Petaluma does assist in supplementing the cost of occasional expenses. Beginning March 2020, during FY 2019/2020, California issued a Statewide Stay-At-Home Order to contain the spread of COVID-19. The City of Petaluma encouraged the CUPA to waive fees for regulated businesses that were forced to closure and could not be inspected as a result of the statewide shutdown as well as for those regulated businesses that experienced substantial financial hardship in becoming delinquent on unpaid invoices. The CUPA has not been able to collect a significant portion (28%) of single fees assessed during FYs 2019/2020 and 2020/2021. As restrictions of the Statewide Stay-At-Home Order were lifted during FY 2021/2022, efforts of the CUPA to pursue collection of billed fees has resumed.

In addition to the impacts of COVID-19, recent staff turnover has been an impediment to the CUPA's ability to fully implement the Unified Program in recent years. All CUPA personnel were hired within the last two years, and there are currently two vacancies remaining. The CUPA's ability to implement the program elements will largely depend on utilizing current training resources available through the CUPA Forum Board and the annual CUPA Conference. Once

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OBSERVATIONS AND RECOMMENDATIONS

the CUPA is fully staffed and staff are fully trained, the CUPA will be able to improve performance and implementation across all aspects of the Unified Program.

Adjust fees accordingly based on the results of any future city-wide fee study to ensure the CUPA continues to operate as a fully operational cost recovery program. Conduct the annual review and update of the fee accountability program 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 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.

10. OBSERVATION:

Review of the CUPA's Installations and Maintenance Permit Application finds it includes provisions to install new USTs which is inconsistent with the ban to install new gas stations within the city of Petaluma.

RECOMMENDATION:

Revise the CUPA's Installation and Maintenance Permit Application and other CUPA documents associated with the installation of new USTs to ensure consistency with Petaluma's decision on March 1, 2021, to ban new gas station construction and the installation of new USTs within city limits.

11. OBSERVATION:

The Sonoma County Area Plan, utilized by the CUPA, has the following minor errors and obsolete references:

- Page 29, Title 19, CCR 2729-2732 should be CCR Sections 2650-2659
- Page 26, Title 19, CCR 2720-2728 should be CCR Sections 2640-2648
- Page 39, Incident command's "d" is offset in the table.
- Page 54, the last sentence on the page indicates the Pesticide Drift Exposure Incident is on page 98, however it is actually on page 100.
- Page 105, Title 19, CCR 2722 should be CCR Section 2642
- Page 105, Title 19, CCR 2723 should be CCR Section 2643
- Page 105, Title 19, CCR 27276(a) should be CCR Section 2646(a)

Note: The examples provided above may not represent all instances of error and obsolete references.

RECOMMENDATION:

With the next review and revision of the Sonoma County Area Plan, work with Sonoma County to ensure correction of any errors and obsolete references, including those identified above.

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EXAMPLES OF OUTSTANDING PROGRAM IMPLEMENTATION

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

1. VIRTUAL INSPECTION ADAPTATION:

At the onset of the COVID-19 government shutdown in March 2020, the CUPA began conducting virtual inspections, where appropriate. An inspector developed a virtual inspection procedure for those inspections, such as conducting occupancy inspections for established businesses that had no history of non-compliance. By conducting virtual inspections, the CUPA was able to maintain some continuity to the implementation of the Unified Program while also observing state and local health guidelines.

2. MEASURE U SALES TAX CREATES ASSISTANT FIRE MARSHAL POSITION:

In November 2020, the City of Petaluma passed Measure U, which enacts a locally controlled one-cent sales tax that generates local funding for vital city services and prevents the city from having to endure severe budget cuts. Measure U provides the ability for the City of Petaluma to maintain fiscal stability and support preparedness for any future essential services including preparedness, response, and recovery efforts relative to wildfire, public health, public safety, fire services, law enforcement, street repair, or other natural disaster or emergency. The one-cent sales tax is estimated to generate \$13.5 million per year. Funding obtained from the passing of Measure U created an Assistant Fire Marshal position for the Fire Prevention/CUPA Program within the City of Petaluma. The Assistant Fire Marshal position is a brand-new classification and newly allocated position that will largely be responsible for construction plan review but will also have CUPA inspection duties.

3. NON-COMPLIANT CALARP FACILITY SAFETY CONCERN ADDRESSED:

For several years the CUPA has attempted to bring the Petaluma Creamery, a CalARP facility, into compliance with the Risk Management Plan. With recent support of a new City Manager, CUPA staff worked diligently to enforce the requirements in coordination with the facility to obtain compliance. For more than a year of coordination efforts and holding meetings, the facility decided to remove the ammonia system rather than invest in costly repairs to upgrade the equipment. The Petaluma Creamery is located near City Hall and is within a residential community. A failure of the ammonia system would have been catastrophic to public safety. The effort put forth with the facility in decommissioning the ammonia system demonstrates commitment in the protection of public health and the environment.

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