

December 29, 2022

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

Dear Mr. Rizzi:

During February 2022 through October 2022, CalEPA and the state program agencies conducted a performance evaluation of the Roseville 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 resolution of 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 (March 6, 2023), 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, Kaeleigh Pontif, at Kaeleigh.Pontif@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.

Mr. Jason Rizzi
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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
Assistant Secretary
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

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Mr. Jason Rizzi
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cc sent via email:

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Environmental Scientist
California Environmental Protection Agency

Ms. Kaeleigh Pontif
Environmental Scientist
California Environmental Protection Agency

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

CUPA: Roseville City Fire Department

Evaluation Period: February 2022 through October 2022

Evaluation Team Members:

- **CalEPA Team Lead:** Kaeleigh Pontif, Samuel Porras
- **CalEPA:** Garrett Chan
- **DTSC:** Kevin Abriol
- **State Water Board:** Jenna Hartman, Sean Farrow
- **CAL FIRE-OSFM:** Mary Wren-Wilson, Glenn Warner

This Final Summary of Findings includes:

- Accomplishments, Examples of Outstanding Implementation, and Challenges
- Deficiencies requiring correction
- Incidental findings requiring resolution
- Observations and recommendations

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:

Kaeleigh Pontif
CalEPA Unified Program
Phone: (916) 803-0623
E-mail: Kaeleigh.Pontif@calepa.ca.gov

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

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

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

1st Progress Report: March 6, 2023

3rd Progress Report: September 11, 2023

2nd Progress Report: June 5, 2023

4th Progress Report: December 22, 2023

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

ACCOMPLISHMENTS, EXAMPLES OF OUTSTANDING IMPLEMENTATION, AND CHALLENGES

Various accomplishments, outstanding efforts, and challenges that impact and/or enhance the overall ability of the CUPA to implement the Unified Program. Recognition of aspects such as response to local emergency declarations and statewide recovery efforts, which illustrate the accomplishments and challenges the CUPA manages in the efforts to continue implementation of the Unified Program.

1. CERS EMERGENCY RESPONDER TRAINING:

The CUPA hosted a Hazardous Materials Incident Commander course through the California Specialized Training Institute (CSTI). CUPA personnel provided an overview of how first responders can contact the CUPA and request First Responder Access to the California Environmental Reposting System (CERS) for the respective jurisdiction. Attendees were students from multiple fire agencies who had limited knowledge of the Unified Program and/or CERS. Upon course completion, and once verified by the CUPA, all attendees had requested and gained access to CERS for the respective jurisdiction.

2. RETURN TO COMPLIANCE FOR HAZARDOUS WASTE GENERATOR (HWG) VIOLATIONS:

The CUPA has ensured 956 of 975 (98%) HWG violations cited between January 1, 2019, and December 31, 2021, have returned to compliance.

3. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM SUPPORT:

The CUPA has actively participated, and continues to participate in and support, the overall implementation of the APSA Program including:

- Proposed legislation changes
 - Proposed rulemaking and guidance on tanks in underground areas (TIUGAs)
 - Participation in the APSA Advisory Committee
 - Instruction of the APSA session on tank venting and fire code requirements at the 2019 annual Unified Program training conference.
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CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

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

1. DEFICIENCY:

The CUPA is not consistently reporting accurate inspection, violation, and enforcement information, also known as compliance, monitoring, and enforcement (CME) information, to CERS for the APSA Program.

Review of CERS CME information and APSA facility file information indicates the following:

- CERS ID 10229014
 - Inspection report dated March 16, 2021, references 2 violations.
 - There is 1 violation in CERS, however, the violation is not a cited violation on the March 16, 2021, inspection report.
 - Inspection report dated June 4, 2021, states no violations were observed.
 - There is no record of the June 4, 2021, inspection in CERS.
- CERS ID 10399585
 - Inspection report dated March 16, 2021, is labeled as “failed,” with violations referenced and an inspection report dated May 4, 2021, is labeled as “passed,” indicating all violations were corrected.
 - There are no violations for the March 16, 2021, inspection in CERS.
 - There is no record of the May 4, 2021, inspection in CERS.
- CERS ID 10449196
 - Inspection report dated April 6, 2021, is labeled as “failed,” with violations referenced.
 - There are no violations for the April 6, 2021, inspection in CERS.
 - The April 6, 2021, inspection is entered twice in CERS.
 - Inspection reports dated May 20, 2021, and June 29, 2021, indicate all violations were corrected by June 29, 2021.
 - There is no record of the May 20, 2021, inspection nor the June 29, 2021, inspection in CERS.
 - Inspection report dated December 15, 2021, states no violations were observed.
 - There is no record of the December 15, 2021, inspection in CERS.

During the evaluation, the following identified inconsistencies between CERS CME information and APSA facility file information were fully addressed:

- CERS ID 10340890
 - Inspection report dated April 6, 2021, referenced 1 violation. There was no violation for the April 6, 2021, inspection in CERS.
 - The violation for the April 6, 2021, inspection report is now correctly entered in CERS.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10448722
 - Inspection report dated February 11, 2021, stated no violations were observed.
 - There was 1 violation in CERS for the February 11, 2021, inspection with actual return to compliance (RTC) on the same day and the RTC qualifier in CERS was “not resolvable.” The CUPA removed the violation from CERS as it was determined the violation did not apply to the facility.
- CERS ID 10618375
 - Inspection report dated April 22, 2021, references 1 violation. There was no record of the April 22, 2021, inspection, nor the cited violation in CERS.
 - The April 22, 2021, inspection and the cited violation are now correctly entered in CERS.
 - Inspection report dated April 29, 2021, is labeled as “passed,” indicating the cited violation was corrected. There was no record of the April 29, 2021, inspection, nor the cited violation in CERS.
 - The April 29, 2021, inspection and the cited violation are now correctly entered in CERS.

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation for the APSA and HWG Programs, including the Permit-By-Rule (PBR) and Tiered Permitting (TP) components of the HWG Program. The deficiency was corrected during the 2019 Evaluation Progress Report process regarding the HWG Program, including the PBR and TP components.

CITATION:

Health and Safety Code (HSC), Chapter 6.11, Section 25404(e)(4)
California Code of Regulations (CCR), Title 27, Sections 15187(c) and 15290(a)(3) and (b)
[OSFM]

CORRECTIVE ACTION:

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

- Review and revision of the existing CME reporting component of the Data Management Procedure, or other applicable procedure, to ensure establishment of a process for consistently reporting APSA Program CME information accurately to CERS.
- Identification of all APSA Program CME information that was not previously reported to CERS, or reported to CERS incorrectly between July 1, 2015, and December 31, 2021.
- A process and timeline for correctly reporting all APSA Program CME information identified as not being previously reported to CERS, or being previously reported incorrectly to CERS, including CME information for any revised inspection reports.
- Revision of the APSA inspection report template to indicate whether an inspection is considered “routine” or “other” and to include applicable citation(s) for each APSA Program violation observed.
- Future steps to ensure all APSA Program CME information is consistently reported accurately to CERS.

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DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, if amendments to the revised CME reporting component of the Data Management Procedure, or other applicable procedure were necessary based on feedback from OSFM, the CUPA will provide CalEPA with the amended CME reporting component of the Data Management Procedure or other applicable procedure. If amendments were not necessary, the CUPA will train CUPA personnel on the revised CME reporting component of the Data Management Procedure, or other applicable procedure. The CUPA will provide training documentation to CalEPA which will include, at minimum, the date the training was conducted, an outline of the training conducted and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised CME reporting component of the Data Management Procedure or other applicable procedure.

By the 5th Progress Report, the CUPA will consistently report all current and previous APSA Program CME information to CERS accurately. The CUPA will provide a statement confirming the completion of all prior APSA Program CME information not previously reported to CERS, or previously reported incorrectly to CERS, between July 1, 2015, and December 31, 2021, as consistently being reported accurately to CERS.

2. DEFICIENCY:

The CUPA is not properly classifying HWG Program violations.

Review of facility files and CERS CME information finds the CUPA is classifying Class I or Class II HWG Program violations as minor violations cited between January 1, 2019, and December 31, 2021, in the following instances:

- Violation for exceedance of authorized accumulation time (CCR, Title 22, Section 66262.34) incorrectly cited as a minor violation. Maximum accumulation time may not be exceeded without a hazardous waste storage permit or grant of authorization from DTSC. An economic benefit is gained by not disposing of waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - 15 of 39 (38%) violations cited between January 1, 2019, and December 31, 2021, for exceedance of accumulation timeframe were classified as minor.

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

Note: The 2019 CUPA Performance Evaluation identified the following Small Quantity Generator (SQG) facilities as having violations for exceedance of authorized accumulation time incorrectly cited as a minor violation, however it is not necessary to correct the classification on inspection reports or in CERS:

- CERS ID 10483096: inspection conducted October 16, 2017
- CERS ID 10460293: inspection conducted October 6, 2016
- CERS ID 10447468: inspection conducted September 4, 2016

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process. The following violations were identified as being incorrectly classified as minor in the 2019 CUPA Performance Evaluation, however, no examples were identified in conducting the assessment for the 2022 CUPA Performance Evaluation:

- Violation for failure to provide or conduct training for employees.
- Failure to conduct weekly hazardous waste containers (storage area) inspections, failure to conduct daily tank inspection of the discharge system, monitoring equipment, and tank levels.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6

HSC, Chapter 6.11, Section 25404(a)(3)

CCR, Title 22, Section 66260.10

CCR, Title 27, Section 15200(a) and (e)

[DTSC]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will train inspection staff on the definition of minor violation as defined in HSC, Chapter 6.11, Section 25404(a)(3), and Class I, and Class II violations, as defined in HSC Chapter 6.5, Sections 25110.8.5 and 25117.6 and CCR, Title 22, Section 66260.10.

The CUPA will train inspection staff on how to properly classify HWG Program violations during inspections as minor, Class I, and Class II. Training should include, at minimum, review of the following:

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

The CUPA will provide training documentation to CalEPA which, at minimum, will include the date the training was conducted, an outline of the training conducted, and a list of CUPA inspection staff in attendance.

By the 2nd Progress Report, and with each subsequent progress report until considered corrected, the CUPA will provide CalEPA with an inspection report citing at least one HWG Program violation, for three HWG Program facilities, as requested by DTSC, 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.

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**UNIFIED PROGRAM PERFORMANCE EVALUATION
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DEFICIENCIES REQUIRING CORRECTION

3. DEFICIENCY:

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

During the 45-day review process the CUPA must:

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

Review of CERS information finds the following 6 of 15 (40%) PBR Onsite Hazardous Waste Treatment Notifications submitted between January 1, 2019, and December 31, 2021, were not reviewed, processed, or authorized by the CUPA within 45 days of receipt:

- CERS ID 10180219
 - PBR notification submitted on January 8, 2019, and marked as “Accepted” on November 27, 2019 (323 days)
- CERS ID 10180219
 - PBR notification submitted on May 29, 2019, and marked as “Accepted” on July 2, 2020 (400 days)
- CERS ID 10152475
 - PBR notification submitted on December 30, 2019, and marked as “Accepted” on April 9, 2020 (101 days)
- CERS ID 10180219
 - PBR notification submitted on February 21, 2020, and marked as “Accepted” on January 6, 2021 (320 days)
- CERS ID 10180219
 - PBR notification submitted on March 2, 2020, and marked as “Accepted” on July 2, 2020 (122 days)
- CERS ID 10180219
 - PBR notification submitted on February 26, 2021, and marked as “Accepted” on July 2, 2021 (126 days)

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

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

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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 train inspection staff on the TP component of the HWG Program, regarding how to accurately review, process, and authorize Onsite Hazardous Waste Treatment Notifications within the 45-day review process by either:

- Authorizing operation of the FTU; or
- Denying authorization of the FTU in accordance with PBR laws and regulations; or
- Notifying the owner/operator that the notification submittal is inaccurate or incomplete.

The CUPA will provide training documentation to CalEPA which, at minimum, will include the date the training was conducted, an outline of the training conducted, and a list of CUPA inspection staff in attendance.

Note: Training videos regarding the TP component of the HWG Program are available on the California Certified Unified Program Agency Forum Board website at: <https://www.youtube.com/user/orangetreeweb/videos>. Additional TP training and assistance may also be requested from DTSC.

By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide an update to CalEPA on the status of the progress made toward accurately reviewing, processing, and authorizing each Onsite Hazardous Waste Treatment Notification that has not been reviewed within 45 days and ensure annual notification submittals are accurate, correct, and represent the actual waste treatment systems used at the notifying facility.

4. DEFICIENCY:

The CUPA is not inspecting each HWG facility and each TP facility annually per the inspection frequency established in the Inspection and Enforcement (I&E) Plan.

Review of CERS CME information between January 1, 2019, and December 31, 2021, and additional information provided by the CUPA finds the following HWG facilities and TP facilities were not inspected annually:

- January 1, 2019 through December 31, 2019
 - 120 of 335 (36%) HWG facilities were not inspected
 - 3 of 6 (50%) TP Facilities were not inspected.
- January 1, 2020 through December 31, 2020
 - 92 of 335 (27%) HWG facilities were not inspected
 - 5 of 6 (83%) TP Facilities were not inspected f.
- January 1, 2021 through December 31, 2021
 - 77 of 335 (23%) HWG facilities were not inspected
 - 3 of 6 (50%) TP facilities were not inspected.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

Note: As of April 22, 2022, CERS reflects the total number of regulated HWG facilities as 335 and the total number of regulated TP facilities as 6.

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 and each TP facility is inspected per the inspection frequency established in the I&E Plan. The action plan will include, at minimum:

- An analysis and explanation as to why the annual inspection frequency for the HWG program and TP component of the HWG Program is not being met.
- A spreadsheet exported from CERS, identifying each HWG facility and each TP facility that has not been inspected annually per the inspection frequency established in the I&E Plan. For each HWG facility and each TP facility listed, the spreadsheet will include, at minimum:
 - Facility name,
 - CERS ID,
 - Date of the last routine inspection, and
 - A schedule to inspect those HWG facilities and TP facilities, prioritizing the most delinquent inspections to be completed prior to any other HWG or TP inspection.
- Future steps to ensure that all HWG facilities and all TP facilities will be inspected annually per the inspection frequency established in the I&E Plan. For example, a list of all HWG facilities and the anniversary date(s) of the next routine HWG inspection according to the CUPA's established annual inspection frequency.

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 delinquent HWG facility and each delinquent TP facility identified in the spreadsheet provided as part of the action plan with the 1st Progress Report.

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

DEFICIENCIES REQUIRING CORRECTION

5. DEFICIENCY:

The CUPA did not consistently include all observations, citations, and factual basis for each violation cited on HWG and/or TP inspection reports.

Review of HWG and TP inspection reports finds inadequate documentation of cited violations, evidence of violations, and violation citations for the following facilities:

- CERS ID 10744168
 - Inspection conducted March 15, 2019
- CERS ID 10653403
 - Inspection conducted December 13, 2019
- CERS ID 10472797
 - Inspection conducted February 18, 2020
- CERS ID 10169837
 - Inspection conducted September 29, 2020
- CERS ID 10180219
 - Inspection conducted November 5, 2020
- CERS ID 10404871
 - Inspections conducted July 7, 2020, February 8, 2021, and October 18, 2021
- CERS ID 10140871
 - Inspection conducted September 16, 2021

Note: It is not necessary to revise the HWG or TP inspection reports for the inspections previously conducted at the facilities identified as examples above.

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will provide inspection report writing training to each CUPA inspector to ensure all violations cited in HWG and TP inspection reports include observations, citations, factual basis, and corrective actions. The CUPA will include a review of HSC, Section 25185(c)(2)(A) as part of the inspector training.

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

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

DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, the CUPA will provide CalEPA with an inspection report citing at least one HWG and/or TP violation, for three HWG and/or TP facilities, as requested by DTSC, that have been inspected after training has been completed and within the last three months. Each inspection report will contain observations, citations, and factual basis to correctly identify and classify each observed HWG violation.

6. DEFICIENCY:

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

Review of CERS CME information finds the CUPA did not correctly cite hazardous waste violations in the following examples:

- The CUPA incorrectly requires businesses to provide a log of conducting weekly container inspections. There is no regulatory requirement for HWG facilities to maintain a log of weekly container inspections. The following examples include, but are not limited to:
 - CERS ID 10756048: inspection conducted April 11, 2019
 - CERS ID 10405873: inspection conducted April 30, 2019
 - CERS ID 10467403: inspection conducted February 27, 2020
 - CERS ID 10157873: inspection conducted September 23, 2020
 - CERS ID 10399567: inspection conducted January 7, 2021
 - CERS ID 10636174: inspection conducted February 12, 2021
 - CERS ID 10441240: inspection conducted September 15, 2021
- The CUPA incorrectly requires businesses to provide a HWG training log for SQG facilities. There is no regulatory requirement for SQGs to maintain a log of HWG training. The following examples include, but are not limited to:
 - CERS ID 10613443: inspection conducted October 24, 2019
 - CERS ID 10169837: inspection conducted September 29, 2020
- The CUPA incorrectly requires businesses to provide a universal waste decal on a drained used oil filter drum. Drained used oil filters are not a universal waste and the requirement in CCR, Title 22, Section 66266.130(c)(3) indicates that drained used oil filter containers shall be labelled as "drained used oil filters" (not hazardous waste) and each container of filters should show the initial date of accumulation or receipt. The following example includes, but is not limited to:
 - CERS ID 10180219: inspection conducted November 5, 2020

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

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process.

CITATION:

CCR, Title 22, Sections 66262.34(a), 66262.34(d), and 66266.130
[DTSC]

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DEFICIENCIES REQUIRING CORRECTION

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will ensure all inspection staff that conduct HWG facility inspections review the HWG training materials listed below to properly identify and cite HWG violations during future inspections:

- DTSC Hazardous Waste Generator Requirements Fact Sheet
<https://dtsc.ca.gov/hazardous-waste-generator-requirements-fact-sheet/>
- Universal Waste Fact Sheet
<https://dtsc.ca.gov/universal-waste-fact-sheet/>
- Managing Used Oil Filters for Generators Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/RAG_Used-Oil-Filters_Generators1.pdf
- Generator Summary Chart
<https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/05/California-Generator-Chart.pdf>

The CUPA will provide CalEPA with a narrative stating all HWG inspection staff have reviewed the training materials listed above, the name of each HWG inspector that reviewed the training materials, and the date the review was completed.

7. DEFICIENCY:

The CUPA is not certifying to CalEPA every three years that a complete review of the area plan has been conducted and any necessary revisions have been made.

- The last certification of the area plan was March 2017.

Note: The CUPA has adopted the Placer County CUPA area plan. The Placer County CUPA is responsible for updating the area plan and is currently working on revising the area plan.

CITATION:

HSC, Chapter 6.95, Section 25503(d)(2)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will contact the Placer County CUPA to obtain the status of the area plan revision. Upon review of the revised area plan, the CUPA will ensure the area plan has all required elements. The CUPA will certify to CalEPA that a complete review of the area plan has been conducted and any necessary revisions have been made. The CUPA will provide CalEPA with the reviewed and revised area plan.

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DEFICIENCIES REQUIRING CORRECTION

8. DEFICIENCY:

The area plan is missing the following required elements:

- Monitoring and decontamination guidelines for emergency response personnel and equipment;
- Procedures to access local, state, and federal funding and emergency response assistance;
- Provisions for access to state approved and permitted hazardous waste disposal facilities and emergency response contractors;
- Provisions for training of emergency response personnel;
- Provisions for joint field or table-top exercises, with affected organizations, with voluntary participation of business representatives;
- Provisions for informing business personnel and the affected public of safety procedures to follow during a release or threatened release of a hazardous material;
- Designation of responsibility for the coordinated release of safety information to the public and to the local Emergency Broadcast System;
- Provisions for informing medical and health facilities of the nature of the incident and the substance(s) involved in an incident;
- Provisions for evacuation plans;
- Listing and description of available emergency response supplies and equipment specifically designated for the potential emergencies presented by the hazardous materials which are handled within the jurisdiction of the administering agency;
- Outline the provisions for regular testing, if applicable, and proper maintenance of emergency response equipment under the direct control of the county or city; and
- Provisions for the critique and follow-up of major incidents of a release or threatened release of hazardous material.

Note: The CUPA has adopted the Placer County CUPA area plan. The Placer County CUPA is responsible for updating the area plan and is currently working on revising the area plan.

CITATION:

HSC, Chapter 6.95, Section 25503(d)(2)
CCR, Title 19, Section 2640(c)
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will contact the Placer County CUPA to obtain the status of the area plan revision. Upon review of the revised area plan, the CUPA will ensure the area plan has all required elements. The CUPA will provide CalEPA with the revised area plan that includes all required elements.

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DEFICIENCIES REQUIRING CORRECTION

9. DEFICIENCY:

The annual California Accidental Release Prevention (CalARP) Performance Audit Report is missing required elements.

The following elements are missing from the annual CalARP Performance Audit Report for Fiscal Years (FYs) 2018/2019, 2019/2020, and 2020/2021:

- Executive summary and brief description of how the CUPA is meeting the requirements of the program as listed in CCR, Title 19, Section 2780.3;
- List of stationary sources requested to develop Risk Management Plans (RMPs); and
- List of stationary sources which have received public comments on the RMP.

CITATION:

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

CORRECTIVE ACTION:

By the 3rd Progress Report, the CUPA will provide CalEPA with the annual CalARP Performance Audit Report for FY 2022/2023 that includes all required elements.

10. DEFICIENCY:

Procedures necessary to implement the CalARP Dispute Resolution process have not been established.

CITATION:

CCR, Title 19, Section 2780.1
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will establish necessary procedures to implement the CalARP Dispute Resolution process as specified in CCR, Title 19, Section 2780.1, and will provide the procedures to CalEPA.

11. 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:

- 191 of 509 (38%) business plan facilities have not submitted a chemical inventory (including site map) or a no-change certification within the last 12 months.

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DEFICIENCIES REQUIRING CORRECTION

- 203 of 509 (40%) business plan facilities have not submitted emergency response and employee training plans or a no-change certification within the last 12 months.

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.

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a spreadsheet obtained from CERS, that includes, at minimum, the following information for each regulated business subject to HMBP reporting requirements that has not submitted an HMBP or no-change certification within the last 12 months:

- Facility name;
- CERS ID;
- Follow-up actions including:
 - Recent review, acceptance, and rejection of HMBP or no-change certifications; and
 - 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 spreadsheet provided with the 1st Progress Report, to ensure an HMBP or a no-change certification has been submitted to CERS, or the CUPA will apply appropriate enforcement.

12. DEFICIENCY:

The CUPA has not established nor implemented all Unified Program administrative procedures.

The Unified Program administrative procedures have components that are missing, inaccurate, or incomplete.

The following administrative procedures have not been established:

- Procedures for forwarding Hazardous Materials Release Response Plan (HMRRP) information to emergency response personnel and other appropriate government entities in accordance with HSC, Section 25504(c).
 - Though the CUPA does provide emergency response personnel with CERS access to hazardous materials release response plan information, there is no established procedure.

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DEFICIENCIES REQUIRING CORRECTION

- Procedures for responding to requests for information from the public, from government agencies with a legal right to access the information, or from emergency responders, including methods to prevent the release of confidential and trade secret information.
 - The information request procedure was not provided; however, a deficiency was identified during the 2019 CUPA Performance Evaluation regarding the following incorrect citation in the last paragraph on Page 14 on the information request procedure:
 - Title 27, Section 15180(a)(1)(A) and (B) does not exist. The correct citation for this procedure is CCR, Title 27, Section 15180(e)(3).
- A plan to resolve fee disputes that arise between the CUPA and regulated businesses and between a regulated business and the state regarding the state surcharge. State surcharge fee disputes that can't be resolved locally may be referred to the Secretary for resolution. State surcharge fee disputes referred to the Secretary shall be in writing and shall include a recommendation for resolution.

The following Unified Program administrative procedures have components that are missing, inaccurate, or incomplete.

- Records maintenance procedures are missing:
 - identification of the records maintained, minimum retention times, archive procedures, and proper disposal methods.
 - The CUPA shall retain the following information for a minimum of five years:
 - 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 CCR, Title 27, Section 15260 and any other required training records specific to each program element.
- Financial Management Procedures are missing:
 - Single fee system
 - Consolidation of all fees currently mandated in statute and regulation used for local implementation of the Unified Program.
 - Billing statements that itemize fees by program element if those fee elements are calculated separately.
 - Fees for non-recurring activities of the CUPA such as, but not limited to, the fee for an initial permit or special inspection, which may be billed separately from the single fee billing.

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DEFICIENCIES REQUIRING CORRECTION

- Fee accountability
 - Information for implementing an annual review and update of the fee accountability program to encourage efficient and cost-effective operation of the program for which the single fee and state surcharge are assessed, including an accounting of the fee schedule, the amount billed, the revenue collected, establishment of the single fee amount(s) and actual personnel time needed to perform inspection, permit processing, and administrative functions.
- Surcharge collection and reimbursement
 - Components for the billing, collecting, and waiving of the state surcharge.

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report process regarding the following administrative procedures identified as:

- not being established:
 - Procedures for forwarding HMRRP information to emergency response personnel and other appropriate government entities in accordance with HSC, Section 25504(c)
- having missing components:
 - Records Maintenance Procedures regarding proper disposal methods
 - Financial Management Procedures regarding missing components of the single fee system within the fee accountability program and missing components of the surcharge collection and reimbursement program
- having inaccurate or incomplete components:
 - Information request procedure

CITATION:

CCR, Title 27, Sections 15180(e)(1), (2), (3), (5) and 15185(b), 15210(h) and (k)
[CalEPA]

CORRECTIVE ACTION:

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

By the 2nd Progress Report, if revisions to the established Unified Program administrative procedures are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the revised Unified Program administrative procedures. If no revisions are necessary, the CUPA will train CUPA personnel on the established Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA which, at minimum, will include the date the training was conducted, an outline of the training conducted, and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the developed Unified Program administrative procedures.

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DEFICIENCIES REQUIRING CORRECTION

By the 3rd Progress Report, if revisions to the Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the revised Unified Program administrative procedures. The CUPA will provide training documentation to CalEPA which, at minimum, will include the date the training was conducted, an outline of the training conducted, and a list of CUPA personnel in attendance. Once training is complete, the CUPA will implement the revised Unified Program administrative procedures.

13. DEFICIENCY:

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

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

- FY 2020/2021
 - 2nd Fiscal Quarter: Due January 30, 2021. Submitted March 2, 2021.
 - 3rd Fiscal Quarter: Due April 30, 2021. Submitted May 27, 2021.
 - 4th Fiscal Quarter: Due July 30, 2021. Submitted September 30, 2021.
- FY 2021/2022
 - 1st Fiscal Quarter: Due October 30, 2021. Submitted on November 15, 2021.

Note: CalEPA has revised the Quarterly Surcharge Transmittal Report template to reflect the increased CUPA Oversight state surcharge, which became effective July 1, 2021, and includes an assessment for the CERS NextGen Project. The revised quarterly Surcharge Transmittal Report is available at: https://calepa.ca.gov/wp-content/uploads/sites/6/2021/07/SURCHARGE-TRANSMITTAL-REPORT_20210709-ADA.pdf and should be submitted to cupa@calepa.ca.gov. Each line item on the Surcharge Transmittal Report template should be completed, including the check number. Though CalEPA has requested use of the revised quarterly Surcharge Transmittal Report, the July 1, 2018, version of the quarterly Surcharge Transmittal Report may be used until the revised quarterly Surcharge Transmittal Report is incorporated into Title 27.

Note: This deficiency was identified during the 2019 CUPA Performance Evaluation and was not corrected during the Evaluation Progress Report Process.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will have submitted to CalEPA the 3rd quarterly Surcharge Transmittal Report for FY 2022/2023 by the required due date using the current quarterly Surcharge Transmittal Report template.

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DEFICIENCIES REQUIRING CORRECTION

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 and should be submitted to cupa@calepa.ca.gov. Each line item on the Surcharge Transmittal Report template should be completed, including the check number.

Thereafter, the CUPA will ensure that state surcharge remittance and each quarterly Surcharge Transmittal Report are provided to CalEPA no later than 30 days after the end of each fiscal quarter during which the state surcharge was collected.

14. DEFICIENCY:

The CUPA did not complete an annual Self-Audit Report for FYs 2018/2019, 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.

15. DEFICIENCY: CORRECTED DURING EVALUATION

The CUPA is not assessing and collecting the correct state surcharge fee amount from all Underground Storage Tank (UST) Program facilities.

The following are examples:

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

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DEFICIENCIES REQUIRING CORRECTION

Note: This deficiency was identified for the UST and CalARP Programs during the 2019 CUPA Performance Evaluation. During the Evaluation Progress Report process this deficiency was corrected regarding the assessment and collection of the correct CalARP Program state surcharge amount.

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

CITATION:

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

CORRECTIVE ACTION: COMPLETED

During the evaluation, the CUPA provided an accounting of the correct assessment and remittance of the UST state surcharge for the correct number of USTs on site at the above listed facilities. The CUPA is billing and collecting the proper UST Surcharge fee amount and will continue to bill, collect, remit, and track any state surcharge fee amounts owed to CalEPA.

The CUPA will conduct an audit to determine the extent of the state surcharge fees assessed erroneously and will remit any outstanding amount to CalEPA. The CUPA confirmed the single fee is only waived for Roseville City owned facilities and public-school facilities.

This deficiency is considered corrected. No further action is required.

16. DEFICIENCY: CORRECTED DURING EVALUATION

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

Review of CERS CME information and information provided by the CUPA finds inspection reports from the following APSA Program and HWG Program facility files were not retained for the required minimum of five years:

APSA Program:

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

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10206679
 - CERS reflects APSA inspections conducted on May 31, 2018, June 1, 2017, and May 18, 2016.
 - The facility file has no inspection reports for these inspections.
- CERS ID 1061939
 - CERS reflects APSA inspections conducted on March 21, 2018, and April 29, 2016.
 - The facility file has no inspection reports for these inspections.
- CERS ID 10412800
 - CERS reflects an APSA inspection conducted on August 3, 2017.
 - The facility file has no inspection report for this inspection.
- CERS ID 10609726
 - CERS reflects APSA routine inspections conducted in 2019 and 2017.
 - The facility file has no inspection reports for these inspections.

HWG Program:

- CERS ID 10180219
 - CERS reflects routine RCRA LQG and PBR inspections conducted in 2018 and 2017.
 - The facility file has no inspection reports for these inspections.
- CERS ID 10130767
 - CERS reflects routine RCRA LQG inspections conducted in 2018 and 2017.
 - The facility file has no inspection reports for these inspections.
- CERS ID 10454692
 - CERS reflects routine RCRA LQG and PBR inspections conducted in 2018 and 2016.
 - The facility file has no inspection reports for these inspections.
- CERS ID 10152127
 - CERS reflects routine CE inspections conducted in 2016 and 2015.
 - The facility file has no inspection reports for these inspections.

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation was not corrected during the Evaluation Progress Report process.

CITATION:

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

CORRECTIVE ACTION: COMPLETED

During the 2022 CUPA Performance Evaluation, the CUPA provided inspection reports for all APSA facilities identified above. Upon completion of the assessment for the 2022 CUPA Performance Evaluation, DTSC determined HWG Program inspection reports are being maintained in HWG facility files. This deficiency is considered corrected. No further action is required.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

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

1. INCIDENTAL FINDING:

Required components of the I&E Plan are incomplete or inaccurate.

Review of the I&E Plan finds the following components are incomplete:

- Provisions for ensuring sampling capability are lacking in detail.
 - Page 14 states, “If sampling is deemed necessary for an inspection or complaint investigation, the RFD CUPA will select an Environmental Laboratory Accreditation Program (ELAP) certified laboratory based on project location and sample analyses requirements. The RFD CUPA will prepare a site specific sampling plan prior to sampling activities.”
 - Considerations for detailing sampling capabilities in the I&E Plan include staff training and elements of a site-specific sampling plan, safety, sampling equipment, photographs, field notes, sample purpose, test methods and analyses, chain of custody, sample security, and sample preservation.
- Enforcement notification procedures that ensure appropriate confidentiality.

Review of the I&E Plan finds the following component is inaccurate:

- Provisions of red tag authority for the UST Program.
 - The provisions of HSC, Section 25292.3 were amended and became effective January 1, 2019. As written, the I&E Plan is not consistent with the requirements when USTs are affixed with red tags; i.e. the I&E Plan does not include language where fuel cannot be withdrawn from USTs.

Note: This incidental finding was identified as a deficiency in the 2019 CUPA Performance Evaluation and was partially corrected during the Evaluation Progress Report process, and as the CUPA provided a revised I&E Plan for the 2022 CUPA Performance Evaluation. Components regarding provisions for ensuring sampling capability and provisions of red tag authority remain to be adequately addressed in the I&E Plan.

CITATION:

HSC, Chapter 6.7, Section 252952.3(c)(1)(C)
CCR, Title 27, Section 15200(a)(5)(A) and (a)(14)
[CalEPA, DTSC, State Water Board]

RESOLUTION:

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

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

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

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.

2. INCIDENTAL FINDING:

The UST operating permit conditions, issued with the UST operating permit, under the “Permit to Operate,” as the Unified Program Facility Permit (UPFP), are inconsistent with HSC, Division 20, Chapter 6.7 and CCR, Title 23, Division 3, Chapter 16 (UST Regulations) requirements.

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

- Section 5, UST Program, items i. and ii. reference cleanup activities associated with HSC, Chapter 6.7 and CCR, Chapters 16 and 18.
 - The CUPA does not have regulatory authority to implement cleanup of USTs as a Local Oversight Program agency, and therefore cannot cite cleanup activities in HSC, Chapter 6.7 and CCR, Chapters 16 and 18.
 - The correct permit condition citations are:
 - HSC, Chapter 6.7, Sections 25280 through 25296 and 25298 through 25299.6; and
 - CCR, Chapter 16, Sections 2610 through 2717.7.
 - Alternatively, the permit conditions could identify HSC and CCR sections that are excluded from the reference.

CITATION:

HSC, Chapter 6.7, Sections 25283(b)(1)(B) and 25297.01(b)
CCR, Chapter 16, Sections 2610 through 2717.7
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will provide CalEPA with revised UST operating permit conditions, consistent with UST Regulations and HSC, to be issued with the UST operating permit, under the “Permit to Operate,” as the UPFP.

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit conditions, based on feedback from the State Water Board. The CUPA will provide the amended UST operating permit conditions to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised UST operating permit conditions with the UST operating permit, under the “Permit to Operate,” as the UPFP.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

As a result of the CUPA's five-year UST permitting cycle, the State Water Board will consider this incidental finding resolved upon completion and acceptance of the revised or amended UST operating permit conditions, issued with the UST operating permit, under the "Permit to Operate," as the UPPF. Issuance of the revised or amended UST operating permit conditions will be verified during the next CUPA Performance Evaluation.

3. INCIDENTAL FINDING:

The CUPA is issuing the UST operating permit to non-compliant UST facilities, under the "Permit to Operate," as the UPPF.

Review finds the following UST facilities were not in compliance when issued a UST operating permit, prior to the January 1, 2019, amendments to HSC, Chapter 6.7, Section 25285(b), which allow issuance of a UST operating permit to a non-compliant UST facility so long as the UST facility is not subject to current enforcement activities:

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

Review of CERS finds the CUPA issued a UST operating permit to the following facilities that did not provide a recent UST submittal to CERS:

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

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

Note: CERS Frequently Asked Questions (FAQ) "When to Issue a UST Operating Permit" may be referenced.

Note: This incidental finding was identified as an incidental finding in the 2019 CUPA Performance Evaluation and was not resolved during the Evaluation Progress Report process.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

CITATION:

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

RESOLUTION:

As HSC was amended in 2019, a UST operating permit can now be issued to a non-compliant UST facility, unless the facility is subject to current enforcement activities.

By the 2nd Progress Report, the CUPA will revise and provide CalEPA with the procedure for issuing UST operating permits, under the "Permit to Operate," as the UPFP, based on the January 1, 2019, amendments to HSC, Chapter 6.7, Section 25285(b). The procedure will address UST operating permit issuance when a red tag is affixed and when a UST facility is subject to an enforcement action.

4. INCIDENTAL FINDING:

The education requirements for CUPA personnel in the classifications of Fire and Environmental Safety Inspector I and Fire and Environmental Safety Inspector II are inconsistent with CCR, Title 27, Section 15260.

Review of the hiring qualifications for Fire and Environmental Safety Inspector I and II classifications finds the minimum education requirements are:

- A Bachelor's degree from an accredited college or university, preferably in chemistry, environmental health, toxicology, industrial hygiene, fire science or a related field. Eight years of fire and life safety code inspection experience may be substituted for the education requirement.
 - This is inconsistent with the education requirements of CCR, Title 27, Section 15260 as only 15 units of college course work in combination with one year of qualifying experience or 30 units of college course work can be substituted for a Bachelor's degree.

CITATION:

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

RESOLUTION:

During the evaluation, the CUPA confirmed all personnel involved with Unified Program implementation meet applicable education requirements of CCR, Title 27, Section 15260.

The hiring qualification education requirements were incorporated to allow other fire personnel to assist in fulfilling Unified Program implementation when not enough CUPA inspectors were available. The CUPA no longer acquires assistance from other fire personnel to fulfill Unified Program implementation.

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

INCIDENTAL FINDINGS REQUIRING RESOLUTION

By the 1st Progress Report, the CUPA will work with the appropriate personnel to ensure revision of the hiring qualification minimum education requirements for the Fire and Environmental Safety Inspector I and II classifications are consistent with CCR, Title 27, Section 15260. The CUPA will provide CalEPA with the revised hiring qualification requirements for the Fire and Environmental Safety Inspector I and II classifications, pertaining to the Unified Program.

5. 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 APSA facility cited with 9 APSA Program violations for FY 2019/2020:

- CERS ID 10449196

CITATION:

HSC, Chapter 6.67, Section 25270.4.5(a)

HSC, Chapter 6.11, Section 25404.1.2(c)

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

RESOLUTION: COMPLETED

During the evaluation, review of CERS CME information for FY 2019/2020 indicates documented RTC for all violations. This incidental finding is considered resolved. No further action is required.

6. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CUPA is not inspecting each APSA tank facility that stores less than 10,000 gallons of petroleum at least once annually per the inspection frequency established in the I&E Plan.

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

- 19 of 49 (39%) APSA tank facilities that store less than 10,000 gallons of petroleum have not been inspected in the last 12 months.

Note: The CUPA meets the mandated triennial inspection frequency, as well as the annual inspection frequency as established in the I&E Plan, for each APSA tank facility storing 10,000 gallons or more of petroleum for compliance with the Spill Prevention, Control, and Countermeasure (SPCC) Plan requirements of APSA.

CITATION:

HSC, Chapter 6.67, Section 25270.5(b)

[OSFM]

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FINAL SUMMARY OF FINDINGS REPORT**

INCIDENTAL FINDINGS REQUIRING RESOLUTION

RESOLUTION: COMPLETED

During the evaluation, additional APSA tank facility inspections were performed.

As of August 16, 2022, 11 of 56 (19%) APSA tank facilities that store less than 10,000 gallons of petroleum have not been inspected in the last 12 months. This incidental finding is considered resolved. 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:

Review of overall implementation of the HWG Program, including policies and procedures, CERS data, facility file information, information provided by the CUPA between January 1, 2019, and December 31, 2021, is summarized below:

- CERS indicates 335 facilities self-identified as HWGs, 13 Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facilities, and 6 TP facilities.
- The annual inspection frequency for all HWG facilities established in the I&E Plan is not being met.
 - However, 330 of 335 (99%) HWG inspections were conducted between January 1, 2019, and December 31, 2021, which includes 21 of 36 months during restrictions and challenges of the Coronavirus (COVID-19) pandemic.
- The CUPA conducted 1,070 total HWG inspections, including "routine" and "other" inspection types.
 - The CUPA conducted 837 "routine" HWG inspections, of which 296 (35%) had at least one violation cited.
 - The CUPA conducted 233 "other" HWG inspections, of which 10 (4%) had at least one violation cited.
 - A total of 975 violations were cited, consisting of:
 - 1 Class I violation,
 - 521 Class II violations, and
 - 453 minor violations.
- There were no formal enforcement actions for hazardous waste related violations.

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

RECOMMENDATION:

Continue with efforts to meet the annual HWG inspection frequency and ensure facilities cited with HWG violations obtain RTC.

2. OBSERVATION:

Review of facility files and CERS CME information for the HMBP and CalARP Programs is summarized below.

HMBP Program:

- January 1, 2019, through December 31, 2019
 - The CUPA conducted 421 "routine" inspections, of which 119 (28%) had at least one violation cited.

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- A total of 148 violations were cited during “routine” inspections, consisting of:
 - 0 (0%) Class I violations
 - 20 (14%) Class II violations
 - 128 (86%) Minor violations
- 0 of 148 (0%) violations have no RTC.

- January 1, 2020, through December 31, 2020
 - The CUPA conducted 410 “routine” inspections, of which 37 (9%) had at least one violation cited.
 - A total of 57 violations were cited during “routine” inspections, consisting of:
 - 0 (0%) Class I violations
 - 1 (2%) Class II violation
 - 56 (98%) Minor violations
 - 1 of 57 (2%) violations have no RTC.

- January 1, 2021, through December 31, 2021
 - The CUPA conducted 491 “routine” inspections, of which 72 (15%) had at least one violation cited.
 - A total of 116 violations were cited during “routine” inspections, consisting of:
 - 0 (0%) Class I violations
 - 13 (11%) Class II violations
 - 103 (89%) Minor violations
 - 3 of 116 (3%) violations have no RTC.

CalARP Program:

- January 1, 2019, through December 31, 2019
 - The CUPA conducted 3 “routine” inspections, of which 0 (0%) had at least one violation cited.
- January 1, 2020, through December 31, 2020
 - The CUPA conducted 3 “routine” inspections, of which 0 (0%) had at least one violation cited.
- January 1, 2021, through December 31, 2021
 - The CUPA conducted 4 “routine” inspections, of which 2 (50%) had at least one violation cited.
 - A total of 4 violations were cited during “routine” inspections, consisting of:
 - 4 (100%) Minor violations

RECOMMENDATION:

Maintain the three-year inspection frequency for HMBP and CalARP facilities as required by statute. Ensure complete and thorough inspections are conducted to identify all violations at facilities. Maintain detailed inspection reports that include all factual basis of the violation and properly cite noted violations. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply appropriate enforcement when facilities do not obtain RTC, per the enforcement outlined in the I&E Plan.

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3. OBSERVATION:

The I&E Plan contains information that may benefit from improvement.

- There are two dates of revision noted in the document: November 1, 2021, and January 18, 2022. The I&E Plan should be updated to reflect a single date for each revised version.
- Update the improper reference to APSA as Aboveground Storage Tank or AST on the following pages:
 - Table of Contents, 1, 2, 3, 4, 5, 9, 10, 15, 42, and 43
- Page 9, Section D. – Accela is referenced as being used as the data management system. Update the section to reflect that, currently, the CUPA does not utilize a data management system and enters all information directly to CERS.
- Page 15, Section I 3. – HSC, Section 25270.5 is incorrectly referenced as violations of APSA. Replace HSC, Section 25270.5 with HSC, Chapter 6.67, commencing with Section 25270.
- Page 32, Section B 2. – HSC, Section 25270.5 is incorrectly referenced as violations of APSA. Replace HSC, Section 25270.5 with HSC, Chapter 6.67 commencing with Section 25270.
- Page 42, Section 6 a. – HSC, Section 25270.12 is incorrectly referenced as violations of APSA. Replace HSC, Section 25270.12 with HSC, Chapter 6.67 commencing with Section 25270 and add HSC, Sections 25270.12 and 25270.12.1 at the end of the statement. The statement could be revised as follows, “For violations of HSC, Chapter 6.67 (commencing with Section 25270), the violator shall be liable for a penalty of not more than \$5,000 for each day on which the violation continues pursuant to HSC, Sections 25270.12 and 25270.12.1.”

RECOMMENDATION:

Update the I&E Plan as indicated above.

4. OBSERVATION:

The CUPA’s website

(<https://www.roseville.ca.us/cms/One.aspx?portalId=7964922&pageId=8932375>) contains resources for the public and regulated community. The following are suggestions for improvement to the APSA section:

- Add a discussion regarding all applicable tank facilities that are subject to the APSA Program, aside from the typical tank facility with 1,320 gallons or more of petroleum, such as a tank facility that is subject to the Federal SPCC rule and a tank facility with one or more TIUGAs.
- Add a link to the OSFM website for additional APSA Program information at <https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/>.
- Add a link to the U.S. Environmental Protection Agency website for additional SPCC information at <https://www.epa.gov/oil-spills-prevention-and-preparedness-regulations>.

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RECOMMENDATION:

Update the website as indicated above.

5. OBSERVATION:

It is unclear how the CUPA utilizes the CUPA Forum Board APSA inspection checklists. APSA violations referenced on inspection reports do not include APSA citations and sometimes the violations are not clearly associated with APSA violations in the CERS violation library.

Inspection reports do not clearly identify the specific Unified Program elements applicable during a compliance inspection. Although the I&E Plan states the CUPA will conduct combined inspections or a single inspection which combines all applicable program elements, a comparison of inspection reports with CERS CME information does not always reflect combined inspections are conducted.

Inspection reports do not clearly indicate whether the inspection is a “routine” or “other” inspection type.

RECOMMENDATION:

Review the "Inspection Report Writing Guidance for Unified Program Agencies" document, which can be obtained from CalEPA. Ensure each inspection report clearly indicates inspection type (“routine” or “other”) and citations for each violation observed. Add CERS violation library violation type numbers to the inspection report for ease of CME reporting to CERS.

6. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 63 tank facilities. The CUPA’s single fee billing system identifies 52 APSA related tank facilities.

- 51 APSA tank facilities are identified in both CERS and the CUPA’s single fee billing system.
- 12 tank facilities are reported as “APSA Applicable” in CERS but are not identified as APSA tank facilities in the CUPA’s single fee billing system. Some of these facilities may not be 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 single fee billing system appropriately.
- 1 facility identified as an APSA related tank facility in the CUPA’s single fee billing system is not in the CERS list of APSA facilities. The CUPA should determine if the facility really is an APSA facility. Those that are not APSA regulated should not be identified as APSA tank facilities in the CUPA’s single fee billing 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 single fee billing system with CERS to ensure all APSA tank facilities are included in both systems.

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7. OBSERVATION:

Multiple APSA tank facilities submitted an HMBP in lieu of a tank facility statement using the 2011 emergency response and training plans template, which contains obsolete information.

RECOMMENDATION:

Encourage each APSA tank facility that utilizes the consolidated 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. The 2022 template is available in CERS.

8. OBSERVATION:

Review of accepted CERS UST submittals finds the following six single-walled tanks which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05:

- CERS ID 10197085 (Tank IDs 001, 002, and 003); and
- CERS ID 10505968 (Tank IDs 001, 002, and 003).

RECOMMENDATION:

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. Written notification should inform facility owners or operators that in order to remain in compliance, owners or operators must replace or remove single-walled USTs by December 31, 2025. Additional information regarding single-walled UST closure requirements may be found at: https://www.waterboards.ca.gov/ust/single_walled.html.

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.

9. OBSERVATION:

Effective October 2018, UST Regulations were amended to include the maintenance requirements for UST closure documents by UST owners/operators. The CUPA's UST closure letter does not provide direction to UST owners/operators that maintenance of UST closure documentation is required pursuant to UST Regulations, Section 2672(f).

RECOMMENDATION:

Amend the CUPA's UST closure letter template to include the identified maintenance requirements for UST owners/operators, i.e., owners or operators of a UST that is closed pursuant to CCR, Chapter 16, Section 2672, shall maintain the analytical results of all soil and groundwater samples for at least 36 months after the UST system is properly closed.

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10. 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:

- Information provided by Roseville City Fire Department 1995 Application for Certification
- CERS “Summary Regulated Facilities by Unified Program Element Report” generated on June 10, 2022
- CERS “UST Inspection Summary Report (Report 6),” generated on June 10, 2022
- Total Number of Regulated Businesses and Facilities:
 - In 1995: **183**
 - Currently: **646**
 - An increase of **463** facilities
- Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Regulated Businesses and Facilities:
 - In 1995: **127**
 - Currently: **573**
 - An increase of **446** facilities
- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - In 1995: **42**
 - Currently: **48**
 - An increase of **6** facilities
- Total Number of Regulated Underground Storage Tanks (USTs):
 - In 1995: **102**
 - Currently: **135**
 - An increase of **33** Underground Storage Tanks
- Total Number of Regulated Hazardous Waste Generator (HWGs) Facilities:
 - In 1995: **67**
 - Currently: **336**
 - An increase of **269** facilities
- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - In 1995: None specified
 - Currently: **0**
 - 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.

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- Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):
 - In 1995: **6**
 - Currently: **6**
 - No change in the number of facilities

- Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) Facilities:
 - In 1995: none specified
 - Currently: **13**
 - 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 1995: **4**
 - Currently: **3**
 - A decrease of **1** facility

- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
 - In 1995: **15**
 - Currently: **63**
 - An increase of **48** facilities

Since the CUPA applied for certification in 1995, there has been substantial increases in the number of facilities regulated within the Business Plan, HWG, and APSA Programs. Between 2021 and 1995, there has been a 451% increase in the number of regulated businesses with the Business Plan Program, a 501% increase in the number of regulated facilities within the HWG Program, and a 420% increase in the number of facilities regulated within the APSA Program. The total number of regulated businesses and facilities has overall increased by 463 (353%).

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. The information is sourced from the Roseville City Fire Department 1995 CUPA Application and recent information provided by the CUPA.

- Inspection and other Staff
 - Upon Certification in 1995:
 - 4 Staff, with unknown specific time allocation towards the implementation of the Unified Program.
 - Though budgeted at 1.9 FTE, only 0.6 FTE is applied to the administered elements.

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- During the evaluation, the CUPA suggested 1.5 FTE for CUPA administrative and management personnel.
- Currently:
 - 4 Staff, each Part Time = less than 4.0 FTE
 - Staff are responsible for the supervision of daily operations in both the CUPA and Fire & Life Safety Inspection programs.
- Supervisory and Management Staff
 - Upon Certification in 1995:
 - 1 Staff, with unknown specific time allocation towards the implementation of the Unified Program.
 - During the evaluation, the CUPA suggested 1.5 FTE for CUPA administrative and management personnel.
 - Currently:
 - 1 Staff, Part Time = less than 1.0 FTE
 - Supervisor is responsible for the oversight of daily operations in both the CUPA and Fire & Life Safety Inspection programs.

RECOMMENDATION:

The comparison of the implementation of the program upon certification with present-day circumstance reveals there may be several issues impeding the CUPAs ability to adequately implement the Unified Program within its jurisdiction. Between rapid growth within the city limits and the expansion of the Unified Program elements since its inception, the number of regulated facilities for this CUPA have more than tripled since the CUPA was first certified. As of the most recent evaluation, however, the CUPA has only added one additional full-time personnel on staff than when the agency was first certified which, in and of itself, is a factor that reduces the ability of the CUPA to implement all program elements effectively.

The City of Roseville regularly conducts fee studies assessing the CUPA and other city department fees. The CUPA's fee schedule is adjusted annually at the start of each fiscal year. The CUPA recovers about 50% to 75% of implementation expenditures through single fee assessment and subsidizes the remaining costs using the general fund. During the 2019 evaluation Progress Report process, the CUPA provided a User and Regulatory fee study detailing the allocation of staff resources to implement the Unified Program and an outline of proposed fee increases that, when fully in effect, would provide for recovery of approximately 82% of implementation costs. Any fee increases are based on a "time motion study" and are applied across all Unified Program elements. It is not clear whether or not the fee increases were applied to the HWG, APSA, and UST Program elements, or to all program elements.

Continue to 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. Reevaluate the current budget and expenditures, single fee assessment for each entity, and funding allocation for program services so that, if applicable, the CUPA is able to justify the need

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to increase fees, staff levels, and other resources as necessary and reasonable to ensure adequate implementation of each program element. Determine the actual percentage of FTE allocated for supervisory and administrative/inspection staff implementation of the Unified Program and the Fire & Life Safety Inspection program. Examine how current CUPA resources are being used to ensure that required program elements are implemented as a first priority before supplemental efforts that may not be specifically required.

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.

11. OBSERVATION:

The Roseville Fire Department issues a permit to non-Unified Program facilities that incorporates an addendum for permit conditions applicable to program elements of the Unified Program.

RECOMMENDATION:

Ensure the permit issued to non-Unified Program facilities does not incorporate permit conditions applicable to programs administered under the Unified Program.

12. OBSERVATION:

The CUPA is citing violations on inspection reports differently than how violations are being reported to CERS. The CUPA is entering each instance of an observed violation as an independent violation in CERS and is not distinguishing the difference between each observed instance. Because each observed instance is entered in CERS as an independent occurring violation, and because there is no distinction between each observed instance, the entries for such violations appear as duplicate or repetitive violation occurrences in CERS for the same inspection.

Review of CERS CME information between January 1, 2019, and December 31, 2021, finds:

- 333 of 975 (34%) HWG violations in CERS are actually observed instances of a cited violation entered as independent occurrences.

The following examples of this observation include, and may not be limited to:

- CERS ID 10455442
 - Inspection dated February 28, 2020
 - CERS indicates 4 violation entries for "hazardous waste container labeling."
 - Inspection comments in CERS are the same for each violation: "4 - 55 gallon drums in the hazwaste collection area do not have accumulation start dates marked on them."

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- A more accurate method to report this violation in CERS would be to enter one violation for “hazardous waste container labeling,” and in the comments section for the violation, provide details regarding each of the 4 instances the violation was observed, including information to distinguish between each occurrence so that RTC can be determined when necessary.
- CERS ID 10401820
 - Inspection dated March 11, 2020
 - CERS indicates 5 violation entries for “manifesting requirements.”
 - Inspection comments in CERS are the same for each violation: “- (5) manifests missing final destination signature from 2019.”
 - A more accurate method to report this violation in CERS would be to enter one violation for “manifests missing final destination signature form 2019,” and in the comments section for the violation, provide details regarding each of the 5 instances the violation was observed, including information to distinguish between each occurrence so that RTC can be determined when necessary.
- CERS ID 10792897
 - Inspection dated June 16, 2020
 - CERS indicates 6 violation entries for “empty drum labeling.”
 - Inspection comments in CERS are the same for each violation: “- 6 empty drums need to be labeled as empty.”
 - A more accurate method to report this violation in CERS would be to enter one violation for “hazardous waste container labeling,” and in the comments section for the violation, provide details regarding each of the 6 instances the violation was observed, including information to distinguish between each occurrence so that RTC can be determined when necessary.

RECOMMENDATION:

Review the CERS guidance document titled, “[Reporting Multiple Identical Violations in CERS](https://cers.calepa.ca.gov/wp-content/uploads/sites/11/2017/04/reporting-multiple-identical-violations_general.pdf),” available at https://cers.calepa.ca.gov/wp-content/uploads/sites/11/2017/04/reporting-multiple-identical-violations_general.pdf.

The “Reporting Multiple Identical Violations in CERS,” document states, “DTSC recommends that violations of the same type be reported as a single violation with multiple instances. For example, an inspector finds ten hazardous waste drums that are missing the ‘start accumulation date.’ This would be reported as a single violation. A comment should be added to indicate the number of instances observed of this violation. For violations at multiple treatment units in the same tier, such as several unmarked PBR units, DTSC recommends reporting one violation with multiple instances.”
