

January 25, 2023

Mr. Miles Massone
Fire Marshal
City of Hayward Fire Department
777 B Street, 4th Floor
Hayward, California 94541-5007

Dear Mr. Massone:

During January through November, 2022, CalEPA and the state program agencies conducted a performance evaluation of the City of Hayward 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 acknowledgement of accomplishments and challenges, as well as 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 (March 27, 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 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.

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:

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cc sent via email:

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Environmental Scientist
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Ms. Kaeleigh Pontif
Environmental Scientist
California Environmental Protection Agency

UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

CUPA: City of Hayward Fire Department

Evaluation Period: January 2022 through November 2022

Evaluation Team Members:

- **CalEPA Team Lead:** Kaeleigh Pontif
- **CalEPA:** Esme Hassell-Thean
- **DTSC:** Brennan Ko-Madden
- **State Water Board:** Jenna Hartman, Sean Farrow
- **CAL FIRE-OSFM:** Glenn Warner, Denise Villanueva

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 27, 2023
3rd Progress Report: October 2, 2023

2nd Progress Report: July 3, 2023
4th Progress Report: January 15, 2024

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. ACTIVITIES DURING THE CORONAVIRUS (COVID-19) PANDEMIC:

During the COVID-19 pandemic, the CUPA had one vacant Hazardous Materials Inspector position for which hiring was frozen. The approximately three-year vacancy significantly impacted the CUPA's ability to fully implement the Unified Program. The position was filled in August of 2022, and should greatly assist in resolving many of the deficiencies contained within the report. Additionally, the CUPA was responsible for staffing the "COVID19 Information Call Line."

The CUPA continued minimal operations during the pandemic, including but not limited to:

- Coordinated online trainings for all CUPAs within Alameda County;
 - Host of the Alameda County Environmental Task Force meeting for the Alameda County District Attorney's Office
 - Provided continuous inspection services for new regulated businesses, business closures and public complaints.
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2. COUNTYWIDE COORDINATION:

A Coordinating Agency Agreement exists between the CUPA and other emergency response agencies of Alameda County. The CUPA has led many coordination efforts among these agencies, such as:

- Alameda County Fire Chiefs
 - CUPA Host and President - Haz Mat Code Enforcement Section
 - CUPA Staff Representatives - Fire Prevention Officers Meeting
 - Hosting the Alameda County Environmental Task Force
 - Hosting the Hazardous Waste Program Technical Advisory Group (TAG) and the Underground Storage Tank (UST) Program TAG for the California CUPA Forum Board Bay Area Region
 - Hosted and coordinated trainings for Underground Storage Tank (UST) Program and California Accidental Release Prevention (CalARP) Program regulatory updates
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3. ENFORCEMENT:

The CUPA was involved with several enforcement cases over the time period assessed for the 2022 CUPA Performance Evaluation. One notable enforcement case, with a local school district, involved several facilities and nearly all Unified Program elements. Years of enforcement resulted in an Administrative Enforcement Settlement that amounted to over 1.6 million dollars, including penalties, administrative costs, and supplemental environmental projects (SEPs).

UNIFIED PROGRAM PERFORMANCE EVALUATION
FINAL SUMMARY OF FINDINGS REPORT

ACCOMPLISHMENTS, EXAMPLES OF OUTSTANDING IMPLEMENTATION, AND CHALLENGES

4. OUTREACH TO SINGLE-WALLED UST OPERATORS:

With the 2025 deadline for removal of single-walled tanks approaching, the CUPA has been proactive in providing outreach to UST facilities in advance and assisting owners and/or operators in preparing for UST closure by:

- Hosting a UST TAG meeting;
 - Providing email information to affected businesses;
 - Contacting all single-walled tank owners by phone and discussing the requirement to remove all single-walled tanks by December 31, 2025; and
 - Coordinating phone meetings between Red Horse and operators to provide direct contact and assistance with information.
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5. CORRECTION OF DEFICIENCY IDENTIFIED DURING 2019 CUPA PERFORMANCE EVALUATION:

In conducting the assessment for the 2022 CUPA Performance Evaluation, it has been determined the following deficiency identified in the 2019 Final Summary of Findings report is considered corrected:

- The CUPA is not consistently documenting whether the UST owner/operator has demonstrated to the satisfaction of the CUPA, UST closure and soil and/or groundwater sampling complies with statute and regulation and maintaining closure records as required by statute and regulation. The CUPA is not consistently requiring a soil or groundwater sample plan or soil and groundwater sample map be provided with closure documentation.
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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 inspecting each facility at the required frequency for the following programs:

- Hazardous Waste Generator (HWG), including the Tiered Permitting (TP) component of the HWG Program
- Hazardous Materials Business Plan (HMBP)
- Aboveground Petroleum Storage Act (APSA)
- UST

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

- 469 of 561 (84%) HWG facilities were not inspected once every three years, per the inspection frequency established in the Inspection and Enforcement (I&E) Plan, between January 1, 2019, and December 31, 2021.
 - Note: This deficiency was identified in the 2016 CUPA Performance Evaluation as not meeting the HWG inspection frequency established in the I&E Plan as once every *two* years and was not corrected during the Evaluation Progress Report process. This deficiency was identified in the 2019 CUPA Performance Evaluation as not meeting the HWG inspection frequency established in the I&E Plan as once every *three* years and was not corrected during the Evaluation Progress Report process.
- 5 of 10 (50%) TP facilities were not inspected once within the first year and every three years thereafter per the inspection frequency established in Health and Safety Code (HSC), between January 1, 2019, and December 31, 2021.
- 505 of 716 (71%) HMBP facilities were not inspected once every three years, per the inspection frequency established in HSC, between January 1, 2019, and December 31, 2021.
- 5 of 8 (63%) APSA tank facilities that store 10,000 gallons or more of petroleum were not inspected once every three years, per the inspection frequency established in the I&E Plan between January 14, 2019, and January 14, 2022.
- 34 of 43 (79%) other APSA tank facilities were not inspected once every three years, per the inspection frequency established in the I&E Plan between January 14, 2019, and January 14, 2022.
 - 5 of 43 (12%) other APSA tank facilities have no inspection record in CERS.

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

DEFICIENCIES REQUIRING CORRECTION

Review of the CERS UST Routine Inspection Frequency Report generated on March 15, 2022, finds:

- 4 UST facilities were not inspected at least once every 12 months. The following UST facilities have not had a routine compliance inspection since 2020:
 - CERS ID 10315255
 - CERS ID 10315333
 - CERS ID 10315474
 - CERS ID 10314514
- 4 UST facilities were not inspected at least once every 36 months. The following UST facilities have not had a routine compliance inspection since 2019:
 - CERS ID 10443502
 - CERS ID 10400938
 - CERS ID 10174459
 - CERS ID 10405411
- Not ensuring UST facilities are inspected at least once every three years jeopardizes the ability of California to meet the U.S. Environmental Protection Agency (EPA) certification requirements of the Energy Policy Act of 2005. In addition, not inspecting USTs once every three years may result in a significant threat to human health, safety, or the environment.
- Note: The CUPA was not able to consistently inspect all UST facilities during 2019 as a result of health and safety restrictions due to COVID-19.

CITATION:

California Code of Regulations (CCR), Title 27, Section 15200(a)(3)(A)
HSC, Chapter 6.5, Section 25201.4(b)(2)
HSC, Chapter 6.7, Section 25288(a)
HSC, Chapter 6.67, Section 25270.5(a) and (b)
HSC, Chapter 6.95, Sections 25503(e) and 25511(b)
[DTSC, CalEPA, OSFM, State Water Board]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each HWG, TP, HMBP, APSA, and UST facility is inspected at the relative established inspection frequency as required. The action plan will include, at minimum:

- An analysis and explanation as to why the relative established inspection frequency for HWG, TP, and HMBP facilities is not being met as required. Existing inspection staff resources and the number of facilities scheduled to be inspected each year are factors to address.
 - Note: The analysis and explanation is not needed for APSA tank facilities, nor UST facilities.

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

- A sortable spreadsheet exported from the CUPA's data management system or CERS, identifying each HWG, TP, HMBP, APSA, and UST facility that was not inspected at the established inspection frequency as required. For each HWG, TP, HMBP, APSA, and UST facility listed, the spreadsheet will include, at minimum:
 - Facility name,
 - CERS ID, and
 - Date of the last routine inspection.
 - For APSA tank facilities, include the category of tank facility, such as:
 - 10,000 gallons or more,
 - 1,320-9,999 gallons,
 - Tank In an Underground Area (TIUGA) with less than 1, 320 gallons.
 - For UST facilities, include facilities identified as not having a routine compliance inspection since 2019 and 2020.
- A schedule to inspect those HWG, TP, HMBP, and APSA facilities identified as not having been inspected at the established inspection frequency as required, prioritizing the most delinquent inspections to be completed prior to any other HWG, TP, HMBP, and APSA facility inspections based on risk. For example, regarding APSA tank facilities, large volumes of petroleum or proximity of the facility to navigable water.
 - Note: The schedule is not needed for UST facilities.
- Future steps to ensure that all HWG, TP, HMBP, and APSA facilities will be inspected at the established inspection frequency as required. For example, the generation of a list of all HWG facilities and the anniversary date of the next routine three-year HWG inspection, per the established inspection frequency as required.
 - Note: Future steps are not needed for UST facilities.

By the 2nd Progress Report, the CUPA will, if necessary, revise the action plan based on feedback from DTSC, CalEPA, OSFM, and/or the State Water Board. 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 and a brief narrative of how the CUPA is continuing to ensure all HWG, TP, and HMBP facilities will be inspected at the established inspection frequency as required.

- Note: The narrative is not needed for APSA tank facilities, nor UST facilities.

By the 2nd Progress Report, the CUPA will have inspected each UST facility identified in the spreadsheet provided as part of the action plan with the first Progress Report at the established inspection frequency as required. The CUPA will prioritize the most delinquent UST compliance inspections with those facilities having single-walled UST components and proximity of the facility to drinking water wells.

By the 5th Progress Report, the CUPA will have inspected each HWG, TP, HMBP, APSA, and UST facility identified in the spreadsheet provided as part of the action plan with the first Progress Report at the established inspection frequency as required.

CALIFORNIA ENVIRONMENTAL PROTECTION AGENCY

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

DEFICIENCIES REQUIRING CORRECTION

2. DEFICIENCY:

The CUPA has not fully developed nor implemented the TP component of the HWG Program.

The CUPA is not inspecting each TP facility every three years, per the HSC:

- 5 of 10 (50%) TP facilities were not inspected once every three years.

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

During the 45-day review process the CUPA must:

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

Review of CERS CME information finds 10 of 22 (45%) 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. Examples include:

- CERS ID 10315759: Submittal date December 27, 2021; Still under review (128 days as of May 4, 2022)
- CERS ID 10152325: Submittal date April 2, 2021; Still under review (396 days as of May 4, 2022)
- CERS ID 10315759: Submittal date March 9, 2021; Still under review (421 days as of May 4, 2022)
- CERS ID 10152217: Submittal date February 2, 2021; Still under review (456 days as of May 4, 2022)
- CERS ID 10315759: Submittal date January 5, 2021; Still under review (483 days as of May 4, 2022)
- CERS ID 10152325: Submittal date December 30, 2020; Not Accepted on April 2, 2021 (93 days)
- CERS ID 10152217: Submittal February 4, 2020; Accepted April 9, 2020 (65 days)
- CERS ID 10766785: Submittal date June 10, 2019; Accepted April 2, 2020 (297 days)
- CERS ID 10766785: Submittal date February 13, 2019; Not Accepted May 5, 2019 (81 days)
- CERS ID 10152217: Submittal date February 5, 2019; Accepted May 20, 2019 (104 days)

Note: The examples provided above may not represent all instances of this deficiency and exclude instances where the CUPA responded to at least one PBR submittal when a facility submitted multiple PBR submittals within 45 days of one another.

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DEFICIENCIES REQUIRING CORRECTION

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation and was partially corrected during the 2019 Evaluation Progress Report process as the CUPA completed the following:

- Revision of the applicable policy to ensure it addresses reviewing, processing and authorizing Onsite Hazardous Waste Treatment notifications within 45 days;
- Training of personnel on the revised applicable policy;
- Ensuring personnel reviewed the training videos indicated in the corrective action on May 14, 2019; and
- Provided in house training for personnel conducted by DTSC on May 29, 2019.

Note: Not reviewing PBR notifications within 45-days was identified as a deficiency in the 2016 CUPA Performance Evaluation and was corrected during the Evaluation Progress Report process.

CITATION:

CCR Title 22, Sections 67450.2(b)(4) and 67450.3(c)(1) and (d)
HSC, Chapter 6.5, Section 25200.3(e)(3) and 25201.5(d)(7)
[DTSC]

CORRECTIVE ACTION:

Regarding not meeting the inspection frequency for each TP facility, refer to the corrective actions outlined for Deficiency 1.

By the 1st Progress Report, the CUPA will provide inspection staff with training 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 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 inspection staff attending the training.

Note: Training videos regarding the TP component of the HWG Program are available on the California CUPA 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 to ensure annual notification submittals are accurate, correct, and represent the actual waste treatment systems used at the notifying facility.

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DEFICIENCIES REQUIRING CORRECTION

By the 2nd Progress Report, the CUPA will follow up with the facilities identified by the CUPA as requiring a resubmission of the Onsite Hazardous Waste Treatment Notification to correct any errors, if necessary.

3. DEFICIENCY:

The CUPA is not consistently following-up and documenting return to compliance (RTC) information in CERS for the following programs:

- HWG, including the TP component of the HWG Program
- UST
- HMBP
- CalARP
- APSA

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

- 91 of 129 (71%) HWG or TP violations cited January 1, 2019, through December 31, 2021
 - 57 of 129 (44%) violations are Class II violations, of which 44 of 57 (77%) have no RTC
 - 5 of 129 (4%) violations are Class I violations, of which 5 of 5 (100%) have no RTC
 - 67 of 129 (52%) violations are Minor violations, of which 42 of 67 (63%) have no RTC
 - 57 of 67 (85%) Minor violations did not obtain RTC within 35 days
 - 47 of 67 (70%) Minor violations did not obtain RTC within 90 days
- 14 of 42 (33%) UST testing or leak detection violations cited during Fiscal Year FY2020/2021:
 - The following is an example:
 - CERS ID 10314517: Overfill Prevention dated June 8, 2021, indicates flapper valve installed in tank 87-1 does not meet the overfill requirements and needs to be replaced within 30 days.
- 17 of 79 (22%) UST testing or leak detection violations cited during FY 2019/2020
 - The following are examples:
 - CERS ID 10315567: Line Leak Detector (LLD)-Double-Walled Pressurized Pipe dated May 1, 2020, indicates diesel LLD failed test and must be repaired/replaced and retested.
 - CERS ID 10314829: Spill Container dated December 3, 2019, indicates 87 and Diesel spill buckets failed the required 1-hour lake test.
- 25 of 97 (26%) UST testing or leak detection violations cited during FY 2018/2019:
 - The following are examples:
 - CERS ID 10314493: Secondary Containment Testing dated June 10, 2019, indicates facility has not conducted a complete secondary containment test every three years.

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DEFICIENCIES REQUIRING CORRECTION

- CERS ID 10315663: Emergency Generator Tank Systems Line Leak Detector (LLD) dated October 3, 2018, states, "...facility is required to have a LLD for the pressurized portion of piping as part of the monitoring plan. Facility is to apply for a permit within 30 days no later than 11/03/2018. Copy of this regulation provided to operator."
 - 28 of 29 (97%) HMBP violations cited between January 1, 2021, and December 31, 2021
 - 7 of 7 (100%) HMBP violations cited between January 1, 2020, and December 31, 2020
 - 45 of 82 (55%) HMBP violations cited between January 1, 2019, and December 31, 2019
 - 8 of 10 (80%) CalARP violations cited between January 1, 2021, and December 31, 2021
 - 3 of 3 (100%) APSA violations cited during FY 2020/2021
 - 1 of 4 (25%) APSA violations cited during FY 2019/2020
 - 2 of 6 (33%) APSA violations cited during FY 2018/2019
 - 12 of 36 (33%) APSA violations cited during FY 2016/2017 Including 3 violations for not having, or failure to prepare, a Spill Prevention, Control, and Countermeasure (SPCC) Plan

Note: This deficiency was identified in the 2019 CUPA Performance Evaluation regarding the HWG, UST, and APSA Programs and was not corrected during the Evaluation Progress Report process.

Note: The UST examples provided above may not represent all instances of this deficiency. These examples only include testing and leak detection violations and do not include administrative or minor violations.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6, and 25187.8(b) and (g), and 25508(a)(4)
HSC, Chapter 6.7, Section 25288(d)
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)
[DTSC, State Water Board, CalEPA, OSFM]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will review the I&E Plan or other applicable procedure, and revise as necessary, to ensure establishment of a delineated process to:

- Ensure facilities cited with violations RTC through applied enforcement
 - UST, HMBP, and CalARP violations must obtain RTC within 60 days
- document follow-up actions taken by the CUPA to ensure RTC, and
- document RTC in CERS.

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

By the 1st Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the CUPA's

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UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

DEFICIENCIES REQUIRING CORRECTION

data management system or CERS that includes all open violations (no RTC) cited during the timeframe indicated below for each program element:

- Between January 1, 2019, and December 31, 2021
 - HWG, TP, HMBP, CalARP
- Between January 1, 2016, and June 30, 2017
 - APSA
- Between July 1, 2018, and June 30, 2021
 - APSA

At minimum, the sortable spreadsheet will include the following information for each facility with open violations (no RTC):

- Facility name;
- CERS ID;
- inspection and violation dates;
- scheduled RTC date;
- actual RTC date (when applicable);
- RTC qualifier; and
- in the absence of obtained RTC, a narrative of the applied enforcement taken by the CUPA to ensure RTC.

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

Note: The spreadsheet is not needed for open UST violations.

By the 2nd Progress Report, if amendments to the revised I&E Plan or other applicable procedure are necessary based on feedback from DTSC, the State Water Board, and/or CalEPA, the CUPA will provide CalEPA with the amended I&E Plan or other applicable procedure. If no amendments are necessary, the CUPA will train inspection staff on the revised I&E Plan or other applicable procedure. 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 inspection staff in attendance. Once training is complete, the CUPA will implement the revised I&E Plan or other applicable procedure.

By the 3rd Progress Report, if amendments to the I&E Plan or other applicable procedure were necessary, the CUPA will train inspection staff on the amended I&E Plan or other applicable procedure. 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 inspection staff in attendance. Once training is complete, the CUPA will implement the amended I&E Plan or other applicable procedure.

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DEFICIENCIES REQUIRING CORRECTION

By the 3rd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with RTC documentation or a description of the applied enforcement taken by the CUPA in the absence of RTC for the following:

- five HWG and/or TP facility records as requested by DTSC,
- five UST facility records as requested by the State Water Board,
- five HMBP facility records as requested by CalEPA,
- five CalARP facility records as requested by CalEPA, and
- three APSA tank facility records as requested by OSFM.

By the 4th Progress Report, the CUPA will have ensured each APSA tank facility identified in the spreadsheet provided with the 1st Progress Report as having been cited with a violation for not having, or failure to prepare, an SPCC Plan has achieved compliance, or the CUPA will have applied enforcement.

4. DEFICIENCY:

The CUPA is not consistently or correctly reporting complete and accurate CME information to CERS for the CalARP, HMBP, and HWG Programs beginning July 1, 2013.

Review of CERS CME information, facility files, and Self-Audit Reports finds the following CalARP inspections are not reported in CERS:

- CERS ID 10153047: Inspection dated November 8, 2021, documents two violations.
- CERS ID 10315363: Inspection dated November 5, 2021, documents one violation.
- CERS ID 10315429: Inspection dated November 4, 2021, documents one violation.
- CERS ID 10314355: Inspection dated November 4, 2021, documents two violations.
- CERS ID 10314349: Inspection dated November 4, 2021, documents one violation.
- CERS ID 10152325: Inspection dated November 3, 2021, documents three violations.

- FY 2014/2015
 - 2 inspections were reported in the Self-Audit Report
 - 0 inspections were reported in CERS
- FY 2013/2014
 - 1 inspection was reported in the Self-Audit Report
 - 0 inspections were reported in CERS

Review of CERS CME information and CalARP facility files finds the following information is not documented correctly in CERS:

- CERS ID 10170131: Inspection dated August 9, 2021, documents one violation. CERS has no record of RTC for the violation.

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Review of CERS CME information, facility files, and Self-Audit Reports finds the following HMBP inspections are not reported in CERS:

- CERS ID 10153047: Inspection dated November 8, 2021, documents one violation.
- CERS ID 10315363: Inspection dated November 5, 2021, documents no violations.
- CERS ID 10315429: Inspection dated November 4, 2021, documents one violation.
- CERS ID 10314355: Inspection dated November 4, 2021, documents no violations.
- CERS ID 10314349: Inspection dated November 4, 2021, documents no violations.
- CERS ID 10152325: Inspection dated April 24, 2019, documents one violation, and an inspection dated November 3, 2021, documents the same violation.

- FY 2014/2015
 - 133 inspections were reported in the Self-Audit Report
 - 123 inspections were reported in CERS
- FY 2013/2014
 - 114 inspections were reported in the Self-Audit Report
 - 15 inspections were reported in CERS

Review of CERS CME information, facility files, and Self-Audit Reports finds the following HWG inspections are not reported in CERS:

- FY 2014/2015
 - 99 inspections were reported in the Self-Audit Report
 - 70 inspections were reported in CERS
- FY 2013/2014
 - 130 inspections were reported in the Self-Audit Report
 - 13 inspections were reported in CERS

Review of CERS CME information and HWG facility files finds the following information is not documented correctly in CERS:

- CERS ID 10153599: CME information for an inspection dated August 28, 2014, is not in CERS.
- CERS ID 10152325: CME information for an inspection dated July 17, 2013, is not in CERS.
- CERS ID 1034442: CME information for inspections dated October 31, 2013, and December 5, 2013, is not in CERS.
- CERS ID 10315012: CME information for inspections dated December 13, 2013 and December 17, 2014 is not in CERS.

Note: The FY 2014/2015 Self-Audit Report states Envision Connect had not yet been fully integrated to electronically transfer information to CERS.

Note: This deficiency was identified in the 2016 CUPA Performance Evaluation for the HWG, HMBP, CalARP, APSA, and UST Programs and was considered corrected for the APSA and

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UST Programs during the Evaluation Progress Report process. The 2016 deficiency remained uncorrected for the HWG, HMBP, and CalARP Programs and was identified in the 2019 CUPA Performance Evaluation as an incidental finding. The 2019 incidental finding remained unresolved during the Evaluation Progress Report process. Since first identified in the 2016 CUPA Performance Evaluation, the CUPA has trained staff on a revised Data Management Procedure and has begun to report CME information more accurately in CERS for the UST, APSA, and HWG Programs. A substantial amount of CME information dating back to July 1, 2013, is in paper form and needs to be digitized and uploaded to CERS.

Note: It is recognized that the continued shortage in CUPA staff and resources, as well as the city-wide restriction on the digitization of historical information, all resulting from COVID-19, has impacted the efforts and abilities of the CUPA to make significant progress towards the correction of this deficiency.

CITATION:

HSC, Chapter 6.11, Sections 25404(e)(4) and 25404.1.2(c)
[CalEPA]

CORRECTIVE ACTION:

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

- Identification and correction of the cause(s) of missing or incorrect CalARP, HMBP, and HWG Program CME information reported to CERS, including any data transfer from the CUPA's data management system to CERS;
- Review and revision of the CME reporting component of the Data Management Procedure, or other applicable procedure, to ensure CalARP, HMBP, and HWG Program CME information is consistently and correctly reported to CERS;
- Identification of all CalARP, HMBP, and HWG Program CME information not previously reported to CERS, or reported to CERS incorrectly between January 1, 2019, and December 31, 2021;
- A process for reporting CalARP, HMBP, and HWG 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; and
- Future steps to ensure all CalARP, HMBP, and HWG Program CME information is consistently and correctly reported completely and accurately to CERS. This may generate the need for a comparison of CME information in the CUPA's data management system with CERS to identify CME information not being reported, or being reported incorrectly, to CERS through electronic data transfer (EDT) for the CalARP, HMBP, and HWG Programs.

By the 2nd Progress Report, if amendments to the revised CME reporting component of the Data Management Procedure, or other applicable procedure are necessary based on feedback from CalEPA and/or DTSC, the CUPA will provide CalEPA with the amended CME reporting

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component of the Data Management Procedure or other applicable procedure. If amendments are 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 3rd Progress Report, if amendments to the revised CME reporting component of the Data Management Procedure, or other applicable procedure were necessary, the CUPA will provide CalEPA with the amended CME reporting component of the Data Management Procedure or other applicable procedure. The CUPA will train CUPA personnel on the amended 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 amended CME reporting component of the Data Management Procedure or other applicable procedure.

By the 5th Progress Report, the CUPA will consistently and correctly report all current and previous CalARP, HMBP, and HWG Program CME information to CERS completely and accurately. The CUPA will provide a statement confirming the entry of all prior CalARP, HMBP, and HWG Program CME information not previously reported to CERS, or previously reported incorrectly to CERS, between January 1, 2019, and December 31, 2021, as consistent and correct.

5. DEFICIENCY:

The UST operating permit and permit conditions, issued under the “Unified Program Consolidated Permit/Registration,” as the Unified Program Facility Permit (UPFP), are inconsistent or more stringent than HSC, Division 20, Chapter 6.7 and CCR, Title 23, Division 3, Chapter 16 (UST Regulations).

Review of UST operating permits finds the following inconsistencies:

- Reference to “...UPCF Forms equivalent to the former SWRCB Form A and Form B...” Unified Program Consolidated Forms (UPCFs) were used prior to January 1, 2013, to collect Unified Program data from regulated businesses. Effective January 1, 2013, the requirement for regulated businesses to report information to CERS replaced the use of UPCFs.

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- Reference to HSC, Chapter 6.75 and CCR, Chapter 18 cannot be cited as the CUPA does not have regulatory authority to implement cleanup of USTs as a Local Oversight Program agency. Therefore, the permit must reference the following citations:
 - UST Regulations (CCR, Title 23, Division 3, Chapter 16, Sections 2610 through 2717.7) and
 - HSC, Division 20, Chapter 6.7, Sections 25280 through 25296 and 25298 through 25299.6.
 - As an alternative to referencing the applicable sections, the permit could also reference the sections that are excluded.

Review of the UST operating permit conditions finds the following inconsistencies and more stringent requirements:

- Reference to HSC, Chapter 6.75 and CCR, Chapter 18 cannot be cited as the CUPA does not have regulatory authority to implement cleanup of USTs as a Local Oversight Program agency. Therefore, the permit must reference the following citations:
 - UST Regulations (CCR, Title 23, Division 3, Chapter 16, Sections 2610 through 2717.7) and
 - HSC, Division 20, Chapter 6.7, Sections 25280 through 25296 and 25298 through 25299.6.
 - As an alternative to referencing the applicable sections, the permit could also reference the sections that are excluded.
- Permit Condition 2 reflects “years” in regard to maintaining documents. The UST Regulations reflect “months.”
- Permit Condition 4 in regard to permit issuance and the requirement for inspection is not consistent with HSC, Chapter 6.75, Section 25285.
 - It is noted that the CUPA will implement Federal regulations, however, the CUPA does not have authority to implement Federal regulations.
- Permit Condition 5, Item 3 references “state forms.” “State forms,” or Unified Program Consolidated Forms (UPCFs) were used prior to January 1, 2013, to collect Unified Program data from regulated businesses. Effective January 1, 2013, the requirement for regulated businesses to report information to CERS replaced the use of UPCFs.
- Permit Condition 6 in regard to renewing a permit is inconsistent with HSC, Section 25285 and is more stringent than HSC and UST Regulations as the CUPA does not have the authority to require a follow-up inspection as a condition of permit issuance.
- Permit Condition 9 in regard to red tags is more stringent than UST Regulations and HSC as the condition reflects the CUPA “shall implement laws governing ‘red tag’...”

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

CITATION:

HSC, Chapter 6.7, Sections 25283(b)(1)(B) and 25297.01(b)
CCR, Title 23, Sections 2712(c) and (i)
[State Water Board]

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CORRECTIVE ACTION:

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

By the 2nd Progress Report, the CUPA will, if necessary, amend the revised UST operating permit and permit conditions template, based on feedback from the State Water Board, and will provide the amended UST operating permit and permit conditions template to CalEPA. If no amendments are necessary, the CUPA will begin to issue the revised UST operating permit and permit conditions template under the “Unified Program Consolidated Permit/Registration,” as the UPPF. The CUPA will provide CalEPA with five UST operating permits issued under the “Unified Program Consolidated Permit/Registration” to UST facilities using the revised UST operating permit and permit conditions template.

By the 3rd Progress Report, if amendments to the revised UST operating permit and permit conditions template were necessary, the CUPA will begin to issue the amended UST operating permit and permit conditions template under the “Unified Program Consolidated Permit/Registration,” as the UPPF. The CUPA will provide CalEPA with five UST operating permits issued under the “Unified Program Consolidated Permit/Registration” to UST facilities using the amended UST operating permit and permit conditions template.

6. DEFICIENCY:

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

As of May 2, 2022, review of HMBPs submitted to CERS by regulated businesses subject to Business Plan reporting requirements finds:

- 321 of 769 (42%) regulated business plan facilities have not submitted a chemical inventory (including site map) or a no-change certification within the last 12 months.
- 328 of 768 (43%) regulated business plan facilities have not submitted emergency response and employee training plans or a no-change certification within the last 12 months.

Note: The CUPA also regulates facilities that are below state thresholds for Business Plan reporting requirements.

CITATION:

HSC, Chapter 6.95, Sections 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 Business Plan reporting requirements have annually submitted an HMBP or a no-change certification in CERS.

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By the 2nd Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a sortable spreadsheet obtained from the CUPA's data management system or CERS, that includes at minimum the following information for each regulated business subject to Business Plan reporting requirements that has not submitted an HMBP or a no-change certification within the last 12 months:

- Facility name;
- CERS ID;
- Follow-up actions including:
 - Recent review, acceptance, and rejection of HMBPs or no-change certifications; and
 - applied enforcement taken by the CUPA to ensure an HMBP or a no-change certification is annually submitted to CERS

By the 4th Progress Report, the CUPA will follow up with each regulated business subject to Business Plan reporting requirements identified in the spreadsheet provided with the 2nd Progress Report, to ensure an HMBP or a no-change certification has been submitted to CERS, or the CUPA will have applied enforcement.

7. DEFICIENCY:

The CUPA is not ensuring submitted HMBPs are thoroughly reviewed and contain all required elements before being accepted in CERS.

As of May 2, 2022, review of HMBPs submitted to CERS by regulated businesses subject to Business Plan reporting requirements finds the following HMBP submittals were accepted with missing or incomplete elements:

- CERSID 10152325: Missing required site map components such as loading areas, internal roads, adjacent streets, storm and sewer drains, evacuation staging areas, and emergency response equipment.
- CERS ID 10170131: Missing required site map components such as loading areas, access & exit points, evacuation staging areas, and emergency response equipment.
- CERS ID 10314349: Missing required site map components such as northern orientation, storm and sewer drains, and emergency response equipment.
- CERS ID 10314355: Missing required site map components such as northern orientation, loading areas, and storm and sewer drains. (Some of the text on the map is illegible.)
- CERS ID 10149713: Missing required site map components such as northern orientation, loading areas, access & exit points, evacuation staging areas, and emergency response equipment.
- CERS ID 10315363: Missing required site map components such as loading areas, storm and sewer drains, access & exit points, and evacuation staging areas.
- CERS ID 10315429: Missing required site map components such as north orientation, loading areas, internal roads, and adjacent streets.

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- CERS ID 10609537: Missing required site map components such as north orientation, internal roads, adjacent streets, storm and sewer drains, evacuation staging areas, and hazardous material handling and storage areas.

CITATION:

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

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure that each HMBP is thoroughly reviewed and contains all required elements before being accepted in CERS. The action plan will include how the CUPA will follow up with rejected HMBP submittals that are not complete.

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 minimum the following information for each regulated business subject to Business Plan reporting requirements that has not submitted an HMBP containing all required components within the last 12 months:

- Facility name;
- CERS ID; and
- Follow-up actions including:
 - Recent review, acceptance, and rejection of HMBPs; and
 - For those businesses that have not complied, the appropriate enforcement taken by the CUPA to ensure a complete HMBP is annually submitted correctly to CERS.

By the 4th Progress Report, the CUPA will follow up with each facility identified above, as necessary, to ensure all required elements are included in the most recent HMBP submittal before being accepted in CERS.

8. DEFICIENCY:

The CUPA is not ensuring that each stationary source in the CalARP Program reviews and updates the Risk Management Plan (RMP) every five years.

Review of CERS information finds 2 of 7 (29%) stationary sources have not updated the RMP in the last five years.

- CERS ID 10315429: The RMP has not been submitted or updated since 1999.
- CERS ID 10170131: On August 9, 2021, a minor violation was cited for not providing a current RMP to the CUPA. An RMP was later provided to the CUPA, however, the RMP was last updated in 2013.

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DEFICIENCIES REQUIRING CORRECTION

CITATION:

HSC, Chapter 6.95, Section 25533(d)
CCR, Title 19, Sections 2745.10(a)(1) and 2780.2
[CalEPA]

CORRECTIVE ACTION:

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure that each stationary source in the CalARP Program has reviewed and uploaded the RMP to CERS every five years. The CUPA will provide CalEPA with a sortable spreadsheet that includes, at minimum, each stationary source, and the date of the last RMP review and update for each stationary source listed.

By the 2nd Progress Report, the CUPA will provide a statement to CalEPA confirming that each stationary source has an updated RMP.

9. DEFICIENCY:

The annual CalARP performance audit report has missing and incomplete required elements.

The following elements are missing from the annual CalARP performance audit report for FYs 2018/2019, 2019/2020, and 2020/2021:

- A listing of stationary sources which have been inspected;
- A listing of stationary sources which have received public comments on the RMP; and
- A summary of enforcement actions initiated by the CUPA identifying each stationary source.

The following elements of the annual CalARP performance audit report are incomplete for FYs 2018/2019, 2019/2020, and 2020/2021:

- A list of new or modified stationary sources
 - A statement certifying no stationary sources have been added or modified is included, however the referenced dates do not align with the FY report period.
 - FY 2018/2019 report states, “No additional stationary sources have been added or proposed during FY 2017.”
 - FY 2019/2020 report states, “No modifications done to any of the *CalARP* facilities for Fiscal Year 2018. As stated in last year’s self-audit, the last modification done was by Columbus Foods on 3190 Corporate Place in FY 2015” and “No additional stationary sources have been added or proposed during FY 2017.”
 - FY 2020/2021 report states, “No modifications done to any of the *CalARP* facilities for Fiscal Year 2018. As stated in last year’s self-audit, the last modification done was by Columbus Foods on 3190 Corporate Place in FY 2015” and “No additional stationary sources have been added or proposed during FY 2017.”

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- A summary of the personnel and personnel years necessary to directly implement, administer, and operate the CalARP program.
 - A summary is provided describing the personnel dedicated to implement the CalARP program, however a summary of personnel years necessary to implement the program is not provided.

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 completely includes all required elements.

10. DEFICIENCY: CORRECTED DURING EVALUATION

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 2018/2019
 - The 1st Fiscal Quarter report was due on October 31, 2018, and was submitted on April 16, 2019.
 - The 2nd Fiscal Quarter report was due on January 31, 2019, and was submitted on April 16, 2019.
- FY 2020/2021
 - The 3rd Fiscal Quarter report was due on April 30, 2020, and was submitted on November 2, 2021.
 - The 4th Fiscal Quarter report was due on July 31, 2021, and was submitted on November 2, 2021.

Note: All quarterly Surcharge Transmittal Reports were received by the required due date for FY 2019/2020.

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/6/2022/01/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.

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DEFICIENCIES REQUIRING CORRECTION

CITATION:

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

CORRECTIVE ACTION: COMPLETED

The CUPA submitted the 4th Fiscal Quarter Report for FY 2021/2022 to CalEPA on July 26, 2022, and the 1st Fiscal Quarter Report for FY 2022/2023 on October 19, 2022, which was by the required due date. This deficiency is considered corrected. No further action is required.

The CUPA will continue to submit Quarterly Surcharge Transmittal Reports to CalEPA by the required due date.

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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:

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

Review of the UST Facility/Tank Data Download report obtained from CERS on March 15, 2022, finds UST monitoring and construction information is incorrect as follows:

- 13 of 172 (8%) USTs have double-wall pressurized pipe identified without either mechanical or electronic line leak detectors.
- 15 of 229 (7%) USTs with Striker Plate/Bottom Protector listed as "no."
- 6 of 27 (22%) USTs identified as being constructed post July 1, 2004, conducting periodic Secondary Containment Testing.

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

Note: The following CERS Frequently Asked Questions (FAQs) may be referenced:

- "General Reporting Requirements for USTs,"
- "When to Issue a UST Operating Permit,"
- "Common CERS Reporting Errors,"
- "Setting Accepted Submittal Status," and
- "Which Forms Require Uploading to CERS."

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

- "When to Review Underground Storage Tank Records," dated November 29, 2016.

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

CITATION:

HSC, Chapter 6.7, Sections 25286 and 25288(a)
CCR, Title 23, Sections 2632(d)(1), 2634(d)(2), 2641(g) and (h) and 2711(d)
[State Water Board]

RESOLUTION:

By the 1st Progress Report, the CUPA will review, and revise as necessary, the Data Management Procedure, or other applicable procedure, to ensure the establishment of a process for UST inspection staff to review CERS UST submittal information for accuracy and completeness regarding monitoring and construction requirements based on the UST installation

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date. The CUPA will provide CalEPA with the revised Data Management Procedure, or other applicable procedure. If no revisions are necessary, the CUPA will train UST inspection staff on the Data Management Procedure, or other applicable procedure.

By the 2nd Progress Report, if amendments to the revised Data Management Procedure, or other applicable procedure were necessary based on feedback from the State Water Board, the CUPA will provide CalEPA with the amended Data Management Procedure, or other applicable procedure. If no amendments are necessary, the CUPA will train UST inspection staff on the revised Data Management Procedure, or other applicable procedure. Once training is complete, the CUPA will implement the revised Data Management Procedure.

With respect to submittals already accepted in CERS, the CUPA will review the next UST submittal, provided no later than the next annual UST facility compliance inspection, to ensure information is accurate and complete regarding monitoring and construction requirements based on the UST installation date before being accepted.

2. INCIDENTAL FINDING:

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 in the following instances:

- Violation for exceedance of authorized accumulation time incorrectly cited as a minor violation. Maximum accumulation time may not be exceeded without a hazardous waste storage permit or grant of authorization from DTSC. An economic benefit is gained by not disposing of waste within the authorized time. This does not meet the definition of minor violation as defined in HSC, Section 25404(a)(3).
 - CERS ID 10315234: a Small Quantity Generator (SGQ) facility, inspection dated April 13, 2018
 - CERS ID 10315729: a Large Quantity Generator (LQG) facility, inspection dated October 6, 2017
 - CERS ID 10314208: inspection dated October 3, 2017
 - CERS ID 10157759: inspection dated August 14, 2017
 - CERS ID 10123606: inspection dated August 19, 2021
 - CERS ID 10170037: inspection dated November 17, 2021
 - CERS ID 10314208: inspection dated October 19, 2021
 - CERS ID 10315474: inspection dated November 22, 2019
- Violation for failure to provide or conduct training for employees incorrectly cited as a minor violation. Since training was not provided, employees are not familiar with hazardous waste management and handling, nor how to respond to emergencies. There may have been an economic benefit to the facility by not providing training. This does not meet the definition of minor violation as defined in HSC, Section 25404 (a)(3).
 - CERS ID 10314895: a LQG, inspection dated April 11, 2018
 - CERS ID 10157755: inspection dated October 14, 2017

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

- CERS ID 10315663: a LQG, inspection dated October 4, 2016
- CERS ID 10174459: a LQG, inspection dated July 7, 2016
- Violation for failure to obtain tank integrity assessment incorrectly cited as a minor violation during an LQG inspection. LQGs are required to obtain a tank integrity assessment to be completed and certified by a professional engineer in accordance with CCR, Title 22, Section 66265.192. There is an economic benefit to the facility in not obtaining a tank integrity assessment by a professional engineer. This does not meet the definition of minor violation as defined in HSC, Section 25404 (a)(3).
 - CERS ID 10314823: inspection dated June 19, 2017
 - CERS ID 10152217: inspection dated December 5, 2016
 - CERS ID 10315759: a LQG and/or PBR facility, inspection dated October 18, 2016

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 as the CUPA successfully completed the required training and had improved in properly classifying Class I and Class II violations. However, upon closing the 2019 CUPA Performance Evaluation, 4 of 11 (36%) 90/180-day accumulation violations were still incorrectly classified as minor.

CITATION:

HSC, Chapter 6.5, Sections 25110.8.5 and 25117.6

CCR, Title 22, Sections 66260.10, 66262.34(a)(4), 66262.34(d)(2) and 66265.16
[DTSC]

RESOLUTION:

By the 1st Progress Report, the CUPA will train personnel 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 described 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 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>
 - Additional violation classification classes are available in the video library on the CalCUPA Forum Board YouTube website at:
<http://www.youtube.com/user/orangetreeweb/videos>
- 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>
 - This document provides examples of what is considered minor versus non-minor violations.

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INCIDENTAL FINDINGS REQUIRING RESOLUTION

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

Note: The following additional HWG inspection, accumulation and generator requirement training resources are available to assist in training CUPA inspectors:

- Advanced Hazardous Waste Inspector Training Video 2016 (1 of 2)
<https://www.youtube.com/watch?v=lgN3TJftSUM>
- Advanced Hazardous Waste Inspector Training Video 2012 (5 of 7): Tanks and Sumps
<https://www.youtube.com/watch?v=oCrI3MvTd8M>
- Generator Requirements Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/06/HWM_FS_Generator_Requirements.pdf
- Accumulation Time Fact Sheet
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_OAD_Accumulation.pdf
- Universal Waste
https://dtsc.ca.gov/wp-content/uploads/sites/31/2016/01/UW_Factsheet1.pdf
- Managing Used Oil Filters for Generators
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/RAG_Used-Oil-Filters_Generators1.pdf
- Management of Spent Lead Acid Batteries
https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/02/FS_DutyOfficer_LeadAcidBatteries1.pdf
- Generator Summary Chart
<https://dtsc.ca.gov/wp-content/uploads/sites/31/2018/05/California-Generator-Chart.pdf> and
https://www.acgov.org/forms/aceh/Generator_Requirements_Summary_Chart.pdf

3. INCIDENTAL FINDING: RESOLVED DURING EVALUATION

The CalARP Dispute Resolution Process is missing a required element.

Review of the CalARP Dispute Resolution Process finds the following element is missing:

- Procedures that require the CUPA to render a written decision within 120 days after the owner or operator of a stationary source initiates the dispute resolution process.

CITATION:

CCR, Title 19, Section 2780.1(a)(4)
[CalEPA]

RESOLUTION: COMPLETED

During the evaluation, the CUPA provided a revised CalARP Dispute Resolution Process containing all required elements. This incidental finding is considered resolved. No further action is required.

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

1. OBSERVATION:

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

- Page 7 of 202 – the inspection frequency table states the mandated frequency for APSA is “every 3 years.” Excluding certain tank facilities that are conditionally exempt from preparing an SPCC Plan, the mandated frequency of at least once every three years applies to APSA tank facilities with 10,000 gallons or more of petroleum.
- Page 19 of 202 – Subsection I:
 - “Inspection Component,” incorrectly states the following information regarding Conditionally Exempt Small Quantity Generator (CESQG) universal waste:
 - “As a policy, the HMO shall:
 - (1) Investigate complaints regarding illegal hazardous waste activities involving CESQGs and small quantity handlers of Universal Waste.”California does not have a definition for small or large quantity handlers of universal waste. Facilities that generate or accept universal waste from offsite sources are defined as “Universal Waste Handlers” regardless of the amount of universal waste generated or received.
 - The letter to CUPAs from the CUPA Forum Board, dated May 8, 2001, referenced in this section contains outdated information regarding Silver-only Generators, Conditionally Exempt Small Quantity Universal Waste Handlers (CESQUW) and Universal Waste Handlers.
 - DTSC issued a letter dated October 11, 2021, with guidance to CUPAs on how to regulate Silver-only Generators and CESQUWs. The I&E Plan should be updated to be consistent with the definition of “Universal Waste Handlers” in CCR, Title 22 and the information reflected in the October 11, 2021, DTSC letter to CUPAs regarding Silver-only Generators. DTSC can provide the CUPA with the letter upon request.
- Page 32 of 202 – item 8 includes reference to the 2016 California Fire Code and 2016 Hayward Fire Code. Update with the current fire code, including the Hayward Fire Code, and ensure any referenced fire code sections are applicable.
- Page 53 of 202 – Include the APSA acronym under the “Acronyms” information.
- Page 55 of 202 – the reference to “CCR Section 15200” is outdated as it still has ‘AST Program’ under subsection (a)(2)(F), which is now ‘APSA Program’ consistent with the statute.

RECOMMENDATION:

Update the I&E Plan as indicated above.

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2. OBSERVATION:

Overall implementation of the HWG Program, including policies and procedures, CERS information, facility file information, information provided by the CUPA and Self-Audit Reports between January 1, 2019, and December 31, 2021, is summarized below:

- There are 561 regulated HWG facilities, including 32 Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) facilities. There are 10 Tiered Permitted (TP) facilities.
- The CUPA inspected 92 HWG facilities and performed 126 Routine or Other HWG inspections, of which 81 (64%) had no violations cited and 45 (36%) had at least one violation cited. The State average for HWG routine inspections performed having at least one violation cited is 40%.
 - There is a duplicate CE inspection entered in CERS for CERS ID 10199941 on October 7, 2019.
 - In the 45 inspections performed with at least one violation cited, 129 total violations were issued, consisting of:
 - 5 Class I violations,
 - 57 Class II violations, and
 - 67 minor violations
 - The CUPA has ensured RTC for 38 of 129 (29%) violations cited.
- CERS does not reflect enforcement actions for hazardous waste related violations, and as a result, CERS reflects a cumulative total penalty amount of \$0.
- Inspection reports generally contain detailed comments that note the factual basis of cited violations and indicate whether consent to inspect was requested prior to the inspection. Some inspection reports reviewed contained less detailed comments than others and, in some instances, violations cited are not present in the corresponding “List of Violations” attachment.
- There is not enough space on the “Notice to Comply” document for including comments to note when a facility has multiple violations. Some of the “Corrective Action” language on the “Notice to Comply” document does not clearly describe how the facility is to provide corrective action documentation to the CUPA, or to whom at the CUPA the documentation should be provided.
- Violation comments in CERS should reflect the inspectors’ observations and factual basis for the cited violation. Some violation comments observed only list corrective actions, while others list observations that do not match the violation cited.

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

RECOMMENDATION:

Continue with the three-year HWG inspection frequency and applied enforcement efforts in addition to generating inspection reports with detailed comments for describing the factual basis for cited violations. Ensure that detailed factual basis of each violation is included in inspection reports and in the CME information transferred to CERS, to support any enforcement efforts. All violations should be documented and supported by evidence that address the elements for the

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violation. A lack of factual basis for each violation may lead to a deficiency or an incidental finding in future evaluations.

Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply appropriate enforcement, per the I&E Plan, when facilities do not RTC. Review the “Notice to Comply” document, specifically the “Corrective Action” language and the corresponding “List of Violations.” Modifying the corrective action language to be more descriptive and robust in detail could more clearly convey to facilities how to complete the indicated corrective actions, which would further ensure facilities obtaining RTC in a timely manner.

3. OBSERVATION:

Review of accepted CERS UST submittals finds 20 single-walled USTs among 7 UST facilities, and 4 USTs with single-walled pressurized product pipe at 1 UST facility, which require permanent closure by December 31, 2025, in accordance with HSC, Chapter 6.7, Section 25292.05. Below are examples:

- CERS ID 10314829 (10314829-001, 002, 003, 005, 006)
- CERS ID 10315108 (10315108-001, 002, 003)
- CERS ID 10315399 (10315399-001, 002, 003)
- CERS ID 10315615 (10315615-001, 002, 003)
- CERS ID 10398016 (10398016-001)

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

RECOMMENDATION:

Continue to provide written and verbal reminders to all applicable UST facility owners or operators regarding the December 31, 2025, requirements for permanent closure of single-walled USTs. Consider providing written notification of the requirement to all applicable UST facility owners or operators. The written notification should inform UST 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 UST 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.

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4. OBSERVATION:

The following is a summary of inspection and violation information based on review of facility files and CERS CME information for the HMBP and CalARP Programs between January 1, 2019, and December 31, 2021.

- HMBP Program:
 - January 1, 2019, through December 31, 2019
 - The CUPA inspected 149 facilities, of which 125 (84%) had no violations cited and 24 (16%) had at least one violation cited.
 - In the 24 inspections performed with at least one violation cited, 82 total violations were issued, consisting of:
 - 2 Class I violations,
 - 27 Class II violations, and
 - 53 minor violations
 - The CUPA has ensured RTC for 37 of 82 (45%) violations cited.
 - January 1, 2020, through December 31, 2020
 - The CUPA inspected 4 facilities, of which 3 (75%) had no violations cited and 1 (25%) had at least one violation cited.
 - In the 1 inspection performed with at least one violation cited, 7 total violations were issued, consisting of:
 - 5 Class II violations
 - 2 minor violations
 - The CUPA has ensured RTC for 0 of 7 (0%) violations cited.
 - January 1, 2021, through December 31, 2021
 - The CUPA inspected 58 facilities, of which 39 (67%) had no violations cited and 19 (33%) had at least one violation cited.
 - In the 19 inspections performed with at least one violation cited, 29 total violations were issued, consisting of:
 - 8 Class II violations
 - 21 minor violations
 - The CUPA has ensured RTC for 1 of 29 (3%) violations cited.
- CalARP Program:
 - January 1, 2019, through December 31, 2019
 - The CUPA inspected 0 facilities.
 - January 1, 2020, through December 31, 2020
 - The CUPA inspected 0 facilities.

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- January 1, 2021, through December 31, 2021
 - The CUPA inspected 7 facilities, of which 7 (100%) had at least one violation cited.
 - In the 7 inspections performed with at least one violation cited, 10 total violations were issued, consisting of:
 - 0 Class I violations
 - 0 Class II violations
 - 10 Minor violations
 - The CUPA has ensured RTC for 2 of 10 (20%) violations cited.

RECOMMENDATION:

Maintain the three-year inspection frequency for all HMBP facilities and all 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 identified violations. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply appropriate enforcement per the I&E Plan when facilities do not obtain RTC.

5. OBSERVATION:

The CERS reporting requirement is currently set as “APSA Applicable” for 59 APSA tank facilities. The CUPA’s data management system identifies 51 APSA tank facilities.

- 50 APSA tank facilities are identified in both CERS and the CUPA’s data management system.
- 9 APSA 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 data management system appropriately.
- One facility identified as an APSA tank facility in the CUPA’s data management system is not identified in CERS as an APSA facility. The CUPA should determine if the facility really is an APSA facility.
 - If the facility is not an APSA facility, the CUPA should not identify the facility as an APSA tank facility in the CUPA’s data management system.
 - If the facility is an APSA facility, the CUPA should update the CERS APSA reporting requirement for the facility 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.

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6. OBSERVATION:

The CUPA's APSA website (<https://www.hayward-ca.gov/fire-department/office-fire-marshal/hazardous-materials/certified-unified-program-agency>) contains various resources for the public and regulated community; however, it contains program information that is outdated, incorrect, or may benefit from improvement.

- The statement, "The SPCC plan is designed to prevent discharges of petroleum and petroleum products from reaching navigable waters," would benefit by editing the text to incorporate all oils for consistency with the Federal SPCC rule. For example, "The SPCC Plan is designed to prevent discharges of oil, including petroleum, from reaching navigable waters."
- The second paragraph under the APSA section discusses two types of tank facilities that are regulated under APSA; however, it does not discuss APSA tank facilities subject to the SPCC rule.
- The link to the Tier II Qualified Facility SPCC Plan template (https://osfm.fire.ca.gov/media/10516/calfire-osfm_tierii_spcc_plantemplate_09-2018-accessible.pdf) leads to an outdated template. This template was last revised in May 2021 (https://osfm.fire.ca.gov/media/13bddwhw/calfire-osfm_tierii_spcc_plantemplate_05-2021-accessible.pdf).
- The link to the OSFM website leads to an outdated link utilized prior to accessibility requirements being in place for state government websites. The correct link should point to the OSFM APSA Program website: <https://osfm.fire.ca.gov/divisions/pipeline-safety-and-cupa/certified-unified-program-agency-cupa/aboveground-petroleum-storage-act/>.
- The carbon dioxide guidelines under the additional resources section (<https://www.hayward-ca.gov/sites/default/files/fire/CARBON%20DIOXIDE%20GUIDELINES.pdf>) references the 2013 edition of the California Fire Code. As an alternative, the edition year can be removed from the reference as the fire code is adopted regularly.
- The chemical inventory packet under the additional resources section (<https://www.hayward-ca.gov/sites/default/files/fire/CHEMICAL%20INVENTORY%20PACKET.pdf>) references the outdated Uniform Fire Code and 2013 California Fire Code.

RECOMMENDATION:

Update the CUPA's APSA website as indicated above.

7. OBSERVATION:

The CUPA is not consistently ensuring APSA tank facilities submit a complete HMBP when an HMBP is provided to CERS in lieu of a tank facility statement include site maps that contain all applicable required elements.

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Review of HMBPs submitted to CERS by APSA tank facilities in lieu of a tank facility statement indicates the CUPA accepted the following 5 of 12 (42%) recent HMBP submittals that were missing required site map elements:

- CERS ID 10709500: site map is missing emergency shutoff(s), evacuation staging area and emergency response equipment
- CERS ID 10837366: site map is missing emergency response equipment and evacuation staging area
- CERS IDs 10170131, 10709500, and 10837366: site map is missing evacuation staging area

RECOMMENDATION:

Ensure future HMBP submittals provided to CERS in lieu of a tank facility statement are thoroughly reviewed and contain all applicable required elements before being accepted.

8. OBSERVATION:

Some APSA tank facilities submitted an HMBP to CERS in lieu of a tank facility statement using the 2011 consolidated emergency response and training plans template, which contains obsolete information. One tank facility used the 2010 emergency response and training plans Unidocs template requiring the facility to attach additional required information, such as earthquake vulnerability and hazard mitigation/prevention/abatement.

The 2022 version of the consolidated emergency response and training plans template is the current template.

RECOMMENDATION:

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

9. OBSERVATION:

The Self-Audit Reports for FYs 2018/2019 and 2020/2021 reference the APSA Program as the SPCC Program. Not all APSA tank facilities are required to prepare and implement an SPCC Plan.

RECOMMENDATION:

Ensure future Self-Audit Reports refer to the APSA Program as the APSA Program.

10. OBSERVATION:

The CUPA's APSA inspection checklists are comprehensive and addresses four different versions based on whether the SPCC Plan is prepared by the facility, or whether the facility is conditionally exempt from preparing an SPCC Plan under APSA. The inspection checklists

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reviewed from facility files, the inspection checklist templates provided by the CUPA, and the checklists included the I&E Plan, all had revision dates of February 4, 2015.

The Unified Program Violation Library (located within CERS) is reviewed and revised annually for consistency with statutes and regulations. The current Unified Program Violation Library contains 99 APSA violations, consisting of 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. Since 2015, certain Unified Program Violation Library violations have been revised, removed, or consolidated with other violations.

RECOMMENDATION:

Review and revise, as necessary, each of the four APSA facility inspection checklists to ensure each reflects the current Unified Program Violation Library for APSA Program violations. 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 for the inspection is applicable to the type of APSA facility being inspected.

11. OBSERVATION:

The information provided below summarizes a comparison of the regulated community and the necessary and reasonable resources for implementation of the Unified Program upon certification with the current regulated community and the current resources available to the CUPA for implementation.

Number of regulated facilities for each program element:

- *Original Certification Source: Hayward City Fire Department 1995 CUPA Application*
- *Current CUPA Evaluation Sources: CERS "Summary Regulated Facilities by Unified Program Element Report" & CERS "UST Inspection Summary Report (Report 6)", both generated on June 10, 2022*

- Total Number of Regulated Businesses and Facilities:
 - Upon Certification in 1995: **841**
 - Current CUPA Evaluation: **1,188**
 - An increase of **347** facilities

- Total Number of Hazardous Materials Release Response Plan and Inventory (Business Plan) Regulated Businesses and Facilities:
 - Upon Certification in 1995: **770**
 - Current CUPA Evaluation: **1,081**
 - An increase of **311** facilities

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- Total Number of Regulated Underground Storage Tank (UST) Facilities:
 - Upon Certification in 1995: **140**
 - Current CUPA Evaluation: **87**
 - A decrease of **53** facilities

- Total Number of Regulated USTs:
 - Upon Certification in 1995: **418**
 - Current CUPA Evaluation: **262**
 - A decrease of **156** USTs

- Total Number of Regulated Hazardous Waste Generator (HWG) Facilities:
 - Upon Certification in 1995: **384**
 - Current CUPA Evaluation: **576**
 - An increase of **192** facilities

- Total Number of Regulated Household Hazardous Waste (HHW) Facilities:
 - Household Hazardous Waste Facilities were not regulated under the Unified Program upon certification in 1995
 - Current CUPA Evaluation: **1**

- Total Number of Regulated Tiered Permitting Facilities (Permit By Rule, Conditionally Authorized, Conditionally Exempt):
 - Upon Certification in 1995: **50**
 - Current CUPA Evaluation: **11**
 - A decrease of **39** facilities

- Total Number of Regulated Resource Conservation and Recovery Act (RCRA) Large Quantity Generator (LQG) Facilities:
 - RCRA LQG Facilities were not regulated under the Unified Program upon certification in 1995
 - Current CUPA Evaluation: **23**

- Total Number of Regulated Risk Management Prevention Plan (RMPP) or California Accidental Release Prevention (CalARP) Program Facilities:
 - Upon Certification in 1985: **42**
 - Current CUPA Evaluation: **10**
 - A decrease of **32** facilities

- Total Number of Regulated Aboveground Petroleum Storage Act (APSA) Tank Facilities:
 - Upon Certification in 1995: **4**
 - The 4 APSA facilities are listed as SPCC facilities in the application.
 - Current CUPA Evaluation: **60**
 - An increase of **56** facilities

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Since the original application for certification was submitted in 1995, the CUPA has seen fluctuations in the number of regulated facilities in all Unified Program elements. Overall, the total number of regulated facilities increased by 347 (or 41%). The most significant increase in the number of regulated facilities was seen with those regulated under the Business Plan Program, where the number of regulated facilities increased by 311 (or 40%). The most significant decrease in the number of regulated facilities was seen in the UST Program, where the number of regulated facilities decreased by 53 (or 38%) and the number of regulated USTs decreased by 156 (or 37%). Additionally, the CUPA gained 23 RCRA facilities and 1 HHW facility, these were not required to be regulated during the time of certification.

An expansion of responsibilities in the HMBP, HWG, and CalARP programs has occurred, increasing the workload undertaken by the CUPA to further implement regulatory oversight of each of these programs. Also, the management of compliance, monitoring, inspection, and enforcement information transitioned from the use of Unified Program Consolidated Forms to the implementation of electronic data reporting through local data management systems and CERS.

The information below is a comparison of the overall full-time equivalent (FTE) of CUPA personnel allocated to the implementation of the Unified Program upon certification of the CUPA with present-day circumstance and the degree to which allocated inspection and supervisory/management staff has increased or decreased. The information is sourced from the Hayward City Fire Department 1995 CUPA Application and recent information provided by the CUPA.

CUPA Personnel:

- Inspection and other Staff
 - Upon Certification in 1995:
 - 3.66 FTE
 - Includes 0.5 FTE Fire Marshal position, 0.5 Environmental Specialist FTE position, 1.66 FTE Investigator positions, and 1.0 FTE Clerical Staff position
 - Currently:
 - 4.0 FTE
 - Includes 3.0 FTE Environmental Specialist positions, 1.0 Hazardous Materials Sustainability Technician position
- Supervisory and Management Staff
 - Upon Certification in 1995:
 - 1 Staff at a Part-Time Equivalent = 0.5 FTE
 - Currently:
 - 1 Staff at a Full-Time Equivalent = 1.0 FTE

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RECOMMENDATION:

Despite a cumulative increase in the number of regulated facilities, the CUPAs staffing resources have remained relatively the same. In order to adequately apply each aspect of inspection, compliance, monitoring and enforcement for all Unified Program activities, the CUPA should acquire additional positions and prioritize the hiring and training of additional staff. Once the CUPA has 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 improve.
