

November 14, 2024

Chad Van Meeteren  
Fire Chief  
Santa Fe Springs City Fire Department  
11300 Greenstone Avenue  
Santa Fe Springs, California 90670-4619

Dear Mr. Van Meeteren:

During January 2024, through September 2024, CalEPA and the Unified Program state agencies conducted a performance evaluation of the Santa Fe Springs City Fire Department Certified Unified Program Agency (CUPA). The CUPA evaluation included a remote assessment of administrative documentation, review of regulated facility file documentation, California Environmental Reporting System information, and oversight inspections.

Upon completion of the evaluation, a preliminary Summary of Findings report was developed to identify various findings: program deficiencies with corrective actions, incidental findings with resolutions and program observations and recommendations. The report also includes 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 resolution of incidental findings identified in the final Summary of Findings report, the CUPA must submit an Evaluation Progress Report approximately 60 days from the date of this letter. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response, until all deficiencies and incidental findings identified have been acknowledged as corrected or resolved by each issuing state agency. An Evaluation Progress Report template will be provided by the CalEPA Team Lead. Each Evaluation Progress Report must be submitted to the CalEPA Team Lead, Jessica Snow, via email at [Jessica.Snow@calepa.ca.gov](mailto:Jessica.Snow@calepa.ca.gov), or uploaded to the established SharePoint website.

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, at [Melinda.blum@calepa.ca.gov](mailto:Melinda.blum@calepa.ca.gov). If you would like to have specific comments remain anonymous, please indicate so on the survey.

If you have any questions or need further assistance, please contact Melinda Blum at [Melinda.Blum@calepa.ca.gov](mailto:Melinda.Blum@calepa.ca.gov).

Sincerely,



Jason Boetzer  
Deputy Secretary  
Local Program Coordination and Emergency Response

Enclosure

cc sent via email:

Michael Kozicki  
Assistant Fire Chief  
Santa Fe Springs City Fire Department  
11300 Greenstone Avenue  
Santa Fe Springs, California 90670-4619

Eric Scott  
Environmental Programs Manager  
Santa Fe Springs City Fire Department  
11300 Greenstone Avenue  
Santa Fe Springs, California 90670-4619

Tom Henderson  
UST Leak Prevention Unit and  
Office of Tank Tester Licensing Manager  
State Water Resources Control Board

Julie Pettijohn  
Environmental Program Manager  
CUPA Enforcement Branch  
Department of Toxic Substances Control

Ryan Miya, Ph.D.  
Senior Environmental Scientist, Supervisor  
Department of Toxic Substances Control

cc sent via email:

Jennifer Lorenzo  
Senior Environmental Scientist, Supervisor  
CAL FIRE - Office of the State Fire Marshal

Denise Villanueva  
Environmental Scientist  
CAL FIRE - Office of the State Fire Marshal

Pheleep Sidhom  
Environmental Scientist  
Department of Toxic Substances Control

Kaitlin Cottrell  
Environmental Scientist  
State Water Resources Control Board

John Paine  
Unified Program Manager  
California Environmental Protection Agency

John Elkins  
Environmental Program Manager  
California Environmental Protection Agency

Elizabeth Brega  
Senior Environmental Scientist, Supervisor  
California Environmental Protection Agency

Melinda Blum  
Senior Environmental Scientist, Supervisor  
California Environmental Protection Agency

Alexa Kostrikin, REHS  
Environmental Scientist  
California Environmental Protection Agency

Jessica Snow  
Unified Program Evaluation Team Lead  
California Environmental Protection Agency

## UNIFIED PROGRAM PERFORMANCE EVALUATION FINAL SUMMARY OF FINDINGS REPORT

**CUPA:** Santa Fe Springs City Fire Department

**2024 Evaluation Assessment:** January 2024 through September 2024

### Evaluation Team Members:

- **CalEPA Team Lead:** Jessica Snow
- **DTSC:** Pheleep Sidhom
- **CalEPA:** Alexa Kostrikin
- **State Water Board:** Kaitlin Cottrell
- **CAL FIRE-OSFM:** 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 improvement needed.

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

**Jessica Snow**  
CalEPA Unified Program  
Phone: (916) 460-2394  
E-mail: [jessica.snow@calepa.ca.gov](mailto:jessica.snow@calepa.ca.gov)

The CUPA is required to submit the first Evaluation Progress Report 60 days from receipt of the Final Summary of Findings Report. Thereafter, the CUPA will submit each subsequent Evaluation Progress Report to CalEPA in accordance with the specified date provided in the Evaluation Progress Report response. For each identified deficiency and incidental finding, the CUPA must complete the corrective action and resolution as indicated to demonstrate sufficient implementation of the Unified Program as required by regulation or statute. The Evaluation Progress Report process will continue until all deficiencies and incidental findings have been acknowledged as corrected or resolved by each issuing Unified Program state agency.

Each Evaluation Progress Report must be submitted to the CalEPA Team Lead via email at [jessica.snow@calepa.ca.gov](mailto:jessica.snow@calepa.ca.gov), or uploaded to the established SharePoint website. A narrative stating the status of correcting each deficiency and resolving each incidental finding identified in this Final Summary of Findings Report, and any applicable supporting documentation must be included in each Evaluation Progress Report.

The submittal date for the 1<sup>st</sup> Evaluation Progress Report is **January 17, 2025**.

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**ACCOMPLISHMENTS, CHALLENGES, AND EXAMPLES OF OUTSTANDING IMPLEMENTATION**

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.

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**1. HAZARDOUS WASTE GENERATOR (HWG) PROGRAM IMPLEMENTATION:**

Since the 2020 CUPA Performance Evaluation, the CUPA has successfully ensured over 90% of the facilities regulated under the HWG Program have been inspected once every three years, amidst the hindrance, restrictions, and disruptions resulting from the Coronavirus (COVID-19). The CUPA is encouraged to continue meeting the HWG Program inspection frequencies established in the Inspection and Enforcement (I&E) Plan.

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**2. ABOVEGROUND PETROLEUM STORAGE ACT (APSA) PROGRAM INSPECTIONS, ADVISORY COMMITTEE AND TECHNICAL ADVISORY GROUP (TAG) PARTICIPATION:**

The CUPA met the mandated triennial inspection frequency for APSA tank facilities storing 10,000 gallons or more of petroleum. The CUPA has also met the triennial inspection frequency for APSA tank facilities storing between 1,320 gallons and 9,999 gallons of petroleum in accordance with the inspection frequency established in the I&E Plan.

The CUPA manager is an active member of the APSA Advisory Committee, which has been working on APSA Program rulemaking. In addition, CUPA staff regularly attend the APSA TAG meetings.

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**3. ANNUAL UNIFIED PROGRAM TRAINING CONFERENCE CHAIR FOR THE UNDERGROUND STORAGE TANK (UST) PROGRAM TRACK:**

Since 2023, the CUPA manager has participated in the planning and coordination of the Annual Unified Program Training Conference as the UST Program Co-Chair. Efforts of the UST Program Chair include reviewing and approving session abstracts to be presented.

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**4. HAZARDOUS WASTE TRAINING FOR THE REGULATED COMMUNITY:**

The CUPA offers a free Hazardous Waste training class for small businesses that have Hazardous Waste Permits. The training is offered in both English and Spanish. Small businesses are provided with knowledge on Hazardous Waste regulations and requirements, as well as a discount on annual permit fees.

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**DEFICIENCIES REQUIRING CORRECTION**

A program deficiency is considered a major deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a systemic problem in implementation of one or more program elements, a deficiency is likely to have an impact on the safety and protection of human health and the environment. Program deficiencies identify specific aspects regarding implementation of the Unified Program.

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**1. DEFICIENCY:**

The CUPA is not ensuring all 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 the California Environmental Reporting System (CERS) between February 15, 2023, and April 16, 2024, by businesses subject to Business Plan reporting requirements finds:

- 425 of 1,105 (39%) Business Plan facilities have not annually submitted a chemical inventory (including site map) or a no-change certification.
- 432 of 1,101 (39%) Business Plan facilities have not annually submitted emergency response and employee training plans or a no-change certification.

**CITATION:**

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

**CORRECTIVE ACTION:**

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure all businesses subject to Business Plan reporting requirements annually submit an HMBP or a no-change certification to CERS. The action plan, at minimum, will include steps to how the CUPA will follow up with facilities that have not annually submitted an HMBP or a no change certification to CERS.

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 business subject to Business Plan reporting requirements that has not annually submitted an HMBP or a no-change certification to CERS:

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

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By the 4th Progress Report, the CUPA will ensure each business subject to Business Plan reporting requirements has annually submitted an HMBP or a no change certification to CERS, or the CUPA will have applied enforcement.

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**2. DEFICIENCY:**

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

Review of inspection, violation and enforcement information, also known as compliance, monitoring and enforcement (CME) information in CERS between January 1, 2021, and December 31, 2023, finds there is no documented RTC for the following HMBP violations:

- 35 of 231 (15%) cited between January 1, 2021, and December 31, 2021
- 78 of 362 (22%) cited between January 1, 2022, and December 31, 2022
- 154 of 445 (35%) cited between January 1, 2023, and December 31, 2023

**CITATION:**

HSC, Chapter 6.95, Sections 25508(a)(4) and 25533(d)  
California Code of Regulations (CCR), Title 27, Sections 15185(a) and (c) and 15200(a) and (e)  
[CalEPA]

**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,
- document follow-up actions applied 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 data management system or CERS that includes at minimum the following information for each HMBP facility with an open violation (no RTC) cited between January 1, 2021, and December 31, 2023:

- 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 any applied enforcement or follow-up activity to ensure the facility obtains RTC.

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

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By the 2nd Progress Report, if amendments to the revised I&E Plan or other applicable procedure are necessary based on feedback from 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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**INCIDENTAL FINDINGS REQUIRING RESOLUTION**

An incidental finding is considered a minor deviation in implementation of the Unified Program from the expected standards set forth in statute or regulation. Commonly identified as a minor issue that may be problematic in implementation of one or more program elements, an incidental finding is not likely to have an impact on the safety and protection of human health and the environment.

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**1. INCIDENTAL FINDING:**

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

Review of CME information, in CERS and information from the CUPA's data management system between January 1, 2021, and December 31, 2023, finds there is no documented RTC for the following HWG Program violations:

- 199 of 790 (25%)

**CITATION:**

HSC, Chapter 6.5, Sections 25110.8.5, 25117.6, and 25187.8(b) and (g)

HSC, Chapter 6.11, Section 25404.1.2(c)

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

[DTSC]

**RESOLUTION:**

By the 1<sup>st</sup> 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 HWG Program facility with an open violation (no RTC) cited between January 1, 2021, and December 31, 2023:

- 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, the spreadsheet should include a narrative of any applied enforcement or follow-up activity to ensure the facility obtains RTC. The CUPA is encouraged to ensure the I&E Plan is implemented to pursue compliance at facilities.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with HWG facility records, for three recently inspected facilities, as requested by DTSC, that include RTC documentation, or a narrative of the follow-up activity and any enforcement applied in the absence of RTC.

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**2. INCIDENTAL FINDING:**

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

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Review of the I&E plan finds the following components are missing:

- Provisions for ensuring sampling capability and analysis performed by a state certified laboratory, pursuant to HSC, Chapter 6.5, Section 25198.
  - Information should include training, identification of sampling equipment, methods to preserve physical evidence obtained through sampling and testing information. This information was required when the CUPA became certified and is necessary to proceed with any potential enforcement actions as needed.

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

- Pages 3, 5, 12, 15 and 18, Provisions for addressing complaints, including but not limited to the receipt, investigation, enforcement, and closure of a complaint.
  - Procedures for addressing complaints do not include closure of a complaint.
- Page 24, Underground Storage Tank Initial Penalty Table includes the minimum penalty as \$0, and the average penalty as \$250.
  - HSC, Section 25299 (a) and (b) call for penalties no less than \$500 or no more than \$5,000 per day, per violation, per UST.
- Page 25, Section d, i. incorrectly states, “H&SC § 25540(a) allows for penalties of not more than \$2,000 for each day in which the violation occurs.”
  - HSC, Section 25540(a)(2) allows for penalties of not more than \$5,000 for each day in which the violation occurs.
- Page 25, Section d, ii. incorrectly cites H&SC § 25540(b).
  - The correct citation is HSC, Section 25540(a)(3).
- Page 26, Section d, CalARP penalty matrix incorrectly cites the minimum penalty as \$2,000.
  - HSC, Section 25540(a)(2) states the minimum penalty amount as \$5,000.

**CITATION:**

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

**RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will revise the I&E Plan to adequately incorporate and correctly address all required components, including the date of revision. The CUPA will provide the revised I&E Plan to CalEPA.

By the 2<sup>nd</sup> Progress Report, if amendments to the revised I&E Plan are necessary based on feedback from CalEPA, the State Water Board, or DTSC, the CUPA will provide the amended I&E Plan to CalEPA. If no amendments are necessary, the CUPA will train CUPA personnel on the revised I&E Plan. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the revised I&E Plan.

By the 3<sup>rd</sup> Progress Report, if amendments to the revised I&E Plan were necessary, the CUPA will train CUPA personnel on the amended I&E Plan. Once training is complete, the CUPA will implement the mended I&E Plan. The CUPA will provide CalEPA with a statement that training has been conducted. Once training is complete, the CUPA will implement the amended I&E Plan.

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**3. INCIDENTAL FINDING:**

The CUPA is not consistently ensuring each APSA tank facility that is not conditionally exempt prepares a Spill Prevention, Control, and Countermeasure (SPCC) Plan.

On May 6, 2024, review of CERS CME information between July 1, 2019, and September 30, 2023, finds the following APSA tank facility was cited with a violation for not having, or failure to prepare, an SPCC Plan and there is no documented RTC:

- CERS ID 10735159: violation cited on September 18, 2023

**CITATION:**

HSC, Chapter 6.67, Section 25270.4.5(a)  
[OSFM]

**RESOLUTION:**

By the 1<sup>st</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a narrative on the status of CERS ID 10735159 obtaining compliance, including the actual RTC if RTC is achieved, or in the absence of RTC, an update on the follow-up activity.

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**4. INCIDENTAL FINDING:**

The CUPA is not consistently ensuring HMBP submittals are thoroughly reviewed and contain all applicable required elements before being accepted in CERS.

Review of 16 HMBP CERS submittals provided by regulated businesses subject to Business Plan reporting requirements, finds the following 6 were accepted with missing or incomplete required elements:

- CERS ID 10153055
  - Emergency Response and Training Plans submitted on February 25, 2023, and accepted on June 13, 2023
    - Missing required emergency response plan elements such as immediate notification contacts to the appropriate local unified program agency.
- CERS ID 10152259
  - Inventory submitted on February 28, 2023, and accepted on July 31, 2023
    - Missing required site map element for evacuation staging areas.
- CERS ID 10656634
  - Inventory submitted on May 13, 2021, and accepted on July 15, 2021
    - Missing required site map elements such as north orientation and evacuation staging areas.
- CERS ID 10483501
  - Inventory submitted on February 15, 2022, and accepted on June 15, 2022
    - Missing required site map element for evacuation staging areas.

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- CERS ID 10484230
  - Inventory submitted on September 30, 2020, and accepted on October 6, 2020
    - Missing required site map elements such as evacuation staging areas and emergency response equipment.
  - Emergency Response and Training Plans submitted and accepted on September 22, 2020
    - Missing required emergency response plan elements such as immediate notification contacts to the appropriate local unified program agency.
- CERS ID 10477990
  - Inventory submitted on March 16, 2022, and accepted on June 8, 2022
    - Missing required site map elements such as access and exit points and emergency response equipment.

**CITATION:**

HSC, Chapter 6.95, Sections 25505(a), and 25508(a)(3) and (4)  
[CalEPA]

**RESOLUTION:**

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure each future HMBP submittal is thoroughly reviewed and contains all applicable required elements before being accepted in CERS. The action plan will include steps to follow-up with regulated businesses having an HMBP submittal that was reviewed and not accepted due to identified missing or incomplete elements.

By the 2nd Progress Report, the CUPA will train CUPA personnel on the steps in the action plan. The CUPA will provide CalEPA with a statement that training has been conducted.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a narrative update on the implementation of the action plan.

By the 4th Progress Report, the CUPA will ensure each regulated business subject to Business Plan reporting requirements has annually submitted a complete HMBP to CERS, or the CUPA will have applied enforcement.

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**5. INCIDENTAL FINDING:**

The annual CalARP performance audit reports for Fiscal Years (FYs) 2020/2021, 2021/2022, 2022/2023 have an incomplete required element.

The following element is incomplete:

- A summary of the personnel and personnel years (PYs) necessary to directly implement, administer, and operate the CalARP Program.
  - The personnel and personnel years are determined as a product of the number of positions needed and the full-time percentage allocated for each of those positions. For example, assuming one inspector position, working in the CalARP Program, at a half-time percentage, the PYs would be 0.5 (1 personnel position x 0.5 position years = 0.5 personnel years).

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**CITATION:**

CCR, Title 19, Section 5150.5(b)  
[CalEPA]

**RESOLUTION:**

By the 1st Progress Report, the CUPA will provide CalEPA with the most recent annual CalARP performance audit report that includes all required elements.

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**6. INCIDENTAL FINDING:**

The CUPA is not consistently or correctly reporting CME information to CERS for businesses subject to HMBP requirements.

Review of CERS CME information, facility files, and other information provided by the CUPA finds the following:

- CME information in inspection reports is not consistently and correctly being reported to the CUPA's data management system, resulting in inconsistent and incorrect CME information in CERS.
  - CERS ID 10152047
    - Inspection report dated February 20, 2020, states, "site map needs to be updated." There is no cited violation in the CUPA's data management system or CERS.
- The "Actual RTC" date reflected in CERS is inconsistent with the HMBP submittal "accepted" date:
  - CERS ID 10656634
    - CERS reflects an "Actual RTC" date of June 10, 2021, for a violation cited in an inspection report dated January 10, 2021, and an HMBP submittal "accepted" date of July 15, 2021.
  - CERS ID 10504165
    - CERS reflects an "Actual RTC" date of November 29, 2017, for a violation cited in an inspection report dated October 23, 2017, and an HMBP submittal "accepted" date of April 21, 2023.
  - CERS ID 10588357
    - CERS reflects an "Actual RTC" date of June 24, 2021, for a violation cited in an inspection report dated May 20, 2021, and the HMBP submittal has not been accepted.

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

**CITATION:**

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

**RESOLUTION:**

By the 1st Progress Report, the CUPA will develop, implement, and provide CalEPA with an action plan to ensure information in inspection reports and related HMBP CME information is consistently and correctly reported to CERS. The action plan will include, at minimum, the following:

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- Identification and correction of the cause(s) of inconsistent or incorrect reporting of HMBP CME information from inspection reports to CERS, including any inconsistencies in the electronic data transfer (EDT) 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 HMBP CME information is consistently and correctly reported to CERS;
- Identification of all HMBP CME information not previously reported to CERS or reported to CERS incorrectly.
- Future steps to ensure all HMBP CME information is consistently and correctly reported to CERS. This may generate the need for:
  - a comparison of HMBP CME information in the CUPA's data management system with the CME information in CERS to identify CME information not reported, or previously reported incorrectly to CERS; and/or
  - establishment of a quality assurance and quality control process to confirm all CME information is correctly and consistently reported to CERS.

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, the CUPA will provide CalEPA with the amended CME reporting 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. Once training is complete, the CUPA will implement the revised CME reporting component of the Data Management Procedure or other applicable procedure. The CUPA will provide CalEPA with a statement that training has been conducted.

By the 2<sup>nd</sup> Progress Report, and with each subsequent Progress Report until considered corrected, the CUPA will provide CalEPA with a narrative update of the progress made towards implementation of all components of the action plan.

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. Once training is complete, the CUPA will implement the amended CME reporting component of the Data Management Procedure or other applicable procedure. The CUPA will provide CalEPA with a statement that training has been conducted.

By the 5th Progress Report, the CUPA will consistently and correctly report all current and previous HMBP CME information to CERS. The CUPA will provide a statement confirming all HMBP CME information not previously reported to CERS, or previously reported incorrectly to CERS, between February 15, 2023, and April 16, 2024, has been correctly reported to CERS. If a statement confirming all HMBP CME information has been correctly reported to CERS cannot be provided, the CUPA will provide a narrative update on the progress made towards consistently and correctly reporting HMBP CME information to CERS.

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**7. INCIDENTAL FINDING:**

Established Unified Program administrative procedures have components that are missing.

The following administrative procedures have components that are missing:

- Information Collection, Retention, and Management
  - The procedure does not identify the following documents are being maintained for a minimum of five years:
    - 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.
- Public participation procedures that coordinate, consolidate, and make consistent public notices for activities related to any Unified Program element.
  - The procedure includes a discussion on public hearings and ensuring receipt and consideration of comments, however there is no mention of public notices.
- Providing Hazardous Material Release Response Plan (HMRRP) Information to emergency response personnel and other appropriate government entities in accordance with HSC, Section 25504(c).
  - The document titled, "SOPs 2023", section "HMRRP Information Sharing" does state CERS access is given, and training is provided every two years, however, the section does not correctly reflect "HMRRP", nor does it include an actual procedure for how the CUPA provides emergency response personnel and other appropriate government entities access to CERS.

**CITATION:**

CCR, Title 27, Sections 15180(e) and 15185  
[CalEPA]

**RESOLUTION:**

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

By the 2<sup>nd</sup> Progress Report, if amendments to the revised Unified Program administrative procedures are necessary based on feedback from CalEPA, the CUPA will provide CalEPA with the amended Unified Program administrative procedures. If no amendments are necessary, the CUPA will train CUPA personnel on the revised Unified Program administrative procedures. Once training is complete, the CUPA will implement the revised Unified Program administrative procedures. The CUPA will provide CalEPA with a statement that training has been conducted.

By the 3<sup>rd</sup> Progress Report, if amendments to the revised Unified Program administrative procedures were necessary, the CUPA will train CUPA personnel on the amended Unified Program administrative procedures. Once training is complete, the CUPA will implement the amended Unified Program administrative procedures. The CUPA will provide CalEPA with a statement that training has been conducted.

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**8. INCIDENTAL FINDING:**

The Self-Audit Reports for FYs 2020/2021, 2021/2022, and 2022/2023 have missing components.

The following components are missing:

- A date of completion to demonstrate compilation by September 30<sup>th</sup>.
- A report of deficiencies with a plan of correction.
  - The “Summary of Findings” section identifies issues, however, a plan of correction for the identified issues is not included.
- A narrative summary of the effectiveness of activities including, but not limited to:
  - Permitting
  - Single Fee System

**CITATION:**

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

**RESOLUTION:**

By the 1<sup>st</sup> Progress Report, the CUPA will provide CalEPA with a completed Self-Audit Report for FY 2023/2024 that includes all required components and incorporates a date of compilation to demonstrate the report was compiled by September 30<sup>th</sup>. For each subsequent FY, the CUPA will complete a Self-Audit Report that includes all required components and incorporates a date of completion to demonstrate the report was compiled by September 30<sup>th</sup>.

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**9. INCIDENTAL FINDING: RESOLVED DURING EVALUATION**

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

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

- FY 2022/2023
  - 1<sup>st</sup> FQ:
    - Due October 30, 2022, received November 18, 2022
  - 2<sup>nd</sup> FQ:
    - Due January 30, 2023, received February 16, 2023

**CITATION:**

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

**RESOLUTION: COMPLETED**

The CUPA provided the Quarterly Surcharge Transmittal Reports on time for FQ 1, 3 and 4 of FY 2023/2024. The Quarterly Surcharge Transmittal Report for Q2 of FY 2023/2024 was delayed, though likely the result of check issuance to the wrong payee which resulted in a delay of reporting.



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No later than 30 days after the end of each FQ, the CUPA will ensure each Quarterly Surcharge Transmittal Report, and any state surcharge remittance are provided to CARB via mail, and each Quarterly Surcharge Transmittal Report is provided to CalEPA via email.

The CUPA will ensure an electronic copy of each Quarterly Surcharge Transmittal Report will be provided to CalEPA via email at [cupa@calepa.ca.gov](mailto:cupa@calepa.ca.gov), using the current Quarterly Surcharge Transmittal Report template.

Note: A revised Quarterly Surcharge Transmittal Report template reflecting the increases in state surcharges effective July 1, 2021, and July 1, 2023, is available at: [https://calepa.ca.gov/wp-content/uploads/sites/6/2023/10/SURCHARGE-TRANSMITTAL-REPORT\\_20231019-ADA-1.pdf](https://calepa.ca.gov/wp-content/uploads/sites/6/2023/10/SURCHARGE-TRANSMITTAL-REPORT_20231019-ADA-1.pdf). Each line item on the Surcharge Transmittal Report template should be completed, including the check number.

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**10. INCIDENTAL FINDING: RESOLVED DURING EVALUATION**

The CUPA is not ensuring each stationary source in the California Accidental Release Prevention (CalARP) Program reviews and updates the Risk Management Plan (RMP) at least once every five years.

Review of information provided by the CUPA finds:

- 1 of 21 (4%) stationary sources has not updated the RMP at least once in the last five years:
  - CERS ID 10506286: RMP last updated October 25, 2018

**CITATION:**

CCR, Title 19, Section 5070.11(a)(1)  
[CalEPA]

**CORRECTIVE ACTION: COMPLETED**

During the evaluation, the CUPA ensured CERS ID 10506286 reviewed and updated the RMP. This Incidental Finding is considered resolved.

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**11. INCIDENTAL FINDING: RESOLVED DURING EVALUATION**

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

Review of CERS CME information on April 16, 2024, between January 1, 2021, and December 31, 2023, finds:

- 3 of 21 (14%) facilities subject to CalARP Program requirements were not inspected within the last three years.

**CITATION:**

HSC, Chapter 6.95, Section 25537(a)  
CCR, Title 19, Section 5140.4  
[CalEPA]

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**RESOLUTION: COMPLETED**

During the evaluation, the CUPA inspected additional CalARP Program facilities.

Review of CERS CME information on September 26, 2024, between July 1, 2021, and June 30, 2024, finds:

- 21 of 21 (100%) CalARP facilities were inspected within the last three years.

The CUPA has made significant progress toward ensuring that all CalARP Program facilities are inspected at least once every three years. This Incidental Finding is considered resolved.

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**12. INCIDENTAL FINDING: RESOLVED DURING EVALUATION**

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

On May 13, 2024, review of HMBPs submitted to CERS between March 2, 2023, and May 13, 2024, by APSA tank facilities in lieu of tank facility statements finds:

- 16 of 73 (22%) APSA tank facilities have not submitted emergency response and employee training plans.

**CITATION:**

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

**RESOLUTION: COMPLETED**

During the evaluation, the CUPA ensured additional APSA tank facilities annually submitted an HMBP to CERS.

On May 29, 2024, review of HMBPs submitted to CERS between March 2, 2023, and May 29, 2024, by APSA tank facilities in lieu of tank facility statements finds:

- 13 of 73 (18%) APSA tank facilities have not submitted emergency response and employee training plans.

This Incidental Finding is considered resolved.

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**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.

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**1. OBSERVATION:**

The information below is a summary of the overall implementation of the HWG Program and the CUPA's hazardous waste related activities based upon review of policies and procedures, CERS CME information, facility file information, information provided by the CUPA and Self-Audit Reports between January 1, 2021, and December 31, 2023:

- CERS reflects 626 regulated HWG facilities, including 41 Resource Conservation and Recovery Act (RCRA) Large Quantity Generators (LQGs), and 29 Tiered Permitted (TP) facilities.
- The three-year inspection frequency for all HWG Program facilities is currently being met.
- CERS reflects the CUPA conducted 734 total HWG inspections.
  - The CUPA conducted 688 routine HWG inspections, of which 302 (44%) had no violations cited and 386 (56%) had at least one violation cited.
    - In the 386 routine inspections conducted having at least one violation, 739 total violations were cited, consisting of:
      - 11 (2%) Class I violations,
      - 358 (48%) Class II violations, and
      - 370 (50%) minor violations.
  - The CUPA conducted 46 other HWG inspections.
    - In the 46 other inspections conducted, 54 total violations were issued, consisting of:
      - 2 (4%) Class I violations,
      - 39 (72%) Class II violations, and
      - 13 (24%) minor violations.
- The CUPA has ensured RTC for 591 of 790 (75%) violations.
- The CUPA completed no separate formal enforcement actions for facilities with hazardous waste related violations.
- Inspection reports contain detailed comments that note the factual basis of cited violations.

**RECOMMENDATION:**

Continue with the three-year HWG inspection frequency as established in the I&E Plan. Follow up with facilities that have not obtained RTC by the scheduled RTC date and apply enforcement when facilities do not RTC, per the I&E Plan. Continue to ensure complete and thorough inspections are conducted to identify all violations at facilities. Continue writing detailed inspection reports that include all factual bases of each cited violation and properly cite noted violations. Report violation details to CERS in the Violation Comment field.

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When U.S. EPA Generator Improvement Rule requirements are adopted and incorporated into California regulations, reference and revise appropriate citation sections in available factsheets and other resources made publicly available.

To support any applicable enforcement efforts, ensure inspection reports contain a detailed description of observations and factual basis for each cited violation. Descriptions of observations and factual basis to support alleged violations, should be detailed enough to clearly demonstrate how a regulatory requirement was not met and support the violation classification. Corrective action language (i.e. language describing what must be done for the facility to obtain RTC) should be prescriptive and clearly describe what must be done for the facility to obtain RTC, including how corrective action documentation should be provided for RTC consideration.

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**2. OBSERVATION:**

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

- Page 27: The 2016 edition of the California Fire Code is referenced. Remove the reference to the edition (year) or update to the current 2022 edition.

**RECOMMENDATION:**

Update the I&E Plan as indicated above.

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**3. OBSERVATION:**

As of May 3, 2024, the CERS reporting requirement is set as “APSA Applicable” for 73 tank facilities. The CUPA’s data management system identifies 79 APSA tank facilities.

- 72 APSA tank facilities are identified in both CERS and the CUPA’s data management system.
- 1 APSA tank facility identified as “APSA Applicable” in CERS is not identified as APSA tank facility in the CUPA’s data management system. Some of these facilities are likely not APSA regulated.
- 7 facilities identified as an APSA tank facilities in the CUPA’s data management system are not identified in CERS as APSA facilities.

**RECOMMENDATION:**

Determine if each facility identified as “APSA Applicable” in CERS and not identified as an APSA tank facility in the CUPA’s data management system should be regulated under APSA.

Determine if each facility identified as an APSA tank facility in the CUPA’s data management system and not identified as “APSA Applicable” in CERS should be regulated under APSA.

Complete the reconciliation of the APSA Program information in the CUPA’s data management system with CERS to ensure all APSA tank facilities are consistently identified in the CUPA’s data management system and in CERS.

- If a facility is not subject to being regulated under APSA, the APSA reporting requirement should be set to “APSA Not Applicable” in CERS and the facility should not be identified as an APSA tank facility in the CUPA’s data management system.

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- If a facility is subject to being regulated under APSA, the APSA reporting requirement should be set to “APSA Applicable” in CERS and the facility should be identified as an APSA tank facility in the CUPA’s data management system.
- 

**4. OBSERVATION:**

APSA tank facilities submitted an HMBP to CERS in lieu of a tank facility statement using an outdated consolidated emergency response and training plans template, which contains obsolete information.

**RECOMMENDATION:**

Encourage each APSA tank facility that utilized the consolidated emergency response and training plans template to use the current 2023 version, when an HMBP submittal is provided in lieu of a tank facility statement.

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**5. OBSERVATION:**

The Self-Audit Reports for FYs 2020/2021, 2021/2022, and 2022/2023 contain information that may benefit from improvement:

- California Fire Code (CFC), Sections 2701.5.1 and 2701.5.2 for the Hazardous Materials Management Plan and Inventory Statement (HMMP/HMIS) requirements are referenced. In the current edition of the fire code, the correct sections are 5001.5.1 and 5001.5.2.

**RECOMMENDATION:**

For future Self-Audit Reports, ensure the citations for the HMMP/HMIS requirements are current, or replace the referenced CFC sections with a general statement such as, “HMMP/HMIS requirements of the California Fire Code.”

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**6. OBSERVATION:**

Review of the following Annual Monitoring System Certification (AMC) forms cite "Not Applicable" for "Does the flow of fuel stop at the dispenser if a release is detected in the UDC?", while CERS reports UDC (under dispenser containment) monitoring stopping flow of product at the dispenser:

- CERS ID 10198843
  - AMCs dated June 23, 2021, June 1, 2022, and June 14, 2023
- CERS ID 10589746
  - AMCs dated October 12, 2021, and November 8, 2022

**RECOMMENDATION:**

Review and accept AMCs that reflect testing that occurred on site. Confirm UST monitoring information is accurate in CERS.

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**7. OBSERVATION:**

Review of CERS CME information on April 15, 2024, finds RTC was entered as “Not Resolvable” for 10 UST program violations. The following are examples:

- CERS ID 10151769
  - Routine inspection dated September 27, 2021
- CERS ID 10180257
  - Routine inspections dated January 19, 2022, and October 23, 2023
- CERS ID 10449358
  - Routine inspections dated February 10, 2021, February 2, 2022, February 10, 2023

Note: UST Violation qualifier “Not resolvable” is intended for more unique situations where the initial violation cannot be resolved. UST Program violations for missed testing, tank closures, and/or failures in testing for leak detection equipment are resolvable. “Not Resolvable” will be added to the CERS Data Dictionary in 2026, and these current procedures will be incorrect.

**RECOMMENDATION:**

Review UST Violation RTC and qualifier procedures to ensure violation data is accurately captured in CERS.

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**8. OBSERVATION:**

Existing references to citations in CCR, Title 19, Division 2, Chapters 4 and 4.5 in administrative procedures, standard operating procedures and other documents associated with the HMBP Program and the CalARP Program are outdated.

Effective July 22, 2021, Assembly Bill 148 (Chapter 115, Statutes of 2021), transferred the oversight responsibility of the HMBP Program and the CalARP Program from the California Governor’s Office of Emergency Services (Cal OES) to CalEPA.

As a result, on March 6, 2024, the Office of Administrative Law (OAL) approved a rulemaking package submitted by CalEPA to amend and relocate portions of CCR, Title 19, Division 2, Chapters 4 and 4.5 into a new Division (Division 5). The rulemaking does not materially alter any requirement, right, responsibility, condition, prescription, or other regulatory element. The final regulatory text for the rulemaking package revising the citations is available as follows:

- For HMBP Program requirements:  
[https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-1-Final\\_Underline\\_Strikeout.pdf](https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-1-Final_Underline_Strikeout.pdf)
- For CalARP Program requirements:  
[https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-2-Final\\_Underline\\_Strikeout.pdf](https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/19-CCR-Div-5-Ch-2-Final_Underline_Strikeout.pdf)

**RECOMMENDATION:**

Update any applicable policies, procedures, or other documents to reflect the new citation references to CCR, Title 19 for HMBP Program and CalARP Program requirements using the “regulatory crosswalk,” developed by CalEPA, as Guidance Document 24-01, available at:

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- <https://calepa.ca.gov/wp-content/uploads/sites/6/2024/03/Guidance-Document-24-01-Regulatory-Crosswalk-for-HMBP-and-CalARP-Title-19-Changes.pdf>
- 

**9. OBSERVATION:**

On June 6, 2024, a UST oversight inspection was conducted in conjunction with the compliance inspection during the annual monitoring system certification (AMC), the spill container (SC) testing, and overfill prevention equipment (OPE) inspection at CERS ID 10198843. The inspector was prepared for the inspection and knowledgeable of the site's history. The inspector confirmed the certifications of the technicians on site, location of sensors, and print-outs of the site information prior to testing beginning. The inspector kept thorough notes for the site summary.

The inspector confirmed operability of sensors and line leak detectors required for the CERS tank information and monitoring plan. Upon receipt of the results of the AMC, SC, OPE, and CUPA Inspection Report, the following was observed:

- Failure of the vent box 208 sensor to be programmed to alarm
- Failure of the float and chain float sensors of Under Dispenser Containment (UDC) 1/2, 4, 11/12, 15/16, and 21/22
- Failure of the south diesel submersible turbine pump (STP) sump 208 sensor to be installed according to manufacturer specifications
- Failure of the red diesel and south diesel fill tube shut off valves to operate at 95% or lower

Inspection, violation, and return to compliance information has been accurately reported to CERS. The CUPA provided all documentation from the oversight inspection to the UST site owner/operator in a timely manner.

**RECOMMENDATION:**

Continue to perform thorough UST compliance inspections.

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**10. OBSERVATION:**

On July 30, 2024, a CalARP oversight inspection was conducted at CERS ID 10152557. The inspector was well prepared for the inspection and reviewed relevant information. The inspector was knowledgeable, established rapport with the facility operators, requested and reviewed the most current RMP information, toured the entire site, and effectively communicated technical information to the facility operators. The inspector communicated with the owner/operator during the inspection to address information that was unclear, incomplete, or missing during the onsite visit. The inspector extended assistance and education to the facility operators for familiarity with the CalARP Program requirements.

On July 31, 2024, an HMBP oversight inspection was conducted at CERS ID 10734664, and at CERS ID 10637647, each with different CUPA inspectors. During each inspection, the inspectors were well prepared for each inspection and reviewed relevant information prior to arriving at the facility. The inspectors established rapport with the facility operators, toured the entire site, verified inventory, and emergency response plan information and training on site, and effectively communicated technical information to the facility operators. The inspector identified and disclosed all violations.

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**RECOMMENDATION:**

Continue to conduct thorough HMBP and CalARP inspections.

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**11. OBSERVATION:**

On August 7, 2024, HWG Program oversight inspections were conducted at CERS ID 10138585, a TP facility, and CERS ID 10157823, a Small Quantity Generator (SQG) facility. Each inspection was conducted by a different CUPA inspector.

Both CUPA inspectors acted in a professional manner, were on time, developed rapport with facility representatives, showed interest in the inspection, asked for and received consent to inspect, informed the facility representatives of the purpose of the inspection, and had knowledge of the respective facility and activities. The inspector of CERS ID 10138585 provided a reason for the inspection and an explanation of how the inspection would proceed, asked for and received permission to take pictures and copy documents, and knew the facility was a chemical distributor that conducts blending of products to distribute to customers, conducts treatment of hazardous waste and discharges to sewers, and uses rail cars to bring in raw material to store in tanks. The inspector of CERS ID 10157823 explained the Unified Program and informed the facility representative that the inspection would cover all programs within the Unified Program. Though the inspector had not previously been to the facility, the inspector knew the facility was a typical repair shop managing oil and antifreeze and, and that the facility also works with tires.

Both inspectors arranged logistics for conducting the inspection by assuring the respective facility was active and had all applicable information available, such as the relevant inspection checklist, inventory from CERS, site map, permits, files, applications, and prior inspection reports, and had access to regulation and statute for reference. All areas were inspected, and all appropriate documents were reviewed at each facility. The inspector of CERS ID 10138585 stated that inspections are usually unannounced, however because the facility is a larger facility, the inspector called ahead to schedule the inspection to ensure a facility representative would be onsite. The inspector was prepared with the TP inspection checklist, TP notification forms, TP flowchart and LQG handout. The inspector reviewed documents including the discharge permit, discharge logs, operating procedure for neutralization and discharging of wastewater, stormwater prevention plan 2022, tank assessment, closure cost estimate, training documentation, hazardous waste manifests, and Contingency Plan. Areas inspected include: the break room, rail yard, including rail yard sumps filled with liquid, sump pumps, berms, intermodal shipping containers, including an unsealed 55-gallon plastic drum, courts used to store hazardous waste and hazardous materials, tank farms, loading zones, sump and draining areas, the TP area, and maintenance shed. The inspector of CERS ID 10157823 ensured the facility EPA ID was active and current, and called ahead of conducting the inspection. The inspector was prepared with the hazardous waste manifests list to confirm the manifests kept at the facility were comparable. The inspector reviewed documents including bills of lading, and weekly inspection logs; however, several containers were not inspected, including a universal waste lamps box, two apparatuses filled with liquid, green oil pan, and an unlabeled black container that appeared to be used for draining oil filters. Areas inspected include the upper platform area, rear shop area, including an aerosol residuals 30-gallon drum and label, five 55-gallon barrels and one 30-gallon barrel, including one 55-gallon barrel labeled "non-regulated oil-bladders," brake fluid and label, and 210-gallon new oil tank, main shop area, including a parts cleaner,



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used oil tank and label, two 55-gallon drums and labels for used oil filters and used oil, respectively, “empty daily” containers for used oil and rags, respectively, emergency phone numbers and site map, and a spill kit consisting of absorbent, a broom, and absorbent pads, and front office area side room, including car batteries on pallets.

A closing, or debriefing, conference was conducted with the facility representative for each inspection to explain findings and expectations. The inspector of CERS ID 10138585 asked facility personnel to describe the facility process, had follow up questions regarding the process, and various structures, including a scrubber, tanks, and intermodal shipping containers. The inspector of CERS ID 10157823 asked facility personnel how aerosol cans were picked up, how the pickup time was determined, and where several items were kept, including rags and a spill kit. The inspector reviewed HWG Program inspection findings with facility personnel, explained expectations, including updating emergency phone numbers and ensuring weekly inspections are done well, and asked if there were any questions or concerns.

All violations noted the correct classification. Violation notations included detailed observations, the factual basis, and corrective actions, including “Correct By” dates.

The TP facility inspection checklist includes a designated space for noting consent to conduct the inspection.

The CUPA’s use of Laserfiche is no longer requires inspectors to bring a facility folder to conduct the inspection, as facility information is now readily accessible via use of a tablet.

**RECOMMENDATION:**

Reference and revise appropriate citation sections in inspection reports to reflect U.S. EPA Generator Improvement Rule requirements adopted and incorporated into California regulations. For example, CCR, Title 22, Section 66262.34 has been repealed.

Ensure that complete and thorough inspections are conducted to identify all violations at facilities. For example, the inspector of CERS ID 10157823 did not note a violation for an aerosol residuals 30-gallon drum label with an accumulation start date of July 16, 2022. One methodology for conducting inspections is the “process-based investigation,” which “includes tracking raw materials through the industrial operations, identifying by-product, co-product and products, identifying wastes generated, and determining how these wastes are ultimately managed” (<https://19january2021snapshot.epa.gov/sites/static/files/documents/process-basedguide.pdf>).