

LOS ANGELES FIRE DEPARTMENT



RALPH M. TERRAZAS
FIRE CHIEF

November 27, 2017

BOARD OF FIRE COMMISSIONERS
FILE NO. 17-136

TO: Board of Fire Commissioners

FROM:  Ralph M. Terrazas, Fire Chief

SUBJECT: 2017 CERTIFIED UNIFIED PROGRAM AGENCY EVALUATION
PROGRESS REPORT

FINAL ACTION:	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Corrections	<input type="checkbox"/> Withdrawn
	<input type="checkbox"/> Denied	<input type="checkbox"/> Received & Filed	<input type="checkbox"/> Other

SUMMARY

The California Environmental Protection Agency (CalEPA) along with the California Emergency Management Agency, Office of the State Fire Marshal, Department of Toxic Substances Control, and the State Water Resources Control Board, conducted a program evaluation from November 23, 2016 to January 18, 2017 of the Los Angeles Fire Department's (LAFD) Certified Unified Program Agency (CUPA).

This evaluation is mandated by the Health and Safety Code, Chapter 6.121, to be conducted at least once every three years, in order to verify the Certified Program Agency's implementation of the Unified Program (UP).

During this second Deficiency Progress Report #2, deficiencies #4 & #6 were able to be corrected. The CUPA Program will continue to work with our State partners to resolve the remaining deficiencies.

Also included is a statistical review of the CUPA Section inspection activity over the past fiscal year. The review includes goals that were established and an analysis of the performance.

Attached for your review:

1. The CUPA Evaluation Deficiency Progress Report #2 – which lists each deficiency, the corresponding corrective action, a summary of our progress and the State's evaluation of our progress.
2. Statistical report documenting inspection activity of the CUPA Section for fiscal year 2016/2017.

The Department will provide a progress report to the Board of Fire Commissioners at a future meeting.

RECOMMENDATION

That the Board:
Receive and file this report.

DISCUSSION

The current status of the 6 deficiencies is as follows:

- Four of the six deficiencies are corrected.

DEFICIENCY	PROGRAM ELEMENT	STATUS	PROJECTED COMPLETION DATE
# 1 LA City Fire	HAZARDOUS MATERIALS INVENTORY SUBMITTAL IN CERS	UNCORRECTED	FEBRUARY 2018
# 2 LA City Fire	ABOVEGROUND TANK - RETURN TO COMPLIANCE	CORRECTED	MAY 2017
# 3 LA City Fire	SELF AUDIT	UNCORRECTED	NOVEMBER 2017
# 4 LA County	HAZARDOUS WASTE PROGRAM (LA COUNTY FIRE)- RETURN TO COMPLIANCE	CORRECTED	FEBRUARY 2018
# 5 LA City Fire	ENHANCED LEAK DETECTION	CORRECTED	MAY 2017
# 6 LA County	HAZARDOUS WASTE PROGRAM (LA COUNTY FIRE) - ENFORCEMENT ACTIVITIES NOT REPORTED IN CERS	CORRECTED	JULY 2018

Board report prepared by Kristin Crowley, Fire Marshal, Fire Prevention and Public Safety Bureau.

Attachments

**LOS ANGELES FIRE DEPARTMENT
FIRE PREVENTION AND PUBLIC SAFETY BUREAU
CUPA SUMMARY REPORT – 1st Fiscal Quarter 7/1/2017 – 9/30/2017**

The CUPA Section is overseen by a CUPA Program Manager and is responsible for the administration, permit, inspection, and enforcement activities of the following environmental and emergency management programs:

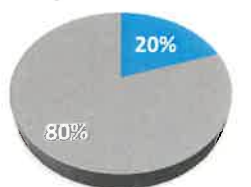
- Aboveground Petroleum Storage Act (APSA) Program
- California Accidental Release Prevention (CalARP) Program
- Hazardous Materials Release Response Plans and Inventories (Business Plans)
- Hazardous Waste Generator and Onsite Hazardous Waste Treatment (tiered permitting) Programs
- Underground Storage Tank Program

The following data was collected from Envision Connect and reflects the status of the State mandated inspections. The CUPA Program works on a fiscal year for inspections with July 1st to September 30th being the first quarter:

Hazardous Materials Program

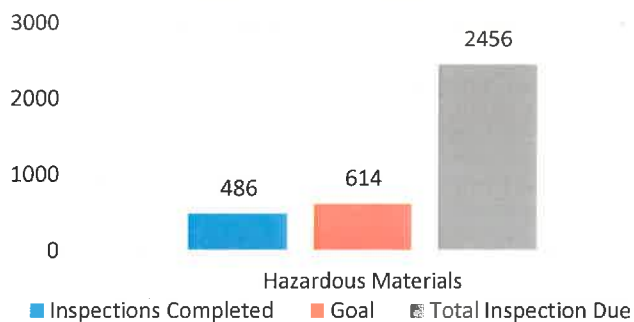
The inspection activity in the Hazmat Program reached 20% which was short of the 25% goal but a strong effort as there were inspection staff diverted out of the program to start up a new cannabis inspection program, other staff were assigned to take over the Oil Well inspection program, another staff member was on offsite training for six weeks and another member was off IOD for the entire quarter.

Hazardous Materials



■ Inspections Completed
■ Inspections Remaining

Hazardous Materials

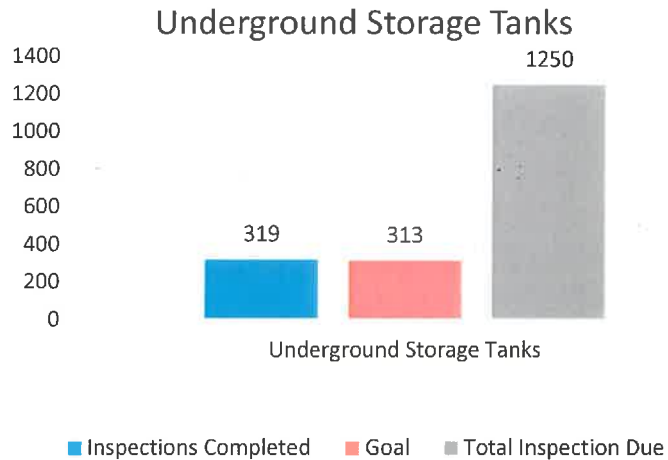


**LOS ANGELES FIRE DEPARTMENT
FIRE PREVENTION AND PUBLIC SAFETY BUREAU
CUPA SUMMARY REPORT – 1st Fiscal Quarter 7/1/2017 – 9/30/2017**

Underground Storage Tank Program

The inspection activity in the UST program met and exceeded the 25% goal. The program works on scheduled annual inspections which keeps our inspection activity very consistent.

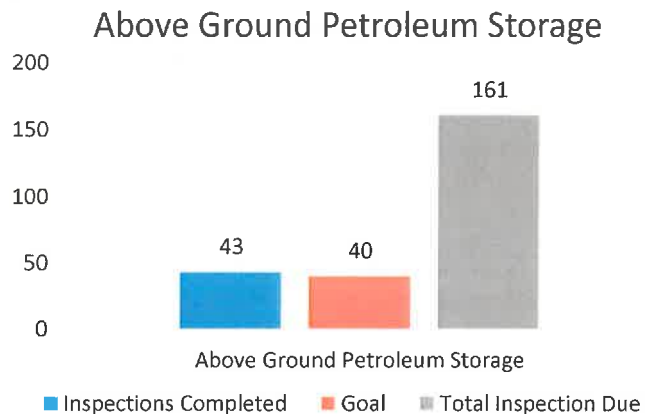
**Underground
Storage Tanks**



Above Ground Petroleum Tank Storage

The inspection activity in the Above Ground Petroleum Tank Storage program reached 27% which exceeded the inspection goal of 25%. The facilities in this program have a 3-year inspection mandate.

**Above Ground
Petroleum Storage**



LOS ANGELES FIRE DEPARTMENT FIRE PREVENTION AND PUBLIC SAFETY BUREAU CUPA SUMMARY REPORT – 1st Fiscal Quarter 7/1/2017 – 9/30/2017

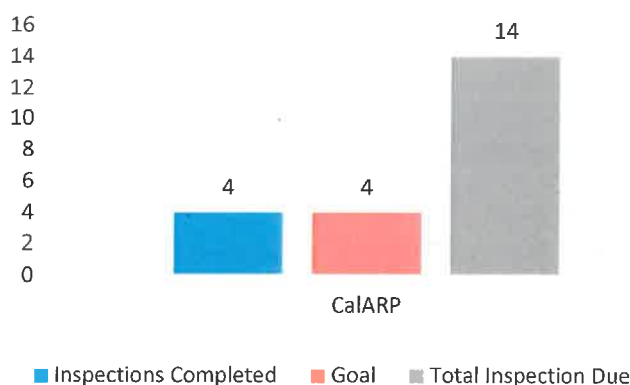
California Accidental Release Prevention Program (CalARP)

The CalARP program reached 29% for inspection activity which exceeded the goal of 25%. The program recently introduced a new level of risk management called Level 4 which was implemented into California on October 1st to address the risks associated with petroleum refineries. New staffing resources have been requested through the budget process to address the additional workload.

California Accidental Release Program



California Accidental Release Program



Enforcement

During the first quarter inspection staff conducted reinspections and utilized other progressive enforcement options as follows:

<u>Program</u>	<u>Reinspections</u>
Hazardous Materials	98
Underground Storage Tanks	157
Above Ground Petroleum Storage Tanks	12
California Accidental Release Prevention Program	0

Progressive reinforcement was conducted as follows:

1. 5 Administrative Enforcement Orders were issued with a cumulative penalty of \$65,400
2. 4 Cases were referred to the City Attorney's Office

CERTIFIED UNIFIED PROGRAM AGENCY

Deficiency Progress Update Report 1

EVALUATION YEAR:	2017	REVIEW PERIOD:	November 23, 2016 – January 18, 2017	ISSUANCE DATE:	March 30, 2017
CUPA:	Los Angeles City Fire Department				
EVALUATION TEAM MEMBERS:	CalEPA Team Lead	DTSC	Cal OES	State Water Board	CAL FIRE - OSFM
	Kareem Taylor	Matt McCarron Kevin Abriol	Denise Gibson	Sean Farrow	Glenn Warner
Deficiency Pending	1, 3, 4, 6				
Deficiencies Corrected	2, 5 - these deficiencies do not require further corrective action.				
This Update Submitted on	May 30, 2017				
Next Update Due by	August 30, 2017				

To complete the evaluation process, CUPAs submit Deficiency Progress Reports to CalEPA that explain their progress towards correcting the identified deficiencies. Deficiency Progress Reports are due quarterly after the evaluation date until all deficiencies have been corrected.

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

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Unified Program
CalEPA
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The CUPA is required to submit a **Deficiency Progress Report every 90 days** from the last day the evaluation is conducted, until all deficiencies have been acknowledged as corrected. Due to a delay in the final report, CalEPA will require the first update to be submitted 60 days after the issuance of the final report and every 90 days thereafter.

Each **Deficiency Progress Report** must include a narrative stating the correction of all deficiencies identified in the Summary of Findings evaluation report.

Deficiency Progress Report submittal dates for the first year following the evaluation are as follows:

Update 1: May 30, 2017
Update 2: August 30, 2017
Update 3: November 30, 2017
Update 4: February 28, 2018

Each Deficiency Progress Report must be submitted to the CalEPA Team Lead.

1.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not ensuring that all businesses electronically submit a complete Hazardous Materials Business Plan (Business Plan) annually to California Environmental Reporting System (CERS).</p> <p>The state agencies' review found 8,034 regulated facility records in CERS, while the CUPA Fiscal Year (FY) 2015/2016 Self Audit Report identifies 6,901 regulated facilities. The discrepancy in regulated facilities may be due to a large number of closed or inactive facilities, exempt facilities, or facilities not required to resubmit an annual Business Plan due to regulatory requirements.</p> <p>The state agencies' review of regulated facility records found:</p> <p>Approximately 24% to 35% have not submitted a chemical inventory within the past 12 months.</p> <p>Approximately 29% to 39% have not submitted emergency response and employee training plans within the past 12 months.</p> <p>Since the 2014 evaluation, the CUPA has significantly increased the number of businesses that electronically submit complete Business Plans annually to CERS. Since July 2016, the CUPA has issued Business Plan violations to more than 500 facilities related to Business Plan submittals and have initiated formal enforcement against a limited number of non-compliant facilities.</p> <p>Carryover deficiency from 2014 Evaluation.</p>	<p>By May 30, 2017, the CUPA will compare and contrast CERS with Envision Connect in order to identify regulated business where inventory and/ or Emergency Response Plans and Procedures submittal element were either missing or not updated. The CUPA will also update CERS regulated facility records to reflect closed or inactive facilities, exempt facilities, or facilities not required to resubmit an annual Business Plan due to regulatory requirements.</p> <p>By May 30, 2017, the CUPA will develop and provide a list to CalEPA of all regulated businesses that have not annually submitted a complete inventory and/ or Emergency Response Plans.</p> <p>With each Deficiency Progress Report, the CUPA will update the list with the status of business compliance.</p> <p>By August 30, 2017, the CUPA will follow-up with each regulated business identified on the list to ensure a complete Business Plan is submitted.</p> <p>By February 28, 2018, the CUPA will ensure that regulated businesses have submitted a complete Business Plan or that appropriate actions were taken to enforce this requirement.</p>

Deficiency Progress Update 1:

1. By May 30, 2017, the CUPA will compare and contrast CERS with Envision Connect in order to identify regulated business where inventory and/or Emergency Response Plans and Procedures submittal element were either missing or not updated. The CUPA will also update CERS regulated facility records to reflect closed or inactive facilities, exempt facilities, or facilities not required to resubmit an annual Business Plan due to regulatory requirements.

LAFD CUPA has been working with CalEPA to remove and/or relocate unnecessary CERS ID numbers that are no longer active. This process allowed us to remove 980 CERS accounts that are no longer needed due to the facility no longer being active in Envision Connect. This is a process the CUPA will continue to engage in on a regular basis to improve the accuracy of data between EC and CERS.

LAFD CUPA is on track to add many sites to Envision Connect that are currently reporting in CERS and are not active in Envision Connect. This combined with the removal of other inactive accounts in CERS has allowed us to minimize the difference in inventory between Envision and CERS.

LAFD CUPA has also been removing many duplicate CERS accounts. This process takes place every day as inspectors and data entry staff find them.

2. By May 30, 2017, the CUPA will develop and provide a list to CalEPA of all the regulated businesses that have not annually submitted a complete inventory and/or Emergency Response Plans.

LAFD CUPA has provided a spreadsheet to CalEPA of all the locations that have not completed inventory and/or Emergency Response Plans within the last 12 months. The LAFD CUPA has provided three different worksheets which correspond as follows: The first list is composed of the active facilities that have not completed the inventory and the plans sections of CERS within the last 12 months. The second list is composed of just one sections missing (Business Plan or Hazmat Inventory). The Third list is composed of locations that have never made a submittal at any time in CERS regardless of the date.

3. By August 30, 2017, the CUPA will follow-up with each regulated businesses identified on the list to ensure a complete business plan is submitted.

LAFD CUPA sent out letters on April, 22 2017 to every business that had not completed the business plan or inventory submittal in CERS. This action resulted in a large number of facilities to submit their annual information.

4. By February 28, 2018, the CUPA will ensure that regulated businesses have submitted a complete Business Plan or that appropriate actions were taken to enforce this requirement.

LAFD CUPA has been very active in enforcing businesses to complete Business Plan and Hazmat Inventory in CERS. We have continued to send multiple letters to the facilities.

LAFD CUPA has an internal policy that all businesses must submit their annual information by March 1st of every year.

Evaluation Team Response [Cal OES, OSFM]:

Cal OES: Cal OES acknowledges the assertive efforts the CUPA is doing to correct this deficiency and looks forward to the next progress report.

OSFM: The CUPA has made progress towards correcting this deficiency, including initial efforts to reconcile the CERS and Envision Connect list of regulated businesses. A CERS report was generated on June 6, 2017. OSFM's review of CERS shows the following:

- 2078 (27%) of 7769 facilities without current inventory submittals
- 2312 (30%) of 7731 facilities without current emergency response and training plans submittals

OSFM has provided the CUPA with the CERS report. On the next progress report, please provide a narrative of the CUPA's progress toward correcting this deficiency, including follow-up and any enforcement actions taken against non-compliant or recalcitrant businesses. The CUPA will also provide CalEPA with an updated list of all regulated businesses that have not annually submitted a complete inventory and/or emergency response/training plans.

Deficiency Progress Update 2: [Enter Update Here](#)

Evaluation Team Response [Cal OES, OSFM]:

2.	DEFICIENCY: CORRECTED	CORRECTIVE ACTION: COMPLETE
	<p>The CUPA is not consistently following-up and documenting return to compliance (RTC) for facilities cited with Aboveground Petroleum Storage Act (APSA) violations in Notices to Violation or inspection reports.</p> <p>OSFM review of APSA facility inspection, violation, and enforcement data, also called CME, in CERS found the following:</p> <p><u>FY 2015/2016</u></p> <ul style="list-style-type: none"> • Out of 342 violations, 232 (68%) are without RTC. <p><u>FY 2014/2015</u></p> <ul style="list-style-type: none"> • Out of 136 violations, 83 (61%) are without RTC. 	<p>By May 30, 2017, the CUPA will provide CalEPA with a sortable RTC tracking spreadsheet of the total number of APSA facilities that have open violations. The CUPA will follow-up with the facilities listed in the spreadsheet and prioritize follow-up actions based on the level of hazard. At minimum, the spreadsheet will include:</p> <ul style="list-style-type: none"> • Facility name and address; • CERS ID number; • Facility ID number (if applicable); • Inspection and violation dates; • Scheduled RTC date; • Actual RTC date; • RTC qualifier; and • Follow-up actions. <p>By May 30, 2017, the CUPA will provide CalEPA with a timeframe for when all of the listed facilities will be followed-up with.</p> <p>By August 30, 2017, and with each subsequent Deficiency Progress Report, the CUPA will provide</p>

	CalEPA with an updated version of the RTC tracking spreadsheet.
<p>Deficiency Progress Update 1:</p> <p>During the November 23, 2016 - January 18, 2017 evaluation, the CALEPA team determined that the Los Angeles City Fire Department CUPA (LAFD CUPA) was not consistently following-up and documenting return to compliance (RTC) for facilities cited with Aboveground Petroleum Storage Act (APSA) violations or inspection reports.</p> <p>The corrective action required that the CUPA to provide CalEPA with a timeframe as to when the CUPA was going to follow up with those business having deficiencies during the time frame of FY 2014/2015 through F 2015/2016.</p> <p>RESPONSE: All the facilities with deficiencies issued during above timeframe have been re-inspected. Facilities which demonstrated compliance have had their violations cleared. Three facilities have outstanding administrative violations and will receive another re-inspection prior to any further enforcement action. The remaining eleven facilities have outstanding violations and were issued a "FORTHWITH NOTICE", and are currently going through the formal enforcement process. Table I, provides a list of business that are still out of compliance and their status.</p>	

**STATUS OF APSA BUSINESSES WITH DEFICIENCIES
INSPECTED BETWEEN FY 2014/2015 & FY2015/2016**

CERS ID	SITE ADDRESS	RE-INSPECTION DATE	STATUS
10029802	9000 Airport Blvd	3/23/2017	Waiting on administrative paperwork -Potential Formal Enforcement
10029853	14401 SATICOY STREET	4/26/2017	Formal Enforcement (Legal)
10030039	5740 Whitnall Hwy	5/4/2017	Waiting on administrative paperwork
10165697	2045 E Washington Blvd	3/4/2017	Formal Enforcement (Legal)
10244470	6201 N WINNETKA AVE	3/21/2017	Formal Enforcement (Legal)
10244470	6201 N WINNETKA AVE	3/21/2017	Formal Enforcement (Legal)
10244806	9050 NORRIS AVE	3/16/2017	Formal Enforcement (Legal)
10249210	6201 W IMPERIAL HWY UN B	3/21/2017	Waiting on administrative paperwork -Potential Formal Enforcement
10254988	1555 N SAN FERNANDO RD	4/13/2017	Formal Enforcement (Legal)
10255396	8525 S. SEPULVEDA BLVD	3/29/2017	Formal Enforcement (Legal)
10255759	14117 W AETNA ST	3/21/2017	Formal Enforcement (Legal)
10260589	14002 BALBOA BLVD	4/10/2017	Formal Enforcement (Legal)
10261198	2500 NAVY WY	12/25/2017	Formal Enforcement (Legal)
10339888	74 Berth	4/12/2017	Formal Enforcement (Legal)

TABLE 1

As the business go through the formal enforcement process and complies with the compliance schedule the the violation will be corrected in Envision Connect and uploaded to CERS. For a complete overview of the outstanding APSA violations a spreadsheet was developed on May 15 and emailed to OSFM and CalEPA.

FY 2015/2016

- Out of 342 violations, 61 (18%) are without RTC as they are going through formal enforcement. 100% of the facilities without an RTC identified by OSFM have been inspected, violations closed where applicable and the remaining referred to legal for an AEO or City Attorney case. There are three facilities CERS ID's 10029802, 10030039, 10249210) where we are waiting on administrative paperwork.

FY 2014/2015

- Out of 136 violations, 25 (18%) are without RTC as they are going through formal enforcement. 100% of the facilities without an RTC identified by OSFM have been inspected, violations closed where applicable and the remaining referred to legal for an AEO or City Attorney case.

With the information provided the LAFD CUPA has fulfilled the corrective action required by CalEPA and the evaluation team. This task was accomplished by re-inspecting every business that was out of compliance, by documenting the return to compliance and by providing a status for those deficiencies that are still open.

An RTC tracking spreadsheet of the total number of APSA facilities that have open violations was provided to CalEPA and OSFM. Re-inspection and Violation Status columns are provided where it depicts the re-inspection date and that status of each outstanding violation.

Based on the information provided the Los Angeles City CUPA respectfully request this deficiency be corrected as the LAFD has met the corrective action.

Evaluation Team Response [OSFM]:

OSFM: The CUPA has made significant progress in correcting this deficiency by re-inspecting all facilities with outstanding violations, clearing violations at compliant facilities, and pursuing formal enforcement at facilities with outstanding violations. A CERS APSA CME report was run on June 6, 2017. The CERS report demonstrates improvement in RTC for FY 2015/2016 and FY 2014/2015 as detailed below:

- FY 2015/2016: 62 of 402 (15%) violations are without RTC
- FY 2014/2015: 25 of 142 (18%) violations are without RTC

OSFM has provided the CUPA with the CERS report. OSFM considers this deficiency corrected.

The CUPA should continue to consistently follow-up and document return to compliance (RTC) for facilities cited with APSA violations in Notices of Violation or inspection reports.

3.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not consistently completing an annual Self-Audit Report that contains all required elements.</p> <ul style="list-style-type: none"> • The CUPA did not complete a FY 2014/2015 Self-Audit Report by the reporting due date. • The CUPA's FY 2015/2016 Self-Audit Report is missing a plan of correction for identified deficiencies. <p>Note: The FY 2015/2016 Self-Audit report is significantly improved from the report of previous years, and is very comprehensive.</p>	<p>By September 30, 2017, and each year thereafter, the CUPA will complete an annual Self-Audit Report that contains all required elements.</p> <p>With the November 30, 2017, deficiency progress update report, the CUPA will provide CalEPA with a copy of the completed FY 2016/2017 self-audit report.</p>

Deficiency Progress Update 1:

As directed, an update will be provided with the November 30, 2017 deficiency progress update report.

Evaluation Team Response [CalEPA]:

CalEPA: CalEPA will review the FY 2016/2017 self-audit report after it is submitted with the November 30, 2017 progress report.

Deficiency Progress Update 2: Enter Update Here**Evaluation Team Response [CalEPA]:**

4.	DEFICIENCY:	CORRECTIVE ACTION:
	<p>The CUPA is not ensuring that its Participating Agency (PA) is consistently following-up and documenting RTC for Hazardous Waste Generator (HWG) facilities cited with violations in Notices to Comply or inspection reports.</p> <p>Examples are provided below:</p> <ul style="list-style-type: none">• Total violations: 7203 violations issued and 2216 violations do not have RTC for a rate of 31%• Total Minor violations: 6098 issued with 1837 violations without RTC for a rate of 30%• Total Class 1 and 2: 1105 violations issued with 379 violations without RTC for a rate of 34%. <p>Note: The CUPA identified this deficiency during its FY 2015/2016 PA audit, but did not outline a plan of correction.</p> <p>This was identified as a deficiency in 2014, but considered corrected during the deficiency progress update process.</p>	<p>By May 30, 2017, the CUPA, in coordination with the PA, will provide CalEPA with a sortable RTC tracking spreadsheet of the total number of HWG facilities that have open violations. At minimum, the spreadsheet will include:</p> <ul style="list-style-type: none">• Facility name and address;• CERS ID number;• Facility ID number (if applicable);• Inspection and violation dates;• Scheduled RTC date;• Actual RTC date;• RTC qualifier; and• Follow-up actions. <p>By August 30, 2017, and with each Deficiency Progress Report, the CUPA, in coordination with the PA, will provide CalEPA with an updated version of the RTC tracking spreadsheet. The CUPA will also provide CalEPA with a copy of RTC documentation for 5 facilities requested by DTSC during the previous quarter.</p>

Deficiency Progress Update 1:

This update was provided by the Participating Agency Los Angeles County Fire Department:

The PA issued 7,155 violations from 7/1/13 to 11/29/16 and 1,309 violations do not have RTC for a rate of 18%.

Violation Class Summary:

- 132 Class I violations were issued with 12 violations without RTC for a rate of 9%.
- 1,021 Class IIs violations were issued with 136 violations without RTC for a rate of 13%.
- 6,001 Minor violations were issued with 1,161 violations without RTC for a rate of 19%.

Fiscal Year Summary:

- FY 13/14 - 1,582 violations were issued with 193 without RTC for a rate of 12%.
- FY 14/15 - 1,532 violations were issued with 133 without RTC for a rate of 9%.
- FY 15/16 – 3,479 violations were issued with 826 without RTC for a rate of 24%.
- 7/1/16 to 11/29/16 – 562 violations were issued with 157 without RTC.
- The majority of the outstanding violations from FYs 13/14 and 14/15 are minor violations. The 12 Class I violations without RTC are from 7/1/15 to 11/29/16 and have pending enforcement actions.

The PA monitors RTC statistics on a monthly basis. Inspectors are required to prioritize the compliance at facilities that have been cited with class 1 violations, are considered high risk, or are recalcitrant violators. In addition, staff has been directed to dedicate at least one day per week to work on open violations to eliminate the backlog. See the attached sortable RTC tracking spreadsheet. *(See attachment previously emailed to CalEPA by LAFD CUPA)*

Evaluation Team Response [DTSC]:

DTSC: Thank you for your update. We note that staff are dedicating one day per week to addressing the RTC backlog. Please describe the steps the staff takes in terms of phone calls, site visits, emails to follow up on outstanding violations. Are these follow up activities documented in the facility file, or Envision Connect prior to transfer to CERS? Please continue to provide an update on the RTC status of outstanding violations.

Deficiency Progress Update 2: [Enter Update Here](#)

Evaluation Team Response [DTSC]:

5.	DEFICIENCY: CORRECTED	CORRECTIVE ACTION: COMPLETE
	<p>The CUPA is not consistently requiring UST facilities to implement enhanced leak detection (ELD) testing, as required by Health and Safety Code, sections 25292.4 and 25292.5; based on a facilities proximity to public drinking water wells.</p> <p>State Water Board records show the following UST facilities have neither completed the required ELD testing nor submitted a request for reconsideration (RFR) to perform ELD testing application:</p> <ul style="list-style-type: none"> • CERS ID 10256143 • CERS ID 10248088 • CERS ID 10245214/10246396 • CERS ID 10240798 <p>State Water Board has provided the CUPA with copies of the formal notification letters and noncompliance letters to implement required ELD testing.</p> <p>Note: If a UST owner/operator believes they are not within 1,000 feet of a public drinking water well, an RFR application must be submitted to State Water Board. The application form can be found at: http://www.waterboards.ca.gov/ust/eld/index.shtml. Once received from the UST owner/operator, State Water Board will make a final determination whether or not ELD testing is required.</p>	<p>By May 30, 2017, the CUPA will provide CalEPA with a copy of the notification documentation to implement ELD for the UST facilities identified in this deficiency.</p> <p>By August 30, 2017, if ELD testing has not been implemented or the owner/operator has not been granted approval of the RFR, the CUPA shall initiate appropriate enforcement.</p> <p>Once ELD testing has occurred, the CUPA will provide CalEPA with a copy of each facility's test results.</p>

	<p>Note: During the 2017 CUPA evaluation, the CUPA notified the owners/operators of the four (4) UST facility listed above of the requirement to implement ELD testing and provided the facilities with the RFR application.</p>	
<p>Deficiency Progress Update 1:</p> <p>SWRCB and CalEPA were provided with ELD test results for 3 of the 4 sites impacted by the deficiency. The last facility without test results was provided with a letter from SWRCB stating they were not within 1000 feet of a well and LAFD CUPA has determined that ELD testing is not required.</p> <p>LAFD CUPA has met the corrective active of Deficiency #5 and requests the deficiency be corrected.</p>		
<p>Evaluation Team Response [State Water Board]: State Water Board: Deficiency is considered corrected.</p> <p>State Water Board acknowledges the CUPA's Deficiency Progress Update 1. The CUPA is noted as providing the following:</p> <ol style="list-style-type: none"> 1. Copies of Notice of Non-Compliance Letters dated December 19, 2016 showing the CUPA notifying the four (4) UST facilities identified in the deficiency, that ELD testing is required to be completed. 2. Copies of ELD test results for three (3) UST facilities identified in the deficiency showing USTs passing required testing. 3. A copy of the approved request for reconsideration letter whereby State Water Board finds ELD testing is not required for one (1) UST facility identified in the deficiency. <p>State Water Board finds the CUPA has complied with the corrective actions identified in the deficiency, and therefore, consider this deficiency corrected.</p>		
<p>6.</p>	<p>DEFICIENCY:</p> <p>The CUPA is not consistently ensuring that the PA documents HWG RTC information in CERS.</p> <p>Specifically, during an evaluation meeting with the CUPA and PA on January 3, 2017, the PA stated that it had not consistently reported RTC data for a period between 7/1/2013 and 2/24/2014, due to trouble with their data system, and volume of records to be reported.</p>	<p>CORRECTIVE ACTION:</p> <p>By August 30, 2017, the CUPA in consultation with the PA will develop, implement, and provide CalEPA with a plan to ensure inspection, violation, and enforcement information from 7/1/2013 onward is reported to CERS. The Plan will include:</p> <ul style="list-style-type: none"> • A description of a scope of the project; • A timeline for correcting this deficiency. <p>By July 18, 2018, the CUPA will have reported consistent</p>

	inspection, violation, and enforcement information to CERS.
Deficiency Progress Update 1: <u>This update was provided by the Participating Agency Los Angeles County Fire Department:</u> <p>The PA issued 7,173 HWG violations from 7/1/13 and 2/24/14. The PA evaluated the inspection records for the facilities that had open violations during this time frame that did not have a documented RTC date. The PA was able to close 7,147 violations based on documented compliance in the facility record. These violations were manually closed in the PA's Envision Connect database and in CERS. 26 violations remain outstanding (4%) and will be addressed at the next routine inspection. <i>(see attachment)</i></p> <p>Inspection, violation, and enforcement information generated after 2/24/14 to date has already been uploaded into CERS via the CERS Integration Wizard. This information continues to be uploaded into CERS on a weekly basis.</p>	
Evaluation Team Response [DTSC]: DTSC: DTSC appreciates the efforts conducted in order to review all of the past violation information. The spreadsheet indicates that violations were corrected by means of observation or documentation. Please provide us with additional information as to what an observation entails, for example, does that mean a physical follow up inspection and/or the facility sending photos documenting compliance? In terms of documented RTC, what would the PA consider acceptable evidence to demonstrate that a violation has been corrected and documented?	
Deficiency Progress Update 2: Enter Update Here	
Evaluation Team Response [DTSC]:	