

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

405



FROM: Community Health Agency/Department of Environmental Health

SUBMITTAL DATE:
December 13, 2011

SUBJECT: Ratify the Ninth Amendment No. PUARC364 between Decade Software Company, LLC and the County of Riverside Department of Environmental Health

RECOMMENDED MOTION: That the Board of Supervisors:

- 1) Ratify the Ninth Amendment No. PUARC364 between Decade Software Company, LLC and the County of Riverside Department of Environmental Health, with options to renew annually for the life of the system, for the total increased amount of \$164,750 to implement the EnvisionConnect Portal;
- 2) Authorize the Purchasing Agent, in accordance with Ordinance 459, to exercise renewal options based on the availability of fiscal funding and to sign the attached ninth amendment and all future amendments that do not change the substantive terms of the original agreement and prior amendments; and
- 3) Direct and authorize the Auditor-Controller to adjust the budget as specified in Schedule A attached.

(CONTINUED)

FISCAL PROCEDURES APPROVED
PAUL ANGULO, CPA, AUDITOR-CONTROLLER
BY: Samuel Wong 12/13/11
SAMUEL WONG

Steve Van Stockum

Steve Van Stockum, Director
Department of Environmental Health

FINANCIAL DATA	Current F.Y. Total Cost:	\$ 164,750	In Current Year Budget:	No
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	Yes
	Annual Net County Cost:	\$ 0	For Fiscal Year:	11/12

SOURCE OF FUNDS: State of California Environmental Protection Agency grant	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input checked="" type="checkbox"/>

C.E.O. RECOMMENDATION: APPROVE

BY: Debra Cournoyer
Debra Cournoyer

County Executive Office Signature

FORM APPROVED COUNTY COUNSEL
BY: Bruce G. Fordon
DATE: 12/13/11
Departmental Concurrence

Purchasing: Mark Seiler
Assistant Director

Consent Policy
 Consent Policy

Dep't Recomm.:
Per Exec. Ofc.:

Prev. Agn. Ref.: May 17, 2005 3.4 District: All Agenda Number:

ATTACHMENTS FILED
WITH THE CLERK OF THE BOARD

3.17

BACKGROUND:

The Department of Environmental Health (DEH) will implement the EnvisionConnect Portal to improve customer service, reduce administrative costs, streamline communication, and to attain compliance with the mandated electronic data reporting requirements of Assembly Bill (AB) 2286. There are no other companies that offer a Portal service similar to Decade's. The Portal system allows the Participating Agencies such as the cities of Riverside and Corona, as well as the DEH, to collect data electronically from regulated businesses.

The EnvisionConnect Portal is a Web-based front-end system that provides an infrastructure for receiving, publishing, and archiving business client data, and integrates seamlessly with the DEH's existing EnvisionConnect data management system. Therefore, the most cost effective course of action is to acquire the EnvisionConnect Portal, which has been designed to work in conjunction with the existing EnvisionConnect application system.

For the Participating Agencies, the Portal allows data to be temporarily stored within the system before it is combined with DEH's data prior to being sent to the State's electronic system. The Portal facilitates the exchange and flow of information between the cities, County, and State.

The contract will be renewed for the life of the system, renewable in one year increments. Per the State of California requirement, the system must be fully implemented by January 1, 2013. The project will commence as soon as the Ninth Amendment is signed by both parties.

PRICE REASONABLENESS:

Total amount of \$165,000 is paid for by the State of California through CAL/EPA and CUPA Forum Grant. Cost for EnvisionConnect Portal Set-up and Configuration Fees, ninety thousand dollars (\$90,000), EnvisionConnect Portal First Year License and Support Fees, forty thousand dollars (\$40,000), Data Remediation Services Fees, thirty-four thousand seven hundred fifty dollars (\$34,750). Both CAL/EPA and the CUPA Forum Board have awarded funding to the Riverside County Department of Environmental Health to cover all project expenses. Decade Software offered the same pricing to the County of Riverside as other agencies for the same product.

FINANCIAL:

There is no additional impact on the General Fund as the State of California Environmental Protection Agency is providing the entire funding for this Regional Web Portal.

A prior Form 11, Agenda 2.2, dated 11/22/2011, granted Board of Supervisors approval for the State of California Environmental Protection Agency grant acceptance. The amount of \$165,000 has been estimated as the grant amount to be received in FY 11/12.

SCHEDULE A

**BUDGET ADJUSTMENT
COMMUNITY HEALTH AGENCY
DEPARTMENT OF ENVIRONMENTAL HEALTH
FISCAL YEAR 2011/2012**

INCREASE IN APPROPRIATIONS

10000-4200400000-525440 Professional services \$164,750

TOTAL INCREASE IN APPROPRIATIONS \$164,750

INCREASE IN ESTIMATED REVENUE

10000-4200400000-751680 CA-State Grant Revenue \$164,750

TOTAL INCREASE IN ESTIMATED REVENUE \$164,750

Date: November 28, 2011
From: Steve Van Stockum, Director Department/Agency: Environmental Health
To: Board of Supervisors/Purchasing Agent
Via: Purchasing Agent
Subject: Sole Source Procurement; Request for EnvisionConnect Portal from Decade Software

The information below is provided in support of my Department requesting approval for a sole source. Outside of a duly declared emergency, the time to develop a statement of work or specifications is not in itself justification for sole source.

1. Supply/Service being requested:

Riverside County Community Health Agency - Department of Environmental Health will implement the EnvisionConnect Portal (aka Regional Web Portal) to improve customer service, reduce administrative costs, streamline communication, and to attain compliance with the mandated electronic data reporting requirements of Assembly Bill (AB) 2286.

2. Supplier being requested:

Decade Software Company, LLC, 1195 West Shaw Avenue Fresno, CA 93711, 800.233.9847

3. Alternative suppliers that can or might be able to provide supply/service:

There are no alternative suppliers. The Riverside County Department of Environmental Health has an existing contractual relationship with the vendor, Decade. The Portal service is offered as part of a package by Decade. The Decade EnvisionConnect application is the system of record for the Riverside County Department of Environmental Health.

4. Extent of market search conducted:

Internet and calls to other counties/agencies.

5. Unique features of the supply/service being requested from this supplier, which no alternative supplier can provide:

There are no other companies that offer a Portal service similar to Decade's. The Portal system allows the Participating Agencies such as the cities of Riverside and Corona, as well as the County of Riverside Department of Environmental Health (DEH), to collect data electronically from regulated businesses. The EnvisionConnect Portal is a Web-based front-end system that provides an infrastructure for receiving, publishing, and archiving business client data, and integrates seamlessly with the COUNTY's existing EnvisionConnect data management system. Therefore, the most cost effective course of action is to acquire the EnvisionConnect Portal, which has been designed to work in conjunction with the existing EnvisionConnect application system.

For the Participating Agencies, the Portal allows data to be temporarily stored within the system before it is combined with DEH's data prior to being sent to the State's electronic system. The Portal facilitates the exchange and flow of information between the cities, County, and State.

6. Reasons why my department requires these unique features and what benefit will accrue to the county:

The Portal system offered by Decade insures that the County of Riverside complies with Assembly Bill (AB) 2286; which by State law, must be implemented by January 1, 2013. In the long term, the Portal will increase efficiency of the business process by eliminating paperwork processing. Additionally, going from a paper based system to an electronic one helps to reduce manual data entry errors, and administrative burden to DEH.

7. Price Reasonableness including purchase price and any ongoing maintenance or ancillary costs from the supplier:



Total amount of \$164,750 is paid for by the State of California through CAL/EPA and CUPA Forum Grant. The initial/one-time Set-Up Fee is \$90,000. There is a \$35,000 charge for data remediation (editing data from the current system, to conform to the data formatting requirements of the new system). The EnvisionConnect Product License Fee is \$40,000 initially (and for subsequent year's renewal). Both CAL/EPA and the CUPA Forum Board have awarded funding to the Riverside County Environmental Health Department to cover all project expenses. Decade Software offered the same pricing to the County of Riverside as other agencies for the same pricing to the County of Riverside as other agencies for the same product.

8. Does moving forward on this product or service further obligate the County to future similar contractual arrangements or any ongoing costs affiliated with this sole source? (Maintenance, support, or upgrades, if so, please explain).

On an annual basis, contract renewal is intended for the EnvisionConnect Portal. Contract renewal includes an annual fee to cover the administration and license for a Riverside County Certified Unified Program Agency (CUPA) Regional Portal. Therefore, yes, County Environmental health will require services maintenance.

9. Period of Performance:


The contract will be renewed for the life of the system, renewable in one year increments. Per the State of California requirement, the system must be fully implemented by January 1, 2013. The project will commence as soon as the agreement is signed by both parties.

  12/12/11
Department Head Signature Date

Purchasing Department Comments:

Approve Approve with Condition/s Disapprove

Not to exceed: \$ 164,750 One time Annual Amount through _____

 12-12-11 13-323
Purchasing Agent Date Approval Number
(Reference on Purchasing Documents)

**NINTH AMENDMENT TO THE AGREEMENT
WITH
DECADE SOFTWARE COMPANY, LLC
(REIMS)**

That a certain Agreement between the County of Riverside (COUNTY) and Decade Software Company, LLC (CONTRACTOR), awarded per RFP #PUARC364 and approved by the Board of Supervisors on May17, 2005, Item 3.4, amended for the first time on September 21, 2005, amended for the second time on June 15, 2006, amended for the third time May 30, 2007, amended for the fourth time on May 15, 2008, amended for the fifth time on June 1, 2009, amended for the sixth time on July 1, 2010, amended for the seventh time on June 30, 2011, amended for the eighth time on July 1, 2011, is hereby amended for the ninth time effective December 20, 2011 as follows:

- To incorporate Attachment A, Statement of Work, attached hereto.
- To increase compensation for Fiscal Year 2011/2012 by one hundred sixty four thousand seven hundred fifty dollars (\$164,750), inclusive of the following: EnvisionConnect Portal Set-up and Configuration Fees, ninety thousand dollars (\$90,000), EnvisionConnect Portal First Year License and Support Fees, forty thousand dollars (\$40,000), Data Remediation Services Fees, thirty-four thousand seven hundred fifty dollars (\$34,750).
- To incorporate Attachment B, Fees and Payments, attached hereto.
- All other terms and conditions of this Agreement are to remain unchanged.

IN WITNESS WHEREOF, the Parties hereto have caused their duly authorized representatives to execute this Amendment.

COUNTY

CONTRACTOR

By _____

By _____

Richard R. Hai,
Procurement Contract Specialist

Darryl Booth,
Chief Technology Officer

Date _____

Date _____

FORM APPROVED COUNTY COUNSEL

BY: Bruce G. Fordon 12/10/11
BRUCE G. FORDON DATE

ATTACHMENT A
STATEMENT OF WORK

1. PROJECT OVERVIEW

1.1 Riverside County Community Health Agency (COUNTY) will implement the EnvisionConnect Portal (also known as Riverside CUPA Regional Portal, also known as Portal) to improve customer service, reduce administrative costs, streamline communication, and attain compliance with Assembly Bill (AB) 2286 Certified Unified Program Agency (CUPA) electronic reporting requirements mandate.

1.2 This document represents a Statement of Work (SOW) that outlines the effort involved in Data Remediation Services and a successful EnvisionConnect Portal (Portal) implementation. Implementation is defined as the process of software installation, define and customize business workflows, Portal design and development, systems configuration, testing, training and acceptance. In addition, a GAP Analysis will be performed per State data exchange requirements standard.

1.3 The Portal is a browser-based front-end that provides an infrastructure for receiving, publishing, and archiving business client data and integrates seamlessly with COUNTY's existing EnvisionConnect data management system.

1.4 For example: *The authorized operator (User) may login to the Portal and retrieve the current business plan data and pertinent information, then may make revisions by updating the current plan and submit by clicking on the appropriate button. If no changes are needed, the User would simply resubmit the same package. The User is presented with a page that shows the differences between the old and new submittal to review any changes. The Portal e-mails COUNTY staff notifying them of the submission. COUNTY staff can use the Portal to e-mail the business/facility user a rejection message with the required changes needed for a successful resubmission. Once the submission is approved, the changes are then migrated back to EnvisionConnect, which is then updated.*

2. TECHNICAL REQUIREMENTS OVERVIEW

2.1 Server Location and Configuration:

Server and related infrastructure provisioning, maintenance, backup and recovery will conform to COUNTY and Agency policies, procedures and standards. The COUNTY will host the Portal at the COUNTY Data Center. A proposed Infrastructure Design is shown in Exhibit F and is attached hereto and incorporated herein. The CONTRACTOR will review and validate:

- 2.1.1 system specifications
- 2.1.2 application installation and configuration specifications
- 2.1.3 backup, security and maintenance plans
- 2.1.4 data, application and system recovery plans

2.2 Server Hardware Requirements:

CONTRACTOR's recommended configuration for an enterprise deployment is as follows:

Dell or Equivalent

PowerEdge R610

12GB Memory (6x2GB), 1066MHz Dual Ranked RDIMMs for 2 Processors

Embedded Broadcom, GB Ethernet NICS with TOE

X5560 Xeon Processor, 2.8GHz 8M Cache, 6.40 GT/s QPI, TurboHT

PowerEdge R610 Heat Sinks for 2 Processors

X5560 Xeon Processor, 2.8GHz 8M Cache, Turbo, HT, 1333MHz Max Mem

HD Multi-Select

PERC H700 Integrated RAID Controller, 512MB Cache

RAID 1 for H700, PERC 6/I, H200 or SAS 6/iR Controllers

250GB Available Storage Capacity for Data Files

DVD+/-RW, SATA, INTERNAL

Operating System

Recommended Linux Fedora Core 9

Most flavors of Windows and Linux supported

Server Software

Implementation will include the installation/configuration of the following:

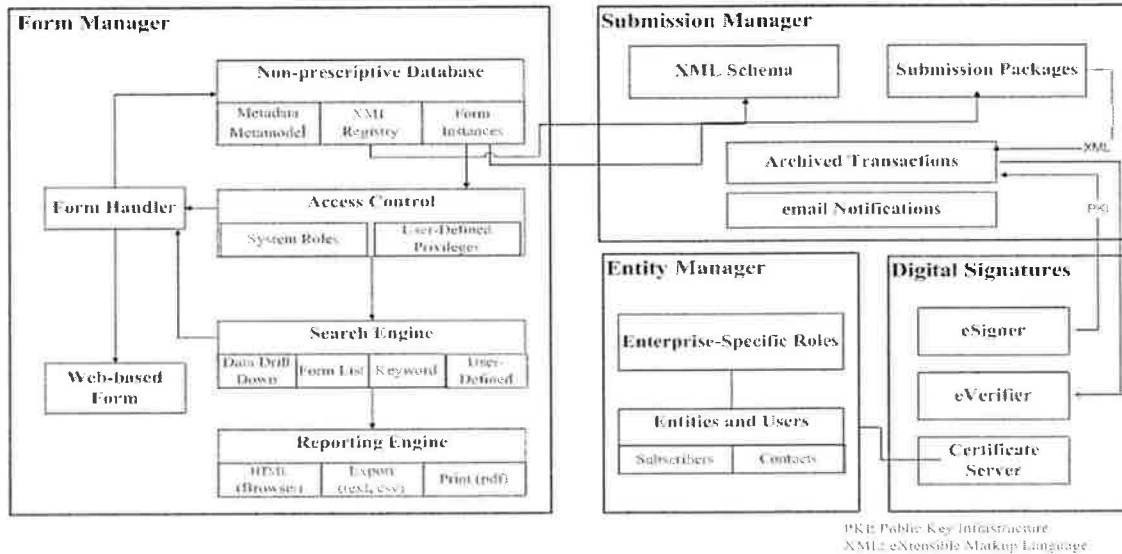
Apache HTTP Server

Apache Tomcat

PostgreSQL

2.3 Technical Framework:

The Portal does not have a fixed data schema and it does not store data in a relational database structure. Instead, it has no predefined schema and it stores data as metadata. A metadata metamodel allows for a fully customized, scalable, and extendible data structure. Second, the Portal does not contain a fixed business logic or application layer. Every metadata element is associated with XML tags in the Portal namespace. The database therefore acts as an XML registry where new forms can be defined, field elements can be added and deleted, and the visual display of any form can be enhanced without the need for any additional programming and without the need to modify the core database structure.



2.4 System Access:

Each participant in the Portal (i.e., COUNTY, City of Riverside and City of Corona) will receive an agency administrator account sufficient to create/update/suspend accounts, at minimum. The participant shall establish forms and review/reject/accept submissions (for the programs they manage).

Physical access to a system or remote console access to COUNTY systems shall follow all COUNTY and Agency policies and procedures. The COUNTY will provide the CONTRACTOR with per user VPN and system accounts. The CONTRACTOR shall be granted remote console access via a VPN connection when the COUNTY deems it necessary and/or per a mutually agreed to schedule. Further specifics regarding VPN access schedules and system account privileges shall be established during the implementation phase. However, CONTRACTOR access rights will under all circumstances conform to COUNTY policy; any restrictions related to policy are non-negotiable.

2.5 Synchronization with “Back Office” Systems:

The COUNTY will provide each Participating Agency (PA) that wishes to receive data from the Portal with a VPN tunnel that connects the Portal to their back office system. The VPN connection may be “always on” or it may be time limited as required by the PA. Each tunnel will be created and operated in accordance with COUNTY and Agency policies and procedures.

The CONTRACTOR is responsible for ensuring that only data pertaining to a given PA is sent to that PA’s back office system. In addition, the CONTRACTOR is entirely responsible for ensuring that the transmission is one-way only, from the Portal server to the PA’s back office system. Once the data is transferred to the PA’s back office system, the PA is entirely responsible for managing the transferred data.

2.6 Synchronization with the COUNTY Portal:

All operator submissions are staged in the Portal database until reviewed and approved by the regulator(s) according to configuration. Only approved submissions are added to the EnvisionConnect database. Data Synchronization with the COUNTY Portal is accomplished using a Data Transformation Services (DTS) package which is driven by metadata associated with each data element. The metadata provides the EnvisionConnect table name, field name, key field name, and key value. An example follows:

Metadata Element	Sample Value
Title 27 Data Dictionary Field	Business Name (3)
UPCF Form	Business Activities
EnvisionConnect Table	TB_CORE_FACILITY
EnvisionConnect Field	FACILITY_NAME
EnvisionConnect Table Key Field	FACILITY_ID
EnvisionConnect Key Field Value	FA0000034

The metadata ties a Portal form/field to an EnvisionConnect table/field. This is the basis of the DTS agent’s actions.

2.7 System Logging and Audit Trails:

The Portal logs changes generated by each user account. Further, the system tracks each page/form displayed. When submissions are approved or rejected, those events are also logged. Additionally, outgoing e-mails are logged. The synchronization transactions with EnvisionConnect and “back office” systems are logged. In total, the sum of all events necessary to recreate a series of changes/navigation culminating in a transaction is well-documented by the system. In EnvisionConnect, edits introduced through the Portal shall carry a specific “Entered By” and “Updated By” values.

2.8 Staging Data with CUPA/Synchronization with CERS:

EnvisionConnect shall receive all submissions and inspection/enforcement data from the Portal to be transmitted to the California Electronic Reporting System (CERS/CERS2). EnvisionConnect shall also receive all approved submissions and inspection/enforcement data from CERS. EnvisionConnect shall be considered the system-of-record.

2.9 File Uploads/File Formats:

The Portal accommodates customer file uploads for site maps, construction plans, letters of certification, and other documents which are required but are not part of the Cal/EPA Data Standard. Attachment file size shall be limited, based on configuration following COUNTY’s written specification, to match limits implemented by CERS2. Files uploaded by the user are renamed, linked to a master record, and saved on the Portal server. The ability to see/review uploaded files requires that the reviewer’s PC has the software required to view the material. It is

1 the responsibility of each PA to provide their users with all software necessary to interact with
2 these uploaded files (e.g., Acrobat Reader (or other) for PDFs, MS Paint (or other) for JPGs,
3 etc.). A reviewer who lacks the necessary reader software can only download the file(s) they
4 have rights to. For this reason, acceptable file formats and sizes shall be established by the
5 COUNTY during implementation. File uploads from the Portal may be synchronized with
6 EnvisionConnect where they will be loaded as Attachments to the appropriate master record.
7 The Portal maintains the document history. EnvisionConnect provides the system of record for
8 the current approved submission.

7 2.10 Seeding the Portal:

8 Seeding describes the process of loading existing EnvisionConnect data onto the Portal. Seeding
9 is not mandatory, but it's a convenience for business users and automatically binds the Portal
10 records to the corresponding records in EnvisionConnect. The DTS package is responsible for
11 synchronizing EnvisionConnect and Portal data. This same process shall be used for seeding. It
12 is acceptable for the COUNTY to identify one or more filters which limit which records are
13 staged in the Portal. For example, the COUNTY may indicate that only facilities where the
14 Owner's password has been assigned shall be visible to the Portal.

13 2.11 Special Consideration for CUPAs with PAs:

14 For CUPAs with one or more PAs, it is necessary to stage the data in EnvisionConnect where it
15 will be transmitted to the Portal (assuming it meets DTS filters). Alternately, the PA can add its
16 specific data elements. For the COUNTY, where the City of Riverside PA has already provided
17 access to its businesses and already binds Portal records to its "Back Office" system, COUNTY,
18 City of Riverside, and the CONTRACTOR shall enter into a reconciliation project. The design
19 and scope of that project shall be determined during the implementation process. See Exhibit D
20 for the Process Diagrams and Exhibit E and F for the Network Architecture.

19 **3. PROJECT SCOPE AND DELIVERABLES:**

21 3.1 Portal System Deliverables:

22 The following Portal features will be delivered as part of the scope of this project:

23 3.1.1 Online Form Submission:

24 A. Allow authorized regulated facility personnel and any designated third party
25 users to submit a new plan or update a previously submitted and approved plan.

26 B. The Portal will include a Help System that is integrated into the online forms.
27 The Help System consists of links that, when clicked, will open a Help page that is
28 relevant to the part of the online form containing the link. The COUNTY is
responsible for providing the CONTRACTOR with the text for a Help page and for

1 identifying the place on the form where the link is to go. The Vendor is responsible
2 for creating the links and the Help page for each link.

3 C. Provides an interface where business owners can grant access to third party
4 users. Third party users can also complete a "Login Request Form" and request
5 access from the COUNTY. The third party users must upload an authorization
6 letter from the Business Owner showing the business owner approves the third
7 party user's request. Third party users can use the same password for more than one
8 account.

9 D. Provide an interface where the COUNTY, a PA and/or regulated business
10 owner can review all accounts authorized to interact with a facility's plan.

11 3.1.2 E-mail Routing and Notification

12 3.1.3 Submission Comparison and Review

13 3.1.4 Reports:

14 User initiated print-outs of:

15 A. Business Activities

16 B. Business Owner/Operator Identification

17 C. Operating Permit Application-Facility Information

18 D. Operating Permit Application-Tank Information

19 E. Certification of Installation/Modification

20 F. Monitoring Plan

21 G. Recyclable Materials Report

22 H. Hazardous Materials Inventory-Chemical Description

23 I. Onsite Hazardous Waste Treatment Notification-Facility Page

24 J. Onsite Hazardous Waste Treatment Notification-Unit Page

25 K. Conditionally Exempt Small Quantity Treatment (CESQT) Page

26 L. Conditionally Exempt-Specified Wastestreams (CESW) Page

27 M. Conditionally Authorized (CA) Page

28 N. Permit By Rule Page

O. Conditionally Exempt-Limited (CEL) Page

P. Certification of Financial Assurance

Q. Remote Waste Consolidation Site Annual Notification

R. Hazardous Waste Tank Closure Certification

S. Emergency Response Plan

T. Employee Training Program

U. Submission Summary. The COUNTY can define and print a Submission.

Summary report that the business can also print out after the submission has
been approved. This BEP Summary can contain the approval date, next
renewal date, BEP summary information and even invoicing information.

- V. Site maps
- W. Transaction history audit trail

3.1.5 Integration with EnvisionConnect:

- A. Existing EnvisionConnect facility records are available to the Portal without an additional data entry.
- B. The COUNTY is required to key in new Owner, Facility, General Health Program, Business Plan and Permit records for each regulated facility subject to Business Plan regulations.
- C. Regulated business owners are, once authorization is provided, to key in chemical inventory records.
- D. Upload Digital Images and Documents. Digital images include site maps in formats such as PDF and JPEG.

4. **LICENSED PRODUCTS:**

COUNTY is licensed to the unlimited use of the Portal for the checked features and forms below. The COUNTY plans to use CUPA Forms in section 4.2 and section 4.5 for the scope of this project, with option to use the other checked features and forms below. CONTRACTOR will periodically make available upgrades and enhancements to EnvisionConnect Portal products. CONTRACTOR will provide the necessary instructions, training support and software tools to the COUNTY to effect the upgrade and modifications as part of the annual maintenance support cost/fee as reference in Attachment B:

Selected
<input type="checkbox"/> 4.1 Environmental Health Forms: 4.1.1 Complaints 4.1.2 Service Requests 4.1.3 Plan Reviews 4.1.4 Applications for Permit
<input checked="" type="checkbox"/> 4.2 CUPA Forms: 4.2.1 Business Activities 4.2.2 Business Owner/Operator Identification 4.2.3 Operating Permit Application-Facility Information 4.2.4 Operating Permit Application-Tank Information 4.2.5 Certification of Installation/Modification 4.2.6 Monitoring Plan 4.2.7 Recyclable Materials Report 4.2.8 Hazardous Materials Inventory-Chemical Description 4.2.9 Onsite Hazardous Waste Treatment Notification-Facility Page 4.2.10 Onsite Hazardous Waste Treatment Notification-Unit Page

- 4.2.11 Conditionally Exempt Small Quantity Treatment (CESQT) Page
- 4.2.12 Conditionally Exempt-Specified Wastestreams (CESW) Page
- 4.2.13 Conditionally Authorized (CA) Page
- 4.2.14 Permit By Rule Page
- 4.2.15 Conditionally Exempt-Limited (CEL) Page
- 4.2.16 Certification of Financial Assurance
- 4.2.17 Remote Waste Consolidation Site Annual Notification
- 4.2.18 Hazardous Waste Tank Closure Certification
- 4.2.19 Emergency Response Plan
- 4.2.20 Employee Training Program
- 4.2.21 Hazardous Waste

4.3 Public Disclosure Forms:

4.4 Online Fee Payment:

- 4.4.1 Online Posting of Invoices from System
- 4.4.2 Payment Processing through COUNTY's Merchant Bank
- 4.4.3 Update System Invoice Record with Posted Payments

4.5 Use on Remote Field Hardware:

- 4.5.1 Internet-independent data access on two (2) laptop computers
- 4.5.2 Daily synchronization of data from server

5. PORTAL SERVER DEPLOYMENT:

Selected

5.1 COUNTY-Hosted Server:

COUNTY will provide and maintain all server hardware and Operating System software required for the Portal. COUNTY will provide CONTRACTOR with remote access to the server for routine application maintenance.

5.2 CONTRACTOR-Hosted Server:

CONTRACTOR will host the COUNTY's server and provide all hardware and software maintenance services required for the Portal. Data back-up services will also be provided.

6. CONTRACTOR SERVICE DELIVERABLES:

CONTRACTOR will provide the following services/deliverables both onsite and remotely:

6.1 Project Management:

- A. Joint Development of a detailed project plan with the COUNTY Project Manager.
- B. Prepare weekly status report and conduct weekly project team meeting.

- C. Prepare monthly summary report and conduct project Steering Committee meeting.
- D. Update and submit a weekly issue log to the project team at least one business day in advance of the weekly project team meeting.
- E. Provide guidance to the COUNTY and ensure the successful completion of planning, testing and implementation of the Portal and Title 27 Data Remediation Services.
- F. Ensure the design/development/implementation of the Portal meets the COUNTY needs.
- G. Ensure the EnvisionConnect database is compliant with the State data standards.
- H. Ensure successful completion of the data exchange processes between the Portal and EnvisionConnect and then to the State CERS system or vice versa.

6.2 Training:

CONTRACTOR will provide the COUNTY two (2) online training events for support staff, up to four (4) hours each.

Portal training is delivered onsite and remotely. Remote training is conducted over the Internet using web conferencing tools and telephone services. Prior to each training session, CONTRACTOR will deliver a training agenda to COUNTY.

Two (2), onsite training sessions (up to four (4) hours each) will be provided to the regulated business community. The COUNTY is responsible for providing the training facility and notifying the regulated business community of the two (2) training events prior to their occurrence.

Training schedules will be coordinated with COUNTY. CONTRACTOR requires a prior notice to ensure trainer availability. Training materials will be provided by the CONTRACTOR.

- 6.3. Testing: CONTRACTOR will provide a Test Plan scenario to the COUNTY for exercising all paths through the application and work flow. COUNTY and CONTRACTOR will joint effort on beta testing with public user.

- 6.4 Implementation: CONTRACTOR and the COUNTY will work together to complete the following deliverables (but not limited to) that will ensure the successful implementation of the Portal and Data Exchange:

- A. Provision Server Hardware.
- B. Install and configure Software Components.
- C. Portal Server to EnvisionConnect Server Networking Services.
- D. Configure Web-Server.

- E. Server URL, DNS and SSL Configuration.
- F. Create Portal Submission Forms, including the step of determining the fields the user requires for data entry.
- G. DTS with EnvisionConnect Server and Databases.
- H. Portal Requirements, Design and Customization/Development
- I. Define User Roles and Privileges.
- J. Work Flow Design / Submission Review Criteria.
- K. Design and Develop E-mail Notifications.
- L. Final Server Configuration; External Firewalls and Security Policies; Database backup procedures.
- M. Go Live. Go Live is reached when:
 - a. The data in the Portal is living information that represents factual records, and . . .
 - b. The information exchange between Portal, EnvisionConnect, and State CERS (and vice-versa) is working properly.

6.5 Data Remediation Services Deliverables

6.5.1 Data Assessment – Gap Analysis

The purpose of the CONTRACTOR performing the E-Reporting Capacity Gap Analysis is to establish the viability of the COUNTY’s existing data in comparison to the Title 27 Data Dictionary. CONTRACTOR will ensure a successful data exchange or integration with data obtained elsewhere (e.g., US EPA Cal/EPA Proposed Scanning/OCR Project).

- A. CONTRACTOR will obtain a current copy of the CUPA’s EnvisionConnect production database
- B. CONTRACTOR will mount CUPA’s EnvisionConnect production database in a dedicated test environment
- C. CONTRACTOR will catalog/count active records in the CUPA programs
- D. CONTRACTOR will identify records shared among other (i.e., Non-CUPA) programs
- E. CONTRACTOR will design and execute a “Data Check” script which will catalog:
 - 1. Missing required fields
 - 2. Data values that do not adhere to the CUPA Data Dictionary (e.g., valid values)
 - 3. Broken referential integrity and “orphaned” records
 - 4. Illogical (not necessarily incorrect) data
 - 5. Active records that appear to be inactive based on recent activities
- F. CONTRACTOR will deliver a “E-Reporting Capacity Gap Analysis Document” to COUNTY and Cal/EPA

6.5.2 Data Remediation – Data Remediation Plan

The results of E-Reporting Capacity Gap Analysis may not convey an obvious course of action. COUNTY CUPA must take care to preserve historical regulatory/enforcement data, accurate billing, financial history, and time tracking. If the COUNTY CUPA is using the EnvisionConnect Portal, the interaction with the State CUPAs (CERS) Portal must also be considered.

CONTRACTOR will collaborate with the State CUPA to calculate an optimal response to the E-Reporting Capacity Gap Analysis.

The output of this effort will be a Data Clean-up Plan. The Data Clean-up Plan will describe detail about which values must be populated, changed, updated, etc. and will include a corresponding Test Plan to ensure overall integrity is maintained.

It should be noted that the State CUPA or Cal/EPA project managers may make these arrangements through other resources.

6.5.3 Data Remediation – Scripting Services

In many cases, the Data Clean-up Plan will isolate activities that can be conducted en masse via custom SQL scripting. For example, if the State CUPA has been coding the Tanks’ Product Code as “X” and “W” and the valid response should have been “U” for those reported values, then the SQL Scripting can change all values of “X” and “W” to “U” (within criteria established in the Data Clean-up Plan).

In this activity CONTRACTOR will write custom SQL commands which will make changes across the CUPAs database. CONTRACTOR will establish a test environment, the CUPA will confirm the changes as acceptable, and then apply the changes to the production environment.

It should be noted that the State CUPA or Cal/EPA project managers may make these arrangements through other resources.

6.6 Data Exchange with COUNTY PAs: City of Riverside and City of Corona).

CONTRACTOR is responsible for the merging and consolidation of the City of Riverside PA and City of Corona PA with the COUNTY Portal.

6.7 Acceptance Sign-Off Documents: CONTRACTOR and COUNTY must mutually agree for final acceptance.

6.8 EnvisionConnect Portal Support:

CONTRACTOR shall provide EnvisionConnect Portal support as follows but not limited to:

- A. Ensure the EnvisionConnect Portal content is current.
- B. Test and fix any identified functionality issues.

- C. Obtain COUNTY approval before implementing any changes, repairs, software patches and fixes to.
- D. Ensure timely resolution of support issues that need third party/sub-contractors and ensure that issues are resolved as per agreed time frame with COUNTY.
- E. COUNTY may have option to contact third party vendors directly.
- F. All other terms and conditions of this Agreement are to remain unchanged. Refer to Section 11. "Maintenance Support".

7. COUNTY DELIVERABLES:

- 7.1 Provide COUNTY resources for the Project Team
- 7.2 Onsite workspace for CONTRACTOR Project Team
- 7.3 Required Hardware and Network Infrastructure
- 7.4 Required Network Access
- 7.5 Training Facility-Office spaces sufficient to conduct training for the intended number of students
- 7.6 Current paper-based Forms/Applications
- 7.7 Portal Design and workflow Requirements
- 7.8 Perform User Acceptance Testing
- 7.9 Business Outreach and communication

8. **PROJECT SUMMARY:**

8.1 Remote Project Kick-Off Meeting:

The Portal implementation will commence with a remote Project Kick-Off Meeting. During this introductory conference call the following will occur:

- 8.1.1 Introduce Project Team Members
- 8.1.2 Review Services and Procedures to ensure understanding of duties, roles and responsibilities.

8.2 Sample Project Plan:

The table below outlines the high-level tasks involved in a successful EnvisionConnect Portal implementation. This serves as a starting point and will be refined as the project commences and delivered to the COUNTY as a formal project plan in the form of a project backlog list of tasks. Task 1-4 can be accomplished before contract signing.

Task	Description	Estimated Duration	Responsible Resource	Order	Elapsed Time
1.	Provision Server Hardware	N/A	CONTRACTOR	1	N/A
2.	Install and Configure Software Components	N/A	CONTRACTOR	2	N/A
3.	Portal Server to EnvisionConnect Server Networking Services	3 weeks	COUNTY and CONTRACTOR	2	
4.	Server URL, DNS and SSL Configuration	N/A	COUNTY and CONTRACTOR	2	3 weeks
5.	Create Portal Submission Forms, including the step of determining the fields COUNTY requires for data entry	3 weeks	COUNTY and CONTRACTOR	3	6 weeks
6.	Data Transformation Services with EnvisionConnect Server and Databases	1 week	COUNTY and CONTRACTOR	4	7 weeks
7.	Portal Requirements and Design	1 week	COUNTY and CONTRACTOR	4	
8.	Define COUNTY Roles and Privileges	2 weeks	COUNTY and CONTRACTOR	5	
9.	Submission Review Criteria	2 weeks	COUNTY and CONTRACTOR	5	
10.	Email Notifications	2 weeks	COUNTY and CONTRACTOR	5	9 weeks
11.	Beta Test (By public users)(Portal is functional by this time) <i>(Recommended to have their beta testers lined up ahead of time to reduce the duration needed for testing.)</i> . **Could reduce to 1 week if beta testers were ready to test ahead of time.	3 weeks **	COUNTY and CONTRACTOR	6	12 weeks
12.	Final Server Configuration; External Firewalls and Security Policies; Database backup procedures.	1 week	COUNTY and CONTRACTOR	7	
13.	Training	1 week	COUNTY and CONTRACTOR	7	13 weeks
14.	Go Live				

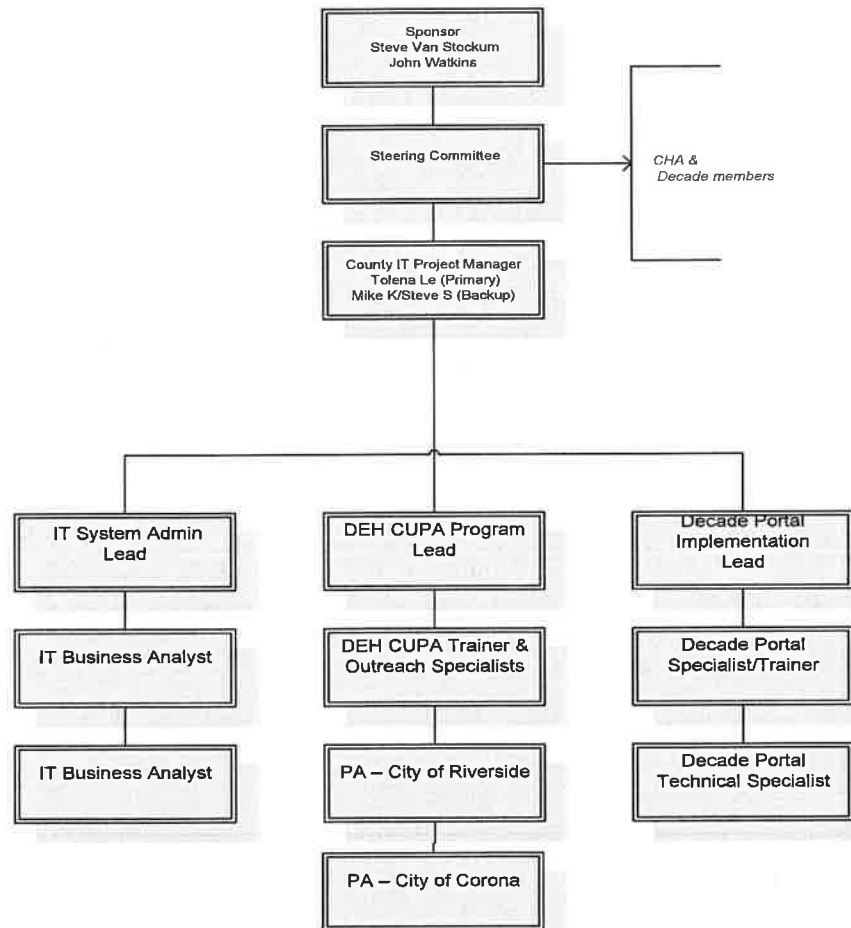
8.3 GO LIVE:

Upon completion of validation and acceptance testing, the COUNTY will be ready to “Go Live” with the Portal in a production environment. “Go live” is defined as the point

1 in time when the COUNTY data is used for production purposes. CONTRACTOR will
2 consider the COUNTY in a state of “go live”, or when the Portal is functioning
3 uninterrupted in production to twenty (20) consecutive business days, before
4 transitioning to support status.

5 **9. PROJECT ORANIZATION:**

6 The organization chart below is for the purposes of streamlining communications
7 regarding to this project. This organizational chart shall also be used to resolve and to
8 escalate any issues that may occur within the confines of the project. Initial level
9 escalation will be with the COUNTY Project Manager. The COUNTY and
10 CONTRACTOR project teams are required to report any related issues, concerns and
11 statuses to the COUNTY project manager. Any issues or concerns that remain
12 unresolved at this level will be elevated to the COUNTY Steering Committee.



9.1 Project Team:

Successful completion of this project will require ongoing communication and coordination between CONTRACTOR and COUNTY Project Teams. The following tables list a high-level description of the roles and responsibilities of the key staff from both teams that will be working together on the completion of the System implementation.

9.2 CONTRACTOR Project Team:

Role/ Responsibilities

1. CONTRACTOR Portal Implementation Lead: TBD

They have overall responsibility for success of the Portal implementation. They are part of the project team. They are the CONTRACTOR Portal Implementation point of contact. They oversee the Portal Implementation and Data Remediation Services. They coordinate, schedule and manage resources and deliverables from the CONTRACTOR side. They conduct the needs analysis and configuration efforts. They schedule and attend onsite and remote meetings/activities. They directly coordinate with COUNTY Project Manager. They deliver Training.

2. CONTRACTOR Portal Specialists: TBD

They have overall responsibility for the delivery of the Portal product. They are part of the project team. They are the product expert for the COUNTY. They provide and deliver technical and Portal training to the COUNTY staff and PAs. They assist with the implementation through design, develop, test, train and delivery of the product

3. CONTRACTOR Portal Technical Specialists: TBD

They have overall responsibility for infrastructure design and set up guidance for the COUNTY. They are part of the project team. They provide technical support to the COUNTY. They assist with server setup, security, firewall, database and network. They provide input to the design and implementation of the Portal integration with EnvisionConnect. They troubleshoot system malfunctions and connectivity issues. Perform data assessment (Gap Analysis), data remediation plan and data scripting services for data exchange implementation to be compliant with the State standard.

9.3 COUNTY Project Team:

Role/ Responsibilities

1. COUNTY IT Project Manager:

They have overall responsibility for the project’s success and report to the Steering Committee. They manage overall project scope, cost, schedule, quality, risk and contract. They serve as the central point of communication for all Project Team members and the Steering Committee members. They provide status reports, manage risks/issues, and escalate them to the Steering Committee if they cannot be resolved within the Project Team level. They manage and monitor project contract. They develop, monitor, and maintain the detailed project schedule for the project. They communicate and maintain project progress and meetings and status reports.

2. COUNTY CUPA Program Lead:

They have overall responsibility for the rollout to all permitted facilities (approx. 7000) within COUNTY. They are part of the project team. They are the subject matter experts for the COUNTY CUPA programs and CERS. They develop, manage and monitor grant applications. They act as a liaison for the State, PAs, and other stakeholders on the Portal communications and updates. They ensure and validate the Portal requirements are met for AB 2286 requirements. They provide input to the design and implementation of the Portal. They coordinate user training, testing and sign-off User Acceptance Testing on behalf of the Department of Environmental Health (DEH). They administer account setup (username and password) and approve valid users for each facility.

3. COUNTY IT Business Analyst:

They have overall responsibility for Portal implementation, testing, operational support and training. They are part of the project team. They develop and support documentations within their areas of responsibilities. They assist and support with the Portal design and implementation of the Portal forms. They are part of the training and testing processes with DEH staff. They serve as technical advisors to DEH CUPA programs and Portal users.

4. COUNTY IT System Admin Lead:

They have overall responsibility for infrastructure design and set up. They are part of the project team. They lead, coordinate and provide technical oversight and guidance relative to the COUNTY Network. They assist and setup server, security, firewall, database and network. They provide input to the design and implementation of the Portal integration with EnvisionConnect. They troubleshoot system malfunctions and connectivity issues.

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5. COUNTY Trainer and Outreach Specialist:

They have overall responsibility for communication and training for all permitted facilities. They are part of the project team. They develop public information and communication such as handouts, flyers and training materials to all permitted facilities. They administer account setup (username and password) and approve valid users for each facility. They develop internal processes and procedures for supporting the Portal.

9.4 Progress Reporting and Communications:

The completion of this project will require continual communication between CONTRACTOR and COUNTY staff. CONTRACTOR shall track, document, and communicate project status to the COUNTY on a regular basis.

9.5 Status Meetings and Status Reports:

Weekly meetings will be led by the Portal Implementation Specialist. These are brief meetings during which each team’s progress is explained, upcoming work is described, and impediments are raised.

In the event of project delays, the cause of delay will be identified via email to all team members. Project delays are defined as any circumstance or lack of action from either party that would cause a delay in the project of more than one (1) week.

9.6 Additional Service Requests:

Project changes that impact the cost or the method of implementation will be managed through documented Professional Service Requests (PSR). A PSR will be delivered to COUNTY when there is a request for additional project services that will potentially result in additional fees. See Exhibit C for an example.

PSRs can be initiated by CONTRACTOR or by the COUNTY. The initiator of the PSR will document the relevant information on the PSR. The following PSR processes will occur:

- 9.6.1** CONTRACTOR delivers PSR to COUNTY
- 9.6.2** COUNTY accepts with written approval within ten (10) days of receipt
- 9.6.3** CONTRACTOR delivers price proposal upon acceptance.

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**ATTACHMENT B
FEES AND PAYMENTS**

1. Fees

The Portal annual recurring license, support and maintenance fees are:

License, Support and Maintenance Fees	Amount
Unlimited CUPA Portal License, Support and Maintenance Fees	\$40,000
Total	\$40,000

The following one-time fees cover all professional services outlined in Attachment A:

Professional Services Description	Amount
Portal Set-up and Configuration	\$90,000
Data assessment – Gap Analysis	\$14,700
Data Remediation – Data Remediation Plan	\$ 7,350
Data Remediation – Scripting Services	\$12,700
Total	\$124,750

2. Payment Schedule:

Payment Percentage	Service Description	Milestone	Amount
<u>50%</u>	<u>Portal Set-up & Configuration</u>	<u>Invoiced upon COUNTY Access to Portal Home Page via http:/https for configuration.</u>	<u>\$45,000</u>
<u>50%</u>	<u>Portal Set-up & Configuration</u>	<u>Invoiced when the Portal has successfully processed the first twenty (20) submittals by regulated businesses & the integration of data contained in those submittals into EnvisionConnect.</u>	<u>\$45,000</u>
<u>100%</u>	<u>Portal License & Support Fees</u>	<u>Invoiced upon COUNTY Access to Portal Home Page via http:/https for configuration.</u>	<u>\$40,000</u>

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<u>50%</u>	<u>Data Remediation Services</u>	<u>Invoiced Upon Delivery of 'E-Reporting Capacity GAP Analysis' Document and Plan.</u>	<u>\$17,375</u>
<u>50%</u>	<u>Data Remediation Services</u>	<u>Invoiced Upon acceptance of the 'Data Cleanup script. The County has 10 working days to accept or reject each delivered script.</u>	<u>\$17,375</u>

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EXHIBIT A
CUSTOM FORM REQUEST (CFR)

This page intentionally left blank for the insertion of YEAR-MO-DAY CFR – Custom Form Request Website _____ Form .doc.

The Custom Form Request is required of the COUNTY for any change desired by COUNTY of the data entry form of the Public Portal.

EXHIBIT B
PORTAL ONLINE WEB FORMS

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CONTRACTOR will design and ensure the following forms are available to the COUNTY. The forms on the following pages will be used to provide a data entry experience for the regulated business or their designee. In addition, the forms will be used for the printing of PDF documents for hardcopy purposes by either the regulated facility or the COUNTY.

EXHIBIT B-1 BUSINESS ACTIVITIES/FACILITY INFORMATION

UNIFIED PROGRAM CONSOLIDATED FORM FACILITY INFORMATION BUSINESS ACTIVITIES									
									Page 1 of
I. FACILITY IDENTIFICATION									
FACILITY ID # <small>(Agency Use Only)</small>					EPA ID # <small>(Hazardous Waste Only)</small>				
BUSINESS NAME <small>(Same as Facility Name or DBA-Doing Business As)</small>									
BUSINESS SITE ADDRESS									
BUSINESS SITE CITY						CA		ZIP CODE	
II. ACTIVITIES DECLARATION									
NOTE: If you check YES to any part of this list, please submit the Business Owner/Operator Identification page.									
Does your facility . . .					If Yes, please complete these pages of the UPCF . . .				
A. HAZARDOUS MATERIALS Have on site (for any purpose) at any one time, hazardous materials at or above 55 gallons for liquids, 500 pounds for solids, or 200 cubic feet for compressed gases (includes liquids in ASTs and USTs); or the applicable Federal threshold quantity for an extremely hazardous substance specified in 40 CFR Part 355, Appendix A or B; or handle radiological materials in quantities for which an emergency plan is required pursuant to 10 CFR Parts 30, 40 or 70?					<input type="checkbox"/> YES <input type="checkbox"/> NO 4		HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION		
B. REGULATED SUBSTANCES Have Regulated Substances stored onsite in quantities greater than the threshold quantities established by the California Accidental Release Prevention Program (CalARP)?					<input type="checkbox"/> YES <input type="checkbox"/> NO 4		Coordinate with your local agency responsible for CalARP.		
C. UNDERGROUND STORAGE TANKS (USTs) Own or operate underground storage tanks?					<input type="checkbox"/> YES <input type="checkbox"/> NO 5		UST FACILITY <small>(Article 50009, Part 4)</small> UST TANK <small>(Article 50009, Part 6)</small>		
D. ABOVE GROUND PETROLEUM STORAGE Own or operate ASTs above these thresholds: Store greater than 1,320 gallons of petroleum products (new or used) in aboveground tanks or containers.					<input type="checkbox"/> YES <input type="checkbox"/> NO 4		NO FORM REQUIRED TO CUPA.		
E. HAZARDOUS WASTE Generate hazardous waste?					<input type="checkbox"/> YES <input type="checkbox"/> NO 9		EPA ID NUMBER - provide at the top of this page		
Recycle more than 100 kilograms of excluded or exempted recyclable materials (per HSC 25143.3)?					<input type="checkbox"/> YES <input type="checkbox"/> NO 10		RECYCLABLE MATERIALS REPORT <small>(Article 50009)</small>		
Treat hazardous waste on-site?					<input type="checkbox"/> YES <input type="checkbox"/> NO 11		ON-SITE HAZARDOUS WASTE TREATMENT - FACILITY ON-SITE HAZARDOUS WASTE TREATMENT - UNIT <small>(Article 50009)</small>		
Treatment subject to financial assurance requirements (for Permit by Rule and Conditional Authorization)?					<input type="checkbox"/> YES <input type="checkbox"/> NO 12		CERTIFICATION OF FINANCIAL ASSURANCE		
Consolidate hazardous waste generated at a remote site?					<input type="checkbox"/> YES <input type="checkbox"/> NO 13		REMOTE WASTE / CONSOLIDATION SITE ANNUAL NOTIFICATION		
Need to report the closure/removal of a tank that was classified GS hazardous waste and cleaned on-site?					<input type="checkbox"/> YES <input type="checkbox"/> NO 14		HAZARDOUS WASTE TANK CLOSURE CERTIFICATION		
Generate in any single calendar month 1,000 kilograms (kg) (2,200 pounds) or more of federal RCRA hazardous waste, or generate in any single calendar month, or accumulate at any time, 1 kg (2.2 pounds) of RCRA acute hazardous waste; or generate or accumulate at any time more than 100 kg (220 pounds) of spill cleanup materials contaminated with RCRA acute hazardous waste.					<input type="checkbox"/> YES <input type="checkbox"/> NO 14A		Obtain federal EPA ID Number, file Biennial Report (EPA Form 3700-13A/B), and satisfy requirements for RCRA Large Quantity Generator.		
Household Hazardous Waste (HHW) Collection site?					<input type="checkbox"/> YES <input type="checkbox"/> NO 14B		See CUPA for required forms.		
F. LOCAL REQUIREMENTS 15 <small>(You may also be required to provide additional information by your CUPA or local agency.)</small>									

**EXHIBIT B-2
BUSINESS OWNER/OPERATOR IDENTIFICATION**

UNIFIED PROGRAM CONSOLIDATED FORM					
FACILITY INFORMATION					
BUSINESS OWNER/OPERATOR IDENTIFICATION					
Page ___ of ___					
I. IDENTIFICATION					
FACILITY ID#		BEGINNING DATE	ENDING DATE		
BUSINESS NAME (Same as FACILITY NAME, or DBA - Doing Business As)			BUSINESS PHONE		
BUSINESS SITE ADDRESS			BUSINESS FAX		
BUSINESS SITE CITY	CA	ZIP CODE	COUNTY		
DUN & BRAD STREET		PRIMARY SIC	PRIMARY NAICS		
BUSINESS MAILING ADDRESS					
BUSINESS MAILING CITY		STATE	ZIP CODE		
BUSINESS OPERATOR NAME			BUSINESS OPERATOR PHONE		
II. BUSINESS OWNER					
OWNER NAME			OWNER PHONE		
OWNER MAILING ADDRESS					
OWNER MAILING CITY		STATE	ZIP CODE		
III. ENVIRONMENTAL CONTACT					
CONTACT NAME			CONTACT PHONE		
CONTACT MAILING ADDRESS			CONTACT EMAIL		
CONTACT MAILING CITY		STATE	ZIP CODE		
IV. EMERGENCY CONTACTS					
-PRIMARY-			-SECONDARY-		
NAME		NAME			
TITLE		TITLE			
BUSINESS PHONE		BUSINESS PHONE			
24-HOUR PHONE		24-HOUR PHONE			
PAGER #		PAGER #			
ADDITIONAL LOCALLY COLLECTED INFORMATION:					
<small>Certification: Based on my inquiry of those individuals responsible for obtaining the information, I certify under penalty of law that I have personally examined and am familiar with the information submitted and believe the information is true, accurate, and complete.</small>					
SIGNATURE OF OWNER, OPERATOR, OR DESIGNATED REPRESENTATIVE			DATE	NAME OF DOCUMENT PREPARER	
NAME OF SIGNER (print)			TITLE OF SIGNER		

EXHIBIT B-3
OPERATING PERMIT APPLICATION-FACILITY INFORMATION

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK OPERATING PERMIT APPLICATION - FACILITY INFORMATION <small>(One form per facility)</small>										
TYPE OF ACTION <small>(Check one item only)</small>		<input type="checkbox"/> 1. NEW PERMIT	<input type="checkbox"/> 5. CHANGE OF INFORMATION	<input type="checkbox"/> 7. PERMANENT FACILITY CLOSURE						400
		<input type="checkbox"/> 3. RENEWAL PERMIT	<input type="checkbox"/> 6. TEMPORARY FACILITY CLOSURE	<input type="checkbox"/> 9. TRANSFER PERMIT						
I. FACILITY INFORMATION										
TOTAL NUMBER OF USTs AT FACILITY		404	FACILITY ID # <small>(Agency Use Only)</small>				-			1
BUSINESS NAME <small>(State as FACILITY NAME or DBA - Doing Business As)</small>										
BUSINESS SITE ADDRESS										
CITY										
FACILITY TYPE		<input type="checkbox"/> 1. MOTOR VEHICLE FUELING	<input type="checkbox"/> 2. FUEL DISTRIBUTION	Is the facility located on Indian Reservation or Trust lands?						403
		<input type="checkbox"/> 3. FARM	<input type="checkbox"/> 4. PROCESSOR	<input type="checkbox"/> 5. OTHER	<input type="checkbox"/> Yes <input type="checkbox"/> No					
II. PROPERTY OWNER INFORMATION										
PROPERTY OWNER NAME		406			PHONE		408			
					()					
MAILING ADDRESS										
CITY		410	STATE		411	ZIP CODE		412		
III. TANK OPERATOR INFORMATION										
TANK OPERATOR NAME		428-1			PHONE		428-2			
					()					
MAILING ADDRESS										
CITY		424-4	STATE		428-3	ZIP CODE		428-4		
IV. TANK OWNER INFORMATION										
TANK OWNER NAME		414			PHONE		415			
					()					
MAILING ADDRESS										
CITY		417	STATE		418	ZIP CODE		419		
OWNER TYPE:		<input type="checkbox"/> 4. LOCAL AGENCY/DISTRICT	<input type="checkbox"/> 5. COUNTY AGENCY	<input type="checkbox"/> 6. STATE AGENCY		420				
		<input type="checkbox"/> 7. FEDERAL AGENCY	<input type="checkbox"/> 8. NON-GOVERNMENT							
V. BOARD OF EQUALIZATION UST STORAGE FEE ACCOUNT NUMBER										
TY (TK) HQ 44-						Call the State Board of Equalization, Fuel Tax Division, if there are questions.				421
VI. PERMIT HOLDER INFORMATION										
Issue permit and send legal notifications and mailings to:		<input type="checkbox"/> 1. FACILITY OWNER		<input type="checkbox"/> 4. TANK OPERATOR		423				
		<input type="checkbox"/> 3. TANK OWNER		<input type="checkbox"/> 5. FACILITY OPERATOR						
SUPERVISOR OF DIVISION, SECTION, OR OFFICE <small>(Required For Public Agencies Only)</small>										
VII. APPLICANT SIGNATURE										
CERTIFICATION: I certify that the information provided herein is true, accurate, and in full compliance with legal requirements.										
APPLICANT SIGNATURE		DATE		424	PHONE		425			
					()					
APPLICANT NAME (print)		427		APPLICANT TITLE		427				

EXHIBIT B-4 OPERATING PERMIT APPLICATION-TANK INFORMATION

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK OPERATING PERMIT APPLICATION - TANK INFORMATION (One form per UST)			
TYPE OF ACTION (Check one item only. For an UST permanent closure or removal, complete only this section and Section I, II, III, IV, and IX below)			
<input type="checkbox"/> 1. NEW PERMIT	<input type="checkbox"/> 3. RENEWAL PERMIT	<input type="checkbox"/> 5. CHANGE OF INFORMATION	
<input type="checkbox"/> 6. TEMPORARY UST CLOSURE	<input type="checkbox"/> 7. UST PERMANENT CLOSURE ON SITE	<input type="checkbox"/> 8. UST REMOVAL	
DATE UST PERMANENTLY CLOSED: _____		DATE EXISTING UST DISCOVERED: _____	
I. FACILITY INFORMATION			
FACILITY ID # (Agency Use Only) _____			
BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As) _____			
BUSINESS SITE ADDRESS _____		CITY _____	
II. TANK DESCRIPTION			
TANK ID # _____	TANK MANUFACTURER _____	TANK CONFIGURATION: THE TANK IS <input type="checkbox"/> 1. A STAND-ALONE TANK <input type="checkbox"/> 2. ONE IN A COMPARTMENTED UNIT <small>(Circle one space for each compartment in the unit)</small>	
DATE UST SYSTEM INSTALLED _____	TANK CAPACITY IN GALLONS _____	NUMBER OF COMPARTMENTS IN THE UNIT _____	
III. TANK USE AND CONTENTS			
TANK USE	<input type="checkbox"/> 1a. MOTOR VEHICLE FUELING <input type="checkbox"/> 3. CHEMICAL PRODUCT STORAGE <input type="checkbox"/> 6. OTHER GENERATOR FUEL		<input type="checkbox"/> 1b. MARINA FUELING <input type="checkbox"/> 4. HAZARDOUS WASTE (includes 1 and 6b) <input type="checkbox"/> 9b. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify) _____
CONTENTS	<input type="checkbox"/> 1a. REGULAR UNLEADED <input type="checkbox"/> 2. DIESEL <input type="checkbox"/> 8. PETROLEUM BLEND FUEL NON-PETROLEUM: <input type="checkbox"/> 7. USED OIL <input type="checkbox"/> 11. OTHER NON-PETROLEUM (Specify) _____		<input type="checkbox"/> 1c. AVIATION FUELING <input type="checkbox"/> 5. EMERGENCY GENERATOR FUEL (HSC) (33291.5(c)) <input type="checkbox"/> 9c. OTHER (Specify) _____ <input type="checkbox"/> 1b. PREMIUM UNLEADED <input type="checkbox"/> 9. AVIATION GAS (Specify) _____
IV. TANK CONSTRUCTION			
TYPE OF TANK	<input type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 99. UNKNOWN		_____
PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 2. STEEL - INTERNAL LINING <input type="checkbox"/> 3. FIBERGLASS <input type="checkbox"/> 99. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify) _____		_____
SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 90. NONE <input type="checkbox"/> 3. FIBERGLASS <input type="checkbox"/> 99. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify) _____		_____
OVERFILL PREVENTION	<input type="checkbox"/> 1. AUDIBLE & VISUAL ALARMS <input type="checkbox"/> 2. BALL FLOAT <input type="checkbox"/> 3. FILL TUBE SHUT-OFF VALVE <input type="checkbox"/> 4. TANK MEETS REQUIREMENTS FOR EXEMPTION FROM OVERFILL PREVENTION EQUIPMENT		_____
V. PRODUCT / WASTE PIPING CONSTRUCTION			
PIPING CONSTRUCTION	<input type="checkbox"/> 1. SINGLE-WALLED <input type="checkbox"/> 2. DOUBLE-WALLED <input type="checkbox"/> 99. OTHER		_____
SYSTEM TYPE	<input type="checkbox"/> 1. PRESSURE <input type="checkbox"/> 2. GRAVITY <input type="checkbox"/> 3. CONVENTIONAL SUCTION <input type="checkbox"/> 4. SAFE SUCTION (113 CFR 261.60(a)(3))		_____
PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 90. NONE <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 99. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify) _____		_____
SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 90. NONE <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 99. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify) _____		_____
PIPING TUBING CONTAINMENT SUMP TYPE	<input type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 90. NONE		_____
VI. VENT, VAPOR RECOVERY (VR) AND RISER / FILL PIPE PIPING CONSTRUCTION			
VENT PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
VENT SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
VR PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
VR SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
VENT PIPING TRANSITION SUMP TYPE	<input type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 90. NONE		_____
RISER PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
RISER SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify) _____		_____
FILL COMPONENTS INSTALLED	<input type="checkbox"/> 1. SPILL BUCKET <input type="checkbox"/> 3. STRIKER PLATE BOTTOM PROTECTOR <input type="checkbox"/> 4. CONTAINMENT SUMP		_____
VII. UNDER DISPENSER CONTAINMENT (UDC)			
CONSTRUCTION TYPE	<input type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 3. NO DISPENSERS <input type="checkbox"/> 90. NONE		_____
CONSTRUCTION MATERIAL	<input type="checkbox"/> 1. STEEL <input type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 99. OTHER (Specify) _____		_____
VIII. CORROSION PROTECTION			
STEEL COMPONENT PROTECTION	<input type="checkbox"/> 2. SACRIFICIAL ANODE(S) <input type="checkbox"/> 4. IMPRESSED CURRENT <input type="checkbox"/> 5. ISOLATION		_____
IX. APPLICANT SIGNATURE			
CERTIFICATION: I certify that this UST system is compatible with the hazardous substance stored and that the information provided herein is true, accurate, and in full compliance with legal requirements.			
APPLICANT SIGNATURE _____		DATE _____	
APPLICANT NAME (print) _____		APPLICANT TITLE _____	

**EXHIBIT B-5
CERTIFICATION OF INSTALLATION/MODIFICATION**

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK CERTIFICATION OF INSTALLATION / MODIFICATION (One form per project.)	
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I. FACILITY INFORMATION

FACILITY ID # (Agency Use Only)											1
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)											2
BUSINESS SITE ADDRESS						103	CITY				104

II. INSTALLATION / MODIFICATION PROJECT DESCRIPTION

TYPE OF PROJECT (Check all that apply) <input type="checkbox"/> 1. TANK INSTALLATION OR REPLACEMENT <input type="checkbox"/> 2. PIPING INSTALLATION OR REPLACEMENT <input type="checkbox"/> 3. SUMP INSTALLATION OR REPLACEMENT <input type="checkbox"/> 4. UNDER DISPENSER CONTAINMENT INSTALLATION OR REPLACEMENT <input type="checkbox"/> 5. OTHER		432a	WORK AUTHORIZED UNDER PERMIT (Number or Date):	435b
DESCRIPTION OF WORK BEING CERTIFIED:				433c

III. CONTRACTOR INFORMATION

NAME OF CONTRACTOR WHO PERFORMED INSTALLATION / MODIFICATION		482a
CONTRACTOR LICENSE #	482b	ICC CERTIFICATION #
		482c

IV. CERTIFICATION

I certify that the information provided herein is true, accurate, and that the following conditions have been satisfied:

- The installer has met the requirements set forth in 23 CCR §2715, subdivisions (g) and (h).
- The underground storage tank, any primary piping, and any secondary containment was installed according to applicable voluntary consensus standards and any manufacturer's written installation instructions.
- All work listed in the manufacturer's installation checklist has been completed.
- The installation has been inspected and approved by the local agency, or if required by the local agency, inspected and certified by a registered professional engineer having education and experience with underground storage tank system installations.

SIGNATURE OF TANK OWNER OR OWNER'S AGENT	DATE	484	PHONE	487
			()	
CERTIFIER'S NAME (print)	445	CERTIFIER'S TITLE		486
NAME OF CERTIFIER'S EMPLOYER (DBA)	445b	CERTIFIER'S RELATIONSHIP TO TANK OWNER <input type="checkbox"/> 1. TANK OWNER <input type="checkbox"/> 2. TANK OPERATOR <input type="checkbox"/> 3. CONTRACTOR <input type="checkbox"/> 4. PROPERTY OWNER <input type="checkbox"/> 5. OTHER AUTHORIZED AGENT OF TANK OWNER		488

**EXHIBIT B-6
MONITORING PLAN
PAGE 1 OF 2**

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK MONITORING PLAN - (Page 1 of 2)	
TYPE OF ACTION	<input type="checkbox"/> 1. NEW PLAN <input type="checkbox"/> 2. CHANGE OF INFORMATION
PLAN TYPE	<input type="checkbox"/> 1. MONITORING IS IDENTICAL FOR ALL USTs AT THIS FACILITY (Check one item only) <input type="checkbox"/> 2. THIS PLAN COVERS ONLY THE FOLLOWING UST SYSTEM(S):
I. FACILITY INFORMATION	
FACILITY ID # (Agency Use Only)	_____
BUSINESS NAME (Same as FACILITY NAME)	_____
BUSINESS SITE ADDRESS	_____ CITY _____
II. EQUIPMENT TESTING AND PREVENTIVE MAINTENANCE	
Testing, preventive maintenance, and calibration of monitoring equipment (e.g., sensors, probes, line leak detectors, etc.) must be performed at the frequency specified by the equipment manufacturers' instructions, or annually, whichever is more frequent, and that such work must be performed by qualified personnel. (23 CCR §2632, 2634, 2638, 2641)	
MONITORING EQUIPMENT IS SERVICED	<input type="checkbox"/> 1. ANNUALLY <input type="checkbox"/> 99. OTHER (Specify): _____
III. MONITORING LOCATIONS	
<input type="checkbox"/> 1. NEW SITE PLOT PLAN/MAP SUBMITTED WITH THIS PLAN. <input type="checkbox"/> 2. SITE PLOT PLAN/MAP PREVIOUSLY SUBMITTED. (23 CCR §2632, 2634)	
IV. TANK MONITORING IS PERFORMED USING THE FOLLOWING METHOD(S):	
<input type="checkbox"/> 1. CONTINUOUS ELECTRONIC TANK MONITORING OF ANNULAR (INTERSTITIAL) SPACE(S) OR SECONDARY CONTAINMENT VAULT(S) WITH AUDIBLE AND VISUAL ALARMS. (23 CCR §2632, 2634)	
SECONDARY CONTAINMENT IS:	<input type="checkbox"/> a. DRY <input type="checkbox"/> b. LIQUID FILLED <input type="checkbox"/> c. PRESSURIZED <input type="checkbox"/> d. UNDER VACUUM
PANEL MANUFACTURER:	_____ MODEL #: _____
LEAK SENSOR MANUFACTURER:	_____ MODEL #(S): _____
<input type="checkbox"/> 2. AUTOMATIC TANK GAUGING (ATG) SYSTEM USED TO MONITOR SINGLE WALL TANK(S). (23 CCR §2643)	
PANEL MANUFACTURER:	_____ MODEL #: _____
IN-TANK PROBE MANUFACTURER:	_____ MODEL #(S): _____
LEAK TEST FREQUENCY:	<input type="checkbox"/> a. CONTINUOUS <input type="checkbox"/> b. DAILY/VISUALLY <input type="checkbox"/> c. WEEKLY <input type="checkbox"/> d. MONTHLY <input type="checkbox"/> e. OTHER (Specify): _____
PROGRAMMED TESTS:	<input type="checkbox"/> a. 0.1 gph <input type="checkbox"/> b. 0.2 gph <input type="checkbox"/> c. OTHER (Specify): _____
<input type="checkbox"/> 3. MONTHLY STATISTICAL INVENTORY RECONCILIATION (23 CCR §2646.1):	
<input type="checkbox"/> 4. WEEKLY MANUAL TANK GAUGING (MITG) (23 CCR §2645). TESTING PERIOD: <input type="checkbox"/> a. 36 HOURS <input type="checkbox"/> b. 60 HOURS	
<input type="checkbox"/> 5. TANK INTEGRITY TESTING (23 CCR §2649.1):	
TEST FREQUENCY:	<input type="checkbox"/> a. ANNUALLY <input type="checkbox"/> b. BIENNIALY <input type="checkbox"/> c. OTHER (Specify): _____
<input type="checkbox"/> 99. OTHER (Specify): _____	
V. PIPE MONITORING IS PERFORMED USING THE FOLLOWING METHOD(S) (Check all that apply)	
<input type="checkbox"/> 1. CONTINUOUS MONITORING OF PIPE / PIPING SUMP(S) AND OTHER SECONDARY CONTAINMENT WITH AUDIBLE AND VISUAL ALARMS. (23 CCR §2636)	
SECONDARY CONTAINMENT IS:	<input type="checkbox"/> a. DRY <input type="checkbox"/> b. LIQUID FILLED <input type="checkbox"/> c. PRESSURIZED <input type="checkbox"/> d. UNDER VACUUM
PANEL MANUFACTURER:	_____ MODEL #: _____
LEAK SENSOR MANUFACTURER:	_____ MODEL #(S): _____
PIPING LEAK ALARM TRIGGERS AUTOMATIC PUMP (i.e., TURBINE) SHUTDOWN.	<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO
FAILURE/DISCONNECTION OF THE MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN.	<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO
<input type="checkbox"/> 2. MECHANICAL LINE LEAK DETECTOR (MLLD) THAT ROUTINELY PERFORMS 3.0 g.p.h. LEAK TESTS AND RESTRICTS OR SHUTS OFF PRODUCT FLOW WHEN A LEAK IS DETECTED (23 CCR §2636)	
MLLD MANUFACTURER(S):	_____ MODEL #(S): _____
<input type="checkbox"/> 3. ELECTRONIC LINE LEAK DETECTOR (ELLD) THAT ROUTINELY PERFORMS 3.0 g.p.h. LEAK TESTS (23 CCR §2636)	
ELLD MANUFACTURER(S):	_____ MODEL #(S): _____
PROGRAMMED IN-LINE LEAK TEST:	<input type="checkbox"/> 1. MINIMUM MONTHLY 0.1 gph <input type="checkbox"/> 2. MINIMUM ANNUAL 0.1 gph.
ELLD DETECTION OF A PIPING LEAK TRIGGERS AUTOMATIC PUMP SHUTDOWN.	<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO
ELLD FAILURE/DISCONNECTION TRIGGERS AUTOMATIC PUMP SHUTDOWN.	<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO
<input type="checkbox"/> 4. PIPE INTEGRITY TESTING (23 CCR §2645)	
TEST FREQUENCY	<input type="checkbox"/> a. ANNUALLY <input type="checkbox"/> b. EVERY 2 YEARS <input type="checkbox"/> c. OTHER (Specify): _____
<input type="checkbox"/> 5. VISUAL PIPE MONITORING.	
FREQUENCY	<input type="checkbox"/> a. DAILY <input type="checkbox"/> b. WEEKLY <input type="checkbox"/> c. MIN. MONTHLY & EACH TIME SYSTEM OPERATED*
* Allowed for monitoring of carbon steel systems, generate leak piping only per HEC 125211-500334	
<input type="checkbox"/> 6. SUCTION PIPING MEETS EXEMPTION CRITERIA (23 CCR §2636(a)(3)).	
<input type="checkbox"/> 7. NO REGULATED PIPING PER HEALTH AND SAFETY CODE, DIVISION 20, CHAPTER 6.7 IS CONNECTED TO THE TANK SYSTEM	
<input type="checkbox"/> 99. OTHER (Specify): _____	

**EXHIBIT B-6
MONITORING PLAN
PAGE 2 OF 2**

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK MONITORING PLAN (Page 2 of 2)	
VI. UNDER DISPENSER CONTAINMENT (UDC) MONITORING	
1. UDC MONITORING IS PERFORMED USING THE FOLLOWING METHOD 490-54a	
<input type="checkbox"/> 1. CONTINUOUS ELECTRONIC MONITORING <input type="checkbox"/> 2. FLOAT AND CHAIN ASSEMBLY <input type="checkbox"/> 3. ELECTRONIC STAND-ALONE 490-54b <input type="checkbox"/> 4. NO DISPENSERS <input type="checkbox"/> 99. OTHER (Specify): _____	
PANEL MANUFACTURER: _____ 490-55	MODEL #: _____ 490-56
LEAK SENSOR MANUFACTURER: _____ 490-57	MODEL # (S): _____ 490-58
DETECTION OF A LEAK IN TO THE UDC TRIGGERS AUDIBLE AND VISUAL ALARMS 490-59	
<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO	
UDC LEAK ALARM TRIGGERS AUTOMATIC PUMP SHUTDOWN 490-60	
<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO	
FAILURE / DISCONNECTION OF UDC MONITORING SYSTEM TRIGGERS AUTOMATIC PUMP SHUTDOWN 490-61	
<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO	
UDC MONITORING STOPS THE FLOW OF PRODUCT AT THE DISPENSER 490-62	
<input type="checkbox"/> a. YES <input type="checkbox"/> b. NO	
2. UDC CONSTRUCTION IS <input type="checkbox"/> 1. SINGLE-WALLED <input type="checkbox"/> 2. DOUBLE-WALLED 490-63	
IF DOUBLE WALLED:	
UDC INTERSTITIAL SPACE IS MONITORED BY: <input type="checkbox"/> 1. LIQUID <input type="checkbox"/> 2. PRESSURE <input type="checkbox"/> 3. VACUUM 490-64	
A LEAK WITHIN THE SECONDARY CONTAINMENT OF THE UDC TRIGGERS AUDIBLE AND VISUAL ALARMS <input type="checkbox"/> a. YES <input type="checkbox"/> b. NO 490-65	
VII. PERIODIC SYSTEM TESTING	
<input type="checkbox"/> 1. ELD TESTING. THIS FACILITY HAS BEEN NOTIFIED BY THE STATE WATER RESOURCES CONTROL BOARD THAT ENHANCED LEAK DETECTION (ELD) MUST BE PERFORMED. PERIODIC ELD IS PERFORMED EVERY 36 MONTHS AS REQUIRED. (23 CCR §2644.1) 490-66	
<input type="checkbox"/> 2. SECONDARY CONTAINMENT COMPONENTS ARE TESTED EVERY 36 MONTHS 490-67	
<input type="checkbox"/> 3. SPILL BUCKETS ARE TESTED ANNUALLY 490-68	
VIII. RECORDKEEPING	
The following monitoring/maintenance records are kept for this facility:	
<input type="checkbox"/> Alarm logs 490-69a	<input type="checkbox"/> Visual Inspection Records 490-69b
<input type="checkbox"/> Tank integrity testing results 490-69c	<input type="checkbox"/> Tank gauging results (and supporting documentation records) 490-69d
<input type="checkbox"/> SIP testing results (and supporting documentation records) 490-69e	<input type="checkbox"/> ATG Testing results (and supporting documentation records) 490-69f
<input type="checkbox"/> Equipment maintenance and calibration records 490-69g	<input type="checkbox"/> Corrosion Protection 60-day logs 490-69h
IX. TRAINING	
<input type="checkbox"/> Personnel with UST monitoring responsibilities are familiar with all of the following documents relevant to their job duties: 490-70	
REFERENCE DOCUMENTS MAINTAINED AT FACILITY (Check all that apply):	
<input type="checkbox"/> THIS UNDERGROUND STORAGE TANK MONITORING PLAN (Required) 490-70a	
<input type="checkbox"/> OPERATING MANUALS FOR ELECTRONIC MONITORING EQUIPMENT (Required) 490-70b	
<input type="checkbox"/> CALIFORNIA UNDERGROUND STORAGE TANK REGULATIONS 490-70c	
<input type="checkbox"/> CALIFORNIA UNDERGROUND STORAGE TANK LAW 490-70d	
<input type="checkbox"/> STATE WATER RESOURCES CONTROL BOARD (SWRCB) PUBLICATION: "HANDBOOK FOR TANK OWNERS - MANUAL AND STATISTICAL INVENTORY RECONCILIATION" 490-70e	
<input type="checkbox"/> SWRCB PUBLICATION: "UNDERSTANDING AUTOMATIC TANK GAUGING SYSTEMS" 490-70f	
<input type="checkbox"/> OTHER (Specify): _____ 490-70g	
<input type="checkbox"/> This facility has a "Designated UST Operator" who has passed the California UST System Operator Exam administered by the International Code Council (ICC). The "Designated UST Operator" will train facility employees in the proper operation and maintenance of the UST systems annually, and within 30 days of hire. This training will include, but is not limited to, the following: 490-71	
<ul style="list-style-type: none"> ➤ Operation of the UST systems in a manner consistent with the facility's best management practices ➤ The facility employee's role with regard to the monitoring equipment as specified in this UST Monitoring Plan ➤ The facility employee's role with regard to spills and overfills as specified in the UST Response Plan ➤ Names of contact person(s) for emergencies and monitoring alarms. 490-72 	
X. COMMENTS/ADDITIONAL INFORMATION	
Provide additional comments here or indicate how many pages with additional information on specific monitoring procedures are attached to this plan. 490-73	
XI. PERSONNEL RESPONSIBILITIES	
The UST Owner/Operator is responsible for ensuring that: 1) the daily routine UST monitoring activities and maintenance of UST leak detection equipment covered by this plan occurs, 2) all conditions that indicate a possible release are investigated, and 3) all monitoring records are maintained properly.	
The following person(s) are responsible for performing the monitoring and equipment maintenance:	
NAME _____ 490-74	TITLE _____ 490-75
NAME _____ 490-76	TITLE _____ 490-77
The Designated Operator shall perform a monthly visual inspection of the facility, provide a report to the owner operator, and inform the owner operator of any conditions that need follow-up action.	
XII. OWNER/OPERATOR SIGNATURE	
CERTIFICATION: I certify that the information provided herein is true and accurate to the best of my knowledge.	
APPLICANT SIGNATURE _____ 490-78	DATE: _____ 490-79
REPRESENTING: <input type="checkbox"/> 1. Tank Owner/Operator <input type="checkbox"/> 2. Facility Owner/Operator <input type="checkbox"/> 3. Authorized Representative of Owner	
APPLICANT NAME (print): _____ 490-80	APPLICANT TITLE: _____ 490-81

**EXHIBIT B-7
RECYCLABLE MATERIALS REPORT
PAGE 1 OF 2**

UNIFIED PROGRAM CONSOLIDATED FORM		HAZARDOUS WASTE
RECYCLABLE MATERIALS REPORT - PAGE 1		
FOR EXCLUDED OR EXEMPTED MATERIALS ONLY		
FACILITY ID#		EPA ID#
BUSINESS NAME (Same as FACILITY NAME on BBA - Doing Business Act)		
DATES OF REPORTING PERIOD		BEGINNING DATE ENDING DATE
I. TYPE OF RECYCLING ACTIVITIES <i>If yes, please follow instructions.</i>		
1. Do you recycle more than 100 kg/month of excluded or exempted recyclable material at the same location at which the material was generated (onsite recycling)?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> IF YES, you are both the generator and recycler. Complete one Recyclable Materials Report. Do not complete Parts II and V.
2. Do you recycle more than 100 kg/month of non-manifested, excluded recyclable materials received from an offsite location (offsite recycling)?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input checked="" type="checkbox"/> IF YES, you are an offsite recycler but not the generator. Complete a Recyclable Materials Report for each generator that sends you materials.
--Businesses that only send recyclable materials to an offsite recycler are not required to file this report. --		
II. OFFSITE GENERATOR OF RECYCLABLE MATERIAL <i>Only complete when the generator is different from the recycler.</i>		
OFFSITE GENERATOR OF RECYCLABLE MATERIAL	OFFSITE GENERATOR EPA ID#	
STREET ADDRESS	PHONE	
CITY	STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT)		
CITY	STATE	ZIP CODE
III. CERTIFICATION SECTION		
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete.		
SIGNATURE OF CERTIFIER	DATE	NAME OF DOCUMENT PREPARER
NAME OF SIGNER (print)	TITLE OF SIGNER	

**EXHIBIT B-7
RECYCLABLE MATERIALS REPORT
PAGE 2 OF 2**

UNIFIED PROGRAM CONSOLIDATED FORM		HAZARDOUS WASTE	
RECYCLABLE MATERIALS REPORT - PAGE 2			
FOR EXCLUDED OR EXEMPTED MATERIALS ONLY			
TOTAL NUMBER OF RECYCLABLE MATERIALS		Page ____ of ____	
FACILITY ID#		BUSINESS NAME (Name as FACILITY NAME on DRA - Doing Business As)	
IV. RECYCLABLE MATERIAL INFORMATION			
A. DESCRIPTION			
RECYCLABLE MATERIAL NUMBER	COMMON NAME OF RECYCLABLE MATERIAL	QUANTITY DURING TWO YEAR REPORTING PERIOD UNITS <input type="checkbox"/> a. Gallons <input type="checkbox"/> c. Tons <input type="checkbox"/> b. Pounds <input type="checkbox"/> d. Kilograms	
RECYCLABLE MATERIAL DESCRIPTION			
RECYCLING PROCESS AND BENEFICIAL USE OF RECYCLABLE MATERIAL			
AUTHORIZING PROVISION OF HSC SECTION 25143.2	BASIS FOR CLAIM TO AN EXCLUSION OR EXEMPTION		
E. PRODUCT AND CONSTITUENT INFORMATION: OFFSITE ONLY			
Only complete if recyclable material was used to make or substitute for a product and operating pursuant to HSC Section 25143.2(b) or (d)(5) or (6).			
HAZARDOUS CONSTITUENT	HAZARDOUS CONSTITUENT		LIST FINAL PRODUCT(S) MADE FROM THIS RECYCLABLE MATERIAL AND BENEFICIAL USE OF FINAL PRODUCT(S)
	In Recyclable Material	In Final Product	
	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	
	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	
	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	
	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	UNITS <input type="checkbox"/> a percent <input type="checkbox"/> b ppm	
If more than four constituents are recycled, attach additional sheets using this same format.			
V. DOCUMENTATION OF KNOWN MARKET (Offsite recyclers only)			
<input type="checkbox"/> DOCUMENTATION IS ATTACHED: Offsite recyclers must attach documentation that there was a known market for disposition of the recyclable material and any products manufactured from the recyclable materials and provide copy of this report to the generator when the report is submitted to the CUPA. (HSC Section 25143.10(a)(3)(A))			

EXHIBIT B-8
HAZARDOUS MATERIALS INVENTORY-CHEMICAL DESCRIPTION

UNIFIED PROGRAM CONSOLIDATED FORM HAZARDOUS MATERIALS HAZARDOUS MATERIALS INVENTORY - CHEMICAL DESCRIPTION			
<input type="checkbox"/> ADD	<input type="checkbox"/> DELETE	<input type="checkbox"/> REVISE	Page ___ of ___
I. FACILITY INFORMATION			
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As) _____			
CHEMICAL LOCATION _____		CHEMICAL LOCATION CONFIDENTIAL EPCRA <input type="checkbox"/> YES <input type="checkbox"/> NO	
FACILITY ID # _____	MAP# (optional) _____	GRID# (optional) _____	
II. CHEMICAL INFORMATION			
CHEMICAL NAME _____		TRADE SECRET <input type="checkbox"/> Yes <input type="checkbox"/> No <small>* Submit to EPCRA, refer to instructions</small>	
COMMON NAME _____		EHS* <input type="checkbox"/> Yes <input type="checkbox"/> No	
CAS# _____		*If EHS is "Yes", all amounts below must be in lbs.	
FIRE CODE HAZARD CLASSES (Complete/required to OSHA) _____			
HAZARDOUS MATERIAL TYPE (Check one item only) <input type="checkbox"/> a. PURE <input type="checkbox"/> b. MIXTURE <input type="checkbox"/> c. WASTE		RADIOACTIVE <input type="checkbox"/> Yes <input type="checkbox"/> No	CURIES _____
PHYSICAL STATE (Check one item only) <input type="checkbox"/> a. SOLID <input type="checkbox"/> b. LIQUID <input type="checkbox"/> c. GAS		LARGEST CONTAINER _____	
FED HAZARD CATEGORIES (Check all that apply) <input type="checkbox"/> a. FIRE <input type="checkbox"/> b. REACTIVE <input type="checkbox"/> c. PRESSURE RELEASE <input type="checkbox"/> d. ACUTE HEALTH <input type="checkbox"/> e. CHRONIC HEALTH			
AVERAGE DAILY AMOUNT _____	MAXIMUM DAILY AMOUNT _____	ANNUAL WASTE AMOUNT _____	STATE WASTE CODE _____
UNITS* (Check one item only) <input type="checkbox"/> a. GALLONS <input type="checkbox"/> b. CUBIC FEET <input type="checkbox"/> c. POUNDS <input type="checkbox"/> d. TONS <small>* If EHS amount must be in pounds</small>			DAYS ON SITE: _____
STORAGE CONTAINER: <input type="checkbox"/> a. ABOVE GROUND TANK <input type="checkbox"/> s. PLASTIC NONMETALLIC DRUM <input type="checkbox"/> i. FIBER DRUM <input type="checkbox"/> m. GLASS BOTTLE <input type="checkbox"/> q. RAIL CAR <input type="checkbox"/> b. UNDERGROUND TANK <input type="checkbox"/> d. CAN <input type="checkbox"/> j. BAG <input type="checkbox"/> n. PLASTIC BOTTLE <input type="checkbox"/> r. OTHER <input type="checkbox"/> c. TANK INSIDE BUILDING <input type="checkbox"/> g. CARBOY <input type="checkbox"/> k. BOX <input type="checkbox"/> o. TOTE BIN <input type="checkbox"/> d. STEEL DRUM <input type="checkbox"/> h. SLO <input type="checkbox"/> l. CYLINDER <input type="checkbox"/> p. TANK WAGON			
STORAGE PRESSURE <input type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT			
STORAGE TEMPERATURE <input type="checkbox"/> a. AMBIENT <input type="checkbox"/> b. ABOVE AMBIENT <input type="checkbox"/> c. BELOW AMBIENT <input type="checkbox"/> d. CRYOGENIC			
%WT	HAZARDOUS COMPONENT (For mixture or waste only)	EHS	CAS #
1	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
2	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
3	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
4	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
5	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
<small>If more hazardous components are present or greater than 1% by weight if non-carcinogen, or 0.1% by weight if carcinogen, attach additional sheets of paper capturing the required information.</small>			
ADDITIONAL LOCALLY COLLECTED INFORMATION _____			
<small>If EPCRA, Please Sign Here</small>			

EXHIBIT B-9
ONSITE HAZARDOUS WASTE TREATMENT NOTIFICATION-FACILITY PAGE

State of California - California Environmental Protection Agency		Department of Toxic Substances Control	
UNIFIED PROGRAM CONSOLIDATED FORM			
ONSITE HAZARDOUS WASTE TREATMENT NOTIFICATION - FACILITY PAGE		HAZARDOUS WASTE	
BUSINESS NAME (Same as FACILITY NAME on DBS/Doing Business Act)		FACILITY ID#	
		Page <input type="text"/> of <input type="text"/>	
II. STATUS			
NOTIFICATION STATUS <small>(600)</small>		PERMIT STATUS (Check all that apply) <small>(601)</small>	
<input type="checkbox"/> a. Amended <input type="checkbox"/> b. Initial <input type="checkbox"/> c. Renewal (PBR Only)		<input type="checkbox"/> d. Facility Permit <input type="checkbox"/> e. Consent Agreement <input type="checkbox"/> f. Standardized Permit <input type="checkbox"/> g. Variance	
III. NUMBER OF UNITS AT FACILITY			
<small>(Indicate the number of units you operate in each tier, attach one unit notification page for each unit except CE-CL)</small>			
A	Conditionally Exempt - Small Quantity Treatment (CESQT) (May not function under any other tier)	<small>(602)</small>	
B	Conditionally Exempt - Specified Wastestream (CESW)		
C	Conditionally Authorized (CA)		
D	Permit by Rule (PBR)		
E	Conditionally Exempt - Limited (CEL)		
F	Conditionally Exempt - Commercial Laundry (CE-CL) (No unit page is required for laundries)		
G	TOTAL UNITS (Must equal the number of unit notification pages attached plus the number of CE-CL units)		
IV. CERTIFICATION AND SIGNATURE			
<p>Waste Minimization: I certify that I have a program in place to reduce the volume, quantity and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.</p> <p>Tiered Permitting Certification: I certify that the unit or units described in these documents meet the eligibility and operating requirements of state statutes and regulations for the indicated permitting tier, including generator and secondary containment requirements. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete.</p> <p>I am aware that there are substantial penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.</p>			
SIGNATURE OF OWNER/OPERATOR		DATE	
NAME OF OWNER/OPERATOR		TITLE OF OWNER/OPERATOR	
REQUEST FOR SHORTENED REVIEW PERIOD (CE and CA only) <input type="checkbox"/> Yes <input type="checkbox"/> No State Reason for Request:			
V. ATTACHMENTS (Check if attached)			
ALL tiers except CE-CL (Laundries) must submit: <input type="checkbox"/> 1 One unit specific notification page and one treatment process page per unit <input type="checkbox"/> 2 Plot Plan (or other grid map)		PBR ONLY: <input type="checkbox"/> 1 Tank and container certifications, if required <input type="checkbox"/> 2 Notification of local agency or agencies <input type="checkbox"/> 3 Notification of property owner, if different from business owner	
PBR & CA ONLY: <input type="checkbox"/> 1 Closure Financial Assurance (formerly DTSC form 1232) <input type="checkbox"/> Self Certified (< \$10,000) <input type="checkbox"/> Other mechanism <input type="checkbox"/> 2 Prior Enforcement History, if applicable			

EXHIBIT B-10
ONSITE HAZARDOUS WASTE TREATMENT NOTIFICATION-UNIT PAGE

UNIFIED PROGRAM CONSOLIDATED FORM		HAZARDOUS WASTE	
ONSITE HAZARDOUS WASTE TREATMENT NOTIFICATION – UNIT PAGE		<small>1 page of 1 page and attachments per unit</small>	
FACILITY ID#		BUSINESS NAME (Name as FACILITY NAME or DBA – Doing Business As)	
I. TREATMENT UNIT			
UNIT ID#	UNIT TYPE/TIER	NUMBER OF TANKS	NUMBER OF CONTAINERS/TREATMENT AREAS
UNIT NAME	<input type="checkbox"/> a. CESQT <input type="checkbox"/> b. CESW <input type="checkbox"/> c. CA <input type="checkbox"/> d. PBR <input type="checkbox"/> e. CEL	MONTHLY TREATMENT VOLUME	UNIT OF MEASURE <input type="checkbox"/> a. Pounds <input type="checkbox"/> b. Gallons
SPECIFIC WASTE TYPE TREATED (narrative)			
TREATMENT PROCESS DESCRIPTION (narrative)			
<small>(NOTE: for each treatment unit, complete and attach the appropriate Waste And Treatment Process Combination page)</small>			
II. BASIS FOR NOT NEEDING FEDERAL PERMIT (Check all that apply)			
<input type="checkbox"/> a. The treated waste is not a hazardous waste under federal law (California-only waste). <input type="checkbox"/> b. Treated in waste water treatment units (tanks) and discharged to a publicly owned treatment works (POTW) sewerage agency or under an NPDES permit. <input type="checkbox"/> c. Treatment in elementary neutralization units. <input type="checkbox"/> d. Treatment in a totally enclosed treatment facility. <input type="checkbox"/> e. Federal conditionally exempt small quantity generator (generated 100 kg, approximately 27 gallons, or less of hazardous waste in a calendar month).	<input type="checkbox"/> f. Treatment in an accumulation tank or container within 90 days for over 1000 kg month generators and 180 or 270 days for generators of 100 to 1000 kg month. <input type="checkbox"/> g. Recyclable materials are reclaimed to recover silver or other precious metals. <input type="checkbox"/> h. Empty container rinsing and/or treatment. <input type="checkbox"/> i. Other (specify below)		
III. RESIDUALS MANAGEMENT DESCRIPTION (Check all that apply)			
<input type="checkbox"/> a. Discharge non-hazardous aqueous waste to POTW or sewer. <input type="checkbox"/> b. Discharge non-hazardous aqueous waste under a NPDES permit. <input type="checkbox"/> c. Dispose of non-hazardous solid waste residues at an offsite location.	<input type="checkbox"/> d. Offsite recycling <input type="checkbox"/> e. Thermal treatment <input type="checkbox"/> f. Disposal to land <input type="checkbox"/> g. Further treatment <input type="checkbox"/> h. Other method of disposal (describe below)	Residual hazardous waste hauled offsite by a registered hauler	
SECONDARY CONTAINMENT INSTALLATION DATE (if required)			

EXHIBIT B-11
CONDITIONALLY EXEMPT SMALL QUANTITY TREATMENT (CESQT) PAGE

UNIFIED PROGRAM CONSOLIDATED FORM
ONSITE TIERED PERMITTING
CONDITIONALLY EXEMPT SMALL QUANTITY TREATMENT (CESQT) PAGE
WASTE AND TREATMENT PROCESS COMBINATIONS
(use one per treatment unit - check all that apply)

UNIT ID# 666 Facility ID# 1 Part 1 of 1

CESQT = treats < 55 gallons or 500 pounds of hazardous waste in any calendar month in ALL units at this facility (NOT a limit for each waste stream or unit separately). CESQT generators may not hold other state or federal hazardous waste permit or authorization for this facility, including other onsite ones.

- 1. Aqueous wastes containing hexavalent chromium may be treated by the following process:
 - a. Reduction of hexavalent chromium to trivalent chromium with sodium bisulfite, sodium metabisulfite, sodium thiosulfate, ferrous sulfate, ferrous sulfide or sulfur dioxide provided both pH and addition of the reducing agent are automatically controlled.
- 2. Aqueous wastes containing metals listed in Title 22, CCR, Section 66261.24 (a)(2) and/or fluoride salt may be treated by the following technologies:
 - a. pH adjustment or neutralization
 - b. Precipitation or crystallization
 - c. Phase separation by filtration, centrifugation or gravity settling
 - d. Ion exchange
 - e. Reverse osmosis
 - f. Metals replacement
 - g. Plating the metal onto an electrode
 - h. Electrolysis
 - i. Electrowinning or electrolytic recovery
 - j. Chemical stabilization using silicates and/or cementitious types of reactions
 - k. Evaporation
 - l. Adsorption
- 3. Aqueous wastes with total organic carbon less than 10% as measured by EPA Method 9060 and less than 1% total volatile organic compounds as measured by EPA Method 8240 may be treated by the following technologies:
 - a. Phase separation by filtration, centrifugation or gravity settling, but excluding super critical fluid extraction.
 - b. Adsorption
 - c. Distillation
 - d. Biological processes conducted in tanks or containers and utilizing naturally occurring microorganisms.
 - e. Photodegradation using ultraviolet light with or without the addition of hydrogen peroxide or ozone, provided the treatment is conducted in an enclosed system.
 - f. Air stripping or steam stripping
- 4. Sludges, dusts, solid metal objects and metal workings which contain or are contaminated with metals listed in Title 22, CCR, Section 66261.24 (a)(2) and/or fluoride salt may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions
 - b. Physical processes which change only the physical properties of the waste such as: grinding, shredding, crushing or compacting
 - c. Drying to remove water
 - d. Separation based on differences in physical properties such as size, magnetism or density
- 5. Alum, gypsum, lime, sulfur or phosphate sludges may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions
 - b. Drying to remove water
 - c. Phase separation by filtration, centrifugation or gravity settling
- 6. Wastes identified in Title 22, CCR, Section 66261.120, that meet the criteria and requirements for special waste classification in Section 66261.22 may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions
 - b. Drying to remove water
 - c. Phase separation by filtration, centrifugation or gravity settling
 - d. Screening to separate components based on size
 - e. Separation based on differences in physical properties such as size, magnetism or density
- 7. Wastes, except asbestos, which have been classified by the Department as special wastes pursuant to Title 22, CCR, Section 66261.224, may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions
 - b. Drying to remove water
 - c. Phase separation by filtration, centrifugation or gravity settling
 - d. Magnetic separation
- 8. Inorganic acid or alkaline wastes may be treated by the following technology:
 - a. pH adjustment or neutralization
- 9. Solids contaminated with metals listed in Title 22, CCR, Section 66261.24(a)(2), (Persistent and Bioaccumulative Toxic Substance): may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions
 - b. Screening to separate components based on size
 - c. Magnetic separation
- 10. Used oil, refined oil waste, mixed oil, oil mixed with water and oil-water separation sludges may be treated by the following technologies:
 - a. Phase separation by filtration, centrifugation or gravity settling, but excluding super critical fluid extraction.
 - b. Distillation
 - c. Neutralization
 - d. Separation based on differences in physical properties such as size, magnetism or density
 - e. Reverse osmosis
 - f. Biological processes conducted in tanks or containers and utilizing naturally occurring microorganisms
- 11. Containers of 110 gallons or less capacity which are not constructed of wood, paper, cardboard, fabric, or any other similar absorptive material, which have been emptied as specified in Title 40 of the Code of Federal Regulations, section 261.7 or inner liners removed from empty containers that once held hazardous waste or hazardous material and which are not excluded from regulation may be treated by the following technologies: provided the treated containers and rinseate are managed in compliance with applicable requirements.
 - a. Filling with a suitable liquid capable of dissolving or removing the hazardous constituent which the container held.
 - b. Physical processes such as crushing, shredding, grinding or pulverizing that change only the physical properties of the container or inner liner, provided the container or inner liner is first rinsed and the rinseate is removed from the container or inner liner.
- 12. Multi-component resin may be treated by the following process:
 - a. Mixing the resin components in accordance with the manufacturer's instruction
- 13. A waste stream technology combination certified by the Department pursuant to Section 25200.1.5 of the Health and Safety Code as appropriate for authorization under CESQT.
 - Certified Technology Number

EXHIBIT B-12
CONDITIONALLY EXEMPT-SPECIFIED WASTESTREAMS (CESW) PAGE

UNIFIED PROGRAM CONSOLIDATED FORM ONSITE TIERED PERMITTING CONDITIONALLY EXEMPT - SPECIFIED WASTESTREAMS (CESW) PAGE WASTE AND TREATMENT PROCESS COMBINATIONS
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UNIT ID#	666	Facility ID#	1	Page ___ of ___ 425
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- 1. Treating resins mixed or cured in accordance with the manufacturer's instructions (including one-part and pre-impregnated materials).
- 2. Treating a container of 110 gallons or less capacity, which is not constructed of wood, paper, cardboard, fabric or any other similar absorptive materials, for the purposes of emptying the container as specified by Section 66261.7 of Title 22 of the California Code of Regulations, as revised July 1, 1990, or treats the inner liners removed from empty containers that once held hazardous waste or hazardous material. The generator shall treat the container or inner liner by using the following technologies, provided the treated containers and rinseate are managed in compliance with the applicable requirements of this chapter:
 - (A) The generator rinses the container or inner liner with a suitable liquid capable of dissolving or removing the hazardous constituents which the container held, and/or
 - (B) The generator uses physical processes, such as crushing, shredding, grinding, or puncturing, that change only the physical properties of the container or inner liner, if the container or inner liner is first rinsed as provided in subparagraph (A) and the rinseate is removed from the container or inner liner.
- 3. Drying special wastes, as classified by the Department pursuant to Title 22, CCR, Section 66261.124, by pressing or by passive or heat-aided evaporation to remove water.
- 4. Magnetic separation or screening to remove components from special waste, as classified by the Department pursuant to Title 22, CCR, Section 66261.124.
- 5. Not in use/exempted—formerly neutralization and regeneration or ion exchange media used to demineralize water.
- 6. Not in use/exempted—formerly neutralization of food processing waste.
- 7. Not in use/exempted—formerly recovery of silver from photofinishing.
- 8. Gravity separation of the following, including the use of flocculants and demulsifiers if:
 - a. The settling of solids from the waste where the resulting aqueous/liquid stream is not hazardous.
 - b. The separation of oil/water mixtures and separation sludges, if the average oil recovered per month is less than 25 barrels (42 gallons per barrel). (Note: some used oil/water separation is eligible for CEL.)
- 9. Neutralizing acidic or alkaline (basic) material by a state certified laboratory, a laboratory operated by an educational institution, or a laboratory which treats less than one gallon of onsite generated hazardous waste in any single batch. (To be eligible for conditional exemption, this waste cannot contain more than 10 percent acid or base by weight.)
- 10. Hazardous waste treatment is carried out in quality control or quality assurance laboratory at a facility that is not an offsite hazardous waste facility.
- 11. A wastestream and treatment technology combination certified by the Department pursuant to Section 25200.1.5 of the Health and Safety Code as appropriate for authorization under CESW.
 Certified Technology Number
- 12. The treatment of formaldehyde or glutaraldehyde by a health care facility using a technology combination certified by the Department pursuant to section 25200.1.5 of the Health and Safety Code.
 Certified Technology Number

EXHIBIT B-13
CONDITIONALLY AUTHORIZED (CA) PAGE

**UNIFIED PROGRAM CONSOLIDATED FORM
ONSITE TIERED PERMITTING**

CONDITIONALLY AUTHORIZED (CA) PAGE

WASTE AND TREATMENT PROCESS COMBINATIONS

(See page two treatment unit - check all that apply)

Unit ID# _____ Facility ID# _____ Page # of _____

1. Aqueous waste, hazardous solely due to inorganic constituents, except asbestos, listed in Title 22, CCR, Section 66261.24(a)(1)(B) or (a)(2)(A) and which contain less than 1,400 ppm total of these constituents. (There is no volume limit for this wastestream.) Treatment using:

- a. Phase separation, including precipitation, by filtration, centrifugation, or gravity settling, including the use of demulsifiers and flocculants.
- b. Ion exchange, including metallic replacement.
- c. Reverse osmosis.
- d. Adsorption.
- e. pH adjustment of aqueous waste with a pH of between 2.0 and 12.5.
- f. Escrowmenting of solutions, unless these solutions contain hydrochloric acid.
- g. Reduction of solutions hazardous solely due to hexavalent chromium, to trivalent chromium with sodium formate, sodium metabisulfite, sodium thiosulfate, ferrous chloride, ferrous sulfate, ferrous sulfide, or sulfur dioxide. The solution contains less than 750 ppm of hexavalent chromium.

2. Aqueous waste, hazardous solely due to organic constituents listed in Title 22, CCR, Section 66261.24(a)(1)(B) or (2)(B) and which contain less than 750 ppm total of these constituents. (There is no volume limit for this wastestream.) Treatment using:

- a. Phase separation by filtration, centrifugation, or gravity settling, but excluding super-critical fluid extraction.
- b. Adsorption.

3. Sludges resulting from wastewater treatment, sludge, solid metal objects, and metal workings which are hazardous solely due to the presence of constituents, except asbestos, listed in Title 22, CCR, Section 66261.24(a)(1)(B) or (a)(2)(A) and which, for sludges only, contain less than 750 ppm total of these constituents. The monthly volume treated in this unit does not exceed 5,000 gallons or 45,000 pounds. Treatment using:

- a. Physical processes which consume treatment only because they change the physical properties of the waste, such as filtration, centrifugation, gravity settling, grinding, shredding, crushing, or compaction.
- b. Drying to remove water.
- c. Separation based on differences in physical properties, such as size, magnetism, or density.

4. Slime, gypsum, lime, sulfur, or phosphate sludge. The monthly volume treated in this unit does not exceed 5,000 gallons or 45,000 pounds. Treatment using:

- a. Drying to remove water.
- b. Phase separation by filtration, centrifugation, or gravity settling.

5. Special waste listed in Title 22, CCR, Section 66261.120 that meet the criteria in Title 22, CCR, Section 66261.211 which is hazardous solely due to the constituent, except asbestos, listed in Title 22, CCR, Section 66261.24(a)(1)(B) or (a)(2)(A) and which contain less than 750 ppm total of these constituents. The monthly volume treated in this unit does not exceed 5,000 gallons or 45,000 pounds. Treatment using:

- a. Drying to remove water.
- b. Phase separation by filtration, centrifugation, or gravity settling.
- c. Screening to separate components based on size.
- d. Separation based on differences in physical properties, such as size, magnetism, or density.

6. Special waste classified under Title 22, CCR, Section 66261.124 as special waste, except asbestos, which is hazardous solely due to the constituent, except asbestos, listed in Title 22, CCR, Section 66261.24(a)(1)(B) or (a)(2)(A) and which contain less than 750 ppm total of these constituents. The monthly volume treated in this unit does not exceed 5,000 gallons or 45,000 pounds. Treatment using:

- a. Drying to remove water.
- b. Phase separation by filtration, centrifugation, or gravity settling.
- c. Magnetic separation.

7. Soil contaminated with metals listed in Title 22, CCR, Section 66261.24(a)(2)(A). The monthly volume treated in this unit does not exceed 5,000 gallons or 45,000 pounds. Treatment using:

- a. Screening to separate components based on size.
- b. Magnetic separation.

8. Oil mixed with water and oil-water separation sludge. (There is no volume limit for this wastestream.) Treatment using: (NOTE: Some used oil-water separation is allowed under the CEL category.)

- a. Phase separation by filtration, centrifugation, or gravity settling, but excluding super-critical fluid extraction, including the use of demulsifiers and flocculants. Heat can be used but must not exceed 160 degrees Fahrenheit.
- b. Separation based on differences in physical properties, such as size, magnetism, or density.
- c. Reverse osmosis.

9. Neutralization of acidic or alkaline waste, hazardous solely due to corrosivity, or toxic only from the acid or caustic material, in elementary neutralization unit. (There is no volume limit for this wastestream.)

- a. The waste contains less than 10 percent acid or base constituents by weight. There is no volume limit for this category.
- b. The waste contains 10 percent or more acid or base constituents by weight and is treated in batches that do not exceed 500 gallons at one time.

10. Not in use exempted—formerly recovery of silver from photofinishing.

11. Not in use exempted—formerly treatment of spent cleaners and conditioners which are hazardous solely due to copper or copper compounds. Treatment of this wastestream is no longer allowed under Conditional Authorization as of January 1, 1995. Treatment of this wastestream now requires authorization under either Permit by Rule or, if the total volume treated is less than 55 gallons per month, under Conditionally Exempt Small Quantity Treatment.

12. A wastestream technology combination certified by the Department pursuant to Section 25200.15 of the Health and Safety Code as appropriate for authorization under Conditional Authorization.

Certified Technology Number: _____

EXHIBIT B-14
PERMIT BY RULE
PAGE 1 OF 2

UNIFIED PROGRAM CONSOLIDATED FORM
ONSITE TIERED PERMITTING
PERMIT BY RULE PAGE
WASTE AND TREATMENT PROCESS COMBINATIONS

Unit ID# 600 Facility ID# 1

- 1. Aqueous waste containing hexavalent chromium may be treated by the following process:
 - a. Reduction of hexavalent chromium to trivalent chromium with sodium bisulfite, sodium metabisulfite, sodium thiosulfate, ferrous sulfate, ferrous sulfide or sulfur dioxide provided both pH and addition of the reducing agent are automatically controlled.
- 2. Aqueous wastes containing metals listed in Title 22, CCR, Section 66261.24 (a)(2) and/or fluoride salts may be treated by the following technologies:

<input type="checkbox"/> a. pH adjustment or neutralization.	<input type="checkbox"/> g. Plating the metal onto an electrode.
<input type="checkbox"/> b. Precipitation or crystallization.	<input type="checkbox"/> h. Electrolysis.
<input type="checkbox"/> c. Phase separation by filtration, centrifugation, or gravity setting.	<input type="checkbox"/> i. Electrowinning or electrolytic recovery.
<input type="checkbox"/> d. Ion exchange.	<input type="checkbox"/> j. Chemical stabilization using silicates and/or cementitious types of reactions.
<input type="checkbox"/> e. Reverse osmosis.	<input type="checkbox"/> k. Evaporation.
<input type="checkbox"/> f. Metallic replacement.	<input type="checkbox"/> l. Adsorption.
- 3. Aqueous wastes with total organic carbon less than 10% as measured by EPA Method 9060 and less than 1% total volatile organic compounds as measured by EPA Method 8240 may be treated by the following technologies:
 - a. Phase separation by filtration, centrifugation or gravity setting, but excluding super critical fluid extraction.
 - b. Adsorption.
 - c. Distillation.
 - d. Biological processes conducted in tanks or containers and utilizing naturally occurring microorganisms.
 - e. Photodegradation using ultraviolet light, with or without the addition of hydrogen peroxide or ozone, provided the treatment is conducted in an enclosed system.
 - f. Air stripping or steam stripping.
- 4. Sludges, dregs, solid metal objects and metal workings which contain or are contaminated with metals listed in Title 22, CCR, Section 66261.24(a)(2) and/or fluoride salt may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions.
 - b. Physical processes which change only the physical properties of the waste such as grinding, shredding, crushing, or compacting.
 - c. Drying to remove water.
 - d. Separation based on differences in physical properties such as size, magnetism or density.
- 5. Alum, gypsum, lime, sulfur or phosphate sludges may be treated by the following technologies:

<input type="checkbox"/> a. Chemical stabilization using silicates and/or cementitious types of reactions.	<input type="checkbox"/> c. Phase separation by filtration, centrifugation or gravity setting.
<input type="checkbox"/> b. Drying to remove water.	
- 6. Wastes identified in Title 22, CCR, Section 66261.120, that meet the criteria and requirements for special waste classification in Section 66261.122 may be treated by the following technologies:
 - a. Chemical stabilization using silicates and/or cementitious types of reactions.
 - b. Drying to remove water.
 - c. Phase separation by filtration, centrifugation or gravity setting.
 - d. Screening to separate components based on size.
 - e. Separation based on differences in physical properties such as size, magnetism or density.
- 7. Wastes, except asbestos, which have been classified by the Department as special wastes pursuant to Title 22, CCR, Section 66261.124, may be treated by the following technologies:

<input type="checkbox"/> a. Chemical stabilization using silicates and/or cementitious types of reactions.	<input type="checkbox"/> c. Phase separation by filtration, centrifugation or gravity setting.
<input type="checkbox"/> b. Drying to remove water.	<input type="checkbox"/> d. Magnetic separation.
- 8. Inorganic acid or alkaline wastes may be treated by the following technology:
 - a. pH adjustment or neutralization.
- 9. Soils contaminated with metals listed in Title 22, CCR, Section 66261.24(a)(2), (Persistent and Bioaccumulative Toxic Substance) may be treated by the following technologies:

<input type="checkbox"/> a. Chemical stabilization using silicates and/or cementitious types of reactions.	<input type="checkbox"/> c. Magnetic separation.
<input type="checkbox"/> b. Screening to separate components based on size.	
- 10. Used oil, unrefined oil waste, mixed oil, oil mixed with water and oil/water separation sludges may be treated by the following technologies:
 - a. Phase separation by filtration, centrifugation or gravity setting, but excluding super critical fluid extraction.
 - b. Distillation.
 - c. Neutralization.
 - d. Separation based on differences in physical properties such as size, magnetism or density.
 - e. Reverse osmosis.
 - f. Biological processes conducted in tanks or containers and utilizing naturally occurring microorganisms.

**EXHIBIT B-14
PERMIT BY RULE
PAGE 2 OF 2**

11. Containers of 110 gallons or less capacity which are not constructed of wood, paper, cardboard, fabric or any other similar absorptive material, which have been emptied as specified in Title 40 of the Code of Federal Regulations, Section 261.7 or inner liners removed from empty containers that once held hazardous waste or hazardous material and which are not excluded from regulation may be treated by the following technologies provided the treated containers and rinseate are managed in compliance with applicable requirements.
- a. Rinsing with a suitable liquid capable of dissolving or removing the hazardous constituents which the container held.
 - b. Physical processes such as crushing, shredding, grinding or puncturing that change only the physical properties of the container or inner liner, provided the container or inner liner is first rinsed and the rinseate is removed from the container or inner liner.
12. Multi-component resins may be treated by the following process:
- a. Mixing the resin components in accordance with the manufacturer's instructions.
13. A waste stream technology combination certified by the Department pursuant to Section 25200.1.F of the Health and Safety Code as appropriate for authorization under Permit by Rule.

_____ Certified Technology Number

14. Aqueous wastes generated by rinsing products and fixtures holding products that were processed in cyanide containing solutions may be treated by the following technologies:

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

15. Aqueous wastes generated by reverse osmosis or the regeneration of demineralizer (ion exchange) columns that were used for recycling of wastewater at facilities that maintain zero discharge of wastewater derived from the treatment of cyanide-containing aqueous waste

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

16. Rinseate from rinsing equipment used to transfer aqueous solutions containing cyanides such as containers, pumps, and hoses may be treated by the following technologies:

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

17. Aqueous wastes generated by the following onsite recycling activities: 1) Rinsing spent anode bags prior to onsite reuse; or 2) Rinsing empty containers prior to onsite reuse may be treated by the following technologies:

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

18. Aqueous wastes generated by onsite laboratories conducting analysis and testing may be treated by the following technologies:

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

19. Process solutions containing cyanides with recoverable amounts of metal may be treated by the following technology:

- Electrowinning to recover metals prior to further treatment, including destruction of incidental amounts of cyanide by electrochemical oxidation resulting from the electrowinning process.

20. Process solutions containing cyanides added slowly to a rinse tank at a level that never exceeds 5000 milligram per liter cyanide in the rinse tank may be treated by the following technologies:

- Oxidation by addition of hypochlorite
- Oxidation by addition of peroxide or ozone, with or without the use of ultraviolet light
- Alkaline chlorination
- Electrochemical oxidation
- Ion exchange
- Reverse osmosis

EXHIBIT B-15
CONDITIONALLY EXEMPT-LIMITED (CEL) PAGE

UNIFIED PROGRAM CONSOLIDATED FORM			
ONSITE TIERED PERMITTING			
CONDITIONALLY EXEMPT - LIMITED (CEL) PAGE			
WASTE AND TREATMENT PROCESS COMBINATIONS			
<small>(one page per treatment unit - check all that apply)</small>			

Unit ID# _____ Facility ID# _____ Page 1 of

1. Puncturing, draining, or crushing of aerosol cans, at ambient temperature, using equipment or technology combination certified by the Department of Toxic Substances control (DTSC) pursuant to section 25200.1.5 of the Health and Safety Code. The equipment must capture gaseous and liquid contents, prevent fire, explosion, and unauthorized releases of hazardous constituents, and prevent worker exposure. The aerosol cans must be recycled as scrap metal.

Certified Technology Number

NOTE: This category is not available until DTSC certifies a manufacturer's equipment.

2. The separation of used oil from water, provided that the wastestream is hazardous solely due to the oil and the used oil is properly transported to an authorized offsite oil recycler. Treatment using:

a. Gravity separation.

b. A centrifuge.

c. A membrane technology.

d. Heating of the water containing used oil to a temperature that is not more than 20 degrees Fahrenheit below the flashpoint of the used oil component of the mixture at atmospheric pressure.

e. The addition of demulsifiers to the water containing used oil.

NOTE: The authorized separation of used oil from water under this wastestream may not include contaminated groundwater or water containing any measurable amounts of gasoline or more than two percent (2%) diesel fuel (combination of Number 1 or 2 fuel).

**EXHIBIT B-16
CERTIFICATION OF FINANCIAL ASSURANCE**

State of California - California Environmental Protection Agency Department of Toxic Substances Control

UNIFIED PROGRAM CONSOLIDATED FORM		HAZARDOUS WASTE
CERTIFICATION OF FINANCIAL ASSURANCE		
FOR PERMIT BY RULE AND CONDITIONALLY AUTHORIZED ONSITE TREATERS		

a. Initial Certification b. Amended Certification c. Annual Certification Page of

I. FACILITY IDENTIFICATION (For an activity in the left-hand column of the attached information)

BUSINESS NAME (Same as FACILITY NAME on DPA - Doing Business Act) 3

FACILITY ID#		FACILITY EPA ID#
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TYPE OF OPERATION a. PBR-FTU b. CA c. Other 5

II. ESTIMATED CLOSURE COSTS

NOTE: In addition to the dollar figure below, a written estimate of closure costs must be attached when you submit this section of this page. 70

ESTIMATED CLOSURE COSTS \$ 70

III. EXEMPTION FROM FINANCIAL ASSURANCE REQUIREMENTS

1. I am not required to provide a mechanism because:

a. I certify that my closure cost estimate is less than or equal to \$10,000, or 70

b. Specify other reasons 70

2. As a PBR owner or operator, I have not operated more than thirty days in a calendar year. (Does not apply to Conditional Authorization) 70

IV. CLOSURE FINANCIAL ASSURANCE MECHANISM

I am required to provide a mechanism and it is attached to this page. 70

EFFECTIVE DATE OF CLOSURE ASSURANCE MECHANISM 70

MECHANISM ID NUMBER(S) 70

MECHANISM TYPE a. Closure Trust Fund d. Closure Insurance g. Multiple Financial Mechanisms 70

(Check one only) b. Surety Bond e. Financial rest and Corporate Guarantee h. Certificate of Deposit 70

c. Closure Letter of Credit f. Alternative Mechanism i. Savings Account 70

FINANCIAL INSTITUTION, INSURANCE OR SURETY COMPANY, OTHER ORGANIZATION 70

ADDRESS 70

CITY 71	STATE 71	ZIP CODE 71
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V. OWNER OR OPERATOR CERTIFICATION

SIGNER OF THIS CERTIFICATION a. Owner b. Operator 71

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. (22 CCR §66270.11)

SIGNATURE OF OWNER/OPERATOR 71	DATE 71
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NAME OF OWNER/OPERATOR (Print) 71	TITLE OF OWNER/OPERATOR 71
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EXHIBIT B-17
REMOTE WASTE CONSOLIDATION SITE ANNUAL NOTIFICATION

UNIFIED PROGRAM CONSOLIDATED FORM		HAZARDOUS WASTE
REMOTE WASTE CONSOLIDATION SITE ANNUAL NOTIFICATION		
<input type="checkbox"/> a. Initial <input type="checkbox"/> b. Revised <input type="checkbox"/> c. Annual		Page ___ of ___
I. GENERAL INFORMATION		
BUSINESS NAME (Name of FACILITY NAME or DBA - Doing Business As) ⁷²⁰		FACILITY ID# ⁷²¹
II. CONSOLIDATION SITE INFORMATION		
ADDRESS ⁷²²		FACILITY EPA ID# ⁷²³
CITY ⁷²⁴	CA	ZIP CODE ⁷²⁵
DESCRIPTION OF THE TYPE(S) OF REMOTE LOCATION(S) AND SOURCE(S) FROM WHICH THE NON-RCRA HAZARDOUS WASTE WILL BE COLLECTED (i.e. power pole) ⁷²⁶		
DESCRIPTION OF THE TYPE OF HAZARDOUS WASTE THAT MAY BE COLLECTED ⁷²⁷		
Do you treat your hazardous waste at this consolidation site? ⁷²⁸ <small>(optional)</small> <input type="checkbox"/> Yes <input type="checkbox"/> No	ESTIMATED MONTHLY VOLUME CONSOLIDATED ⁷²⁹	UNITS <input type="checkbox"/> a. Pounds <input type="checkbox"/> b. Gallons ⁷³⁰
III. BASIS FOR NOT NEEDING A FEDERAL PERMIT		
<small>(Check all that apply.)</small> ⁷³¹		
<input type="checkbox"/> a. The hazardous waste being consolidated is not hazardous waste under federal law although the waste is regulated as hazardous waste under California state law.		
<input type="checkbox"/> b. The hazardous waste is hazardous waste under federal law, but transportation to and accumulation at the consolidation site of the waste is not subject to permitting requirements under federal law for the following other reason(s):		
IV. CERTIFICATIONS		
I certify under penalty of law that the activities described in these documents meet the applicable eligibility and operating requirements of state statutes and regulations for remote waste and consolidation sites. I further certify that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those directly responsible for gathering the information, the information is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are substantial penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.		
SIGNATURE OWNER OPERATOR	DATE ⁷³²	
NAME OF OWNER OPERATOR (Print) ⁷³³	TITLE OF OWNER OPERATOR ⁷³⁴	

EXHIBIT B-18 HAZARDOUS WASTE TANK CLOSURE CERTIFICATION

UNIFIED PROGRAM CONSOLIDATED FORM						HAZARDOUS WASTE		
HAZARDOUS WASTE TANK CLOSURE CERTIFICATION								
Page _____ of _____								
I. FACILITY IDENTIFICATION								
BUSINESS NAME (Same as FACILITY NAME or DBA - Doing Business As)						FACILITY ID#		
TANK OWNER NAME								
TANK OWNER ADDRESS								
TANK OWNER CITY				STATE	ZIP CODE			
II. TANK CLOSURE INFORMATION								
TANK INTERIOR ATMOSPHERE READINGS	Tank ID # <small>(Attach additional copies of this page for more than three tanks)</small>	Concentration of Flammable Vapor			Concentration of Oxygen			
		Top	Center	Bottom	Top	Center	Bottom	
		1	2	3	4	5	6	
III. CERTIFICATION								
On examination of the tank, I certify the tank is visually free from product, sludge, scale (thin, flaky residual of tank contents), rustscale and debris. I further certify that the information provided herein is true and accurate to the best of my knowledge.								
SIGNATURE OF CERTIFIER					STATUS OR AFFILIATION OF CERTIFYING PERSON			
NAME OF CERTIFIER (Print)					Certifier is a representative of the CUPA, authorized agency, or LIA.			
TITLE OF CERTIFIER					<input type="checkbox"/> Yes <input type="checkbox"/> No			
ADDRESS					Name of CUPA, authorized agency, or LIA:			
CITY					If certifier is other than CUPA / LIA check appropriate box below:			
PHONE					<input type="checkbox"/> a. Certified Industrial Hygienist (CIH) <input type="checkbox"/> b. Certified Safety Professional (CSP) <input type="checkbox"/> c. Certified Marine Chemist (CMC) <input type="checkbox"/> d. Registered Environmental Health Specialist (REHS) <input type="checkbox"/> e. Professional Engineer (PE) <input type="checkbox"/> f. Class II Registered Environmental Assessor <input type="checkbox"/> g. Contractors' State License Board licensed contractor (with hazardous substance removal certification)			
DATE	CERTIFICATION TIME							
TANK PREVIOUSLY HELD FLAMMABLE OR COMBUSTIBLE MATERIALS								
<small>(If yes, the tank interior atmosphere shall be rechecked with a combustible gas indicator prior to work being conducted on the tank.)</small>								
<input type="checkbox"/> Yes <input type="checkbox"/> No								
CERTIFIER'S TANK MANAGEMENT INSTRUCTIONS FOR SCRAP DEALER, DISPOSAL FACILITY, ETC:								
<small>A copy of this certificate shall accompany the tank to the recycling / disposal facility and be provided to the CUPA. If there is no CUPA, copies shall be submitted to the LIA and authorized agency, owner / operator of the tank system, removal contractor, and the recycling / disposal facility.</small>								

EXHIBIT B-19
EMERGENCY RESPONSE PLAN / EMPLOYEE TRAINING PROGRAM
PAGE 1 OF 5

HAZARDOUS MATERIALS BUSINESS PLAN MODULES
FOR USE WITH CERS ELECTRONIC REPORTING

Complete These Modules and Use the "Upload Document" Feature in CERS to Complete Your HMBP for Electronic Submittal

A. Emergency Response/Contingency Plan (HSC §23094(b), 19 CCR §2731, 22 CCR §66262.3(a)(4)(j)

All facilities that handle hazardous materials in HMBP quantities must have a written emergency response plan. In addition, facilities that generate 1,000 kilograms or more of hazardous waste (or more than 1 kilogram of acutely hazardous waste or 100 kilograms of debris resulting from the spill of an acutely hazardous waste) per month, or accumulate more than 6,000 kilograms of hazardous waste on-site at any one time, must prepare a hazardous waste contingency plan. Because the requirements are similar, they have been combined in a single document, provided below, for your convenience. This plan is a required module of the Hazardous Materials Business Plan (HMBP).

This site-specific Emergency Response/Contingency Plan is the facility's plan for dealing with emergencies and shall be implemented immediately whenever there is a fire, explosion, or release of hazardous materials that could threaten human health and/or the environment. At least one copy of the plan shall be maintained at the facility for use in the event of an emergency and for inspection by the local agency. A copy of the plan and any revisions must be provided to any contractor, hospital, or agency with whom special (i.e., contractual) emergency services arrangements have been made (see section 3, below).

1. Evacuation Plan:

a. The following alarm signal(s) will be used to begin evacuation of the facility (check all that apply):

[] Bells; [] Horns/Sirens; [] Verbal (i.e., shouting); [] Other (specify): _____

b. [] Evacuation map is prominently displayed throughout the facility.

Note: A properly completed HMBP Site Plan satisfies contingency plan map requirements. This drawing (or any other drawing that shows primary and alternate evacuation routes, emergency exits, and primary and alternate staging areas) must be prominently posted throughout the facility in locations where it will be visible to employees and visitors.

2. a. Emergency Contacts:*

Fire/Police/Ambulance _____ Phone No.: 911

California Emergency Management Agency _____ Phone No.: (800) 852-7550

b. Post-Incident Contacts:*

Certified Unified Program Agency (CUPA) _____ Phone No.: ()

Local Hazardous Materials Program _____ Phone No.: ()

California Department of Toxic Substances Control (DTSC) _____ Phone No.: ()

Cal/OSHA Division of Occupational Safety and Health _____ Phone No.: ()

Air Quality Management District _____ Phone No.: ()

Regional Water Quality Control Board _____ Phone No.: ()

* Phone numbers for agencies in Unidoc Member Agency geographic jurisdictions are available at www.unidocs.org.

c. Emergency Resources:

Poison Control Center* _____ Phone No.: (800) 876-4766

Nearest Hospital: Name: _____ Phone No.: ()

Address: _____ City: _____

3. Arrangements With Emergency Responders: (Attach additional pages, if needed.)

If you have made special (i.e., contractual) arrangements with any police department, fire department, hospital, contractor, or State or local emergency response team to coordinate emergency services, describe those arrangements below:

EXHIBIT B-19
EMERGENCY RESPONSE PLAN / EMPLOYEE TRAINING PROGRAM
PAGE 2 OF 5

4. Emergency Procedures:

Emergency Coordinator Responsibilities:

- a. Whenever there is an imminent or actual emergency situation such as a explosion, fire, or release, the emergency coordinator (or his/her designee when the emergency coordinator is on call) shall:
 - i. Identify the character, exact source, amount, and areal extent of any released hazardous materials.
 - ii. Assess possible hazards to human health or the environment that may result from the explosion, fire, or release. This assessment must consider both direct and indirect effects (e.g., the effects of any toxic, irritating, or asphyxiating gases that are generated, the effects of any hazardous surface water run-off from water or chemical agents used to control fire, etc.).
 - iii. Activate internal facility alarms or communications systems, where applicable, to notify all facility personnel.
 - iv. Notify appropriate local authorities (i.e., call 911).
 - v. Notify the California Emergency Management Agency at (800) 852-7550.
 - vi. Monitor for leaks, pressure build-up, gas generation, or ruptures in valves, pipes, or other equipment shut down in response to the incident.
 - vii. Take all reasonable measures necessary to ensure that fires, explosions, and releases do not occur, recur, or spread to other hazardous materials at the facility.
- b. Before facility operations are resumed in areas of the facility affected by the incident, the emergency coordinator shall:
 - i. Provide for proper storage and disposal of recovered waste, contaminated soil or surface water, or any other material that results from a explosion, fire, or release at the facility.
 - ii. Ensure that no material that is incompatible with the released material is transferred, stored, or disposed of in areas of the facility affected by the incident until cleanup procedures are completed.
 - iii. Ensure that all emergency equipment is cleaned, fit for its intended use, and available for use.
 - iv. Notify the California Department of Toxic Substances Control, the local CUPA, and the local fire department's hazardous materials program that the facility is in compliance with requirements b-i and b-ii. above.

Responsibilities of Other Personnel:

On a separate page, list any emergency response functions not covered in the "Emergency Coordinator Responsibilities" section above. Next to each function, list the job title or name of each person responsible for performing the function.

5. Post-Incident Reporting/Recording:

The time, date, and details of any hazardous materials incident that requires implementation of this plan shall be noted in the facility's operating record.

Within 15 days of any hazardous materials emergency incident or threatened hazardous materials emergency incident that triggers implementation of this plan, a written Emergency Incident Report, including, but not limited to a description of the incident and the facility's response to the incident, must be submitted to the California Department of Toxic Substances Control, the local CUPA, and the local fire department's hazardous materials program. The report shall include:

- a. Name, address, and telephone number of the facility's owner/operator;
- b. Name, address, and telephone number of the facility;
- c. Date, time, and type of incident (e.g., fire, explosion, etc.);
- d. Name and quantity of material(s) involved;
- e. The extent of injuries, if any;
- f. An assessment of actual or potential hazards to human health or the environment, where this is applicable;
- g. Estimated quantity and disposition of recovered material that resulted from the incident;
- h. Cause(es) of the incident;
- i. Actions taken in response to the incident;
- j. Administrative or engineering controls designed to prevent such incidents in the future.

6. Earthquake Vulnerability: [19 CCR §2731(e)]

As an attachment to this plan, you must identify any areas of the facility and mechanical or other systems that require immediate inspection or isolation because of their vulnerability to earthquake-related ground motion.

EXHIBIT B-19
EMERGENCY RESPONSE PLAN / EMPLOYEE TRAINING PROGRAM
PAGE 3 OF 5

7. **Hazard Mitigation/Prevention/Abatement:** [19 CCR §2731(c)]

As an attachment to this plan, you must include procedures that provide for mitigation, prevention, or abatement of hazards to persons, property, or the environment. These procedures must be scaled appropriately for the size and nature of the business, the nature of the damage potential of the hazardous materials handled, and the proximity of the business to residential areas and other populations.

8. **Emergency Equipment Inventory Table:** [22 CCR §60265.52(e), as referenced by §60262.34(a)(4)]

Complete the following Emergency Equipment Inventory Table by identifying equipment maintained on-site:

1. Equipment Category	2. Equipment Type	3. Locations *	4. Description **
Personal Protective Equipment, Safety Equipment, and First Aid Equipment	<input type="checkbox"/> Cartridge Respirators		
	<input type="checkbox"/> Chemical Monitoring Equipment <i>(describe)</i>		
	<input type="checkbox"/> Chemical Protective Aprons/Coats		
	<input type="checkbox"/> Chemical Protective Boots		
	<input type="checkbox"/> Chemical Protective Gloves		
	<input type="checkbox"/> Chemical Protective Suits <i>(describe)</i>		
	<input type="checkbox"/> Face Shields		
	<input type="checkbox"/> First Aid Kits/Stations <i>(describe)</i>		
	<input type="checkbox"/> Hard Hats		
	<input type="checkbox"/> Plumbed Eye Wash Stations		
	<input type="checkbox"/> Portable Eye Wash Kits <i>(i.e., bottle type)</i>		
	<input type="checkbox"/> Respirator Cartridges <i>(describe)</i>		
	<input type="checkbox"/> Safety Glasses/Splash Goggles		
	<input type="checkbox"/> Safety Showers		
Fire Extinguishing Systems	<input type="checkbox"/> Self-Contained Breathing Apparatuses (SCBA)		
	<input type="checkbox"/> Other <i>(describe)</i>		
	<input type="checkbox"/> Automatic Fire Sprinkler Systems		
	<input type="checkbox"/> Fire Alarm Boxes/Stations		
	<input type="checkbox"/> Fire Extinguisher Systems <i>(describe)</i>		
	<input type="checkbox"/> Fire Extinguishers <i>(describe)</i>		
Spill Control Equipment and Decontamination Equipment	<input type="checkbox"/> Other <i>(describe)</i>		
	<input type="checkbox"/> Absorbents <i>(describe)</i>		
	<input type="checkbox"/> Berms/Dikes <i>(describe)</i>		
	<input type="checkbox"/> Decontamination Equipment <i>(describe)</i>		
	<input type="checkbox"/> Emergency Tanks <i>(describe)</i>		
	<input type="checkbox"/> Exhaust Hoods		
	<input type="checkbox"/> Gas Cylinder Leak Repair Kits <i>(describe)</i>		
	<input type="checkbox"/> Neutralizers <i>(describe)</i>		
	<input type="checkbox"/> Overpack Drums		
Communications and Alarm Systems	<input type="checkbox"/> Sumps <i>(describe)</i>		
	<input type="checkbox"/> Other <i>(describe)</i>		
	<input type="checkbox"/> Chemical Alarms <i>(describe)</i>		
	<input type="checkbox"/> Intercoms/ PA Systems		
	<input type="checkbox"/> Portable Radios		
Additional Equipment <i>(Use Additional Pages if Needed.)</i>	<input type="checkbox"/> Telephones		
	<input type="checkbox"/> Tank Leak Detection Systems		
	<input type="checkbox"/> Other <i>(describe)</i>		
	<input type="checkbox"/>		

* Use the map and grid numbers or location identifiers from your HMBP.

** Describe the equipment and its capabilities. If applicable, specify any testing/maintenance procedures/intervals. Attach additional pages, if needed.

EXHIBIT B-19
EMERGENCY RESPONSE PLAN / EMPLOYEE TRAINING PROGRAM
PAGE 4 OF 5

B. Employee Training Plan [HSC, Section 25504(c); 22 CCR §60262-34(a)(4)]

All facilities that handle hazardous materials in HMBP quantities must have a written employee training plan. This plan is a required module of the Hazardous Materials Business Plan (HMBP). A blank plan has been provided below for you to complete and submit if you do not already have such a plan. If you already have a brief written description of your training program that addresses all subjects covered below, you are not required to complete the blank plan, below, but you must include a copy of your existing document as part of your HMBP.

Check all boxes that apply. [Note: Items marked with an asterisk (*) are required.]:

1. Personnel are trained in the following procedures:

<input type="checkbox"/>	Internal alarm/notification *	
<input type="checkbox"/>	Evacuation/re-entry procedures & assembly point locations*	
<input type="checkbox"/>	Emergency incident reporting	
<input type="checkbox"/>	External emergency response organization notification	
<input type="checkbox"/>	Location(s) and contents of Emergency Response/Contingency Plan	
<input type="checkbox"/>	Facility evacuation drills, that are conducted at least (specify):	(e.g., "Quarterly", etc.)

2. Chemical Handlers are additionally trained in the following:

<input type="checkbox"/>	Safe methods for handling and storage of hazardous materials *	
<input type="checkbox"/>	Location(s) and proper use of fire and spill control equipment	
<input type="checkbox"/>	Spill procedures/emergency procedures	
<input type="checkbox"/>	Proper use of personal protective equipment *	
<input type="checkbox"/>	Specific hazard(s) of each chemical to which they may be exposed, including routes of exposure (i.e., inhalation, ingestion, absorption) *	
<input type="checkbox"/>	Hazardous Waste Handlers/Managers are trained in all aspects of hazardous waste management specific to their job duties (e.g., container accumulation time requirements, labeling requirements, storage area inspection requirements, manifesting requirements, etc.) *	

3. Emergency Response Team Members are capable of and engaged in the following:

Complete this section only if you have an in-house emergency response team

<input type="checkbox"/>	Personnel rescue procedures	
<input type="checkbox"/>	Shutdown of operations	
<input type="checkbox"/>	Liaison with responding agencies	
<input type="checkbox"/>	Use, maintenance, and replacement of emergency response equipment	
<input type="checkbox"/>	Refresher training, which is provided at least annually *	
<input type="checkbox"/>	Emergency response drills, which are conducted at least (specify):	(e.g., "Quarterly", etc.)

1 **EXHIBIT B-19**
2 **EMERGENCY RESPONSE PLAN / EMPLOYEE TRAINING PROGRAM**
3 **PAGE 5 OF 5**

4 **C. Record Keeping**

5 All facilities that handle hazardous materials must maintain records associated with their management. A
6 summary of your record keeping procedures is a required module of the Unidocs Hazardous Materials Business
7 Plan (HMBP). A blank summary has been provided below for you to complete and submit if you do not
8 already have such a document. If you already have a brief written description of your hazardous materials
9 record keeping systems that addresses all subjects covered below, you are not required to complete this
10 page, but you must include a copy of your existing document as part of your HMBP.

11 Check all boxes that apply. The following records are maintained at the facility. *[Note: Items marked with an
12 asterisk (*) are required.]*

<input type="checkbox"/>	Current employees' training records (to be retained until closure of the facility) *
<input type="checkbox"/>	Former employees' training records (to be retained at least three years after termination of employment) *
<input type="checkbox"/>	Training Program(s) (i.e., written description of introductory and continuing training) *
<input type="checkbox"/>	Current copy of this Emergency Response/Contingency Plan *
<input type="checkbox"/>	Record of recordable/reportable hazardous material/waste releases *
<input type="checkbox"/>	Record of hazardous material/waste storage area inspections *
<input type="checkbox"/>	Record of hazardous waste tank daily inspections *
<input type="checkbox"/>	Description and documentation of facility emergency response drills

13 *Note: The above list of records does not necessarily identify every type of record required to be maintained by the facility.*

14 *Note: The following section applies where local agencies require facility owners/operators to perform and
15 document routine facility self-inspections:*

16 A copy of the Inspection Check Sheet(s) or Log(s) used in conjunction with required routine self-
17 inspections of your facility must be submitted with your HMBP. *[Exception: Unidocs provides a
18 Hazardous Materials/Waste Storage Area Inspection Form that you may use if you do not already have your
19 own form. If you use the Unidocs form (available at www.unidocs.org), you do not need to attach a copy.]*

20 Check the appropriate box:

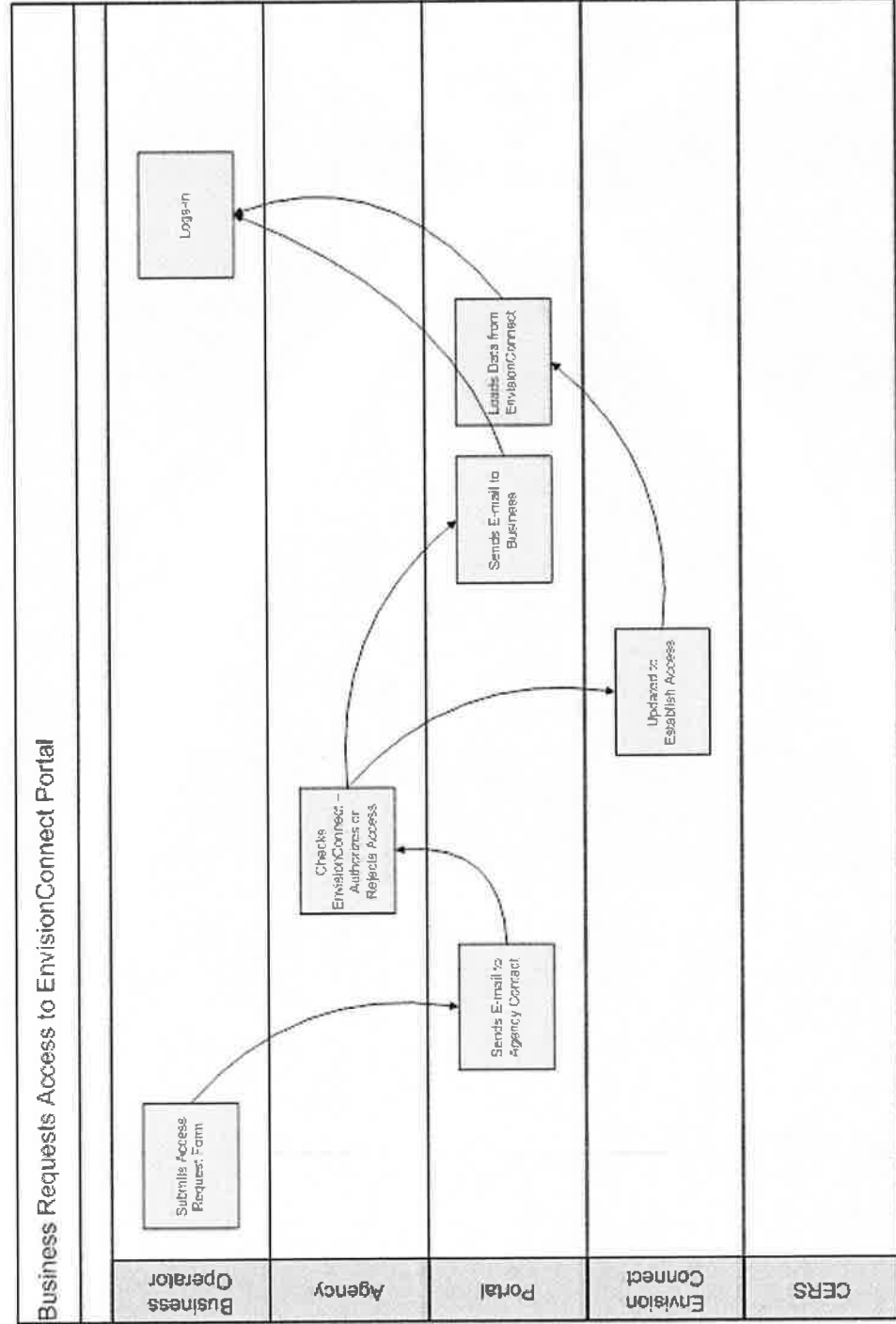
<input type="checkbox"/>	We will use the Unidocs "Hazardous Materials/Waste Storage Area Inspection Form" to document inspections.
<input type="checkbox"/>	We will use our own documents to record inspections. (A blank copy of each document used must be uploaded to CERS with the HMBP.)

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EXHIBIT C
PROFESSIONAL SERVICES REQUEST (PSR)

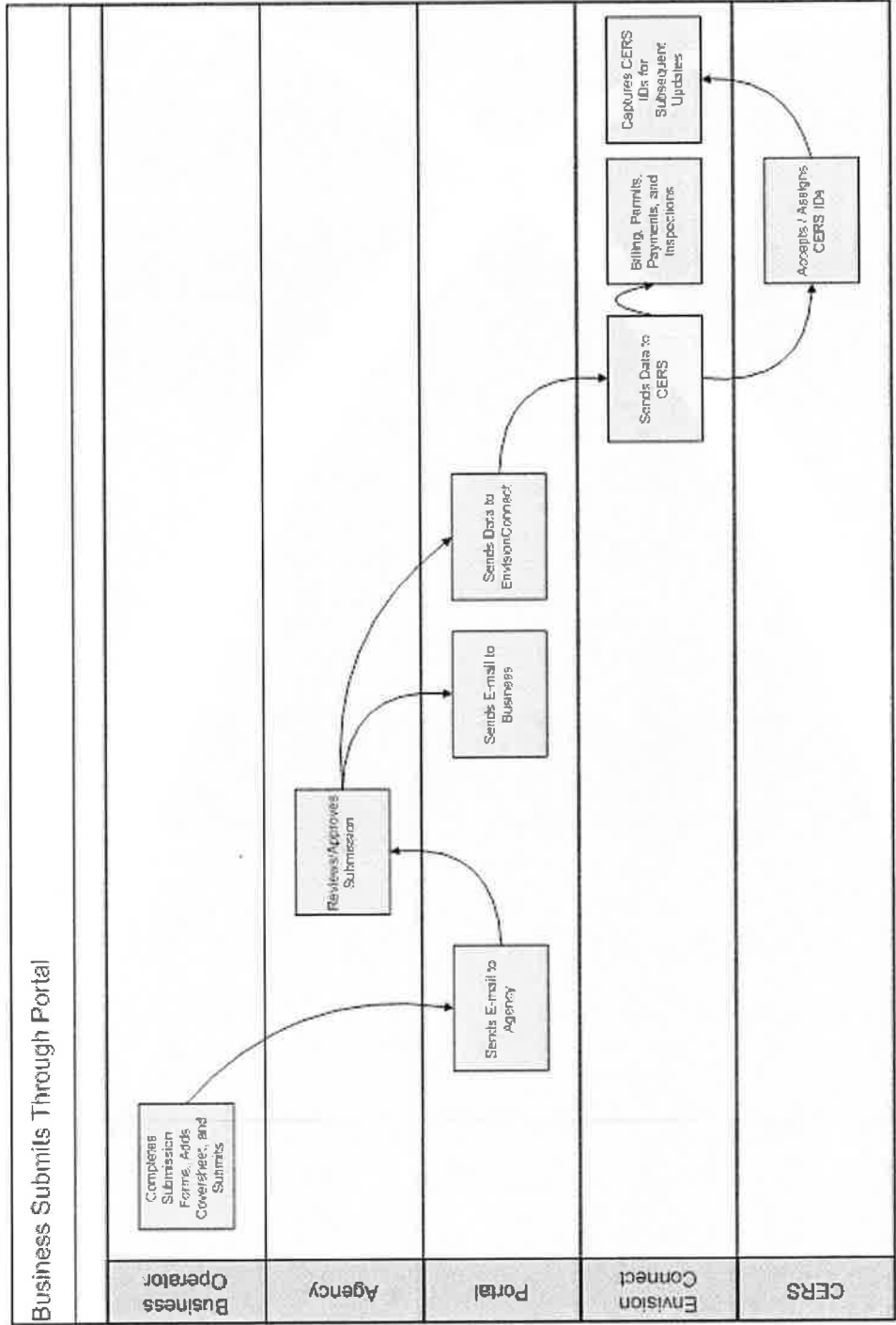
This has been left blank intentionally.

**EXHIBIT D-1
PROCESS DIAGRAM
BUSINESS REQUESTS ACCESS TO ENVISIONCONNECT PORTAL**



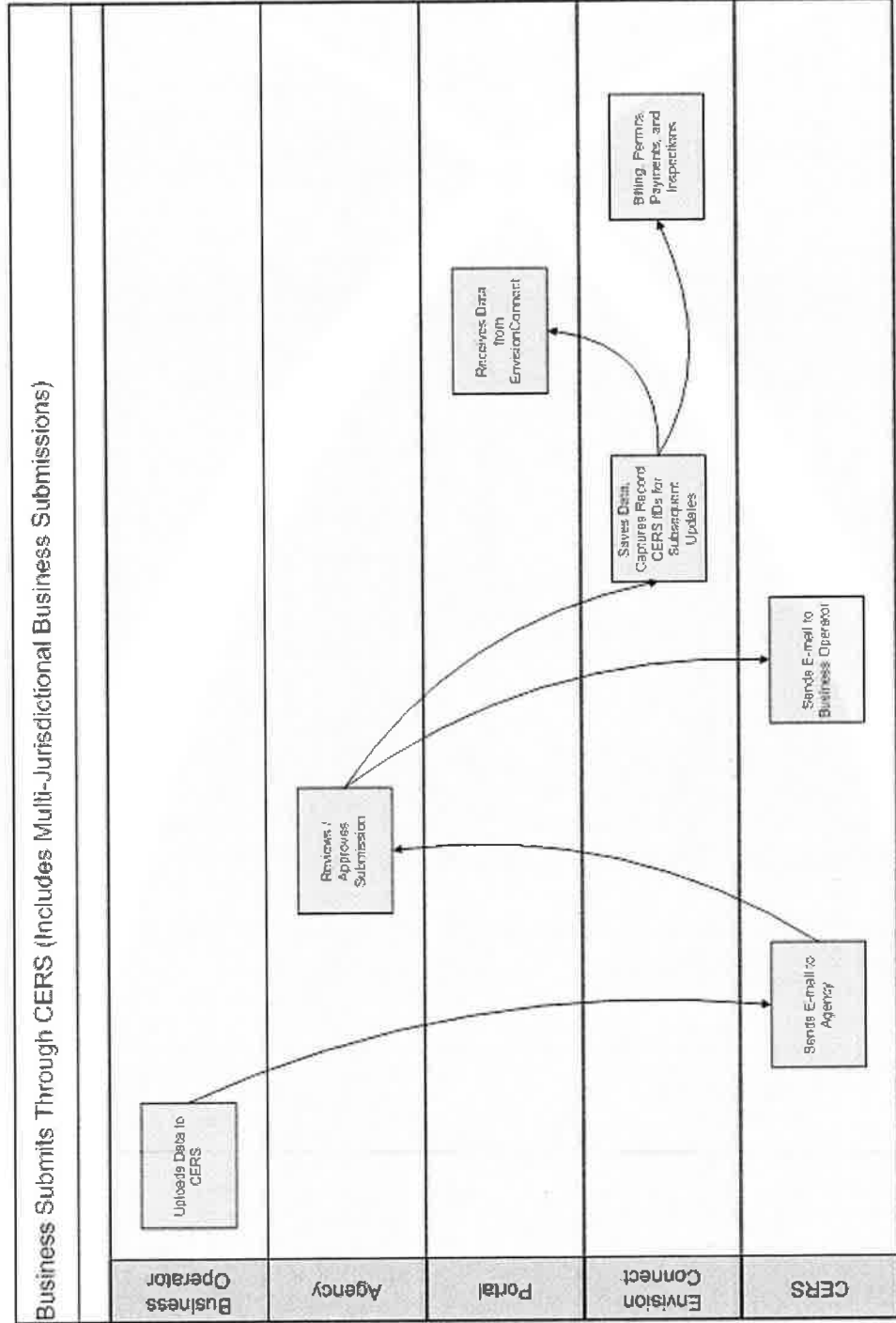
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EXHIBIT D-2 PROCESS DIAGRAM BUSINESS SUBMITS THROUGH PORTAL



**EXHIBIT D-3
PROCESS DIAGRAM
BUSINESS SUBMITS THROUGH CERS
(Includes Multi-Jurisdictional Business Submissions)**

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**EXHIBIT D-4
PROCESS DIAGRAM
AGENCY CONDUCTS INSPECTION/ENFORCEMENT ACTIVITIES**

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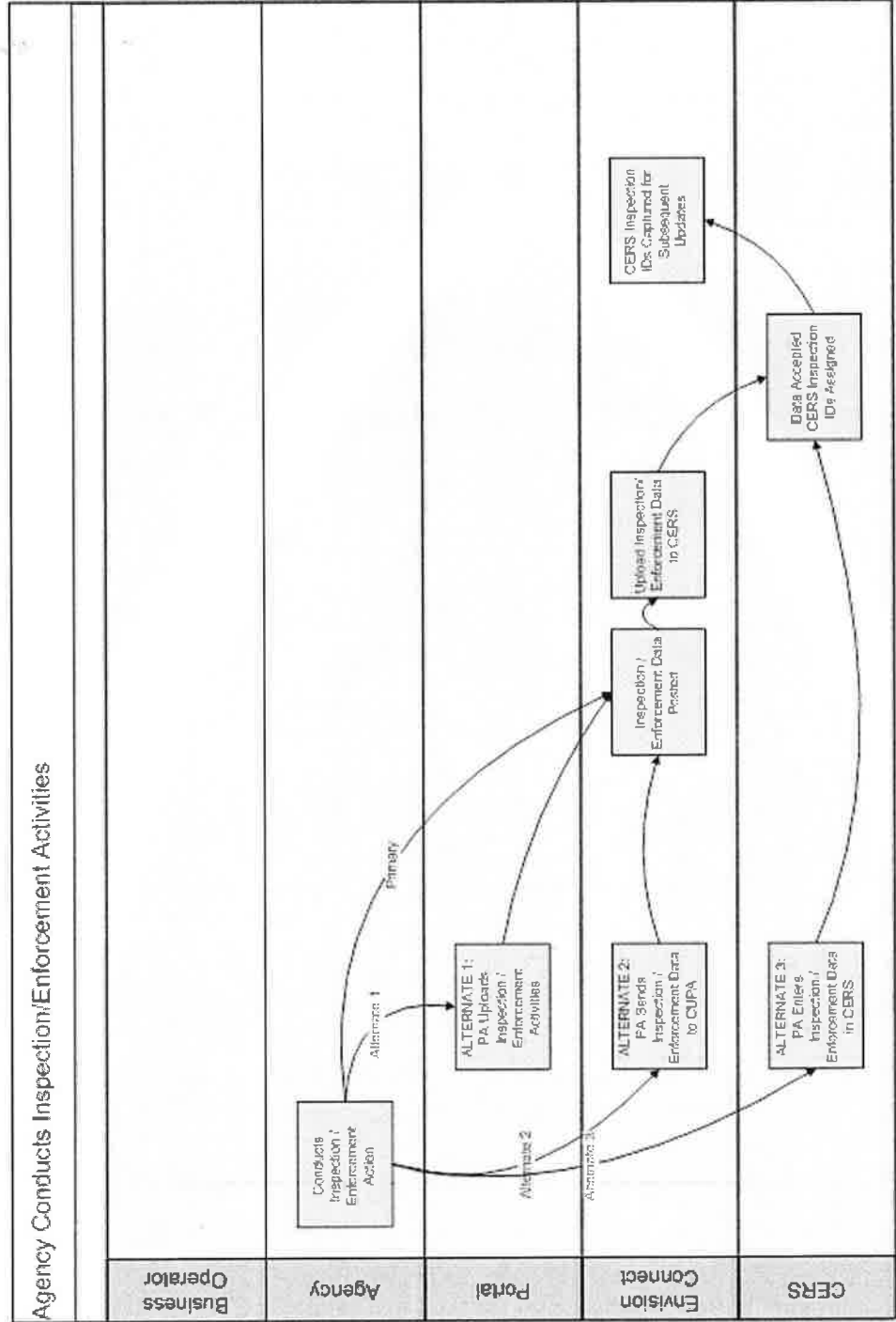
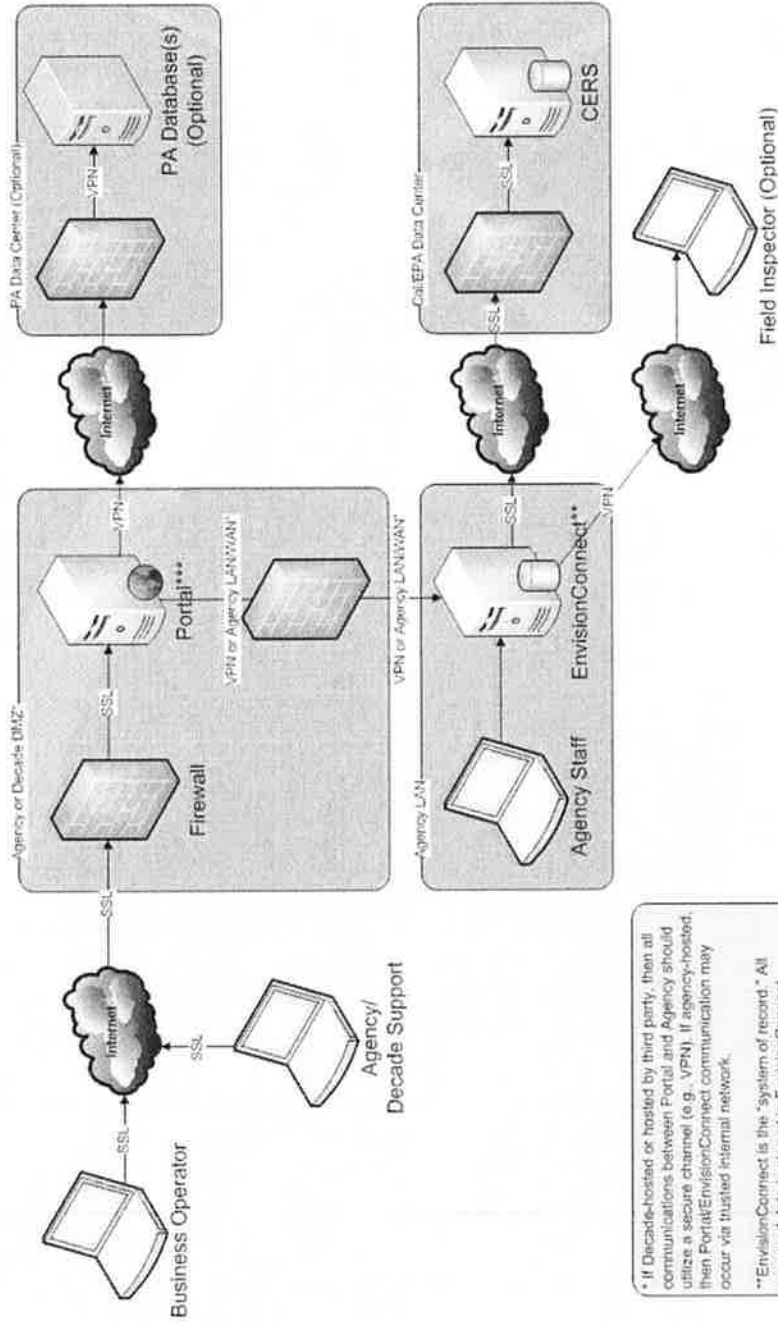


EXHIBIT E GENERAL NETWORK ARCHITECTURE DIAGRAM ENVISIONCONNECT PORTAL



EnvisionConnect Portal Network Architecture Diagram



* If Decade-hosted or hosted by third party, then all communications between Portal and Agency should utilize a secure channel (e.g., VPN). If agency-hosted, then Portal/EnvisionConnect communication may occur via trusted internal network.

**EnvisionConnect is the "system of record." All approved data is staged in EnvisionConnect.

***Portal may be hosted by agency, by Decade, or by a third party. Although displayed as a single server, may also be implemented as separate physical or logical tiers.

EXHIBIT F PORTAL CONCEPTUAL DESIGN

The following was authored by Riverside COUNTY Certified Unified Program Agency (CUPA) Information Technology (IT) personnel specific for their environment)

