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If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

## POLICIES TO ASSIST INDUSTRY

### **GENERAL POLICIES (Introduction and Intent)**

Effective Date: 08/1/2001: Revision Date: 9/17/2012

#### **Compliance Manual General Statement**

The purpose of this manual is to provide the Compliance Division staff with uniform standards and practices and to guide staff in the performance of their duties. Compliance staff is to adhere to the provisions contained in this manual. *These policies are not rule-making* but rather written direction for staff to insure consistent and equitable treatment of all facilities.

#### **Additions and Updates**

Updating the manual will occur periodically to reflect changes in policies, procedures, and new rules. Staff is encouraged to bring attention to any situation that appears to warrant the development of additions and updates to this manual.

#### **Intent of Manual**

The expectation is for all staff to use their training, judgment, and common sense in following procedures. Where departure from the procedures set forth in this manual is appropriate, staff should consult with their immediate supervisor before taking action. Ultimately, the Chief will decide the appropriateness of changes to policy.

#### **Disclaimer**

The contents of this manual are not contractually binding upon the District. Additionally, the provisions of this manual are subject to revision as determined by the District.

#### **Further Information**

Staff is to direct questions concerning any specific policy to your immediate supervisor.

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### **Policy 1.3: Certificate of Exemption (COE) Guidance Document**

Approved: 2/23/99 (ML/TM) Reviewed: Jan 2011 (Chief)

The COE process is to provide an exemption mechanism for those sources with negligible emissions and for which a Rule 11 exemption is not applicable. Follow the guidelines below:

#### **Equipment/Processes NOT eligible for a Certificate of Exemption**

- Rule 10 or 11 provide clear guidance on whether permit is required or not.
- Any equipment/process that has a current permit to operate, or
- Any equipment/process for which an application has been submitted for a permit to operate unless Compliance and Engineering agree the source could qualify for a COE, and provided no other District rules, state or federal laws apply to the facility or equipment and no compliance problems are expected, or
- Any equipment/process not generally regulated by the District. (e.g. use of non-VOC or non-toxic compounds, household cleaning products or bathroom vents), or
- Any equipment/process that emits toxic air contaminants and does not pass the de minimis Rule 1200 screening (If the equipment/process can pass a screening risk assessment and compliance can easily be demonstrated, a COE may be granted at the discretion of the Senior Engineer or Compliance/Engineering Chief), or

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- Any equipment/process that is not unique in nature (i.e. there are multiple installations of this category of equipment/process) and whose emissions are negligible. Placing such a category of equipment/process on the Permit Deferment List (PDL) is at the discretion of the Senior Engineer or Compliance/Engineering Chief. Staff shall review the attached guidelines for determining if the equipment/process is eligible for a PDL. Evaluation of the categories of sources is on a case-by-case basis.

### **Timelines for Processing COE Applications**

Deadline for processing COE applications is 90 days.

### **Fee for COE Applications**

Staff shall conduct a review of fee charges for any COE. To recover costs fully, charge applicants a base fee and bill additional time for equipment/processes that may require toxic review and/or further engineering evaluation. The base fee shall be three hours of associated engineer time. The intention is for full cost recovery from this program, and calculation of additional fees for toxic review and/or further engineering evaluation will be at the applicable labor rate. (See Rule 40, Schedule 94)

Staff shall advise the applicant in advance of any additional evaluation costs prior to implementing work.

*Note: The facility has the option to file for an application for a permit to operate if the equipment/process may require extensive evaluation, such as a Health Risk Assessment.*

## **INSPECTION PROCESS POLICIES**

### **Policy 2.2: Inspector Field Conduct**

Effective: 9/01/1998; Revised: 2/02/2011 (Chief); Revised 9/13/2012 (Chief)

#### **Basic Inspection Procedures**

Staff shall follow the procedures below:

#### **Pre-Inspection Preparation**

Review the following and utilize as required, including:

1. Current PTO conditions,
2. Previous enforcement actions,
3. Application(s) for modification/new equipment,
4. Current startup authorizations, authorities to construct
5. Any other necessary information such as field notes, MSDS, exempt equipment lists, etc.
6. Any variance documents (including start /end date, increments of progress),
7. Equipment breakdowns, and
8. Complaint history, and
9. Other info as required

#### **Inspection**

##### **Pre-Entry**

Prior to entering the site, you should have the following with you.

1. Equipment list and/or checklist(s)
2. Permits and other documents as required (ATCs, applications),
3. Pen/pencil and clipboard
4. Safety equipment

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5. Testing equipment
6. Business card/photo ID

### **Entry**

1. Introduce yourself to the site contact, present your business card, and purpose of your visit
2. Ask the site contact their name (first, last) and title
3. Ask for permission to conduct the inspection
4. Explain to the site the scope of the inspection (wall-to-wall)
5. Confirm ownership

### **Inspection**

1. Staff shall don safety vests and cones at all times when conducting vapor recovery testing and test witness inspections as well as for other types of inspections as warranted (e.g. landfill inspections). If you do not have a vest, safety cones and/or barricades, please contact Karen Wilkins to have one ordered.
2. Verify equipment on the permit (check serial and model numbers, manufacturer information),
3. Verify the permit is current and is posted or available
4. Record any operating parameters (temperature, pressure, etc.).
5. Determine the operating status of the equipment.
6. Record materials used, check MSDS and product data sheets.
7. If the equipment is vented to a control device, inspect the ductwork (check for leaks)
8. Take samples if needed
9. Conduct a visible emissions evaluation (if necessary)
10. Document new equipment and exempt equipment that may have the potential to pollute
11. Review all records.
12. Document all violations and gather facts/photos and pertinent information to support violation(s)
13. Verify site's compliance with District rules.
14. Prepare compliance documents.

### **Exit Interview**

Review the inspection results of with the site contact. Explain permit conditions and any new, existing, and future rule requirements, if applicable. Issue any compliance documents; explain the response requirements for source, actions needed to return to compliance. Inform the site of variance process, if needed. Give the site any handouts/handbooks and refer them to the Small Business Assistance Specialist, if necessary. Provide a compliance survey form and explain the importance of the survey.

### **Post Inspection**

Complete your inspection report (checklist(s), violation reports, and new equipment list) as soon as possible after the inspection. Staff shall submit all paperwork to your supervisor within five (5) working days after the inspection.

### **Follow-up Inspections**

Staff can avoid unnecessary re-inspections by following the instructions above, and the facilities will benefit. However, staff shall not hesitate to conduct a re-inspection whenever necessary to determine compliance or assist the facility.

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## **Policy 2.4: Asbestos Inspection Procedures**

Revised and Approved 2.1: 4/11/2011 (Chief); Reviewed: 9/10/2012 (Chief); being revised by District

Staff shall follow the following guidelines when conducting asbestos removal inspections:

### **Notification**

1. Verify or obtain the name, address, and phone number of the source
2. Verify or obtain the owner(s) of the building(s) where the work is taking place
3. Verify or obtain the name, address, and phone number of the contractor
4. Obtain competent person certification number and expiration date and note if the certification is posted
5. Note reason for inspection (i.e. renovation, removal, complaint, follow-up, etc):
  - a. Emergency notices-verify approval from senior staff and review approval letter. The emergency should only be for the areas affected by the event (fire, flood etc.)
6. Describe the type and quantity of asbestos being removed
7. Note the site status (pre-setup, setup, pre-removal, active removal, post removal)
8. Determine if a notification was received and if it was postmarked ten (10) working days prior to start of asbestos disturbing work
9. Determine if the notification is an original or a revision
10. Determine if the description of the facility/area of removal is complete and correct
11. Determine if RACM procedures and analytical methods are included on the notification
12. Determine if asbestos containing material estimates and units of measurements are included on the notification
13. Determine if work start and completion dates are included and correct on the notification
14. Determine if description of work methods/techniques and work practices have been described on the notification and whether engineering controls will be used
15. Determine the location of waste disposal site and the name and address of the hauler. Is this information included on the notification?
16. Determine if all notification procedures were completed for an emergency removal and whether the emergency was valid
17. Determine if the notification includes procedures for dealing with unexpected/pulverized RACM
18. In general, all required information must be included in the notification. Staff shall consider any areas left blank in the notification a deficient notice and follow Policy 4.8 for any enforcement action. Sometimes the submitted information required for one section ends up in other sections. Prior to issuance please verify missing information is not included in other sections of the form and/or attachments
19. For incorrect addresses where the job could not be located follow Policy 4.8
20. For missing information concerning the age of the building, follow Policy 4.8. Generally, the applicant provides an estimate of the age of the building on the notification. We will accept a reasonable estimate of the age of the building. The purpose of the section is to provide the District with information to ascertain whether asbestos application could have been used prior to 1979
21. The applicant must fill out the section identifying procedures to detect the presence of asbestos.
22. Information concerning the amounts of asbestos removal must be included. This amount must be in linear, square, or cubic feet or meters. Currently, there are no standards to identify from what specific parts of a facility the asbestos containing material will be removed.

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## **Inspection Procedures**

1. Determine if there are any visible emissions (waste or dust) to the outside air
2. Determine if there is any asbestos containing material outside the removal area
3. Determine if the material is properly wetted and contained
4. Determine if the worksite containment is properly sealed and the local ventilation is in proper working condition
5. Determine if the qualified/competent person is on site during removal
6. Determine if RACM waste containers and trucks are properly labeled
7. Determine if Category I material is being removed by bead blasting or by the use of a solvent
8. Take samples of suspect material as warranted and submit samples to the lab for analysis; the lab selected for sample analysis shall not be the one that performed survey or serving as a site consultant.
9. Suggested number of samples for surfacing materials:
  - Less than 1000 square feet of materials: a minimum of three (3) samples
  - 1000 to 5000 square feet of materials: a minimum of five (5) samples
  - Greater than 5000 square feet of materials a minimum of seven (7) samples
  - Number of samples for thermal system insulation: a minimum of three (3) samples

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## **Policy 2.5: Breakdown Policy**

Effective Date: 6/26/1990; Revised: 9/14/2012

Follow the following breakdown guidelines:

### **Breakdown Logging Procedures**

The Air Pollution Control Aide or duty senior shall enter reported breakdowns into BCMS. Obtain the following information and enter into the database:

- Date and time of call
- Company name, address, and phone number
- Name and title of person reporting breakdown
- Type of equipment involved (CEM, baghouse, scrubber, etc.)
- Time and date breakdown discovered
- Time and date breakdown corrected
- Estimated duration of breakdown (if known)
- Proposed corrective actions
- Site ID and permit number
- Time/date breakdown corrected (if known)

The APC Aide logs in all reports and response letters received.

### **Breakdown Inspection Procedures**

1. Except for non-emission related CEM breakdowns, inspect as soon as possible but no later than five days after receipt
2. Inspect any non-emission related procedural or in-stack continuous monitoring equipment breakdown no later than quarterly
3. A report will accompany each investigation.
4. Submit report to supervisor once completed

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5. After three breakdowns within three years, the supervisor shall write a letter to the facility alerting there have been three breakdowns of the same equipment type and future breakdowns of equipment may not be approved.
  6. An incident caused by operator error is not a valid breakdown; however, review matter with your supervisor before making final determination.
  7. Staff shall review significant time gaps between the actual start time of the breakdown occurrence and the time of detection/discovery with your supervisor.
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The inspector shall collect information and review records to ensure that the breakdown criteria are met prior to making any determination. If there are any questions concerning the validity of a breakdown, contact your supervisor for guidance. Utilize the Breakdown Investigation checklist for the report.

Disallow recurring breakdowns or ones that are the result of negligence or intentional disregard for air pollution laws. Definition of recurring breakdowns is any breakdown of a similar component of the same equipment that occurs more than three times in three calendar years. Your supervisor and chief must approve any recurring breakdown, and be tracked in the database. Additionally, a letter must have been sent after the third breakdown alerting the facility to the recurrence of the same equipment prior to taking enforcement action.

When companies have a second breakdown of the same equipment in less than three years, inspectors shall alert the facility during the inspection to this fact. Facilities shall be encouraged to conduct root cause analysis of the breakdown to find the reason and incorporate additional preventative maintenance or accelerated replacement parts replacement if warranted. Additionally, facilities are encouraged to contact the manufacturer of failed parts, so they can be alerted to problems so they can conduct root cause analysis.

Group multiple permits of the same equipment into one category. For example, if a source has five boilers, and there are three reported breakdowns of oxygen controllers in one year, deny any additional breakdown of an oxygen controller. This means we will not allow each boiler to have three breakdowns of its oxygen controller. Once the source starts having oxygen controller breakdowns, they need to investigate not just the boiler(s) having the problems, but rather all.

For the purposes of determining recurrence, breakdown events of the same equipment that occur within 5 days of each other shall be counted as one event.

After conducting the breakdown investigation, staff shall ensure the source meets the Rule 98 reporting requirements. The report submittal to the District must occur within 15 days after correction of the breakdown. Staff shall review the breakdown response letter for completeness and compliance with Rule 98(e). Senior staff will review the inspector's breakdown report(s) for completeness and validity. The AQI III shall route the approved report to the APC Aide for inputting into Documentum.

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## **POLICY 2.6: ACCEPTABLE DOCUMENTATION REGARDING DIESEL FUEL**

Revised and Approved: 2/1/2011 (Chief); Reviewed: 9/11/2012 (Chief)

Rule 69.4.1(d)(4) and Rule 12(d)(2) state that any engine subject to these rules that operates on diesel fuel shall use only California Diesel Fuel, also known as CARB Diesel. "Diesel fuel" means any fuel that is commonly or commercially known, sold or represented as diesel fuel, including any mixture of primarily liquid hydrocarbons – organic compounds consisting exclusively of the elements carbon and hydrogen – that is sold or represented as suitable for use in a compression-ignition engine and which meets the requirements of having a sulfur content 15 ppmv. Rule 69.4.1(g)(1)(v) and Rule 12(g)(1)(ii) state that

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owners or operators of engines subject to these rules must maintain California Diesel Fuel certification to ensure that this fuel is being used.

Any formal documentation, such as bills of lading, delivery receipts, or fuel specification sheets that clearly indicate the fuel is “California Diesel Fuel” or “CARB Diesel”, or fuel specification sheets or material safety data sheets that indicate the sulfur and aromatic hydrocarbon contents meet the required limits are acceptable to satisfy the certification requirement. Contact supervisor if you have questions.

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## **Policy 2.9: ENFORCEMENT OF VISIBLE EMISSION LIMITS**

Effective Date: 8/02/1984; Revised: 2/01/2011 (Chief); Revised: 9/13/2012 (Chief)

The purpose of this policy is to inform field staff to verify compliance with visible emissions (VEE) limits using Method 9 and the Visible Emissions Evaluation Observation form.

### **Procedure**

A comprehensive compliance inspection will include the evaluation of all emission points for visible emissions. Certified observers will use Method 9 to determine plume opacity.

### **Method 9 Procedures**

The observer will stand at a distance that provides a clear view of the emissions with the sun oriented 140° to the observers back and the line of vision perpendicular to the plume direction. When observing opacity of emission from a rectangular outlet, the line of vision will be perpendicular to the longer axis of the outlet. Staff shall evaluate one plume at a time.

Staff shall observe at the point of greatest opacity in that portion of the plume where condensed water vapor is not present at 15-second intervals. For attached steam plumes, make observations beyond the point in the plume at which condensed water vapor is no longer visible. For detached steam plumes, observe at the emission point outlet prior to the condensation of water vapor and the formation of the steam plume.

Record a minimum of 24 observations with opacity recorded to the nearest five percent at 15-second intervals. Each momentary observation will represent the average opacity for a 15-second period.

### **Variables**

Controllable variables:

- Angle of observer to the plume,
- Angle of the observer with respect to the sun,
- Point of observation of attached and detached plumes, and
- Angle of observer with respect to a plume emitted from a rectangular stack with large length to width ratio.

### **Plume Visibility**

A plume is most visible and presents the greatest apparent opacity when viewed against a contrasting background. However, the potential for a positive error also is the greatest under such conditions. Under less contrasting conditions, the apparent opacity of a plume is less and as a result, the potential for negative errors increases. Such negative errors decrease the possibility of a violation.

### **Use of Psychometers for Visible Emissions Evaluations**

Staff shall utilize their supplied Psychometer as part of every Visible Emissions Evaluation (VEE). Staff shall record the ambient temperature, wet bulb temperature, and the relative humidity in the appropriate

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section of the VE Observation Form. Additionally, staff shall annotate the use of the Psychometer on the equipment list, checklist, and N/V narrative (if N/V issued) forms.

### **Visible Emissions from Mobile Sources**

Staff shall evaluate the opacity of fugitive dust emissions from mobile sources at a point eight feet above the surface of the ground. Position oneself in a fixed position and perform the evaluation in accordance with Method 9.

### **Rule 50 Violations:**

- Any air pollution source which discharges visible emissions for more than three (3) minutes with an opacity greater than 20% or a Ringelman greater than 1 in any consecutive 60-minute period
  - Visible emissions from an asphalt plant drop zone, asphalt paving equipment (with application temperature greater than 320<sup>0</sup> F), or shipboard fire fighting training unit exceeding an opacity of 40% for more than 3 minutes or more in any consecutive 60-minute period or a Ringelman as great or greater than two (2) for more than 3 minutes in any consecutive 60-minute period
  - A diesel pile driving hammer that discharges visible emissions for more than four (4) minutes or more with a Ringelman as great or greater than 1 in any consecutive 60-minute period or an opacity greater than 20% for more than 4 minutes in any consecutive 60-minute period
  - A diesel pile driving hammer, which uses kerosene fuel, smoke suppressing fuel additives, and synthetic lubricating oil, that discharges visible emissions for more than 4 minutes with a Ringelman as great or greater than 2 in any consecutive 60-minute period or an opacity greater than 40% for more than 4 minutes in any consecutive period
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### **Policy 2.11: Expired Start-Up Authorizations**

Effective: 10/13/1998; Revised: 2/02/2011 (Chief); Reviewed: 9/11/2012 (Chief)

The following procedures are to be followed for facilities with expired Start-Up Authorizations (S/A). If during a compliance inspection the field inspector determines a Start-Up Authorization has expired, the inspector shall contact the process engineer by phone while at the site. If the process engineer is unavailable, leave a message on their voicemail. Staff shall issue a NOV when an S/A is not extended. Upon request of an inspection or review of records by a process engineer, honor the request and call back with results. The process engineer may need time to review the application, and if so, proceed to your next task. Include a brief comment in your inspection report concerning the expired Startup Authorization and update the process engineer. Communication with the process engineer shall be positive and helpful. Note: BCMS has a report that will alert Engineering to expired Startup Authorization and will replace the established forms.

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### **Policy 2.14: Information and Records Request**

Revised: 2/02/2011 (Chief); Reviewed: 9/11/2012 (Chief)

In order to evaluate compliance with District Rules and Regulations, additional information may be required from the facility. Inspectors should complete the information/records request form and specify the information/records needed. Indicate on the form the date the records are due not to exceed five (5) days from the date of inspection.

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## **Policy 2.16: Internal Floating Roof Tank Seal Inspections**

Effective: 1/23/1998; Revised: 2/02/2011 (Chief); Reviewed: 9/11/2012)

District Rule 61.1(c)(7)(i) requires all internal floating cover seals to be inspected at least once every ninety (90) days to determine compliance. Due to safety concerns, the following procedure is acceptable for source inspections of internal floating roof tanks subject to District Rules 21 and 61.1(c)(7)(i):

- Staff shall conduct quarterly inspections of internal roof tank by visually inspecting from the top of the internal floating tank three times a year
- Additional inspections techniques include utilizing a mirror's reflection to check seals and lowering a hydrocarbon analyzer tethered to rope
- Once a year, tank entry is necessary to inspect the internal cover seal for compliance with Rules 61.1(c) (1) and 61.1(c) (2) by source or contractors. Staff shall witness these annual inspections
- Staff shall review the results of these inspections

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## **Policy 2.18: Permit Condition Change Request**

Effective: 9/01/1998; Revised: 3/25/2011 (Chief); Reviewed: 9/13/2012 (Chief)

State law requires each permit be reviewed annually to verify that the permit conditions are enforceable, adequate to ensure compliance, and applicable to the equipment or process. Staff shall review all permit conditions during the annual inspection to ensure clarity, enforceability, and consistency. Staff shall submit a "Request for Change of Permit Conditions" form if a permit condition is not clear, enforceable, or consistent with existing rules and/or other applicable requirements to the Chief. Additionally, staff shall annotate to reflect the completion of the condition review. Utilize the following guidelines to determine if a permit condition

1. A recordkeeping or operational condition is missing and is needed to document compliance
2. A change to the permit condition has been agreed to by the District and the site but was not implemented
3. Conflict between two or more permit conditions exists or between the permit description and/or fee schedule

### **Do not initiate a request when:**

1. Permit conditions requiring 30 days notification to District prior to change in coatings. This condition is no longer enforced and will be deleted from permits
2. Similar/multiple permit conditions that are not contradictory
3. Changes that are "nice to have" but not necessary

Staff shall send permit condition change requests to the Chief of Compliance. The Chief shall keep the inspector and their supervisor informed on any decision.

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## **Policy 2.23: JOINT START UP INSPECTION PROCEDURE**

Effective: 4/27/2011 (Chief); Reviewed: 9/13/2012

Prior to issuing a Start up Authorization (SA), the engineer may conduct a start up inspection, which includes going over the conditions with the source. This start up inspection can be very informative for the source as they gain insight on the purpose of the permit conditions. Consultant(s), equipment operators, and construction staff may be on site for more complex projects and will provide insightful information to all. PTO issuance occurs after the initial inspection is completed and compliance with Rule 24 is determined. At this point, inspection staff commences with ongoing compliance inspections.

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From a Compliance Division perspective, staff has missed valuable information that would otherwise assist with enforcement duties. Taking part in these inspections would allow inspectors to gain valuable insight on the project, and it would help ensure proper enforcement and explanation of permit conditions on future inspections. Joint inspections would also be a valuable training tool for new staff. Lastly, joint inspections would have the added benefit of improving communications between the two divisions.

There is no need for joint inspections of basic equipment. Understandably, some joint inspections will not occur due to staffing constraints or other situations taking precedent. Below is the procedure for joint start up inspections:

**START UPS NOT REQUIRING JOINT INSPECTIONS:**

1. Emergency IC Engines
2. Gasoline Vapor Recovery Equipment (except for equipment installations subject to new executive orders)
3. Portable Equipment
4. Cold Solvent and Vapor Degreasers
5. Minor Coating Operations w/ typical controls
6. Permit modifications with no equipment modifications (Examples include, but not limited to, changing throughput limits, increasing/decreasing hours of operation, and changing types of coatings)
7. Soil Remediation Projects
8. Routine equipment with routine controls

**EXAMPLES OF START UPS REQUIRING JOINT INSPECTIONS:**

- A. Power Plants
- B. Cogeneration Equipment and Prime Engines, especially those with parametric monitoring and which operate on LFG or Digester Gas
- C. Quarries/ Asphalt Plants / Concrete Batch Plants
- D. Coating Operations with VOC Emission Controls
- E. Equipment previously operated without controls, and now having controls

**PROCEDURE:**

1. Start up inspection scheduled with source by Permit Engineer
2. Permit Engineer schedules inspection in Microsoft Outlook (including date, time, location and link to application number) and invites Senior Inspectors as Optional Attendees
3. Senior Inspector determines if inspector should attend
4. Senior Inspector assigns and forwards the e-mail invitation to applicable inspector
5. Inspector replies to engineer whether they will attend or not as soon as possible prior to the inspection
6. Engineer will inform Senior Inspector/Inspector if there is a change in date or time

**ON SITE INSPECTION:**

1. The engineer will take the lead on the inspection.
2. Established Engineering procedures are in force (MOP Engineering 7.2).
3. Professionalism by staff is expected and is of paramount importance. A positive discussion on the ATC/SA conditions and the equipment is expected.

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If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

## **Policy 2.24 Record Review Guidelines**

**Approved (10/24/04, Lopez) [previously Policy 2.20]; Under Revision (3/15/2013, Chief)**

### **RECORD REVIEW GUIDELINES**

In order to streamline the record review process, ensure consistency, and make required compliance determinations, the following procedure shall be followed.

1. The initial review shall consist of at least two months of monthly and/or daily records from the previous 12 months. Staff shall select a period where facility activity or throughput is at its greatest. If compliance is verified and there is no concern of non-compliance, the record review can cease. Reviewing records for a period longer than 12 months requires supervisor and chief approval.
2. For annual throughput or annual emission records, staff shall review the previous two years. If compliance is verified and there is no concern of non-compliance, the annual record review can cease. Reviewing annual records for a period longer than two years requires supervisor and chief approval. Typically, the facility has to keep track and totalize annual throughputs or emission limits, so this type of review should not take too long. If a review of annual records is becoming time consuming, contact your supervisor, who in turn will discuss with the chief to determine best course of action.
3. If during this initial review any anomalies are seen, such as applicable limits being exceeded, contact your supervisor / chief to see if expanding the scope of your review is warranted. Again, any longer review period requires supervisor and chief approval.

### **REQUESTING RECORDS FROM FACILITY**

Facilities are required to maintain records on site and be made available upon request. A reasonable amount of time must be provided to the facility to access the records. There is no set time in District regulations or state law that specifies a time limit, but some guidelines can be set:

- At the start of a routine inspection tell the source that you will want to see their records at the end of your inspection of equipment. This will allow the facility time to obtain the records while you inspect and will minimize your time at the facility and keep renewal fees lower, benefits for all.
- If the intent of a facility visit is to strictly review records and you already conducted a routine inspection, call the facility to inform them that you will be at the site on that day to look at records. This will allow the facility time to obtain the records while you inspect and will minimize your inspection time.
- If an emergency or unforeseen circumstance occurs that legitimately prevents a facility from providing you records, return the following day or next available time. Stating the person who normally keeps the records is not available, is not a valid excuse for the facility. The facility needs procedures in place that allow us access to records.
- If a facility has submitted records electronically (future possibility), review the records before conducting the inspection. If you have any questions or further requests concerning records, inform the facility at the start of the inspection, so as to offer them time to respond to your inquiry while conducting the inspection.
- If doubt is raised about the accuracy of records or Spec / MSDS sheet, and it requires the source to make contact with a third party supplier, such as coatings info, contact your supervisor for guidance, who in turn will discuss with the chief.

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

If records are not provided in the above timeframes, take the standard enforcement action. Be sure to review Rule 6 (NTC) and Policy 4.3 for guidelines on proper enforcement action.

### **REFUSAL TO PROVIDE RECORDS**

If a facility refuses to provide records, discuss with your supervisor. The standard response will be issuing a NOV. If the facility continues to refuse records, the supervisor will discuss the situation with chief. One possible action is the suspension of permits per CH&SC Regulation 42304 (Refusal to Furnish Information). The chief will obtain director approval before initiating suspension of any permit(s).

### **ELECTRONIC SUBMITTAL OF RECORDS**

The District will be approaching industry on the idea of submitting records to the District electronically thru BCMS Citizen Access. Currently, a pilot project is underway where a select number of facilities are testing the ability to access their District records electronically. Citizen Access would allow facilities to submit records to the District as well. The submittal of records electronically is strictly voluntary on part of the facility. Some facilities may not have access to submitting records electronically or simply do not wish to, which is completely their right.

The benefit of submitting records electronically is the facility can provide District required records when it is most convenient for them. The inspector could review the records before conducting an inspection, which would decrease the amount of time at the facility and reduce our burden on the facility.

During the course of your inspections and record review, inform the facility they can submit records electronically and have them contact the Chief (Jon Adams, [jon.adams@sdcounty.ca.gov](mailto:jon.adams@sdcounty.ca.gov)) or Aidan Hanley ([aidan.hanley@sdcounty.ca.gov](mailto:aidan.hanley@sdcounty.ca.gov)) by email if they are interested and wish more information.

## **RULES POLICIES**

### **Policy 3.4: Record Requirements for Engines at Remote/Un-staffed Locations**

**Effective: 8/17/2011; Revised: 4/09/2009 (R. Kard); Reviewed: Jan 2011 and 9/13/2012 (Chief)**

Rules 12(g), 69.4(g), and 69.4.1(g) require that owners and operators of registered or permitted engines subject to Rule 12, 69.4, and/or 69.4.1 maintain certain records. (Therefore, these requirements apply to both diesel and non-diesel engines, both emergency and prime engines, and both portable existing emergency engines registered under Rule 12 as well as stationary engines.)

These rules all require that the applicable records be retained on-site for at least three years and be made available to the District upon request. The operating conditions in the Certificate of Registration or PTO state this requirement. In addition, the stationary diesel engine ATCM (17 CCR 93115.10(g)) requires emergency diesel engine records for the past 24 months be kept on-site or at a central location in California. It also requires that these records be available to the District upon request.

Currently, there are many engines registered under Rule 12 or permitted under Rule 69.4 or 69.4.1 that are located at remote or un-staffed locations—such as sewer pump stations or cell phone towers—throughout the County. The requirement to retain the records on-site for these facilities can be cumbersome and inefficient since technology allows operation from a location other than the equipment site.

In order to address these issues, the following policy shall apply:

For remote / un-staffed sites, it is permissible to maintain records for Rules 12(g), 21, 69.4(g), 69.4.1(g), and 17 CCR 93115.10(g) (i.e. operating log, CARB diesel specifications, maintenance procedures) and the Certificate of Registration at a central location in San Diego County. The entity shall make the records available upon request.

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

For purposes of this policy, remote or un-staffed locations are either: 1) backcountry area of San Diego County or 2) a location where personnel are not present during normal business hours. Staff shall maintain records onsite where company personnel are present, regardless of their title or knowledge of the permitted equipment.

When an inspector schedules an inspection of an engine at a remote or un-staffed facility, the inspector should request the source representative bring all records to the inspection site for review. If the records are still not available, the inspector shall issue the requisite enforcement document in accordance with Rule 6 and Policy 4.3.1a.

In lieu of informal agreements with owners/operators of remote or un-staffed engines regarding the appropriate location of records, staff shall provide facilities a copy of this policy as required.

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### **Policy 3.6: Rule Applicability – Rule 67 Series**

Effective: 10/10/2000; Reviewed 2/02/2011 and 9/13/2012 (Chief)

Certain District rules contain specific references to other rules in the Applicability or Exemptions sections. For example, Rule 67.3(a)(2) states:

**“Any coating operation subject to the requirements of Rule 67.0, 67.4, 67.9, or 67.18 shall not be subject to this rule.”**

This language clarifies the District’s intent in applying Rule 67.3 to metal parts. If the coating of metal component is more specific to another rule, such as an Aerospace or Marine part, then the more specific requirements of Rule 67.9 or 67.18 will apply.

In some cases, more than one 67 series rule applies to the same operation, for example:

**“If a coating is applied via screen-printing onto a metal substrate, is the operation subject to Rule 67.3 (metal parts) or to Rule 67.16 (graphic arts)?**

The answer is Rule 67.16. Rule 67.16 is more specific to the operation described above than is Rule 67.3. Therefore, staff shall apply Rule 67.16 to this operation and not Rule 67.3.

In the field, you may find similar situations. When more than one 67 series rule applies, the rule that is more specific to the operation is applied. If you have questions regarding rule applicability, contact your supervisor.

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### **Policy 3.7: RULE 67.20.1 AUTOMOTIVE REFINISHING**

Policy is currently being re-written.

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### **Policy 3.8: Rule 67.6(d)(5)(viii) – Cleaning of Porous or Adsorbent Materials**

Approved Jan 2011 (Chief); Reviewed: 9/27/2012

This section prohibits porous or adsorbent material from being cleaned with solvent. This section is less clear whether it applies to porous or adsorbent “tools” such as ropes, nylon straps, or wooden-handled wire brushes, which are used to clean articles. The District’s intent in Rule 67.6(d)(5)(viii) was to prohibit the actual cleaning of porous or adsorbent articles.

Therefore, Rule 67.6(d)(5)(viii) will only apply to the actual cleaning of articles. Furthermore, Rule 67.6(d)(5)(viii) will not apply to either the storage or cleaning of cleaning tools.

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### **Policy 3.9: Rule 67.17**

Revised: 2/02/2011 (Chief); Reviewed 9/13/2012 (Chief)

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

Staff shall follow the following guidelines for enforcement of District Rule 67.17:

- All covers must be intact and must retard VOC emissions. Container covers shall fit snugly on the container such that they prevent any openings. Staff will allow an open container with dried rags, unless detecting an odor. If staff discovers an open container with dried rags and no odor, inform source rule prohibits drying in open air.
- Rule 67.17 does not allow waste minimization by uncontrolled drying of VOCs from waste containers. This may be a common problem because our regulations conflict with practices performed due to Hazardous Waste Management regulations.
- Staff shall not take any action if they discover an empty container with a non-drainable residue on the sides. Staff shall consider container empty and exempt from the rule.
- Rule 67.17 does not apply to exempt solvents such as 1,1,1-trichloroethane, acetone, etc., which by definition are not considered VOCs.
- Staff shall consider squirt bottles equipped with submerged applicator tube openings closed containers.
- Tanks or drums used to store VOCs or materials containing VOCs are usually equipped with vents to facilitate pumping of fluids. Open vents are not allowed except where required to comply with the applicable fire and safety codes. Some allowable alternative equipment configurations include:
  - Vents equipped with manually or automatically operated valves, which are closed except when fluid is being pumped from the container, or
  - Vents equipped with vapor/air balance systems (e.g. plastic tubing), which are used to conduct vapor/air back to the solvent tank or drum.
- Simple modifications made to containers, covers, or vents will not require an application for a District Authority to Construct. Modification of equipment E/L's will be sufficient in most cases. Staff shall inspect all areas where VOC containing materials are stored, prepared, applied, or accumulated for waste for compliance with standards of Rule 67.17. The information collected to verify compliance should include container size, type of material (liquid, paper, rags, etc.), color, amount, and location. You should also determine if the container was "in use". Gather additional information such as Material Data Safety Sheets (MSDS), container labels, and statements from the company representative identifying the material. Staff shall note in report the presence of an odor from the container. In the event that an odor is not apparent, **do not put your nose into the container**, instead wave your hand over the container to detect odor, ask the company representative about the contents, or obtain an MSDS. In cases where the above information is not available, staff can sample material after obtaining approval from Chief. Refer to the Chain of Custody protocols for proper sampling and handling techniques.

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### **Policy 3.10: Rule 67.17 – Open Containers**

Effective: 8/19/2002 (T. Morris); Reviewed: 9/13/2012 (Chief)

Rule 67.17 regulates the storage of materials containing Volatile Organic Compounds (VOCs). This policy clarifies the definition of closed containers to ensure consistent enforcement of Rule 67.17.

Rule 67.17(d)(1) states, "all containers used to store, transfer, apply, or otherwise employ materials containing VOC shall be closed when not in use". Additionally, Rule 67.17(c)(3)(A) defines closed as "having in place an apparatus or cover which completely covers the container and which is designed to retard VOC emissions..."

For example:

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

- A one-quart open container used to store materials containing VOCs (i.e. paint, solvents, reducers, catalysts, etc.) observed inside a fire cabinet is an open container. A closed cabinet does not meet the intent of Rule 67.17 for closed container.
- Staff shall consider a one-quart open container used to store waste containing VOCs observed inside a covered waste receptacle a closed container.

The difference is in whether the container stores waste or usable VOC materials.

Additionally, containers used to store VOCs and used as degreasers that are exempt from Rule 67.6 requirements based on size or capacity are subject to Rule 67.17 requirements.

For example:

- An open one-gallon coffee can used to degrease parts observed on a workbench is considered an open container and will be cited using Rule 67.17.

If you have any questions, please see your supervisor.

### **Policy 3.14: Determining Exemptions from Provisions of Rule 67.12**

Effective: 10/11/2002 (T. Morris); Reviewed: 9/13/2012 (Chief)

Effective immediately, facilities whose polyester resin operations have VOC emissions less than an average of five pounds per operating day for each calendar month shall not be subject to the provisions of Rule 67.12. This relieves facilities, whose polyester resin operations are likely exempt from permit requirements, from the provisions of Rule 67.12 and is consistent with Rule 11. It is up to the facility to maintain all records necessary to calculate average daily VOC emissions.

This policy replaces the rule provision exemption/applicability limits described in Rule 67.12(b)(1) and (2). The policy will remain in effect until rule revision takes place. If you have any questions please see your supervisor.

### **Policy 3.16: Definition of HVLP Spray Gun**

Effective: 5/22/2007; Revised: 3/29/2011 (Chief); Reviewed 9/13/2012 (Chief)

This memo clarifies the determination of whether a spray gun meets the rule definition of a “High Volume, Low Pressure” (HVLP) spray gun. The District’s coating rules have several variations on the definition of HVLP:

The mobile equipment coatings rule defines HVLP in 67.21(c)(23):

"High-Volume Low-Pressure (HVLP) Spray" means a coating application method using a spray applicator and pressurized air which is designed to be operated and which is operated at a permanent atomizing pressure between 0.1 and 10.0 psig, measured dynamically at the center of the applicator’s air cap and at the applicator’s air horns.

The wood and metal coating rules have a slightly different definition of HVLP:

"High-Volume Low-Pressure (HVLP) Spray" means a coating application method which uses pressurized air at a permanent pressure between 0.1 and 10.0 psig, not to exceed 10.0 psig, measured at the air cap of the coating application system. [Rule 67.11(c)(16); Rule 67.11.1(c)(16); Rule 67.3(c)(17).]

The aerospace coating rule has a slightly different definition:

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

"High-Volume Low-Pressure (HVLP) Spray" means a coating application method using a spray applicator and pressurized air which is designed and operated with a permanent atomizing pressure between 0.1 and 10.0 psig, measured dynamically at the center of the applicator's air cap. [Rule 67.9(c)(26).]

The polyester resin rule has a different definition:

"High-Volume Low-Pressure (HVLP) Spray" means a coating application method using pressurized air at a permanent pressure between 0.1 and 10.0 psig, not to exceed 10.0 psig, measured at the air cap of the coating application system, and a permanent liquid coating pressure of not more than 50 psig. [Rule 67.12(c)(13).]

Although the preceding paragraph might rule out air-assisted airless spray guns that have a fluid pressure of greater than 50 psig, the rule specifically allows air-assisted airless guns for spraying resin:

Use only airless, air-assisted airless, high-volume low-pressure spray equipment or electrostatic spray equipment for spray operations except for touch-up and repair operations using a hand held air atomized spray gun which has a container for the resin as part of the gun .... [Rule 67.12(d)(1)(vii).]

### **Determination of HVLP Compliance**

A spray gun will meet the rule definition of HVLP if:

1. The manufacturer of the spray gun markets the spray gun as HVLP (for example, the gun is stamped "HVLP" or the manufacturer's packaging or product literature for the gun states that it is an "HVLP" gun); *and*
2. The spray gun operates at an air pressure at the air cap between 0.1 and 10 psig.

If the above two conditions are met, a spray gun will be considered HVLP whether it is an air atomizing gun, an air-assisted airless gun, or a turbine gun.

There are other associated permit conditions including, a condition requiring the permittee to have on site either (1) an air cap gauge in proper operating condition *or* (2) a gauge in proper operating condition to measure handle air inlet pressure and manufacturer's technical information showing the correlation between the handle air inlet pressure and the air cap pressure.

An operator not having a permit can demonstrate the air pressure at the air cap by using either an (1) an air cap gauge in proper operating condition or (2) a gauge in proper operating condition to measure the handle air inlet pressure. Additionally, they must keep onsite the manufacturer's technical information showing the correlation between the handle air inlet pressure and the air cap pressure.

Note that the use of the adjective, "permanent," in one of the above rules or in a permit condition relating to HVLP guns means that the air pressure at the air cap when the gun is operated is between 0.1 and 10 psig, whether or not the air pressure at the air cap *could* be 10 psig or more.

Staff shall ignore the 50-psig fluid pressure limit in the HVLP definition for polyester resin operations, R. 67.12, for determining HVLP. Staff has removed this fluid pressure limit from other coating rules and is a holdover destined for removal by rule-making staff.

For all of the rules listed above, if an air cap gauge is used to measure the air pressure at the air cap, it is not necessary to verify that the pressure is being measured at the center of the air cap or at the air horns.

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If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

### **Policy 3.17: Broken Engine Hour Meter**

Effective: 10/24/2008 (R. Kard); Reviewed: Jan 2011, 9/13/2012 (Chief)

Stationary combustion ignition engines greater than or equal to 50 bhp are required to have a properly functioning engine hour meter so hours of operation can be recorded and verified. The ATCM for stationary compression ignition engines under section 93115.10 (e) lists the requirement for hour meters. Facilities are allowed per their permit condition, to replace broken meters provided they follow specific procedures identified below:

Sources shall install and maintain non-resettable engine hour meters in good working order to record operational hours. When replacement of a meter occurs, written notification to the Compliance Division is required within 10 calendar days. The written notification shall include the following information:

- (a) Old meter's hour reading
- (b) Replacement meter's manufacturer name, model and serial number if available and current hour reading on replacement meter
- (c) Copy of receipt of new meter or of installation work order

A copy of the meter replacement notification shall be maintained onsite and made available to the Air Pollution Control District upon request.

If you find a faulty meter or improper replacement procedures during an inspection, issue a NOV. Please contact your supervisor if you have any questions.

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### **Policy 5.2: Confined Space**

Effective: 7/11/2011; Revised: 9/13/2012

**Due to concern over staff safety and changes to safety regulations, staff is not to enter confined spaces, including floating roof tanks (internal and external). If you are uncertain about whether a location is a confined space, obtain a determination by qualified individual(s) before entering. Contact your supervisor with any questions.**

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## **HEARING BOARD**

### **Policy 6.1: APCD Variance Procedures**

Effective: 12/17/2008 (R. Kard); Reviewed: 9/20/2012 (Chief)

If a business is or will be in violation of a District rule (including permit conditions), good reason exists for continued non-compliance, and the business must continue operating, the business has the option of petitioning for a variance from the Air Pollution Control District Hearing Board.

A variance is an administrative order granting temporary relief from a District rule for a specific period. A variance, if granted, allows a business to operate while taking steps to come into compliance. Variances can be granted from §41701 of the California Health and Safety Code (visible emissions) and from certain

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

District rules and regulations. Variances cannot be granted from the requirements for a permit to build, alter, erect, or replace (District Rule 10(a)), for violations of the public nuisance law (Health and Safety Code §41700 or District Rule 51), or from any other sections of the Health and Safety Code. This also means that variances cannot be granted from Rule 10(b) without first having an A/C, S/A, or valid registration. For questions on the suitability of granting a variance from a state ATCM or a federal NESHAP, please consult a Civil Actions Investigator. Any facility granted a variance is still subject to possible enforcement by the federal EPA or by a citizen's suit.

The District website provides specific details on the types of variances, the process of filing a variance application, and contact information for anyone needing information.

In order to grant a variance, the Hearing Board must make specific findings. A granted variance becomes the applicable law for that source during the variance period. AQIs are responsible for inspecting sources in their sector that have obtained variances, and for determining whether those sources complied with the terms of the variance. An AQI III can waive a site visit depending on the nature of the variance.

Variance Orders usually require that the source keep records and submit a report to the District documenting compliance with order.

**Staff shall calculate excess emissions for the standard exceeded during the variance period.** For example, if a permit contains both an hourly limit and an annual limit for a VOC, and a variance provides relief from the hourly limit, the fact that the source did not exceed the annual limit is immaterial. The excess emissions in this case are from the hourly standard. Where a permit does not allow any emissions of a certain pollutant, all emissions are excess. The variance file will generally provide information on calculating excess emissions or by contacting the CAI who drafted the District's position paper for the variance.

If a site has failed to comply with the conditions of the variance order itself, the proper citation for purposes of issuing a NOV is CHSC §42400 *et seq.* (failing to comply with a District Hearing Board Order). If a site has also failed to follow the dates of the schedule (sometimes called "increments of progress") as required by the Hearing Board, the proper citation is CHSC §41702 (failing to comply with variance increments of progress). With either citation, the face of the Notice of Violation should reference the number of the Board Order.

Variance checklists must be completed and returned to the CAI promptly, but no later than one month after the expiration of the variance, so that ARB receives actual excess emissions for that variance as required.

The "**Facts to Support Findings Form**" is part of the variance petition and provides space to explain each proposed finding.

Variance hearings resemble courtroom proceedings. The Petitioner and the District may present evidence through witnesses placed under oath, Hearing Board members may question witnesses. The public may attend and present any relevant information.

If the Hearing Board grants the variance, then the Petitioner is subject to the terms or conditions of the variance. In addition, the variance will be of limited scope and will apply for a limited period. If denial of the variance occurs, then the operation in question must either cease until it can operate in compliance or risk enforcement action.

The Environmental Protection Agency (EPA), a federal agency, does not recognize California's variance process. The EPA considers facilities operating under a variance to be operating in violation of District regulations. The District advises facilities that obtain a variance that the EPA can independently pursue legal action based on federal law for operating in violation.

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

For questions regarding procedural matters related to the Hearing Board, contact:

Clerk of the APCD Hearing Board, County of San Diego, 1600 Pacific Highway, Room 402, San Diego, CA 92101, (619) 531-5777.

Sources can contact the San Diego Air Pollution Control District, Compliance Division, 10124 Old Grove Road, San Diego, CA 92128, (858) 586-2600 for questions about completing the variance petition form and to obtain general information.

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## **VAPOR RECOVERY POLICIES**

### **7.4) Phase II Inspections**

- a) Whenever possible flow rates should be measured during annual inspections for 10% of the grade points. Dispensing rates observed during customer fueling can also be used providing you can verify the dispensing is conducted at maximum hand pressure.
- b) The valve orientations should be verified while conducting inspections of the carbon canister and clean air separator.
- c) Nozzle operating instructions and CARB complaint phone number (1-800-952-5588) are required to be posted within a visible distance of each fueling point.
- d) Flow limiters described in the equipment description of any vapor recovery permit shall be considered required components. Removal of any flow limiter described in the equipment description without prior approval from the District is a violation of Rule 10.
- e) Hold open latches (HOL) are required on all retail GDF nozzles; including diesel nozzles. The GDF shall repair and/or replace the HOL within 48 hours and the appropriate compliance action should be taken. This does not apply to non-retail GDF's.

### **7.5) Healy Phase II EVR Inspections**

- a) Year 2007 Healy 900 nozzles installed on Healy PII EVR systems must be re-configured with a certified ORVR diagram. A reconfigured nozzle is marked either with an ink stamp or a rivet. If a Healy 900 nozzle manufactured in 2007 does not have the identifying markings then inspect the sites maintenance records. Healy Franklin has given the District a list of all their 2007 manufactured Healy 900 nozzles that have been reconfigured at each specific GDF. If the serial number from the nozzle in question matches a serial number on the list then issue the site a NTC for failing to label the nozzle properly. However, if the nozzle in question does not match a nozzle on the list then tag the nozzle out of order. Do not issue any compliance documents at this time. In both cases above give the site a copy of the advisory regarding the replacement of 2007 Healy 900 nozzles with non-certified ORVR diagrams and document your actions in your inspection report.
- b) Insertion Interlock Mechanisms for Healy 900 Nozzles that allow fueling when the bellows is un-compressed prior to any fueling should be addressed with appropriate compliance action.

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

- c) Annual inspections should consist of the following checks whenever possible: bag testing 10% of nozzles; verifying 10% of flow rates; audibility of 10% of dispensers, nozzle insertion interlock mechanism checks for 10% of nozzles and inspecting 1/10 Phase I EVR adaptors to verify that the adaptors meet the torque requirements by rotating with hand pressure.

### **7.6) Balance Phase II EVR Inspections**

- a) The liquid removal device marking should be located +/- 3.0" from the bottom of the hose loop. If the liquid removal device marking is not located +/- 3.0" from the bottom of the hose loop the hose must be measured per the VST IOM and E.O. If the liquid removal device is located outside of this tolerance the vapor hose is defective and the appropriate compliance action should be taken.
- b) Liquid retention should be measured for 10% of all vapor hoses with the nozzle spout plug inserted into the nozzle spout during annual inspections of Balance Systems. The volume accumulated in the hose is not required to be measured during semi-annual inspections unless there is reason to suspect non-compliance.
- c) Balance nozzle insertion interlock mechanisms should be inspected for 100% of nozzles during annual inspections.
- d) It is encouraged for GDF operators to use the nozzle spout plug to measure liquid retention as this is a recommendation and not a requirement.
- e) The vapor processor mode status should be inspected during every Balance EVR inspection to verify that it is in automatic mode (refer to the ISD primer or applicable E.O. for the process of how to verify this requirement).

### **7.7) Pre-EVR Phase II Inspections**

- a) Sites with Phase II Pre-EVR systems should be inspected as they come up on the inspection list. All compliance action is to be taken as before the EVR deadline.
- b) Volume accumulated should be measured for 10% of all vapor hoses during annual inspections of Balance Systems. The volume accumulated in the hose is not required to be measured during semi-annual inspections unless there is reason to suspect non-compliance.
- c) As of 4/1/09, sites with Pre-EVR Phase II Balance systems are required to use VST EVR replacement components.

### **7.8) ISD Inspections (Incon and Veeder Root)**

- a) If an Incon TS 550 unit is located in a different area or building than the Veeder Root, the audible alarm may be linked to the Veeder Root to comply with the audible alarm requirements. Ask the station operator to verify this by removing the 9 pin connector from the Incon TS 550 unit from the com 2 port. This is at the bottom left side of the unit. Once the 3 connector is removed, the Veeder Root will alarm audibly and display it on the TS 550 console. Once the connector is replaced the alarm will cease.
- b) The remote access points shown on Attachment A are certified for Healy PII EVR with ISD systems (**see attachment 2**) of photos of certified remote access points).
- c) All tests and inspections conducted in response to an ISD alarm are required to be conducted per Attachment's A and L and the applicable test procedures and Executive orders.

If you have questions or comments regarding these policies please contact the District Business Assistant, Eric Luther at [eric.luther@sdcounty.ca.gov](mailto:eric.luther@sdcounty.ca.gov) or (858) 586-2656.

- d) During every annual inspection of GDF's with ISD, the real time pressure/vacuum reading of the under-ground storage tanks as read from the ISD and the ISD software version shall be checked and recorded in the inspection checklist along with the time of day the reading was taken.
- e) GDF operators or technicians are not allowed to clear ISD alarms without all required certifications.

## **7.9) Phase I Inspections**

- a) Defer compliance action related to identification stickers for Phil-Tite adaptors until further notice as long as it can be reasonable determined that the adaptors are certified.
- b) If an EVR adaptor can be rotated easily with hand pressure then there is no need to conduct a torque test. If the EVR adaptor cannot be rotated easily with hand pressure then a torque test is to be conducted during the inspection. Ensure that when the EVR adaptor rotates that it rotates around the swivel. If an EVR adaptor rotates around the riser thread and can be removed from the riser with hand pressure, the EVR adaptor is not set on riser to the proper torque setting of the E.O.
- c) The vapor adaptor poppet shall not leak when closed. Compliance with this requirement shall be verified by the use of commercial liquid leak detection solution, or by bagging, when the vapor containment space of the underground storage tank is subjected to a non-zero gauge pressure. (Note: leak detection solution will detect leaks only when positive gauge pressure exists.) In both cases above the poppet is defective and all but one of each gasoline grade should be tagged out of service in the GDF for the affected UST's. Another example of a defective poppet is a vapor poppet that does not reseal. If a defective poppet is manifolded to other vapor adaptors through a common UST, the site should be advised that fuel deliveries conducted into the defective poppet or any other poppet's of the manifolded UST's are subject to additional compliance action.
- d) Only Husky 5885 P/V Valves can be used as replacement Valves for existing OPW 623V and Husky 4885 P/V Valves that are existing are allowed until May 31<sup>st</sup>, 2012 for vapor recovery systems with both AST's and UST's. A tester that installs non-certified P/V valves is subject to compliance action. Once a Pre-EVR P/V Valve fails the TP 201.1E test, it cannot be re-installed. If a Pre-EVR P/V Valve passes the TP 201.1E test it can continue to be used until May 31<sup>st</sup>, 2012.
- e) In some case the submerged fill pipe cannot be measured because an obstruction exists in the fill pipe preventing access. If this is the case, as with the Guillotine flow restrictor valve or a F Stop overflow prevention valve (both CARB approved components), the submerged fill pipe cannot be measured without first removing the fill pipe by the GDF operator.
- f) GDF's are allowed to interchange OPD's with standard drop tubes and vice versa. Providing the GDF is not subject to New Source Review (NSR). If the GDF is subject to NSR as identified via the equipment description of the PO, some of the components will be followed by the acronym BACT in parenthesis. NSR components identified in the equipment description can only be replaced with like kind replacement.
- g) No enforcement action with respect to Rule 10 will be taken for the installation of bravo boxes, spill boxes, turbine sumps, or any other containment device at VR operations not subject to EVR requirements. Sites subject to EVR requirements will be required to permit any containment device that taps into a vapor line.

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- h) Ferrous based tape measures are allowed for conducting inspections of fill pipe measurements provided the tape measure has the protective coating intact. When the protective coating begins to show wear, the tape measure must be replaced.

### **7.12) Liquid Removal Testing (Pre-EVR)**

- a) Use a protractor to verify proper angle of the spout in adherence to TP 201.6C.
- b) During TP 201.6C testing for uni-hose dispensers with multi-grades, one pre-wet and one adhesion is allowed as long as the test for all grade points associated with a fueling point are conducted at the same time. For six-pack dispensers, one pre-wet and one adhesion is required for each individual hose.
- c) In effort to improve testing efficiencies during District liquid removal testing, the adhesion (VW) should only be measured if the volume after dispensing (VF) is greater than 75 milliliters (ml's). This policy only applies to District source tests and **not** to test witnesses. If the VF is 75 ml's are less the term not measured or NM should be used in the entry field for adhesion on the liquid removal test data form. Also if the adhesion is not measured write pass in the liquid removal rate (VR) entry field of the form since the liquid removal rate calculation requires an adhesion measurement and can't be determined without the adhesion value. Always measure the adhesion for any liquid removal failures.

### **7.13) Liquid Removal Testing (EVR)**

- a) During EVR Liquid Removal Testing for uni-hose dispensers with multi-grades, one pre-wet and one adhesion is allowed as long as the test for all grade points associated with a fueling point are conducted at the same time. For six-pack dispensers, one pre-wet and one adhesion is required for each individual hose.
- b) In effort to improve testing efficiencies during District liquid removal testing, the adhesion (VW) should only be measured if the volume after dispensing (VF) is greater than 75 milliliters (ml). This policy only applies to District source tests and **Not** to test witnesses. If the VF is 75 ml's are less the term not measured or NM should be used in the entry field for adhesion on the liquid removal test data form. Also if the adhesion is not measured write pass in the liquid removal rate (VR) entry field of the form since the liquid removal rate calculation requires an adhesion measurement and can't be determined without the adhesion value. Always measure the adhesion for any liquid removal failures.
- c) When conducting liquid removal testing on VST EVR systems the nozzle spout plug shall be used and staff should verify that the dispensers are not activated in accordance with the test procedure. Do not point the nozzle at anyone during the test in order to avoid gasoline spraying or spillage.

### **7.14) General Test Witness Policies**

- a) The primary purpose of test witnessing is to ensure proper procedures are followed and to make a compliance determination of the vapor recovery systems being tested. Test data need not be recorded for all grade points if it interferes with your ensuring proper procedures are followed. The data you do record should be used to compare to test data submitted to ensure complete and accurate reporting. If a technician is not following procedures, document the violation and take appropriate enforcement action at the conclusion of the test. Testing that does not follow proper

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procedures, will not be accepted to fulfill any District requirement. Under no circumstances during testing is anyone to remind or coach testers on proper procedures until testing is complete (e.g. required ullage, drop times, calibrated equipment, etc.).

- b) The requirement is to conduct one test witness per week with a goal to witness two tests. Every attempt should be made to coordinate annual inspections with test witnesses whenever possible.
- c) Test witness priority should be given to testing contractors with ongoing past and present compliance issues.
- d) The Day the annual test notification is received counts as the 1<sup>st</sup> day of notification. Testing cannot begin 15 calendar days prior to the date of notification.
- e) GDF's are required to pass an annual test within 45 calendar days prior to the 1<sup>st</sup> day of the permit expiration month. However if the annual tests are successfully conducted after the 1<sup>st</sup> day of the expiration month and prior to the last day of the expiration month then enforcement action is to be deferred pending review with senior staff.
- f) The permittee should be invoiced if the Inspector is required to wait more than 30 minutes at a testing location or for any reason a test cannot be conducted as scheduled. The Inspector shall advise the GDF operator and testing contractor that the test cannot be conducted, and must be re-scheduled with a minimum of 15 calendar day's notification.
- g) Testing is considered to have begun when nitrogen is introduced into the system or when any portion of the test has begun (e.g. pre-test procedures such as warming up the digital manometer and removing the P/V valve).
- h) During annual testing all components (e.g. nozzles, adaptors, VP 1000's) must be tested before any repairs are allowed to be made resulting from a failed test. If a test fails the tester is allowed 45 minutes to conduct the necessary repairs and begin a re-test at the conclusion of any test. If the repairs cannot be made within this time-frame then staff is not to remain onsite for further re-tests and the test must be re-scheduled. Under no circumstances will staff witness more than two attempts to pass a particular test.
- i) Testing contractors that make any repairs prior to completing any tests will void the initial test as well as the related notification and may impact the site's ability to meet the 45 day annual testing window requirement and shall be cited for not following procedures.
- j) If a tester does not have a copy of a TP, required calibration, or is deviating from procedure, or engaging in questionable work issue any compliance documents to the testing contractor as appropriate and document your observations in your inspection report with a copy for the testing contractor files. Annual testing conducted by a testing contractor without all required certifications, and calibration certificates will not be considered valid.
- k) Testing contractors must have all required documentation at the beginning of a test (i.e. ICC, manufacturer's certifications). If the testing contractor fails to have this documentation, compliance action is to be deferred until the Inspector is finished witnessing the test. Staff is advised not to wait at a facility for any required documentation.
- l) For annual tests there must be a certified person onsite physically involved in testing and/or installing. Other tester and/or installers can be involved in the testing and/or installing providing the certified person is onsite at all times.

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- m) Once an annual test commences, a testing contractor is not allowed to abort a test or concede a failure in order to avoid a failure in cases when it appears there is an impending failure. Once an annual test begins it must be followed through to completion in all cases. Any deviation from this requirement will result in the appropriate compliance document being issued to the testing contractor.
- n) In order to conduct any annual test; a testing company must ensure that the vapor recovery (VR) system being tested is in normal operating condition and the components, systems being tested are certified and installed in a certified configuration. If there is an ISD alarm in progress during a test witness as verified via the current monthly alarm report, Incon or TLS console, the VR system is not in good operating condition and the testing company should be advised that any test conducted will be considered invalid and the testing contractor may be subject to compliance action.
- o) All pre-test procedures are considered part of the test procedure and are required to be conducted during the time of the scheduled test witness (e.g. During a TP 201.1D test, submerged fill pipes must be measured during the test prior to pressurizing the drop tubes).
- p) All flow rate standards regardless of the verbiage in the Executive order will be enforced as though the significant digit of the rate is expressed to the tenth of a gallons (e.g. if the flow rate standards in the E.O. are 6 to 10 gpm then the standard should be 6.0 to 10.0). All flow rates shall be rounded to the nearest tenth (e.g. If the reading from the Tri-tester is 10.13 gpm, the flow rate should be considered 10.1 gpm).
- q) All raw data obtained in the field should be recorded directly from the equipment and include all numerical digits regardless of the significant digits of the standard. However, compliance action should be taken based on the value rounded in accordance with the test procedure or E.O.
- r) Data should be recorded for every failed component or test.
- s) Testing contractors are allowed to demonstrate compliance with ICC certification requirements via an ICC VR installation or ICC VR testing certification.
- t) If annual testing is conducted out of the required sequence, all tests conducted afterwards will not be considered valid.

### **7.15) Off Site Test Witnesses (OSTW's)**

- a) The VR section should conduct one OSTW per month. Staff should be positioned offsite in a location where a reasonable assessment of compliance can be determined regarding site shutdown times, start times, test sequencing, etc. Once testing begins staff is encouraged to go onsite once their areas of concern cannot be addressed due to the offsite position.
- b) Document in the comments section of the inspection report during an OSTW the timeframe of the OSTW, which tests were witnessed offsite and onsite, and of any findings.

### **7.17) P/V Valve Test Witness**

- a) The tester must complete the entire sequence of P/V valve tests if any of the four sections of the P/V Valve test is failed. If the tester does not do so the tester is subject to compliance action for not conducting the test per procedure.

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- b) Testing contractors are required to install the P/V valves per the proper torque settings of the IOM on the testing assembly prior to conducting the test and on the vent pipe after conducting the test. Failure to do will result in compliance action.
- c) The allowable leak rate during the leak check during the pre-test is 1.00” in 30 seconds. If this leak rate cannot be met the test stand cannot be used to conduct the test.
- d) If an OPW 623-V or Husky 4885 P/V Valve fails the TP 201.1E test, it cannot be returned to operation. It must be replaced with a Husky 5885 P/V Valve and successfully re-tested before being returned to operation.

### **7.18) Pressure Decay Test Witness**

- a) The following rounding procedure should be used when witnessing a TP 96-1 test: Pressure measurements should be recorded to the nearest hundredth of an inch wc (.01”wc). Any rounding must be done after calculating the overall pressure decay rate (e.g. the actual differential shall not be more than 0.14” w.c. if the test procedure allows a differential of 0.1”w.c; (see attachment 4/ rounding procedure)).
- b) If nitrogen is introduced through the dry break during a pressure decay test, the dry break must pass the vapor coupler integrity test. The vapor coupler should be pressurized to 2.00” w.c. and maintain a pressure greater than or equal to 0.25” w.c. for 60 seconds. If this standard is not met the vapor coupler cannot be used to conduct the pressure decay test.
- c) No liquid removal testing should be conducted within 8 hours prior to a pressure decay test.
- d) If a Pressure decay test is witnessed at any AST/UST and a loading rack ensure the valves if any between the loading rack and UGT are open. Annotate the presence of any isolation valves in your inspection report.
- e) The nitrogen introduction rate for the TP 96-1 test is required to be introduced into the system at 1-5 cfm.
- f) TP 96-1 test allowable decay rates must be determined by the equations specified in TP 96-1.
- g) There shall be no A/L, V/L testing (Exb. 5/TP 201.5 or equivalent) within 24 hour period prior to conducting the TP 96-1 test.
- h) There shall be no product dispensing within 30 minutes prior to conducting the TP 96-1 test or during the test.
- i) The actual tank capacities obtained from facility meter readings (e.g. Veeder Root console), where available, shall be used to calculate tank ullages.
- j) The submersible fuel pumps shall be turned off prior to conducting TP 96-1 testing. All staff shall verify this requirement.

### **7.19) Clean Air Separator Test Witness**

- a) Verify that all plugs are installed per the proper torque settings in the Healy EO/IOM after the test is conducted.
- b) The allowable leak rate for the leak check of the test assembly is 1.00w.c.” in 30 seconds.

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## **7.20) Vapor to Liquid, Air to Liquid and Liquid Removal Test Witness**

- a) A/L test results for Tri-tester A/L testing at Pre-EVR Healy EO G-70-191-AA Systems have a +/- 10% of error. This correction factor must be entered into the calculation before a compliance determination can be made.
- b) Verify repeatability of a low/high flow rate. Flow rates documented out of compliance must be repeated a minimum of two times.
- c) During Liquid Removal testing (EVR and Pre-EVR) testing for uni-hose dispensers with multi-grades, one pre-wet and one adhesion is allowed as long as the test for all grade points associated with a fueling point are conducted at the same time. For six-pack dispensers, one pre-wet and one adhesion is required for each individual hose.
- d) Verify with a protractor that the correct spout angle is being used by the tester.

## **7.21) Torque Test Witness**

- a) Verify that torque wrench accuracy data (spec sheet) is maintained with the torque wrench during test witnesses in order to meet the standards of the test procedure.
- b) The verification of the adaptor to rotate 360 degrees is required to be conducted with a socket wrench and not the torque wrench.

## **7.22) Drop Tube Integrity Test**

- a) The TP 201.1C/D test procedure requires that the testing assembly be leak checked prior to the test. If the test assembly has not already been leak checked during the TP 201.1E test, it is required to be leak checked in order for the TP 201.1C/D test to be considered valid. The allowable leak rate during the leak check during the pre-test is 1.00" in 30 seconds. If this leak rate cannot be met, the test stand is not to be used to conduct the test.