South Coast
Air Quality Management District
21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

September 28, 2017

Mr. Steve Rossi
Lubeco Inc.
6859 Downey Avenue
Long Beach, CA 90805-1919

Via Email, Certified Mail with return receipt

Subject: Notice of Designation of Lubeco, Inc. (Facility ID 41229) as a Potentially High Risk Level Facility

Dear Mr. Rossi:

Pursuant to SCAQMD Rule 1402(g), SCAQMD staff is designating Lubeco, Inc. as a Potentially High Risk Level Facility.[1] The information used to substantiate this designation was communicated to you in a letter dated September 8, 2017 and also discussed with Lubeco representatives on September 22, 2017 at a meeting at SCAQMD headquarters. Based on this designation, you are required to expeditiously reduce risks from your facility and provide reports on your toxic emissions and potential health risks to the surrounding community as detailed below.

a. Rule 1402 Requirements for Potentially High Risk Level Facilities

Lubeco, Inc. is required to submit an Early Action Risk Reduction Plan, an Air Toxics Inventory Report (ATIR), a Health Risk Assessment (HRA), and a Risk Reduction Plan no later than the timelines outlined below.

Deliverable	Due Date	Due Date	Rule Reference
Initial Information for ATIR	30 days	10/31/2017	1402(d)(1)
Early Action Risk Reduction Plan	90 days	12/27/2017	1402(g)(2)
ATIR	150 days	2/27/2018	1402(d)(2)
HRA	180 days	3/27/2018	1402(g)(3)
Risk Reduction Plan	180 days	3/27/2018	1402(g)(4)

Further, Lubeco will be required to conduct public notification within 30 days after the HRA is approved and will need to implement the Risk Reduction Plan as quickly as feasible, but no later than two years after the Risk Reduction Plan is approved. Lubeco is strongly encouraged to

[1] Pursuant to Rule 1402(c)(14), a Potentially High Risk Facility is a facility for which the Executive Officer has determined that emissions data, ambient data, or data from a previously approved Health Risk Assessment indicate that the facility has a likely potential to either exceed or has exceeded a Significant Risk Level. A Significant Risk Level for purposes of this letter is a cancer risk to surrounding areas of greater than 100 chances in a million.

aggressively reduce risks to the surrounding neighborhood as quickly as possible and faster than the timeline provided above.

b. Guidelines for Preparing Rule 1402 Deliverables

In accordance with the State of California's Air Toxics "Hot Spots" Information and Assessment Act (AB 2588) and Rule 1402, Lubeco, Inc. is required to prepare a detailed ATIR for your facility based on your most current operating conditions and emission inventory for calendar year 2015.

Pursuant to SCAQMD Rule 1402(d)(1), your facility is required to submit the **Initial Information** for an ATIR to SCAQMD within thirty (30) days of the date of this letter, on or before **October 31, 2017**. The Initial Information should include a list of device(s) or process(es) to be included in the detailed ATIR and their corresponding toxic pollutants and Reference Sources for each emission factor.

Pursuant to 1402 (g)(2), your facility is required to submit an **Early Action Risk Reduction Plan** to SCAQMD within 90 days of the date of this letter, on or before **December 27, 2017**. The Early Action Reduction Plan should include a list of measures that can be implemented immediately to reduce the facility-wide health risk.

Your facility is required to submit a **detailed ATIR** to SCAQMD within one hundred fifty (150) days of the date of this letter, on or before **February 27, 2018**. In your detailed ATIR, you must include all toxic air contaminant emissions from your facility that are listed in Appendix A of the *Air Toxics Hot Spots Program Guidance Manual for Preparation of Health Risk Assessments (March 2015*).

http://oehha.ca.gov/air/crnr/notice-adoption-air-toxics-hot-spots-program-guidance-manual-preparation-health-risk-0

Please also include a signed copy of the AB 2588 Air Toxics Document Certification & Application Form (see attachment) along with your ATIR submittal.

The California Air Resources Board (CARB) has developed the "Hot Spots" Analysis and Reporting Program (HARP) which includes the emissions inventory and risk assessment procedures of the "Hot Spots" Program into a set of program modules. Your ATIR must include an electronic file in the HARP Emission Inventory Module (EIM) format. You may obtain a free copy of the HARP software from the following link:

http://www.arb.ca.gov/toxics/harp/harp.htm

You are required to submit your detailed ATIR in accordance with the SCAQMD's *Supplemental Guidelines for Preparing Risk Assessments for the Air Toxics "Hot Spots" Information and Assessment Act*.

http://www.aqmd.gov/docs/default-source/planning/risk-assessment/ab2588-risk-assessment-guidelines.pdf

Pursuant to Rule1402 (g)(3), your facility is required to submit a **HRA** to SCAQMD within 180 days of the date of this letter, on or before **March 27, 2018**. You are required to prepare and submit your HRA using the latest version of the HARP software, which includes the U.S. EPA air quality dispersion model called AERMOD. AERMOD documentation is available at:

http://www.epa.gov/ttn/scram/dispersion_prefrec.htm#aermod

Meteorological data for use in HARP 2 and AERMOD can be downloaded from:

http://www.aqmd.gov/home/library/air-quality-data-studies/meteorological-data/data-for-aermod

The HRA must be prepared in accordance with *The Air Toxics Hot Spots Program Risk Assessments Guidelines (February 2015)* developed by the State of California Office of Environmental Health Hazard Assessment (OEHHA).
http://www.oehha.ca.gov/air/hot_spots/hotspots2015.html

The HRA must also utilize SCAQMD's guidance within the *Supplemental Guidelines for Preparing Risk Assessments for the Air Toxics "Hot Spots" Information and Assessment Act* mentioned above. SCAQMD's guidance on using AERMOD is also available.
http://www.aqmd.gov/home/library/air-quality-data-studies/meteorological-data/modeling-guidance

Air emissions of any substances listed in Appendix A-I of the OEHHA guidelines must be quantified and evaluated in the HRA. Please follow the detailed outline for the HRA report, which is contained in Appendix C of the SCAQMD supplemental risk assessment guidelines mentioned above. Please include a signed copy of the AB 2588 Air Toxics Document Certification & Application Form (Attachment) along with your HRA submittal.

Pursuant to Rule 1402 (g)(4), your facility is required to submit a **Risk Reduction Plan** to SCAQMD within 180 days of the date of this letter, on or before **March 27, 2018**. Guidance for preparing a Risk Reduction Plan can be found in the SCAQMD AB 2588 Supplemental Guidelines mentioned above.

Finally, we appreciate the cooperation that Lubeco has shown to date and its willingness to take seriously the impact of its emissions. However, given the significant levels of hexavalent chromium emitted by your facility, we strongly encourage you to take all necessary steps to reduce these emissions as quickly as possible. If you have questions regarding the requirements detailed in this letter, please contact me at (909) 396-3176.

Sincerely,

Jillian Wong

Jillian Wong, Ph. D.
Planning & Rules Manager
Planning, Rule Development & Area Sources

cc: Kurt Wiese, SCAQMD
Phil Fine, SCAQMD
Susan Nakamura, SCAQMD
Laki Tisopulos, SCAQMD
Bay Gilchrist, SCAQMD
Victoria Moaveni, SCAQMD

Attachment

JW:VM

FORM A	SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT AB2588 SECTION, 21865 E. COPLEY DR., DIAMOND BAR CA 91765-0949	INVENTORY YEAR 20_____

AB2588 AIR TOXICS DOCUMENT CERTIFICATION & SUBMITTAL FORM

Please check the appropriate boxes for purpose of submittal:

☐	*INITIAL INFORMATION for ATIR*	☐	*EARLY ACTION REDUCTION PLAN (EARP)*	☐	*INITIAL*
☐	*AIR TOXICS INVENTORY REPORT (ATIR)*	☐	*VOLUNTARY RISK REDUCTION PLAN (VRRP)*	☐	*REVISION*
☐	*HEALTH RISK ASSESSMENT (HRA)*	☐	*IMPLEMENTATION PROGRESS REPORT for VRRP/RRP*	☐	*FINAL*
☐	*RISK REDUCTION PLAN (RRP)*	☐	*OTHER:* _____		

Does your facility participate or wish to participate in VRRP program pursuant to Rule 1402(h)? *YES* ☐ *NO* ☐

Please provide the following information:

Facility name | **SCAQMD ID** | **Facility SIC/NAICS CODE**

Facility address | **Mailing address**

Contact Person (Company Official)

Name: | **Title:**

Telephone: | **eMail:**

Preparer (if different from above)

Name: | **Title:**

Company:

Telephone: | **eMail:**

FAILURE TO SUBMIT REQUIRED INFORMATION OR KNOWINGLY SUPPLYING FALSE INFORMATION IS PUNISHABLE TO THE EXTENT DEFINED IN HEALTH AND SAFETY CODE SECTIONS 44381(a) AND 44381(b), WHICH INCLUDES MINIMUM FINES OF NOT LESS THAN FIVE HUNDRED DOLLARS.

Signature Of Responsible Company Official | **Date**

Name Of Responsible Company Official | **Title**