



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 8

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DEC 29 2011

Ref: 8ENF-PJ

Amanda Smith, Executive Director
Utah Department of Environmental Quality
P.O. Box 144810-4810
Salt Lake city, UT 84114-4810

Re: Final State Review Framework (SRF)
Evaluation Results for Fiscal Year (FY)
2009

Dear Ms. Smith:

Enclosed you will find the final SRF report summarizing evaluation of Utah's Clean Air Act Stationary Source, Resource Conservation and Recovery Act Subtitle C, and National Pollutant Discharge Elimination System enforcement programs for federal FY 2009. This report incorporates comments received from both Utah and EPA's Office of Compliance. We look forward to working with the Utah Department of Environmental Quality in utilizing the results of this evaluation to advance our shared objective of protection of public health and the environment in Utah.

If you have any questions regarding the SRF evaluation or the SRF in general, please contact me or have your staff contact the most knowledgeable person on my staff, Kaye Mathews at (303) 312-6889. Any program-specific questions should be directed to the EPA program contacts identified in the report.

Sincerely,

A handwritten signature in black ink, appearing to read "A. Gaydosh".

Andrew M. Gaydosh
Assistant Regional Administrator
Office of Enforcement, Compliance and
Environmental Justice

Enclosure:

Final SRF Report

cc: By e-mail

Brad Johnson, UDEQ
Bryce Bird, UDEQ
Scott Anderson, UDEQ
Walt Baker, UDEQ
James B. Martin, Regional Administrator
Howard Cantor, Deputy Regional Administrator

State Review Framework

Utah Round 2 Report for Federal Fiscal Year 2009

FINAL 12/16/2011

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I. EXECUTIVE SUMMARY

Major Issues

The Round 2 SRF review of Utah identified the following major issue:

- Fewer than half of the NPDES inspection reports reviewed were complete. This is a continuing issue identified in Round 1 SRF.

Summary of Programs Reviewed

CAA Program

The problem which necessitates state improvement and require recommendations and actions include the following:

- Timeliness of Data Entry – Stack tests and HPV are not being entered in a timely manner.

Areas meeting SRF program requirements or with minor issues for correction include:

- Data completeness
- Data accuracy
- Completion of commitments
- Inspection Coverage
- Quality of Inspection or Compliance Evaluation Reports
- Identification of Alleged Violations
- Identification of SNC and HPV
- Enforcement actions promote return to compliance
- Timely and appropriate action
- Penalty calculation method
- Final penalty assessment

CWA/NPDES Program

The problem which necessitates state improvement and require recommendations and actions include the following:

- Approximately half of inspection reports reviewed were either incomplete, or did not provide sufficient information to determine compliance at the facility.

The good practices include:

- All files contain an enforcement tracking sheet to ensure that information regarding negotiations, final penalty and Supplemental Environmental Projects, and public notice requirements are complete.

Areas meeting SRF program requirements or with minor issues for correction include:

- Data Completeness

- Data Accuracy
- Timeliness of Data Entry
- Completion of commitments
- Inspection Coverage
- Identification of Alleged Violations
- Identification of SNC and HPV
- Enforcement actions promote return to compliance
- Timely and appropriate action
- Penalty calculation method

RCRA Program

The problem which necessitates state improvement and require recommendations and actions include the following:

- Differences between initial and final penalties, and the rationale for the differences, are not sufficiently documented.

The good practices include:

- Inspection coverage exceeds national averages and national goals for all categories, despite State budget shortfalls.

Areas meeting SRF program requirements or with minor issues for correction include:

- Data completeness
- Data accuracy
- Timeliness of Data Entry
- Completion of commitments
- Quality of inspection or compliance evaluation reports
- Identification of Alleged Violations
- Identification of SNC and HPV
- Enforcement actions promote return to compliance
- Timely and appropriate action
- Penalty calculation method

II. BACKGROUND INFORMATION

ON STATE PROGRAM AND REVIEW PROCESS

The State Review Framework (SRF) is a program designed to ensure EPA conducts oversight of state and EPA direct implementation, compliance and enforcement programs in a nationally consistent and efficient manner. Reviews look at 12 program elements covering: data (completeness, timeliness, and quality); inspections (coverage and quality); identification of violations, enforcement actions (appropriateness and timeliness); and, penalties (calculation, assessment and collection). Reviews are conducted in three phases: analyzing information from the national data systems; reviewing a limited set of state files; and development of findings and recommendations. Considerable consultation is built into the process, to ensure EPA and the state understand the causes of issues, and to seek agreement on identifying the actions needed to address problems. The Reports generated by the reviews are designed to capture the information and agreements developed during the review process in order to facilitate program improvements. The reports are designed to provide factual information and do not make determinations of program adequacy. EPA also uses the information in the reports to draw a “national picture” of enforcement and compliance, and to identify any issues that require a national response. Reports are not used to compare or rank state programs.

A. GENERAL PROGRAM OVERVIEW

ORGANIZATION OVERVIEW:

The Utah Department of Environmental Quality (UDEQ) is divided into six Divisions that administer the various environmental programs throughout the state. The Divisions are generally organized according to the regulated media. However, some Divisions administer multiple programs, some of which are not media specific. The following is a general summary of the UDEQ organizational structure:

- Division of Air Quality (DAQ) – Clean Air Act.
- Division of Drinking Water (DDW) – Safe Drinking Water Act
- Division of Environmental Response and Remediation (DERR) – CERCLA, Brownfields, Underground Storage Tanks.
- Division of Radiation Control (DRC) – Radioactive Waste and Materials.
- Division of Solid and Hazardous Waste (DSHW) – Resource Conservation and Recovery Act.
- Division of Water Quality (DWQ) – Clean Water Act.

All of the offices for UDEQ are located in Salt Lake City. The department recently occupied a new building and all divisions are physically located in the same place for the first time since the department was created. This move significantly enhanced communication within the department and improved DEQ’s efficiency and ability to implement environmental programs in Utah.

UDEQ also employs four District Engineers. These engineers are physically located in

St. George, Vernal, Richfield, and Price and coordinate implementation of environmental programs with local authorities and citizens in these regions. The majority of their work is associated with the Water Quality and Drinking Water Programs; however, they also become involved in the other environmental programs as needed.

UDEQ coordinates with Local Health Departments (LHD) in Utah to deliver environmental services to the state. The state is subdivided into 12 local health jurisdictions that are organized by counties. Some LHDs represent a single county, while others represent multiple counties. UDEQ contracts with the LHDs to provide services, including some inspection work. Enforcement actions that result from LHD inspections are done by UDEQ from the Salt Lake office.

UDEQ has managed to maintain adequate staffing levels to administer the programs in spite of the adverse effects of the economic downturn and the lack of adequate federal funding to compensate for the escalation of costs over time. The RCRA grant has not increased for over 20 years, while the demands on the program have become significantly more costly and complex. Approximate FTEs devoted to the compliance and enforcement programs that are the subject of this report are as follows:

Division of Air Quality	27
Division of Solid and Hazardous Waste	15
Division of Water Quality.....	18

ENFORCEMENT OVERVIEW:

Each Division independently administers the compliance and enforcement activities under their purview. Inspections are scheduled and conducted independently by the media programs and overlapping issues are discussed and coordinated by senior level staff.

There are also Statutory Boards for each of the environmental programs. The boards include representatives of the public, private and government sectors and are primarily responsible for adopting rules to administer environmental programs and hear appeals to enforcement actions by the Divisions. The number of individuals on each board varies from 11 to 13 and is established by statute.

Division Directors are authorized to issue orders to regulated entities to enforce the laws and rules that have been adopted by the state. A dispute of an order is appealed to an administrative law judge that will make a recommendation to the Statutory Board that has jurisdiction over the program. The Board can adopt, modify, or reject the recommendation of the administrative law judge. If the Board adopts the law judge’s recommendation and the regulated entity continues to dispute the order, they can appeal to the courts.

Enforcement activities associated with the environmental programs are coordinated with the Environment Division of the Utah Attorney General’s (UAG) office. The

Environment Division is staffed by 9 attorneys. Four attorneys are physically located in the Divisions and are dedicated to the Air, Hazardous Waste, and Environmental Response environmental programs. The remaining five attorneys are physically located off-site and are assigned cases based on work load and availability. UDEQ negotiates a contract annually with the Attorney General for legal services.

DATA REPORTING:

DSHW reports the required data to RCRAInfo, the national data system for the hazardous waste program. The data is entered into RCRAInfo by the 20th of the month following the activity as required by the Performance Partnership Agreement. There are no major issues associated with reporting of the data.

DAQ reports data to EPA in the Air Facility Subsystem/Aerometric Information Retrieval System (AFS/AIRS). The AIRS database is antiquated and needs to be updated or replaced. The Online Tracking Information System (OTIS) is a tool used to generate reports from the database. When OTIS reports are run, discrepancies between what is entered into AIRS and what OTIS reports are routinely found. States comment on any OTIS report discrepancies as part of their Preliminary Data Assessment.

DWQ enters NPDES permitting and enforcement data into the national Integrated Compliance Information System (ICIS) database. The data elements required by the ICIS database are significantly greater and more detailed than the PCS database that preceded ICIS. Meeting the requirements of ICIS has placed additional strain on DWQ's already thin staffing resources. Two ICIS issues continue to plague DWQ's use of ICIS. First, EPA's query to determine if states are collecting penalties associated with enforcement actions against minor facilities is not correct. EPA continues to reflect that Utah is collecting zero penalties on enforcement actions associated with minor facilities when in fact Utah is collecting significant penalties on enforcements associated with minor facilities.

Secondly, the manner in which ICIS reflects enforcement actions taken by a state does not reflect Utah's enforcement actions properly. ICIS apparently counts enforcement actions only when they are closed. This results in Utah being portrayed as taking enforcement actions in a very untimely manner when in fact enforcement actions have been issued in a timely manner. ICIS should reflect when an enforcement action is issued.

B. MAJOR STATE PRIORITIES AND ACOMPLISHMENTS

UTAH DIVISION OF AIR QUALITY:

DAQ compliance and enforcement priorities are established each year in consultation with EPA Region 8 and documented in the Performance Partnership Agreement (PPA). All major sources and those with a history of compliance issues receive top priority. These compliance and enforcement priorities are detailed in each year's Compliance

Monitoring Strategy (CMS). The goal of each year's CMS is to ensure that all compliance evaluations are performed in accordance with EPA policies and that all Minimum Data Requirements (MDRs) are met.

During FFY 2009 DAQ performed 1,046 compliance inspections. Thirty-eight settlements were reached with penalties totaling \$272,708.37.

All operating major sources receive a Full Compliance Evaluation (FCE) each Federal Fiscal Year. DAQ-developed Excel spreadsheets and the State Electronic Data Reporting tool (SEDR) are used to evaluate all stack test and Continuous Monitoring System (CMS) data submitted. DAQ's Early Settlement Process allows DAQ to resolve enforcement actions in a fraction of time required by traditional settlement procedures and at greatly reduced administrative cost. DAQ enters all compliance enforcement data into the Air Facility Subsystem (AFS), many states only enter (High Priority Violator) HPV data.

UTAH DIVISION OF SOLID AND HAZARDOUS WASTE:

DSHW priorities generally reflect the core elements and mandatory outputs of the National Program Guidance. State priorities are negotiated with Region 8 and documented in the Performance Partnership Agreement. Resource availability and program requirements are the primary factors used in establishing priorities.

In FY 2009, the DSHW conducted approximately 180 compliance assistance visits promoting pollution prevention among small businesses. Several businesses have reduced waste generation as a result of recommendations made during compliance assistance visits. The DSHW exceeds the national average and national goals in inspections of TSDFs and LQGs and in collection of penalties in enforcement cases.

UTAH DIVISION OF WATER QUALITY:

The challenges in maintaining the quality of Utah's waters continue to grow. Increased population growth and urbanization combined with decreasing quantities of water will continue to require higher levels of wastewater treatment to maintain the status quo. The ability to control non-point sources of pollution further compromises the beneficial uses of Utah's water resources. The Division of Water Quality's priorities for the coming year include:

- Developing numeric standards for controlling nutrient pollution. Concurrent, an assessment of the cost and benefits of doing so are under way
- Work to develop metrics to protect the wetlands surrounding Great Salt Lake
- Institute administrative rules to govern the reporting and correction of sanitary sewer overflows
- Development of administrative rules to govern polluted run-off from concentrated animal feeding operations (CAFOs)

- Development of administrative rules to govern pesticide applicators which apply product over or near waters of the state

Accomplishments in the Division of Water Quality are as follows:

- Received EPA certification for NET DMR program
- Completed audits of three collection system programs
- Expanded emphasis, outreach and expertise in the NPDES pre-treatment program including the performance of 8 training sessions and 17 audits
- Improved the tracking and reporting of NPDES inspections
- Completed 8 full audits and 5 screening audits on municipal storm water programs
- Compiled draft permits for public-notice and issued new permit coverage for 75 smaller MS4 permittees
- Finalized Consent Order and Consent Agreement for the expenditure of NRDC funds for the Trojan ground water clean-up project
- Issued 83 operating permits for large underground disposal systems

Element 13: There is no Element 13 submission from Utah.

C. PROCESS FOR SRF REVIEW

Describe key steps in the reviews of each media program, including:

- **Review Period:** This is a review of Fiscal Year 2009 data and activities.
- **Key Dates:** Kick-off meeting held January 21, 2010, data pull/PDA March 3, 2010, on-site review: CAA May 10 - 13, 2010; CWA April 5 - 7, 2010; RCRA May 10 - 13, 2010; Draft Report sent to state on August 30, 2010.
- **Communication with the State:** Communications with the State have occurred by letter (e.g kick-off letter), conference call (e.g. kick-off meetings, file review exit meetings, follow-up discussions with staff/managers), and e-mail (e.g PDA transmittal, file selection list transmittal, etc.) The final report will be mailed to the State Environmental Director. This will be followed by a meeting between EPA and the State.
- **List state and regional lead contacts for review.** The Utah contact for the SRF is Brad Johnson. The Region 8 SRF Coordinator is Olive Hofstader. Region 8 program staff who performed on-site reviews, and data and file metric analyses are Joshua Rickard, CAA; Amy Clark, CWA; and, David Duster, RCRA.

III. STATUS OF OUTSTANDING RECOMMENDATIONS FROM PREVIOUS REVIEWS

During the first SRF review of Utah's compliance and enforcement programs, Region 8 and Utah identified a number of actions to be taken to address issues found during the review. All actions identified in Round 1 have been completed, there are no outstanding recommendations.

IV. FINDINGS

Findings represent the Region’s conclusions regarding the issue identified. Findings are based on the Initial Findings identified during the data or file review, as well as from follow-up conversations or additional information collected to determine the severity and root causes of the issue. There are four types of findings, which are described below:

Finding	Description
Good Practices	This describes activities, processes, or policies that the SRF data metrics and/or the file reviews show are being implemented exceptionally well and which the State is expected to maintain at a high level of performance. Additionally, the report may single out specific innovative and noteworthy activities, process, or policies that have the potential to be replicated by other States and that can be highlighted as a practice for other states to emulate. No further action is required by either EPA or the State.
Meets SRF Program Requirements	This indicates that no issues were identified under this Element.
Areas for State* Attention *Or, EPA Region’s attention where program is directly implemented.	This describes activities, processes, or policies that the SRF data metrics and/or the file reviews show are being implemented with minor deficiencies that the State needs to pay attention to strengthen its performance, but are not significant enough to require the region to identify and track state actions to correct. This can describe a situation where a State is implementing either EPA or State policy in a manner that requires self-correction to resolve concerns identified during the review. These are single or infrequent instances that do not constitute a pattern of deficiencies or a significant problem. These are minor issues that the State should self-correct without additional EPA oversight. However, the State is expected to improve and maintain a high level of performance.
Areas for State * Improvement – Recommendations Required *Or, EPA Region’s attention where program is directly implemented.	This describes activities, processes, or policies that the metrics and/or the file reviews show are being implemented by the state that have significant problems that need to be addressed and that require follow-up EPA oversight. This can describe a situation where a state is implementing either EPA or State policy in a manner requiring EPA attention. For example, these would be areas where the metrics indicate that the State is not meeting its commitments, there is a pattern of incorrect implementation in updating compliance data in the data systems, there are incomplete or incorrect inspection reports, and/or there is ineffective enforcement response. These would be significant issues and not merely random occurrences. Recommendations are required for these problems that will have well defined timelines and milestones for completion. Recommendations will be monitored in the SRF Tracker.

Clean Air Act

Element 1 Data Completeness. Degree to which the Minimum Data Requirements are complete.

1-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The minimum data requirements are complete.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	UDEQ is reporting the required reporting data. The count for inspections, violations, informal actions, SNCs, Formal actions and assessed penalties are complete. The State identified several sources that were EPA sources on Indian Country that are showing up in the database and few that were being counted in incorrect columns. The State maintains its own internal tracking system as well as using the AIRs database.
	Metric(s) and Quantitative Value	1a1: 103 1a2: 91 1b1: 215 1b2: 2 1b3: 484 1c1: 207 1c2: 20 1c3: 45 1c4: 98.9% 1c5: 100% 1c6: 93.5% 1d1: 101 1d2: 115 1d3: 34 1e: 42 1f1: 0 1f2: 0 1g1: 3 1g2: 3 1h1: 100% 1h2: 100% 1h3: 100% 1i1: 38 1i2: 35 1j: \$415,183 1k: 5
	State Response	

Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	
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Element 2 Data Accuracy. Degree to which data reported into the national system is accurately entered and maintained

2-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention Area for State Improvement – Recommendations Required
	Finding	Data is reported into the national system accurately and maintained.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	File reviews confirmed that data is being accurately entered into AIRs and the State has a full time employee entering and tracking their data. Quantitative values for this Metric were acceptable by the State, or State corrections were not significantly different from the EPA numbers.
	Metric(s) and Quantitative Value	Quantitative values for this Metric were acceptable by the State, or State corrections were not significantly different from the EPA numbers. 2a: Number of HPVs/Number of NC Sources (1 FY) - 30% 2b: Stack Test Results at Federally-Reportable Sources - % Without Pass/Fail Results (1 FY) -1.6%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 3 Timeliness of Data Entry. Degree to which the Minimum Data Requirements are timely.

3-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input checked="" type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All data required for input under the minimum data requirements are not being entered timely.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>UDAQ is entering data into AIRs, but Stack Tests are being entered late. It should be noted that they are evaluating stack tests in a timely fashion to take actions, but the data is not making it into AIRS.</p> <p>In addition to the above information, UDAQ takes additional time collecting evidence for potential HPVs to ensure accurate designations. The additional time will in many cases result in AFS data entry later than 60 days from the identification of violation/day zero.</p>
	Metric(s) and Quantitative Value	<p>3a: Percent HPVs Entered <= 60 Days After Designation, Timely Entry (1 FY) – 33.3%</p> <p>3b1: Percent Compliance Monitoring related MDR actions reported <= 60 Days After Designation – 62.8%</p> <p>3b2: Percent Enforcement related MDR actions reported <= 60 Days After Designation – 73.7%</p>
	State Response	Title V sources are not required to submit their test reports until 60 days after the test date. That gives would give us no time to review the test reports. We would literally have to enter the test data, unreviewed, the day it comes through the door. That is unrealistic. (Note from EPA: The issue identified during the SRF review was entry of the date of the stack test, not entry of the stack test results.)
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	<p>At the time of the SRF review, the date of the stack test occurrence was required to be entered within 60 days of the test date. If the test results are not yet available, the State should enter the results code "99-Pending", which should be updated with the pass/fail code within 120 days. Refer to the Stack Test data entry guidelines of the AFS Business Rules compendium.</p> <p>National guidance on stack test data entry has changed since the time of the SRF review. As of FY 2012, the date of the stack test and the results (pass/fail) must be reported to AFS within 120 days of the date of the stack test.</p> <p>Effective October, 2011, EPA recommends UDAQ enter stack test dates and results into AFS within 120 days of the date of the stack test. Region 8 will monitor this situation at mid-year 2012 and at the end of FY 2012 to ensure that this issue has been resolved and is not continuing.</p>

Element 4 Completion of Commitments. Degree to which all enforcement/compliance commitments in relevant agreements (i.e. PPAs, PPGs, categorical grants, CMS plans, authorization agreements, etc.) are met and any products or projects are completed.

4-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All commitments are routinely met.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Utah has an approved CMS plan from EPA and is diligently implementing it. The State routinely meets PPA commitments to EPA.
	Metric(s) and Quantitative Value	4a: % completion of planned inspections – 100% 4b: % PPA, MOA, etc. commitments met – 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 5 Inspection Coverage. Degree to which state completed the universe of planned inspections/compliance evaluations (addressing core requirements and federal, state and regional priorities).

5-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	State completes universe of planned inspections/compliance evaluations addressing core requirements and federal, state and regional priorities.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	UDEQ exceeds national averages and national goals for inspection for all categories. Accurate tracking and planning by the State have insured this coverage despite State budget shortfalls.
	Metric(s) and Quantitative Value	5a: FCE coverage, Majors: 99% 5b: FCE coverage, SM-80s: 100% 5c: FCE/PCE coverage, SM-80s: 98.9% 5d: FCE/PCE coverage - minor sources: 51.7% 5e: Number of Sources with Unknown Compliance Status (Current): 1 5f: CAA Stationary Source Investigations (last 5 FY): 0 5g: Review of Self-Certifications Completed (1 FY): 98.5%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 6 Quality of Inspection or Compliance Evaluation Reports. Degree to which inspection or compliance evaluation reports properly document observations, are completed in a timely manner, and include accurate description of observations.

6-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The Region found during the file review process that the state reports included all the seven basic CMR elements...
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	A file review was conducted from files sent from the State to EPA and a visit to the State offices on May 11-12, 2010. Thirty nine (39) inspection reports were reviewed. All inspection reports were completed within 60 days of the last day of inspection. All reports were properly documented observations, provided accurate description of observations and identified regulatory requirements evaluated during the inspection. The Region found during the file review process that the state reports included all the seven basic CMR elements.
	Metric(s) and Quantitative Value	6a: # of files reviewed with FCEs: 39 6b: % of FCEs that meet the definition of an FCE per the CMS policy: 100% 6c: % of CMRs or facility files reviewed that provide sufficient documentation to determine compliance at the facility: 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 7 Identification of Alleged Violations. Degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information (e.g. facility-reported information).

7-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Compliance determinations are accurately made and promptly reported in the national database.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	10 of the sources that were evaluated as part of the files review documented non-compliance. 3 of these sources were found to be HPV's by the State. EPA agrees with the States determinations.
	Metric(s) and Quantitative Value	7a: % of CMRs or facility files reviewed that led to accurate compliance determinations – 100% 7b: % of non-HPVs reviewed where the compliance determination was timely reported to AFS – 100% 7c: Percent facilities in noncompliance that have had an FCE, stack test, or enforcement (1 FY) – 11.6%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 8 Identification of SNC and HPV. Degree to which the state accurately identifies significant noncompliance/high priority violations and enters information into the national system in a timely manner.

8-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The state is accurately identifying HPV's and was found to have acceptable rates of HPV discovery.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Region 8 saw that the data metrics showed Utah was below the national average for HPV discovery rate and wanted to verify if Utah was correctly identifying HPVs. Region 8 chose to pull more enforcement files in the file review process than required by the SRF guidance. The Region reviewed a total of 10 sources that had enforcement actions and agreed the with the States determination of HPV or non-HPV status of each action. The Region believes that the State of Utah is correctly implementing the HPV policy. The Region reviewed the facility with the failed stack test and the state had correctly identified it as an HPV.
	Metric(s) and Quantitative Value	8a: High Priority Violation Discovery Rate - Per Major Source (1 FY) – 2.9% 8b: High Priority Violation Discovery Rate - Per Synthetic Minor Source (1 FY) – 0% 8c: Percent Formal Actions With Prior HPV - Majors (1 FY) – 20% 8d: Percent Informal Enforcement Actions Without Prior HPV - Majors (1 FY) – 0% 8e: Percentage of Sources with Failed Stack Test Actions that received HPV listing - Majors and Synthetic Minors (2 FY) – 50% 8f: % of violations in files reviewed that were accurately determined to be HPV – 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 9 Enforcement Actions Promote Return to Compliance. Degree to which state enforcement actions include required corrective action (i.e. injunctive relief or other complying actions) that will return facilities to compliance in a specific time frame.

9-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	State enforcement actions include required corrective action that will return facilities to compliance in a specific time frame.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	All source files contained documented actions that returned the source to compliance.
	Metric(s) and Quantitative Value	9a: # of formal enforcement responses reviewed - 10 9b: % of formal enforcement responses that include required corrective action (i.e., injunctive relief or other complying actions) that will return the facility to compliance in a specified time frame – 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 10 Timely and Appropriate Action. Degree to which a state takes timely and appropriate enforcement action in accordance with policy relating to specific media.

10-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	State's actions were found to be timely and followed the State's penalty policy.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	State's actions were found to be timely and followed the State's penalty policy.
	Metric(s) and Quantitative Value	10a: Percent HPVs not meeting timeliness goals (2 FY) – 11.1% 10b: % of formal enforcement responses for HPVs reviewed that are addressed in a timely manner (i.e., within 270 days) – 100% 10c: % of enforcement responses for HPVs appropriately addressed – 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 12 Final Penalty Assessment and Collection. Degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.

12-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The State collected penalties in 100% of their formal enforcement cases exceeding the national average and national goal.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	The State issues an early settlement agreement to companies found in non-compliance. This agreement contains a penalty and a consent agreement. All companies in FY09 took advantage of this agreement and paid the State the calculated penalty. There was no difference between the initial and final penalties.
	Metric(s) and Quantitative Value	12a: No Activity Indicator - Actions with Penalties (1 FY) - 38 12b: Percent Actions at HPVs With Penalty (1 FY) – 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Clean Water Act

Element 1 Data Completeness. Degree to which the Minimum Data Requirements are complete.

1-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The minimum data requirements are complete.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Utah exceeds the national average for permit limits and Discharge Monitoring Report (DMR) entry, and violation and enforcement data appears to be complete.
	Metric(s) and Quantitative Value	<p>1a – Active facility universe counts accurate for all NPDES permit types. [This metric provides: the number of active NPDES major facilities with individual permits (1a1) Utah - 36; the number of active NPDES major facilities with general permit (as a Region-only metric)(1a2) Utah - 0; the number of active NPDES non-major facilities with individual permits (1a3) Utah - 95; and the number of active NPDES non-major facilities with general permits (1a4) Utah - 1,215]</p> <p>1b – Majors Permit Limits and DMR Entry – Utah - 94.9 – 100%</p> <p>1c – Non-majors permit limits and DMR entry - Utah 89 – 94%</p> <p>1d – Quality of violation data at non-major NPDES facilities with individual permits (and that are expected to regularly submit DMRs)</p> <p>1e – Informal action counts complete – Utah – 2 informal actions taken against one major facility and 9 informal actions against 8 non-major facilities.</p> <p>1f – Formal action counts complete – Utah – 5 formal actions taken against 5 major facilities and 16 formal actions taken against 16 non-major facilities.</p> <p>1g – Assessed penalties complete – Utah – 20 penalty actions taken; ICIS shows 19. One action against a non-major facility was not in ICIS; however this is not a required data element.</p>
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 2 Data Accuracy. Degree to which data reported into the national system is accurately entered and maintained (example, correct codes used, dates are correct, etc.).

2-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input checked="" type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	DMRs for some facilities did not match the limit data in the permits.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>This concern was identified in one major file reviewed (Spanish Fork), as well as 3 minor facilities (Canyon Fuel, Henefer and Westridge Resources). The minor parameter data is not counted in the metrics below as it is not a required WENDB data element. Four files reviewed contained information that was required in the national database but was not accurately reflected in the database. The majority of discrepancies noted between the database and the files were not with WENB data elements and were not considered under this metric.</p> <p>Utah will review the permit and DMR data to ensure that the required data is accurate.</p>
	Metric(s) and Quantitative Value	<p>2a – 100 % of formal enforcement actions, taken against major facilities, with enforcement violation type (EVTP in PCS or equivalent in ICIS-NPDES) codes entered.</p> <p>2b – 83% of files reviewed where required data is accurately reflected in the national data system.</p> <p>Description of Metric – Percent of files reviewed where data is accurately reflected in the national data system.</p>
	State Response	UDWQ has already undertaken an evaluation to address this deficiency by reviewing permit requirements and DMR data. Instruction was provided to all permit writers at a joint UPDES section staff meeting on 9/27/20 to review their DMR data as received during the months of October & November 2010 to compare with their respective current permits to ensure consistency in the limits and to coordinate resolution for any discrepancies noted. This is currently on going.
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 3 Timeliness of Data Entry. Degree to which the Minimum Data Requirements are timely.

3-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The minimum data requirements are timely.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Comparison of data sets between the frozen and production data showed no or minimal changes of 19 of the 20 required data quality metrics reviewed in 1A-G, 2A, 5A & B and 7A. The “enforcement actions linked to violations at major facilities” data quality metrics changed from 20% (1 of 5) to 100%. (5 of 5). Utah reviewed its enforcement actions in ICIS and updated the system after the 2009 data was frozen.
	Metric(s) and Quantitative Value	3a - Comparison of data sets – Comparison of required data quality elements in 1A-G, 2A, 5A & B and 7A identified 19 of the 20 elements had not appreciably changed between the frozen and production data sets.
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 4 Completion of Commitments. Degree to which all enforcement/compliance commitments in relevant agreements (i.e. PPAs, PPGs, categorical grants, CMS plans, authorization agreements, etc.) are met and any products or projects are completed.

4-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UT met almost all of its compliance/enforcement commitments.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	In FY09, the State conducted 68 inspections stormwater phase I inspections; however, it committed to 72 inspections. Utah either met or exceeded all other inspection commitments. Utah did exceed its overall construction storm water commitments of 114 inspections (completed 116). Utah completed additional Phase II inspections.
	Metric(s) and Quantitative Value	<p>4a - Planned inspections completed. Utah completed 16 of its planned 16 inspections at majors (100%); 77 of its planned 20 minor inspections (>100%); 53 of its planned 39 industrial storm water inspections (> 100%); 116 of its 114 planned construction storm water inspections (exceeded commitments for Phase II inspections, missed the Phase I inspections by 4); and 24 of its 11 planned CAFO inspections (>100%). Description of Metric – Percent of planned inspections completed</p> <p>4b - Planned commitments completed. Utah completed the 11 commitments tracked for this measure. Description of Metric – Reviewers should delineate all compliance and enforcement related commitments in the state work plan, and the progress the state has made in meeting them.</p>
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 5 Inspection Coverage. Degree to which state completed the universe of planned inspections/compliance evaluations (addressing core requirements and federal, state and regional priorities).

5-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Utah met or exceeded the universe of planned inspections with the exception of phase I construction stormwater inspections.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>UT met its major facility inspection commitment of 50%. UT exceeded its minor facility inspection commitment by 285%. UT met its phase II construction stormwater inspection commitment and stormwater industrial commitment. UT did not meet its phase I construction stormwater inspection commitment (68 of 72 inspections, missed by 6%). UT exceeded its CAFO inspection commitment by 118%.</p> <p>While storm water inspections were off by 6% of the proposed total, Utah exceeded its minor, CAFO and industrial and Phase II construction storm water inspection commitments. In FY08, construction stormwater inspections fell significantly below the inspection commitments due to the program not being fully staffed. Additional staff in FY09 contributed to Utah’s significant improvement in construction stormwater inspection coverage in FY09.</p>
	Metric(s) and Quantitative Value	<p>5a Inspection coverage – NPDES majors – Utah - 67.9% 5b1 – Inspections at NPDES non-majors with individual permits, excluding those permits which address solely stormwater, pretreatment, CAFOs, CSOs, or SSOs. – Utah - 66% 5b2 – Inspections at NPDES non-majors with general permits, excluding those permits which address solely stormwater, pretreatment, CAFOs, CSOs, or SSOs – Utah - 10% 5c - Other inspections performed (beyond facilities indicated in 5a and 5b.) Utah - 16%</p>
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 6 Quality of Inspection or Compliance Evaluation Reports. Degree to which inspection or compliance evaluation reports properly document observations, are completed in a timely manner, and include accurate description of observations.

6-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input checked="" type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	13 of 28 inspection reports reviewed were considered complete; 14 of 28 inspection reports contained enough documentation to verify compliance status.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	The majority of inspections reports that were determined to be incomplete or did not have enough information to verify compliance status were CAFO reports (5 out of 5 reviewed), Reconnaissance Inspections (RIs) (5 out of 5 reviewed) and storm water inspections to verify Notice of Termination (NOT) status (2 out of 2 reviewed). CAFO reports determined to be incomplete did not include information on the areas of the site inspected or documentation to support findings in the report. The RI inspections generally included a cover letter and a 3560 form only; the reports did not identify the areas of the site inspected. The NOT storm water inspections did not include information related to the size of the site or outline the inspection activities conducted.
	Metric(s) and Quantitative Value	6a – 28 inspection reports reviewed. Description of Metric – Number of inspection reports reviewed. 6b – 13 of 28 (46%) of inspection reports reviewed are complete. Description of Metric – Percent of inspection reports reviewed that are complete. 6c – 14 of 28 (50%) of inspection reports reviewed provide sufficient documentation to determine compliance at the facility. Description of Metric – Percent of inspection reports reviewed that provide sufficient documentation to lead to an accurate compliance determination. 6d – 21 of 28 (75%) of inspection reports were completed within the prescribed time frame. Description of Metric – Percent of inspection reports reviewed that are timely.
	State Response	UDWQ is modifying the UPDES inspection protocol and undertaking staff training and follow-up by section managers to address this deficiency. Ongoing quality checks will be made through the next year to assure this issue is fully addressed. Instruction was provided to all inspectors at a joint UPDES section staff meeting on 9/27/20 to review what constitutes a complete inspection, as provided by EPA R8. The checklists were reviewed and provided to each inspector for future inspection reports. Also, we announced that a training session will take place in the near future to formally address and resolve this corrective action. This training will occur in Q 2011 (likely February).
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	Updated inspection checklists and any SOPs should be provided to EPA by January 31, 2012. EPA will review the information and provide comments by February 29, 2012. Changes to the inspection procedures must be implemented by April 30, 2012. Issue identified during Round 1 SRF related to inspection reports which did not adequately document compliance.

Element 7 Identification of Alleged Violations. Degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information (e.g. facility-reported information).

7-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UT routinely enters compliance determinations into the national database.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>UT routinely identifies and enters single-event violations into the national database. Inspection reports for two of the major files reviewed (City of Logan and Provo) identified single-event violations (reporting and monitoring issues) which were then entered into ICIS.</p> <p>UT regularly notes a compliance determination on its inspection reports. Twenty-seven of 28 reports reviewed led to an accurate compliance determination.</p> <p>Five majors reviewed (Spanish Fork, City of Logan, E.A. Miller and Sons, Hyrum City, and Provo) were found to have DMR violations accurately entered into ICIS. The remaining major reviewed (Central Valley) had no DMR violations during the time period reviewed.</p>
	Metric(s) and Quantitative Value	<p>7a1 - Number of single-event violations at active majors. Utah - 10</p> <p>7a2 - Number of single-event violations at non-majors. Utah - 34</p> <p>7b - Compliance schedule violations. Utah - 0</p> <p>7c - Permit schedule violations Utah - 0</p> <p>7d - Percent of major facilities with DMR violations reported to the national database Utah – 20/36 or 56%</p> <p>7e – Inspection reports reviewed that led to a compliance determination. Description of Metric – Percent of inspection reports or facility files reviewed that led to accurate compliance determinations. Utah - 96%</p>
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 8 Identification of SNC and HPV. Degree to which the state accurately identifies significant noncompliance/high priority violations and enters information into the national system in a timely manner.

8-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input checked="" type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Only 2 facilities were in SNC in FY09; one was accurately entered to the national database.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	One facility was in SNC for DMR violations (Central Weber). Data for all 41 DMRs reviewed matched the data in ICIS, indicating that SNC for DMR violations is being accurately determined. Eight inspection reports for major discharges were reviewed. One, a pretreatment audit at Hyrum identified that the City had not conducted inspections or sampling at its Significant Industrial Users in the past 12 months, which would put the City in SNC for pretreatment. This was not entered into ICIS. Region 8 will review compliance status of the City with pretreatment requirements in FY11.
	Metric(s) and Quantitative Value	8a1 - Active major facilities in SNC during reporting year Utah - 1 8a2 - Percent of active major facilities in SNC during the reporting year – Utah - 3% 8b Verify that facilities with an SEV were accurately determined to be SNC or non-SNC. Utah – 75% Description of Metric – Percentage of single event violation(s) (SEVs) that are accurately identified as SNC or Non-SNC. 8c – Verify that SEVs that are SNC are timely reported. Utah – 0% Description of Metric – Percent of single event violation(s) identified as SNC that are reported timely.
	State Response	Pre-treatment staff has been directed to address this deficiency. The section manager over this program will monitor this to ensure SNC on pre-treatment issues is correctly handled.
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	Utah should ensure that pretreatment violations are accurately reflected in ICIS.

Element 9 Enforcement Actions Promote Return to Compliance. Degree to which state enforcement actions include required corrective action (i.e. injunctive relief or other complying actions) that will return facilities to compliance in a specific time frame.

9-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input checked="" type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	100% of the enforcement actions taken to address SNC returned the source to compliance; 78% of the actions taken to address non-SNC returned the source to compliance.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	One of one enforcement actions taken to address SNC returned the source to compliance. Seven of nine actions taken to address non-SNC returned the sources to compliance. Two informal enforcement actions taken against two Concentrated Animal Feeding Operations (CAFOs) did not result in a return to compliance. A formal action was subsequently taken against one CAFO which returned it to compliance. No further action was taken against the second CAFO. Utah will review its procedures related to CAFO enforcement in FY10.
	Metric(s) and Quantitative Value	<p>9a – 14 Enforcement responses reviewed. Description of Metric – Number of formal/informal enforcement responses reviewed. This metric establishes the universe to be used in calculating the percentages in 9b and 9c.</p> <p>9b – Responses that have returned or will return a source in SNC to compliance. Utah – 100% Description of Metric – Percent of enforcement responses that have returned or will return a source in SNC to compliance.</p> <p>9c – Responses that have returned or will return sources with non-SNC violations to compliance. Utah – 78% Description of Metric – Percent of enforcement responses that have returned or will returned a source with non-SNC violations to compliance.</p>
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 10 Timely and Appropriate Action. Degree to which a state takes timely and appropriate enforcement action in accordance with policy relating to specific media.

10-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input checked="" type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	The majority of enforcement actions taken were timely and appropriate.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>Ten of twelve enforcement actions with injunctive relief were determined to be timely. One of the actions (Ogden Entertainment Center) was delayed due to negotiations with EPA on which agency would follow up on the violations, as well as contradictory information on ownership of the site. The second action (Auto Moto) initially had a timely warning letter issued, but when the facility did not comply, the second warning letter was sent over 14 months later.</p> <p>Nine of eleven enforcement actions with injunctive relief were determined to be appropriate. Noncompliance at one facility (Auto Moto) resulted in two warning letters, when the failure of the company to respond to the first warning letter should have resulted in escalated enforcement. Total Suspended Solids (TSS) violation at the Town of Bear River resulted in a Letter of Violation, but ultimate resolution was relaxing the TSS limits in the permit. One of the actions reviewed (B & H Farms) was determined to be timely, but the file was incomplete so it could not be determined if the action was appropriate. It was therefore not considered in the calculation for appropriateness.</p>
	Metric(s) and Quantitative Value	<p>10a – major facilities without timely action as appropriate Utah – 0%</p> <p>10b - Enforcement responses reviewed that address SNC in a timely manner. Utah – 100%</p> <p>Description of Metric – Percent of reviewed enforcement responses to address SNC that are taken in a timely manner.</p> <p>10c – Enforcement actions reviewed that address SNC that are appropriate to the violations. Utah – 100%</p> <p>Description of Metric – Percent of enforcement responses reviewed that address SNC that are appropriate to the violations.</p> <p>10d – Enforcement responses reviewed that appropriately address non-SNC violations. Utah – 80%</p> <p>Description of Metric – Percent of enforcement responses reviewed that appropriately address non-SNC violations.</p> <p>10e – Enforcement responses that address non-SNC violations in a timely manner. Utah – 82%</p> <p>Description of Metric – Percent of enforcement responses for non-SNC violations where a response was taken in a timely manner.</p>
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 11 Penalty Calculation Method. Degree to which state documents in its files that initial penalty calculation includes both gravity and economic benefit calculations, appropriately using BEN model or other method that produces results consistent with national policy.

11-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Economic benefit and gravity of noncompliance were considered and documented in all cases reviewed.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Seven of seven penalty actions reviewed documented that gravity and economic benefit were considered.
	Metric(s) and Quantitative Value	11a – Penalty calculations reviewed that consider and include where appropriate gravity and economic benefit. Utah – 100%. Description of Metric –Percentage of penalty calculations that consider and include where appropriate gravity and economic benefit.
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 12-1(a) Final Penalty Assessment and Collection. Degree to which differences between initial and final penalty are documented in the file.

12-1(a)	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UT provided documentation for the difference between initial and final penalty calculations in all but one CAFO case reviewed, and all files reviewed contained documentation that the final penalty was collected.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Six of seven penalty files reviewed included documentation for the difference between initial and final penalty calculations.
	Metric(s) and Quantitative Value	12a – Document the rationale for differences between the initial proposed penalty amount and final assessed penalty that was collected. Utah – 86% Description of Metric – Percent of penalties reviewed that document the difference and rationale between the initial and final assessed penalty.
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 12-1(b) Final Penalty Assessment and Collection. Degree to which files demonstrate that the final penalty was collected.

12-1(b)	Is this finding a(n) (select one):	<input checked="" type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All files reviewed contained documentation that the final penalty was collected.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Seven penalty enforcement files were reviewed. All files contain an enforcement tracking sheet to ensure that information regarding negotiations, final penalty and Supplemental Environmental Projects, and public notice requirements are complete. This is considered a Best Practice to ensure that all elements of the penalty action are completed and included in the file.
	Metric(s) and Quantitative Value	12b – Penalties collected. Utah – 100% Description of Metric – Percent of enforcement actions with penalties that document collection of penalty.
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 1 Data Completeness. Degree to which the Minimum Data Requirements are complete.

1-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UDEQ appears to be reporting all of the required reporting data.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	The count for inspections, violations, informal actions, SNCs, Formal actions and assessed penalties are complete. There was one discrepancy with the LQG count. This discrepancy can be attributed to the different dates for this data pull since this universe changes continually. Utah conducted its LQG data pull on September 4, 2008 as agreed to by EPA in the Performance Partnership Agreement. EPA data pull was conducted in February 2010, fifteen months after Utah's data pull.
	Metric(s) and Quantitative Value	1a1: 14 1a2: 104 1a3: 613 1a4: 1100 1a5: 91 1b1: 92 1b2: 90 1c1: 20 1c2: 13 1d1: 13 1d2: 13 1e1: 2 1e2: 5 1f1: 8 1f2: 10 1g1: \$582,057
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 2 Data Accuracy. Degree to which data reported into the national system is accurately entered and maintained

2-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention Area for State Improvement – Recommendations Required
	Finding	Data is accurately reported into the national system.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	There were two SNCs determinations in FY09. There are no indications that a facility was improperly designated. There were no instances where a violation by a SV facility had been open for more than 240 days.
	Metric(s) and Quantitative Value	2a1: 0 2a2: 0 2b: 9 2c: 94%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 3 Timeliness of Data Entry. Degree to which the Minimum Data Requirements are timely.

3-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Two new SNC designations were entered in FY09. All data required for input under Element 1 appear to be entered promptly and accurately.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	Different counts for LQGs can be attributed to different dates of the data pulls not on delay in data entry. Due to Utah's unique enforcement process, the date of the public notice issuance is used as the final date of SCO settlement completion. No additional SNC's were entered in FY 09. It appears that the requirements of the RCRA ERP and EPA/Utah enforcement agreement have been reconciled.
	Metric(s) and Quantitative Value	3a: 0.0%
	State Response Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	During SRF Round 1, a deficiency was identified in this element related to prompt entering of SNCs. This appears to be resolved. Utah is adhering to the enforcement timelines agreed to by EPA Region 8.

Element 4 Completion of Commitments. Degree to which all enforcement/compliance commitments in relevant agreements (i.e. PPAs, PPGs, categorical grants, CMS plans, authorization agreements, etc.) are met and any products or projects are completed.

4-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All enforcement/compliance commitments required in the UDEQ/EPA performance partnership agreement have been met.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	This agreement requires inspection of TSDs every two years and at least 20% of LQG universe. There are no categorical grants, CMS plans or authorization agreements.
	Metric(s) and Quantitative Value	4a: 100% 4b: 100%
	State Response	TSD Coverage: 100%, LQG coverage: 24.6%
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 5 Inspection Coverage. Degree to which state completed the universe of planned inspections/compliance evaluations (addressing core requirements and federal, state and regional priorities).

5-1	Is this finding a(n) (select one):	<input checked="" type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UDEQ exceeds national averages and national goals for inspection of TSDs and LQGs.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	All TSDs are inspected annually during multiple site visits instead of one time every two years (Metric 5a). Inspection of LQGs also exceeded national goals and national averages (Metric 5b). The coverage of LQGs over a 5 year period was reviewed. The vast majority of the 11 facilities identified as not being inspected during the last 5 years are no longer LGQs. Inspections of SQGs and CESQG appear to be sufficient.
	Metric(s) and Quantitative Value	5a: 100% 5b: 33% 5c: 85.7% 5d: 6.9% 5e1: 55 5e2: 67 5e3: 0 5e4: 23
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 6 Quality of Inspection or Compliance Evaluation Reports. Degree to which inspection or compliance evaluation reports properly document observations, are completed in a timely manner, and include accurate description of observations.

6-1	Is this finding a(n) (select one):	<p>Good Practice</p> <p><input checked="" type="checkbox"/> Meets SRF Program Requirements</p> <p><input type="checkbox"/> Area for State Attention</p> <p><input type="checkbox"/> Area for State Improvement – Recommendations Required</p>
	Finding	All reports properly documented observations, provided accurate description of observations and identified regulatory requirements evaluated during the inspection.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	A file review was conducted from May 10-11 and May 12, 2010. Thirteen inspection reports were reviewed. All inspection reports were completed within 45 days of the last day of inspection.
	Metric(s) and Quantitative Value	<p>6a: 13</p> <p>6b: 100%</p> <p>6c: 100%</p>
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 7 Identification of Alleged Violations. Degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information (e.g. facility-reported information).

7-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	Compliance determinations appear to be accurately made and promptly reported into RCRAInfo.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	The violation identification rate for inspection conducted by UDEQ in FY09 was 14.4%. This appears acceptable. During Round 1 a deficiency was identified for this element related to documentation of violations in RCRAInfo identified during compliance assistance visits. This is no longer a concern. On May 13, 2010, I met with Allan Moore, Supervisor, who oversees compliance of hazardous waste generators in the State of Utah. Mr. Moore informed me that the focus of the compliance assistance visit is to promote compliance by educating the small business on the regulatory requirements of the Resource Conservation and Recovery Act. The intent is not to identify specific cases of non-compliance. The facility is provided a checklist and compliance forms. If these items are addressed and the appropriate forms filled out, the facility will be in compliance. Since UDEQ's compliance assistance program's objective is to educate and promote compliance, it would be inappropriate to identify and document specific cases on non-compliance in RCRAInfo. Also, there is no evidence to support that UDEQ is using the compliance assistance program in lieu of an enforcement program. During FY09, small quantity generators were levied penalties at the same rate as large quantity generators.
	Metric(s) and Quantitative Value	7a: 100% 7b: 100% 7c: 14.4 %
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 8 Identification of SNC and HPV. Degree to which the state accurately identifies significant noncompliance/high priority violations and enters information into the national system in a timely manner.

8-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	There were no instances where violations remained uncorrected for a period greater than 240 days.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	During FY09, there were two SNC designations. During the file review of enforcement cases, there were no indications that violators should be designated as SNCs.
	Metric(s) and Quantitative Value	8a: 2.20% 8b: 100% 8c: 40% 8d: 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 9 Enforcement Actions Promote Return to Compliance. Degree to which state enforcement actions include required corrective action (i.e. injunctive relief or other complying actions) that will return facilities to compliance in a specific time frame.

9-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All UDEQ enforcement actions resulted in facilities' returning to compliance within the appropriate time frames.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	During the file review conducted on May 10-11 and May 13, 2010, I reviewed eleven enforcement actions.
	Metric(s) and Quantitative Value	9a: 11 9b: 100% 9c: 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 10 Timely and Appropriate Action. Degree to which a state takes timely and appropriate enforcement action in accordance with policy relating to specific media.

10-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	All enforcement actions from SV were conducted within 180 days per EPA/UDEQ agreement.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	<p>UDEQ appears to take timely and appropriate enforcement in accordance with the 2003 RCRA Enforcement Response Policy. A file review was conducted because RCRAInfo reported that the time period for enforcement on the two SNC designated facilities exceeded 360 days (Metric 10a). In one case, Tooele Chemical Agent Disposal Facility, the enforcement action was completed within 360 days per EPA/UDEQ agreement that uses the date the enforcement action is released for public comment. In the second case, Clean Harbors Aragonite, the enforcement action exceeded the 360 days. This is not considered to be a problem, since this was only one case and there is an insufficient population to compare to national goals.</p> <p>During Round 1, a discrepancy was identified related to enforcement of repeated violations from SNC facilities. This is no longer a concern. The 2003 RCRA ERP does not require the use of stipulated penalties for non-compliance of an order. Utah has two SNC facilities that are inspected annually. Enforcement actions, if warranted, are taken for each inspection. UDEQ ensures that violations identified during the inspection are corrected. The two SNC facilities are TSDFs that handle a large volume and variety of waste streams requiring a considerable amount of tracking and documentation. It is not uncommon to find some record keeping deficiencies during an inspection of these types of facilities. Penalties incorporated in the UDEQ's enforcement orders recover the economic benefit of non-compliance plus the amount reflecting the gravity of the violation as required in the 2003 RCRA ERP.</p>
	Metric(s) and Quantitative Value	10a: 0.0% 10b: 10 formal actions 10c: 91% 10d: 100%
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 11 Penalty Calculation Method. Degree to which state documents in its files that initial penalty calculation includes both gravity and economic benefit calculations, appropriately using BEN model or other method that produces results consistent with national policy.

11-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input checked="" type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	There was proper documentation that initial penalty calculation includes both gravity and economic benefit for all cases where a penalty was issued in FY09.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	During the file review conducted on May 10-11 and May 13, 2010, I reviewed penalty calculation methodology for four formal enforcement actions. It appears that UDEQ appropriately uses the BEN model and results appear to be consistent with national policy.
	Metric(s) and Quantitative Value	11a: 100% of enforcement actions reviewed had calculated penalties appropriately.
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	

Element 12 Final Penalty Assessment and Collection. Degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.		
12-1	Is this finding a(n) (select one):	<input type="checkbox"/> Good Practice <input type="checkbox"/> Meets SRF Program Requirements <input type="checkbox"/> Area for State Attention <input checked="" type="checkbox"/> Area for State Improvement – Recommendations Required
	Finding	UDEQ issued and collected penalties in 100% of their formal enforcement cases exceeding the national average and national goal. However, the differences between initial and final penalties are not sufficiently documented.
	Explanation. (If Area for State Attention, describe why action not required, if Area for Improvement, provide recommended action.)	During FY09, UDEQ issued \$582,057 in penalties in 6 cases. All penalty amounts must be approved by the Utah Solid and Hazardous Waste Control Board. Utah needs to improve its documentation of the differences between initial and final penalties assessed. There appears to be no procedure to maintain records documenting the changes in penalty amounts from the initial to final amount. All proposed penalties are made available for public comment for 30 days. Any changes in amount of the penalty as a result of the public comment period are documented. UDEQ guidance on implementing its penalty policy provides for changing penalty amounts but does not require that rationale for changing the amounts be documented.
	Metric(s) and Quantitative Value	12a: \$582,057 12b: 100 percent of formal enforcement actions issued and collected penalties.
	State Response	
	Action(s) (Include any uncompleted actions from Round 1 that address this issue.)	EPA recommends that UDEQ maintain the rationale for all penalty changes in enforcement files. By the end of December, 2011, UDEQ should develop and implement a procedure to maintain records documenting changes in the penalty amounts from the initial to final amount, as well as rationale for the change.

V. Element 13 Submission

There is no Element 13 submission from Utah.

APPENDIX A: STATUS OF RECOMMENDATIONS FROM PREVIOUS REVIEWS

During the first SRF review of Utah's compliance and enforcement programs, Region 8 and Utah identified a number of actions to be taken to address issues found during the review. The table below shows the status of progress toward completing those actions.

State	Status	Due Date	Media	Element	Finding
UT - Round 1	Completed	9/29/2008	CWA	Insp Universe	From the on-site file review, it was determined that inspectors are actually inspecting sites more frequently than recorded in the databases or reflected in the numbers above. EPA found several files where additional site visits occurred and observations were documented to assist with the development of enforcement cases. These enforcement support inspections were not recorded as such in the database or in the State's accounting process. DWQ believed that only site visits which result in a report being sent to the facility could be counted as an inspection.
UT - Round 1	Completed	9/30/2010	CWA	Violations ID'ed Appropriately	While the DWQ inspectors were knowledgeable about the storm water program and provided good information to the facilities, areas of improvement were noted in the oversight reports.
UT - Round 1	Completed	9/29/2008	CWA	SNC Accuracy	SNC definitions for areas such as storm water and CAFOs have not yet been developed.
UT - Round 1	Completed	9/29/2008	CWA	Timely & Appropriate Actions	Of the 13 actions reviewed, 12 included injunctive relief (10 NOV/AOs and two SAs). Of those 12 formal actions which included injunctive relief, five (three NOV/AOs and two SAs) included specific enforceable compliance schedules to address the violations. None of the remaining eight enforcement actions included specific language that the schedule developed by the violator to address the noncompliance would be incorporated into the NOV/AO.
UT - Round 1	Completed	4/30/2009	CWA	Timely & Appropriate Actions	Of the 10 formal actions reviewed, all were determined to be appropriate, and two were determined to be timely. One site identified through file reviews had violations including a discharge without a permit that was not addressed by a formal action. The lack of formal enforcement was determined to be inappropriate.

State	Status	Due Date	Media	Element	Finding
UT - Round 1	Completed	9/30/2010	CWA	Penalty Calculations	Two of three actions reviewed did not include appropriate gravity and/or economic benefit.
UT - Round 1	Completed	4/30/2009	CWA	Penalties Collected	As stated above, one of the three penalty actions reviewed calculated appropriate gravity and economic benefit of non-compliance. The penalty amount collected in this case was less than the proposed penalty, though still deemed appropriate using the EPA Interim Clean Water Act Settlement Penalty Policy, Municipal Litigation Consideration. However, no documentation was included in the file on how this reduced penalty amount was reached.
UT - Round 1	Completed	12/31/2007 10:00:00 PM	CWA	Grant Commitments	Six deliverables for NPDES were identified in FY2006 PPA. Three were complete and on time, one was complete but not on time, two were not received.
UT - Round 1	Completed	9/30/2010	CWA	Data Timely	All of the forty two DMRs reviewed had dates of data entry (and were initialed) and, of those, about half (20) were entered in a timely manner. This could have been due in part to the problems EPA was experiencing with ICIS-NPDES. The system was often down immediately following the State's data migration from PCS. Likewise, most (twenty-one) of the inspection reports reviewed had dates of data entry (and were initialed), however, less than half (eight) met the standard for timelessness for data entry.
UT - Round 1	Completed	9/29/2008	CAA	Data Complete	As described in the findings for Element 4, regarding the implementation of the HPV Policy in AFS, these findings discovered during the SRF review indicate the need to further dialogue and clarification on the HPV Policy and its related Minimum Data Requirements (MDRs). Topics for further dialogue include the definitions of "Day Zero," "Addressed" and "Resolved" as they relate to the UDAQ Early Settlement Agreement process.
UT - Round 1	Completed	9/30/2007	RCRA	Insp Universe	DSHW draws a strong distinction between compliance assistance visits and inspections with potential enforcement for SQGs and CESQGs. During FY2006, ten formal inspections were conducted. This represents approximately one percent (1%) of the SQG/CESQG universe. There is no specific minimum requirement in national guidance or the PPA regarding the number of small quantity generator (SQG) inspections to be conducted each year. However, inspection coverage in the SQG/CESQG universe is expected per the original State Authorization regulations (40 CFR § 271.15(b)(2)).
UT - Round 1	Completed	9/30/2007	RCRA	Insp Universe	There are no inspections entered in RCRAInfo for 90 hazardous waste transporters. Many transporter notifications were protectively filed in 1980 when the notification requirement was originally established. DSHW believes that many of these entities no longer exist.

State	Status	Due Date	Media	Element	Finding
UT - Round 1	Completed	1/19/2008	RCRA	Insp Universe	Five citizen complaints were received by EPA during FY2006 and were referred to the DSHW for a response. As a courtesy to the Region, DSHW has agreed to provide a quarterly update on complaint referrals. DSHW has an adequate program for responding to citizens complaints.
UT - Round 1	Completed	3/31/2009	RCRA	Violations ID'ed Timely	Enter SQG inspection/compliance assistance visit data into RCRAInfo.
UT - Round 1	Completed	9/30/2010	RCRA	Data Accurate	EPA acknowledges that RCRAInfo does not provide a data entry field for non-compliance elements found during a compliance assistance visit.
UT - Round 1	Completed	9/29/2008	RCRA	Violations ID'ed Timely	Violations at LQGs, TSDFs, transporters, and used oil facilities were identified in RCRAInfo up to 180 days from the date of the inspection.
UT - Round 1	Completed	9/29/2008	RCRA	SNC Accuracy	One out of five SNC facilities was identified in the RCRAInfo database during FY2006.
UT - Round 1	Completed	9/29/2008	RCRA	Timely & Appropriate Actions	The DSHW inappropriately issued a Warning Letter to a facility for 10 violations documented during a FY2006 DSHW inspection.
UT - Round 1	Completed	9/30/2010	RCRA	Penalty Calculations	The DSHW adequately considered economic benefit and gravity portions of penalties for all enforcement penalty actions reviewed. Penalties have been issued to SNC facilities, however, numerous violations, including repeat violations continue to occur every year.
UT - Round 1	Completed	9/30/2010	RCRA	Data Timely	The Hazardous Waste Civil ERP stipulates that the prompt entering of SNCs in RCRAInfo (i.e., within 150 days (180 days per Utah/EPA Enforcement Agreement) from the date of violation discovery) is an essential part of tracking facility compliance.

APPENDIX B: OFFICIAL DATA PULL

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1a1	Title V Universe: AFS Operating Majors (Current)	Data Quality	State			103	NA	NA	NA
1a1	Title V Universe: AFS Operating Majors (Current)	Data Quality	Combined			127	NA	NA	NA
1a2	Title V Universe: AFS Operating Majors with Air Program Code = V (Current)	Data Quality	State			73	NA	NA	NA
1a2	Title V Universe: AFS Operating Majors with Air Program Code = V (Current)	Data Quality	Combined			91	NA	NA	NA
1b1	Source Count: Synthetic Minors (Current)	Data Quality	State			215	NA	NA	NA
1b1	Source Count: Synthetic Minors (Current)	Data Quality	Combined			216	NA	NA	NA
1b2	Source Count: NESHAP Minors (Current)	Data Quality	State			2	NA	NA	NA
1b2	Source Count: NESHAP Minors (Current)	Data Quality	Combined			2	NA	NA	NA
1b3	Source Count: Active Minor facilities or otherwise FedRep, not including NESHAP Part 61 (Current)	Informational Only	State			484	NA	NA	NA

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1b3	Source Count: Active Minor facilities or otherwise FedRep, not including NESHAP Part 61 (Current)	Informational Only	Combined			498	NA	NA	NA
1c1	CAA Subprogram Designations: NSPS (Current)	Data Quality	State			207	NA	NA	NA
1c1	CAA Subprogram Designations: NSPS (Current)	Data Quality	Combined			219	NA	NA	NA
1c2	CAA Subprogram Designations: NESHAP (Current)	Data Quality	State			20	NA	NA	NA
1c2	CAA Subprogram Designations: NESHAP (Current)	Data Quality	Combined			21	NA	NA	NA
1c3	CAA Subprogram Designations: MACT (Current)	Data Quality	State			45	NA	NA	NA
1c3	CAA Subprogram Designations: MACT (Current)	Data Quality	Combined			63	NA	NA	NA
1c4	CAA Subpart Designations: Percent NSPS facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	82.70%	98.9%	276	279	3
1c5	CAA Subpart Designations: Percent NESHAP facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	38.60%	100.0%	11	11	0
1c6	CAA Subpart Designations: Percent MACT facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	92.40%	93.50%	43	46	3

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1c6	CAA Subpart Designations: Percent MACT facilities with FCEs conducted after 10/1/2005	Data Quality	Combined	100%	90.30%	80.00%	48	60	12
1d1	Compliance Monitoring: Sources with FCEs (1 FY)	Data Quality	State			101	NA	NA	NA
1d2	Compliance Monitoring: Number of FCEs (1 FY)	Data Quality	State			115	NA	NA	NA
1d3	Compliance Monitoring: Number of PCEs (1 FY)	Informational Only	State			34	NA	NA	NA
1e	Historical Non-Compliance Counts (1 FY)	Data Quality	State			42	NA	NA	NA
1e	Historical Non-Compliance Counts (1 FY)	Data Quality	Combined			57	NA	NA	NA
1f1	Informal Enforcement Actions: Number Issued (1 FY)	Data Quality	State			0	NA	NA	NA
1f2	Informal Enforcement Actions: Number of Sources (1 FY)	Data Quality	State			0	NA	NA	NA
1g1	HPV: Number of New Pathways (1 FY)	Data Quality	State			3	NA	NA	NA
1g2	HPV: Number of New Sources (1 FY)	Data Quality	State			3	NA	NA	NA
1h1	HPV Day Zero Pathway Discovery date: Percent DZs with discovery	Data Quality	State	100%	49.30%	100.0%	3	3	0

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1h2	HPV Day Zero Pathway Violating Pollutants: Percent DZs	Data Quality	State	100%	74.10%	100.0%	3	3	0
1h3	HPV Day Zero Pathway Violation Type Code(s): Percent DZs with HPV Violation Type Code(s)	Data Quality	State	100%	78.10%	100.0%	3	3	0
1i1	Formal Action: Number Issued (1 FY)	Data Quality	State			38	NA	NA	NA
1i2	Formal Action: Number of Sources (1 FY)	Data Quality	State			35	NA	NA	NA
1j	Assessed Penalties: Total Dollar Amount (1 FY)	Data Quality	State			\$415,183	NA	NA	NA
1k	Major Sources Missing CMS Policy Applicability (Current)	Review Indicator	State	0		5	NA	NA	NA
2. Data accuracy. degree to which the minimum data requirements are accurate.									
2a	Number of HPVs/Number of NC Sources (1 FY)	Data Quality	State	<= 50%	58.80%	30.00%	3	10	7
2a	Number of HPVs/Number of NC Sources (1 FY)	Data Quality	Combined	<= 50%	59.00%	50.00%	9	18	9
2b1	Stack Test Results at Federally-Reportable Sources - % Without Pass/Fail Results (1 FY)	Goal	State	0%	1.60%	1.60%	2	127	125
2b2	Stack Test Results at Federally-Reportable Sources - Number of Failures (1 FY)	Data Quality	State			0	NA	NA	NA

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
3. Timeliness of data entry. degree to which the minimum data requirements are complete.									
3a	Percent HPVs Entered <= 60 Days After Designation, Timely Entry (1 FY)	Goal	State	100%	32.40%	33.30%	1	3	2
3b1	Percent Compliance Monitoring related MDR actions reported <= 60 Days After Designation, Timely Entry (1 FY)	Goal	State	100%	53.30%	62.80%	257	409	152
3b2	Percent Enforcement related MDR actions reported <= 60 Days After Designation, Timely Entry (1 FY)	Goal	State	100%	67.90%	73.7%	28	38	10
3c	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.							
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5a1	CMS Major Full Compliance Evaluation (FCE) Coverage (2 FY CMS Cycle)	Goal	State	100%	86.90%	99.0%	99	100	1
5a1	CMS Major Full Compliance Evaluation (FCE) Coverage (2 FY CMS Cycle)	Goal	Combined	100%	87.10%	90.40%	104	115	11
5a2	CAA Major Full Compliance Evaluation (FCE) Coverage (most recent 2 FY)	Review Indicator	State	100%	82.90%	94.30%	100	106	6

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5a2	CAA Major Full Compliance Evaluation (FCE) Coverage(most recent 2 FY)	Review Indicator	Combined	100%	83.20%	83.10%	108	130	22
5b1	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (5 FY CMS Cycle)	Review Indicator	State	20% - 100%	82.90%	82.8%	24	29	5
5b1	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (5 FY CMS Cycle)	Review Indicator	Combined	20% - 100%	83.30%	82.8%	24	29	5
5b2	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (last full 5 FY)	Informational Only	State	100%	90.20%	100.0%	31	31	0
5b2	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (last full 5 FY)	Informational Only	Combined		90.50%	100.0%	31	31	0
5c	CAA Synthetic Minor FCE and reported PCE Coverage (last 5 FY)	Informational Only	State		81.00%	72.6%	175	241	66
5c	CAA Synthetic Minor FCE and reported PCE Coverage (last 5 FY)	Informational Only	Combined		81.30%	72.3%	175	242	67
5d	CAA Minor FCE and Reported PCE Coverage (last 5 FY)	Informational Only	State		29.80%	51.70%	519	1,004	485
5e	Number of Sources with Unknown Compliance Status (Current)	Review Indicator	State			1	NA	NA	NA

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5e	Number of Sources with Unknown Compliance Status (Current)	Review Indicator	Combined			2	NA	NA	NA
5f	CAA Stationary Source Investigations (last 5 FY)	Informational Only	State			0	NA	NA	NA
5g	Review of Self-Certifications Completed (1 FY)	Goal	State	100%	93.7%	98.5%	67	68	1
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.									
7c1	Percent facilities in noncompliance that have had an FCE, stack test, or enforcement (1 FY)	Review Indicator	State	> 1/2 National Avg	22.00%	11.60%	15	129	114
7c2	Percent facilities that have had a failed stack test and have noncompliance status (1 FY)	Review Indicator	State	> 1/2 National Avg	46.60%	0.0%	0	1	1
7c3	Percent facilities that have had a failed stack test and have noncompliance status (1 FY)	Review Indicator	EPA	> 1/2 National Avg	33.3%	0 / 0	0	0	0

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.									
8a	High Priority Violation Discovery Rate - Per Major Source (1 FY)	Review Indicator	State	> 1/2 National Avg	7.70%	2.90%	3	103	100
8a	High Priority Violation Discovery Rate - Per Major Source (1 FY)	Review Indicator	EPA		0.8%	1.9%	2	103	101
8b	High Priority Violation Discovery Rate - Per Synthetic Minor Source (1 FY)	Review Indicator	State	> 1/2 National Avg	0.6%	0.0%	0	215	215
8b	High Priority Violation Discovery Rate - Per Synthetic Minor Source (1 FY)	Review Indicator	EPA	> 1/2 National Avg	0.0%	0.0%	0	215	215
8c	Percent Formal Actions With Prior HPV - Majors (1 FY)	Review Indicator	State	> 1/2 National Avg	74.50%	20.0%	1	5	4
8d	Percent Informal Enforcement Actions Without Prior HPV - Majors (1 FY)	Review Indicator	State	< 1/2 National Avg	45.70%	0 / 0	0	0	0
8e	Percentage of Sources with Failed Stack Test Actions that received HPV listing - Majors and Synthetic Minors (2 FY)	Review Indicator	State	> 1/2 National Avg	43.10%	50.00%	1	2	1
10. Timely and Appropriate Action. Degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.									
10a	Percent HPVs not meeting timeliness goals (2 FY)	Review Indicator	State		34.90%	11.1%	1	9	8

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
12. Final penalty assessment and collection. Degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.									
12a	No Activity Indicator - Actions with Penalties (1 FY)	Review Indicator	State			38	NA	NA	NA
12b	Percent Actions at HPVs With Penalty (1 FY)	Review Indicator	State	>= 80%	86.10%	100.0%	1	1	0

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1a1	Active facility universe: NPDES major individual permits (Current)	Data Quality	Combined			36	NA	NA	NA
1a2	Active facility universe: NPDES major general permits (Current)	Data Quality	Combined			0	NA	NA	NA
1a3	Active facility universe: NPDES non-major individual permits (Current)	Data Quality	Combined			123	NA	NA	NA
1a4	Active facility universe: NPDES non-major general permits (Current)	Data Quality	Combined			1,212	NA	NA	NA
1b1	Major individual permits: correctly coded limits (Current)	Goal	Combined	>=; 95%	99.9%	100.0%	34	34	0
1b2	Major individual permits: DMR entry rate based on MRs expected (Forms/Forms) (1 Qtr)	Goal	Combined	>=; 95%	92.60%	94.90%	111	117	6
1b3	Major individual permits: DMR entry rate based on DMRs expected (Permits/Permits) (1 Qtr)	Goal	Combined	>=; 95%	92.70%	100.00%	34	34	0
1b4	Major individual permits: manual RNC/SNC override rate (1 FY)	Data Quality	Combined			0.0%	0	2	2
1c1	Non-major individual permits: correctly coded limits (Current)	Informational Only	Combined			100.0%	89	89	0

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. Degree to which the minimum data requirements are complete.									
1c2	Non-major individual permits: DMR entry rate based on DMRs expected (Forms/Forms) (1 Qtr)	Informational Only	Combined			77.70%	223	287	64
1c3	Non-major individual permits: DMR entry rate based on DMRs expected (Permits/Permits) (1 Qtr)	Informational Only	Combined			61.40%	78	127	49
1d1	Violations at non-majors: noncompliance rate (1 FY)	Informational Only	Combined			30.90%	38	123	85
1d2	Violations at non-majors: noncompliance rate in the annual noncompliance report (ANCR)(1 CY)	Informational Only	Combined			0 / 0	0	0	0
1d3	Violations at non-majors: DMR non-receipt (3 FY)	Informational Only	Combined			3	NA	NA	NA
1e1	Informal actions: number of major facilities (1 FY)	Data Quality	State			1	NA	NA	NA
1e1	Informal actions: number of major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1e2	Informal actions: number of actions at major facilities (1 FY)	Data Quality	State			2	NA	NA	NA
1e2	Informal actions: number of actions at major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1e3	Informal actions: number of non-major facilities (1 FY)	Data Quality	State			8	NA	NA	NA

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1e3	Informal actions: number of mom-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1e4	Informal actions: number of actions at non-major facilities (1 FY)	Data Quality	State			9	NA	NA	NA
1e4	Informal actions: number of actions at non-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1f1	Formal actions: number of major facilities (1 FY)	Data Quality	State			5	NA	NA	NA
1f1	Formal actions: number of major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1f2	Formal actions: number of actions at major facilities (1 FY)	Data Quality	State			5	NA	NA	NA
1f2	Formal actions: number of actions at major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1f3	Formal actions: number of non-major facilities (1 FY)	Data Quality	State			16	NA	NA	NA
1f3	Formal actions: number of non-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1f4	Formal actions: number of actions at non-major facilities (1 FY)	Data Quality	State			16	NA	NA	NA
1f4	Formal actions: number of actions at non-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA
1g1	Penalties: total number of penalties (1 FY)	Data Quality	State			19	NA	NA	NA

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1g1	Penalties: total number of penalties (1 FY)	Data Quality	EPA			0	NA	NA	NA
1g2	Penalties: total penalties (1 FY)	Data Quality	State			\$168,324	NA	NA	NA
1g2	Penalties: total penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA
1g3	Penalties: total collected pursuant to civil judicial actions (3 FY)	Data Quality	State			\$0	NA	NA	NA
1g3	Penalties: total collected pursuant to civil judicial actions (3 FY)	Data Quality	EPA			\$0	NA	NA	NA
1g4	Penalties: total collected pursuant to administrative actions (3 FY)	Informational Only	State			\$485,159	NA	NA	NA
1g4	Penalties: total collected pursuant to administrative actions (3 FY)	Informational Only	EPA			\$0	NA	NA	NA
1g5	No activity indicator - total number of penalties (1 FY)	Data Quality	State			\$168,324	NA	NA	NA
1g5	No activity indicator - total number of penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA
2. Data accuracy. degree to which the minimum data requirements are accurate.									
2a	Actions linked to violations: major facilities (1 FY)	Data Quality	State	>=: 80%		100.0%	5	5	0
2a	Actions linked to violations: major facilities (1 FY)	Data Quality	EPA	>=: 80%		0 / 0	0	0	0
3. Timeliness of data entry. degree to which the minimum data requirements are complete.									
3a	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.							

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
5. Inspection coverage, degree to which state completed the universe of planned inspections/compliance evaluations.									
5a	Inspection coverage: NPDES majors (1 FY)	Goal	State	100%	63.70%	67.90%	19	28	9
5a	Inspection coverage: NPDES majors (1 FY)	Goal	EPA	100%	5.8%	0.0%	0	28	28
5a	Inspection coverage: NPDES majors (1 FY)	Goal	Combined	100%	66.40%	67.90%	19	28	9
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	State			24.1%	14	58	44
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	EPA			0.0%	0	58	58
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	Combined			24.1%	14	58	44
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	State			2.20%	4	180	176
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	EPA			0.0%	0	180	180
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	Combined			2.20%	4	180	176
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	State			7.40%	82	1,105	1,023
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	EPA			0.2%	2	1,105	1,023

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	Combined			7.60%	84	1,105	1,021
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.									
7a1	Single-event violations at majors (1 FY)	Review Indicator	Combined			10	NA	NA	NA
7a2	Single-event violations at non-majors (1 FY)	Informational Only	Combined			34	NA	NA	NA
7b	Facilities with unresolved compliance schedule violations (at end of FY)	Data Quality	Combined		31.00%	0.0%	0	17	17
7c	Facilities with unresolved permit schedule violations (at end of FY)	Data Quality	Combined		27.40%	0.0%	0	56	56
7d	Percentage major facilities with DMR violations (1 FY)	Data Quality	Combined		53.20%	52.80%	19	36	17
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.									
8a1	Major facilities in SNC (1 FY)	Review Indicator	Combined			2	NA	NA	NA
8a2	SNC rate: percent majors in SNC (1 FY)	Review Indicator	Combined		23.60%	5.60%	2	36	34
10. Timely and appropriate action. degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.									
10a	Major facilities without timely action (1 FY)	Goal	Combined	< 2%	18.60%	5.60%	2	36	34

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1a1	Number of operating TSDFs in RCRAInfo	Data Quality	State			14	NA	NA	NA
1a2	Number of active LQGs in RCRAInfo	Data Quality	State			104	NA	NA	NA
1a3	Number of active SQGs in RCRAInfo	Data Quality	State			613	NA	NA	NA
1a4	Number of all other active sites in RCRAInfo	Data Quality	State			1,100	NA	NA	NA
1a5	Number of LQGs per latest official biennial report	Data Quality	State			91	NA	NA	NA
1b1	Compliance monitoring: number of inspections (1 FY)	Data Quality	State			92	NA	NA	NA
1b1	Compliance monitoring: number of inspections (1 FY)	Data Quality	EPA			23	NA	NA	NA
1b2	Compliance monitoring: sites inspected (1 FY)	Data Quality	State			90	NA	NA	NA
1b2	Compliance monitoring: sites inspected (1 FY)	Data Quality	EPA			21	NA	NA	NA
1c1	Number of sites with violations determined at any time (1 FY)	Data Quality	State			20	NA	NA	NA
1c1	Number of sites with violations determined at any time (1 FY)	Data Quality	EPA			12	NA	NA	NA
1c2	Number of sites with violations determined during the FY	Data Quality	State			13	NA	NA	NA
1c2	Number of sites with violations determined during the FY	Data Quality	EPA			3	NA	NA	NA

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
1. Data completeness. degree to which the minimum data requirements are complete.									
1d1	Informal actions: number of sites (1 FY)	Data Quality	State			13	NA	NA	NA
1d1	Informal actions: number of sites (1 FY)	Data Quality	EPA			0	NA	NA	NA
1d2	Informal actions: number of actions (1 FY)	Data Quality	State			13	NA	NA	NA
1d2	Informal actions: number of actions (1 FY)	Data Quality	EPA			0	NA	NA	NA
1e1	SNC: number of sites with new SNC (1 FY)	Data Quality	State			2	NA	NA	NA
1e1	SNC: number of sites with new SNC (1 FY)	Data Quality	EPA			0	NA	NA	NA
1e2	SNC: Number of sites in SNC (1 FY)	Data Quality	State			5	NA	NA	NA
1e2	SNC: Number of sites in SNC (1 FY)	Data Quality	EPA			1	NA	NA	NA
1f1	Formal action: number of sites (1 FY)	Data Quality	State			8	NA	NA	NA
1f1	Formal action: number of sites (1 FY)	Data Quality	EPA			0	NA	NA	NA
1f2	Formal action: number taken (1 FY)	Data Quality	State			10	NA	NA	NA
1f2	Formal action: number taken (1 FY)	Data Quality	EPA			0	NA	NA	NA
1g	Total amount of final penalties (1 FY)	Data Quality	State			\$582,057	NA	NA	NA
1g	Total amount of final penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
2. Data accuracy. degree to which the minimum data requirements are accurate.									
2a1	Number of sites SNC-determined on day of formal action (1 FY)	Data Quality	State			0	NA	NA	NA
2a2	Number of sites SNC-determined within one week of formal action (1 FY)	Data Quality	State			0	NA	NA	NA
2b	Number of sites in violation for greater than 240 days	Data Quality	State			0	NA	NA	NA
2b	Number of sites in violation for greater than 240 days	Data Quality	EPA			9	NA	NA	NA
3. Timeliness of data entry. degree to which the minimum data requirements are complete.									
3a	Percent SNCs entered & 60 days after designation (1 FY)	Review Indicator	State			0.0%	0	2	2
3a	Percent SNCs entered & 60 days after designation (1 FY)	Review Indicator	EPA			0 / 0	0	0	0
3b	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.							
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5a	Inspection coverage for operating TSDFs (2 FYs)	Goal	State	100%	85.70%	100.0%	14	14	0
5a	Inspection coverage for operating TSDFs (2 FYs)	Goal	Combined	100%	90.80%	100.0%	14	14	0
5b	Inspection coverage for LQGs (1 FY)	Goal	State	20%	24.60%	33%	30	91	61
5b	Inspection coverage for LQGs (1 FY)	Goal	Combined	20%	26.70%	36.30%	33	91	58
5c	Inspection coverage for LQGs (5 FYs)	Goal	State	100%	68.50%	85.7%	78	91	13

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.									
5c	Inspection coverage for LQGs (5 FYs)	Goal	Combined	100%	73.80%	87.9%	80	91	11
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	State			6.90%	42	613	571
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	Combined			7.8%	48	613	565
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	State			55	NA	NA	NA
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	Combined			58	NA	NA	NA
5e2	Inspections at active transporters (5 FYs)	Informational Only	State			67	NA	NA	NA
5e2	Inspections at active transporters (5 FYs)	Informational Only	Combined			68	NA	NA	NA
5e3	Inspections at non-notifiers (5 FYs)	Informational Only	State			0	NA	NA	NA
5e3	Inspections at non-notifiers (5 FYs)	Informational Only	Combined			0	NA	NA	NA
5e4	Inspections at active sites other than those listed in 5a-d and 5e1-5e3 (5 FYs)	Informational Only	State			23	NA	NA	NA
5e4	Inspections at active sites other than those listed in 5a-d and 5e1-5e3 (5 FYs)	Informational Only	Combined			24	NA	NA	NA
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.									
7c	Violation identification rate at sites with inspections (1 FY)	Review Indicator	State			14.40%	13	90	77
7c	Violation identification rate at sites with inspections (1 FY)	Review Indicator	EPA			14.3%	3	21	18

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.									
8a	SNC identification rate at sites with inspections (1 FY)	Review Indicator	State	1/2 National Avg	3.10%	2.20%	2	90	88
8a	SNC identification rate at sites with evaluations (1 FY)	Review Indicator	Combined	1/2 National Avg	3.30%	1.9%	2	104	102
8b	Percent of SNC determinations made within 150 days (1 FY)	Goal	State	100%	75.60%	100.0%	2	2	0
8b	Percent of SNC determinations made within 150 days (1 FY)	Goal	EPA	100%	64.20%	0 / 0	0	0	0
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	State	1/2 National Avg	61.40%	40%	4	10	6
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	EPA	1/2 National Avg	71.60%	0 / 0	0	0	0
10. Timely and appropriate action. degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.									
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	State	80%	39%	0.0%	0	2	2
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	Combined	80%	35.60%	0.0%	0	2	2
10b	No activity indicator - number of formal actions (1 FY)	Review Indicator	State			10	NA	NA	NA

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod
12. Final penalty assessment and collection. degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.									
12a	No activity indicator - penalties (1 FY)	Review Indicator	State			\$582,057	NA	NA	NA
12b	Percent of final formal actions with penalty (1 FY)	Review Indicator	State	1/2 National Avg	64.60%	100.0%	6	6	0
12b	Percent of final formal actions with penalty (1 FY)	Review Indicator	Combined	1/2 National Avg	64.90%	100.0%	6	6	0

APPENDIX C: PDA TRANSMITTAL LETTER

Appendices C, D and E provide the results of the Preliminary Data Analysis (PDA). The Preliminary Data Analysis forms the initial structure for the SRF report, and helps ensure that the data metrics are adequately analyzed prior to the on-site review. This is a critical component of the SRF process because it allows the reviewers to be prepared and knowledgeable about potential problem areas before initiating the on-site portion of the review. In addition, it gives the region focus during the file reviews and/or basis for requesting supplemental files based on potential concerns raised by the data metrics results.

Region 8 reviewers transmitted the results of the Preliminary Data Analysis to the State via email. The email did not include any discussion of the analysis itself. Explanations concerning the PDA initial findings and identification of any areas that the data review suggests needed further examination and discussion were addressed through discussions with the State staff during phone calls.

APPENDIX D: PRELIMINARY DATA ANALYSIS CHART

This section provides the results of the Preliminary Data Analysis (PDA). The Preliminary Data Analysis forms the initial structure for the SRF report, and helps ensure that the data metrics are adequately analyzed prior to the on-site review. This is a critical component of the SRF process because it allows the reviewers to be prepared and knowledgeable about potential problem areas before initiating the on-site portion of the review. In addition, it gives the region focus during the file reviews and/or basis for requesting supplemental files based on potential concerns raised by the data metrics results.

The PDA reviews each data metric and evaluates state performance against the national goal or average, if appropriate. The PDA Chart in this section of the SRF report only includes metrics where potential concerns are identified or potential areas of exemplary performance. The full PDA Worksheet (Appendix E) contains every metric: positive, neutral or negative. Initial Findings indicate the observed results. Initial Findings are preliminary observations and are used as a basis of further investigation that takes place during the file review and through dialogue with the state. Final Findings are developed only after evaluating them against the file review results where appropriate, and dialogue with the state have occurred. Through this process, Initial Findings may be confirmed, modified, or determined not to be supported. Findings are presented in Section IV of this report.

Clean Air Act

No metrics were identified as potential concerns or inconclusive in the Clean Air Act PDA.

Clean Water Act

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Initial Findings
1a3	Active facility universe: NPDES non-major individual permits (Current)	Data Quality	Combined			123	Since the metric is combined (EPA and State) the 3 EPA Indian permits should be included. Additionally, the 3 State MS4 permits should be included, but general permits and the 28 biosolids permits should be excluded from the count due to the permits not being separate permits from the Individual Municipal Permit. UT includes biosolids with its Individual Municipal Permit and designates it by UTL-000000 however, it is not a separate permit from the Individual Municipal Permit UT0000000. Therefore, the count should be 95.
1c2	Non-major individual permits: DMR entry rate based on DMRs expected (Forms/Forms) (1 Qtr)	Informational Only	Combined			77.70%	Since the metric is combined (EPA and State) the EPA non-major individual permits Indian permits should be included. However, EPA general or Navajo Nation permits should not be included. EPA agrees with UT that the majority of forms not received were EPA permits.
1c3	Non-major individual permits: DMR entry rate based on DMRs expected (Permits/Permits) (1 Qtr)	Informational Only	Combined			61.40%	Since the metric is combined (EPA and State) the EPA Indian permits should be included. The current production data set (run date of March 12, 2010) shows that the data includes biosolids and stormwater permits which have no DMR requirement and of the remaining 7 permits, 3 are EPA issued permits. Therefore, the State has 4 permits.
1d1	Violations at non-majors: noncompliance rate (1 FY)	Informational Only	Combined			30.90%	Since the metric is combined (EPA and State) the EPA Indian permits should be included. The universe count should be 95 (since the general and biosolids permits should be excluded). Therefore, the noncompliance rate should be $38/95 = 40\%$.
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	State			2.20%	The documentation provided by UT does not show inspection coverage (rather it shows that there are 107 facilities with non-major general permits) so EPA is unable to verify that the inspection coverage numbers in the State correction are correct.
7d	Percentage major facilities with DMR violations (1 FY)	Data Quality	Combined		53.20%	52.80%	UT's percentage for major facilities with DMR violations is slightly higher (56%) than the national average (53%). However, UT's SNC rate (3%) is below the national SNC rate (5.6%).

RCRA

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Initial Findings
5c	Inspection coverage for LQGs (5 FYs)	Goal	State	100%	68.50%	85.7%	The vast majority of the 13 facilities are no longer LQGs
5c	Inspection coverage for LQGs (5 FYs)	Goal	Combined	100%	73.80%	87.9%	The vast majority of the 11 facilities are no longer LQGs
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	State			6.90%	evaluate concern from previous SRF regarding CEI inspection of SQGs
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	Combined			7.8%	evaluate concern from previous SRF regarding CEI inspection of SQGs
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	State			55	evaluate concern from previous SRF review regarding CEI inspections of CESQGs
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	Combined			58	evaluate concern from previous SRF review regarding CEI inspections of CESGGs
8a	SNC identification rate at sites with inspections (1 FY)	Review Indicator	State	1/2 National Avg	3.10%	2.20%	SNC identification rate s below national average but above national goal
8a	SNC identification rate at sites with evaluations (1 FY)	Review Indicator	Combined	1/2 National Avg	3.30%	1.9%	SNC identification rate s below national average but above national goal
8b	Percent of SNC determinations made within 150 days (1 FY)	Goal	EPA	100%	64.20%	0 / 0	

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Initial Findings
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	State	1/2 National Avg	61.40%	40%	Formal action rate of prior SNC listing is below national average but above national goal
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	EPA	1/2 National Avg	71.60%	0 / 0	Formal action rate of prior SNC listing is below national average but above national goal
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	State	80%	39%	0.0%	File review warranted. National goal is that 80 percent of SNCs receive enforcement within 360 days
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	Combined	80%	35.60%	0.0%	File review warranted. National goal is that 80 percent of SNCs receive enforcement within 360 days

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1a1	Title V Universe: AFS Operating Majors (Current)	Data Quality	State			103	NA	NA	NA	Yes	96	FY 2009 CMS/AI RS	OTIS-listed sources: Nephi Rubber 4902300001, Varian X-Ray 4903500082, ATK - Bacchus 4903500164, US Gypsum 4904100001, Clean Harbors Grassy Mtn 4904500035, Elkhorn Operating 4901900009, ETC/Wildhorse 4901900009, Logan City Power 4900500075, KUC-Barneys 4903500289, Kern River SLC 4903500543, Questar Old Squaws 4904700129, Whiting - Flat Rock 4904701005, ETC - White Mesa 4904701011, Whitewater - Lindon 4904900257 were not State major sources at the start of FY 2009. The following were State major sources as per CMS for FY	Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)																
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings	
1. Data completeness. degree to which the minimum data requirements are complete.																
1a1	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	Cont'd from above	2009, but were not listed in OTIS report: LDS Central Heating Plant 4903500508, Simplot Phosphates 4904700003, Uranium One, Bill Barrett - Sage Brush Flat 4900700101, Bill Barrett - Interplanetary 4900700083, Kern River - Veyo 4905300050
1a1	Title V Universe: AFS Operating Majors (Current)	Data Quality	Combined			127	NA	NA	NA						Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric Prod	Count Prod	Universe Prod	Not Counted Prod	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1a2	Title V Universe: AFS Operating Majors with Air Program Code = V (Current)	Data Quality	State			73	NA	NA	NA	Yes	74	FY 2009 CMS/AIRS	Mountain Gas Resources/ Western Gas Resources 4904300005 & Simplot Phosphates 4904700003 are missing from the OTIS list. Central Valley Water Reclamation 4903500191 appears on list but does not have a T5 permit.	Appears Acceptable	
1a2	Title V Universe: AFS Operating Majors with Air Program Code = V (Current)	Data Quality	Combined			91	NA	NA	NA					Appears Acceptable	
1b1	Source Count: Synthetic Minors (Current)	Data Quality	State			215	NA	NA	NA	Yes	200	AIRS		Appears Acceptable	
1b1	Source Count: Synthetic Minors (Current)	Data Quality	Combined			216	NA	NA	NA	Yes	213	AIRS		Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1b2	Source Count: NESHAP Minors (Current)	Data Quality	State			2	NA	NA	NA	Yes	5	AIRS		Appears Acceptable	
1b2	Source Count: NESHAP Minors (Current)	Data Quality	Combined			2	NA	NA	NA	Yes	5	AIRS		Appears Acceptable	
1b3	Source Count: Active Minor facilities or otherwise FedRep, not including NESHAP Part 61 (Current)	Informational Only	State			484	NA	NA	NA	Yes	482	AIRS		Appears Acceptable	
1b3	Source Count: Active Minor facilities or otherwise FedRep, not including NESHAP Part 61 (Current)	Informational Only	Combined			498	NA	NA	NA						

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1c1	CAA Subprogram Designations: NSPS (Current)	Data Quality	State			207	NA	NA	NA	Yes	221	AIRS		Appears Acceptable	
1c1	CAA Subprogram Designations: NSPS (Current)	Data Quality	Combined			219	NA	NA	NA					Appears Acceptable	
1c2	CAA Subprogram Designations: NESHAP (Current)	Data Quality	State			20	NA	NA	NA	Yes	22	AIRS	KUC 4903500030 is not a Part 61 source.	Appears Acceptable	
1c2	CAA Subprogram Designations: NESHAP (Current)	Data Quality	Combined			21	NA	NA	NA						
1c3	CAA Subprogram Designations: MACT (Current)	Data Quality	State			45	NA	NA	NA	Yes	54	FY 2009 CMS/AIR S	HAFB UTTR 4900300036 is not a part 63 source. Questar Old Squaws 4904700129, Whiting-Flat Rock 4904701005, ETC Mesa B 4904701011 are not state sources.	Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1c3	CAA Subprogram Designations : MACT (Current)	Data Quality	Combined			63	NA	NA	NA					Appears Acceptable	
1c4	CAA Subpart Designations : Percent NSPS facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	82.70%	98.9%	276	279	3	Yes	99.6%	CMS/AIR S	VA Med Cntr 4903510017 was inspected 3/5/09, Mid-America 4904700038 was inspected 10/6/08.	Appears Acceptable	
1c5	CAA Subpart Designations : Percent NESHAP facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	38.60%	100.0%	11	11	0					Appears Acceptable	
1c6	CAA Subpart Designations : Percent MACT facilities with FCEs conducted after 10/1/2005	Data Quality	State	100%	92.40%	93.50%	43	46	3	Yes	97.80%	CMS/AIR S	Sterigenics 4903500215 inspected 11/24/09, Chevron 4903500240 inspected 6/27/08	Appears Acceptable	
1c6	CAA Subpart Designations : Percent MACT facilities with FCEs conducted after 10/1/2005	Data Quality	Combined	100%	90.30%	80.00%	48	60	12					Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1d1	Compliance Monitoring: Sources with FCEs (1 FY)	Data Quality	State			101	NA	NA	NA	Yes	96	FY 2009 CMS/AI RS	Missing sources: Canyon Gas 4901900026, DEI 4903500354, Utelite 4904300001, Pacificorp Currant Creek 4902300026, Uranium One, El Paso 4901300041, Bill Barrett Sage Brush 4900700101, Bill Barrett Interplanetary 4900700083, Delta Petroleum, Deseret Chemical Depot 4904500071, Kern River Veyo 4905300050	Appears Acceptable	
1d2	Compliance Monitoring: Number of FCEs (1 FY)	Data Quality	State			115	NA	NA	NA	Yes	96	FY 2009 CMS/AI RS		Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1d3	Compliance Monitoring: Number of PCEs (1 FY)	Informational Only	State			34	NA	NA	NA	Yes	0	FY 2009 CMS/AIRS	An FCE is performed for all sources listed in the CMS each year.	Appears Acceptable	
1e	Historical Non-Compliance Counts (1 FY)	Data Quality	State			42	NA	NA	NA	Yes	30	FY 2009 CMS/AIRS	The following sources were issued NOVs by EPA. No state compliance issues: Pacificorp Castle Gate 4900700002, El Paso 4901300006, 4901300033, 4901300039, 4901300040, 4901300041, Pacificorp Huntington 4901501001. Whiting Flat Rock 4904701005 & Berry Petroleum 4901300080 (duplicates) are not State sources. Geneva Rock 4901100049 is entered twice, Tru Crushing/Custom Crushing 4904300017 counted twice	Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1e	Historical Non-Compliance Counts (1 FY)	Data Quality	Combined			57	NA	NA	NA					Appears Acceptable	
1f1	Informal Enforcement Actions: Number Issued (1 FY)	Data Quality	State			0	NA	NA	NA					Appears Acceptable	
1f2	Informal Enforcement Actions: Number of Sources (1 FY)	Data Quality	State			0	NA	NA	NA					Appears Acceptable	
1g1	HPV: Number of New Pathways (1 FY)	Data Quality	State			3	NA	NA	NA						
1g2	HPV: Number of New Sources (1 FY)	Data Quality	State			3	NA	NA	NA						
1h1	HPV Day Zero Pathway Discovery date: Percent DZs with discovery	Data Quality	State	100%	49.30%	100.0%	3	3	0						

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1h2	HPV Day Zero Pathway Violating Pollutants: Percent DZs	Data Quality	State	100%	74.10%	100.0%	3	3	0						
1h3	HPV Day Zero Pathway Violation Type Code(s): Percent DZs with HPV Violation Type Code(s)	Data Quality	State	100%	78.10%	100.0%	3	3	0					Appears Acceptable	
1i1	Formal Action: Number Issued (1 FY)	Data Quality	State			38	NA	NA	NA					Appears Acceptable	
1i2	Formal Action: Number of Sources (1 FY)	Data Quality	State			35	NA	NA	NA					Appears Acceptable	
1j	Assessed Penalties: Total Dollar Amount (1 FY)	Data Quality	State			\$415,183	NA	NA	NA					Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1k	Major Sources Missing CMS Policy Applicability (Current)	Review Indicator	State	0		5	NA	NA	NA	Yes	0	FY 2009 CMS/AIRS	Elkhorn 490370033, Whiting Flat Rock 4904701005, ETC White Mesa 4904701011 are not State sources. Whitewater 4904900257 became a source on 5/12/2009 after the CMS. Delta Petroleum was included in the CMS & FCE performed 9/2/2009.	Appears Acceptable	
2. Data accuracy. degree to which the minimum data requirements are accurate.															
2a	Number of HPVs/Number of NC Sources (1 FY)	Data Quality	State	<= 50%	58.80%	30.00%	3	10	7					Appears Acceptable	
2a	Number of HPVs/Number of NC Sources (1 FY)	Data Quality	Combined	<= 50%	59.00%	50.00%	9	18	9					Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
2. Data accuracy. degree to which the minimum data requirements are accurate.															
2b1	Stack Test Results at Federally-Reportable Sources - % Without Pass/Fail Results (1 FY)	Goal	State	0%	1.60%	1.60%	2	127	125	Yes	0%	FY 2009 CMS/AIR S	Whiting 4904300004 was not a stack test. Northwest Moab pass/fail results are in OTIS.	Appears Acceptable	
2b2	Stack Test Results at Federally-Reportable Sources - Number of Failures (1 FY)	Data Quality	State			0	NA	NA	NA					Appears Acceptable	
3. Timeliness of data entry. degree to which the minimum data requirements are complete.															
3a	Percent HPVs Entered <= 60 Days After Designation , Timely Entry (1 FY)	Goal	State	100%	32.40%	33.30%	1	3	2	yes	3			Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
3. Timeliness of data entry. degree to which the minimum data requirements are complete.															
3b1	Percent Compliance Monitoring related MDR actions reported <= 60 Days After Designation , Timely Entry (1 FY)	Goal	State	100%	53.30%	62.80%	257	409	152	yes	100%			Appears Acceptable	
3b2	Percent Enforcement related MDR actions reported <= 60 Days After Designation , Timely Entry (1 FY)	Goal	State	100%	67.90%	73.7%	28	38	10	yes	100%			Appears Acceptable	
3c	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.													

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5a1	CMS Major Full Compliance Evaluation (FCE) Coverage (2 FY CMS Cycle)	Goal	State	100%	86.90%	99.0%	99	100	1	Yes	98.40%	CMS/AIRS	Sources not inspected: Canyon Gas Resources 4901900026 became SM during FY 09, RT Mfg 4904900222 shut down during FY 09, Questar Oak Springs 4900700061 has permit rescinded during FY 09.	Appears Acceptable	
5a2	CAA Major Full Compliance Evaluation (FCE) Coverage(most recent 2 FY)	Review Indicator	State	100%	82.90%	94.30%	100	106	6	Yes	98.40%	CMS/AIRS	Sources not inspected: Canyon Gas Resources 4901900026 became SM during FY 09, RT Mfg 4904900222 shut down during FY 09, Questar Oak Springs 4900700061 has permit rescinded during FY 09.	Appears Acceptable	
5a2	CAA Major Full Compliance Evaluation (FCE) Coverage(most recent 2 FY)	Review Indicator	Combined	100%	83.20%	83.10%	108	130	22					Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5b1	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (5 FY CMS Cycle)	Review Indicator	State	20% - 100%	82.90%	82.8%	24	29	5	Yes	100%	CMS/AIRS	Holcim 4902100017 inspected 6/28/05, Amoco 4904300014 inspected 4/6/05, Ensign-Bickford 4904900002 inspected 4/18/06, Utah Refractories 4904900007 inspected 9/13/06, Unitek 4903500437 inspected 2/2/06	Appears Acceptable	
5b1	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (5 FY CMS Cycle)	Review Indicator	Combined	20% - 100%	83.30%	82.8%	24	29	5					Appears Acceptable	

OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

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Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage, degree to which state completed the universe of planned inspections/compliance evaluations.															
5b2	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (last full 5 FY)	Informational Only	State	100%	90.20%	100.0%	31	31	0	Yes	100%	CMS/AIRS	Holcim 4902100017 inspected 6/28/05, Amoco 4904300014 inspected 4/6/05, Ensign-Bickford 4904900002 inspected 4/18/06, Utah Refractories 4904900007 inspected 9/13/06, Unitek 4903500437 inspected 2/2/06. This should match 5b1.	Appears Acceptable	
5b2	CAA Synthetic Minor 80% Sources (SM-80) FCE Coverage (last full 5 FY)	Informational Only	Combined		90.50%	100.0%	31	31	0					Appears Acceptable	

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Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5c	CAA Synthetic Minor FCE and reported PCE Coverage (last 5 FY)	Informational Only	State		81.00%	72.6%	175	241	66	Yes	98.90%	CMS/AIRS	Of 66 not counted 58 are portable sources & should not be included in the universe, 2 were not operating, 2 are on Indian country, 2 have not been inspected, & 2 were inspected.	Appears Acceptable	
5c	CAA Synthetic Minor FCE and reported PCE Coverage (last 5 FY)	Informational Only	Combined		81.30%	72.3%	175	242	67					Appears Acceptable	
5d	CAA Minor FCE and Reported PCE Coverage (last 5 FY)	Informational Only	State		29.80%	51.70%	519	1,004	485	Yes					

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5e	Number of Sources with Unknown Compliance Status (Current)	Review Indicator	State			1	NA	NA	NA	Yes	0	CMS/AIRS	Fashion Cabinets is inspected each FY. Most recent inspection was 3/4/2009.	Appears Acceptable	
5e	Number of Sources with Unknown Compliance Status (Current)	Review Indicator	Combined			2	NA	NA	NA	No				Appears Acceptable	
5f	CAA Stationary Source Investigations (last 5 FY)	Informational Only	State			0	NA	NA	NA	No				Appears Acceptable	
5g	Review of Self-Certifications Completed (1 FY)	Goal	State	100%	93.7%	98.5%	67	68	1	Yes	73 of 74	FY 2009 CMS/AIRS	RT Mfg 4904900222 shut down prior to self-certification due date.	Appears Acceptable	
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.															
7c1	Percent facilities in noncompliance that have had an FCE, stack test, or enforcement (1 FY)	Review Indicator	State	> 1/2 National Avg	22.00%	11.60%	15	129	114	Yes	100%	OTIS	100% of the noncompliant facilities have had an FCE, stack test, or enforcement.	Appears Acceptable	

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Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.															
7c2	Percent facilities that have had a failed stack test and have noncompliance status (1 FY)	Review Indicator	State	> 1/2 National Avg	46.60%	0.0%	0	1	1	Yes	Universe should be 0	OTIS	Cannot find this data in OTIS report to identify source	Appears Acceptable	
7c3	Percent facilities that have had a failed stack test and have noncompliance status (1 FY)	Review Indicator	EPA	> 1/2 National Avg	33.3%	0 / 0	0	0	0	No				Appears Acceptable	
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8a	High Priority Violation Discovery Rate - Per Major Source (1 FY)	Review Indicator	State	> 1/2 National Avg	7.70%	2.90%	3	103	100	No				Appears Acceptable	

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OTIS State Review Framework Results, CAA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8a	High Priority Violation Discovery Rate - Per Major Source (1 FY)	Review Indicator	EPA		0.8%	1.9%	2	103	101	No				Appears Acceptable	
8b	High Priority Violation Discovery Rate - Per Synthetic Minor Source (1 FY)	Review Indicator	State	> 1/2 National Avg	0.6%	0.0%	0	215	215	No				Appears Acceptable	
8b	High Priority Violation Discovery Rate - Per Synthetic Minor Source (1 FY)	Review Indicator	EPA	> 1/2 National Avg	0.0%	0.0%	0	215	215	No				Appears Acceptable	
8c	Percent Formal Actions With Prior HPV - Majors (1 FY)	Review Indicator	State	> 1/2 National Avg	74.50%	20.0%	1	5	4	No				Appears Acceptable	
8d	Percent Informal Enforcement Actions Without Prior HPV - Majors (1 FY)	Review Indicator	State	< 1/2 National Avg	45.70%	0 / 0	0	0	0	No				Appears Acceptable	
8e	Percentage of Sources with Failed Stack Test Actions that received HPV listing - Majors and Synthetic Minors (2 FY)	Review Indicator	State	> 1/2 National Avg	43.10%	50.00 %	1	2	1	Yes	0%	AIRS	US Gypsum is not major for PM10, therefore it did not meet definition of HPV	Appears Acceptable	

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Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
10. Timely and Appropriate Action. Degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.															
10a	Percent HPVs not meeting timeliness goals (2 FY)	Review Indicator	State		34.90%	11.1%	1	9	8	Yes	100%			Appears Acceptable	
12. Final penalty assessment and collection. Degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.															
12a	No Activity Indicator - Actions with Penalties (1 FY)	Review Indicator	State			38	NA	NA	NA	No				Appears Acceptable	
12b	Percent Actions at HPVs With Penalty (1 FY)	Review Indicator	State	>= 80%	86.10%	100.0 %	1	1	0	No				Appears Acceptable	

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OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1a1	Active facility universe: NPDES major individual permits (Current)	Data Quality	Combined			36	NA	NA	NA	No					Appears Acceptable
1a2	Active facility universe: NPDES major general permits (Current)	Data Quality	Combined			0	NA	NA	NA	No					Appears Acceptable
1a3	Active facility universe: NPDES non-major individual permits (Current)	Data Quality	Combined			123	NA	NA	NA	Yes	89	ICIS	<p>Biosolids Solids Permits that were included in Individual Municipal permits were not included in count by UT.</p> <p>Biosolids Permits 28, 3 MS4's (do not submit DMRs), 3 EPA Indian Permits.</p>	Minor Issue	<p>Since the metric is combined (EPA and State) the 3 EPA Indian permits should be included. Additionally, the 3 State MS4 permits should be included, but general permits and the 28 biosolids permits should be excluded from the count due to the permits not being separate permits from the Individual Municipal Permit. UT includes biosolids with its Individual Municipal Permit and designates it by UTL-000000 however, it is not a separate permit from the Individual Municipal Permit UT0000000. Therefore, the count should be 95.</p>

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OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1a4	Active facility universe: NPDES non-major general permits (Current)	Data Quality	Combined			1,212	NA	NA	NA	No	1,215	ICIS	Counting all Administratively extended (ADC) and effective permits. Document provided for explanation by State.	Appears Acceptable	
1b1	Major individual permits: correctly coded limits (Current)	Goal	Combined	>=: 95%	99.9%	100.0%	34	34	0	Yes	36	ICIS	This counts Orem and Lake Side Power Plant which EPA didn't count.	Appears Acceptable	
1b2	Major individual permits: DMR entry rate based on MRs expected (Forms/Forms) (1 Qtr)	Goal	Combined	>=: 95%	92.60%	94.90%	111	117	6	No				Appears Acceptable	
1b3	Major individual permits: DMR entry rate based on DMRs expected (Permits/Permits) (1 Qtr)	Goal	Combined	>=: 95%	92.70%	100%	34	34	0	Yes	Just the count of 34 permits which should be 36	ICIS	36 Majors	Appears Acceptable	
1b4	Major individual permits: manual RNC/SNC override rate (1 FY)	Data Quality	Combined			0.0%	0	2	2	Yes	1	ICIS	We did manually resolve conditional TSS requirement for SUFCO. Central Weber has an Administrative Order and no Manual Override.	Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1c1	Non-major individual permits: correctly coded limits (Current)	Informational Only	Combined			100.0%	89	89	0	No				Appears Acceptable	
1c2	Non-major individual permits: DMR entry rate based on DMRs expected (Forms/Forms) (1 Qtr)	Informational Only	Combined			77.70%	223	287	64	Yes	94%	ICIS	We disagree with this number because EPA Permits were included. The highest number of forms not received were caused by EPA's American Gilsonite. We have 267 forms and only 16 of those forms were not reported making the percentage 94%.	Minor Issue	Since the metric is combined (EPA and State) the EPA non-major individual permits should be included. However, EPA general or Navajo Nation permits should not be included. EPA agrees with UT that the majority of forms not received were EPA permits.

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1c3	Non-major individual permits: DMR entry rate based on DMRs expected (Permits/Permits) (1 Qtr)	Informational Only	Combined			61.40%	78	127	49	Yes	89% of the DMRs received that were expected	ICIS	Considering the time period the legend indicates. We had 89% of our DMR received. Document provided for explanation by State. The pull posted on OTIS show that American Gilsonite was counted and this is not Utah's. American Gilsonite Accounts for 35 DMRs not received.	Minor Issue	Since the metric is combined (EPA and State) the EPA Indian permits should be included. The current production data set (run date of March 12, 2010) shows that the data includes biosolids and stormwater permits which have no DMR requirement and of the remaining 7 permits, 3 are EPA issued permits. Therefore, the State has 4 permits.

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1d1	Violations at non-majors: noncompliance rate (1 FY)	Informational Only	Combined			30.90%	38	123	85	Yes	49 Violations	ICIS	Percentage will be 55% non-compliance (49 violations/89 facilities = 55%)	Minor Issue	Since the metric is combined (EPA and State) the EPA Indian permits should be included. The universe count should be 95 (since the general and biosolids permits should be excluded). Therefore, the noncompliance rate should be 38/95 = 40%.

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1d2	Violations at non-majors: noncompliance rate in the annual noncompliance report (ANCR)(1 CY)	Informational Only	Combined			0 / 0	0	0	0					Appears Acceptable	
1d3	Violations at non-majors: DMR non-receipt (3 FY)	Informational Only	Combined			3	NA	NA	NA	Yes	0	ICIS	All permits listed are EPA's	Appears Acceptable	
1e1	Informal actions: number of major facilities (1 FY)	Data Quality	State			1	NA	NA	NA	No				Appears Acceptable	
1e1	Informal actions: number of major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA						

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1e2	Informal actions: number of actions at major facilities (1 FY)	Data Quality	State		2	NA	NA	NA	NA	No				Appears Acceptable	
1e2	Informal actions: number of actions at major facilities (1 FY)	Data Quality	EPA		0	NA	NA	NA	NA						
1e3	Informal actions: number of non-major facilities (1 FY)	Data Quality	State		8	NA	NA	NA	NA	No				Appears Acceptable	
1e3	Informal actions: number of non-major facilities (1 FY)	Data Quality	EPA		0	NA	NA	NA	NA						
1e4	Informal actions: number of actions at non-major facilities (1 FY)	Data Quality	State		9	NA	NA	NA	NA	No				Appears Acceptable	
1e4	Informal actions: number of actions at non-major facilities (1 FY)	Data Quality	EPA		0	NA	NA	NA	NA						

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1f1	Formal actions: number of major facilities (1 FY)	Data Quality	State			5	NA	NA	NA	No				Appears Acceptable	
1f1	Formal actions: number of major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA						
1f2	Formal actions: number of actions at major facilities (1 FY)	Data Quality	State			5	NA	NA	NA	No				Appears Acceptable	
1f2	Formal actions: number of actions at major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA						
1f3	Formal actions: number of non-major facilities (1 FY)	Data Quality	State			16	NA	NA	NA	No				Appears Acceptable	
1f3	Formal actions: number of non-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA						
1f4	Formal actions: number of actions at non-major facilities (1 FY)	Data Quality	State			16	NA	NA	NA	No				Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1f4	Formal actions: number of actions at non-major facilities (1 FY)	Data Quality	EPA			0	NA	NA	NA						
1g1	Penalties: total number of penalties (1 FY)	Data Quality	State			19	NA	NA	NA	Yes	20	ICIS	UTG640041 \$7,667 AO NOT ADDED IN COUNT	Minor Issue	
1g1	Penalties: total number of penalties (1 FY)	Data Quality	EPA			0	NA	NA	NA						
1g2	Penalties: total penalties (1 FY)	Data Quality	State			\$168,324	NA	NA	NA	Yes	\$175,991	ICIS	UTG640041 \$7,667 AO NOT ADDED IN COUNT. SEPs account for \$67,861.33	Minor Issue	
1g2	Penalties: total penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA						
1g3	Penalties: total collected pursuant to civil judicial actions (3 FY)	Data Quality	State			\$0	NA	NA	NA					Appears Acceptable	
1g3	Penalties: total collected pursuant to civil judicial actions (3 FY)	Data Quality	EPA			\$0	NA	NA	NA						

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1g4	Penalties: total collected pursuant to administrative actions (3 FY)	Informational Only	State			\$485,159	NA	NA	NA	Yes	\$492,826.00	ICIS	UTG640041 \$7,667 AO NOT ADDED IN COUNT. SEPs account for 18,4994.33.	Minor Issue	
1g4	Penalties: total collected pursuant to administrative actions (3 FY)	Informational Only	EPA			\$0	NA	NA	NA						
1g5	No activity indicator - total number of penalties (1 FY)	Data Quality	State			\$168,324	NA	NA	NA	Yes	\$175,991	ICIS	UTG640041 \$7,667 AO NOT ADDED IN COUNT. SEPs account for \$67,861.33.	Minor Issue	
1g5	No activity indicator - total number of penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA						
2. Data accuracy. degree to which the minimum data requirements are accurate.															
2a	Actions linked to violations: major facilities (1 FY)	Data Quality	State	>=; 80%		100.0%	5	5	0	No				Appears Acceptable	
2a	Actions linked to violations: major facilities (1 FY)	Data Quality	EPA	>=; 80%		0 / 0	0	0	0						

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
3. Timeliness of data entry. degree to which the minimum data requirements are complete.															
3a	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.													
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5a	Inspection coverage: NPDES majors (1 FY)	Goal	State	100%	63.70%	67.90%	19	28	9	Yes		ICIS	COUNT OF RIs & CEI at Majors. For Major Inspections Document provided for explanation by State. Major Inspections. PPA allows us not to inspect all Majors. We met the requirements of the PPA. Therefore we did 100% of Major Inspections required by the PPA.	Appears Acceptable	Since RI inspections at majors are not counted towards the inspection coverage; the count should be 17 CEI inspections conducted at 36 facilities (47% inspection rate); however, the FY09 inspection plan stated that UT would conduct 16 CEI inspections and that commitment was met.

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5a	Inspection coverage: NPDES majors (1 FY)	Goal	EPA	100%	5.8%	0.0%	0	28	28						
5a	Inspection coverage: NPDES majors (1 FY)	Goal	Combined	100%	66.40%	67.90%	19	28	9						
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	State			24.1%	14	58	44	Yes	Non-Major Facilities 38 Recon & 21 CEIs=59 Inspections. 59 divided by 89 = 66%	ICIS	Document provided for explanation by State.	Appears Acceptable	
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	EPA			0.0%	0	58	58						

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5b1	Inspection coverage: NPDES non-major individual permits (1 FY)	Goal	Combined												
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	State			2.20%	4	180	176	Yes	COUNT OF ALL ALLOWED GENERAL PERMITS 107.	Used all General Permits Except for CAFO, SW & SSOs. Utah Counted 107 Non-Major General Permits. State Correction is 11 inspections for 10%	Used all General Permits Except for CAFO, SW & SSOs. Document provided for explanation by State.	Inconclusive	The documentation provided by UT does not show inspection coverage (rather it shows that there are 107 facilities with non-major general permits) so EPA is unable to verify that the inspection coverage numbers in the State correction are correct.

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	EPA			0.0%	0	180	180						
5b2	Inspection coverage: NPDES non-major general permits (1 FY)	Goal	Combined			2.20%	4	180	176						
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	State			7.40%	82	1,105	1,023	Yes	197 Inspections	ICIS	Includes, Unpermitted, CAFOs, SSO, SWC for State, SWC for Municipal & Industrial SW. 54 non-construction storm water, 40 Storm Water Construction by Municipals, 73 Storm Water Construction by State, 4 Construction De-Watering, 3 SSOs, 23 CAFO= 197. 1215 General permits. 1215 into 197=16% Inspected.	Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	EPA			0.2%	2	1,105	1,023						
5c	Inspection coverage: NPDES other (not 5a or 5b) (1 FY)	Informational Only	Combined			7.6%	84	1,105	1,021						
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.															
7a1	Single-event violations at majors (1 FY)	Reviewer Indicator	Combined			10	NA	NA	NA	No				Appears Acceptable	
7a2	Single-event violations at non-majors (1 FY)	Informational Only	Combined			34	NA	NA	NA	Yes	59	ICIS	Document provided for explanation by State.	Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.															
7b	Facilities with unresolved compliance schedule violations (at end of FY)	Data Quality	Combined		31.00%	0.0%	0	17	17	No					Appears Acceptable
7c	Facilities with unresolved permit schedule violations (at end of FY)	Data Quality	Combined		27.40%	0.0%	0	56	56	No					Appears Acceptable
7d	Percentage major facilities with DMR violations (1 FY)	Data Quality	Combined		53.20%	52.80%	19	36	17	Yes	56%, 20	ICIS	See Major Violations Report attached	Potential Concern	UT's percentage for major facilities with DMR violations is slightly higher (56%) than the national average (53%). However, UT's SNC rate (3%) is below the national SNC rate (5.6%).
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8a1	Major facilities in SNC (1 FY)	Review Indicator	Combined			2	NA	NA	NA		1	ICIS	Only one facility in SNC		Appears Acceptable

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, CWA Data for Utah (Review Period Ending: FY09)															
Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8a2	SNC rate: percent majors in SNC (1 FY)	Review Indicator	Combined		23.60%	5.60%	2	36	34	Yes	1 facility in SNC that is Central Weber	Permit Writer and DMRs	ERROR DUE TO CONDITIONAL MONITORING AT SUFCO. The reporting of the effluent violation corrected. Central Weber does have an Enforcement in Place but final order not occurred yet. 3% in non-compliance.	Appears Acceptable	
10. Timely and appropriate action. degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.															
10a	Major facilities without timely action (1 FY)	Goal	Combined	< 2%	18.60%	5.60%	2	36	34	Yes	0	Permit Writer and DMRs	ERROR DUE TO CONDITIONAL MONITORING AT SUFCO. The reporting of the effluent violation corrected. Central Weber does have an Enforcement in Place but final order not occurred yet.	Appears Acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1a1	Number of operating TSDFs in RCRAInfo	Data Quality	State			14	NA	NA	NA	no	N/A	N/A			
1a2	Number of active LQGs in RCRAInfo	Data Quality	State			104	NA	NA	NA	yes	96	RCRAInfo pull of 09/04/08	As per agreement with Region 8 for required LGQ inspections for FY09	minor issue	Different pull date for data
1a3	Number of active SQGs in RCRAInfo	Data Quality	State			613	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1a4	Number of all other active sites in RCRAInfo	Data Quality	State			1,100	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1a5	Number of LQGs per latest official biennial report	Data Quality	State			91	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1b1	Compliance monitoring: number of inspections (1 FY)	Data Quality	State			92	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1b1	Compliance monitoring: number of inspections (1 FY)	Data Quality	EPA			23	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1b2	Compliance monitoring: sites inspected (1 FY)	Data Quality	State			90	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1b2	Compliance monitoring: sites inspected (1 FY)	Data Quality	EPA			21	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1c1	Number of sites with violations determined at any time (1 FY)	Data Quality	State			20	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1c1	Number of sites with violations determined at any time (1 FY)	Data Quality	EPA			12	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1c2	Number of sites with violations determined during the FY	Data Quality	State			13	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1c2	Number of sites with violations determined during the FY	Data Quality	EPA			3	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1d1	Informal actions: number of sites (1 FY)	Data Quality	State			13	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1d1	Informal actions: number of sites (1 FY)	Data Quality	EPA			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1d2	Informal actions: number of actions (1 FY)	Data Quality	State			13	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1d2	Informal actions: number of actions (1 FY)	Data Quality	EPA			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1e1	SNC: number of sites with new SNC (1 FY)	Data Quality	State			2	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1e1	SNC: number of sites with new SNC (1 FY)	Data Quality	EPA			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1e2	SNC: Number of sites in SNC (1 FY)	Data Quality	State			5	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1e2	SNC: Number of sites in SNC (1 FY)	Data Quality	EPA			1	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1f1	Formal action: number of sites (1 FY)	Data Quality	State			8	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1f1	Formal action: number of sites (1 FY)	Data Quality	EPA			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1f2	Formal action: number taken (1 FY)	Data Quality	State			10	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1f2	Formal action: number taken (1 FY)	Data Quality	EPA			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
1. Data completeness. degree to which the minimum data requirements are complete.															
1g	Total amount of final penalties (1 FY)	Data Quality	State			\$582,057	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
1g	Total amount of final penalties (1 FY)	Data Quality	EPA			\$0	NA	NA	NA						
2. Data accuracy. degree to which the minimum data requirements are accurate.															
2a1	Number of sites SNC-determined on day of formal action (1 FY)	Data Quality	State			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
2a2	Number of sites SNC-determined within one week of formal action (1 FY)	Data Quality	State			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
2b	Number of sites in violation for greater than 240 days	Data Quality	State			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
2b	Number of sites in violation for greater than 240 days	Data Quality	EPA			9	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
3. Timeliness of data entry. degree to which the minimum data requirements are complete.															
3a	Percent SNCs entered & age; 60 days after designation (1 FY)	Review Indicator	State			0.0%	0	2	2	no	N/A	N/A	N/A	appears acceptable	
3a	Percent SNCs entered & age; 60 days after designation (1 FY)	Review Indicator	EPA			0 / 0	0	0	0	no	N/A	N/A	N/A	appears acceptable	
3b	Comparison of Frozen Data Set	Compare the production data results under Element 1 to the frozen data. Please see Plain Language Guide for details.													
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5a	Inspection coverage for operating TSDFs (2 FYs)	Goal	State	100%	85.70%	100.0%	14	14	0	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded national average
5a	Inspection coverage for operating TSDFs (2 FYs)	Goal	Combined	100%	90.80%	100.0%	14	14	0	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded national average
5b	Inspection coverage for LQGs (1 FY)	Goal	State	20%	24.60%	33%	30	91	61	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded NPM 20 percent goal and national average
5b	Inspection coverage for LQGs (1 FY)	Goal	Combined	20%	26.70%	36.30%	33	91	58	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded NPM 20 percent goal and national average

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5c	Inspection coverage for LQGs (5 FYs)	Goal	State	100%	68.50%	85.7%	78	91	13	no	N/A	N/A	N/A	minor issue	The vast majority of the 13 facilities are no longer LQGs
5c	Inspection coverage for LQGs (5 FYs)	Goal	Combined	100%	73.80%	87.9%	80	91	11	no	N/A	N/A	N/A	minor issue	The vast majority of the 11 facilities are no longer LQGs
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	State			6.90%	42	613	571	no	N/A	N/A	N/A	potential concern	evaluate concern from previous SRF regarding CEI inspection of SQGs
5d	Inspection coverage for active SQGs (5 FYs)	Informational Only	Combined			7.8%	48	613	565	no	N/A	N/A	N/A	potential concern	evaluate concern from previous SRF regarding CEI inspection of SQGs
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	State			55	NA	NA	NA	no	N/A	N/A	N/A	potential concern	evaluate concern from previous SRF review regarding CEI inspections of CESQGs

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
5. Inspection coverage. degree to which state completed the universe of planned inspections/compliance evaluations.															
5e1	Inspections at active CESQGs (5 FYs)	Informational Only	Combined			58	NA	NA	NA	no	N/A	N/A	N/A	potential concern	evaluate concern from previous SRF review regarding CEI inspections of CESGGs
5e2	Inspections at active transporters (5 FYs)	Informational Only	State			67	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
5e2	Inspections at active transporters (5 FYs)	Informational Only	Combined			68	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
5e3	Inspections at non-notifiers (5 FYs)	Informational Only	State			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
5e3	Inspections at non-notifiers (5 FYs)	Informational Only	Combined			0	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
5e4	Inspections at active sites other than those listed in 5a-d and 5e1-5e3 (5 FYs)	Informational Only	State			23	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
5e4	Inspections at active sites other than those listed in 5a-d and 5e1-5e3 (5 FYs)	Informational Only	Combined			24	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
7. Identification of alleged violations. degree to which compliance determinations are accurately made and promptly reported in the national database based upon compliance monitoring report observations and other compliance monitoring information.															
7c	Violation identification rate at sites with inspections (1 FY)	Review Indicator	State			14.40 %	13	90	77	no	N/A	N/A	N/A	appears acceptable	
7c	Violation identification rate at sites with inspections (1 FY)	Review Indicator	EPA			14.3%	3	21	18	no	N/A	N/A	N/A	appears acceptable	
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8a	SNC identification rate at sites with inspections (1 FY)	Review Indicator	State	1/2 National Avg	3.10%	2.20%	2	90	88	no	N/A	N/A	N/A	minor issue	SNC identification rate s below national average but above national goal
8a	SNC identification rate at sites with evaluations (1 FY)	Review Indicator	Combined	1/2 National Avg	3.30%	1.9%	2	104	102	no	N/A	N/A	N/A	minor issue	SNC identification rate s below national average but above national goal
8b	Percent of SNC determinations made within 150 days (1 FY)	Goal	State	100%	75.60%	100.0 %	2	2	0	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded national average
8b	Percent of SNC determinations made within 150 days (1 FY)	Goal	EPA	100%	64.20%	0 / 0	0	0	0	no	N/A	N/A	N/A	inconclusive	

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
8. Identification of SNC and HPV. degree to which the state accurately identifies significant noncompliance & high priority violations and enters information into the national system in a timely manner.															
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	State	1/2 National Avg	61.40%	40%	4	10	6	no	N/A	N/A	N/A	minor issue	Formal action rate of prior SNC listing is below national average but above national goal
8c	Percent of formal actions taken that received a prior SNC listing (1 FY)	Review Indicator	EPA	1/2 National Avg	71.60%	0 / 0	0	0	0	no	N/A	N/A	N/A	minor issue	Formal action rate of prior SNC listing is below national average but above national goal
10. Timely and appropriate action. degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.															
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	State	80%	39%	0.0%	0	2	2	no	N/A	N/A	N/A	potential concern	File review warranted. National goal is that 80 percent of SNCs receive enforcement within 360 days
10a	Percent of SNCs with formal action/referral taken within 360 days (1 FY)	Review Indicator	Combined	80%	35.60%	0.0%	0	2	2	no	N/A	N/A	N/A	potential concern	File review warranted. National goal is that 80 percent of SNCs receive enforcement within 360 days

APPENDIX E: PDA WORKSHEET (with State and EPA Comments)

OTIS State Review Framework Results, RCRA Data for Utah (Review Period Ending: FY09)

Metric	Metric Description	Metric Type	Agency	National Goal	National Average	Utah Metric	Count	Universe	Not Counted	State Discrepancy (Yes/No)	State Correction	State Data Source	Discrepancy Explanation	Evaluation	Initial Findings
10. Timely and appropriate action. degree to which a state takes timely and appropriate enforcement actions in accordance with policy relating to specific media.															
10b	No activity indicator - number of formal actions (1 FY)	Review Indicator	State			10	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
12. Final penalty assessment and collection. degree to which differences between initial and final penalty are documented in the file along with a demonstration in the file that the final penalty was collected.															
12a	No activity indicator - penalties (1 FY)	Review Indicator	State			\$582,057	NA	NA	NA	no	N/A	N/A	N/A	appears acceptable	
12b	Percent of final formal actions with penalty (1 FY)	Review Indicator	State	1/2 National Avg	64.60%	100.0%	6	6	0	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded national average and national goal.
12b	Percent of final formal actions with penalty (1 FY)	Review Indicator	Combined	1/2 National Avg	64.90%	100.0%	6	6	0	no	N/A	N/A	N/A	appears acceptable	UDEQ exceeded national average and national goal.

APPENDIX F: FILE SELECTION

Files to be reviewed are selected according to a standard protocol (available to EPA and state users here: http://www.epa-otis.gov/srf/docs/fileselectionprotocol_10.pdf) and using a web-based file selection tool (available to EPA and state users here: http://www.epa-otis.gov/cgi-bin/test/srf/srf_fileselection.cgi). The protocol and tool are designed to provide consistency and transparency in the process. Based on the description of the file selection process in section A, states should be able to recreate the results in the table in section B.

A File Selection Process

CAA File Selection Process

According to the file selection tool, activities occurred during FY09 at 396 facilities. Based on this and the file selection protocol, 27 files were selected for review. These include a representative number of major, synthetic minor, and other facilities both with and without violations. No supplemental files were needed.

RCRA File Selection Process

According to the file selection tool, activities occurred during FY09 at 100 facilities. Based on this and the file selection protocol, 18 files were selected for review. These include a representative number of TSD, large quantity generator, small quantity generator, and conditionally exempt small quantity generator facilities both with and without violations. No supplemental files were needed.

CWA File Selection Process

According to the file selection tool with manual additional of enforcement actions at minor facilities that were not reflected in the database, activities occurred during FY09 at 253 facilities. Based on this and the file selection protocol, 26 files were selected for review. These include a representative number of major, minor, and general permitted facilities both with and without violations. No supplemental files were needed.

B. File Selection Table

CAA File Selection

f_name	Program ID	f_street	f_city	f_state	f_zip	F C E	P C E	Violation	Stack Test Failure	Title V Deviat ion	H P V	Informal Action	Formal Action	Penalty	Universe	Select
CHEVRON MARKETING	4903500240	2350 N. 1100 W.	NORTH SALT LAKE	UT	84054	0	0	0	0	0	0	0	1	2160	SM	accepted_ representa tive
CHEVRON USA	4901100003	2351 NORTH 1100 WEST	SALT LAKE CITY	UT	84116	2	3	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
DENISON MINES/INTER NATIONAL URANIUM	4903700017	HIGHWAY 163 WHITE MESA MILL	BLANDIN G	UT	84511	1	0	0	0	0	0	0	1	695	FRMI	accepted_ representa tive
EPHRAIM CITY POWER	4903900015	45 WEST 50 SOUTH	EPHRAIM	UT	84627	1	0	0	0	0	0	0	0	0	SM80	accepted_ representa tive
FLYING J INC./BIG WEST OIL	4901100008	333 WEST CENTER STREET	NORTH SALT LAKE	UT	84054	1	4	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
GREAT SALT LAKE MINERAL/IM C KALIUM OGDEN	4905700001	765 N. 10500 W & WESTERN SHORE	LITTLE MOUNTAI N/INCLUD ES PUMP	UT	84402	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
GUNLOCK ROCK	4905300046	550 SOUTH MAIN	1/2 MI. S. OF GUNLOC K	UT	84733	2	0	3	0	0	0	0	3	1,149	FRMI	accepted_ representa tive
HARPER CONTRACTI NG - PIT #16	4903500395	1.25 MILES UP PARLEYS CANYON	EXIT 131/1.25 MI.N. OF SLC	UT	84123	1	1	2	0	0	0	0	2	39,800	FRMI	accepted_ representa tive
HEBER LIGHT AND POWER COMPANY	4905100006	735 WEST 300 SOUTH	HEBER CITY	UT	84032	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
HILL AIR FORCE BASE	4901100007	EME HILL AIR FORCE BASE	CLEARFI ELD	UT	84056	3	1	0	0	0	1	0	1	150,200	MAJR	accepted_ representa tive
HOLLY REFINING & MARKETING/ PHILLIPS 66	4901100013	393 SOUTH 800 WEST	WOODS CROSS	UT	84087	1	3	0	0	0	0	0	1	2,160	MAJR	accepted_ representa tive
LOGAN CITY LANDFILL	4900500103	1400 WEST 200 NORTH	LOGAN	UT	84321	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive

f_name	Program ID	f_street	f_city	f_state	f_zip	F C E	P C E	Violation	Stack Test Failure	Title V Deviat ion	H P V	Informal Action	Formal Action	Penalty	Universe	Select
PACIFICORP HUNTINGTO N	4901501001	HUNTINGTON CANYON SR- 31	HUNTING TON	UT	84528	1	0	4	0	2	0	0	0	0	MAJR	accepted_ representa tive
PARISH CHEMICAL	4904900198	145 NORTH GENEVA ROAD	OREM	UT	84057	1	0	0	0	0	0	0	0	0	OMIN	accepted_ representa tive
POWDER RIVER INCORPOR ATED	4904900194	388 EAST 900 SOUTH	PROVO	UT	84605	1	0	0	0	2	0	0	1	0	MAJR	accepted_ representa tive
PROCTOR & GAMBLE PAPER PRODUCTS	4900300053	WAKEGAN ROAD & IOWA STRING RD.	CORINNE	UT	84302	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
QUALITY EXCAVATION , INC./G.O. BUNDY	4905300043	1630 EAST 6000 SOUTH	ST. GEORGE	UT	84770	1	0	0	0	0	0	0	1	6240	FRMI	accepted_ representa tive
QUESTAR PIPELINE CO.	4900900001	KASTLER STATION S16,T3N, R24E	CLAY BASIN	UT	84111	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
SALT LAKE VALLEY LANDFILL	4903500536	6030 WEST 1300 SOUTH	SALT LAKE CITY	UT	84104	1	0	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
SILVER EAGLE/INLA ND REFINING/CR YSEN	4901100019	2355 S. 1100 W.	WOODS CROSS	UT	84087	1	3	0	0	0	0	0	0	0	MAJR	accepted_ representa tive
STAKER & PARSON/FO RMER VALLEY ASPHALT	4900700050	3517 SOUTH HIGHWAY 6	WELLING TON	UT	84542	1	0	0	0	0	0	0	0	0	SM	accepted_ representa tive
TM CRUSHING	4904900251	LAKE MOUNTAIN 4000 S 300 W	SARATO GA SPRINGS	UT		0	1	0	0	0	0	0	1	449	FRMI	accepted_ representa tive
TRU CRUSHING/C USTOM CRUSHING	4904300017	FORMERLY C & R SALES/REES'S	FRANCIS PIT	UT	84060	0	0	2	0	0	0	0	1	359	SM80	accepted_ representa tive
U.S. MAGNESIUM L.L.C/MAGCO RP	4904500030	NO STREET ADDRESS	ROWLEY JUNCTIO N	UT	84074	1	0	3	0	2	1	0	0	0	MAJR	accepted_ representa tive
US SYNTHETIC	4904900247	1260 SOUTH 1600 WEST	OREM	UT	84058	0	1	4	0	0	0	0	0	0	OTHR	accepted_ representa tive

f_name	Program ID	f_street	f_city	f_state	f_zip	F C E	P C E	Violation	Stack Test Failure	Title V Deviat ion	H P V	Informal Action	Formal Action	Penalty	Universe	Select
VANROK LLC	4904900248	1127 PROVO CANYON ROAD	PROVO	UT	84606	0	0	1	0	0	0	0	1	359	FRMI	accepted_ representa tive
WHITING OIL AND GAS/MERIT/ WARREN ENERGY	4904300004	WASATCH NATIONAL FOREST RD. 77	BRIDGER LAKE	UT	84046	1	0	0	0	2	1	0	0	0	MAJR	accepted_ representa tive

CWA File Selection

FINAL FILE SELECTION LIST FOR UPDES SRF FILE REVIEW - MARCH 22, 2010															
	Facility Name	Permit Number	Address	City	Permit Component	Inspections	Violations	SEVs	SNC	Informal Enf.	Formal Enf.	Penalty	Major / Minor	Reason for Selection	Method for Selection
1	WEST RIDGE RESOURCES INC	UT0025640	WEST RIDGE MINE	PRICE	?	7	22	2	4	0	1	25077	Minor	Formal Enf.	Random (every other)
2	PROVO CITY CORPORATION	UT0021717	1685 S 3500 WEST	PROVO	BIO POT PRE SWI	3	5	1	0	0	1	1000	Major	Formal Enf.	Random (every other)
3	CENTRAL VALLEY WATER RECLAM	UT0024392	800 WEST CENTRAL VALLEY ROAD	SOUTH SLC	PRE POT BIO SWI	2	0	0	0	0	1	7571	Major	Formal Enf.	Random (every other)
4	HYRUM CITY WWTP	UT0023205	83 WEST MAIN	HYRUM	BIO POT PRE SWI	2	1	0	0	0	1	4693	Major	Formal Enf.	Random (every other)
5	FLYING J INCORPORATED	UT0025658	WILLARD BAY TRAVEL PLAZA	WILLARD	UNAUTH. DISCHARGE	1	0	0	0	0	1	12776	Minor	Formal Enf.	Random (every other)
6	OGDEN ENTERTAINMENT CENTER	UTR104474	OGDEN CITY NDA	OGDEN	SWC	0	0	0	0	0	1	7245	Minor	Formal Enf.	Random (every other)
7	PARLEYS WATER TREATMENT PLANT	UTG640041	1530 SOUTH WEST TEMPLE	SALT LAKE CITY	?	0	0	0	0	0	1	0	Minor	Formal Enf.	Random (every other)
8	SUNSET HAVEN	UTR107560	530 W 400 N	SARATOGA SPRINGS	SWC	0	0	0	0	0	1	17024	Minor	Formal Enf.	Random (every other)
9	GARY'S MEAT	UTU000911	515 EAST PAYSON CANYON ROAD	PAYSON	UNPERMITTED - INDUSTRIAL	0	?	?	?	0	1	2914	Minor	Formal Enf.	Random (every other)

	Facility Name	Permit Number	Address	City	Permit Component	Inspections	Violations	SEVs	SNC	Informal Enf.	Formal Enf.	Penalty	Major / Minor	Reason for Selection	Method for Selection
10	ROCKY MTN PIPELINE	UTU000913	1575 HIGHWAY 150 SOUTH, SUITE E	EVANSTON, WY	UNPERMITTED - SWC	?	?	?	?	0	1	21,750	Minor	Formal Enf.	Random (every other)
11	BEAR RIVER - TOWN OF	UT0020311	NORTH WEST OF OGDEN	BEAR RIVER	POT	1	27	0	1	1	0	0	Minor	Informal Enf.	Random (every other)
12	B & H FARMS	UTG080006	530 W 615 N	MANTI	CAF	1	0	0	0	1	0	0	Minor	Informal Enf.	Random (every other)
13	AUTO MOTO	UTU000988	1212 NORTH AIRPORT ROAD	CEDAR CITY	UNPERMITTED - SWI	0	?	?	?	1	0	0	Minor	Informal Enf.	Random (every other)
14	LOGAN CITY CORPORATION	UT0021920	600 NORTH 1400 WEST	LOGAN	POT PRE SWI BIO	2	13	2	0	0	0	0	Major	Inspection	To get representative types of inspections
15	SPANISH FORK CITY CORPORATION	UT0020109	1800 NORTH 200 EAST	SPANISH FORK	BIO POT PRE SWI	2	2	0	0	0	0	0	Major	Inspection	Random (every 9th)
16	ANALEX RESOURCES, INC., CENTENNIAL MINES	UT0025674	DEADMAN CANYON	PRICE	SWI	2	0	0	0	0	1	9,550	Minor	Inspection	Random (every 9th)
17	FRESENIUS MEDICAL CARE	UT0023752	475 W 13TH STREET	OGDEN	?	1	4	0	1	0	0	0	Minor	Inspection	Random (every 9th)
18	CANYON FUEL CO., LLC - SOLDIER	UT0023680	9 MILE CANYON ROAD	CARBON	SWI	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)
19	COWLEY FARM AND FEEDLOT	UTG080030	546 N MAIN	VENICE	CAF	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)
20	FEDEX GROUND	UTR109420	1600 NORTH GENEVA ROAD	VINEYARD	SWC	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)

	Facility Name	Permit Number	Address	City	Permit Component	Inspections	Violations	SEVs	SNC	Informal Enf.	Formal Enf.	Penalty	Major / Minor	Reason for Selection	Method for Selection
21	HENEFER	UT0020192	P O BOX 112	HENEFER	POT	1	7	1	0	0	0	0	Minor	Inspection	Random (every 9th)
22	KAYSVILLE CITY	UTR090001	23 EAST CENTER STREET	KAYSVILLE	SWS	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)
23	MORTON SALT DIV OF MORTON INTL	UT0000524	P.O. BOX 506	GRANTSVILLE	SWI	1	1	1	0	0	0	0	Minor	Inspection	To review Oversight Inspection
24	PROGRESSIVE CONTRACTING, INC.	UTR302802	1525 AND 1575 N DIXIE DRIVE	SAINT GEORGE	SWC	1	1	1	0	0	0	0	Minor	Inspection	Random (every 9th)
25	SR 52	UTR107404	800 NORTH 400 WEST TO 1000 WEST	OREM	SWC	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)
26	RIGTRUP POULTRY FARM INC	UTG080032	17122 S TUNNEL RD	ELBERTA	CAF	1	0	0	0	0	0	0	Minor	Inspection	To get representative types of inspections
27	WESTERN ENERGY OPERATING, LLC- USA PAN AMERICAN FACILITY	UT0000124	ASHLEY VALLEY OIL FIELD	VERNAL	?	1	0	0	0	0	0	0	Minor	Inspection	Random (every 9th)

RCRA File Selection

f_name	Program ID	f_street	f_city	f_state	f_zip	Evaluation	Violation	SNC	Informal Action	Formal Action	Penalty	Universe	Select
ANACONDA MINERALS CO (CARR FORK OPER)	UTD093120921	5 MILES SE TOOELE UTAH	TOOELE	UT	84074	1	0	0	0	0	0	OTH	accepted_representative
ANDERSON SERVICE & SALES INC.	UTD988078143	1221 NORTH MAIN	CEDAR CITY	UT	84720	1	0	0	0	0	0	CES	accepted_representative
ATK LAUNCH SYSTEMS INC - BACCHUS	UTD001705029	5000 SOUTH HIGHWAY 111	MAGNA	UT	84044	0	0	0	0	1	0	TSD(LDF)	accepted_representative
BOB GARAGE AND DIESEL	UTR000010264	1676 PROGRESS WAY	TOOELE	UT	84074	1	0	0	0	0	0	CES	accepted_representative
CABINETRY BY KARMAN	UTD003818770	6000 SOUTH STRATLER STREET	MURRAY	UT	84107	1	1	0	1	0	0	LQG	accepted_representative
CCAM ENTERPRISES, LLC	UTR000010074	2455 SOUTH 3600 WEST	WEST VALLEY CITY	UT	84119	1	1	0	1	0	0	SQG	accepted_representative
CHEVRON SALT LAKE REFINERY	UTD092029768	2351 NORTH	SALT LAKE	UT	84116	1	0	0	0	0	0	TSD(LDF)	accepted_representative
CLASSIC CABINETS INC.	UTR000006643	3045 WEST DIRECTORS ROW	SALT LAKE CITY	UT	84104	1	0	0	0	0	0	OTH	accepted_representative
CLEAN HARBORS GRASSY MOUNTAIN, LLC.	UTD991301748	3 MILES EAST, 7 MILES NORTH	ARAGONITE	UT	84029	1	4	0	1	0	0	TSD(LDF)	accepted_representative
EMERALD SERVICES, INC.	UTR000007831	500 SOUTH 650 WEST	SALT LAKE CITY	UT	84104	1	0	0	0	0	0	OTH	accepted_representative
EXCEL GRAPHICS INC.	UT0000102640	1775 SOUTH 350 EAST	PROVO	UT	84605	1	0	0	0	0	0	SQG	accepted_representative

f_name	Program ID	f_street	f_city	f_state	f_zip	Evaluation	Violation	SNC	Informal Action	Formal Action	Penalty	Universe	Select
HD SUPPLY CONSTRUCTION SUPPLY, LTD (WC0050)	UTR000008177	2503 SOUTH 300 WEST	SALT LAKE CITY	UT	84115	1	0	0	0	0	0	CES	accepted_representative
JC PENNEY COMPANY	UTD146477385	310 SOUTH MAIN STREET	SALT LAKE CITY	UT	84101	1	0	0	0	0	0	CES	accepted_representative
JORDAN VALLEY OPS - PACIFICORP	UTR000001842	12840 SOUTH PONY EXPRESS RD	DRAPER	UT	84020	1	0	0	0	0	0	CES	accepted_representative
LITTLE MOUNTAIN	UT4570090064	12000 W 12TH STREET	OGDEN	UT	84404	1	0	0	0	0	0	LQG	accepted_representative
MANHEIM UTAH	UTD988071064	1650 WEST 500 SOUTH	WOODS CROSS	UT	84087	0	0	0	0	2	9360	SQG	accepted_representative
NORTHEAST CASUALTY REAL PROPERTY, LLC	UTD982595795	EXIT 41 OFF I-80	GRANTS VILLE	UT	84029	0	5	0	1	0	0	TSD(TSF)	accepted_representative
NUSET INDUSTRIES, ORRICO, 02 BLUE, LLC	UTD982589459	977 SOUTH 700 WEST	SALT LAKE CITY	UT	84114	0	2	0	1	0	0	OTH	accepted_representative
OGDEN CHROME PLATING	UTR000006262	124 18TH STREET	OGDEN	UT	84401	0	0	0	0	2	7000	SQG	accepted_representative
PACIFIC STATES CAST IRON PIPE CO.	UTD988067351	2550 SOUTH INDUSTRIAL PARKWAY	PROVO	UT	84606	1	0	0	0	0	0	LQG	accepted_representative
PACIFIC WEST LLC.	UTR000010165	5800 NORTH HIGHWAY 36	ERDA	UT	84074	0	0	0	0	1	9896	TRA	accepted_representative

f_name	Program ID	f_street	f_city	f_state	f_zip	Evaluation	Violation	SNC	Informal Action	Formal Action	Penalty	Universe	Select
QUESTAR PIPELINE CO PRICE OPERATIONS CENTER	UTD988069001	322 WEST 1100 NORTH	PRICE	UT	84501	1	0	0	0	0	0	LQG	accepted _representative
SAFETY -KLEEN SYSTEMS, INC.	UTR000006502	300 SOUTH 2650 WEST	SALT LAKE CITY	UT	84104	1	0	0	0	0	0	TRA	accepted _representative
SAFETY-KLEEN SYSTEMS, INC.	UTD980957088	1066 S. PIONEER ROAD	SALT LAKE CITY	UT	84104	1	4	0	1	0	0	TSD(TSF)	accepted _representative
THERMO FLUIDS INC.	UTR000008458	3545 WEST 500 SOUTH	SALT LAKE CITY	UT	84101	0	0	0	0	1	30124	OTH	accepted _representative
TRINITY HIGHWAY PRODUCTS LLC	UTD041075896	950 WEST 400 SOUTH	CENTERVILLE	UT	84014	1	0	0	0	0	0	TSD(LDF)	accepted _representative
UTAH MEDICAL PRODUCTS INC	UTD094651270	7043 SOUTH 300 WEST	MIDVALE	UT	84047	0	0	0	1	0	0	SQG	accepted _representative
WATSON LABS-UTAH	UTD982648545	417 WAKARUSA WAY	SALT LAKE CITY	UT	84108	1	0	0	0	0	0	LQG	accepted _representative
YOUNG ELECTRIC SIGN COMPANY	UTD988075180	2767 INDUSTRIAL DRIVE	OGDEN	UT	84401	1	0	0	0	0	0	CES	accepted _representative

APPENDIX G: FILE REVIEW ANALYSIS

This section presents the initial observations of the Region regarding program performance against file metrics. Initial Findings are developed by the region at the conclusion of the File Review process. The Initial Finding is a statement of fact about the observed performance, and should indicate whether the performance indicates a practice to be highlighted or a potential issue, along with some explanation about the nature of good practice or the potential issue. The File Review Metrics Analysis Form in the report only includes metrics where potential concerns are identified, or potential areas of exemplary performance.

Initial Findings indicate the observed results. Initial Findings are preliminary observations and are used as a basis for further investigation. Findings are developed only after evaluating them against the PDA results where appropriate, and dialogue with the state have occurred. Through this process, Initial Findings may be confirmed, modified, or determined not to be supported. Findings are presented in Section IV of this report.

The quantitative metrics developed from the file reviews are initial indicators of performance based on available information and are used by the reviewers to identify areas for further investigation. Because of the limited sample size, statistical comparisons among programs or across states cannot be made.

Clean Air Act Program

Name of State: Utah			
CAA Metric #	CAA File Review Metric Description	Evaluation	Initial Findings
Metric 2c	% of files reviewed where MDR data are accurately reflected in AFS.	Appears Acceptable	
Metric 4a	<p>Confirm whether all commitments pursuant to a traditional CMS plan (FCE every 2 yrs at Title V majors; 3 yrs at mega-sites; 5 yrs at SM80s) or an alternative CMS plan were completed. Did the state/local agency complete all planned evaluations negotiated in a CMS plan? Yes or no? If a state/local agency implemented CMS by following a traditional CMS plan, details concerning evaluation coverage are to be discussed pursuant to the metrics under Element 5. If a state/local agency had negotiated and received approval for conducting its compliance monitoring program pursuant to an alternative plan, details concerning the alternative plan and the S/L agency's implementation (including evaluation coverage) are to be discussed under this Metric.</p>	Appears Acceptable	

CAA Metric #	CAA File Review Metric Description:	Evaluation	Initial Findings
Metric 4b	Delineate the air compliance and enforcement commitments for the FY under review. This should include commitments in PPAs, PPGs, grant agreements, MOAs, or other relevant agreements. The compliance and enforcement commitments should be delineated.	Appears Acceptable	
Metric 6a	# of files reviewed with FCEs.	Appears Acceptable	
Metric 6b	% of FCEs that meet the definition of an FCE per the CMS policy.	Appears Acceptable	
Metric 6c	% of CMRs or facility files reviewed that provide sufficient documentation to determine compliance at the facility.	Appears Acceptable	
Metric 7a	% of CMRs or facility files reviewed that led to accurate compliance determinations.	Appears Acceptable	
Metric 7b	% of non-HPVs reviewed where the compliance determination was timely reported to AFS.	Appears Acceptable	
Metric 8f	% of violations in files reviewed that were accurately determined to be HPV.	Appears Acceptable	
Metric 9a	# of formal enforcement responses reviewed.	Appears Acceptable	
Metric 9b	% of formal enforcement responses that include required corrective action (i.e., injunctive relief or other complying actions) that will return the facility to compliance in a specified time frame.	Appears Acceptable	
Metric 10b	% of formal enforcement responses for HPVs reviewed that are addressed in a timely manner (i.e., within 270 days).	Appears Acceptable	
Metric 10c	% of enforcement responses for HPVs appropriately addressed.	Appears Acceptable	
Metric 11a	% of reviewed penalty calculations that consider and include where appropriate gravity and economic benefit.	Minor Issue	1 out of 10 penalties reviewed did not accurately calculate economic benefit.
Metric 12c	% of penalties reviewed that document the difference and rationale between the initial and final assessed penalty.	Appears Acceptable	
Metric 12d	% of files that document collection of penalty.	Appears Acceptable	
Evaluation Criteria			
Minor Issues/Appears Acceptable -- No EPA recommendation required.			
Potential Concern -- Not a significant issue. Issues that the state may be able to correct without specific recommendation. May require additional analysis.			
Significant Issue -- File review shows a pattern that indicates a significant problem. Will require an EPA Recommendation.			

CWA Program

Name of State: Utah		Review Period: FY09	
CWA Metric #	CWA File Review Metric:	Metric Value	Initial Findings and Conclusions
Metric 2b	% of files reviewed where data is accurately reflected in the national data system.	83%	Potential Concern - DMRs for some facilities did not accurately reflect the limit data in the permits. This concern was identified in one major file reviewed, Spanish Fork, as well as 3 minor facilities, Canyon Fuel, Henefer and Westridge Resources. Utah should ensure that the DMRs and ICIS are properly coded for the correct permit limits.
Metric 4a	% of planned inspections completed. Summarize using the Inspection Commitment Summary Table in the CWA PLG.	See metric 4a worksheet below	Minor Issue - Utah met or exceeded inspection commitments in all areas with the exception of Phase I storm water construction. This area was missed by 4 inspections.
Metric 4b	Other Commitments. Delineate the commitments for the FY under review and describe what was accomplished. This should include commitments in PPAs, PPGs, grant agreements, MOAs, or other relevant agreements. The commitments should be broken out and identified.	See metric 4b worksheet below	Minor Issue - commitment not addressed is covered under Metrics 6b and 6c.
Metric 6a	# of inspection reports reviewed.		28 Inspection reports were reviewed in 26 facility files.
Metric 6b	% of inspection reports reviewed that are complete.	46%	Significant Issue - The majority of inspections reports that were determined to be incomplete were CAFO reports (5 out of 5 reviewed), Reconnaissance Inspections (RIs) (5 out of 5 reviewed) and storm water inspections to verify Notice of Termination (NOT) status (2 out of 2 reviewed). Utah should update its inspection and report procedures for these inspections to ensure that the inspections and reports are complete.
Metric 6c	% of inspection reports reviewed that provide sufficient documentation to lead to an accurate compliance determination.	50%	Significant Issue - One of the reports identified as incomplete did include sufficient information to lead to a compliance determination. Utah should update its inspection and report procedures for these inspections to ensure that the inspections and reports are complete.
Metric 6d	% of inspection reports reviewed that are timely.	75%	Minor Issue - The majority of inspection reports were completed in the required time frame.
Metric 7e	% of inspection reports or facility files reviewed that led to accurate compliance determinations.	96%	Minor Issue - EPA disagreed with the compliance determination on one inspection - the Provo pretreatment audit.
Metric 8b	% of single event violation(s) that are accurately identified as SNC or Non-SNC.	75%	Minor issue - one of three major facilities where single event violations were identified during inspections was not accurately identified as SNC (Provo pretreatment - failure to inspect and/or sample SIUs).
Metric 8c	% of single event violation(s) identified as SNC that are reported timely.	0%	Significant Issue - SNC was not identified for the Provo pretreatment violations.

CWA Metric #	CWA File Review Metric:	Metric Value	Initial Findings and Conclusions
Metric 9a	# of enforcement files reviewed		14
Metric 9b	% of enforcement responses that have returned or will return a source in SNC to compliance.	100%	Appears Acceptable - The one facility identified as in SNC (Central Valley) will be returned to compliance by the enforcement action.
Metric 9c	% of enforcement responses that have returned or will return a source with non-SNC violations to compliance.	78%	Minor Issue - Nine of the actions reviewed included injunctive relief. Of these nine actions, seven returned the facilities to compliance. The two that were considered not to return the facilities to compliance were warning letters issued to CAFOs (Gary's Meats and B&H Farms).
Metric 10b	% of enforcement responses reviewed that address SNC that are taken in a timely manner.	100%	Appears Acceptable - The enforcement action taken to address SNC was timely (Central Valley).
Metric 10c	% of enforcement responses reviewed that address SNC that are appropriate to the violations.	100%	Appears Acceptable - The enforcement action taken to address SNC was appropriate (Central Valley).
Metric 10d	% of enforcement responses reviewed that appropriately address non-SNC violations.	78%	Minor Issue - The two warning letters discussed above did not appropriately address the violations. Due to the severity of the violations identified during the inspections, Utah should have issued formal enforcement actions rather than warning letters to address the noncompliance.
Metric 10e	% enforcement responses for non-SNC violations where a response was taken in a timely manner.	82%	Appears Acceptable - Nine of the eleven actions taken to address non-SNC violations were taken in a timely manner.
Metric 11a	% of penalty calculations that consider and include where appropriate gravity and economic benefit.	100%	Appears Acceptable - While 100% of the penalty actions (seven) reviewed considered both gravity and economic benefit, EPA commented that some of the penalties should have been higher based on the facts of the case.
Metric 12a	% of penalties reviewed that document the difference and rationale between the initial and final assessed penalty.	86%	Appears Acceptable - Six of the seven penalty actions reviewed documented the difference between the original and final penalty amount. The Gary Meats file included three penalty justifications, but none matched the final penalty amount.
Metric 12b	% of enforcement actions with penalties that document collection of penalty.	100%	Appears Acceptable - Utah has an excellent system for tracking penalty collection.
Findings Criteria			
Minor Issues/Appears Acceptable -- No EPA recommendation required.			
Potential Concern -- Not a significant issue. Issues that the state may be able to correct without specific recommendation. May require additional analysis.			
Significant Issue -- File review shows a pattern that indicates a significant problem. Will require an EPA Recommendation.			

RCRA Program

Utah		October 1, 2008 to September 30, 2009	
RCRA Metric #	RCRA File Review Metric Description:	Metric Value	Initial Findings
Metric 2c	% of files reviewed where mandatory data are accurately reflected in the national data system.	94%	
Metric 4a	Planned inspections completed	100%	UDEQ Exceeded NPM goal of 20 percent for LQGs and TSD every two years
Metric 4b	Planned commitments completed	100%	
Metric 6a	# of inspection reports reviewed.	13	
Metric 6b	% of inspection reports reviewed that are complete and provide sufficient documentation to determine compliance at the facility.	100%	
Metric 6c	Inspections reports completed within a determined time frame.	100%	
Metric 7a	% of accurate compliance determinations based on inspection reports.	100%	
Metric 7b	% of violation determinations in the files reviewed that are reported timely to the national database (within 150 days).	100%	
Metric 8d	% of violations in files reviewed that were accurately determined to be SNC.	100%	
Metric 9a	# of enforcement responses reviewed.	11	
Metric 9b	% of enforcement responses that have returned or will return a source in SNC to compliance.	100%	
Metric 9c	% of enforcement responses that have returned or will return Secondary Violators (SV's) to compliance.	100%	
Metric 10c	% of enforcement responses reviewed that are taken in a timely manner.	91%	
Metric 10d	% of enforcement responses reviewed that are appropriate to the violations.	100%	
Metric 11a	% of reviewed penalty calculations that consider and include where appropriate gravity and economic benefit.	100%	
Metric 12a	% of penalties reviewed that document the difference and rationale between the initial and final assessed penalty.	100%	
Metric 12b	% of files that document collection of penalty.	100%	
Findings Criteria			
No or only minor issue. Finding or recommendation may not be required in the final report.			
Potential area of concern. State is expected to make corrections on their own. Finding may be required, but EPA recommendation may not be required.			
Significant issues. Finding(s) and EPA recommendation(s) required.			

APPENDIX H: CORRESPONDENCE



**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 8**

1595 Wynkoop Street
DENVER, CO 80202-1129
Phone 800-227-8917
<http://www.epa.gov/region08>

MAR - 3 2010

Ref: 8ENF-PJ

Amanda Smith, Executive Director
Utah Department of Environmental Quality
P.O. Box 144810-4810
Salt Lake City, UT 84114-4810

Re: FY2009 State Review Framework (SRF)
Review

Dear Ms. Smith:

Through this letter, the Environmental Protection Agency (EPA) Region 8 is initiating a review of the Utah Department of Environmental Quality (UDEQ) Resource Conservation and Recovery Act (RCRA) Subtitle C, Clean Water Act National Pollutant Discharge Elimination System (NPDES), and Clean Air Act Stationary Source Enforcement Programs. We will review inspection and enforcement activity from Federal Fiscal Year 2009.

In FY2007, EPA regions completed the first round of reviews using the State Review Framework (SRF) protocol. This work created a baseline of performance from which future oversight of state compliance and enforcement programs can be tracked and managed. In early FY2008, implementation of the first round of reviews was evaluated and a work group composed of EPA headquarters, regional managers and staff, Environmental Council of States (ECOS), state media associations and other state representatives revised the SRF elements, metrics, process and guidance.

The second round of the SRF is a continuation of a national effort that allows Region 8 to ensure that UDEQ meets agreed upon minimum performance levels in providing environmental and public health protection. The review will include:

- discussions between Region 8 and UDEQ program managers and staff,
- examination of data in EPA and (if applicable) UDEQ data systems, and
- review of selected UDEQ inspection and enforcement files and (if applicable) policies.

Region 8 and UDEQ have the option of agreeing to examine state programs that broaden the scope of traditional enforcement. This may include programs such as pollution prevention, compliance assistance, innovative approaches to achieving compliance, documenting and reporting outputs, outcomes and indicators, or supplemental environmental projects. We welcome UDEQ suggesting other compliance programs for inclusion.

We expect to complete the UDEQ review, including the final report, by September 30, 2010. Our intent is to assist UDEQ in achieving implementation of programs that meet federal standards and are based on the goals we have agreed to in UDEQ's Performance Partnership Agreement. Region 8 and UDEQ are partners in carrying out the review. If we find issues, we want to address them in the most constructive manner possible.

Region 8 has established a cross program team of managers and senior staff to implement the UDEQ review. Corbin Darling will be Region 8's primary contact for the review ((303) 312 - 6426, darling.corbin@epa.gov). Olive Hofstader will coordinate the Region's implementation of the review ((303) 312-6467, hofstader.olive@epa.gov). I am Region 8's senior manager with overall responsibility for the review. The program experts on the review team will be:

- Amy Clark, NPDES, (303) 312-7014 , clark.amy@epa.gov
- Carol Smith, CAA, (303) 312-7815 , smith.carol@epa.gov
- Linda Jacobson, RCRA, (303) 312-6503, jacobson.linda@epa.gov

On January 21, 2010, we held a kick-off meeting with UDEQ to go over the review expectations, procedures and schedule. Program-specific kick off meetings with your program managers and/or program SRF contacts are underway, and should be wrapped up soon.

The review protocol includes numerous program specific worksheets, metrics, and report templates that Region 8 and UDEQ will use to complete the review. We believe it will assist us in carrying out an efficient, focused review. All of these materials have been developed jointly by EPA regional and HQ staff and numerous state officials.

Enclosed with this letter are the preliminary data analysis (PDA) spreadsheets containing the official data sets that will be used in the review (one for each program). Please respond by March 12, 2010, with an indication that you agree with the data, or if there are discrepancies, please provide that information in the spreadsheet file and send it electronically to the applicable EPA review team member and Corbin Darling. If you do not respond by the date noted above, we will proceed with our preliminary data analysis and file selection under the assumption that the data is correct.

In January, PDA spreadsheets were shared with State program contacts containing data pulled from EPA's Online Tracking Information System (OTIS). The data in OTIS are refreshed monthly and the spreadsheets attached to this letter contain data pulled from OTIS after the February refresh occurred. Data that have changed between the January and February data pulls are highlighted in yellow in the attached spreadsheet.

EPA has designed the SRF Tracker as the repository for holding all SRF products including draft and final documents, letters, data sets, etc. It is also a management tool used to track the progress of a state review and to follow-up on the recommendations. Regions will enter and update all information for their states in the SRF Tracker. The Office of Enforcement and Compliance Assurance (OECA) will use the Tracker to monitor implementation of the review. States can view and comment on their information securely on the internet.

All information and materials used in this review may be subject to federal and/or state disclosure laws. EPA will release the information, as appropriate, in response to a request under the Freedom of Information Act that is properly submitted. Additionally, EPA recently made the decision to increase the transparency of Regional and State compliance and enforcement programs. Last year, EPA launched a State Review Framework public website (<http://www.epa.gov/compliance/state/srf/index.html>). This public website will not only contain State Review Framework reports from Round 1 and eventually Round 2 but will also contain CAA, CWA and RCRA data designed to improve public awareness of our programs.

If you have any questions regarding the SRF review, please contact me at (303) 312-6051 or have your staff contact Corbin Darling at (303) 312-6426.

Sincerely,


for Andrew M. Gaydosh
Assistant Regional Administrator
Office of Enforcement, Compliance and
Environmental Justice

Enclosure: Preliminary Data Analysis Spreadsheets

cc: Brad Johnson, UDEQ
Cheryl Heying, UDEQ
Dennis Downs, UDEQ
Walt Baker, UDEQ

cc: By e-mail
Carol Rushin, Acting Regional Administrator
Carol Campbell, Acting Deputy Regional Administrator