



**UNITED STATES ENVIRONMENTAL PROTECTION AGENCY**

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Mr. Scott Cardno  
Director  
Huntsville Division of Natural Resources and  
Environmental Management  
Air Pollution Control Program  
P.O. Box 308  
Huntsville, Alabama 35801-5830

Dear Mr. Cardno:

The Environmental Protection Agency Region 4 would like to thank you and your staff for participating in the Round 4 State Review Framework (SRF) evaluation of the Huntsville Division of Natural Resources and Environmental Management (HDNREM) compliance and enforcement program. Region 4 is very appreciative of the cooperation and assistance provided by HDNREM during the SRF evaluation, and the straightforward communication and collaboration displayed by your staff in working with us throughout the review process.

Please find enclosed the final Round 4 SRF report summarizing the evaluation of HDNREM's Clean Air Act Stationary Source program for federal fiscal year 2019. The report recognizes that HDNREM implements effective compliance and enforcement activities in many of the elements evaluated in the SRF, and it also identifies recommendations for improvement to strengthen performance in specific areas.

Please pass along our thanks to everyone involved for their cooperation in the development of this report. We look forward to continuing the strong partnership that we share with HDNREM in our joint efforts to improve the environment for our citizens. If you have questions or concerns regarding the enclosed report, please feel free to contact me directly at (404) 562-8975.

Sincerely,

CAROL  
KEMKER

Digitally signed by CAROL  
KEMKER  
Date: 2021.11.18 09:36:34  
-05'00'

Carol L. Kemker  
Director  
Enforcement and Compliance Assurance Division

Enclosure

# **STATE REVIEW FRAMEWORK**

## **Alabama**

### **Huntsville Division of Natural Resources and Environmental Management**

#### **Clean Air Act Implementation in Federal Fiscal Year 2019**

#### **U.S. Environmental Protection Agency Region 4**

**Final Report  
November 17, 2021**

# I. Introduction

## A. Overview of the State Review Framework

The State Review Framework (SRF) is a key mechanism for EPA oversight, providing a nationally consistent process for reviewing the performance of state delegated compliance and enforcement programs under three core federal statutes: Clean Air Act, Clean Water Act, and Resource Conservation and Recovery Act. Through SRF, EPA periodically reviews such programs using a standardized set of metrics to evaluate their performance against performance standards laid out in federal statute, EPA regulations, policy, and guidance. When states do not achieve standards, the EPA will work with them to improve performance.

Established in 2004, the review was developed jointly by EPA and Environmental Council of the States (ECOS) in response to calls both inside and outside the agency for improved, more consistent oversight of state delegated programs. The goals of the review that were agreed upon at its formation remain relevant and unchanged today:

1. Ensure delegated and EPA-run programs meet federal policy and baseline performance standards
2. Promote fair and consistent enforcement necessary to protect human health and the environment
3. Promote equitable treatment and level interstate playing field for business
4. Provide transparency with publicly available data and reports

## B. The Review Process

The review is conducted on a rolling five-year cycle such that all programs are reviewed approximately once every five years. The EPA evaluates programs on a one-year period of performance, typically the one-year prior to review, using a standard set of metrics to make findings on performance in five areas (elements) around which the report is organized: data, inspections, violations, enforcement, and penalties. Wherever program performance is found to deviate significantly from federal policy or standards, the EPA will issue recommendations for corrective action which are monitored by EPA until completed and program performance improves.

The SRF is currently in its 4th Round (FY2018-2022) of reviews, preceded by Round 3 (FY2012-2017), Round 2 (2008-2011), and Round 1 (FY2004-2007). Additional information and final reports can be found at the EPA website under [State Review Framework](#).

# II. Navigating the Report

The final report contains the results and relevant information from the review including EPA and program contact information, metric values, performance findings and explanations, program responses, and EPA recommendations for corrective action where any significant deficiencies in performance were found.

## A. Metrics

There are two general types of metrics used to assess program performance. The first are **data metrics**, which reflect verified inspection and enforcement data from the national data systems of each media, or statute. The second, and generally more significant, are **file metrics**, which are derived from the review of individual facility files in order to determine if the program is performing their compliance and enforcement responsibilities adequately.

Other information considered by EPA to make performance findings in addition to the metrics includes results from previous SRF reviews, data metrics from the years in-between reviews, multi-year metric trends.

## B. Performance Findings

The EPA makes findings on performance in five program areas:

- **Data** - completeness, accuracy, and timeliness of data entry into national data systems
- **Inspections** - meeting inspection and coverage commitments, inspection report quality, and report timeliness
- **Violations** - identification of violations, accuracy of compliance determinations, and determination of significant noncompliance (SNC) or high priority violators (HPV)
- **Enforcement** - timeliness and appropriateness of enforcement, returning facilities to compliance
- **Penalties** - calculation including gravity and economic benefit components, assessment, and collection

Though performance generally varies across a spectrum, for the purposes of conducting a standardized review, SRF categorizes performance into three findings levels:

**Meets or Exceeds:** No issues are found. Base standards of performance are met or exceeded.

**Area for Attention:** Minor issues are found. One or more metrics indicates performance issues related to quality, process, or policy. The implementing agency is considered able to correct the issue without additional EPA oversight.

**Area for Improvement:** Significant issues are found. One or more metrics indicates routine and/or widespread performance issues related to quality, process, or policy. A recommendation for corrective action is issued which contains specific actions and schedule for completion. The EPA monitors implementation until completion.

## C. Recommendations for Corrective Action

Whenever the EPA makes a finding on performance of *Area for Improvement*, the EPA will include a recommendation for corrective action, or recommendation, in the report. The purpose of recommendations is to address significant performance issues and bring program performance back in line with federal policy and standards. All recommendations should include specific

actions and a schedule for completion, and their implementation is monitored by the EPA until completion.

### III. Review Process Information

#### Clean Air Act (CAA)

Key dates:

- August 10, 2020, round 4 kick-off letter sent to the local program
- August 24, 2020, data metric analysis (DMA) and file selection sent to the local program
- September 23-28, 2020, virtual file review for CAA
- November 19, 2020, file review checklist summary spreadsheet provided to the local program

Local Agency and EPA key contacts for review:

	<b>Huntsville Division of Natural Resources and Environmental Management (HDNREM)</b>	<b>EPA Region 4</b>
SRF Coordinator	Scott Cardno, Director Huntsville Division of Natural Resources and Environmental Management	Reginald Barrino, SRF Coordinator Policy, Oversight & Liaison Office
CAA	Darlene Duerr, Deputy Director Huntsville Division of Natural Resources and Environmental Management	Denis Kler, Policy, Oversight & Liaison Office Steve Rieck, Air Enforcement Branch

# Executive Summary

## Areas of Strong Performance

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The following are aspects of the program that, according to the review, are being implemented at a high level:

### **Clean Air Act (CAA)**

HDNREM met the negotiated frequency for full compliance evaluations of major sources and mega-sites.

## Priority Issues to Address

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The following are aspects of the program that, according to the review, are not meeting federal standards and should be prioritized for management attention:

### **Clean Air Act (CAA)**

Minimum data requirements (MDRs) for compliance monitoring activities were not entered into ICIS-Air within the required timeframes, and discrepancies were identified between the file materials and the data in ICIS-Air.

HDNREM was deficient in reviewing the Title V annual compliance certifications, and deficient in including the necessary information in their Full Compliance Evaluations (FCEs) and Compliance Monitoring Reports (CMRs).

HDNREM appeared to be deficient in making accurate compliance determinations based on the information contained in the files.

HDNREM was deficient in entering the Title V annual compliance certification data into ICIS-Airs.

# Clean Air Act Findings

## CAA Element 1 - Data

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### **Finding 1-1**

Area for Improvement

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### **Recurring Issue:**

Recurring from Rounds 2 and 3

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### **Summary:**

Minimum data requirements (MDRs) for compliance monitoring activities were not entered into ICIS-Air within the required timeframes, and discrepancies were identified between the file materials and the data in ICIS-Air.

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### **Explanation:**

Data Metric 3b1 indicated that only 3 out of 16 (18.8%) compliance monitoring related MDR activities achieved during the FY 2019 review year were reported within the 60-day time frame. The remaining compliance monitoring activities were reported into ICIS-Air anywhere from two to 231 days late. The City of Huntsville Division of Natural Resources and Environmental Management (HDNREM) indicated that they have changed the data entry procedures. Now the inspectors can enter the data in ICIS-Air and the data will be entered as part of the on-site facility inspection.

The FY 2020 ICIS-Air data for data metric 3b1 indicates that 9 out of 16 (56.3%) compliance monitoring related MDR activities achieved during the period were reported with the 60-day time frame. This indicates improvement to data metric 3b1 has occurred.

File Review Metric 2b indicated that only 3 out of 16 (18.8%) files had MDR data that was accurately reported in ICIS-Air. The remaining files had one or more discrepancies between information in the files and the data entered in ICIS-Air. Some of the discrepancies were missing or inaccurate compliance monitoring activity data, missing Air Program subpart (e.g. MACT ZZZZ) data, and inaccurate facility information. Incorrect data has the potential to hinder the EPA's oversight and targeting efforts and may result in inaccurate information being released to the public. To address the data inaccuracies between the file and ICIS-Air, HDNREM has changed the ICIS-Air data entry procedures, now the inspectors have the ability to enter the data into ICIS-Air.

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### **Relevant metrics:**

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Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
2b Files reviewed where data are accurately reflected in the national data system [GOAL]	100%		3	16	18.8%
3b1 Timely reporting of compliance monitoring MDRs [GOAL]	100%	85.7%	3	16	18.8%

**State Response:** A careful review of both EPA’s specific findings and comments and the supporting spreadsheet that provides specific details make it clear that most of EPA’s concerns center on the way information is entered into ICIS-Air. HDNREM continues to evaluate and improve the data entry process for ICIS-Air and it is HDNREM’s goal to input data to ICIS – Air in a timely manner and within the 60-day time frame. As noted in the description above, one key element going forward is that the inspector that has been assigned each Title V or SMOP facility enters the associated data into ICIS-Air. This has become part of the report preparation process ensuring timely input of the data and should be completed within the 60-day time frame allowed for data entry. This process also includes a review of facility data already in ICIS-Air ensuring all Air Program subpart data and compliance monitoring data are accurate and complete.

**Recommendation:**

Rec #	Due Date	Recommendation
1	04/29/2022	Data Metric 3b1: A review of the FY2020 ICIS-Air data shows improvement to this data metric. To verify continuous improvement, by April 29, 2022, following the FY 2021 data verification, the EPA will review data metric 3b1 to ensure timely reporting of data into ICIS-Air. Once data metric 3b1 indicates a 71.0% or greater of timely entry of data, then this recommendation will be considered complete.
2	04/29/2022	File Metric 2b: By April 29, 2022, the EPA will review a random selection of facility files and evaluate file metric 2b to ensure data entry has improved. Once file metric 2b indicates a 71.0% or greater of data entry accuracy, then this recommendation will be considered complete.

**CAA Element 1 - Data**

**Finding 1-2**



Area for Attention

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**Recurring Issue:**

No

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**Summary:**

There were no Minimum Data Requirements (MDRs) for HPVs, stack tests or enforcement actions entered into ICIS-Air during the FY 2019 review year.

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**Explanation:**

Because there were no MDRs for HPVs, stack tests or enforcement actions entered to ICIS-Air during the FY 2019 review year, the EPA cannot evaluate the timely reporting of HPV determinations (Data Metric 3a2), the timely reporting of stack tests and results (Data Metric 3b2) and the timely reporting of enforcement MDRs (Data Metric 3b3). The EPA addresses such anomalous cases by reviewing activities from previous reporting periods. However, the EPA has determined that there were no activities entered to ICIS-Air from fiscal years 2011 thru 2018. As a result, the EPA is recommending that this element be considered an Area of Attention, and that HDNREM conduct an assessment to determine if corrective action procedures are warranted.

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**Relevant metrics:**

Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
3a2 Timely reporting of HPV determinations [GOAL]	100%	42.1%	0	0	0
3b2 Timely reporting of stack test dates and results [GOAL]	100%	69.4%	0	0	0
3b3 Timely reporting of enforcement MDRs [GOAL]	100%	74.4%	0	0	0

**State Response:** A careful review of both EPA’s specific findings and comments and the supporting spreadsheet that provides specific details make it clear that most of EPA’s concerns center on the way information is entered into ICIS-Air. HDNREM continues to evaluate and improve the data entry process for ICIS-Air and it is HDNREM’s goal to input stack test results and enforcement actions in a timely manner within the 60-day time frame. As stated above, inspectors now directly input data for any inspections including stack tests with associated results and any enforcement actions. This procedure is part of the report writing and enforcement processes and ensures that data is entered into ICIS-Air in a timely manner. During FY 2021, five stack tests were conducted by permitted facilities and have been entered in ICIS – Air along with the results of those tests. In addition, two enforcement actions were initiated during FY 2021 and have been entered into ICIS – Air with the most current information.

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## CAA Element 2 - Inspections

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### Finding 2-1

Meets or Exceeds Expectations

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### Recurring Issue:

No

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### Summary:

HDNREM met the negotiated frequency for full compliance evaluations of major sources and mega-sites.

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### Explanation:

Data Metric 5a indicated that 7 out of 7 (100%) full compliance evaluations at major sources and mega-sites were conducted at the minimum frequency during the FY 2019 review period.

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### Relevant metrics:

Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
5a FCE coverage: majors and mega-sites [GOAL]	100%	87%	7	7	100%

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### State Response:

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## CAA Element 2 - Inspections

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### Finding 2-2

Area for Attention

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### Recurring Issue:

No

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### Summary:

HDNREM was deficient in meeting the negotiated frequency of conducting full compliance evaluations (FCEs) at SM-80 sources.

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**Explanation:**

Data Metric 5b indicated that 9 out of 11 (81.8%) FCEs at SM-80 sources were conducted at the negotiated frequency during FY 2019. ICIS-Air indicated that HDNREM was unable to conduct FCEs at two facilities within the required frequency. Both facilities were inspected during FY2014. However, during the SRF evaluation, HDNREM indicated that both the facilities were no longer classified as SM-80 sources. One facility was reclassified as a minor source. The other facility ceased operations in 2016 and no longer has an operating permit. It is recommended that HDNREM correct the facility classifications in ICIS-Air.

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**Relevant metrics:**

Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
5b FCE coverage: SM-80s [GOAL]	100%	93%	9	11	81.8%

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**State Response: The facility classifications have been corrected in ICIS-Air for the two facilities in question. Removal of these two facilities from the SM-80 listing brings the coverage of these facilities to 100%.**

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**CAA Element 2 - Inspections**

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**Finding 2-3**

Area for Improvement

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**Recurring Issue:**

No

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**Summary:**

HDNREM was deficient in entering the Title V annual compliance certification data into ICIS-Airs, and deficient in fulfilling the requirements for Full Compliance Evaluations (FCEs) and Compliance Monitoring Reports (CMRs).

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**Explanation:**

Data Metric 5e indicated that 0 out of 7 (0.0%) Title V annual compliance certifications (TV ACCs) were reviewed during FY 2019. However, a review of ICIS-Air indicated that HDNREM entered the TV ACCs reviewed/received in ICIS/Air on November 15, 2019 after the FY 2019 data verification period. During the SRF evaluation, HDNREM stated that the Title V annual compliance certifications are reviewed as the certifications are received by HDNREM and logged

into a designated spreadsheet, but the information is entered into ICIS-Air at a later date. HDNREM stated that they plan on entering the information into ICIS-Air on a monthly basis. The EPA believes that the changes HDNREM has implemented should adequately address this issue.

File Review Metric 6a indicated that 10 out of 16 (62.5%) FCEs in the files reviewed, met the FCE definition outlined in section V of the Compliance Monitoring Strategy (CMS).

File Review Metric 6b indicated that 10 out of 16 (62.5%) CMRs in the files reviewed, provided sufficient documentation to determine compliance as outlined in section IX of the CMS. In an email dated 1/15/2021, HDNREM indicated that the facility inspection reports were used for FCE documentation and for CMR documentation purposes. HDNREM stated that they were in the process of updating the inspection forms to be site-specific, to ensure all the FCE and CMR documentation requirements were addressed and included in the evaluation form. HDNREM also indicated that some of the inspection forms are outdated and need to be revised.

**Relevant metrics:**

<b>Metric ID Number and Description</b>	<b>Natl Goal</b>	<b>Natl Avg</b>	<b>State N</b>	<b>State D</b>	<b>State Total</b>
5e Reviews of Title V annual compliance certifications completed [GOAL]	100%	86.1%	0	7	0%
6a Documentation of FCE elements [GOAL]	100%		10	16	62.5%
6b Compliance monitoring reports (CMRs) or facility files reviewed that provide sufficient documentation to determine compliance of the facility [GOAL]	100%		10	16	62.5%

**State Response:** It is HDNREM’s goal to enter all Title V Annual Compliance Certification data into ICIS – Air in a timely manner within the allotted 60-day time frame. HDNREM does ensure receipt of Annual Compliance Certifications from all Major Sources and reviews them to ensure that facilities meet their permitted requirements. HDNREM is also working with Title V permitted facilities to ensure that all submitted Annual Compliance Certifications contain all the necessary elements for compliance determinations. HDNREM continues to evaluate and improve the data entry process for ICIS-Air. As noted above the inspector assigned each facility enters the data into ICIS-Air as part of the full compliance evaluation. This has become part of the report preparation process to ensure timely input of the data. This process also includes reviewing and correcting facility data already entered into ICIS-Air and ensuring all Air Program subpart data and compliance monitoring data are accurate and complete.

HDNREM is in the process of updating the full compliance evaluation forms to be site specific to ensure that all permitted requirements are met. Each of these forms are being

reviewed and updated as needed to ensure all elements required for facility compliance are taken into consideration. The inspection forms that have been modified to date have been uploaded to a OneDrive account file. As the other forms are updated, they will be uploaded to this same OneDrive file for review. A link has been sent to EPA to allow for access to the files.

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**Recommendation:**

Rec #	Due Date	Recommendation
1	04/29/2022	Data Metric 5e: HDNREM has implemented a change (allowing inspectors to enter the data into ICIS) that will address this issue. By April 29, 2022, following data verification, the EPA will review data metric 5e to ensure timely entry of Title V annual compliance certification review data into ICIS-Air. Once data metric 5e indicates a 71.0% or greater improvement for timely entry of data, then this recommendation will be considered complete.
2	12/30/2022	File Review Metrics 6a and 6b: By September 30, 2021, HDNREM shall submit to the EPA the revised site-specific evaluation forms that meet the criteria discussed in section V and section IX of the CMS policy. The EPA will review the revised site-specific evaluation forms to ensure they meet the requirements of the CMS policy. One year following implementation of the revised site-specific evaluation forms, the EPA will review a random selection of facility files to ensure FCE and CMR documentation requirements have been fulfilled. If the review indicates improvements in file review metrics 6a and 6b of 71% or greater, this recommendation will be considered complete.

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**CAA Element 3 - Violations**

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**Finding 3-1**

Area for Improvement

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**Recurring Issue:**

No

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**Summary:**

HDNREM is deficient in making accurate compliance determinations based on the information contained in the files.

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**Explanation:**

File Review Metric 7a indicated that 9 out of 16 (56.3%) files reviewed led to accurate compliance determinations for the review period of FY 2019. Of the remaining files that did not appear to have had accurate compliance determinations, one compliance monitoring report indicated that a process was not operating in compliance, but the file did not provide any information as to how the noncompliance was addressed. The remaining files provided indications that some FCE documentation and CMR documentation were missing from the HDNREM evaluation forms. If all the information was not on the forms and not reviewed, then an accurate compliance determination may not have been made. In an email dated 1/15/2021, HDNREM indicated that the facility inspection reports were used for FCE documentation and for CMR documentation purpose. HDNREM stated that they were in the process of updating the inspection forms to be site-specific, to ensure all the FCE and CMR documentation requirements were addressed and included in the evaluation form.

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**Relevant metrics:**

Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
7a Accurate compliance determinations [GOAL]	100%		9	16	56.3%

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**State Response: HDNREM conducts a thorough on-site inspection and records review for each permitted Title V and SMOP facility annually and believes that accurate compliance determinations have been made. HDNREM's goal is to enter all inspection related data into ICIS – Air in a timely manner within the 60-day time frame with enough detail to support compliance / non-compliance determinations.**

**The deficiencies in making accurate compliance determinations center on the fact that not every inspection report specifically includes every permit condition or includes a comment about the results of the Title V annual compliance review. HDNREM is in the process of updating the full compliance evaluation forms for Title V and SMOP sources to be site specific to ensure that all permitted requirements are met. Each of these forms are updated as needed to ensure all elements required for facility compliance are taken into consideration. The inspection forms that have been modified to date have been uploaded to a OneDrive account file. As the other forms are updated, they will be uploaded to this same OneDrive file for review. A link has been sent to EPA to allow for access to the files.**

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**Recommendation:**

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Rec #	Due Date	Recommendation
1	12/30/2022	File Review Metric 7a: By September 30, 2021, HDNREM should submit to the EPA the revised site-specific evaluation forms that meet the criteria discussed in section V and section IX of the CMS policy. One year following implementation of the revised site-specific evaluation forms, the EPA will review a random selection of facility files to verify accurate compliance determinations were made and acted upon. Once file review metric 7a indicates a 71.0% or greater of making accurate compliance determinations, then this recommendation will be considered complete.

### CAA Element 3 - Violations

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#### Finding 3-2

Area for Attention

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#### Recurring Issue:

No

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#### Summary:

HDNREM did not identify any federally reportable violations or high priority violations during the FY 2019 review year.

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#### Explanation:

Data Metric 7a1 indicated that 0 out of 19 (0%) federally reportable violations (FRV) were discovered from the FY 2019 review period, and Data Metric 8a indicated that 0 out of 6 (0%) high priority violations (HPV) were discovered from the FY 2019 review period, and therefore both metrics are below the national averages. Because no HPVs were identified, the EPA cannot evaluate the timeliness nor the accuracy of HPV determinations for the FY 2019 review period (Data Metric 13 and File Review Metric 8c). The EPA addresses such anomalous cases by reviewing activities from previous reporting periods. However, the EPA has determined that there were no violations identified during FY 2011 thru FY 2018. As a result, the EPA is recommending that this element be considered an Area of Attention, and that HDNREM conduct an assessment to determine if corrective action procedures are warranted.

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#### Relevant metrics:

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Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
13 Timeliness of HPV Identification [GOAL]	100%	90.6%	0	0	0
7a1 FRV 'discovery rate' based on inspections at active CMS sources		7.8%	0	19	0%
8a HPV discovery rate at majors		2.3%	0	6	0%
8c Accuracy of HPV determinations [GOAL]	100%		0	0	0

**State Response: HDNREM conducts a thorough on-site inspection and records review for each permitted Title V and SMOP facility annually and did not identify any violations or HPV activity during 2019. HDNREM's goal is to have 100% of the sources within our jurisdiction in full compliance at all times. HDNREM thinks having a very low non-compliance rate is a very important metric for validating the overall effectiveness of an enforcement and compliance assistance program. HDNREM will ensure sufficient data is entered into ICIS – Air to ensure clarity of any enforcement actions.**

**HDNREM has initiated two formal enforcement actions during FY 2021 and has entered the most current information into ICIS – Air.**

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#### CAA Element 4 - Enforcement

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##### **Finding 4-1**

Area for Attention

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##### **Recurring Issue:**

No

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##### **Summary:**

HDNREM did not take informal or formal enforcement actions during the review period of FY 2019.

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##### **Explanation:**

No HPVs were discovered during the FY 2019 review period, so Data Metric 10a1 indicated that 0 (0%) HPVs were addressed within 180-day timeframe, and Data Metric 10b1 indicated that 0 (0%) HPVs were managed during the FY2019 review period. Therefore, both data metrics are below the national averages. As a result, the EPA cannot determine if HDNREM meets the objectives of the HPV policy in terms of enforcement responses, compliance schedules, timeliness, and returning a source to compliance (File Review Metrics 9a, 10a, 10b and 14). The EPA addresses such anomalous cases by reviewing activities from previous reporting periods. However,



the EPA has determined that there were no enforcement actions taken during FY 2011 thru FY 2018. As a result, the EPA is recommending that this element be considered an Area of Attention, and that HDNREM conduct an assessment to determine if corrective action procedures are warranted.

**Relevant metrics:**

<b>Metric ID Number and Description</b>	<b>Natl Goal</b>	<b>Natl Avg</b>	<b>State N</b>	<b>State D</b>	<b>State Total</b>
10a Timeliness of addressing HPVs or alternatively having a case development and resolution timeline in place	100%		0	0	0
10a1 Rate of Addressing HPVs within 180 days		47.8%	0	0	0
10b Percent of HPVs that have been addressed or removed consistent with the HPV Policy [GOAL]	100%		0	0	0
10b1 Rate of managing HPVs without formal enforcement action		7.9%	0	0	0
14 HPV case development and resolution timeline in place when required that contains required policy elements [GOAL]	100%		0	0	0
9a Formal enforcement responses that include required corrective action that will return the facility to compliance in a specified time frame or the facility fixed the problem without a compliance schedule [GOAL]	100%		0	0	0

**State Response: HDNREM conducts a thorough on-site inspection and records review for each permitted Title V and SMOP facility annually and did not identify any violations or HPV activity during 2019. HDNREM’s goal is to have 100% of the sources within our jurisdiction in full compliance at all times. HDNREM thinks that having a very low non-compliance rate is a very important metric for validating the overall effectiveness of an enforcement and compliance assistance program. HDNREM will ensure sufficient data is entered into ICIS – Air to ensure clarity of any enforcement actions.**

**Formal enforcement actions are entered into ICIS – Air with all required information. Informal enforcement actions can be handled in different ways but are typically documented with a letter or email to the permitted facility. HDNREM will ensure sufficient data is entered into ICIS – Air to ensure clarity of any enforcement actions whether formal or informal.**

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## CAA Element 5 - Penalties

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### Finding 5-1

Area for Attention

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### Recurring Issue:

No

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### Summary:

HDNREM did not assess civil penalties during the review period of FY 2019.

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### Explanation:

Because there no formal enforcement actions during the FY 2019 review period there were no civil penalties assessed, and the EPA cannot evaluate penalty calculations and penalty collection documentation (File Review Metrics 11a, 12a and 12b). The EPA addresses such anomalous cases by reviewing activities from previous reporting periods. However, the EPA has determined that there were no civil penalties assessed during FY 2011 thru FY 2018. As a result, the EPA is recommending that this element be considered an Area of Attention, and that HDNREM conduct an assessment to determine if corrective action procedures are warranted.

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### Relevant metrics:

Metric ID Number and Description	Natl Goal	Natl Avg	State N	State D	State Total
11a Penalty calculations reviewed that document gravity and economic benefit [GOAL]	100%		0	0	0
12a Documentation of rationale for difference between initial penalty calculation and final penalty [GOAL]	100%		0	0	0
12b Penalties collected [GOAL]	100%		0	0	0

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**State Response: HDNREM conducts a thorough on-site inspection and records review for each permitted Title V and SMOP facility annually and did not identify any violations or HPV activity during 2019. HDNREM's goal is to have 100% of the sources within our jurisdiction in full compliance at all times. HDNREM thinks that having a very low non-compliance rate is a very important metric for validating the overall effectiveness of an enforcement and compliance assistance program. HDNREM will ensure sufficient data is entered into ICIS – Air to ensure clarity of any enforcement actions.**

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**HDNREM has initiated two formal enforcement actions during FY 2021 and has entered the most current information into ICIS – Air.**

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