

**BAY AREA AIR QUALITY MANAGEMENT DISTRICT
RESOLUTION No. 2009-**

**A Resolution of the Board of Directors of the Bay Area Air Quality Management District
Establishing the Bay Area Healthy Communities Initiative**

WHEREAS, it is the intent of the Bay Area Air Quality Management District (District) to achieve clean and healthful air for all who live and work in the Bay Area, including segments of the population exposed to higher levels of criteria and toxic air contaminants;

WHEREAS, the governing Board of Directors (Board) of the District recognizes that while most criteria and toxic air contaminants have been substantially reduced in the Bay Area, these contaminants continue to pose serious health risks;

WHEREAS, the Board further recognizes that many of the areas in which pollution levels are higher have populations that are particularly vulnerable to the adverse effects of air pollution;

WHEREAS, the Board has expressed its strong commitment to reduce toxic air contaminants in the Bay Area through its creation of the Community Air Risk Evaluation (CARE) program;

WHEREAS, the Board also recognizes that criteria air pollutants can create localized health impacts, and this is especially true with respect to particulate matter;

WHEREAS, the Board, on July 30, 2008, Resolution No. 2008-10, committed to continue to address the cumulative impact of new and existing mobile and stationary sources of air pollution – particularly in disproportionately impacted communities – for sources that on a relative basis contribute most to health risk at a local and regional level, and also committed to continue to explore and consider additional actions to reduce cumulative impacts throughout the Bay Area;

WHEREAS, through the CARE Program, the Board recognizes that the highest levels of ambient toxic air contaminants in the Bay Area tend to occur in the core urban areas, along major roadways and adjacent to freeways and port activity;

WHEREAS, the Board supports regional planning agencies' identification of many of the Bay Area's core urban areas as priority development communities where infill development can preserve green space, promote public transportation, and reduce per capita air pollution emissions, while recognizing the need for infill development to be protective of public health;

WHEREAS, the Board recognizes that there are many elements required for healthy communities: a healthy environment, including clean air, and a healthy economy, which can support good housing, schools, and job opportunities.

WHEREAS, the CARE Program has identified impacted communities within the Bay Area – defined as having a combination of highest exposure of sensitive populations to toxic air contaminants, higher emitting sources, nearby low income populations and bounded by major roadways – which include the urban core areas of Concord, eastern San Francisco, western Alameda County, Redwood City/East Palo Alto, Richmond/San Pablo, and central San Jose as depicted in Attachment 1 and described in the District's Technical Memorandum entitled "Applied Method for Developing Polygon Boundaries for CARE Impacted Communities" (December, 2009);

WHEREAS, the Board recognizes that these community boundaries can change over time with continued reductions in air pollutant emissions, with changes in population demographics, and with future progress in understanding health impacts of air pollutants;

NOW, THEREFORE, BE IT RESOLVED that the Board does hereby establish the Bay Area Healthy Communities Initiative.

BE IT FURTHER RESOLVED that the Board adopts the CARE Impacted Community boundaries as shown in Attachment 1 and described in the District's Technical Memorandum "Applied Method for Developing Polygon Boundaries for CARE Impacted Communities" (December, 2009), while allowing for periodic updates.

BE IT FURTHER RESOLVED that the Board will develop a baseline emissions inventory of criteria and toxic air pollutants for each CARE Community, including an inventory of mobile and stationary sources.

BE IT FURTHER RESOLVED that the Board, having been designated a nonattainment area for the national 24-hour PM_{2.5} standard, will prepare a plan to reduce PM_{2.5} for submittal as part of the State Implementation Plan for this standard and through this effort will conduct detailed modeling of PM emissions, transport and concentrations.

BE IT FURTHER RESOLVED that the Board adopts a policy of "No Net Increase" for CARE Communities such that emissions of toxic air pollutants within each of these communities, from all sources collectively within these communities, weighted according to their cancer potency, remain at or below baseline levels.

BE IT FURTHER RESOLVED that the Board seeks to reduce emissions of all air pollutants in impacted communities.

BE IT FURTHER RESOLVED that the Board will support enhanced air quality monitoring in CARE Communities as needed to evaluate local air quality conditions.

BE IT FURTHER RESOLVED that the Board will continue to focus grants and incentive funds in CARE Communities.

BE IT FURTHER RESOLVED that the Board will develop additional regulatory measures to reduce criteria and toxic air pollutant emissions from stationary and indirect air pollution sources in the CARE Impacted Communities and throughout the District.

BE IT FURTHER RESOLVED that the Board supports infill development and economic growth in CARE Impacted Communities and will work with regional planning agencies to ensure that development proceeds in a manner that is health protective for both new and current residents.

BE IT FURTHER RESOLVED that the Board will further support and provide technical assistance to local jurisdictions in developing Community Risk Reduction Plans for impacted communities to encourage comprehensive, community-wide approaches to minimizing impacts from new and existing sources.

The foregoing Resolution was duly and regularly introduced, passed and adopted at a regular meeting of the Board of Directors of the Bay Area Air Quality Management District on the Motion of Director _____, seconded by Director _____, on the ____ day of _____, 2010 by the following vote of the Board:

AYES: NOES: ABSENT:

ATTEST:

Board of Directors

Pamela Torliatt Chairperson of the

Directors

Tom Bates Secretary of the Board of

Attachment 1

CARE Program Impacted Community Boundaries

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