



**Update on More Stringent Permitting  
Requirements for Proposed New/Modified  
Stationary Sources of Air Pollution Located in  
Impacted Communities or in Proximity to  
Sensitive Receptors**

**CARE Cumulative Impacts Working Group Meeting**

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# Presentation Outline

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1. Review of background information
2. Review of draft regulatory concept
3. Update since last meeting

# Air District Regulatory Authority and Permit System

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- Air districts have primary authority to regulate stationary (as opposed to mobile) sources of air pollution
- Air districts may establish a permit system for pre-construction review of proposed new/modified stationary sources
- Permits may be denied for new/modified sources if the APCO is not satisfied that the source will comply with applicable district, state, and federal air quality requirements
- The APCO may impose permit conditions that are reasonably necessary to ensure compliance with applicable air quality requirements

# Regulatory Overview

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- Applicable air quality requirements
  - General rules
    - e.g., BAAQMD Regulation 6, Rule 1: Particulate Matter, General Requirements
  - Source category-specific rules
    - e.g., BAAQMD Regulation 8, Rule 20: Graphic Arts Printing and Coating Operations
  - State and federal rules
    - e.g., NESHAP, NSPS, ATCM
  - New Source Review (NSR) rules
    - Best Available Control Technology (BACT)
    - Emission Offsets
    - Air Quality Impact Analysis (AQIA) [criteria air pollutants and their precursors] and Health Risk Screening Analysis (HRSA) [toxic air contaminants]
      - Site-specific, dispersion modeling-based, analyses

# Cumulative Impacts in AQIA and HRSA

## ➤ Air Quality Impact Analysis

- EPA Guidelines followed
- Pollutant-specific cumulative air quality impact approach used
- Ambient air quality standards (AAQS) have been set
- Ambient air quality monitoring data, supplemented with modeling of local sources if needed, is used to establish background pollutant levels
- Significant Impact Levels (SILs)
  - Project-based incremental de minimis levels

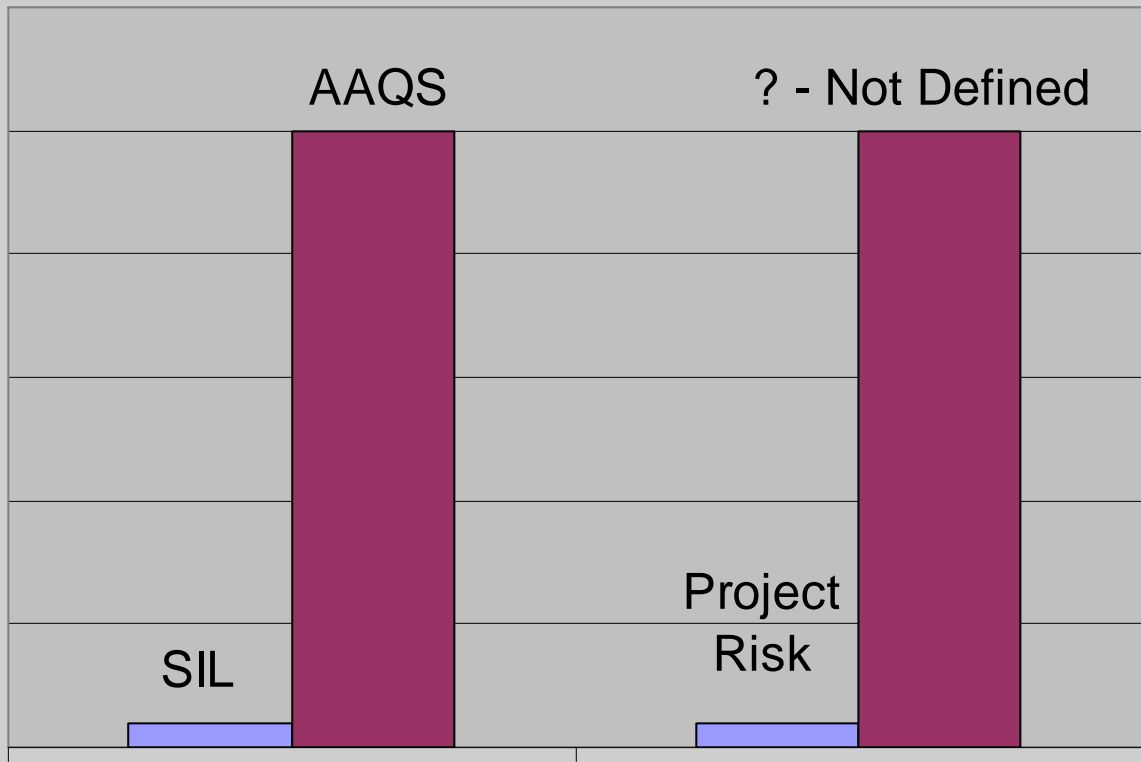
## ➤ Health Risk Screening Analysis



- OEHHA Guidelines followed
- Additive risk approach used for pollutant mixtures
- Incremental project de minimis impact approach used
  - No standards have been set for cumulative risks
  - Lack of ambient air quality monitoring data, and high-resolution modeling input data, for determining background pollutant levels

# New Source Review Approaches for Regulating Criteria Pollutants and Toxic Air Contaminants

Criteria Pollutants

Toxic Air Contaminants



 Project Increment  
 Project Increment + Existing Background

Air Concentration

Toxic Risk

Screening Analysis

Full Analysis

Screening Analysis

Cumulative Analysis

# Draft Regulatory Concept

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## ➤ Phase I

- Address Toxic Air Contaminants
- Apply to new/modified sources in Impacted Communities and in proximity to sensitive receptors
- Use existing NSR approach in BAAQMD Reg. 2, Rule 5, but reduce TBACT thresholds, and Project Risk Limits, by a factor of two
  - TBACT:  $> 0.5$  in-a-million cancer risk, and/or chronic hazard index (HI)  $> 0.10$
  - Project Risk Limits: 5.0 in a million cancer risk; chronic and acute HI = 0.50
- Add new cumulative health risk tracking requirement in Impacted Communities

## ➤ Phase II

- Address criteria air pollutants
- Focus on fine particulate matter (PM<sub>2.5</sub>)

# Phase I Update

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## ➤ Definitions

- “Impacted Communities”
  - Use most recent CARE Program data to establish boundaries
  - Factors to be considered: Gridded cancer risk-weighted emissions, modeled cancer risk, gridded sensitive populations, gridded income levels, location of roadways
  - Focus on sources located within impacted communities
  - Complete periodic boundary updates
  - Localized hot spots – may be better addressed in Phase II
- “In Proximity to”
  - 500 feet may be appropriate
- “Sensitive Receptor”



# Data on Sensitive Receptors

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- Department of Education
  - Public schools, private schools, nonpublic nonsectarian schools
- Office of Statewide Health Planning and Development (OSHPD)
  - Hospitals, long-term care facilities, primary care clinics, specialty clinics, home health agencies and hospice
- Department of Social Services
  - 23 types of facilities licensed including child care centers, family child care, residential care for the chronically ill and elderly

# Use of Sensitive Receptor Data

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- Site Address of licensed facilities
  - Address geo-coding
    - Derived from US Census Bureau TIGER/Line data
- Ideally need boundaries of licensed facilities
- Link site address with parcel database ?
- May need to start simple (e.g., K-12 schools)
  - Expand as GIS capabilities improve

# Phase I Update

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- Public workshop on amendments to Reg. 2, Rule 5 expected in July 2009
- Rule adoption is feasible in late 2009 if general approach is based on existing methodologies, and scope of project is kept reasonable