



South Coast Air Quality Management District

21865 Copley Drive, Diamond Bar, CA 91765-4178
(909) 396-2000 • www.aqmd.gov

Via Email and CERTIFIED RETURN RECEIPT

August 19, 2022

John Gardner
All American Asphalt
P.O. Box 2229
Corona, CA 92878-2229

Subject: Approval of AB 2588 Health Risk Assessment (HRA) for
All American Asphalt, All American Aggregates (South Coast AQMD Facility
ID No. **82207**)

Dear Mr. Gardner:

This letter provides notification of the approval of the Health Risk Assessment (HRA) submitted by All American Asphalt in Irvine (AAA) pursuant to the Air Toxics "Hot Spots" Act (AB 2588) and South Coast Air Quality Management District's (South Coast AQMD) Rule 1402, an approval which was conditioned on modifications made by staff to the Summary Form as described in detail below. During review of the HRA, staff identified inaccurate entries in the HRA Summary Form. These entries have been corrected in the revised HRA Summary Form (Attachment A). Note that the acute risk posed by AAA are above the Notification Risk Level specified in Rule 1402.

Background

South Coast AQMD staff notified AAA on February 20, 2020, that preparation of an Air Toxics Inventory Report (ATIR) based on the 2016 inventory year was required. Staff received the first ATIR submittal on July 21, 2020. Following staff comments, revised ATIR submittals were received on April 1, 2021, and October 22, 2021. The October 22, 2021 ATIR was rejected on November 5, 2021, primarily for failure to include the complete results of the source test conducted on the rotary dryer. AAA was required to address the deficiencies in the ATIR and to also prepare and submit an HRA. The final revised ATIR, received on December 7, 2021, was approved on December 16, 2021. The HRA was received on February 1, 2022. Following review, staff rejected the HRA on February 23, 2022, for two primary reasons: the HRA was not prepared in accordance with South Coast AQMD guidelines, and the HRA was not based on the emission inventory from the approved ATIR. Staff received a revised HRA on April 25, 2022. The April 25, 2022 revised HRA included incorrect values in the HRA Summary Form. Staff made modifications to the HRA Summary Form, which are outlined below. This letter provides notification of the approval of the April 25th revised HRA, which now includes a version of the HRA Summary Form modified by staff.

Corrections to the HRA Summary Form

- Receptor 1314 shown in the submitted HRA Summary Form is located approximately 164 feet from the facility fence line and shows a risk of 77.6 in one million. Staff found the actual

maximum offsite cancer risk (evaluated using residential exposure) to be a higher value of 217.4 in one million at Receptor 2056, located at the facility fence line, in an unoccupied area (where there is no residential exposure).

- The maximum residential cancer risk at a residential land use was determined to be 4.4 in one million at Receptor 1511, within the Orchard Hills community. An incorrect Receptor 1939 was shown in the submitted HRA Summary Form and is in a preservation area designated by City of Irvine and not zoned for residential use. Receptor 1460 is also located near the Orchard Hills community and was evaluated by staff but found to be located outside of the nearest residential property boundary.
- The maximum chronic non-cancer hazard index assuming residential exposure was determined to be 0.07, also at Receptor 1511. This receptor was selected for the reason described above.
- The maximum worker cancer risk was determined to be 0.4 in one million at Receptor 1250, located at the Reserve at Orchard Hills Clubhouse. Receptor 1940 shown in the submitted HRA Summary Form shows a lower worker cancer risk at a different receptor.
- The maximum worker chronic hazard index of 0.02 and maximum 8-hour chronic hazard index of 0.01 are also located at Receptor 1250, described above.
- Finally, the point of maximum impact (PMI) representing the acute hazard index was found to be 2.41 at Receptor 2012, located at the facility fence line. Receptor 2038 was used for reporting the acute PMI in the HRA Summary Form, but the reported value is lower than that shown for Receptor 2012.

Polycyclic Aromatic Hydrocarbon (PAH) Emissions in the HRA

South Coast AQMD staff noted that PAH emissions listed under Emittent ID 1151 were not shown in tables listing emissions in the HRA document. However, these PAH emissions were included in the underlying HRA data used to perform air dispersion modeling and associated risk assessment. It should be noted that the approved ATIR showed emissions of PAH listed under Emittent ID 1151 totaling 1.96 pounds, which is below the degree of accuracy reporting requirements of the Emission Inventory Criteria Guidelines. Additionally, Emittent ID 1151 is evaluated as benzo(a)pyrene which assumes conservative health risk values. Because of these reasons, a revision to the HRA document addressing PAH emissions is not necessary.

Next Step: Public Notification

As summarized in Attachment A, the non-cancer acute hazard index at the facility fence-line is estimated to be 2.41. This acute hazard index is mainly due to nickel emissions, and it exceeds the public notification hazard index threshold of 1.0 specified in Rule 1402. The zone of impact extends up to about 300 feet from the facility boundary. A map showing the areas with health risk levels exceeding public notification thresholds is also attached to this letter (Attachment B). Therefore, AAA must notify the affected parties within 30 days of approval of the HRA. Based on the information you provided to us, the Public Notice is required to be sent to the impacted parties, consisting of the Irvine Ranch Conservancy and the Orange County Fire Authority.

South Coast AQMD will post the approved HRA with the modified HRA Summary Form replacing the original incorrect HRA Summary Form on our website and make a copy available in our library. If there is any business confidential information contained within the submitted HRA, please let us know and provide us with a redacted version of the HRA, both in electronic format and hardcopy, within two weeks, or no later than **September 2, 2022**.

In addition, given the short timeframe for conducting public notification, please schedule a meeting with us within one week to discuss the next steps for public notification.

Please note that staff will reach out to you regarding an upcoming public meeting to provide updates on various agency activities regarding AAA, which will include information on the AB 2588 process and the approved HRA. If you have any questions regarding this letter, please contact either Alberto Jasso, Air Quality Engineer II, at (909) 396-8581 and ajasso@aqmd.gov, or Victoria Moaveni, Program Supervisor, at (909) 396-2455 and ymoaveni@aqmd.gov.

Sincerely,



Ian MacMillan
Assistant Deputy Executive Officer
Planning, Rule Development & Implementation

Attachment:

- A. HRA Summary Form
- B. Public Notification Map

IM:EK:VM:FC:AJ



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HEALTH RISK ASSESSMENT SUMMARY FORM

(Required in Executive Summary of HRA)

Facility Name : _____

Facility Address: _____

Type of Business: _____

SCAQMD ID No.: _____

A. Cancer Risk

(One in a million means one chance in a million of getting cancer from being constantly exposed to a certain level of a chemical over a period of time)

1. Inventory Reporting Year : _____

2. Maximum Cancer Risk to Receptors : *(Offsite and residence = 30-year exposure, worker = 25-year exposure)*

a. Offsite _____ in a million Location: _____

b. Residence _____ in a million Location: _____

c. Worker _____ in a million Location: _____

3. Substances Accounting for 90% of Cancer Risk: _____

Processes Accounting for 90% of Cancer Risk: _____

4. Cancer Burden for a 70-yr exposure: *(Cancer Burden = [cancer risk] x [# of people exposed to specific cancer risk])*

a. Cancer Burden _____

b. Number of people exposed to >1 per million cancer risk for a 70-yr exposure _____

c. Maximum distance to edge of 70-year, 1 x 10⁻⁶ cancer risk isopleth (meters) _____

B. Hazard Indices

[Long Term Effects (chronic) and Short Term Effects (acute)]

(non-carcinogenic impacts are estimated by comparing calculated concentration to identified Reference Exposure Levels, and expressing this comparison in terms of a "Hazard Index")

1. Maximum Chronic Hazard Indices:

a. Residence HI: _____ Location: _____ toxicological endpoint: _____

b. Worker HI : _____ Location: _____ toxicological endpoint: _____

2. Substances Accounting for 90% of Chronic Hazard Index: _____

3. Maximum 8-hour Chronic Hazard Index: _____

8-Hour Chronic HI: _____ Location: _____ toxicological endpoint: _____

4. Substances Accounting for 90% of 8-hour Chronic Hazard Index: _____

5. Maximum Acute Hazard Index: _____

PMI: _____ Location: _____ toxicological endpoint: _____

6. Substances Accounting for 90% of Acute Hazard Index: _____

C. Public Notification and Risk Reduction

1. Public Notification Required? _____ Yes _____ No

a. If 'Yes', estimated population exposed to risks > 10 in a million for a 30-year exposure, or an HI >1

2. Risk Reduction Required? _____ Yes _____ No

ATTACHMENT B
Public Notification Map
(Acute HI of 1.0)

