Office of the State Controller
State-Mandated Costs Claiming Instructions No. 2025-01
California Regional Water Quality Control Board, San Francisco Bay Region,
Order No. R2-2009-0074 – Program No. 388
For the period of December 1, 2009, through December 31, 2017
July 2, 2025

In accordance with Government Code (GC) sections 17560 and 17561, eligible claimants may submit claims to the State Controller's Office (SCO) for reimbursement of costs incurred for state-mandated cost programs. This document contains claiming instructions and forms that eligible claimants must use for filing claims for California Regional Water Quality Control Board, San Francisco Bay Region, Order No. R2-2009-0074 program. SCO issues these claiming instructions subsequent to the Commission on State Mandates (CSM) adopting the program's Parameters and Guidelines (Ps and Gs). The Ps and Gs are an integral part of the claiming instructions and are located on CSM's website.

On January 24, 2025, the CSM adopted its Decision finding that the test claim permit imposes a reimbursable state-mandated program upon local agencies within the meaning of article XIII B, section 6 of the California Constitution and GC section 17514 from December 1, 2009, through December 31, 2017.

Exception

There will be no reimbursement for any period in which the Legislature has suspended the operation of a mandate pursuant to state law.

Eligible Claimants

The following permittees are required to comply with Order No. R2-2009-0074 and are eligible to claim reimbursement, provided they are subject to the taxing restrictions of articles XIII A and XIII C of the California Constitution, and the spending limits of article XIII B of the California Constitution, and incur increased costs as a result of this mandate that are paid from their local proceeds of taxes:

- Alameda permittees include the Cities of Alameda, Albany, Berkeley, Dublin, Emeryville, Fremont, Hayward, Livermore, Newark, Oakland, Piedmont, Pleasanton, San Leandro, and Union City, Alameda County (Unincorporated area), the Alameda County Flood Control and Water Conservation District, and Zone 7 of the Alameda County Flood Control and Water Conservation District.
- Santa Clara permittees include the Cities of Campbell, Cupertino, Los Altos, Milpitas, Monte Sereno, Mountain View, Palo Alto, San Jose, Santa Clara, Saratoga, and Sunnyvale, the towns of Los Altos Hills and Los Gatos, the Santa Clara Valley Water District, and Santa Clara County.
- Fairfield-Suisun permittees include the Cities of Fairfield and Suisun City, and Fairfield-Suisun Sewer District.

- Contra Costa permittees include the Cities of Clayton, Concord, El Cerrito, Hercules, Lafayette, Martinez, Orinda, Pinole, Pittsburg, Pleasant Hill, Richmond, San Pablo, San Ramon, and Walnut Creek, the towns of Danville and Moraga, Contra Costa County, and the Contra Costa County Flood Control and Water Conservation District.
- San Mateo permittees include the Cities of Belmont, Brisbane, Burlingame, Daly City, East Palo Alto, Foster City, Half Moon Bay, Menlo Park, Millbrae, Pacifica, Redwood City, San Bruno, San Carlos, San Mateo, and South San Francisco, the towns of Atherton, Colma, Hillsborough, Portola Valley, and Woodside, the San Mateo County Flood Control District, and San Mateo County.
- Vallejo permittees include the City of Vallejo and the Vallejo Sanitary District.

Reimbursement Claim Deadline

Initial Reimbursement Claims

Initial reimbursement claims must be filed within 120 days from the issuance date of the claiming instructions. Costs incurred for compliance with this mandate are reimbursable for the period beginning

December 1, 2009 through December 31, 2017, must be filed with the SCO and be delivered or postmarked on or before **October 30, 2025**, before a late fee is assessed. A separate claim must be filed for each fiscal year.

Claims filed more than one year after the filing date will not be accepted.

Penalty

Initial Reimbursement Claims

When filed within one year of the initial filing deadline, claims are assessed a late penalty of 10% of the total amount of the initial claim without limitation pursuant to GC section 17561(d)(3).

Minimum Claim Cost

GC section 17564(a) states that no claim may be filed pursuant to GC sections 17551 and 17561, unless such a claim exceeds one thousand dollars (**\$1,000**).

Reimbursement of Claims

To be eligible for mandated cost reimbursement for any fiscal year, only actual costs may be claimed. These costs must be traceable and supported by source documents that show the validity of such costs, when they were incurred, and their relationship to the reimbursable activities. A source document is created at or near the same time the actual cost was incurred for the event or activity in question. Source documents may

include, but are not limited to, employee time records or time logs, sign-in sheets, invoices, and receipts.

Evidence corroborating the source documents may include, but is not limited to, worksheets, cost allocation reports (system generated), purchase orders, contracts, agendas, training packets, and declarations. Declarations must include a certification or declaration stating: "I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct," and must further comply with the requirements of Code of Civil Procedure section 2015.5.

Evidence corroborating the source documents may include data relevant to the reimbursable activities otherwise in compliance with local, state, and federal government requirements. However, these documents cannot be substituted for source documents.

Audit of Costs

All claims submitted to the SCO are subject to review to determine if costs are related to the mandate, are reasonable and not excessive, and if the claim was prepared in accordance with the SCO's claiming instructions and the Ps and Gs adopted by the CSM. If any adjustments are made to a claim, the claimant will be notified of the amount adjusted, and the reason for the adjustment.

On-site audits will be conducted by the SCO as deemed necessary. Pursuant to GC section 17558.5(a), a reimbursement claim for actual costs filed by a claimant is subject to audit by the SCO no later than three years after the date the actual reimbursement claim was filed or last amended, whichever is later.

However, if no funds were appropriated or no payment was made to a claimant for the program for the fiscal year for which the claim was filed, the time for the SCO to initiate an audit will commence to run from the date of initial payment of the claim.

Record Retention

All documentation to support actual costs claimed must be retained during the period subject to audit and made available to the SCO upon request. The period subject to audit is at a minimum, three years after the date that the actual reimbursement claim is filed or last amended, whichever is later, or, if no funds are appropriated or no payment is made to a claimant for the program for the fiscal year for which the claim is filed, three years after the date of initial payment of the claim. If an audit has been initiated by the SCO during the period subject to audit, the retention period is extended until the ultimate resolution of any audit findings. Supporting documents must be made available to the SCO on request.

Claim Submission

Electronic submissions of the signed Form FAM-27, all other forms, and supporting documentation are accepted through an online file transfer protocol called the **Data Exchange Portal (DEP)**. All information regarding <u>DEP</u> is available on the SCO's website.

If submitting via mail, submit the documents listed for electronic submission and include an additional copy of the Form FAM-27 to:

Address, if delivered by U.S. Postal Service:

Office of the State Controller
Attn: Local Reimbursements Section
Local Government Programs and Services Division
P.O. Box 942850
Sacramento, CA 94250

Address, if delivered by other delivery service:

Office of the State Controller
Attn: Local Reimbursements Section
Local Government Programs and Services Division
3301 C Street, Suite 700
Sacramento, CA 95816

For more information, contact the Local Reimbursements Section by email.

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	CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM FOR PAYMENT FORM	For State Controller's Office Use Only (19) Program Number 00388 (20) Date Filed (21) LRS Input
(01) Cla	aimant Identification Number	Reimbursement Claim Data
(02) Cla	aimant Name	(22) FORM 1, (04) A.1.(f)
County	of Location	(23) FORM 1, (04) A.2.(f)
Street A	Address or P.O. Box and Suite	(24) FORM 1, (04) B.1.(f)
City, St	ate, and Zip Code	(25) FORM 1, (04) C.1.(f)
(03)	Type of Claim	(26) FORM 1, (04) C.2.(f)
(04)	(09) Reimbursement	(27) FORM 1, (04) C.3.(f)
(05)	(10) Combined	(28) FORM 1, (04) D.1.(f)
(06)	(11) Amended	(29) FORM 1, (04) D.2.(f)
(07)	(12) Fiscal Year of Cost	(30) FORM 1, (04) D.3.(f)
(80)	(13) Total Claimed Amount	(31) FORM 1, (04) E.1.(f)
(14) Les	ss: 10% Late Penalty	(32) FORM 1, (04) E.2.(f)
(15) Les	ss: Prior Claim Payment Received	(33) FORM 1, (04) E.3.(f)
(16) Ne	t Claimed Amount	(34) FORM 1, (04) E.4.(f)
(17) Du	e from State	(35) FORM 1, (04) E.5.(f)
(18) Du	e to State	(36) FORM 1, (04) E.6.(f)
		(37) FORM 1, (04) F.1.(f)
		(38) FORM 1, (04) F.2.(f)
		(39) FORM 1, (04) F.3.(f)
		(40) FORM 1, (04) F.4.(f)
		(41) FORM 1, (04) F.5.(f)

(42) CERTIFICATION OF CLAIM

In accordance with the provisions of Government Code sections 17560 and 17561, I certify that I am the officer authorized by the local agency to file mandated cost claims with the State of California for this program, and certify under penalty of perjury that I have not violated any of the provisions of Article 4, Chapter 1 of Division 4 of Title 1 of the Government Code.

I further certify that there was no application other than from the claimant, nor any grant(s) or payment(s) received for reimbursement of costs claimed herein, and claimed costs are for a new program or increased level of services of an existing program. All offsetting revenues and reimbursements set forth in the parameters and guidelines are identified, and all costs claimed are supported by source documentation currently maintained by the claimant.

The amount for this reimbursement is hereby claimed from the State for payment of actual costs set forth on the attached statements.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Signature of Authorized Officer	Date Signed	
	Telephone Number	
Type or Print Name and Title of Authorized Signatory	Email Address	
(43) Name of Agency Contact Person for Claim	Telephone Number	
	Email Address	
Name of Consulting Firm/Claim Preparer	Telephone Number	
	Email Address	

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PROGRAM 388	CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM FOR PAYMENT INSTRUCTIONS	FORM FAM-27
(01)	Enter the claimant identification number assigned by the State Controller's	Office.
(02)	Enter claimant official name, county of location, street or postal office box city, state, and zip code.	address,
(03) to (08)	Leave blank.	
(09)	If filing a reimbursement claim, enter an "X" in the box on line (09) Reimbu	rsement.
(10)	Not applicable.	
(11)	If filing an amended reimbursement claim, enter an "X" in the box on line (Amended.	11)
(12)	Enter the fiscal year in which actual costs are being claimed. If actual cost than one fiscal year are being claimed, complete a separate Form FAM-27 fiscal year.	
(13)	Enter the amount of the reimbursement claim as shown on Form 1, line (1 total claimed amount must exceed \$1,000; minimum claim must be \$1,001	,
(14)	Initial reimbursement claims must be filed as specified in the claiming instr Claims filed after the specified date must be reduced by a late penalty. En the claim was filed on time. Otherwise, enter the result from the following p calculation formula:	ter zero if
	 Late Initial Reimbursement Claims: Form FAM-27, line (13) multiplie without limitation 	ed by 10%,
(15)	Enter the amount of payment, if any, received for the claim. If no payment received, enter zero.	was
(16)	Enter the net claimed amount by subtracting the sum of lines (14) and (15 (13).) from line
(17)	If line (16), Net Claimed Amount, is positive, enter that amount on line (17) State.), Due from
(18)	If line (16), Net Claimed Amount, is negative, enter that amount on line (18 State.	3), Due to
(19) to (21)	Leave blank.	
(22) to (41)	Bring forward the cost information as specified in the left-hand column of line through (41) for the reimbursement claim, e.g., Form 1, (04) A.1.(f), means information is located on Form 1, block (04), line A, row 1, column (f). Enterinformation on the same line but in the right-hand column. Cost information rounded to the nearest dollar, i.e., no cents. The indirect costs percentage shown as a whole number and without the percent symbol, i.e., 35.19% shown as 35. Completion of this data block will expedite the process.	the r the n should be should be

PROGRAM	CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074	FORM
388	CLAIM FOR PAYMENT	FAM-27
	INSTRUCTIONS (CONTINUED)	

- (42) Read the statement of Certification of Claim. The claim must be signed and dated by the agency's authorized officer, and include their typed or printed name, title, telephone number, and email address. Claims cannot be paid unless accompanied by an original signed certification. Please sign the Form FAM-27 in blue ink or electronic signature. If submitting by U.S. Postal Service or by other delivery service, attach a copy of the FAM-27 to the top of the claim package.
- (43) Enter the name, telephone number, and email address of the agency contact person for the claim. If the claim was prepared by a consultant, type or print the name of the consulting firm, claim preparer, telephone number, and email address.

Electronic submissions of the signed Form FAM-27, all other forms, and supporting documentation are accepted through an online file transfer protocol called the Data Exchange Portal (DEP). All information regarding <u>DEP</u> is available on the SCO's website.

If submitting via mail, submit the documents listed for electronic submission and include an additional copy of the Form FAM-27 to:

Address, if delivered by U.S. Postal Service:

Office of the State Controller

Attn: Local Reimbursements Section

Local Government Programs and Services Division

P.O. Box 942850

Sacramento, CA 94250

Address, if delivered by other delivery service:

Office of the State Controller

Attn: Local Reimbursements Section

Local Government Programs and Services Division

3301 C Street, Suite 700

Sacramento, CA 95816

For more information, contact the Local Reimbursements Section by email.

FORM PROGRAM CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD. SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 **CLAIM SUMMARY** (01) Claimant (02)Fiscal Year 20 /20 (03) Department **Direct Costs Object Accounts** (b) (f) (a) (e) Materials Contract Fixed Total (04) Reimbursable Activities Salaries Benefits and Services Assets Supplies Geomorphic Study (Section C.8.d.iii.) 1. Permittees shall select a waterbody/reach, preferably one that contains significant fish and wildlife resources, and conduct one of the following projects within each county, except that only one such project must be completed within the collective Fairfield-Suisun and Vallejo Permittees' iurisdictions: a. Gather geomorphic data to support the efforts of a local watershed partnership [fn. omitted] to improve creek conditions; or b. Inventory locations for potential retrofit projects in which decentralized, landscape-based stormwater retention units can be installed: or c. Conduct a geomorphic study which will help in development of regional curves which help estimate equilibrium channel conditions for different-sized drainages. Select a waterbody/reach that is not undergoing changing land use. Collect and report the following data: Formally surveyed channel dimensions (profile), planform, and cross-sections. Cross-sections shall include the topmost floodplain terrace and be marked by a permanent, protruding (not flush with ground) monument. Contributing drainage area. Best available information on bankfull discharges and width and depth of channel formed by bankfull

discharges.

Monitoring Report.

rainfall in the study area.

Best available information on average annual

2. Report selected geomorphic project results in the Integrated

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD.

38	38	SAN FRANCISCO BAY R CLA	REGION, OF		R2-2009-007	74		1
(01) Cla	aimant		(02)					scal Year
(00) =							20_	/20
(03) De	partment							
Direct C	osts				Object A	Accounts		
(04) Reii	mbursabl	e Activities (Continued)	(a) Salaries	(b) Benefits	(c) Materials and Supplies	(d) Contract Services	(e) Fixed Assets	(f) Total
B. Sedir	ment Deli	ivery Estimate/Budget (Section C.8.e.vi	.)					
deliv urba by J	very estima an drainag July 1, 201							
	en Monito	oring and Participation (Section C.8.f.) v	which is Re	eimbursable	e for the Cit	ty of Vallejo	and Vallej	o Sanitary
	•	izen Monitoring.						
Trend stake	ds data, m	Monitoring Projects and evaluating Status & ake reasonable efforts to seek out citizen and commation and comment regarding waterbody lality.						
and s cond	stakeholde litions. Rep	nnually the permittee has encouraged citizen or observations and reporting of waterbody ort on these outreach efforts in the annual Monitoring Report.						
D. Moni	toring Re	eporting and Notice (Sections C.8.g.ii.,	C.8.g.vii.)					
5 F [system to s Regional D	shall maintain an information management support electronic transfer of data to the Data Center of the California Environmental ange Network (CEDEN), located within the						
[/- ! c F	Data Repo Ambient M later than c collected d period. Wa	shall submit an Electronic Status Monitoring ort, compatible with the Surface Water onitoring Program (SWAMP) database, no January 15 of each year, reporting on all data during the previous October 1 – September 30 of the quality objective exceedances are to be highlighted in the report.						
ç F t	general pu paper mon	shall notify stakeholders and members of the blic about the availability of electronic and itoring reports through notices distributed propriate means, such as electronic mailing						

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD

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(01) Claimant		(02)				Fi	scal Year
						20_	/20
(03) Department							
Direct Costs		Object Accounts					
		(a)	(b)	(c)	(d)	(e)	(f)
(04) Reimbursable Ad	tivities (Continued)	Salaries	Benefits	Materials and Supplies	Contract Services	Fixed Assets	Total
E. Trash							
(Section C.10.a.i.) management ager Load Reduction Pl schedule, to the R Plan shall describe a. Control measur including any tr being implementation b. Additional cont practices that v level of implementash load redu sewer systems July 1, 2014. c. The Plan shall a	res and best management practices, ash reduction ordinances, currently need and the current level of and the current level of an area and best management will be implemented and/or an increased entation designed to attain a 40 percent action from its municipal separate storm (MS4) by also "account for required mandatory rash Capture devices called for in a.iii. and Trash Hot Spot Cleanup called						

PROGRAM FORM CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 **CLAIM SUMMARY** (01) Claimant (02)Fiscal Year /20 (03) Department **Direct Costs Object Accounts** (c) (d) (a) (b) (e) (f) Materials Contract Fixed Total (04) Reimbursable Activities (Continued) Salaries Benefits Services and Assets Supplies E. Trash Baseline Trash Load and Trash Load Reduction Tracking Method (Section C.10.a.ii.). All permittees, except for flood management agencies, shall comply with the following new requirements: a. Determine the baseline trash load from its MS4. b. Submit the load level to the Regional Board by February 1, 2012. The February 1, 2012, report shall include the following: · Documentation of the methodology used to determine the load level. · A description of the trash load reduction tracking method that will be used to account for trash load reduction actions and to demonstrate progress and attainment of trash load reduction levels. • The submittal shall account for the drainage areas of a Permittee's jurisdiction that are associated with the baseline trash load from its MS4, and the baseline trash load level per unit area by land use type and drainage area characteristics used to derive the total baseline trash load level for each Permittee.

Submit a progress report by February 1, 2011, indicating whether the permittee is determining its baseline trash load and trash load reduction method individually or collaboratively with other Permittees and a summary of the approach being used.

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD,

SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM SUMMARY							
(01) Claimant		(02)					Fiscal Year
						20	0/20
(03) Department							
Direct Costs				Object A	Accounts		
		(a)	(b)	(c)	(d)	(e)	(f)
(04) Reimbursabl	e Activities (Continued)	Salaries	Benefits	Materials and Supplies	Contract Services	Fixed Assets	Total
E. Trash							
as provided b following requirements capture of an area equivalunt Land draining of this requirer A full capture of a full capture of the requirement of the smaller and acreage, it is reduced based per the requirement devices does not be for the which may of full tras J, provide	intain a mandatory minimum number of full devices by July 1, 2014, to treat runoff from alent to 30 percent of Retail/Wholesale to MS4 within their jurisdictions. The scope ment is as follows: ure system or device is "any single device of devices that traps all particles retained in mesh screen and has a design treatment of not less than the peak flow rate Q from a one-year, one-hour, storm in the ge area" atory minimum number of full trash capture or each permittee is identified in Attachment est claim permit, Tables 10-1 and 10-2. If the sum of the areas generating trash permined pursuant to Section C.10.a.ii. is creage than the required trash capture the minimum full trash capture requirement is to the smaller acreage for the population-mittee.						

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD,

SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM SUMMARY							
(01) Claimant	(02)					Fiscal Year 20/20	
(03) Department	<u>. </u>						
Direct Costs	Object Accounts						
(04) Reimbursable Activities (Continued)	(a) Salaries	(b) Benefits	(c) Materials and Supplies	(d) Contract Services	(e) Fixed Assets	(f) Total	
 E. Trash 4. Trash Hot Spots (C.10.b.ii. and iii.) a. The permittees shall each submit selected Trash Hot Spots to the Regional Board by July 1, 2010. (Section C.10.b.ii.) b. Hot Spot Assessments. (Section C.10.b.iii.) i. The San Mateo and Fairfield-Suisun permittees shall comply with the following new requirements: ldentify the dominant types of trash (e.g., glass, plastics, paper) removed. Document the trash conditions before and after clean-up of the entire hot spot using photo documentation with a minimum of one photo per 50 feet of hot spot length. ii. The Contra Costa permittees shall comply with the following requirement: Document the trash conditions before and after clean-up of the entire hot spot using photo documentation with a minimum of one photo per 50 feet of hot spot length. iii. The Vallejo permittees shall comply with the following new requirements: Quantify the volume of material removed from each trash hot spot cleanup. Identify the dominant types of trash removed (e.g., glass, plastics, paper). Document the trash condition before and after clean-up using photo documentation, with a minimum of one photo per 50 feet of hot spot length.)						

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD,

FORM

SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM SUMMARY							
(01) Claimant	(02)					Fiscal Year	
						20/20	
(03) Department							
Direct Costs		Object Accounts					
	(a)	(b)	(c)	(d)	(e)	(f)	
(04) Reimbursable Activities (Continued)	Salaries	Benefits	Materials and Supplies	Contract Services	Fixed Assets	Total	
E. Trash							
5. Long-Term Trash Load Reduction Plan (Section C.10.c.). All permittees, except for flor management agencies, shall submit a Long-T Load Reduction Plan, including an implement schedule, to the Water Board by February 1, 2 Plan shall describe the control measures and management practices, including any trash re ordinances that are being implemented and the implementation and additional control measure management practices that will be implemented an increased level of implementation designed 70 percent trash load reduction from its MS4 I 2017, and 100 percent by July 1, 2022.	Term Trash ation 2014. The best duction he level of res and best ed, and/or d to attain a						
6. Reporting and Document Retention (Sections C.10.d.i. and C.10.d.ii.) a. The Fairfield-Suisun, San Mateo, and Valle permittees shall comply with the following requirement: • In each annual report, report on the types of trash removed and retain th b. All permittees shall comply with the followir requirements: • In each Annual Report, provide total and dominant types of trash for each action, including each trash hot spot pursuant to Section C.10.b and retai records.	dominant ese records. ng new trash loads n type of selected n these						
 Beginning with the 2012 annual repo percent annual trash load reduction 							

the permittee's baseline trash load

PROGRAM FORM CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD. SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 **CLAIM SUMMARY** (01) Claimant (02)Fiscal Year 20 /20 (03) Department **Direct Costs Object Accounts** (c) (b) (d) (e) (f) (a) Materials Contract Fixed Total (04) Reimbursable Activities (Continued) Salaries Benefits and Services Assets Supplies F. Mercury and Polychlorinated Biphenyls (PCBs) Diversion Studies (Sections C.11.f., C.12.f.) 1. Permittees shall conduct feasibility evaluations for mercury and PCBs by selecting five stormwater pump stations and five alternates for each pollutant and evaluate drainage characteristics and the feasibility of diverting flows of each to the sanitary sewer. The feasibility evaluation shall include, but not be limited to, costs, benefits, and impacts on the stormwater and wastewater agencies and the receiving waters relevant to the diversion and treatment of the dry weather and first From these feasibility evaluations, select five pump stations and five alternates for the pilot diversion studies for each pollutant. At least one urban runoff diversion pilot project shall be implemented in each of the five counties (San Mateo, Contra Costa, Alameda, Santa Clara, and Solano). The pilot and alternate locations should be located in the industrially-dominated catchments where elevated PCB concentrations are documented. 3. Implement flow diversion of mercury and PCBs to the sanitary sewer at five pilot pump stations.

As part of the pilot studies, the permittees shall monitor, measure, and report mercury and PCBs load reduction

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD,

CLAIM SUMMARY							1
(01) Claimant		(02)					scal Year
						20)/20
(03) Department							
Direct Costs	<u></u>	<u></u>			Accounts		
(04) Reimbursat	ble Activities (Continued)	(a) Salaries	(b) Benefits	(c) Materials and Supplies	(d) Contract Services	(e) Fixed Assets	(f) Total
F. Mercury and I	Polychlorinated Biphenyls (PCBs) Div	version Stu	dies (Section	ons C.11.f., (C.12.f.)		
a. Summariz the 2010 A the selecti the five ca for pilot studie mercury lo and storm b. Report and each subs c. Include in Report, the evaluation and PCBs	following information to the Regional Board: the results of the feasibility evaluations in Annual Report. The reports shall include ion criteria leading to the identification of andidate and five alternate pump stations tudies; time schedules for conducting the es; and a proposed method for distributing toad reductions to participating wastewater twater agencies. Inually on the status of the pilot studies in sequent annual report. The March 15, 2014 Integrated Monitoring the following information for each study: The of pilot programs effectiveness, mercury is loads reduced, and updated feasibility in procedures to guide future diversion lection.						
(05) Total Direct (Costs						
Indirect Costs			•	•			
(06) Indirect Cos	t Rate		[From	ICRP or 10°	%]		%
(07) Total Indired	ot Costs	[Re	•	Summary In:	•		
(08) Total Direct	and Indirect Costs			b)(f) plus line			
Cost Reduction							
(09) Less: Offse	tting Revenues						
(10) Less: Other	r Reimbursements						
(11) Total Claime	ed Amount	[Line	e (08) minus	{line (09) plu	ıs line (10)}]	_	

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 CLAIM SUMMARY INSTRUCTIONS

- (01) Enter the name of the claimant.
- (02) Enter the fiscal year of costs.
- (03) If more than one department has incurred costs for this mandate, give the name of each department.

 A separate Form 1 should be completed for each department.
- (04) For each reimbursable activity, enter the totals from Form 2, line (05), columns (d) through (h), to Form 1, block (04), columns (a) through (e), in the appropriate row. Total each row.
 - Note: Please refer to the parameters and guidelines for the details of the reimbursable activities.
- (05) Total columns (a) through (f).
- (06) Indirect costs may be computed as 10% of direct labor costs, excluding fringe benefits, without preparing an Indirect Cost Rate Proposal (ICRP). If an indirect cost rate of greater than 10% is used, include the ICRP with the claim.
- (07) Local agencies have the option of using the flat rate of 10% of direct labor costs or using a department's ICRP in accordance with the Office of Management and Budget Circular 2 CFR, Chapter I and Chapter II, Part 200 et al. If the flat rate is used for indirect costs, multiply Total Salaries, line (05)(a), by 10%, excluding fringe benefits. If an ICRP is submitted, multiply applicable costs used in the distribution base for the computation of the indirect cost rate by the Indirect Cost Rate, line (06). If more than one department is reporting costs, each must have its own ICRP for the program.
- (08) Enter the sum of Total Direct Costs, line (05)(f), and Total Indirect Costs, line (07).
- (09) If applicable, enter any offsetting revenue the claimant experiences in the same program as a result of the same statutes or executive orders found to contain the mandate shall be deducted from the costs claimed. In addition, reimbursement for this mandate from any source, including but not limited to, state and federal funds, any service charge, fee, or assessment authority to offset all or part of the costs of this program, and any other funds that are not the claimant's proceeds of taxes shall be identified and deducted from any claim submitted for reimbursement. Submit a schedule detailing the revenue sources and amounts.
- (10) If applicable, enter the amount of other reimbursements received from any source including, but not limited to, service fees collected, federal funds, and other state funds that reimbursed any portion of the mandated cost program. Submit a schedule detailing the reimbursement sources and amounts.
- (11) From Total Direct and Indirect Costs, line (08), subtract the sum of Offsetting Revenues, line (09), and Other Reimbursements, line (10). Enter the remainder on this line and carry the amount forward to Form FAM-27, line (13) of the Reimbursement Claim.

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 ACTIVITY COST DETAIL

FORM

(01) Claimant

(02) Fiscal Year

20___/20___

(03) Reimbursable Activities: Check only one box per form to identify the activity being claimed.

A. Geomorphic Study (Section C.8.d.iii.)

1. Permittees shall select a waterbody/reach, preferably one that contains significant fish and wildlife resources, and conduct one of the following projects within each county, except that only one such project must be completed within the collective Fairfield-Suisun and Vallejo Permittees' jurisdictions:

a. Gather geomorphic data to support the efforts of a local watershed partnership [fn. omitted] to improve creek conditions; or

b. Inventory locations for potential retrofit projects in which decentralized, landscape-based stormwater retention units can be installed; or

c. Conduct a geomorphic study which will help in development of regional curves which help estimate equilibrium channel conditions for different-sized drainages. Select a waterbody/reach that is not undergoing changing land use. Collect and report the following data:

• Formally surveyed channel dimensions (profile), planform, and cross-sections. Cross-sections shall include the topmost floodplain terrace and

- Contributing drainage area.
- Best available information on bankfull discharges and width and depth of channel formed by bankfull discharges.
- Best available information on average annual rainfall in the study area.

be marked by a permanent, protruding (not flush with ground) monument.

2. Report selected geomorphic project results in the Integrated Monitoring Report.

3.	Sediment Delivery Estimate/Budget (Section C.8.e.vi.) 1. Permittees shall develop a design for a robust sediment delivery estimate/sediment budget in local tributaries and urban drainages by July 1, 2011, an implement the study by July 1, 2012.
С.	Citizen Monitoring and Participation (Section C.8.f.) which is Reimbursable for the City of Vallejo and Vallejo Sanitary District only: 1. Encourage Citizen Monitoring.
	☐ 2. In developing Monitoring Projects and evaluating Status & Trends data, make reasonable efforts to seek out citizen and stakeholder information and comment regarding waterbody function and quality.

☐ 3. Demonstrate annually the permittee has encouraged citizen and stakeholder observations and reporting of waterbody conditions. Report on these

D. Monitoring Reporting and Notice (Sections C.8.g.ii., C.8.g.vii.)

outreach efforts in the annual Urban Creeks Monitoring Report.

- ☐ 1. Permittees shall maintain an information management system to support electronic transfer of data to the Regional Data Center of the California Environmental Data Exchange Network (CEDEN), located within the San Francisco Estuary Institute.
- ☐ 2. Permittees shall submit an Electronic Status Monitoring Data Report, compatible with the Surface Water Ambient Monitoring Program (SWAMP) database, no later than January 15 of each year, reporting on all data collected during the previous October 1-September 30 period. Water quality objective exceedances are required to be highlighted in the report.
- ☐ 3. Permittees shall notify stakeholders and members of the general public about the availability of electronic and paper monitoring reports through notices distributed through appropriate means, such as an electronic mailing list.

E. Trash

- ☐ 1. Short-Term Trash Load Reduction Plan (Section C.10.a.i.) All permittees, except for flood management agencies, shall submit a Short-Term Trash Load Reduction Plan, including an implementation schedule, to the Regional Board by February 1, 2012. The Plan shall describe the following:
 - a. Control measures and best management practices, including any trash reduction ordinances, currently being implemented and the current level of implementation.
 - b. Additional control measures and best management practices that will be implemented, and/or an increased level of implementation designed to attain a 40 percent trash load reduction from its Municipal Separate Storm Sewer System (MS4) by July 1, 2014.
 - c. The Plan shall also "account for required mandatory minimum Full Trash Capture devices called for in Provision C.10.a.iii. and Trash Hot Spot Cleanup called for in Provision C.10.b."

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 ACTIVITY COST DETAIL

FORM

(01) Claimant	(02)	Fiscal Year
		20/20

(03) Reimbursable Activities (continued): Check only one box per form to identify the activity being claimed.

E. Trash (Continued)

☐ 2. Baseline Trash Load and Trash Reduction Tracking Method (Section C.10.a.ii.). All permittees, except for flood management agencies, shall comply with the following new requirements:

- Determine the baseline trash load from its MS4.
- 5. Submit the load level to the Regional Board by February 1, 2012. The February 1, 2012, report shall include the following:
 - Documentation of the methodology used to determine the load level.
 - A description of the trash load reduction tracking method that will be used to account for trash load reduction actions and to demonstrate progress and attainment of trash load reduction levels.
 - The submittal shall account for the drainage areas of a Permittee's jurisdiction that are associated with the baseline trash load from its MS4, and the baseline trash load level per unit area by land use type and drainage area characteristics used to derive the total baseline trash load level for each Permittee.
- c. Submit a progress report by February 1, 2011, including whether the permittee is determining its baseline trash load reduction method individually or collaboratively with other Permittees and a summary of the approach being used.
- ☐ 3. Minimum Full Trash Capture (Section C.10.a.iii.). Except as provided below, all permittees shall comply with the following requirements: Install and maintain a mandatory minimum number of full trash capture devices by July 1, 2014, to treat runoff from an area equivalent to 30 percent of Retail/Wholesale Land draining to MS4 within their jurisdictions. The scope of the requirement is as follows:
- A full capture system or device is "any single device or series of devices that traps all particles retained by a 5 mm mesh screen and has a design treatment capacity of not less than the peak flow rate Q resulting from a one-year, one-hour, storm in the subdrainage area".
- The mandatory minimum number of full trash capture devices for each permittee is identified in Attachment J to the test claim permit, Tables 10-1 and 10-2. However, if the sum of the areas generating trash loads determined pursuant to Section C.10.a.ii. is a smaller acreage than the required trash capture acreage, the minimum full trash capture requirement is reduced to the smaller acreage for the population-base permittee.

The requirements to install and maintain full trash capture devices does not apply:

- To a population-based permittee with a population less than 12,000 and retail/wholesale land less than 40 acres, or a population less than 2,000.
- To full trash capture devices installed by a permittee *before* the effective date of the test claim permit, which may be counted towards the minimum number of full trash capture devices identified in Attachment J, provided the device meets the permit's definition of a full trash capture device.

4. Trash Hot Spots (C.10.b.ii. and iii.)

- a. The permittees shall each submit selected Trash Hot Sports to the Regional Board by July 1, 2010 (Section C.10.b.ii.)
- b. Hot Spots Assessments. (Section C.10.b.iii.)
 - The San Mateo and Fairfield-Suisun permittees shall comply with the following requirements:
 - Identify the dominant types of trash (e.g., glass, plastics, paper) removed.
 - Document the trash conditions before and after clean-up of the entire hot spot using photo documentation with a minimum of one photo per 50 feet of hot spot length.
 - ii. The Contra Costa permittees shall comply with the following new requirement:
 - Document the trash conditions before and after clean-up of the entire hot spot using photo documentation with a minimum of one photo per 50 feet of hot spot length.
 - iii. The Vallejo permittees shall comply with the following new requirements:
 - Quantify the volume of material removed from each trash hot spot cleanup.
 - Identify the dominant types of trash removed (e.g., glass, plastics, paper).
 - Document the trash condition before and after clean-up using photo documentation, with a minimum of one photo per 50 feet of hot spot length.

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 ACTIVITY COST DETAIL

FORM

2

,		ACTIVITY	OSI DETAIL	_			
(01) Claimant		(02)	Fiscal Year			
				20/20			
(03) Reimbursab	le Activities (continued): Check only one box p	er form to identify the activity being claimed.				
E.	Reduction Plan, management pr and best management	n Trash Load Reduction Plan (Section C.10.c.). All permitte including an implementation schedule, to the Water Board actices, including and trash reduction ordinances, that are l	res, except for flood management agencies, shall submit a Lo by February 1, 2014. The Plan shall describe the control me being implemented and the level of implementation and addit devel of implementation designed to attain a 70 percent tras	asures and best ional control measures			
	a. The F • I b. All pe • I	oursuant to Section C.10.b. and retain these records.	mply with the following new requirement: removed and retain these records.	•			
F.	☐ 1. Permittees and evaluate dra	ainage characteristics and the feasibility of diverting flows on benefits, and impacts of the stormwater and wastewater a	ctions C.11.f., C.12.f.) s by selecting five stormwater pump stations and five alternat of each to the sanitary sewer. The feasibility evaluations shall gencies and the receiving waters relevant to the diversion ar	include, but not be			
	☐ 2. From these feasibility evaluations, select five pump stations and five alternates for the pilot diversion studies for each pollutant. At least on diversion pilot project shall be implemented in each of the five counties (San Mateo, Contra Costa, Alameda, Santa Clara, and Solano). The pilotocations should be located in industrially-dominated catchments where elevated PCB concentrations are documented.						
	3. Implemen	flow diversion of mercury and PCBs to the sanitary sewer	at five pilot pump stations.				
	☐ 4. As part of	the pilot studies, the permittees shall monitor, measure, an	d report mercury and PCBs load reduction.				
	a. Sumn identi metho b. Repo c. Includ	ication of the five candidate and five alternate pump station of for distributing mercury load reductions to participating wet annually on the status of the pilot studies in each subsequent.	uent annual report. following information for each study: evaluation of pilot progra	idies; and a proposed			

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 ACTIVITY COST DETAIL

FORM

2

(01) Claimant			(02)				Fiscal Year
							20/20
(04) Description of Expenses	Object Accounts						
(a) Employee Names, Job Classifications, Functions Performed, and Description of Expenses	(b) Hourly Rate or Unit Cost	(c) Hours Worked or Quantity	(d) Salaries	(e) Benefits	(f) Materials and Supplies	(g) Contract Services	(h) Fixed Assets
(05) Total Subtotal	Page:	_of					

CALIFORNIA REGIONAL WATER QUALITY CONTROL BOARD, SAN FRANCISCO BAY REGION, ORDER NO. R2-2009-0074 ACTIVITY COST DETAIL INSTRUCTIONS

FORM

2

- (01) Enter the name of the claimant.
- (02) Enter the fiscal year of costs.
- (03) A separate Form 2 must be prepared for each applicable activity.

Note: Please refer to the parameters and guidelines for the details of the reimbursable activities.

(04) The following table identifies the type of information required to support reimbursable costs. To itemize costs for the activity in block (03), enter each employee name, job classification, a brief description of the activities performed, productive hourly rate, actual time spent, fringe benefits, supplies used, contract services, and fixed assets. The descriptions required in column (04)(a) must be of sufficient detail to explain the cost of activities or items being claimed.

Required Documentation to Support Reimbursable Costs									
Object Accounts	Columns							Submit Supporting Documents with the Claim	
	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	
Salaries	Employee Name and Job Classification	Hourly Rate	Hours Worked	Salaries equal Hourly Rate times Hours Worked					Copy of Timesheets
Benefits	Activities Performed	Benefit Rate			Benefits equal Benefit Rate times Salaries				
Materials and Supplies	Description of Supplies Used	Unit Cost	Quantity Used			Costs equal Unit Cost times Quantity Used			Copy of Invoices
Contract Services	Name of Contractor and Specific Tasks Performed	Hourly Rate	Hours Worked and Inclusive Dates of Service				Costs equal Hourly Rate times Hours Worked or Total Contract Cost		Copy of Contract and/or Invoices
Fixed Assets	Description of Equipment Purchased	Unit Cost times Quantity	Usage					Costs equal Total Cost times Usage	Copy of Contract and/or Invoices

(05) Total line (04), columns (d) through (h) and enter the sums on this line. Check the appropriate box to indicate if the amount is a total or subtotal. If more than one form is needed to detail activity costs, number each page. Enter totals from line (05), columns (d) through (h) to Form 1, block (04), columns (a) through (e) in the appropriate row.