**Air Quality,
Greenhouse Gases,
Noise Analysis**

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From: Noah Tanski, NTEC
Date: September 20, 2022

RE: **Response to Air Quality and Noise Comments on Sustainable Communities Environmental Assessment, Dinah's Sepulveda Project (ENV-2021-4938-SCEA)**

Dear Chair Dawson, Honorable PLUM Committee Councilmembers, and Mr. Song:

Noah Tanski Environmental Consulting ("NTEC") has reviewed the comment letter submitted to the City of Los Angeles on behalf of Supporters Alliance for Environmental Responsibility ("SAFER") regarding the Sustainable Communities Environmental Assessment ("SCEA") prepared for the Dinah's Sepulveda Project ("Project"). Based on my technical review, SAFER's comment letter and the accompanying exhibits from SWAPE and Wilson Ihrig do not raise any new CEQA issues and do not require any change to any conclusion identified in the SCEA.

Please do not hesitate to contact me if you have any questions or require additional information.

Sincerely,

Noah Tanski, Principal

Exhibit A – Indoor Environmental Engineering Letter

Indoor Formaldehyde Concentrations Impact

It should be noted at the outset that Mr. Offermann's alleged effects of formaldehyde on the future residents of the Project would not be considered an impact under CEQA because of the Supreme Court's holding in *California Building Industry Ass'n v. Bay Area Air Quality Mgmt. Dist.* (2015) 62 Cal.4th 369, 386 that CEQA does not require the evaluation of the impact of the existing environment on future Project residents, unless the Project exacerbates the impact. There is no evidence that there is an existing formaldehyde issue at the Project Site or that the Project would exacerbate any such existing issue. For that reason alone, the entire discussion of formaldehyde impacts is irrelevant to the SCEA's analysis of potential air quality impacts. Notwithstanding, the remainder of this response demonstrates that there is no substantial evidence supporting Mr. Offermann's claims.

Mr. Offermann claims that the Project would consist of residential and commercial spaces and expose its future residents and employees to airborne cancer risks in excess of 10 per million due to formaldehyde emissions and that this would constitute a significant impact. However, Mr. Offermann provides no credible evidence that the Project will be constructed with significant amounts of formaldehyde-producing materials, cites articles with limited correlation to the Project, and makes unsupported claims regarding presumed formaldehyde levels and associated exposure.

Mr. Offermann introduces the correlation between indoor formaldehyde concentrations and cancer risk by citing the results of the 2009 California New Home Study (CNHS), which he authored. Mr. Offermann notes that in the CNHS study of "108 new homes in California," the median indoor formaldehyde concentration was 36 $\mu g/m^3$. "Therefore," he claims, "the cancer risk of a resident living in a California home with the median indoor formaldehyde concentration of 36 $\mu g/m^3$, is 180 per million as a result of formaldehyde alone." However, no such sweeping conclusion can be supported by the results of the CNHS study, because the study's research was limited to only 108 detached single-family homes built between 2002 and 2004. The study itself refrains from inferring such a broad conclusion, and there is no evidence or rationale supporting why such a narrowly tailored selection of study homes constructed nearly 20 years ago should be – or could be – broadly representative of statewide conditions. Moreover, as discussed below, any homes built between 2002 and 2004 were not subject to the state's most current regulations to limit formaldehyde emissions from wood products promulgated by the California Air Resources Board ("CARB"), making Mr. Offermann's conclusion even more specious.

Mr. Offermann then engages in a series of inaccurate statements and unfounded speculation in his process of surmising the Project's future indoor formaldehyde concentration and alleged risk it may pose to futureProject residents. Fundamental to Mr. Offermann's claims is a 2020 paper by Singer et al.[1] that presents the methods and results of the Healthy Efficient New Gas Home (HENGH) study. Mr. Offermann is credited as a co-author of this paper. The discussion below explains why each step in Mr. Offermann's analysis is variously misguided and erroneous, unsupported by neither fact nor the HENGH study.

Mr. Offermann begins by mischaracterizing critical details of the HENGH study, inaccurately stating the study "found that median indoor formaldehyde in new homes built after 2009 with CARB Phase 2

[1] *Singer, B.C., Chan, W.R., Kim, Y., Offermann, F.J., and Walker I.S. 2020. Indoor Air Quality in California Homes with Code-Required Mechanical Ventilation. Indoor Air, Vol 30, Issue 5, 885-899.*

Formaldehyde ATCM materials had…median indoor concentrations of 22.4 µg/m^3 (18.2 ppb)." This is incorrect: though the study did find that its 70 sample homes had a median indoor formaldehyde concentration of 18.2 ppb, the study offers no evidence, nor does it explicitly express or infer, that sampled homes were built with CARB Phase 2 ATCM materials. Specifically, while the HENGH study assessed 70 sample homes that were built between 2011 and 2017, the final Phase 2 ATCM rules did not go into effect until January 2014. Thus, not all sampled homes were built after the final Phase 2 ATCM rules went into effect, and it is even possible that some homes built after January 2014 were constructed of materials that were purchased prior to this deadline. Therefore, contrary to Mr. Offermann's statement, the HENGH study does not establish – nor could it establish – that median indoor formaldehyde concentrations in new homes built with CARB Phase 2 ATCM materials are 22.4 µg/m^3 or 18.2 ppb.

Next, Mr. Offermann further embellishes his interpretation of the results of the HENGH study by applying what he terms a "correction" to the study's 22.4 µg/m^3 (18.2 ppb) median indoor formaldehyde concentration finding, thereby resulting in a "true" median indoor formaldehyde concentration of 24.1 µg/m^3. He explains this "correction" by stating that "formaldehyde concentrations in the HENGH study were measured with passive samplers, which were estimated to under-measure the true indoor formaldehyde concentrations by approximately 7.5%." Upon reviewing the HENGH study itself, the authors note that Offermann (this same commenter) and another co-author "have shown that sampling rates for…passive monitors start to drop sharply when air velocity falls below about 75 [centimeters per minute]." However, the HENGH study subsequently acknowledges other household research that reports how "such low air velocities were infrequent." The authors of the HENGH study then reason that "it is possible that sampling rates could have been lower than the assumed standard values at some times in some homes," but concede that the HENGH study "did not measure velocities around the passive samplers" or "verify measured concentrations with pumped samples." Thus, by the study's own admission, there is no evidence that low air velocities were ever a factor during the passive sampling of indoor formaldehyde levels. Contrary to Mr. Offerman's current comment, the consideration or application of a 7.5% "correction" is not evident anywhere in the paper by Singer et al. Where the paper reports its findings, it reports the 18.2 ppb figure which correlates with Mr. Offermann's original 22.4 µg/m^3 figure – not his "corrected" 24.1 µg/m^3 figure (See Exhibit 1).

Exhibit 1
HENGH Study Median Formaldehyde ("HCHO") Concentrations

Table 3. Time-averaged pollutant concentrations in California homes built 2011-2017 (HENGH, current study) and 2002-2005 (CNHS, Offermann, 2009).

Location	HCHO	(ppb)	$PM_{2.5}$	($\mu g/m^3$)	NO_2	(ppb)	CO_2	(ppm)
Statistic	HENGH	CNHS[1]	HENGH	CNHS[1]	HENGH	CNHS[1]	HENGH	CNHS[2]
Indoor	N=68	N=105	N=67	N=28	N=66	N=29	N=69	N=107
Mean	19.8	35.0	7.5	13.4	5.8	5.2	620	610
Median	18.2	29.3	4.8	10.5	4.5	1.6	608	564
10^{th}–90^{th}	13–28	11–70	1.6–16	6.0–31	1.1–12	1.4–12	481–770	405–890
Outdoor	N=66	N=39[4]	N=67[3]	N=11[4]	N=65	N=11[4]	No data	No data
Mean	2.2	1.8	9.3, 10.5	7.9	5.4	2.1		
Median	2.3	1.7	6.8, 9.7	8.7	3.6	1.5		
10^{th}–90^{th}	1.4–3.1	0.6–2.8	2.7–18.1, 5.3–16.7	5.0–10	0.1–11	1.4–1.7		

As indicated in the red box, Singer et al. reports that median formaldehyde concentrations in HENGH study homes were 18.2 ppb, which correlates with Mr. Offermann's original 22.4 µg/m³ concentration, not his "corrected" 24.1 µg/m³ figure. (Singer et al.)

Based on his erroneously "corrected" 24.1 µg/m³ figure, Mr. Offermann claims "the median lifetime cancer risk is still 120 per million for homes built with CARB compliant composite wood products." This is despite the fact that the original 22.4 µg/m³ figure is based in part on sample homes that were built prior to CARB Phase 2 ATCM rules going into effect, as well as the fact that the "corrected" 24.1 µg/m³ figure utilized by Mr. Offermann has no evidentiary basis.

Mr. Offermann expands on his flawed analysis when discussing the alleged impact on the Project's future residents. He starts by stating that "residential occupants will potentially have continuous exposure (e.g., 24 hours per day, 52 weeks per year)." In other words, Mr. Offermann assumes that a Project resident will spend every second of every day within their apartment. This is clearly inaccurate. Not only is this assumption unsupported by any fact or evidence cited by Mr. Offermann, but it is also directly contradicted by the evidence cited by Mr. Offermann himself, who earlier in his comment letter references the EPA's *Exposure Factors Handbook: 2011 Edition* when stating that "occupants, on average, spend approximately ninety percent of their time indoors with the majority of this time spent at home" (See Exhibit 2). Mr. Offermann's continuous exposure assumption also contradicts "Fraction of Time At Home" ("FAH") assumptions made by SWAPE in its separate analysis of the Project's potential diesel particulate matter (DPM) impacts (See SAFER Letter's Exhibit B), which assumes a FAH value of 0.73 for adult receptors that is consistent with relevant OEHHA guidance (See Exhibit 3).[2] In other words, SWAPE's analysis, which along with Mr. Offermann's comments is being offered in support of SAFER's current objections, assume that an adult receptor spends 73% of their time at home – not 100%. Therefore, Mr.

[2] *OEHHA, The Air Toxics Hot Spots Program Guidance Manual for Preparation of Health Risk Assessments, February 2015.*

Offermann's continuous exposure assumptions for residential occupants are not even consistent with his own prior statements or his fellow experts' assumptions, let alone OEHHA recommendations.

Exhibit 2

Commission, 2014; USGBC, 2014). Indoor air quality in homes is particularly important because occupants, on average, spend approximately ninety percent of their time indoors with the majority of this time spent at home (EPA, 2011). Some segments of the

Highlighted excerpt from Mr. Offermann's letter to Victoria Yundt

Exhibit 3
OEHHA "FAH" Values for Receptors

Table 8.4 Recommendations for Fraction of Time at Home (FAH) for Evaluating Residential Cancer Risk

Age Range	Fraction of Time at Residence
3rd Trimester, and 0<2 years	0.85[1]
2<16 years[2]	0.72[1]
16-70 years[3]	0.73

As indicated in the red box, the OEHHA's recommended "FAH" assumption for adult receptors is 0.73, or 73% of time spent at home. "FAH" recommendations for other age groups are also shown for reference. (OEHHA, 2015)

Mr. Offermann then launches a flurry of speculation, claiming that because the Project "will be constructed with CARB Phase 2 Formaldehyde ATCM materials, and be ventilated with the minimum code-required amount of outdoor air, the indoor residential formaldehyde concentrations are likely similar to those concentrations observed in residences built with CARB Phase 2 Formaldehyde ATCM materials, which is a median of 24.1 µg/m^3." Mr. Offermann again cites Singer et al. (which he himself co-authored) in support of this statement. As explained earlier, Singer et al. concedes a lack of evidence surrounding whether low air velocities were ever a factor during the HENGH study's passive sampling of indoor formaldehyde levels, and the paper's published findings report an 18.2 ppb figure which correlates with Mr. Offermann's non-"corrected" 22.4 µg/m^3 figure. The application of a 7.5% "correction" that correlates with Mr. Offermann's 24.1 µg/m^3 figure is not evident in Singer et al. Therefore, Mr. Offermann's citation referencing Singer et al. in support of this dodgy "correction" is not supportable. Furthermore, and as also explained earlier, the HENGH study addressed by Singer et al. sampled homes that were constructed several years prior to the full rollout of CARB Phase 2 formaldehyde emission standards. Singer et al. neither explicitly states nor infers that sample homes were built with CARB Phase 2 compliant materials, nor does it suggest that its formaldehyde findings should be interpreted in the manner that Mr. Offermann has undertaken. Therefore, Mr. Offermann's reasoning that the Project would contain similar indoor residential formaldehyde concentrations as HENGH study sample homes, as well as his referencing Singer et al. in support of this reasoning, is both inaccurate and unfounded.

Mr. Offermann speculates further when he states that the Project's indoor residential formaldehyde concentrations would be "likely similar" to concentrations observed by the HENGH study because the Project "will…be ventilated with the minimum code required amount of outdoor air." Mr. Offermann demonstrates no understanding of what the "minimum code required amount of outdoor air" would be for the Project, nor does he support this allegation with any evidence. Moreover, Mr. Offermann

demonstrates no understanding of what ventilation the HENGH study sample homes achieved. He fails to substantiate why the Project – which proposes a multi-family mid-rise apartment building and constructed of steel, concrete, and wood products – would have any similarity in ventilation to the 70 detached single-family homes constructed between 2011 and 2017 that were sampled as part of the HENGH study, and he fails to establish why presumably similar ventilation would even contribute to presumably similar indoor residential formaldehyde concentrations in future Project dwelling units.

Mr. Offermann's analysis hinges entirely on the assumption that the Project's dwelling units would experience similar indoor formaldehyde concentrations as HENGH study sample homes. But, as demonstrated, this assumption is wholly unsupported by fact. There are additional aspects of the HENGH study – aspects that have not been considered by Mr. Offermann at all – which further diminish its comparative value to the Project.

First, the HENGH study sample homes were occupied and therefore presumably furnished. This is a critical detail overlooked by Mr. Offermann. Formaldehyde off-gassing occurs not just from composite wood products used in building construction, but also from composite wood products used commonly in furniture construction. Tables, bed frames, dressers, sofas, chairs, and any other furniture containing composite wood products would also likely emit formaldehyde, possibly at high levels if such furniture was purchased prior to the CARB Formaldehyde ATCM or outside of California. Common indoor sources of formaldehyde also include household products such as glues, paints, caulks, pesticides, fabric softeners, and detergents. Even personal care products and cosmetics such as shampoos, soaps, hair care products, body washes, and nail polish may release formaldehyde. Moreover, many consumer products also emit VOCs that react with ozone in the air to produce formaldehyde.[3] The HENGH study did not determine or speculate what proportion of its measured formaldehyde concentrations were resultant from building materials only. Therefore, there is no way of knowing what measured proportion of indoor formaldehyde concentrations were emitted solely by the building construction materials used in HENGH study sample homes. This is a pivotal consideration because Mr. Offermann's analysis relies on the flawed assumption that the Project's building construction materials alone would subject future Project occupants to formaldehyde concentrations that are similar to those measured in the HENGH study, without acknowledging that formaldehyde emissions from the objects (i.e., composite wood furniture) and actions (i.e., use of pesticides, detergents or personal care products) of HENGH study occupants would have also been captured in the measurements of the HENGH study. Formaldehyde emissions associated with the potential objects and actions of future occupants would be outside the scope of the Project's CEQA-related impacts. However, by claiming that future Project occupants would experience similar indoor formaldehyde concentrations as measured in the HENGH study, Mr. Offermann puts the Project "on the hook" for an indeterminate amount of formaldehyde emissions that were caused by the objects and actions of HENGH study participants.

Second, it is worth noting that the HENGH study specifically instructed participants not to use windows and doors normally as they might do for routine ventilation (See Exhibit 4). This clearly biases the study's results in favor of increased indoor formaldehyde concentrations. While such instruction may have been relevant to the purpose of the HENGH study, in real life, it is entirely unreasonable to assume that future Project residents would similarly refrain from opening their windows or doors for purposes of natural ventilation.

[3] *CARB, Formaldehyde Online Fact Sheet. ww.2.arb.ca.gov/resources/fact-sheets/formaldehyde. May 1, 2020.*

Exhibit 4

appliance use. The participant was provided with an activity log for each day of the study and asked to partake in normal household activities with the exception that windows and doors should not be used for routine ventilation. Most homes were monitored for seven days, five were

The highlighted excerpt indicates that HENGH study participants were instructed to not use windows and doors for "routine ventilation." (Singer et al.)

Mr. Offermann then assumes that because "residential occupants inhale 20 m^3 of air per day," a claim that he makes without any supporting evidence and which appears to be inaccurate,[4] "the average 70-year lifetime formaldehyde daily dose is 482 µg/day for continuous exposure in the residences," which he equates with "a cancer risk of 120 per million." There are at least two issues with this projection (that are in addition to the myriad issues that have already been identified and discussed).

First, Mr. Offermann cites no authority in support of his assumed "70-year lifetime" exposure duration. In fact, his assumption of a "70-year lifetime" exposure duration contradicts assumptions made by SWAPE, the commenter's other expert. Specifically, in SWAPE's "Screening-Level Analysis" of the Project's potential DPM impacts (See the SAFER Letter's Exhibit B), the estimated cancer risk to a "maximally exposed individual resident" ("MEIR") is calculated by utilizing a 30-year exposure duration that is consistent with OEHHA recommendations for estimating individual cancer risks. This demonstrates, once again, how Mr. Offermann has resorted to speculative assumptions that are not supported by either OEHHA or his fellow experts.

Second, by assuming that a future Project resident would inhale 482 µg/day of formaldehyde for 70 years, Mr. Offermann overlooks the fact that emissions of formaldehyde gas from composite wood products decrease over time. This is perhaps the most serious deficiency in his analysis. The OEHHA's Proposition 65 webpage for formaldehyde notes how "the release of formaldehyde gas from composite wood decreases over time."[5] The U.S. Consumer Product Safety Commission also notes that for formaldehyde sources, "emissions generally decrease as the product ages."[6] CARB explains that "[f]or products that are made with formaldehyde-based resins or adhesives, rapid off-gassing of formaldehyde occurs initially when the product is made, and over time the formaldehyde emissions decrease."[7] The CDC's Agency for Toxic Substances and Disease Registry (ATSDR) states that "[m]ost formaldehyde is released from

[4] *According to the American Lung Association, the average person inhales approximately 2,000 gallons of air per day, or roughly 7.57 cubic meters per day.* (*American Lung Association, How Your Lungs Get the Job Done, https://www.lung.org/blog/how-your-lungs-work, accessed July 18, 2022.)*

[5] *OEHHA, Formaldehyde in Furniture Products. P65warnings.ca.gov/fact-sheets/formaldehyde-furnitureproducts. April 2016.*

[6] *U.S. Consumer Product Safety Commission (CPSC), An Update on Formaldehyde. Publication 725. 2013.*

[7] *CARB, Frequently Asked Questions for Consumers (Reducing Formaldehyde Emissions from Composite Wood Products). Accessed July 13, 2022.*

products within 2 years."[8] The CDC's ATSDR raises a particularly salient point: because nearly 70% of HENGH study sample homes were two years old or newer when sampled, it suggests that these homes' percentages of indoor formaldehyde concentrations from building materials were likely temporarily elevated at the time of the HENGH study due to the age of these homes. Over time, formaldehyde concentrations associated with these homes' building materials would be expected to attenuate, consistent with the aforementioned OEHHA, U.S. Consumer Product Safety Commission, CARB, and CDC ATSDR guidance. But Mr. Offermann's analysis runs contrary to this understanding of formaldehyde emissions. Without accounting for the natural decay of formaldehyde emissions over time, Mr. Offermann assumes that a resident's exposure to indoor formaldehyde concentrations from the Project's composite wood building materials would be exactly the same whether it is the first day or the 70th year of their occupancy – a clearly erroneous assumption.

In summary, the following is a review of the various issues associated with Mr. Offerman's baseless claims and analysis regarding alleged formaldehyde impacts to future Project residents:

1. Contrary to statements made by Mr. Offermann, the HENGH study did not measure indoor formaldehyde concentrations in new homes built only with CARB Phase 2 Formaldehyde ACTM materials, and the study does not establish what median indoor formaldehyde concentrations for such homes might be.

2. Mr. Offermann's proposed 7.5% "correction" to the 22.4 µg/m^3 (18.2 ppb) median indoor formaldehyde concentration finding by the HENGH study is unsupported by the HENGH study itself, and Mr. Offermann's purported "corrected" figure is not evident anywhere in the study.

3. Mr. Offermann assumes future Project residents will spend every minute of every day in their apartments, an assumption that is consistent with neither his fellow experts nor the OEHHA.

4. In making claims about the Project's ventilation, Mr. Offermann demonstrates no understanding of what the Project's ventilation would be or what the HENGH sample homes' ventilation was. Additionally, he fails to substantiate why the Project – which proposes a multi-family mid-rise apartment building with 350 dwelling units – would have any similarity regarding either formaldehyde concentrations or ventilation to the 70 detached single-family homes that were sampled as part of the HENGH study.

5. Mr. Offermann overlooks the fact that HENGH study sample homes were occupied and therefore presumably furnished. The HENGH study did not determine or speculate what proportion of its measured formaldehyde concentrations were resultant from building materials only. It also did not determine or speculate what proportion of concentrations were due to consumer product use by sample home occupants. By assigning the median formaldehyde concentrations measured by the HENGH study to the Project, Mr. Offermann seeks to hold the Project accountable for the impact of formaldehyde emissions that are outside the scope of CEQA relevance (i.e., formaldehyde emissions from the objects and actions of residents – not solely those that may be directly emitted by the Project's building materials).

[8] *Agency for Toxic Substances and Disease Registry (ATSDR), Formaldehyde in Your Home: What You Need to Know. atsdr.cdc.gov/formaldehyde/home/index.html. Accessed July 13, 2022.*

6. The HENGH study specifically instructed participants to not use windows and doors normally as they might do for routine ventilation, a condition that limits the real-world applicability of the study's findings.

7. Mr. Offermann's cancer risk projection for future Project residents relies on a "70-year lifetime" exposure duration, a speculative assumption that is supported by neither the OEHHA nor his fellow experts.

8. Mr. Offermann blatantly disregards the fact that emissions of formaldehyde gas from composite wood products decrease over time.

Given these considerations, Mr. Offermann's analysis offers no substantial evidence as to why the Project's formaldehyde emissions would be expected to result in significant cancer risks to future Project residents and employees. Under Public Resources Code Section 21082.2(c), "[a]rgument, speculation, unsubstantiated opinion or narrative, evidence which is clearly inaccurate or erroneous, or evidence of social or economic impacts which do not contribute to, or are not caused by, physical impacts on the environment, is not substantial evidence. Substantial evidence shall include facts, reasonable assumptions predicated upon facts, and expert opinion supported by facts." Mr. Offermann's inferences from the HENGH study findings are not reasonable, and at times they directly contradict the explicit admissions and published results of that study itself. Mr. Offermann's assumptions are also erroneous, and at times they directly contradict both OEHHA guidance and the assumptions of his own fellow experts. Furthermore, Mr. Offermann's conclusion that the Project would result in significant cancer risks and that CARB ATCM regulations "do not assure healthful indoor air quality" directly contradict statements from numerous State and Federal agencies regarding formaldehyde emissions, including CARB itself. CARB states "[f]rom a public health standpoint, the CWP Regulation's emission standards [i.e., the CARB ATCM] are set at low levels intended to protect public health." CARB reiterates this elsewhere, stating "[t]he Composite Wood Products Regulation establishes emission standards at levels intended to protect public health." The CDC adds that "[f]ormaldehyde exposure from new products or new construction in the home would generally be much lower and would last for less time than the exposures linked to cancer. We estimated the risk of cancer from exposure to typical indoor air levels and it's low."

Following Mr. Offermann's erroneous conclusions regarding the Project's alleged cancer risk to future residents and employees, he introduces an analysis under Appendix A of his letter as evidence that "utilization of CARB Phase 2 Formaldehyde ATCM materials will not ensure acceptable cancer risks with respect to formaldehyde emissions from composite wood products." However, Mr. Offermann's Appendix A analyses do not explicitly establish a correlation between formaldehyde concentrations associated with CARB Phase 2 Formaldehyde ATCM materials and cancer risk to residents. Specifically, he does not estimate formaldehyde concentrations associated with these materials, he does not demonstrate what cancer risks would be associated with the use of these materials, and – critically – he does not identify any of his assumptions regarding exposure of residents (e.g., years of exposure, fraction of time at home, etc.). Absent these details, the Appendix A analyses lack any necessary evidence to support Mr. Offermann's claim. And, if a claim lacks evidence, then it naturally lacks substantial evidence.

Mr. Offermann then proposes an alternate methodology he believes the Project should utilize to assess "whether the indoor concentrations resulting from the formaldehyde emissions of specific building materials/furnishings selected exceed cancer and non-cancer guidelines." As an initial point, as noted above, the alleged impact of formaldehyde on the future residents of the Project is not relevant to CEQA. Additionally, the City of Los Angeles is the lead agency for CEQA review of the Project, and therefore has

the discretion to apply thresholds of significance and correspondingly appropriate methodologies used for impact analysis. Here, the City has applied appropriate air quality thresholds of significance and methodologies, which are consistent with the guidelines and policies of relevant regulatory agencies and supported by substantial evidence in the administrative record. In contrast, and as demonstrated above, Mr. Offermann's claims regarding formaldehyde and the cancer risks it would pose to future residents and employees lack virtually every quality of substantial evidence under CEQA. Moreover, as noted, the OEHHA, the U.S. Consumer Product Safety Commission, CARB, and the CDC are in agreement that current formaldehyde standards are protective of public health and that formaldehyde exposure from new construction would be low and "for less time than the exposures linked to cancer." Therefore, it is not necessary for the Project to conduct the "design analyses" proposed by Mr. Offermann's suggested alternative methodology. Furthermore, given Mr. Offermann's demonstrated lack of understanding concerning formaldehyde emissions, cancer risk screening, and the myriad other issues addressed in this response, it is fair to question whether the accuracy of his proposed "design analyses" is valid at all.

Outdoor Air Ventilation Impact

Mr. Offerman notes that noise measurements taken as part of the Project's SCEA indicate that noise levels surrounding the site range from 50.9 to 68.4 dBA Leq. He claims, without providing support or evidence, that because these noise measures were obtained in May 2021, they "are likely lower than pre-pandemic conditions and therefore likely underestimate the existing noise environment." He adds that "future noise levels will likely be higher with future increases in traffic," which is again unsupported.

The California Building Standards Code (Cal. Code Regs., Title 24) would apply to the Project's construction and building design. Chapter 12 of the California Building Code (CBC) addresses interior environments. Section 1206 of this chapter establishes interior noise standards for dwelling units and other habitable spaces. Pursuant to Section 1206, the Project would be required to ensure that interior noise levels attributable to exterior sources do not exceed 45 dBA Ldn or CNEL in any habitable room. Chapter 12 of the CBC is adopted by reference by Section 91.1206 of the City of Los Angeles Municipal Code (LAMC), with the exception of Section 1206.1.

Section 5.507 of the California Green Building Standards Code ("CALGreen") establishes sound insulation standards for non-residential buildings and the non-residential portions of buildings. The Project would be required to abide by the Section 5.507 standards, which would apply to the Project's non-residential spaces such as leasing offices, lobby areas, and shared amenity spaces. Chapter 5 of CALGreen is adopted by reference by Section 99.05.100 of the LAMC.

The LAMC contains interior noise standards that are similar to the CBC standards for interior habitable areas (i.e., 45 dBA Ldn or CNEL noise limit for habitable areas). The Project would be required to achieve these standards.

Mr. Offerman's conclusion, based on the "high outdoor noise levels" (as he describes them), is that the Project "will require a mechanical supply of outdoor air ventilation to allow for a habitable interior environment…" The Project would include mechanical ventilation for dwelling units and all other habitable interior spaces as required by the City's Building Code requirements.

$PM_{2.5}$ Outdoor Concentrations Impact

The impact PM2.5 could have on the Project is not relevant based on *California Building Industry Ass'n v. Bay Area Air Quality Mgmt. Dist.* (2015) 62 Cal.4th 369, 386. CEQA does not require evaluation of the impact of the existing environment on future residents of the Project, unless the Project exacerbates the impact. Mr. Offermann notes "the Project is located in the South Coast Air Basin, which is a State and Federal non-attainment area for PM2.5." This is factual but not evidence that there is an existing PM2.5 issue at the Project site. Further, the air quality analysis in the Project's SCEA determined that neither the Project's construction nor operations would result in emissions of PM2.5 in excess of SCAQMD regional or localized thresholds, which represent the maximum emissions that would not be expected to cause or materially contribute to an exceedance of Federal or State air quality standards, which themselves represent the maximum concentrations of pollutants that can be present in outdoor air without any harmful effects on people or the environment.

Given that there is no existing PM2.5 issue at the Project Site and that the Project would not emit quantities of PM2.5 required to exacerbate any impact, Mr. Offermann's speculation regarding PM2.5 levels does not provide any credible evidence of any deficiency in the Project's SCEA or its associated air quality impact analysis.

Exhibit B – SWAPE Letter

Unsubstantiated Input Parameters Used to Estimate Project Emissions

SWAPE provides a brief explanation of CalEEMod and how it calculates emissions and generates "output files." SWAPE's explanation is generally factual, but two issues merit clarification. First, SWAPE states that CalEEMod provides "recommended default values based on site-specific information…" This is a slight mischaracterization. Based on initial model input values such as "land use type" and "project location," CalEEMod populates subsequent "screens" of the model with various default assumptions. However, neither the CalEEMod software nor its accompanying user's guide characterizes these default assumptions as "recommended default values," as SWAPE describes them. On the contrary, there are numerous instances in which the user's guide explicitly instructs CalEEMod users to override default values with Project-specific information. For example:

- "If actual square footage of the total building or building footprint is known, the user should override the default value."
- "If the actual population data is known, the user should override the default value."
- "However, if the user has more detailed site-specific equipment and phase information, the user should override the default values."[9]

Thus, SWAPE's understanding of CalEEMod default values is incorrect. Second, SWAPE claims that any changes to CalEEMod default values are required by CEQA to "be justified by substantial evidence." To be clear, neither CEQA nor the CEQA Guidelines contain any instructions regarding specifically the use of CalEEMod. The substantial evidence standard applies to the Project's usage of CalEEMod to the same extent that all CEQA findings must be supported by "facts, reasonable assumptions predicated upon facts, and expert opinion supported by facts," per Section 15384 of the CEQA Guidelines.

The air quality analysis conducted for the Project correctly concludes that the Project's air quality impacts would be less than significant. Therefore, an EIR is not required.

Failure to Model All Proposed Land Uses

The Project's incorporation and continued use of Dinah's Family Restaurant would not represent a change in the environment: this land use would exist and continue to operate with or without the development of the Project. Its incorporation as part of the Project would not contribute to any measurable change in operational emissions associated with the Project site.

[9] *CalEEMod User's Guide, Version 2020.4.02. May 2021.*

Unsubstantiated Reduction to Acres of Grading Value

SWAPE points out that the "default acres of grading" value has been modified from the "default value" of 98 acres. SWAPE claims the "revised acres of grading value" is "unsubstantiated" because "the SCEA and associated documents fail to mention or justify the revised acres of grading value." Yet, SWAPE itself acknowledges the output file's remark that justification for modifying the grading value was based on information from the Applicant. The Project's construction details, including grading estimates, were refined over a series of meetings with the Applicant's team. Grading details for CalEEMod analysis were estimated based on relevant Project information.

Unsubstantiated Reductions to Construction Off-Road Equipment Unit Amounts

The Project's construction details, including equipment information, was based on information from the Applicant as well as the consultant's experience with similar projects.

Incorrect Application of Construction-Related Mitigation Measures

SWAPE claims that "Water Exposed Area" and "Clean Paved Roads" construction-related mitigation measures have been incorporated into the Project's CalEEMod. This is incorrect. The CalEEMod program labels all measures as "mitigation measures" whether they are CEQA mitigation measures or not. This is a matter of semantics that has no bearing on the issue of whether the Project has improperly committed to CEQA mitigation measures. In this instance, "Water Exposed Area" was implemented in the Project's air quality model to reflect the site watering procedures that would be necessary for the Project to comply with SCAQMD Rule 403 for fugitive dust. Regarding "Clean Paved Roads," an 80% reduction in dust entrained by vehicular travel on paved roads surrounding the Project was implemented to reflect the PM_{10} reductions that would be expected to result from the Project's use of trackout-reducing devices at Project driveways, also in compliance with SCAQMD Rule 403 for fugitive dust. SCAQMD Rule 403 contains general requirements (applicable to all sources) that involve minimizing visible emissions and reducing trackout from site driveways. SCAQMD Rule 403 also requires all sources to implement "best available control measures (BACM)," which are included in Table 1 of the SCAQMD's Rule 403 Implementation Handbook. These BACMs require all sources, which would include the Project, to adopt measures such as pre-watering soils prior to cut and fill activities, stabilizing soils during and after cut and fill activities, and stabilizing disturbed soils with water or other stabilizing agents "to prevent generation of visible dust plumes." Thus, the Project's site watering and trackout reduction procedures would not be required, conducted, or enforced pursuant to any CEQA mitigation: these procedures would be mandatory as a matter of SCAQMD Rule 403 regulatory compliance. The CalEEMod User's Guide acknowledges this fact, stating that "[e]ven though the fugitive dust rules contain requirements that when implemented, have the effect of mitigating dust emissions, these requirements are not considered to be mitigation per se."

Diesel Particulate Matter Health Risk Emissions Inadequately Evaluated

SWAPE's interpretation of the 2015 OEHHA Guidance Manual and its relevance to the Project is incorrect for several reasons. First, the 2015 OEHHA Guidance Manual does not contain a blanket statement

explicitly recommending that "all short-term projects lasting at least 2 months assess cancer risks." The manual's pertinent quote is as follows:

> "Due to the uncertainty in assessing cancer risk from very short-term exposures, we do not recommend assessing cancer risk for projects lasting less than two months at the MEIR. We recommend that exposure from projects longer than 2 months but less than 6 months be assumed to last 6 months (e.g., a 2-month project would be evaluated as if it lasted 6 months. Exposure from projects lasting more than 6 months should be evaluated for the duration of the project."

The quoted guidance merely establishes the OEHHA's position that if cancer risk is assessed for a project lasting between two and six months, a six-month duration should be evaluated. For projects lasting longer than 6 months, the actual project duration should be evaluated. Second, the 2015 OEHHA Guidance Manual is not intended to have any direct applicability to private development projects, such as the Project. The 2015 OEHHA Guidance Manual was prepared to assist local air districts in the formulation of their own rules regarding the preparation of HRAs. As stated in the 2015 OEHHA Guidance Manual's introduction: "The intent in developing this Guidance Manual is to provide HRA procedures for use in the Air Toxics Hot Spots Program or for the permitting of existing, new, or modified stationary sources." It notes that "The Hot Spots Act requires that each local Air Pollution Control District or Air Quality Management District (hereinafter referred to as District) determine which facilities will prepare an HRA," and that "Districts are to determine which facilities will prepare an HRA based on a prioritization process outlined in the law." It acknowledges that "local air pollution control districts sometimes use the risk assessment guidelines for the Hot Spots program in permitting decisions for short-term projects such as construction or waste site remediation." The key word is "sometimes." Therefore, the OEHHA and its guidance as contained in the referenced 2015 OEHHA Guidance Manual have no direct relevance concerning whether or not the Project is obligated to provide a HRA. It is at the discretion of the SCAQMD, and the SCAQMD has not published any recommendations or guidance endorsing the 2015 OEHHA Guidance Manual's use for CEQA analysis of potential construction impacts.

SWAPE asserts that by claiming a less than significant impact without conducting a quantified construction or operational HRA for nearby, existing sensitive receptors, the SCEA fails to compare the Project's excess cancer risk impact to the applicable SCAQMD threshold of 10 in one million. However, the mere existence of a 10 in one million cancer risk threshold does not require the SCEA to conduct a quantitative analysis pursuant to it. The SCAQMD has also published a three pounds per day threshold for operational airborne lead emissions, but a quantitative analysis of the Project's lead emissions has not been provided because there is no reasonable presumption that the Project's operations would emit substantial quantities of airborne lead. Similarly, a quantitative analysis of the Project's cancer risks was not provided because there is no reasonable presumption that the Project's construction or operations would result in substantial cancer risks to surrounding receptors.

Exhibit C – Wilson Ihrig Letter

The Exhibit B letter does not contain any evidence that the Project would result in significant noise impacts to sensitive receptors. It cites thresholds that have not been adopted by the Lead Agency to assess the significance of the Project's noise impacts, and it does not contain substantial evidence supporting why the SCEA's analysis is inadequate in assessing the Project's noise impacts against the Lead Agency's adopted thresholds of significance.