Reset Form

STATE OF CALIFORNIA — DEPARTMENT OF FINANCE ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS) STD. 399 (Rev. 10/2019)

ECONOMIC IMPACT STATEMENT

DEPARTMENT NAME	CONTACT PERSON	EMAIL ADDRESS	TELEPHONE NUMBER
Resources Recycling and Recovery	Craig Castleton	craig.castleton@calrecycle.c	ca.go (916) 322-1238
DESCRIPTIVE TITLE FROM NOTICE REGISTER OR FORM 400			NOTICE FILE NUMBER
Processing Payment Emergency Regul	ations		Z
A. ESTIMATED PRIVATE SECTOR COST IMP	ACTS Include calculations and a	ssumptions in the rulemaking record.	
		, ,	
 Check the appropriate box(es) below to indic a. Impacts business and/or employees 		rting requirements	
	- '	rting requirements	
b. Impacts small businesses	<u>=</u>	riptive instead of performance	
c. Impacts jobs or occupations	g. Impacts indiv		
d. Impacts California competitiveness	X n. None of the a	bove (Explain below):	
		plete this Economic Impact Statement. cal Impact Statement as appropriate.	
·	•	• • •	
2. The(Agency/Department)	estimates that the eco	nomic impact of this regulation (which include	es the fiscal impact) is:
Below \$10 million			
Between \$10 and \$25 million			
Between \$25 and \$50 million	650 111		
	t is over \$50 million, agencies are re nent Code Section 11346.3(c)]	quired to submit a <u>Standardized Regulatory Imp</u> o	<u> 1CT Assessment</u>
3. Enter the total number of businesses impacte	d:		
Describe the types of businesses (Include nor	nprofits):		
Enter the number or percentage of total			
businesses impacted that are small businesse	<u> </u>		
4. Enter the number of businesses that will be co	reated:	eliminated:	
4. Litter the number of businesses that will be co	eateu.		
Explain:			
5. Indicate the geographic extent of impacts:	Statewide		
	Local or regional (List areas):		
C. Futuratha mumban of taba mastada			
6. Enter the number of jobs created:	and eliminated:		
Describe the types of jobs or occupations imp	pacted:		
,, , , , , ,			
	Will the regulation affect the ability of California businesses to compete with		
other states by making it more costly to produce goods or services here? YES NO If YES, explain briefly:			
			· · · · · · · · · · · · · · · · · · ·

Reset Form

STATE OF CALIFORNIA — DEPARTMENT OF FINANCE ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS) STD. 399 (Rev. 10/2019)

ECONOMIC IMPACT STATEMENT (CONTINUED)

В.	ESTIMATED COSTS Include calculations and assumptions in the ro	ulemaking record.			
1	What are the total statewide dollar costs that businesses and individu	-l : : : :- : :	- lifesi 2 Č		
١.		, , , , , ,			
	a. Initial costs for a small business: \$b. Initial costs for a typical business: \$		Years:		
		Annual ongoing costs: \$			
	d. Sescribe other economic costs that may occur.				
2.	If multiple industries are impacted, enter the share of total costs for e	ach industry:			
3.	3. If the regulation imposes reporting requirements, enter the annual costs a typical business may incur to comply with these requirements. Include the dollar costs to do programming, record keeping, reporting, and other paperwork, whether or not the paperwork must be submitted. \$				
4.	Will this regulation directly impact housing costs? YES	NO			
	If YES, enter the a	nnual dollar cost per housing unit: \$			
	Number of units:				
5.	Are there comparable Federal regulations? YES NO				
	Explain the need for State regulation given the existence or absence o	f Federal regulations:			
	Enter any additional costs to businesses and/or individuals that may b	e due to State - Federal differences: \$			
c.	ESTIMATED BENEFITS Estimation of the dollar value of benefits is	not specifically required by rulemaking law, but en	couraged.		
1.	Briefly summarize the benefits of the regulation, which may include among others, the health and welfare of California residents, worker safety and the State's environment:				
2.	Are the benefits the result of: specific statutory requirements, or	goals developed by the agency based on bro	ad statutory authority?		
	Explain:				
э.	3. What are the total statewide benefits from this regulation over its lifetime? \$				
4.	Briefly describe any expansion of businesses currently doing business within the State of California that would result from this regulation:				
D.	ALTERNATIVES TO THE REGULATION Include calculations and a specifically required by rulemaking law, but encouraged.				
1.	List alternatives considered and describe them below. If no alternative	es were considered, explain why not:			

Reset Form

STATE OF CALIFORNIA — DEPARTMENT OF FINANCE

ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS) STD. 399 (Rev. 10/2019)

ECONOMIC IMPACT STATEMENT (CONTINUED)

		ECOITO	THE HILLET STATEMENT (CON	TINGED
	Summarize the t	total statewide costs and benefits	from this regulation and each alternative considered:	
	Regulation:	Benefit: \$	Cost: \$	
	Alternative 1:	Benefit: \$	Cost: \$	
	Alternative 2:	Benefit: \$	Cost: \$	
3.		ny quantification issues that are reloosts and benefits for this regulation		
	oi estimated co	osts and benefits for this regulation	on or alternatives:	
	Rulemaking law requires agencies to consider performance standards as an alternative, if a regulation mandates the use of specific technologies or equipment, or prescribes specific actions or procedures. Were performance standards considered to lower compliance costs? Explain:			
•	MAJOR REGUL		nd assumptions in the rulemaking record.	
		•	Protection Agency (Cal/EPA) boards, offices an g (per Health and Safety Code section 57005). (-
١.	Will the estimate	ed costs of this regulation to Califo	ornia business enterprises exceed \$10 million ? YES	S NO
			If YES, complete E2. and E3 If NO, skip to E4	
2.	Briefly describe	each alternative, or combination c	of alternatives, for which a cost-effectiveness analysis w	as performed:
	Alternative 1:			
	Alternative 2:			
	(Attach addition	al pages for other alternatives)		
3.	For the regulation	on, and each alternative just descr	ribed, enter the estimated total cost and overall cost-eff	fectiveness ratio:
	_	otal Cost \$		
	Alternative 1: To	otal Cost \$	Cost-effectiveness ratio: \$	
	Alternative 2: To	otal Cost \$	Cost-effectiveness ratio: \$	
I. Will the regulation subject to OAL review have an estimated economic impact to business enterprises and individuals located in or doing business in California exceeding \$50 million in any 12-month period between the date the major regulation is estimated to be filed with the Secretary of State through 12 months after the major regulation is estimated to be fully implemented?				
	YES	NO		
			ed Regulatory Impact Assessment (SRIA) as specified in the SRIA in the Initial Statement of Reasons.	
5.	Briefly describe t	the following:		
	The increase or	decrease of investment in the Stat	te:	
	The incentive for innovation in products, materials or processes:			
			limited to, benefits to the health, safety, and welfare o ent and quality of life, among any other benefits identi	

Reset Form

STATE OF CALIFORNIA — DEPARTMENT OF FINANCE

ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS)

STD. 399 (Rev. 10/2019)

FISCAL IMPACT STATEMENT

A. FISCAL EFFECT ON LOCAL GOVERNMENT Indicate appropriate boxes 1 through 6 and attach calculations and assumptions of fiscal impact for the current year and two subsequent Fiscal Years.					
	 Additional expenditures in the current S (Pursuant to Section 6 of Article XIII B of 				
	\$				
	a. Funding provided in				
	Budget Act of	or Chapter	, Statutes	of	
	b. Funding will be requested in the Go	overnor's Budget Act of —			
		Fiscal Year:			
	Additional expenditures in the current S (Pursuant to Section 6 of Article XIII B of	tate Fiscal Year which are N the California Constitution	IOT reimbursable by the Sta and Sections 17500 et seq.	ite. (Approximate) of the Government Code).	
	\$				
	Check reason(s) this regulation is not reimbu	rsable and provide the appro	opriate information:		
	a. Implements the Federal mandate co	ontained in —————			
	b. Implements the court mandate set				_Court.
	Case of:		v	/s	
	c. Implements a mandate of the peop			on No.	
	Date of Election:				
	d. Issued only in response to a specific	request from affected loca	l entity(s).		
	Local entity(s) affected:				
	_				
	e. Will be fully financed from the fees,	revenue, etc. from:			
	Authorized by Section:		of the		_ Code;
	f. Provides for savings to each affecte	d unit of local government	which will, at a minimum, o	ffset any additional costs to	each;
	g. Creates, eliminates, or changes the	penalty for a new crime or	nfraction contained in		
	3. Annual Savings. (approximate)				
	\$				
	4. No additional costs or savings. This regula		on-substantive or clarifying	changes to current law regula	tions.
5. No fiscal impact exists. This regulation does not affect any local entity or program.					
\times	6. Other. Explain see STD. 399 Narrativ	/e			

Reset Form

STATE OF CALIFORNIA — DEPARTMENT OF FINANCE

ECONOMIC AND FISCAL IMPACT STATEMENT (REGULATIONS AND ORDERS)

STD. 399 (Rev. 10/2019)

FISCAL IMPACT STATEMENT (CONTINUED)

B. FISCAL EFFECT ON STATE GOVERNMENT Indicate appropriate boxes 1 through 4 and attach calculation year and two subsequent Fiscal Years.	s and assumptions of fiscal impact for the curren
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
\$	
It is anticipated that State agencies will:	
a. Absorb these additional costs within their existing budgets and resources.	
b. Increase the currently authorized budget level for the	
2. Savings in the current State Fiscal Year. (Approximate)	
\$	
3. No fiscal impact exists. This regulation does not affect any State agency or program.	
4. Other. Explain	
C. FISCAL EFFECT ON FEDERAL FUNDING OF STATE PROGRAMS Indicate appropriate boxes 1 through 4	and attach calculations and assumptions of fisca
impact for the current year and two subsequent Fiscal Years.	
1. Additional expenditures in the current State Fiscal Year. (Approximate)	
\$	
2. Savings in the current State Fiscal Year. (Approximate)	
\$	
3. No fiscal impact exists. This regulation does not affect any federally funded State agency or program.	
4. Other. Explain	
FISCAL OFFICER SIGNATURE (Digitally signed by Brandy	DATE
Brandy Hunt Date: 2023.09.14 12:11:53 -07'00'	
The signature attests that the agency has completed the STD. 399 according to the instructions in SA he impacts of the proposed rulemaking. State boards, offices, or departments not under an Agency highest ranking official in the organization.	
AGENCY SECRETARY	DATE
Eric Jarvis (Oct 25, 2023 10:02 PDT)	11 (0) (1) (200 200
Finance approval and signature is required when SAM sections 6601-6616 require completion of Fi.	DATE
DEPARTMENT OF FINANCE PROGRAM BUDGET MANAGER	DATE