

Westland Solar Park's Response to the
CPUC Audit Findings of
Westland Solar Park Facilities: Solar Blue & Castanea Project
February 10 – February 13, 2025

I. Introduction

Westland Solar Park (“Westland”) appreciates the opportunity to respond to the California Public Utilities Commission’s (“CPUC”) Audit Findings of Westland Solar Park Facilities: Solar Blue & Castanea Project (“Audit Report”), which addresses Westland’s compliance with the CPUC’s General Order 167-B (“GO 167”). The Audit Report presents findings from the audit conducted by the CPUC’s Electric Safety and Reliability Branch, which took place on February 10-13, 2025. The Audit Report contains 20 findings in areas requiring corrective action. Westland has taken appropriate action to address the issues identified in the Audit Report.

Westland notes that it recently changed its Operations and Maintenance contractor and has retained the services of ACT Power Services for Operations and Maintenance of the facilities. ACT was engaged on April 2, 2025 for operations and maintenance at Solar Blue and Castanea.

II. Response to Findings

Finding 1: Westland must report safety related incidents to the CPUC.

Response:

CPUC Requirement	Corrective Action	Completion Date
“As part of the corrective actions, Westland must submit to ESRB an approved incident reporting policy for various incidents that may occur at Westland, including reference to the California Public Utilities Commission (CPUC) and ESRB’s incident reporting criteria in GO 167-C.” (Audit Report, p. 2)	<ul style="list-style-type: none">• Develop and submit an incident reporting policy aligned with CPUC GO 167-C requirements.• Ensure timely reporting (within 24 hours) of qualifying incidents to CPUC via their emergency reporting website. <p>No qualifying incidents have occurred under ACT operations. Westland will include CPUC GO 167-C reporting protocol attachment in update Incident Response Plan.</p>	Updated Incident Response Plan with CPUC updates to be submitted by 6/30 (including three qualifiers: \$200k property damage, Cal OSHA reporting, any incident that gains media attention).

Finding 2: Westland must improve the work management practices and use of the Computerized Maintenance Management System (CMMS).

Response:

CPUC Requirement	Corrective Action	Completion Date
<p>“As a part of Westland’s corrective action plan, Westland must create a plan to conduct a thorough internal review of open work orders. The review must focus on closing work orders when the work has been completed, removing duplicated work orders, and updating work order descriptions with a clear description of the task. Additionally, Westland must develop a plan and schedule to address and reduce the extensive backlog of work orders. Westland must establish and implement the plan to reduce the number of open work orders prior to summer. The plan must be submitted to ESRB as part of the corrective action plan.” (Audit Report, p. 3)</p>	<ul style="list-style-type: none"> • Close completed work orders (“WO”) in Maximo. • Update descriptions to clearly state tasks. • Identify and eliminate duplicate work orders. • Prepare a plan for Westland to reduce open work orders prior to summer. <p>All sites have less than 50 WOs open, ACT continues to efficiently and timely address existing WOs and close completed WOs.</p> <p>Westland includes as part of its Corrective Action Plan documents contained in folder “2 CMMS CONFIDENTIAL”.</p>	<p>Two reports are included in this Response - existing open WO’s as of 5/27/2025, and closed WO’s from April.</p> <p>ACT also provides three Fiix WO process documentations (Work Order Lifecycle, Asset Online-Offline, Work Order Creation One-Pager).</p>

Finding 3: Flame detectors are not adequately inspected, tested or maintained.

Response:

CPUC Requirement	Corrective Action	Completion Date
<p>“The NFPA and manufacturer’s inspection, testing and maintenance guidance described in this report are the minimum acceptable activities required. Westland must verify the frequency of these activities</p>	<ul style="list-style-type: none"> • Implement a quarterly inspection and monthly cleaning plan per NFPA 72 and manufacturer requirements. • Test detectors annually, including sensitivity checks. 	<p>Updated SM will be submitted by 6/30.</p>

is in accordance with the frequency required by the local authority having jurisdiction. As a part of the corrective action plan submitted to ESRB, Westland must establish an inspection and testing plan and timeline.” (Audit Report, p. 5)	<ul style="list-style-type: none"> • Coordinate inspection frequency with local AHJ. <p>ACT to write WO and collect more information on scope of maintenance (“SM”) and testing (Rexmoore is OEM). ACT will then incorporate requirements into Scheduled / Preventative Maintenance program.</p>	
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Finding 4: Fire Extinguishers in substation buildings are not appropriate for electrical equipment.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must replace the dry power type fire extinguisher with an extinguisher better suited for the area it serves. The fire extinguishers must be replaced with carbon dioxide (CO ₂) or other clean agent, gaseous fire extinguishers per NFPA 10.” (Audit Report, p. 7)	<ul style="list-style-type: none"> • Replace dry powder extinguishers with CO₂ or clean agent extinguishers appropriate for electrical environments. • The existing ABC class extinguishers are appropriate for electrical fires. Best practice is to have residue-less extinguishing methods (such as a CO₂ extinguisher) to protect the relays and other sensitive electrical equipment. ACT created a WO and purchased these for all 5 existing substations that ACT operates. 	Update monthly substation facility inspections to incorporate monthly CO ₂ extinguisher inspection. ACT will install replacement fire extinguishers when received (expected to occur by 6/30).

Finding 5: Emergency response preparedness must be improved.

Response:

CPUC Requirement	Corrective Action	Completion Date
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<p>“Both plants, Solar Blue and Castanea Project, must establish approved evacuation routes and muster points and communicate the updated emergency response protocol to Westland staff.” (Audit Report, p. 8)</p> <p>“Westland must have detailed documentation of periodic evacuation drills.” (Audit Report, p. 8)</p>	<ul style="list-style-type: none"> • Install approved evacuation maps with routes, muster points, and emergency equipment. • Document evacuation drills, including participants, scope, and feedback. • Communicate emergency protocols to all staff. <p>Muster points and emergency equipment protocols are in place. ACT to draft an evacuation map for the site to add to the EAP and Orientation. ACT HSSE Team will perform evacuation drill week of 6/16 and document in WO.</p>	<p>ACT to submit to Westland an Updated Site Safety Orientation, which will include evacuation routes by 6/30.</p>
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Finding 6: Portable fire extinguisher inspection and maintenance practices and tracking must be improved.

Response:

CPUC Requirement	Corrective Action	Completion Date
<p>“Westland must ensure completion of routine inspection and maintenance of all fire extinguishers and maintain proper recordkeeping to ensure the safety of personnel and equipment.” (Audit Report, p. 9)</p>	<ul style="list-style-type: none"> • Incorporate monthly inspections into routine checks (fleet, plant, substations). • Schedule annual inspections. • Track inspections/ maintenance per NFPA 10 and Cal/OSHA Section 6151. <p>Fire extinguishers will be removed from non-habitable areas around the site. Fire extinguishers in trucks and other habitable spaces will be inspected monthly.</p>	<p>Updated monthly plant check inspection by 6/30.</p>

Finding 7: 55-gallon drums of BESS Heat Transfer Fluid are stored improperly.

Response:

CPUC Requirement	Corrective Action	Completion Date
“The condition of the drums must be improved and routinely monitored. Drums must be stored properly and cleaned if any spills occur during dispensing.” (Audit Report, p. 14)	<ul style="list-style-type: none">• Properly store BESS coolant drums (closed, clean, protected from contamination).• Tesla has procured spillage control containers to store drums <p>Westland includes as part of its Corrective Action Plan documents contained in folder “7 BESS Heat Transfer Fluid CONFIDENTIAL”.</p>	Spillage control containers in place, empty/lidless drums are also in containers and will be removed by 6/30.

Finding 8: Westland’s SDS repository does not include all hazardous materials present at the facility.

Response:

CPUC Requirement	Corrective Action	Completion Date
“The BESS LTSA contractor and Westland must coordinate, establish, and communicate an SDS repository that includes all hazardous materials at Westland.” (Audit Report, p. 16)	<ul style="list-style-type: none">• Maintain a complete SDS repository that includes all BESS and solar facility chemicals.• Coordinate with LTSA partners to consolidate SDS access. <p>The SDS in the O&M offices are comprehensive based on scope of ACT responsibilities.</p>	<p>ACT to audit the existing SDS binder and update for items no longer onsite or brought onsite through ACT operations. Audit planned for June and SDS binder will be updated by 6/30.</p> <p>Tesla will post a QR code on site that links the necessary SDS information for their Field Service Technicians.</p> <p>ACT has been provided with SDS’s for material being stored on site by Tesla. Tesla to update on an ongoing basis.</p>

Finding 9: Routine hazardous waste inspections are not being completed.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must conduct regular Hazardous Waste Inspections. As a part of the corrective action plan, Westland must submit the routine work order for Hazardous Waste Inspections in Maximo or other CMMS.” (Audit Report, p. 17)	<ul style="list-style-type: none">• Reinstate monthly inspections via Maximo or CMMS.• Document and maintain inspection schedule.	ACT to submit a Hazardous Waste Inspection Program to Westland by 6/30.

Finding 10: Substation buildings require an NFPA 704 placard.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must install NFPA hazard identification placards for the substation buildings at Solar Blue and Castanea Project and monitor the condition of all signage at Westland and replace as needed.” (Audit Report, p. 17)	<ul style="list-style-type: none">• Install signage on all substation buildings with hazardous materials (e.g., lead-acid batteries).• Routinely inspect and replace signage as needed.	HSSE Team ordered 10 signs, and provided a legend for appropriate labeling. Arrived on site week of 5/20, will be installed by 6/6. Completed WO to be submitted to Westland for support (w/ pictures) by 6/16.

Finding 11: Solar Blue HVAC drain line is tied, preventing proper condensate drainage.

Response:

CPUC Requirement	Corrective Action	Completion Date
“If a loop is required, an appropriate drainage solution must be implemented. Solar Blue must verify that the drain line is installed per the California Mechanical Code and per manufacturers’ instructions, and correct any deficiencies as necessary. Additionally, Westland must	<ul style="list-style-type: none">• Correct drain line installation at Solar Blue relay house per California Mechanical Code and manufacturer guidance.	Completed correct drain line installation in May monthly substation inspections (WO # 65141).

ensure facilities and equipment are adequate to effectively support operations activities and that maintenance is conducted in a manner to support reliable plant operation.” (Audit Report, p. 19)		
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Finding 12: Westland must maintain and replace deteriorated signage.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must continue to monitor the condition of all signage and proactively replace as needed to aid in the efficient and effective identification of hazards.” (Audit Report, p. 20)	<ul style="list-style-type: none"> Inventory and replace deteriorated signage (e.g., arc flash, high voltage, warning labels). Work with vendors for reprints or replacements. <p>ACT responsible for replacing signage on equipment in BESS yard, except megapacks (BIC Tesla). All Chestnut MVT’s require three electric shock stickers to be replaced. ACT will inspect all cable trays and replace as required.</p>	ACT will replace all signage/stickers mentioned above by 6/30. WO will be submitted to Westland as backup, which will include pictures.

Finding 13: Electrical equipment cabinets labeled with an Arc flash hazard sign and other equipment storage must remain locked.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must continuously monitor electrical equipment and ensure doors are properly locked.” (Audit Report, p. 23) “[Storage containers in the BESS storage area] should be locked to prevent incidental	<ul style="list-style-type: none"> Ensure electrical cabinets and BESS storage are securely locked when not in use. <p>Tesla has installed locks where necessary and</p>	ACT to lock and document examples of inverter doors being fully/properly locked. Tesla agreed to enhance training and procedures related to site security. Tesla to add locks and secure containers and electrical

exposure. [to hazardous materials]” (Audit Report, p. 23)	<p>reinforced the need to keep existing locks closed when not in use.</p> <p>ACT will audit the site and lock any unlocked inverters during any observations at the next scheduled maintenance round.</p> <p>Westland includes as part of its Corrective Action Plan documents contained in folder “13 Unlocked Areas CONFIDENTIAL”.</p>	cabinets (BIC Tesla, ACT to take additional photos).
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Finding 14: Bird nests were present on various equipment throughout the site.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Bird nests are composed of debris that could contain flammable, conductive, or sharp materials, all of which need to be mitigated near electrical equipment. Prior to removal, consult with federal and local authorities for guidance on Endangered Species Acts, as requirements may vary depending on the bird species. Ensure that all relevant laws are communicated to employees, visitors, and contractors through training sessions, procedures and visitor’s orientation, and submit the corrective actions taken to ESRB.” (Audit Report, p. 25)	<ul style="list-style-type: none"> Remove nests during routine inspections as needed, ensuring compliance with wildlife protection laws. <p>This will be accomplished through regular inspections and monthly plant checks. If nests pose no electrical or safety issues, nests will be left alone. If they do pose risk, ACT will notify Westland and environmental consultant for direction. Cannot remove nests that contain eggs or chicks.</p>	<p>Update documentation within the preventative maintenance inspections related to removing nests by 6/30.</p> <p>Update documentation within the preventative maintenance inspections related to when to request direction, and when to leave nest alone by 6/30.</p>

Finding 15: Vegetation is encroaching on electrical equipment at various locations.

Response:

CPUC Requirement	Corrective Action	Completion Date
“Vegetation must be regularly managed and controlled around the equipment.” (Audit Report, p. 26)	<ul style="list-style-type: none">Regularly trim vegetation around electrical equipment to maintain access and prevent obstruction or fire risk. <p>Westland’s subcontractors are responsible for mowing vegetation at the project. Three feet or greater clearance from all electrical equipment and the fence line is best practice.</p> <p>Westland includes as part of its Corrective Action Plan documents contained in folder “15 Vegetation CONFIDENTIAL”.</p>	Vegetation is being cleared by contractor now, expected completion by 7/30 with incremental progress between now and then. ACT will provide documentation of site conditions through regular preventative maintenance inspections and escalate as appropriate to the GAO. ACT collects photos of vegetation management monthly.

Finding 16: Westland does not utilize Safe Work Permits (SWP).

Response:

CPUC Requirement	Corrective Action	Completion Date
“Westland must utilize the North American Energy Services (NAES), the O&M contractor’s, established Safe Work Permit (SWP) procedures from their Safety Manual Program (SMP) including completing SWPs prior to doing work. ... “Westland’s SWP procedures also require monthly and annual audits of the SWP program. ...	<ul style="list-style-type: none">Enforce SWP use for applicable high-risk work.Audit the SWP program monthly and annually.Train all personnel on SWP requirements. <p>ACT has an existing permit system that is being updated. Permits will be fully digitized through SMS360. LMS courses will accompany this process to document training.</p>	Permits will be fully digitized through SMS360 by 6/30/2025. ACT will provide updated permit examples and overview of the new APP draft/process by 7/31. ACT will provide current LMS training certificates for FST team by 6/16.

“Westland must address these two discrepancies [for] all employees through training sessions or directives, and submit the records to ESRB.” (Audit Report, p. 28)	Westland includes as part of its Corrective Action Plan documents contained in folder “16 SWP CONFIDENTIAL”.	
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Finding 17: Westland does not maintain hardcopy procedures, policies, and programs in reference binders on site.

Response: Westland notes that OS 20 does not specifically mention a requirement to maintain hard copies of reference binders pertaining to SPCC, Emergency Response Plan, or any other topic, nor is such a requirement mentioned anywhere else in GO 167. Westland and ACT recommend, and currently maintain digital copies of programs and policies because the digital medium is superior to paper in binders.

CPUC Requirement	Corrective Action	Completion Date
“As a part of the corrective action plan submitted to ESRB, Westland must provide a list of hard copy of reference binders kept on site.” (Audit Report, p. 28)	<ul style="list-style-type: none"> Maintain printed copies of safety-critical documents (e.g., SPCC, Emergency Response Plan) at a central location on each site. <p>All current safety program/policies can be found here: Programs and Policies</p> <p>ACT is undertaking a significant effort to draft a new Accident Prevention Plan (APP) which will consolidate many of the documents from the above link.</p>	Programs and policies will remain digital to enhance work-flow and to ensure currency. Programs and policies may be printed as needed. Updated, comprehensive APP to be released 7/31/2025.

Finding 18: Lock Out Tag Out (LOTO) Program implementation and periodic reviews must be improved.

Response:

CPUC Requirement	Corrective Action	Completion Date
“The LOTO index should be maintained and promptly updated for sufficient	<ul style="list-style-type: none"> Reorganize open/closed LOTO binders. 	A digital version of the forms will be accessible and released 6/30 through

<p>tracking and reviews, and the affected employees should be trained on the site's Open and Closed Binder system to prevent the binders from becoming disorganized.” (Audit Report, p. 30)</p> <p>“Westland must complete periodic audits of the LOTO Program. As part of the corrective action plan, Westland must complete 2024 annual audits for both plants and submit the records to ESRB.” (Audit Report, p. 30)</p>	<ul style="list-style-type: none"> • Maintain a current index and conduct monthly and annual audits using standard forms. • Submit completed 2024 annual audits to ESRB. <p>The current LOTO plan is in the Program and Policies folder linked above (see, Response to Finding 17).</p>	<p>SMS360. ACT Annual LOTO update will be completed by 7/30. Logs will be printed and available onsite, as well as digital access and versions of the LOTO forms/register accessible to any auditor.</p>
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Finding 19: Permit-Required confined spaces are not properly identified.

Response:

CPUC Requirement	Corrective Action	Completion Date
<p>“As a part of Westland’s response to the audit report, Westland must provide a list of all confined spaces at Westland in SMP-07 Appendix D Confined Space Inventory, and proof of proper confined space signage.” (Audit Report, p. 31)</p>	<ul style="list-style-type: none"> • Create and maintain a confined space inventory list using Appendix D of SMP-07. • Label all permit-required confined spaces. <p>The HSSE Team will assess and order signage during the June 2025 site visit.</p>	<p>UV rated stickers to be purchased. ACT will perform a site audit in June, and CFE stickers to be installed shortly thereafter. All signage will be updated and posted by 6/30. A confined space listing will be created as a result of the site audit and delivered by 7/30.</p>

Finding 20: Confined Space Entry Program audits must be conducted periodically.

Response:

CPUC Requirement	Corrective Action	Completion Date
<p>“Westland must complete periodic audits of the Confined Space Entry Program. As part of the corrective action plan, Westland must complete 2024</p>	<ul style="list-style-type: none"> • Conduct monthly and annual CSEP audits using Appendices F and G. • Review contractors permit as part of these audits. 	<p>ACT to install CFE labels/signage where applicable by end of June. ACT will add language in updated APP by 6/30 to state that it is ACT policy to not</p>

annual audits for both Plants and submit the records to ESRB.” (Audit Report, p. 32)	<ul style="list-style-type: none"> • Submit completed 2024 CSEP annual audits for both plants. <p>ACT does not perform work in true OSHA permit-required confined spaces and will subcontract this work. Confined Space Entry permits will be required whether the confined space work area is an OSHA permit confined space or not. The permit will be released through SMS360 by 6/30/2025.</p>	perform work in true OSHA permit-required confined spaces.
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III. Conclusion

Westland appreciates ESRB’s time and thoroughness during the audit process and looks forward to completing the identified requirements and submittals.

Sincerely,

/s/

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