

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2013-0730-02	REGULATORY ACTION NUMBER 2014-0805-015	EMERGENCY NUMBER
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ENDORSED FILED
IN THE OFFICE OF

2014 SEP 17 AM 2:05

Debra Bowen
DEBRA BOWEN
SECRETARY OF STATE

For use by Office of Administrative Law (OAL) only

RECEIVED FOR FILING PUBLICATION DATE JUL 30 '13 AUG 09 '13 Office of Administrative Law NOTICE	2014 AUG -5 PM 12:34 OFFICE OF ADMINISTRATIVE LAW REGULATIONS
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AGENCY WITH RULEMAKING AUTHORITY AIR RESOURCES BOARD	AGENCY FILE NUMBER (If any)
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A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE Consumer Products Regulation 2013	TITLE(S) 17	FIRST SECTION AFFECTED 94501	2. REQUESTED PUBLICATION DATE August 9, 2013
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON Trini Balcazar	TELEPHONE NUMBER (916) 445-9564	FAX NUMBER (Optional) (916) 322-3928
OAL USE ONLY <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER 2013, 322	PUBLICATION DATE 8/9/2013

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Consumer Products Regulation 2013	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
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2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	ADOPT
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	AMEND 94501, 94506, 94508, 94509, 94512, 94513, 94515, see attachment
TITLE(S) 17	REPEAL 94560, 94561, 94562, 94563, 94564, 94565, 94566, 94567, see attachment

3. TYPE OF FILING

<input checked="" type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input type="checkbox"/> Certificate of Compliance: The agency officer named below certifies that this agency complied with the provisions of Gov. Code §511346.2-11347.3 either before the emergency regulation was adopted or within the time period required by statute.	<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))	<input type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
<input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<input type="checkbox"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<input type="checkbox"/> Other (Specify) _____	

4. ALL BEGINNING AND ENDING DATES OF AVAILABILITY OF MODIFIED REGULATIONS AND/OR MATERIAL ADDED TO THE RULEMAKING FILE (Cal. Code Regs. title 1, §44 and Gov. Code §11347.1)
April 3, 2014 - April 18, 2014

5. EFFECTIVE DATE OF CHANGES (Gov. Code, §§ 11343.4, 11346.1(d); Cal. Code Regs., title 1, §100)

<input checked="" type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input type="checkbox"/> Effective on filing with Secretary of State	<input type="checkbox"/> §100 Changes Without Regulatory Effect	<input type="checkbox"/> Effective other (Specify) _____
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6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

<input type="checkbox"/> Department of Finance (Form STD. 399) (SAM §6660)	<input type="checkbox"/> Fair Political Practices Commission	<input type="checkbox"/> State Fire Marshal
<input type="checkbox"/> Other (Specify) N/A		

7. CONTACT PERSON Trini Balcazar, Regulations Coord.	TELEPHONE NUMBER (916) 445-9564	FAX NUMBER (Optional) (916) 322-3928	E-MAIL ADDRESS (Optional) tbalcaza@arb.ca.gov
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8. I certify that the attached copy of the regulation(s) is a true and correct copy of the regulation(s) identified on this form, that the information specified on this form is true and correct, and that I am the head of the agency taking this action, or a designee of the head of the agency, and am authorized to make this certification.

SIGNATURE OF AGENCY HEAD OR DESIGNEE <i>Richard W. Corey</i>	DATE 7/30/2014
TYPED NAME AND TITLE OF SIGNATORY Richard W. Corey, Executive Officer	

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ENDORSED APPROVED

SEP 17 2014

Office of Administrative Law

Attachment to Form 400 for the Consumer Products 2013

2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (Including title 26, if toxics related)	
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND 94520, 94521, 94522, 94523, 94524, 94525, 94526, 94528, 94700, and Appendix A, sections 1, 2, 3, 4, 5, to the incorporated document Method 310
TITLE(S) 17	REPEAL 94568, 94569, 94570, 94571, 94572, 94573, 94574, 94575, and Appendix B to the incorporated document Method 310