

**State of California
Office of Administrative Law**

In re:
Department of Food and Agriculture

Regulatory Action:

Title 03, California Code of Regulations

Adopt sections:

Amend sections: 3591.5

Repeal sections:

**NOTICE OF APPROVAL OF CERTIFICATE OF
COMPLIANCE**

**Government Code Sections 11349.1 and
11349.6(d)**

OAL Matter Number: 2018-0516-04

**OAL Matter Type: Certificate of Compliance
(C)**

This Certificate of Compliance makes permanent the emergency regulations adopted in action no. 2017-1204-02E which added the entire county of San Mateo to the existing ten county areas designated for the eradication of the Mediterranean fruit fly allowing the department to perform detection, control and eradication activities there to prevent the spread of this pest to host fruit production areas.

OAL approves this regulatory action pursuant to section 11349.6(d) of the Government Code.

Date: June 21, 2018


Peggy J. Gibson
Senior Attorney

**For: Debra M. Cornez
Director**

Original: Karen Ross, Secretary

Copy: Rachel Avila

NOTICE PUBLICATION/REGULATIONS SUBMISSION

CERT

(See instructions on reverse)

For use by Secretary of State only

STD. 400 (REV. 01-2013)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z.2018-0215-01	REGULATORY ACTION NUMBER 2018-0516-04 C	EMERGENCY NUMBER
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For use by Office of Administrative Law (OAL) only

2018 MAY 16 A 11:32
OFFICE OF
ADMINISTRATIVE LAW

ENDORSED - FILED
In the office of the Secretary of State
of the State of California

JUN 21 2018
1:55pm

NOTICE	REGULATIONS
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AGENCY WITH RULEMAKING AUTHORITY
Department of Food and Agriculture

AGENCY FILE NUMBER (if any)

A. PUBLICATION OF NOTICE (Complete for publication in Notice Register)

1. SUBJECT OF NOTICE	TITLE(S)	FIRST SECTION AFFECTED	2. REQUESTED PUBLICATION DATE
3. NOTICE TYPE <input type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other	4. AGENCY CONTACT PERSON	TELEPHONE NUMBER	FAX NUMBER (Optional)
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 Disapproved/Withdrawn	ACTION ON PROPOSED NOTICE	NOTICE REGISTER NUMBER 2018-09-2	PUBLICATION DATE 3/2/2018

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Mediterranean Fruit Fly Eradication Area	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S) 2017-1204-02E
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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 3591.5
TITLE(S) 3	REPEAL

3. TYPE OF FILING

<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346)	<input checked="" type="checkbox"/> Certificate of Compliance: The agency officer with the below certifies that this agency complied with the provisions of Gov. Code §§11346.2-11347.3 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"/> File & Print	<input type="checkbox"/> Print Only
<input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))	<input type="checkbox"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	<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)

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

<input type="checkbox"/> Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a))	<input checked="" 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) _____		

7. CONTACT PERSON Rachel Avila	TELEPHONE NUMBER 916-403-6813	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) Rachel.Avila@cdfa.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 	DATE 5-15-18
TYPED NAME AND TITLE OF SIGNATORY Nick Condos, Director, Plant Health and Pest Prevention Services	

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

JUN 21 2018

Office of Administrative Law

Amend the following section:

Section 3591.5. Mediterranean Fruit Fly Eradication Area.

(a) Proclamation of Eradication Area. That portion of the State of California described as follows, within which the Mediterranean fruit fly, *Ceratitidis capitata*, is known to exist, is hereby proclaimed to be an eradication area with respect to said pest, and as such it is amenable to the provisions of Article 4 (commencing with Section 5761) of Chapter 8, Part 7, Division 4, of the Food and Agricultural Code of California.

The entire counties of Imperial, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, Santa Clara, Solano, Tulare and Ventura.

(b) [no change]

Note: Authority: Sections 407 and 5322, Food and Agricultural Code. Reference: Sections 5761, 5762, 5763 and 5764, Food and Agricultural Code.