

September 10, 2018

By Electronic Mail By US Mail

San Francisco Board of Supervisors Clerk of the San Francisco Board of Supervisors 1 Dr. Carlton B. Goodlett Place City Hall, Room 244 San Francisco, CA 94102-4689

Lisa M. Gibson Environmental Review Officer 1650 Mission Street, Suite 400 San Francisco, CA 94103

Supplemental Comment re Central SoMa Plan's Environmental Impact Report

Dear Honorable Members of the Board of Supervisors and Clerk of the Board:

I am writing on behalf of One Vassar LLC (One Vassar) and in further support of its appeal of the certification of the Central SoMa Plan's Environmental Impact Report (EIR). Specifically, One Vassar is submitting the attached letter from our air quality expert, James Reyff of the environmental consulting firm Illingworth & Rodkin, Inc. Mr. Reyff has analyzed claims by appellants Central SoMa Neighbors (CSN) and SFBlu that the Central SoMa Plan *will* increase cancer risk by 226 per million.

This claim is misleading. As Mr. Reyff discusses in his letter, this cancer risk is under a "worst case scenario" which results for taking the then-existing conditions in 2014 and adding on top of that the entirety of environmental effects (traffic, transit, and air quality) from the fully built out plan, under 2014 emissions regulations, for 70 years. A more realistic number for cancer risk, which the DEIR also included, but which CSN and SFBlu, ignore, is the cumulative cancer risk increase of 8.1 per one million by 2040. Thank you for your consideration.

Sincerely,

Phillip H Babich

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RE: Response to Supplemental Comments by Central SoMa Neighbors (CSN) and SFBlu regarding the Central SoMa Plan's Environmental Impact Report (EIR) (SCH No. 2013042070)

Dear Phillip:

The purpose of this letter is to clarify the contention by CSN and SFBlu that the Central SoMa Plan *will* increase cancer risk by 226 per million. While the EIR reports a cancer risk increase under a "worst case scenario" of 226 per million, it also reports that the cumulative cancer risk increase, once the Plan is fully built out, as 8.1 per million.

I am a Senior Consultant at *Illingworth & Rodkin, Inc.* who has 30 years' experience studying air quality impacts from projects and land use developments in the Bay Area. My comments here are based on my review of the Central SoMa Plan's Environmental Impact Report (EIR) air quality section and the supporting Air Quality Technical Analysis Report (referenced in the DEIR, page IV.F-46)¹.

This worst-case scenario, presented in the DEIR and noted by commenters, contemplates an increase that is the maximum increase from Plan traffic and would occur at the worst spot in the plan area that is next to the I-80 freeway. This is a hypothetical figure that results from taking the then-existing conditions in 2014 and adding on top of that the entirety of environmental effects (traffic, transit, and air quality) from the fully built out plan, under 2014 without the effect of reduced emissions from vehicle standards and regulations, for a 70-year exposure period. This is not a realistic scenario, nor does the EIR intend it to be, and it results in an excessive over-prediction of cancer risk for several reasons.

First, emissions of toxic air contaminants (TACs) from traffic have been decreasing substantially since 2014, and even before then. The State's Air Toxic Control Measure (ACTM) that regulates

¹ Environ International. 2014. Air Quality Technical Report, Central SoMa Plan, San Francisco, CA. October.

diesel truck fleets took effect in 2014, and it aggressively reduces toxic air contaminants from traffic (note diesel exhaust accounts for much of the toxic air contaminant cancer risk in the Bay Area). There have also been significant reductions in emissions from other on-road vehicles that U.S. Environmental Protection Agency and the State are continuously requiring through implementation of laws, regulations, and policies (i.e., standards that affect vehicle emissions and fuel efficiency).

Second, cancer risk assessments are based on nearly continuous exposure of sensitive persons to these contaminants over 70-years. The worst-case scenario assumes the exposure level with the plan traffic overlaid on 2014 conditions will not decrease over time.

When reductions in emissions from traffic are considered, the DEIR found that the maximum cumulative cancer risk increase will be 8.1 per one million by 2040. Much of the reductions in vehicle emission rates will be in place by the time construction of initial projects in the Plan area are completed and their traffic becomes operational. Operational traffic will gradually increasenot ramp up instantaneously in 2014 as contemplated in the worst-case scenario-between the initial stages of Plan development and 2040. Thus, the cancer risk caused by the plan is better represented by the predicted 8.1 per million increase in cancer risk predicted for 2040 because much of the reduction in traffic emissions has or will have occurred by the time the project begins operation and that the project will only gradually increase traffic over time.

In contrast, the "Existing Plus Plan" cancer risk scenario presented in the DEIR portrays a purely hypothetical scenario that is unrealistically conservative. In addition, the DEIR only reported the maximum increase, which would occur immediately adjacent to the I-80 freeway and ramps. Based on our review of the modeling analysis supporting the DEIR, risks would be lower further away from these sources. However, the risk is being portrayed as uniformly at 226 per million. Indeed, the Planning Department clarified that point today in a Supplemental Appeal Response released today. "Within the Plan Area only, the average increase (under Existing Plus Plan) in cancer risk is 32 per one million persons exposed." (Supp. App. Resp. at p. 4.)

In conclusion, the Board should avoid giving significant weight to the worst-case scenario cancer risk increase because the figure does not properly depict the actual cancer risk presented by the Plan, which is quite low.

Sincerely, James A. Revff Senior Consultant, Principal

Illingworth & Rodkin, Inc.