

**State of California
Office of Administrative Law**

In re:
Bureau of Automotive Repair

Regulatory Action:

Title 16, California Code of Regulations

Amend sections: 3311.1, 3340.45

NOTICE OF APPROVAL OF REGULATORY
ACTION

Government Code Section 11349.3

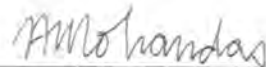
OAL Matter Number: 2026-0218-04

OAL Matter Type: Regular (S)

In this rulemaking action, the Bureau of Automotive Repair allows Smog Check and Vehicle Safety Systems Inspections stations to use new models of the Fujitsu FAT13FPS01 palm vein scanner sensor.

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on 7/1/2026.

Date: April 2, 2026



Ashita Mohandas
Attorney

For: Kenneth J. Pogue
Director

Original: Patrick Dorais, Chief
Copy: Holly Helsing

NOTICE PUBLICATION/REGULATIONS SUBMISSION

REGULAR

For use by Secretary of State only

STD. 400 (REV. 10/2019)

OAL FILE NUMBERS	NOTICE FILE NUMBER Z-2025-1013-04	REGULATORY ACTION NUMBER 2026-0218-045	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
OFFICE OF ADMINISTRATIVE LAW		OFFICE OF ADMIN. LAW 2026 FEB 18 AM 11:12	
Electronic Submission			
RECVD DATE 10/13/2025	PUBLICATION DATE 10/24/2025		
NOTICE		REGULATIONS	

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

APR 02 2026
NG 1:38 pm

AGENCY WITH RULEMAKING AUTHORITY
BUREAU OF AUTOMOTIVE REPAIR

AGENCY FILE NUMBER (If any)

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

1. SUBJECT OF NOTICE Biometric Device Updates		TITLE(S) 16	FIRST SECTION AFFECTED 3311.1	2. REQUESTED PUBLICATION DATE 10/24/2025
3. NOTICE TYPE <input checked="" type="checkbox"/> Notice re Proposed Regulatory Action <input type="checkbox"/> Other		4. AGENCY CONTACT PERSON Holly Helsing	TELEPHONE NUMBER 916-970-8421	FAX NUMBER (Optional)
OAL USE ONLY	ACTION ON PROPOSED NOTICE <input type="checkbox"/> Approved as Submitted <input type="checkbox"/> Approved as Modified <input type="checkbox"/> Disapproved/Withdrawn		NOTICE REGISTER NUMBER	PUBLICATION DATE

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Biometric Device Updates	1b. ALL PREVIOUS RELATED OAL REGULATORY ACTION NUMBER(S)
2. SPECIFY CALIFORNIA CODE OF REGULATIONS TITLE(S) AND SECTION(S) (including title 26, if toxics related)	

PER AGENCY REQUEST
AM 4/1/26

SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND 3311.1 and 3340.45
	REPEAL
TITLE(S) 16	

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 §§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"/> 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)

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

Effective January 1, April 1, July 1, or October 1 (Gov. Code §11343.4(a)) Effective on filing with Secretary of State \$100 Changes Without Regulatory Effect Effective other (Specify)

6. CHECK IF THESE REGULATIONS REQUIRE NOTICE TO, OR REVIEW, CONSULTATION, APPROVAL OR CONCURRENCE BY, ANOTHER AGENCY OR ENTITY

Department of Finance (Form STD. 399) (SAM §6660) Fair Political Practices Commission State Fire Marshal

Other (Specify) Christine J. Lally, Acting Director, Department of Consumer Affairs *Christine Lally*

PER AGENCY REQUEST
AM 4/1/26

7. CONTACT PERSON Holly Helsing	TELEPHONE NUMBER (916) 970-8421	FAX NUMBER (Optional)	E-MAIL ADDRESS (Optional) holly.helsing@dca.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.

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

APR 02 2026

Office of Administrative Law

SIGNATURE OF AGENCY HEAD OR DESIGNEE <u>Patrick Dorais</u> <small>Patrick Dorais (File # 2025-1127-33 PST)</small>	DATE 02/09/2026
TYPED NAME AND TITLE OF SIGNATORY Patrick Dorais, Bureau Chief, Bureau of Automotive Repair	