

**State of California
Office of Administrative Law**

In re:
Bureau of Automotive Repair

Regulatory Action:

Title 16, California Code of Regulations

Amend section: 3340.42.2

**NOTICE OF APPROVAL OF REGULATORY
ACTION**

Government Code Section 11349.3

OAL Matter Number: 2025-0528-01

OAL Matter Type: Regular (S)

In this regular rulemaking, the Bureau of Automotive Repair is amending regulations to require all second generation onboard diagnostic systems readiness monitors to be run to completion in order for a vehicle to pass a Smog Check inspection.

OAL approves this regulatory action pursuant to section 11349.3 of the Government Code. This regulatory action becomes effective on 10/1/2025.

Date: July 9, 2025



**Steven J. Escobar
Senior Attorney**

**Original: Patrick Dorais, Chief
Copy: Holly Helsing**

**For: Kenneth J. Pogue
Director**

NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 10/2019)

REGULARSee instructions on
reverse)

For use by Secretary of State only

OAL FILE NUMBERS	NOTICE FILE NUMBER Z- 2024-1016-01	REGULATORY ACTION NUMBER 2025-0528-01S	EMERGENCY NUMBER
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For use by Office of Administrative Law (OAL) only

OFFICE OF ADMINISTRATIVE LAW

Electronic Submission

RECEIVED DATE

10/16/2024

PUBLICATION DATE

11/01/2024

NOTICE

REGULATIONS

AGENCY WITH RULEMAKING AUTHORITY
Bureau of Automotive Repair**ENDORSED - FILED**
in the office of the Secretary of State
of the State of California

JUL 09 2025

1:32 pm

NM

AGENCY FILE NUMBER (If any)

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

1. SUBJECT OF NOTICE Readiness Monitor Limits		TITLE(S) 16	FIRST SECTION AFFECTED 3340.42.2	2. REQUESTED PUBLICATION DATE November 1, 2024
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 Disapproved/Withdrawn		NOTICE REGISTER NUMBER 2024, 44-2	PUBLICATION DATE 11/1/24

B. SUBMISSION OF REGULATIONS (Complete when submitting regulations)

1a. SUBJECT OF REGULATION(S) Readiness Monitor Limits	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)

SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)	ADOPT
	AMEND 3340.42.2
	REPEAL
TITLE(S) 16	

3. TYPE OF FILING

- ☒ Regular Rulemaking (Gov. Code §11346)
☐ Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4)
☐ Emergency (Gov. Code, §11346.1(b))
- ☐ 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.
☐ Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)
- ☐ Emergency Readopt (Gov. Code, §11346.1(h))
☐ File & Print
☐ Other (Specify) _____
- ☐ Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)
☐ Print Only

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) N/A**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) _____

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.

SIGNATURE OF AGENCY HEAD OR DESIGNEE

DATE

05/22/2025

TYPED NAME AND TITLE OF SIGNATORY

Kimberly Kirchmeyer, Director, Department of Consumer Affairs

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

JUL 09 2025

Office of Administrative Law