

**State of California  
Office of Administrative Law**

**In re:**  
Bureau of Automotive Repair

**Regulatory Action:**

Title 16, California Code of Regulations

**Adopt sections:**

**Amend sections:** 3340.50

**Repeal sections:** 3312.1.1, 3314.1.1, 3315,  
3316, 3320, 3321

**NOTICE OF APPROVAL OF CHANGES  
WITHOUT REGULATORY EFFECT**

California Code of Regulations, Title 1,  
Section 100

**OAL Matter Number: 2025-0429-01**

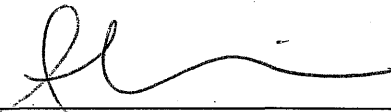
**OAL Matter Type: Nonsubstantive (N)**

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This change without regulatory effect by the Bureau of Automotive Repair amends sections within title 16 of the California Code of Regulations, regarding brake and lamp adjusting stations and their respective inspectors. This action repeals sections 3312.1.1, 3314.1.1, 3315, 3316, 3320, 3321, and amends section 3340.50 to add an internal cross reference for the defined term "Responsible Managing Employee."

OAL approves this change without regulatory effect as meeting the requirements of California Code of Regulations, title 1, section 100.

**Date:** May 29, 2025



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Allegra Volonte Anvari  
Attorney

**For:** Kenneth J. Pogue  
Director

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

## NOTICE PUBLICATION/REGULATIONS SUBMISSION

STD. 400 (REV. 10/2019)

NONSUBSTANTIVE

For use by Secretary of State only

OAL FILE NUMBERS	NOTICE FILE NUMBER <b>Z-</b>	REGULATORY ACTION NUMBER <b>2025-0429-01N</b>	EMERGENCY NUMBER
For use by Office of Administrative Law (OAL) only			
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

MAY 29 2025

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	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) Omnibus Clean Up of Related Regulations 2025		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)			
SECTION(S) AFFECTED (List all section number(s) individually. Attach additional sheet if needed.)		ADOPT	
AMEND		3340.50	
TITLE(S) 16		REPEAL	
		3312.1.1, 3314.1.1, 3315, 3316, 3320, and 3321	
3. TYPE OF FILING			
<input type="checkbox"/> Regular Rulemaking (Gov. Code §11346) <input type="checkbox"/> Resubmittal of disapproved or withdrawn nonemergency filing (Gov. Code §§11349.3, 11349.4) <input type="checkbox"/> Emergency (Gov. Code, §11346.1(b))		<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"/> Resubmittal of disapproved or withdrawn emergency filing (Gov. Code, §11346.1)	
<input type="checkbox"/> Emergency Readopt (Gov. Code, §11346.1(h))		<input checked="" type="checkbox"/> Changes Without Regulatory Effect (Cal. Code Regs., title 1, §100)	
<input type="checkbox"/> File & Print		<input type="checkbox"/> Print Only	
<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) N/A			
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 type="checkbox"/> Effective on filing with Secretary of State <input checked="" type="checkbox"/> \$100 Changes Without Regulatory Effect <input type="checkbox"/> Effective other (Specify)			
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 Holly Helsing		TELEPHONE NUMBER (916) 403-8627	FAX NUMBER (Optional) E-MAIL ADDRESS (Optional) holly.helsing@dca.ca.gov

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

04/29/2025

TYPED NAME AND TITLE OF SIGNATORY

Kimberly Kirchmeyer, Director, Department of Consumer Affairs

For use by Office of Administrative Law (OAL) only

ENDORSED APPROVED

MAY 29 2025

Office of Administrative Law