Notice of Completion & Environmental Document Transmittal

Mail to: State Clearinghouse, P.O. Box 3044, Sacramento, CA 95812-3044 (916) 445-0613 SCH# For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814 Project Title: Lead Agency: Contact Person: Phone: Mailing Address: County: ______ ______ Project Location: County: _____ City/Nearest Community: _____ Cross Streets: Zip Code: _____ Longitude/Latitude (degrees, minutes and seconds): _____° _____′ N / ° ′ W Total Acres: ______ _____ Section: _____ Twp.: _____ Range: _____ Base: _____ Assessor's Parcel No.: State Hwy #: Waterways: Within 2 Miles: Airports: Railways: _____ Schools: Document Type: CEQA: NOP Draft EIR NEPA: NOI Other: Joint Document Supplement/Subsequent EIR EA Final Document Early Cons Neg Dec (Prior SCH No.) Draft EIS Other: ☐ Mit Neg Dec FONSI **Local Action Type:** ☐ Specific Plan General Plan Update Rezone ☐ Annexation General Plan Amendment Master Plan Prezone ☐ Redevelopment General Plan Element ☐ Planned Unit Development ☐ Use Permit Coastal Permit ☐ Community Plan Site Plan ☐ Land Division (Subdivision, etc.) ☐ Other: Development Type: Residential: Units _____ Acres ___ ☐ Office: Sq.ft. Acres Employees ☐ Transportation: Type ☐ Commercial:Sq.ft. Acres Employees ☐ Mining: Minera Mineral Industrial: Sq.ft. ____ Acres ___ Employees____ Power: Type _____ Waste Treatment: Type _____ Educational: MGD Recreational: Hazardous Waste:Type Water Facilities: Type MGD Other: **Project Issues Discussed in Document:** Fiscal ☐ Aesthetic/Visual ☐ Recreation/Parks Vegetation Flood Plain/Flooding ☐ Schools/Universities Water Quality ☐ Agricultural Land Air Quality Forest Land/Fire Hazard Septic Systems Water Supply/Groundwater Archeological/Historical Sewer Capacity Geologic/Seismic Wetland/Riparian ☐ Biological Resources ☐ Minerals
☐ Noise ☐ Soil Erosion/Compaction/Grading Growth Inducement ☐ Coastal Zone Solid Waste Land Use ☐ Drainage/Absorption ☐ Population/Housing Balance ☐ Toxic/Hazardous ☐ Cumulative Effects ☐ Economic/Jobs Public Services/Facilities Traffic/Circulation Other: **Present Land Use/Zoning/General Plan Designation: Project Description:** (please use a separate page if necessary)

Reviewing Agencies Checklist

one:	<u> </u>
ntact:	Phone:
dress:	Address:
ad Agency (Complete if applicable):	
rting Date	Ending Date
cal Public Review Period (to be filled in by lead age	ncy)
Native American Heritage Commission	
Housing & Community Development	Other:
Health Services, Department of	Other:
General Services, Department of	
Forestry and Fire Protection, Department of	Water Resources, Department of
Food & Agriculture, Department of	Toxic Substances Control, Department of
Fish & Game Region #	Tahoe Regional Planning Agency
Energy Commission	SWRCB: Water Rights
Education, Department of	SWRCB: Water Quality
Delta Protection Commission	SWRCB: Clean Water Grants
Corrections, Department of	State Lands Commission
Conservation, Department of	Santa Monica Mtns. Conservancy
Colorado River Board	San Joaquin River Conservancy
Coastal Commission	San Gabriel & Lower L.A. Rivers & Mtns. Conservan
Coachella Valley Mtns. Conservancy	S.F. Bay Conservation & Development Comm.
Central Valley Flood Protection Board	Resources Recycling and Recovery, Department of
Caltrans Planning	Resources Agency
Caltrans Division of Aeronautics	Regional WQCB #
Caltrans District #	Public Utilities Commission
California Highway Patrol	Pesticide Regulation, Department of
California Emergency Management Agency	Parks & Recreation, Department of
Boating & Waterways, Department of	Office of Public School Construction
Air Resources Board	Office of Historic Preservation

Authority cited: Section 21083, Public Resources Code. Reference: Section 21161, Public Resources Code.