



SANTA CLARA COUNTY CLERK
CEQA FILING COVER SHEET

Santa Clara County - Clerk-Recorder Office
State of California

File Number: ENV25203

ENVIRONMENTAL FILING

No. of Pages: 2

Total Fees: \$2966.75

File Date: 07/19/2024

Expires: 08/18/2024

REGINA ALCOMENDRAS, Clerk-Recorder

By: Patricia Camarena, Deputy Clerk-Recorder

THIS SPACE FOR CLERK'S USE ONLY

Complete and attach this form to each CEQA Notice filed with the County Clerk

TYPE OR PRINT CLEARLY

Check Document being Filed:

- Environmental Impact Report (EIR)
- Filing Fee (new project)
- Previously Paid F&W (must attach F&W receipt and project titles must match)
- No Effect Determination (F&W letter must be attached)
- Mitigated Negative Declaration (MND) or Negative Declaration (ND)
- Filing Fee (new project)
- Previously Paid F&W (must attach F&W receipt and project titles must match)
- No Effect Determination (F&W letter must be attached)
- Notice of Exemption (NOE)
- Other (Please fill in type):

1. LEAD AGENCY: City of Santa Clara
2. LEAD AGENCY EMAIL: NAgrawal@SantaClaraCA.gov
3. PROJECT TITLE: 5200 Patrick Henry Drive- Arista Office Development
4. APPLICANT NAME: Orlando Rios PHONE: 408-836-5275
5. APPLICANT EMAIL: rios@arista.com
6. APPLICANT ADDRESS: 5453 Great America Parkway Santa Clara CA 95054
7. PROJECT APPLICANT IS A: Local Public Agency School District Other Special District State Agency Private Entity
8. NOTICE TO BE POSTED FOR 30 DAYS.

Filing fees are due at the time a Notice of Determination/Exemption is filed with our office. For more information on filing fees and No Effect Determinations, please refer to California Code of Regulations, Title 14, section 753.5.

Notice of Determination

Appendix D

To:

Office of Planning and Research
 U.S. Mail: _____ Street Address: _____
 P.O. Box 3044 1400 Tenth St., Rm 113
 Sacramento, CA 95812-3044 Sacramento, CA 95814

County Clerk
 County of: Santa Clara
 Address: 70 West Hedding Street, East Wing
San Jose, CA 95110

From:

Public Agency: City of Santa Clara
 Address: 1500 Warburton Avenue
Santa Clara, CA 95050
 Contact: Nimisha Agrawal
 Phone: 408-615-2467

Lead Agency (if different from above): _____
 Address: _____
 Contact: _____
 Phone: _____

SUBJECT: Filing of Notice of Determination in compliance with Section 21108 or 21152 of the Public Resources Code.

State Clearinghouse Number (if submitted to State Clearinghouse): 2024050479

Project Title: 5200 Patrick Henry Drive Office- Arista Office Development

Project Applicant: Arista Networks- Orlando Rios

Project Location (include county): 5200 Patrick Henry Drive Santa Clara 95054, Santa Clara County

Project Description:

Architectural Review for demolition of an existing one-story vacant building to construct a new 244,918 square foot four-story office building with an ancillary data center, one level subsurface parking and site improvements for the Property Located at 5201 Patrick Henry Drive.

This is to advise that the City of Santa Clara has approved the above
 (Lead Agency or Responsible Agency)

described project on 07/17/2024 and has made the following determinations regarding the above
 (date)
 described project.

1. The project [will will not] have a significant effect on the environment.
2. An Environmental Impact Report was prepared for this project pursuant to the provisions of CEQA.
 A Negative Declaration was prepared for this project pursuant to the provisions of CEQA.
3. Mitigation measures [were were not] made a condition of the approval of the project.
4. A mitigation reporting or monitoring plan [was was not] adopted for this project.
5. A statement of Overriding Considerations [was was not] adopted for this project.
6. Findings [were were not] made pursuant to the provisions of CEQA.

This is to certify that the final EIR with comments and responses and record of project approval, or the negative Declaration, is available to the General Public at:

IS/MND is available at : WWW.SantaClara.gov/CEQA

Signature (Public Agency): Nimisha Agrawal Title: Senior Planner

Date: July 18, 2024 Date Received for filing at OPR: _____



State of California - Department of Fish and Wildlife
2024 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/24) Previously DFG 753.5a

| |
|--|
| RECEIPT NUMBER: ENV25203 |
| STATE CLEARINGHOUSE NUMBER (If applicable) |

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

| | | |
|--|-------------------|--------------------|
| LEAD AGENCY CITY OF SANTA CLARA | LEAD AGENCY EMAIL | DATE 07/19/2024 |
| COUNTY/STATE AGENCY OF FILING SANTA CLARA | DOCUMENT NUMBER | |

PROJECT TITLE
5200 PATRICK HENRY DRIVE-ARISTA OFFICE DEVELOPMENT

| | | |
|---|-------------------------|--------------------------------|
| PROJECT APPLICANT NAME ORLANDO RIOS | PROJECT APPLICANT EMAIL | PHONE NUMBER (408) 836-5275 |
| PROJECT APPLICANT ADDRESS 5453 GREAT AMERICA PARKWAY | CITY SANTA CLARA | STATE CA |
| | | ZIP CODE 95054 |

PROJECT APPLICANT (Check appropriate box)

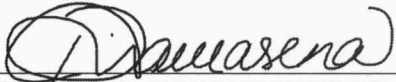
Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity

CHECK APPLICABLE FEES:

| | | |
|---|------------|--------------------|
| <input type="checkbox"/> Environmental Impact Report (EIR) | \$4,051.25 | \$ _____ |
| <input checked="" type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$2,916.75 | \$ <u>2,916.75</u> |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,377.25 | \$ _____ |
| | | |
| <input type="checkbox"/> Exempt from fee | | |
| <input type="checkbox"/> Notice of Exemption (attach) | | |
| <input type="checkbox"/> CDFW No Effect Determination (attach) | | |
| <input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy) | | |
| <hr/> | | |
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00 | \$ _____ |
| <input checked="" type="checkbox"/> County documentary handling fee | | \$ <u>50.00</u> |
| <input type="checkbox"/> Other | | \$ _____ |

PAYMENT METHOD:

Cash
 Credit
 Check
 Other
 TOTAL RECEIVED
 \$ 2,966.75

| | |
|---|--|
| SIGNATURE X  | AGENCY OF FILING PRINTED NAME AND TITLE Patricia Camarena, Deputy County Clerk-Recorder |
|---|--|

Santa Clara County Recorder - Official Records

110 West Tasman Drive
San Jose, CA 95134
408-299-5688

| | | | |
|-------------------------|-----------------------------|-----------------------------|--------------|
| Source: | Phone Order (Card Keyed-In) | Authorization: | Paid in Full |
| Order Date/Time: | 7/19/2024 03:56 PM PDT | Agency Amount: | \$2966.75 |
| Order Number: | 185043766 | Other Agency Amount: | \$0.00 |
| Operator: | PattyC | Shipping Amount: | \$0.00 |
| Location Code: | *****615 | LN Service Fee: | \$2.50 |
| | | Total Amount(USD): | \$2969.25 |

Payment Information

| | | | |
|--------------------------|---------------------------------------|---------------------------|---------------|
| Transaction Type: | Purchase | Expiration | ###/## |
| Card Holder: | Katie Smith | Transaction Ref #: | 185621436 |
| Payment Method: | Credit Card (MASTERCARD *****1556) | CVV2 Response: | |
| Approval Code: | 01916Q | Auth Txn Id #: | MCBM6XMPV0719 |
| AVS Response: | Y | Val Code: | |

Merchant Copy

| | | |
|----------------------|----------------|-----------------------|
| Agency Amount | Product | Product Detail |
| \$2966.75 | Clerk Payment | |

Santa Clara County Recorder - Official Records

110 West Tasman Drive, San Jose, CA 95134
408-299-5688

VitalChek Receipt - Phone Order (Card Keyed-In)
Cardholder Copy

| | | | |
|---------------------------------|------------------------|---------------------------|-----------|
| Order Date/Time: | 7/19/2024 03:56 PM PDT | Transaction Type: | Purchase |
| Confirmation Number: | 185043766 | Approval Code: | 01916Q |
| Payment Applied towards: | Clerk Payment | Transaction Ref #: | 185621436 |
| Card Holder: | Katie Smith | Payment Method: | MC(1556) |

Bill To

Katie Smith
5453 Great America Parkway
Santa Clara, CA 95054

| | |
|----------------------|--------------|
| Authorization: | Paid in Full |
| Agency Amount: | \$2966.75 |
| Other Agency Amount: | \$0.00 |
| LN Service Fee: | \$2.50 |
| Total Amount(USD): | \$2969.25 |

Refund Policy: Please contact the agency listed on the receipt to request a refund.