

Notice of Determination

Appendix D

To:

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

County Clerk
County of: Los Angeles
Address: 12400 Imperial Highway Norwalk, CA 90650

From:

Public Agency: City of Avalon
Address: 410 Avalon Canyon Road Avalon, CA 90704
Contact: Bob Greenlaw, P.E., CIP Director
Phone: 310-510-0220

Lead Agency (if different fr
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): 2024101329

Project Title: South Beach Restoration and Shoreline Access Enhancement Project

Project Applicant: City of Avalon, 410 Avalon Canyon Road, Avalon, CA 90704

Project Location (include county): The southeast shoreline of Avalon Harbor, known as South Beach, located between Green Pleasure Pier to the north and the existing revetment along Pebbly Beach Road to the south, a distance of approximately 300 linear feet.

Project Description:

The South Beach Restoration and Shoreline Access Enhancement Project is being proposed by the City of Avalon to address the erosive effects of currents within Avalon Harbor. Erosion of the beach sand has been occurring for a period of years and is being caused primarily by failure of the existing groin wall/wingwall which extended from the seawall adjacent to the launch ramp into Avalon Harbor approximately 40 feet. The intent of the project is to replace the groin wall/wingwall to protect the beach from propellor/jet wash, restore the seawall, launch ramp and beach access stairway surfaces and replace the beach sand with approximately 6,000 cubic yards of imported sand.

This is to advise that the City of Avalon Planning Commission has approved the above (X) Lead Agency or () Responsible Agency

described project on October 22, 2025 and has made the following determinations regarding the above described project. (date)

- 1. The project [] will [X] 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. [X] A Negative Declaration was prepared for this project pursuant to the provisions of CEQA.
3. Mitigation measures [X] were [] were not made a condition of the approval of the project.
4. A mitigation reporting or monitoring plan [X] was [] was not adopted for this project.
5. A statement of Overriding Considerations [] was [X] was not adopted for this project.
6. Findings [X] 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:

City of Avalon Planning Department, 410 Avalon Canyon Road, Avalon, CA 90704

Signature (Public Agency): [Signature] Title: CIP Director

Date: 10/22/25 Date Received for filing at OPR:

THIS NOTICE WAS POSTED ON October 23 2025

UNTIL November 24 2025

Authority cited: Sections 21083, Public Resources Code. Reference Section 21000-21174, Public Resources Code.

REGISTRAR - RECORDER/COUNTY CLERK



State of California—Department of Fish and Wildlife

**2025 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT**

DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

| |
|--|
| RECEIPT Number: 19 — 10/23/2025 — 202510231240017 |
| STATE CLEARING HOUSE # (if applicable) 2024101329 |

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

| | | |
|---|-------------------------------|-------------------------------|
| LEAD AGENCY CITY OF AVALON | LEAD AGENCY EMAIL | DATE 10/23/2025 |
| COUNTY/STATE AGENCY OF FILING COUNTY OF LA | DOCUMENT NUMBER 2025240871 | |
| PROJECT TITLE SOUTH BEACH RESTORATION AND SHORELINE ACCESS ENHANCEMENT PROJECT | | |
| PROJECT APPLICANT NAME BOB GREENLAW | PROJECT APPLICANT EMAIL | PHONE NUMBER (310)510-0220 |
| PROJECT APPLICANT ADDRESS 410 AVALON CANYON RD. | CITY AVALON | STATE CA |
| | | ZIP CODE 90704 |

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) | \$4,123.50 | \$ <u>0.00</u> |
| <input checked="" type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$2,968.75 | \$ <u>2,968.75</u> |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,401.75 | \$ <u>0.00</u> |
| | | |
| <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 | \$ <u>0.00</u> |
| <input checked="" type="checkbox"/> County documentary handling fee | | \$ <u>75.00</u> |
| <input type="checkbox"/> Other | | \$ <u>0.00</u> |

PAYMENT METHOD:

- Cash
 Credit
 Check
 Other

TOTAL RECEIVED \$ 3,043.75

| | |
|--------------------|--|
| SIGNATURE X | AGENCY OF FILING PRINTED NAME AND TITLE ITC |
|--------------------|--|