



ORANGE COUNTY
CLERK-RECORDER
CEQA FILING COVER SHEET

30-0511312025-0338

202585000442

FILED

May 13, 2025

HUGH NGUYEN
CLERK - RECORDER

By [Signature]
Deputy clerk

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

TYPE OR PRINT CLEARLY

Project Title

CUP - COSTA AZUL ABC TYPE 47

Check Document being Filed:

- Environmental Impact Report (EIR)
- Mitigated Negative Declaration (MND) or Negative Declaration (ND)
- Notice of Exemption (NOE)
- Other (Please fill in type):

**FILED IN THE OFFICE OF THE ORANGE
COUNTY CLERK-RECORDER ON 05/13/2025**
Posted 05/13/2025 Removed _____
Returned to agency on _____
DEPUTY 483

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.

MAYOR
Valerie Amezcua
MAYOR PRO TEM
Benjamin Vazquez
COUNCILMEMBERS
Phil Bacerra
Johnathan Ryan Hernandez
Jessie Lopez
David Penaloza
Thai Viet Phan



CITY MANAGER
Alvaro Nuñez
CITY ATTORNEY
Sonia R. Carvalho
CLERK OF THE COUNCIL
Jennifer L. Hall

CITY OF SANTA ANA

Planning and Building Agency
20 Civic Center Plaza • P.O. BOX 1988
Santa Ana, California 92702
www.santa-ana.org

NOTICE OF EXEMPTION

From the Requirements of the California Environmental Quality Act (CEQA)

To: COUNTY CLERK
County of Orange
P.O. Box 238
Santa Ana, CA 92702

From: City of Santa Ana
Planning & Building Agency
20 Civic Center Plaza M-20
Santa Ana, CA 92702

Project Title: CUP - Costa Azul ABC Type 47

Date of Approval: 05/12/2025

Project Number(s): CUP-2025-8-RST

Project Location: 800 W Seventeenth St

City: Santa Ana

County: Orange

ER Number: ER-2025-26

Project Description: The applicant is requesting approval of a type 47 ABC license for an existing restaurant operating daily from 10:00 a.m. to 12:00 a.m.

Applicant Name: German Nunez, Costa Azul 17th St Inc

Applicant Address: 800 W 17th St
SANTA ANA, CA 92706

Name of Public Agency Approving Project: Planning Commission

Name of Person or Agency Carrying Out Project: Santana, Cristian

Exempt Status:

- Ministerial (Sec. 15268)
- Declared Emergency (Sec. 15269 (a))
- Emergency Project (Sec. 15269 (b through e))
- General Rule (Sec. 15061(b)(3)/(5))
- Statutory Exemption:
- Categorical Exemption: Class I, Section 15301

Reason(s) Why Project is Exempt From CEQA:

The project does not include the construction of new square footage or intensification/change of the use. The proposed project includes upgrading liquor license at an existing restaurant.

City Contact: Cristian Santana

Telephone: (714) 667-2728

Signature:

Cristian Santana

Title:

Assistant Planner II

Date:

5/13/25

FILED

MAY 13 2025

HUGH NGUYEN, CLERK-RECORDER

BY:  DEPUTY



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:
 30-05/13/2025-0338
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY CITY OF SANTA ANA	LEAD AGENCY EMAIL	DATE 05/13/2025
COUNTY/STATE AGENCY OF FILING ORANGE COUNTY	DOCUMENT NUMBER 202585000442	

PROJECT TITLE

 CUP - COSTA AZUL ABC TYPE 47

PROJECT APPLICANT NAME GERMAN NUNEZ, COSTA AZUL 17TH ST INC	PROJECT APPLICANT EMAIL	PHONE NUMBER (714) 667-2728
PROJECT APPLICANT ADDRESS 800 W 17TH ST	CITY SANTA ANA	STATE CA
		ZIP CODE 92706

PROJECT APPLICANT (Check appropriate box)
 Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity

CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) \$ 4,123.50 \$ _____
- Mitigated/Negative Declaration (MND)(ND) \$ 2,968.75 \$ _____
- Certified Regulatory Program (CRP) document - payment due directly to CDFW \$ 1,401.75 \$ _____

- Exempt from fee
 - Notice of Exemption (attach)
 - CDFW No Effect Determination (attach)
- Fee previously paid (attach previously issued cash receipt copy)

- Water Right Application or Petition Fee (State Water Resources Control Board only) \$ 850.00 \$ _____
- County documentary handling fee \$ 50.00 \$ _____ 50.00
- Other \$ _____

PAYMENT METHOD:

- Cash Credit Check Other
- TOTAL RECEIVED \$ _____ 50.00**

SIGNATURE X	AGENCY OF FILING PRINTED NAME AND TITLE Kalci Do Deputy Clerk
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