

Notice of Completion & Environmental Document Transmittal

Mail to: State Clearinghouse, P.O. Box 3044, Sacramento, CA 95812-3044 (916) 445-0613

For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814

SCH #

Project Title: EARL GRAHAM FREIGHT CONTAINER STORAGE AREA

Lead Agency: COUNTY OF SAN BERNARDINO

Contact Person: OLIVER MUJICA

Mailing Address: 385 N. Arrowhead Avenue, 1st Floor

Phone: 909 387-4002

City: SAN BERNARDINO

Zip: 92415-0182

County: COUNTY OF SAN BERNARDINO

Project Location: County: COUNTY OF SAN BERNARDINO City/Nearest Community: Apple Valley

Cross Streets: Deep Creek Road/Rock Springs Road Zip Code: 92308-8318

Longitude/Latitude (degrees, minutes and seconds): 34 ° 25 ' 06.24 " N / 117 ° 13 ' 14.72 " W Total Acres: 17.89

Assessor's Parcel No.: 0438-163-24-0000

Section: 20

Twp.: T4N

Range: R3W

Base: SBM

Within 2 Miles: State Hwy #: _____

Waterways: _____

Airports: _____

Railways: BNSF

Schools: _____

Document Type:

CEQA: NOP

Draft EIR

NEPA: NOI

Other: Joint Document

Early Cons

Supplement/Subsequent EIR

EA

Final Document

Neg Dec

(Prior SCH No.) _____

Draft EIS

Other: _____

Mit Neg Dec

Other: _____

FONSI

Local Action Type:

General Plan Update

Specific Plan

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 _____

Transportation: Type _____

Office: Sq.ft. _____ Acres _____

Employees _____

Mining: Mineral _____

Commercial: Sq.ft. _____ Acres _____

Employees _____

Power: Type _____

MW _____

Industrial: Sq.ft. 119,148 Acres 17.89

Employees _____

Waste Treatment: Type _____

MGD _____

Educational: _____

Hazardous Waste: Type _____

Recreational: _____

Other: _____

Water Facilities: Type _____

MGD _____

Project Issues Discussed in Document:

Aesthetic/Visual

Fiscal

Recreation/Parks

Vegetation

Agricultural Land

Flood Plain/Flooding

Schools/Universities

Water Quality

Air Quality

Forest Land/Fire Hazard

Septic Systems

Water Supply/Groundwater

Archeological/Historical

Geologic/Seismic

Sewer Capacity

Wetland/Riparian

Biological Resources

Minerals

Soil Erosion/Compaction/Grading

Growth Inducement

Coastal Zone

Noise

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:

Vacant w/ Freight Container Storage (TUP)/AV/AG/Resource Land Management (RLM) AV/AG

Project Description: (please use a separate page if necessary)

Earl Graham (Applicant) is requesting approval of a Conditional Use Permit for the establishment and operation of a Freight Container and truck trailer Storage yard (up to 3,000) on 17.89 acres of storage area on a 23.37 acre parcel that is vacant undeveloped land that is currently being use as a Freight Container Storage Area under a Temporary Use Permit (TUP). The Freight Containers are empty and are placed on the site for interim storage until they are needed, which is based on the Commercial Market supply and demand. These are domestic freight containers that are picked up and transported to a logistics facility not related to the site for filling and transport to the end user of the freight.

Note: The State Clearinghouse will assign identification numbers for all new projects. If a SCH number already exists for a project (e.g. Notice of Preparation or previous draft document) please fill in.

Reviewing Agencies Checklist

Lead Agencies may recommend State Clearinghouse distribution by marking agencies below with and "X".
If you have already sent your document to the agency please denote that with an "S".

<input type="checkbox"/> Air Resources Board	<input checked="" type="checkbox"/> Office of Historic Preservation
<input type="checkbox"/> Boating & Waterways, Department of	<input type="checkbox"/> Office of Public School Construction
<input type="checkbox"/> California Emergency Management Agency	<input type="checkbox"/> Parks & Recreation, Department of
<input type="checkbox"/> California Highway Patrol	<input type="checkbox"/> Pesticide Regulation, Department of
<input type="checkbox"/> Caltrans District # _____	<input type="checkbox"/> Public Utilities Commission
<input type="checkbox"/> Caltrans Division of Aeronautics	<input checked="" type="checkbox"/> Regional WQCB # <u>6</u>
<input type="checkbox"/> Caltrans Planning	<input type="checkbox"/> Resources Agency
<input type="checkbox"/> Central Valley Flood Protection Board	<input type="checkbox"/> Resources Recycling and Recovery, Department of
<input type="checkbox"/> Coachella Valley Mtns. Conservancy	<input type="checkbox"/> S.F. Bay Conservation & Development Comm.
<input type="checkbox"/> Coastal Commission	<input type="checkbox"/> San Gabriel & Lower L.A. Rivers & Mtns. Conservancy
<input type="checkbox"/> Colorado River Board	<input type="checkbox"/> San Joaquin River Conservancy
<input type="checkbox"/> Conservation, Department of	<input type="checkbox"/> Santa Monica Mtns. Conservancy
<input type="checkbox"/> Corrections, Department of	<input type="checkbox"/> State Lands Commission
<input type="checkbox"/> Delta Protection Commission	<input type="checkbox"/> SWRCB: Clean Water Grants
<input type="checkbox"/> Education, Department of	<input type="checkbox"/> SWRCB: Water Quality
<input type="checkbox"/> Energy Commission	<input type="checkbox"/> SWRCB: Water Rights
<input checked="" type="checkbox"/> Fish & Game Region # <u>6</u>	<input type="checkbox"/> Tahoe Regional Planning Agency
<input type="checkbox"/> Food & Agriculture, Department of	<input type="checkbox"/> Toxic Substances Control, Department of
<input type="checkbox"/> Forestry and Fire Protection, Department of	<input type="checkbox"/> Water Resources, Department of
<input type="checkbox"/> General Services, Department of	Other: _____
<input type="checkbox"/> Health Services, Department of	Other: _____
<input type="checkbox"/> Housing & Community Development	
<input checked="" type="checkbox"/> Native American Heritage Commission	

Local Public Review Period (to be filled in by lead agency)

Starting Date 5/1/26 Ending Date 6/1/26

Lead Agency (Complete if applicable):

Consulting Firm: _____	Applicant: <u>Earl Graham</u>
Address: <u>385 N. Arrowhead Avenue, 1st Floor</u>	Address: <u>9233 Deep Creek Road</u>
City/State/Zip: <u>San Bernardino, CA 92415-0182</u>	City/State/Zip: <u>AppleValley, CA 92308-8318</u>
Contact: <u>Oliver Mujica</u>	Phone: <u>760 559-9668</u>
Phone: <u>909 387-4002</u>	

Signature of Lead Agency Representative:  Date: 4/29/26

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