

FILED

SEP 16 2020

BY: [Signature] DEPUTY

## STATE CLEARINGHOUSE



State of California - Department of Fish and Wildlife

**2020 ENVIRONMENTAL FILING FEE CASH RECEIPT**

DFW 753.5a (Rev. 01/01/18) Previously DFG 753.5a

Print

Start Over

Finalize &amp; Email

RECEIPT NUMBER:

30-2020 0714

STATE CLEARINGHOUSE NUMBER (if applicable)

93071051

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY

CITY OF IRVINE

LEAD AGENCY EMAIL

DATE

09/16/2020

COUNTY/STATE AGENCY OF FILING

Orange

DOCUMENT NUMBER

202085000735

PROJECT TITLE

VESTING TENTATIVE PARCEL MAP 2019-177 (FILE NO. 00816106-PTP)

PROJECT APPLICANT NAME

IRVINE COMPANY, ATTN: JEFF DAVIS

PROJECT APPLICANT EMAIL

PHONE NUMBER

(949) 724-6375

PROJECT APPLICANT ADDRESS

550 NEWPORT CENTER DRIVE

CITY

NEWPORT BEACH

STATE

CA

ZIP CODE

92660

PROJECT APPLICANT (Check appropriate box)

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

## CHECK APPLICABLE FEES:

<input checked="" type="checkbox"/> Environmental Impact Report (EIR)	\$3,343.25	\$	3,343.25
<input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)	\$2,406.75	\$	0.00
<input type="checkbox"/> Certified Regulatory Program document (CRP)	\$1,136.50	\$	0.00

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

<input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only)	\$850.00	\$	0.00
<input checked="" type="checkbox"/> County documentary handling fee		\$	50.00
<input type="checkbox"/> Other		\$	

## PAYMENT METHOD:

☐ Cash ☐ Credit ☒ Check ☐ Other

TOTAL RECEIVED \$ 3,393.25

SIGNATURE

X *Hazel L. Bennett*

AGENCY OF FILING PRINTED NAME AND TITLE

HAZEL L. BENNETT, DEPUTY CLERK

Orange County  
Clerk-Recorder's Office  
Hugh Nguyen

601 N. Ross Street  
92701

County

Finalization: 20200000409990  
9/16/20 3:28 pm  
41 VitIndx

Item	Title	Count
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1	202	1
EIR: Environmental Impact Report		

Document ID	Amount
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DOC# 202085000735	3393.25
Time Recorded 3:28 pm	

Total	3393.25
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Payment Type	Amount
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Check tendered	3393.25
# 3100365056	

Amount Due	0.00
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THANK YOU  
PLEASE RETAIN THIS RECEIPT  
FOR YOUR RECORDS

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