ENDORSED FILED

		J 2020	
N	otice of Determination	SEN, Clerk	Appendix D
T	BRIDGETTE	EVANS	
To:	Office of Planning and Research	Public Agency: TRLIA	
لتت	U.S. Mail: Street Address:	Address: 1114 Yuba Stre	et, Suite 218
	P.O. Box 3044 1400 Tenth St., Rm 113	Marysville, CA 95901	
	Sacramento, CA 95812-3044 Sacramento, CA 95814	Contact:Paul Brunner, Ex	ecutive Director
		Phone:530/749-7841	
\mathbf{X}	County Clerk County of: Yuba Address: 915 8th Street, Suite 107	Lead Agency (if different	from above):
	Marysville, CA 95901	Address:	
		Contact:	······································
		Phone:	
Re	BJECT: Filing of Notice of Determination in complia sources Code.		8 or 21152 of the Public
Sta	te Clearinghouse Number (if submitted to State Clearing	nghouse):2014062045	* <u> </u>
Pro	ject Title: Yuba Goldfields 200-Year Flood Protection Project	ct - Addendum No. 3 to Envi	ronmental Impact Report
Pro	ject Applicant: Three Rivers Levee Improvement Authority		
Pro	ject Location (include county): Immediately north of Hamm	nonton-Smartville Road in Y	uba County
sou Yub and with beir	reduce the flood risk in the Reclamation District 784 service and th of the Yuba Goldfields to intercept flood flows from the Yuba a River floodplain west of the Yuba Goldfields. The levee was California Department of Water Resources urban levee desig a seepage remediation, patrol roads, and access ramps is bein ing modified. Construction will primarily occur in 2020, with som s is to advise that the Three Rivers Levee Improvement Au	a River via the Goldfields, a s designed to meet U.S. Arm on criteria for 200-year flood ng constructed, and two area ne components extending in	nd redirect them to the ny Corps of Engineers risk reduction. A levee as in the Goldfields are
110	(X Lead Agency or Re		ias approved the above
	cribed project on <u>July 21, 2020</u> and has made the (date) cribed project.	e following determination	s regarding the above
2. [2 3. N 4. A 5. A	The project $[X]$ will \Box will not] have a significant effect X An Environmental Impact Report was prepared for the A Negative Declaration was prepared for this project Antigation measures $[X]$ were \Box were not] made a contract mitigation reporting or monitoring plan $[X]$ was \Box was A statement of Overriding Considerations $[X]$ was \Box was Findings $[X]$ were \Box were not] made pursuant to the p	nis project pursuant to the pursuant to the provision idition of the approval of as not] adopted for this pr vas not] adopted for this p	ns of CEQA. the project. roject.
neg	s is to certify that the final EIR with comments and resp ative Declaration, is available to the General Public at: w.trlia.org		
Sig	nature (Public Agency): <u>fault</u> Jum	Title: Executive Dire	's Office of Planning & Research ctor, TRLIA
Dat	e: <u>7/21/2020</u> Date Recei	ved for filing at OPR:	Jul 24 2020
		STAT	E CLEARING HOUSE

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

Revised 2011

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		RECEIPT NU	IMBER:	30 Y 10 Y		
x		58 - 07232	2020 - 31			
		STATE CLEA	RINGHOUSE NU	IMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.		2014062045				
LEAD AGENCY	LEADAGENCY EMAIL		DATE	and the second		
THREE RIVERS LEVEE IMPROVEMENT			07/23/202	0		
COUNTY/STATE AGENCY OF FILING			DOCUMENT	NUMBER		
YUBA			2020FG-0	0031		
PROJECT TITLE YUBA GOLDFIELDS 200- YEAR FLOOD PROTECTIO IMPACT REPORT	N PROJECT - ADDEN	DUM NO. 3		ner oggi zi Mede Hol Holen I Szine		
PROJECT APPLICANT NAME	PROJECT APPLICANT EMAIL		PHONE NUN	IBER		
THREE RIVERS LEVEE IMPROVEMENT			(530) 749-	7841		
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE			
1114 YUBA STREET SUITE,218	MARYSVILLE	CA	95901			
PROJECT APPLICANT (Check appropriate box)						
X Local Public Agency School District	Other Special District	State	Agency	Private Entity		
CHECK APPLICABLE FEES:	directly to CDFW		\$ \$ \$, oo ahaa ahaa ahaa ahaa ahaa ahaa ahaa		
 Water Right Application or Petition Fee (State Water Resource County documentary handling fee Other 0.00 	s Control Board only)	\$850.00 \$ \$ \$		\$50.00		
PAYMENT METHOD:	TOTAL R	ECEIVED	§	\$50.00		
SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE						
× Brilfette Want	Bridget	e Er	ans	Deputy		

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