Notice of Completion & Environmental Document Transmittal

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

SCH # 2018041031 For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814 Project Title: Lead Agency: Contact Person: Phone: Mailing Address: City: _____ Zip: ___ County: ____ _____ ______ Project Location: County: _____ City/Nearest Community: _____ Zip Code: _____ Cross Streets: Section: _____ Twp.: ____ Range: ____ Base: ____ Assessor's Parcel No.: State Hwy #: Waterways: Within 2 Miles: Airports: Railways: Schools: Document Type: CEQA: NOP Draft EIR NEPA: NOI Other: Joint Document Supplement/Subsequent EIR EA Final Document Early Cons Neg Dec Draft EIS Other: (Prior SCH No.) ☐ Mit Neg Dec 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 ☐ Land Division (Subdivision, etc.) ☐ Other:_____ ☐ Community Plan Site Plan Development Type: Residential: Units _____ Acres ___ ☐ Office: Sq.ft. Acres Employees ☐ Transportation: Type ☐ Commercial:Sq.ft. Acres Employees ☐ Mining: Minera Mineral Industrial: Sq.ft. Acres Employees Power: Type _____ Waste Treatment: Type MGD Educational: Recreational: Hazardous Waste:Type Water Facilities: Type MGD Other: Project Issues Discussed in Document: Fiscal Aesthetic/Visual ☐ Recreation/Parks Vegetation Flood Plain/Flooding ☐ Schools/Universities ☐ Agricultural Land ☐ Water Quality Air Quality Forest Land/Fire Hazard Septic Systems Water Supply/Groundwater Archeological/Historical Sewer Capacity Geologic/Seismic Wetland/Riparian ☐ Biological Resources ☐ Minerals
☐ Noise ☐ Soil Erosion/Compaction/Grading Growth Inducement ☐ Coastal Zone 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: Project Description:** (please use a separate page if necessary)

Reviewing Agencies Checklist

	ature of Lead Agency Representative:	Date:	
	o:		
Consulting Firm: Address: City/State/Zip: Contact:			
		Address:	
Starting Date		Ending Date	
	Public Review Period (to be filled in by lead age		
	Native American Heritage Commission		
	Housing & Community Development	Other:	
	Health Services, Department of	Other:	
	General Services, Department of		
	Forestry and Fire Protection, Department of	Water Resources, Department of	
	Food & Agriculture, Department of	Toxic Substances Control, Department of	
_X	Fish & Game Region # 5	Tahoe Regional Planning Agency	
	_ Energy Commission	SWRCB: Water Rights	
	Education, Department of	SWRCB: Water Quality	
	Delta Protection Commission	SWRCB: Clean Water Grants	
	Corrections, Department of	State Lands Commission	
	Conservation, Department of	Santa Monica Mtns. Conservancy	
	Colorado River Board	San Joaquin River Conservancy	
	Coastal Commission	San Gabriel & Lower L.A. Rivers & Mtns. Conservancy	
	Coachella Valley Mtns. Conservancy	S.F. Bay Conservation & Development Comm.	
	Central Valley Flood Protection Board	Resources Recycling and Recovery, Department of	
	- Caltrans Planning	Resources Agency	
-	Caltrans Division of Aeronautics	Regional WQCB #	
X	Caltrans District #	Public Utilities Commission	
	California Highway Patrol	Pesticide Regulation, Department of	
	California Emergency Management Agency	Parks & Recreation, Department of	
	Boating & Waterways, Department of	Office of Public School Construction	
	Air Resources Board	Office of Historic Preservation	

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