

## APR 1 0 2019

Notice of Determination	DOWNA ALLRED, CLERK/RECORDER BY DEPUTY Appendix D		
To:  ☑ Office of Planning and Research  U.S. Mail: Street Address:  P.O. Box 3044 1400 Tenth St., Rm 113  Sacramento, CA 95812-3044 Sacramento, CA 95814  ☑ County Clerk  County of: Sacramento  Address: 600 8th Street  Sacramento, CA 95814	From: Public Agency: Reclamation District 341 Address: P.O. Box 140 Rio Vista, CA 94571 Contact: Jesse Barton Phone: 916-444-2880  Lead Agency (if different from above): Address: Contact: Phone:		
SUBJECT: Filing of Notice of Determination in complia Resources Code.	ance with Section 21108 or 21152 of the Public		
State Clearinghouse Number (if submitted to State Clearing	nghouse):2019029126		
Project Title: Sherman Island Belly Wetland Restoration Project	t		
Project Applicant: Reclamation District 341			
Project Location (include county): Sacramento County, Sherm			
Project Description:  a. The Sherman Island Belly Wetland Restoration Project (Project emergent wetlands within a 1936-acre Project boundary. This pro 14 parcels totaling nearly 2,840-acres, all of which are owned by property is currently managed for flood irrigated pasture or row cr disturbance regime associated with field prepping, disking, and gr	oject will be constructed on (entirely or a portion of) the California Department of Water Resources. The ops, which includes a regular and extensive		
This is to advise that the Reclamation District 341	has approved the above		
(⊠ Lead Agency or ☐ Re	sponsible Agency)		
described project on April 9, 2019 and has made the (date) described project.	e following determinations regarding the above		
<ol> <li>The project [☐ will ☒ will not] have a significant effect</li> <li>☐ An Environmental Impact Report was prepared for the ☒ A Negative Declaration was prepared for this project</li> <li>Mitigation measures [☒ were ☐ were not] made a con</li> <li>A mitigation reporting or monitoring plan [☒ was ☐ wa</li> <li>A statement of Overriding Considerations [☐ was ☒ w</li> <li>Findings [☒ were ☐ were not] made pursuant to the project</li> </ol>	pursuant to the provisions of CEQA. pursuant to the provisions of CEQA. dition of the approval of the project. s not] adopted for this project. vas not] adopted for this project.		
This is to certify that the final EIR with comments and responded to the General Public at:  Gallery & Barton 1112 I Street, Suite 240, Sacramento CA 95814  Signature (Public Agency)  Date: April 9, 2019  Date Received	2		

Authority cited: Sections 21083, Public Resources Code.

Reference Section 21000-21174, Public Resources Code.

STATE CLEARINGHOUSE



		Print	estano.	ilanaMexilariai	
		RECEIPT I	NUMBER:		
·		34 (	04102019	<del></del> 189	
		STATE CLI	EARINGHOUSE	NUMBER (If applicable)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.		20190	29126		
LEAD AGENCY	LEADAGENCY EMAIL	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	DATE		
Reclamation District 341			04102	:019	
COUNTY/STATE AGENCY OF FILING			DOCUME	NT NUMBER	
Sacramento			19020	190208	
PROJECT TITLE					
Sherman Island Belly Wetland Restoration Pro	piect				
PROJECT APPLICANT NAME				PHONE NUMBER	
Reclamation District 341			(916) 4	(916) 444-2880	
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE		
PO Box 140	Rio Vista	CA	94571		
PROJECT APPLICANT (Check appropriate box)					
Local Public Agency School District	Other Special District	Sta	ate Agency	Private Entity	
**************************************					
CHECK APPLICABLE FEES:	,			. 0.00	
Environmental Impact Report (EIR)		\$3,271.00	\$	0.00	
✓ Mitigated/Negative Declaration (MND)(ND)		\$2,354.75	\$	2,354.75	
Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,112.00	\$	0.00	
☐ Exempt from fee					
☐ Notice of Exemption (attach)					
CDFW No Effect Determination (attach)					
☐ Fee previously paid (attach previously issued cash receipt cop	y)				
	<del></del>				
☐ Water Right Application or Petition Fee (State Water Resource	es Control Board only)	\$850.00	\$	0.00	
☑ County documentary handling fee			\$	40.00	
☐ Other			\$		
PAYMENT METHOD:	•				
☐ Cash ☐ Credit ☑ Check ☐ Other	TOTAL	RECEIVED	\$	2,394.75	
SIGNATURE AGE	UOV OS EU NIO SENTES			77	
SIGNATURE	NCY OF FILING PRINTED	NAME AND II	ILE		
X Sac	cramento County Cle	rk/Recorde	r-Jon Hermi	son-Deputv Clerk	
\!					