Notice of Determination

Appendix D

To:	Office of Planning and Resear	roh	From: Public Agency: CA Department of Parks&Recreatign Address: 400 Glen Drive Oroville, CA 95966 Contact: Trish Ladd Phone: 530.532.3087 Lead Agency (if different from above):			
	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:	7 9				
	Address:		Address:			
			Contact:Phone:			
	BJECT: Filing of Notice of L sources Code.	Determination in compl	ance with Section 21108 or 21152 of the Public			
Sta	te Clearinghouse Number (if	submitted to State Cleari	nghouse):2019059070			
Pro	ject Title: Castle Crags State P	ark Root Creek Drainage Fo	rest Fuels Management and Public Safety Improver			
Pro	ject Applicant: California Depa	rtment of Parks and Recrea	tion			
Pro	ject Location (include county)	:Castella, Shasta County				
the Trai thre	northern slope of Kettlebelly Ridg I, and land next to and just west of e main activities: implementation	ge, Vista Point Road parking of I-5. The California Depart of the Forest Management	age in Castle Crags State Park, which encompasses and viewing location, a portion of the Pacific Crest ment of Parks and Recreation proposes to conduct Plan and fuels reduction activities, ongoing nergency access road to Vista Point.			
Thi		ia Department of Parks and ☑ Lead Agency or ☐ Re	Recreation has approved the above esponsible Agency)			
	cribed project on <u>8/1/2019</u> (date cribed project.		e following determinations regarding the above			
2. [Report was prepared for t	t on the environment. his project pursuant to the provisions of CEQA. t pursuant to the provisions of CEQA.			
	- Vaccinity		ndition of the approval of the project.			
	-	_	as not] adopted for this project.			
			vas not] adopted for this project.			
	indings [were were no					
neg	s is to certify that the final EIR ative Declaration, is available ps://www.parks.ca.gov/?page_id:	to the General Public at	oonses and record of project approval, or the			
Sig	nature (Public Agency):	ett	Title: Acting District Superintendentning & Research			
Dat	e: 8(1(19	Date Rece	ived for filing at OPR: AUG 05 2019			

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

STATE CLEARINGHOUSE



StartOver Finalize&Er

		l.					
		RECE	IPT NUME	ER:			
		59 -	08/05	/201! —	096		
		STATI	E CLEARIN	IGHOUSE NU	MBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. 201905					9070		
LEAD AGENCY	LEADAGENCY EMAIL			DATE			
CA Parks & Rec.				08/05/2	2019		
COUNTY/STATE AGENCY OF FILING	I			DOCUMENT	NUMBER		
OPR/SCH ▼							
PROJECT TITLE				1			
Castle Crags State Park Root Creek Drainage Forest F	uels Management and	d Public	Safety I	mprovemen	t Project		
PROJECT APPLICANT NAME		PROJECT APPLICANT EMAIL			PHONE NUMBER		
Trish Ladd				(530) 532-3087			
PROJECT APPLICANT ADDRESS	CITY	IST	ΓΑΤΕ	ZIP CODE			
400 Glen Drive	Oroville		A	95966			
PROJECT APPLICANT (Check appropriate box)	OTOVIIIO			00000			
Local Public Agency School District	Other Special District	•	State Ag	jency	Private Entity		
CHECK APPLICABLE FEES:							
☐ Environmental Impact Report (EIR)		\$3,271.	00 \$				
☑ Mitigated/Negative Declaration (MND)(ND)		\$2,354.	75 \$.				
☐ Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,112.	00 \$ _	NII-O-XXIII (XXIII XXIII X	0.00		
Exempt from fee							
☐ Notice of Exemption (attach)							
☐ CDFW No Effect Determination (attach)							
☐ Fee previously paid (attach previously issued cash receipt copy	y)						
Water Bight Application or Detition Foo /State Water Becourse	Control Board only)	\$850.	Φ 00		0.00		
Water Right Application or Petition Fee (State Water Resource:	S Control Board Only)	ф 050.	ОО Ф.				
☐ County documentary handling fee			Ф.				
Other			\$ _				
PAYMENT METHOD:	TOTAL		4		2,354.75		
Cash Credit Check Other	IOTAL	RECEIVE	=D \$.		2,004.70		
SIGNATURE	ICY OF FILING PRINTED I	NAME AN	ID TITLE				
Christine Rodriguez, SCH Manager							