

Summary Form for Electronic Document Submittal

Form F

Lead agencies may include 15 hardcopies of this document when submitting electronic copies of Environmental Impact Reports, Negative Declarations, Mitigated Negative Declarations, or Notices of Preparation to the State Clearinghouse (SCH). The SCH also accepts other summaries, such as EIR Executive Summaries prepared pursuant to CEQA Guidelines Section 15123. Please include one copy of the Notice of Completion Form (NOC) with your submission and attach the summary to each electronic copy of the document.

SCH #: _____

Project Title: Conditional Use Permit No. 3763

Lead Agency: Riverside County Planning Department

Contact Name: Dionne Harris

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Phone Number: (951) 955-6836

Project Location: Stephens Avenue and La Cadena Drive
City

Riverside County
County

Project Description (Proposed actions, location, and/or consequences).

Conditional Use Permit proposes to permit the new construction of a gas service station and 1,960 square foot convenience store with the sale of beer and wine (Alcoholic Beverage Control (ABC) License Type 20) for off-premise consumption. The project also includes the construction of three (3) new underground fuel storage tanks, six (6) pumps, and a 3,258.5 square foot canopy. The project also provides six (6) standard parking spaces, twelve (12) fueling parking spaces and one (1) accessible parking space.

The project is located at the northwest corner of Stephens Avenue and westerly of the La Cadena Drive, more precisely at 333 La Cadena Dr., Riverside, CA 92507. The Project is within the Highgrove Area Plan.

Identify the project's significant or potentially significant effects and briefly describe any proposed mitigation measures that would reduce or avoid that effect.

N/A

If applicable, describe any of the project's areas of controversy known to the Lead Agency, including issues raised by agencies and the public.

N/A

Provide a list of the responsible or trustee agencies for the project.

County of Riverside Planning Department
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