No	otice of Determination	on		Appendix D				
	Office of Planning and Resear U.S. Mail: P.O. Box 3044 Sacramento, CA 95812-3044 County Clerk	Street Address: 1400 Tenth St., Rm 113	From: Public Agency: El Dorado Irriga Address: 2890 Mosquito Road Placerville, CA 95667 Contact: Doug Venable Phone: (530) 642-4187	FILED				
ş	County of: El Dorado Address: 360 Fair Lane Court Placerville, CA 95667 dvenable eld. ord	Ì	Address:	JANELLE K, HOBNE, Recorder-Clerk				
	BJECT: Filing of Notice of E sources Code.	<i></i>	Phone:ance with Section 21108	or 21152 of the Public				
	te Clearinghouse Number (if siject Title: _Caples Lake and Silver Lake Eas		nghouse): 2019069119	, ,				
Pro	ject Applicant: El Dorado Irrigation Dist	rict						
Pro	ject Location (include county)	Alpine, Amador, & El Dorado						
infra star are incl	a requirement of the Federal I	er facilities to meet the m riers Act, at the Caples L Energy Regulatory Comn und roadways 2) reconstr	ost current U.S. Forest Ser ake and Silver Lake East on hission license to operate F ucting camping units 3) rep	rvice design and accessibility campgrounds. The improvements Project No. 184. The project placing the potable water system				
This is to advise that the Lead Agency or Responsible Agency) **This is to advise that the Lead Agency or Responsible Agency** Agency or Responsible A								
	cribed project on 8/12//2019 (date) cribed project.		e following determinations	regarding the above				
2. [] 3. N 4. A 5. A	the project [will will not] An Environmental Impact R A Negative Declaration was fitigation measures [were mitigation reporting or monito statement of Overriding Considerings [were declaration]	eport was prepared for the prepared for the prepared for this project were not] made a contring plan [was	nis project pursuant to the pursuant to the provisions adition of the approval of the solution of the approval of the not] adopted for this provas not] adopted for this provas not] adopted for this provas not]	s of CEQA. ne project. ject.				
neg	s is to certify that the final EIR ative Declaration, is available lorado Irrigation District, 2890 Mosquito Road, Plac	to the General Public at:		ct approval, or the				
Sigr	nature (Public Agency):)-//~	Title: Environmental Review A	Analyst				

Governor's Office of Planning & Research

Date Received for filing at OPR: ____

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

Date: 8/12/2019

AUG 12 2019

Revised 2011



		Print		StartOyer	Finalize&Email	
		RECEIPT	VUMBE	R:	Leanner of the Control of the Contro	
		09 8			9	
				HOUSE NUMBE	-	
		20190			re (in approauto)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEADAGENCY EMAIL	1 20100		DATE		
EL DORADO IRRIGATION DISTRICT	ELADAGENCI EMAIL		- 1	8/12/2019		
COUNTY/STATE AGENCY OF FILING				OCUMENT NUM	MBER	
El Dorado			1	09-2019-11		
PROJECT TITLE			······································	-		
CAPLES LAKE AND SILVER LAKE EAST CAI	MPGROUND IMPI	ROVEMEN	NTS F	PROJECT		
PROJECT APPLICANT NAME	PROJECT APPLICANT	EMAIL	1.	HONE NUMBER		
EL DORADO IRRIGATION DISTRICT	DVENABLE@E	ID.ORG	((530) 642-4187		
PROJECT APPLICANT ADDRESS	CITY	STATE	z	IP CODE		
2890 MOSQUITO ROAD	PLACERVILLE	CA	9	95667		
PROJECT APPLICANT (Check appropriate box)						
✓ Local Public Agency School District [Other Special District	☐ Sta	ate Ager	ncy 🔲	Private Entity	
	,					
CHECK APPLICABLE FEES:			_		0.00	
☐ Environmental Impact Report (EIR)		\$3,271.00			2,354.75	
Mitigated/Negative Declaration (MND)(ND)	P II. A. ODMA	\$2,354.75	\$		0.00	
☐ 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 copy	v):					
	···			*		
☐ Water Right Application or Petition Fee (State Water Resource	s Control Board only)	\$850.00	\$		0.00	
County documentary handling fee			\$		50.00	
Other			\$			
PAYMENT METHOD:					* **********	
☐ Cash ☐ Credit ☑ Check ☐ Other	TOTAL	RECEIVED	\$		2,404.75	
SIGNATURE AGEN	NCY OF FILING PRINTED I	NAME AND TIT	LE			
		4				
X CO Jan	elle Horne, Recorde	r/Clerk by I	Rebed	cca Bridgem	an, Deputy	
//						