

Notice of Completion

2019119063
SEE NOTE BELOW

Control Number # PLNP2018-00372

SCH # _____

Mail to: PO Box 3044, Sacramento CA 95812-3044 (916) 445-0613
For Hand Delivery/Street Address: 1400 Tenth street, Sacramento CA 95814

Project Title: **10843 Gay Road Tentative Parcel Map**

Lead Agency: Sacramento County
Mailing Address: 827 7th Street, Rm 225
City: Sacramento Zip: 95814

Contact Person: Tim Hawkins
Phone: (916) 874-6141
County: Sacramento

Project Location

County: Sacramento City/Nearest Community: Wilton
Cross Streets: Gay Road/Mindy Lane Zip Code: 95693
Lat. / Long.: 38° 24' 11" N / -121° 16' 54" W Total Acres: 10
Assessor's Parcel No.: 134-0141-013 Section: 2 Twp: 6N Range: 6E Base: Mt. Diablo
Within 2 Miles: State Highway # N/A Waterways: Cosumnes River
Airports: N/A Railways: N/A Schools: Elk Grove Unified School District

Document Type

- | | | | | | | |
|--------------|---|--|--------------|------------------------------------|---------------|---|
| CEQA: | <input type="checkbox"/> NOP | <input type="checkbox"/> Draft EIR | NEPA: | <input type="checkbox"/> NOI | OTHER: | <input type="checkbox"/> Joint Document |
| | <input type="checkbox"/> Early Cons | <input type="checkbox"/> Supplement/Subsequent EIR | | <input type="checkbox"/> EA | | <input type="checkbox"/> Final Document |
| | <input checked="" type="checkbox"/> Neg Dec | (Prior SCH No.) _____ | | <input type="checkbox"/> Draft EIS | | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Mit Neg Dec | Other: _____ | | <input type="checkbox"/> FONSI | | |

Local Action Type

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> General Plan Update | <input type="checkbox"/> Specific Plan | <input type="checkbox"/> Rezone | <input type="checkbox"/> Annexation |
| <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Master Plan | <input type="checkbox"/> Prezone | <input type="checkbox"/> Redevelopment |
| <input type="checkbox"/> General Plan Element | <input type="checkbox"/> Planned Unit Development | <input type="checkbox"/> Use Permit | <input type="checkbox"/> Coastal Permit |
| <input type="checkbox"/> Community Plan | <input type="checkbox"/> Site Plan | <input checked="" type="checkbox"/> Land Division (subdivision, etc.) | <input type="checkbox"/> Other: _____ |
- Governor's Office of Planning & Research
NOV 19 2019
STATE CLEARINGHOUSE

Development Type

- | | |
|---|---|
| <input checked="" type="checkbox"/> Residential: Units <u>1</u> Acres <u>10</u> | <input type="checkbox"/> Water Facilities: Type: _____ MGD: _____ |
| <input type="checkbox"/> Office: Sq. Ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Transportation: Type: _____ |
| <input type="checkbox"/> Commercial: Sq. Ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Mining: Mineral: _____ |
| <input type="checkbox"/> Industrial: Sq. Ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Power: Type: _____ MW: _____ |
| <input type="checkbox"/> Education: _____ | <input type="checkbox"/> Waste Treatment: Type: _____ MGD: _____ |
| <input type="checkbox"/> Recreational: _____ | <input type="checkbox"/> Hazardous Waste: Type: _____ |
| | <input type="checkbox"/> Other: _____ |

Project Issues Discussed in Document

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Aesthetic/Visual | <input type="checkbox"/> Floodplain/Flooding | <input type="checkbox"/> Schools/Universities | <input type="checkbox"/> Water Quality |
| <input type="checkbox"/> Agricultural Land | <input type="checkbox"/> Forest Land/Fire Hazard | <input checked="" type="checkbox"/> Septic Systems | <input type="checkbox"/> Water Supply/Groundwater |
| <input type="checkbox"/> Air Quality | <input type="checkbox"/> Geologic/Seismic | <input type="checkbox"/> Sewer Capacity | <input checked="" type="checkbox"/> Wetland/Riparian |
| <input checked="" type="checkbox"/> Archeological/Historical | <input type="checkbox"/> Minerals | <input checked="" type="checkbox"/> Soil Erosion/Compaction/Grading | <input checked="" type="checkbox"/> Wildlife |
| <input type="checkbox"/> Coastal Zone | <input type="checkbox"/> Noise | <input type="checkbox"/> Solid Waste | <input type="checkbox"/> Growth Inducing |
| <input checked="" type="checkbox"/> Drainage/Absorption | <input type="checkbox"/> Population/Housing Balance | <input type="checkbox"/> Toxic Hazardous | <input type="checkbox"/> Land Use |
| <input type="checkbox"/> Economic/Jobs | <input type="checkbox"/> Public Services/Facilities | <input type="checkbox"/> Traffic/Circulation | <input type="checkbox"/> Cumulative Effects |
| <input type="checkbox"/> Fiscal | <input type="checkbox"/> Recreation/Parks | <input checked="" type="checkbox"/> Vegetation | <input type="checkbox"/> Other: _____ |

Present Land Use/Zoning/General Plan Use

Agricultural/Residential/AR-5/Agricultural Residential

Project Description

The project is requesting the following entitlements:

1. A Tentative Parcel Map to divide approximately 10 gross acres into two parcels in the interim A-5 zoning district with Flood combining overlay.
2. A Design Review to comply with the Countywide Design Guidelines.

Reviewing Agencies Checklist

Lead Agencies may recommend State Clearinghouse distribution by marking agencies below with an "X".
If you have already sent your document to the agency please denote that with an "S".

- | | |
|---|---|
| <input type="checkbox"/> Air Resources Board | <input type="checkbox"/> Office of Historic Preservation |
| <input type="checkbox"/> Boating & Waterways | <input type="checkbox"/> Office of Public School Construction |
| <input type="checkbox"/> California Highway Patrol | <input type="checkbox"/> Parks & Recreation |
| <input type="checkbox"/> Caltrans District # _____ | <input type="checkbox"/> Pesticide Regulation, Department of |
| <input type="checkbox"/> Caltrans Division of Aeronautics | <input type="checkbox"/> Public Utilities Commission |
| <input type="checkbox"/> Caltrans Planning (Headquarters) | <input type="checkbox"/> Reclamation Board |
| <input type="checkbox"/> California Waste Management Board | <input type="checkbox"/> Regional WQCB # <u>5S</u> (<u>Central Valley</u>) |
| <input type="checkbox"/> Coachella Valley Mountains Conservancy | <input type="checkbox"/> Resources Agency |
| <input type="checkbox"/> Coastal Commission | <input type="checkbox"/> S.F. Bay Conservation & Development Commission |
| <input type="checkbox"/> Colorado River Board | <input type="checkbox"/> San Gabriel & Lower L.A. Rivers and Mtns Conservancy |
| <input type="checkbox"/> Conservation, Department of | <input type="checkbox"/> San Joaquin River Conservancy |
| <input type="checkbox"/> Corrections, Department of | <input type="checkbox"/> Santa Monica Mountains Conservancy |
| <input type="checkbox"/> Delta Protection Commission | <input type="checkbox"/> State Lands Commission |
| <input type="checkbox"/> Education, Department of | <input type="checkbox"/> SWRCB: Clean Water Grants |
| <input type="checkbox"/> Energy Commission | <input type="checkbox"/> SWRCB: Water Quality |
| <input type="checkbox"/> Fish & Game Region # _____ | <input type="checkbox"/> SWRCB: Water Rights |
| <input type="checkbox"/> Food & Agriculture, Department of | <input type="checkbox"/> Tahoe Regional Planning Agency |
| <input type="checkbox"/> Forestry & Fire Protection | <input type="checkbox"/> Toxic Substances Control, Department of |
| <input type="checkbox"/> General Services, Department of | <input type="checkbox"/> Water Resources |
| <input type="checkbox"/> Health Services, Department of | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Housing & Community Development | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Integrated Waste Management Board | |
| <input type="checkbox"/> Native American Heritage Commission | |
| <input type="checkbox"/> Office of Emergency Services | |

Local Public Review Period (to be filled in by lead agency)

Starting Date _____ Ending Date _____

Lead Agency (Complete if applicable)

Consulting Firm: _____
 Address: _____
 City/State/Zip: _____
 Contact: _____
 Phone: (_____) _____

Applicant: _____
 Address: _____
 City/State/Zip: _____
 Phone: (_____) _____

Signature of Lead Agency Representative: _____ **Date:** _____

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