STANISLAUS COUNTY CLERK CEQA FILING COVER SHEET

Mail to: City of Cakdala

Name: Robic Services Personnent

Address: 455 S. Fifth Avenue

City, State, Zip Jakelsle, 4 45361

50-2022-244

## FILED

October 20, 2022
DONNA LINDER
STANISI AUS COUNTY

STANISLAUS COUNTY CLERK-RECORDER

By: Deputy Clerk

THIS SPACE FOR CLERK'S USE ONLY

Complete and attach this form to each CEQA Notice filed with the County Clerk

TYPE OR PRINT CLEARLY

General Plan Amendment, Resone, and prehibectural Review No. 2019 - 17

Check Document being Filed:
Environmental Impact Report (EIR)
Mitigated Negative Declaration (MND) or Negative Declaration (ND)
Notice of Exemption (NOE)
Other (Please fill in type):

Date removed from posting 11/23/2022

FILED IN THE OFFICE OF THE STANISLA COUNTY CLERK ON 10/20/22 Posted 10/20/22 Removed	us 
Returned to agency on DEPUTY	_

Filing fees are due at the time a Notice of Determination/Exemption is filed with our office. For more information on filing fees and No Effect Determinations, please refer to California Code of Regulations, Title 14, section 753.5.



140	plice of Determination			Appendix D		
To:	Office of Planning and Research		From:	ity of Oakdale		
			Public Agency: C Address: 4	55 S. Fifth Avenue		
	<i>U.S. Mail:</i> P.O. Box 3044	Street Address: 1400 Tenth St., Rm 113		akdale, CA 95361		
	Sacramento, CA 95812-3044		Contact: Mr. Mark	Niskanen		
	Saciamento, OA 93012-3044	Sacramento, CA 95614	Phone: (209) 845-3641			
	County Clerk County of: Stanislaus Address: 1021   Street, Suite 101		Lead Agency (if different from above):			
	Modesto, CA 953	54	Address:			
			Contact:			
			Phone:			
	BJECT: Filing of Notice of E sources Code.	Determination in compli	ance with Section	21108 or 21152 of the Publi		
Sta	te Clearinghouse Number (if s	submitted to State Clearin	ghouse): 2020049	045		
Pro	ect Title: General Plan Ame	ndment, Rezone, and Arc	hitectural Review N	lo. 2019-17		
Pro	ject Applicant: Mr. John Sim	voulakis				
Pro	ject Location (include county)	City of Oakdale, County	of Stanislaus			
Pro	ject Description:	_	•			
allo 2.4	e Project consists of a General for the development of fort racre parcel located on East I see to advise that the	y-eight (48) multi-family re F Street.	esidential units and			
1118	(E	■ Lead Agency or ☐ Re	sponsible Agency)	nas approved the above		
des	cribed project on October 17, (date)		e following determin	nations regarding the above		
des	cribed project.					
2. [ ] 3. M 4. A 5. A	he project [ will will not] An Environmental Impact R A Negative Declaration was litigation measures [ were mitigation reporting or monito statement of Overriding Considerations [ were declared were were not were not be were were monitored.	eport was prepared for the prepared for this project were not] made a concring plan [ was	is project pursuant pursuant to the prodition of the approven not] adopted for the not] adopted for the not] adopted for the not] adopted for the protest for	to the provisions of CEQA.  ovisions of CEQA.  val of the project.  this project.  this project.		
neg	s is to certify that the final EIR ative Declaration, is available ty of Oakdale Public Services	to the General Public at:				
Sigr	nature (Public Agency)	Z	Title: City Pla	annner		
Date	e: October 18, 2022	Date Receiv	ed for filing at OPF	₹:		
				l.		

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

		Print	Single Mills	Finalize&Email
		RECEIPT NUM	MBER:	· Landan and Control of Control o
		50-10/20/2022-	-184	
		STATE CLEAR	INGHOUSE NUM	MBER (If applicable)
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.		2020049045		
LEAD AGENCY	LEADAGENCY EMAIL		DATE	
CITY OF OAKDALE			10/20/2022	
COUNTY/STATE AGENCY OF FILING		DOCUMENT NUMBER		
STANISLAUS COUNTY		50-2022-244		
PROJECT TITLE				
GENERAL PLAN AMENDMENT, REDZONE, AND ARCHITECURAL	REVIEW NO. 2019-17			
PROJECT APPLICANT NAME	PROJECT APPLICANT I	EMAIL	PHONE NUME	BER
MR. JOHN SIMVOULAKIS			(209) 845-364	11
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE	
455 S. FIFTH AVE	OAKDALE	CA	95361	
PROJECT APPLICANT (Check appropriate box)	<b>-</b>			
Local Public Agency School District	Other Special District	☐ State A	Agency	□ Private Entity      □
ONEON ADDITIONAL E CECO.	•			
CHECK APPLICABLE FEES:   □ Environmental Impact Report (EIR)		\$ 3,539.25 \$		
Mitigated/Negative Declaration (MND)(ND)		\$ 2,548.00 \$		
☐ Certified Regulatory Program (CRP) document - payment due of	firectly to CDEW	\$ 1,203.25 \$	•	
G Certified Negationy i Togram (ON ) document - payment due t	inectly to ODI VV	Ψ 1,200.20 ψ		
☐ Exempt from fee				
□ Notice of Exemption (attach)				
☐ CDFW No Effect Determination (attach)				
☐ Fee previously paid (attach previously issued cash receipt copy	<b>'</b> )			
Water Right Application or Petition Fee (State Water Resources	Control Board only)	\$ 850.00 \$		<del></del>
■ County documentary handling fee		\$ 57.00 \$		57.00
☐ Other		\$		
PAYMENT METHOD:				0.605.00
☐ Cash: ☐ Credit   图 Check   ☐ Other 177	TOTAL	RECEIVED \$		2,605.00
SIGNATURE AGEN	CY OF FILING PRINTED I	NAME AND TITLE		
X M	eli Sibrian Deputy Clerk			