

Notice of Completion

SEE NOTE BELOW

Control Number # **PLNP2019-00293**

SCH # _____

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

2020049064

Project Title: **Alexander Court Use Permit**

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

Contact Person: Carol Gregory
Phone: (916) 874-5458
County: Sacramento

Project Location

County: Sacramento City/Nearest Community: Fair Oaks
Cross Streets: Fair Oak Blvd/San Juan Ave Zip Code: 95628
Lat. / Long.: 38° 37' 53" N/ 121° 17' 25" W Total Acres: 1.03
Assessor's Parcel No.: 242-0251-035-0000 Section: _____ Twp: T9N Range: R7E Base: Mt. Diablo
Within 2 Miles: State Highway # N/A Waterways: American River, Carmichael Creek, Verde Cruz Creek, Coyle Creek, Drainage Canal, Unknown Creek, Unknown Drainage
Airports: N/A Railways: N/A Schools: Faith Lutheran Elementary, Albert Schweitzer Elementary, La Vista Center, Freedom Christian, Harry Dewey Fundamental Elementary, Will Rogers Middle, Del Campo High, Jon Barrett Middle, Thomas Kelly Elementary, Carmichael Elementary, St. Mel School, El Serano Independent Study, River View STEM Academy, Williamson Elementary, W.E. Mitchell Middle, Walnutwood High (Independent Study), Cordova Lane Center, Peter J. Shields Elementary, Kinney High (Continuation), Cordova Baptist Preschool and Kindergarten, St. John Vianney

Document Type

CEQA: NOP Draft EIR **NEPA:**
NOI Early Cons Supplement/Subsequent EIR EA **OTHER:** Joint Document
 Neg Dec (Prior SCH No.) _____ Draft Final Document
EIS Mit Neg Dec Other: _____
FONSI Governor's Office of Planning & Research

Local Action Type

General Plan Update Specific Plan
Rezone General Plan Amendment Master Plan
Prezone General Plan Element Planned Unit Development Use Annexation
Permit Community Plan Site Plan Land Division (subdivision, etc.) Redevelopment
APR 28 2020 STATE CLEARINGHOUSE Coastal Permit
 Other: _____

Development Type

Residential: Units _____ Acres _____ Water Facilities: Type: _____ MGD: _____
 Office: Sq. Ft. _____ Acres _____ Employees _____ Transportation: Type: _____
 Commercial: Sq. Ft. _____ Acres _____ Employees _____ Mining: Mineral: _____
 Industrial: Sq. Ft. _____ Acres _____ Employees _____ Power: Type: _____ MW: _____
 Education: _____ Waste Treatment: Type: _____ MGD: _____
 Recreational: _____ Hazardous Waste: Type: _____
 Other: Remodel/Addition to existing house

Project Issues Discussed in Document

Aesthetic/Visual Floodplain/Flooding Schools/Universities Water Quality
 Agricultural Land Forest Land/Fire Hazard Septic Water Supply/Groundwater
Systems Air Quality Geologic/Seismic Sewer Wetland/Riparian
Capacity Archeological/Historical Minerals Soil Wildlife
Erosion/Compaction/Grading Other: _____ Growth Inducing
 Land Use
 Cumulative Effects
 Other: _____

- | | | |
|--|---|--|
| <input type="checkbox"/> Coastal Zone | <input type="checkbox"/> Noise | <input type="checkbox"/> Solid |
| Waste | | |
| <input type="checkbox"/> Drainage/Absorption | <input type="checkbox"/> Population/Housing Balance | <input type="checkbox"/> Toxic |
| Hazardous | | |
| <input type="checkbox"/> Economic/Jobs | <input type="checkbox"/> Public Services/Facilities | <input type="checkbox"/> |
| Traffic/Circulation | | |
| <input type="checkbox"/> Fiscal | <input type="checkbox"/> Recreation/Parks | <input checked="" type="checkbox"/> Vegetation |

Present Land Use/Zoning/General Plan Use

Land Use: Single-Family Residential; Zoning: RD-2 and Parkway Corridor Zone; General Plan: Low Density Residential

Project Description

1. A Use Permit for development within the setback of Erosion Zone 2 of the Parkway Corridor combining zone for an addition to an existing single-family residential dwelling.
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".

- | | |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Air Resources Board <input type="checkbox"/> Boating & Waterways <input type="checkbox"/> California Highway Patrol <input type="checkbox"/> Caltrans District # _____ <input type="checkbox"/> Caltrans Division of Aeronautics <input type="checkbox"/> Caltrans Planning (Headquarters) <input type="checkbox"/> California Waste Management Board <input type="checkbox"/> Coachella Valley Mountains Conservancy <input type="checkbox"/> Coastal Commission <input type="checkbox"/> Colorado River Board <input type="checkbox"/> Conservation, Department of <input type="checkbox"/> Corrections, Department of <input type="checkbox"/> Delta Protection Commission <input type="checkbox"/> Education, Department of <input type="checkbox"/> Energy Commission <input type="checkbox"/> Fish & Game Region # _____ <input type="checkbox"/> Food & Agriculture, Department of <input type="checkbox"/> Forestry & Fire Protection <input type="checkbox"/> General Services, Department of <input type="checkbox"/> Health Services, Department of <input type="checkbox"/> Housing & Community Development <input type="checkbox"/> Integrated Waste Management Board <input type="checkbox"/> Native American Heritage Commission <input type="checkbox"/> Office of Emergency Services | <ul style="list-style-type: none"> <input type="checkbox"/> Office of Historic Preservation <input type="checkbox"/> Office of Public School Construction <input type="checkbox"/> Parks & Recreation <input type="checkbox"/> Pesticide Regulation, Department of <input type="checkbox"/> Public Utilities Commission <input type="checkbox"/> Reclamation Board <input type="checkbox"/> Regional WQCB # <u>5S</u> (Central Valley) <input type="checkbox"/> Resources Agency <input type="checkbox"/> S.F. Bay Conservation & Development Commission <input type="checkbox"/> San Gabriel & Lower L.A. Rivers and Mtns Conservancy <input type="checkbox"/> San Joaquin River Conservancy <input type="checkbox"/> Santa Monica Mountains Conservancy <input type="checkbox"/> State Lands Commission <input type="checkbox"/> SWRCB: Clean Water Grants <input type="checkbox"/> SWRCB: Water Quality <input type="checkbox"/> SWRCB: Water Rights <input type="checkbox"/> Tahoe Regional Planning Agency <input type="checkbox"/> Toxic Substances Control, Department of <input type="checkbox"/> Water Resources
 <input type="checkbox"/> Other _____ <input type="checkbox"/> Other _____ |
|---|---|

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: Lou and Ellen Nishimura
 Address: 7430 Alexander Court
 City/State/Zip: Fair Oaks, CA 95628
 Phone: (916) 966-7403

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

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