Appendix C

## **Notice of Completion & Environmental Document Transmittal**

Mail to: State Clearinghouse, P.O. Box 3044, Sacramento, CA 95812-3044	(916) 445-0613
For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 9581	4

SCH #

Project Title:			
Lead Agency:		Contact Person:	
Mailing Address:			
City:	Zip:	County:	
Project Location: County:	City/Nearest Com		
Cross Streets: Longitude/Latitude (degrees, minutes and seconds):°			Zip Code:
Longitude/Latitude (degrees, minutes and seconds):o	<u>′</u> ″N/°	″ W Total	Acres:
Assessor's Parcel No.:			e: Base:
Within 2 Miles: State Hwy #:			
Airports:	Railways:	Schoo	ols:
Document Type:         CEQA:       NOP       Draft EIR         Early Cons       Supplement/Subsequent EII         Neg Dec       (Prior SCH No.)         Mit Neg Dec       Other:		NOI Other: EA Draft EIS FONSI	Joint Document Final Document Other:
Local Action Type:         General Plan Update       Specific Plan         General Plan Amendment       Master Plan         General Plan Element       Planned Unit Development         Community Plan       Site Plan		t sion (Subdivision, etc.)	<ul> <li>Annexation</li> <li>Redevelopment</li> <li>Coastal Permit</li> <li>Other:</li> </ul>
Development Type:         Residential: Units       Acres         Office:       Sq.ft.         Acres       Employees         Industrial:       Sq.ft.         Acres       Employees         Educational:       Educational:         Water Facilities:       MGD	Mining: Power: Waste Tr Hazardou	Mineral Type reatment: Type us Waste: Type	MW MGD
Project Issues Discussed in Document:			
Aesthetic/Visual       Fiscal         Agricultural Land       Flood Plain/Flooding         Air Quality       Forest Land/Fire Hazard         Archeological/Historical       Geologic/Seismic         Biological Resources       Minerals         Coastal Zone       Noise         Drainage/Absorption       Population/Housing Balar         Economic/Jobs       Public Services/Facilities	Sewer Capaci	ersities 1s ity Compaction/Grading ous	Vegetation Water Quality Water Supply/Groundwater Wetland/Riparian Growth Inducement Land Use Cumulative Effects Other:

Project Description: (please use a separate page if necessary)

## **Reviewing Agencies Checklist**

Air Resources Board	Office of Historic Preservation
Boating & Waterways, Department of	Office of Public School Construction
California Emergency Management Agency	Parks & Recreation, Department of
California Highway Patrol	Pesticide Regulation, Department of
Caltrans District #	Public Utilities Commission
Caltrans Division of Aeronautics	Regional WQCB #
Caltrans Planning	Resources Agency
Central Valley Flood Protection Board	Resources Recycling and Recovery, Department of
Coachella Valley Mtns. Conservancy	S.F. Bay Conservation & Development Comm.
Coastal Commission	San Gabriel & Lower L.A. Rivers & Mtns. Conservancy
Colorado River Board	San Joaquin River Conservancy
Conservation, Department of	Santa Monica Mtns. Conservancy
Corrections, Department of	State Lands Commission
Delta Protection Commission	SWRCB: Clean Water Grants
Education, Department of	SWRCB: Water Quality
Energy Commission	SWRCB: Water Rights
Fish & Game Region #	Tahoe Regional Planning Agency
Food & Agriculture, Department of	Toxic Substances Control, Department of
Forestry and Fire Protection, Department of	Water Resources, Department of
General Services, Department of	
Health Services, Department of	Other:
Housing & Community Development	Other:
Native American Heritage Commission	
Local Public Review Period (to be filled in by lead age	ency)
Local Public Review Period (to be filled in by lead age Starting Date	
Starting Date	Ending Date
Starting Date Lead Agency (Complete if applicable): Consulting Firm: Address:	Ending Date Applicant: Address:
Starting Date Lead Agency (Complete if applicable): Consulting Firm: Address: City/State/Zip:	Ending Date Applicant: Address: City/State/Zip:
Starting Date Lead Agency (Complete if applicable): Consulting Firm: Address: City/State/Zip: Contact:	Ending Date Applicant: Address: City/State/Zip: Phone:
Starting Date Lead Agency (Complete if applicable): Consulting Firm: Address: City/State/Zip:	Ending Date            Applicant:            Address:            City/State/Zip:         Phone:
Starting Date Lead Agency (Complete if applicable): Consulting Firm: Address: City/State/Zip: Contact: Phone:	Ending Date            Applicant:            Address:            City/State/Zip:         Phone:

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