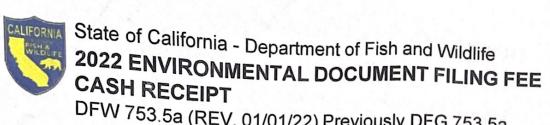
Notice of Determination

Appendix D

To:		From:				
☐ Office of Planning and Research		Public Agency: City of Highland Address: 27215 Base Line Street				
U.G. Man.	reet Address:	Highland, CA 92346				
1.0. DOX 00 1.	00 Tenth St., Rm 113	Contact: Kim Stater				
Sacramento, CA 95812-3044 Sa	acramento, CA 95814	Phone: (909) 864-8732, Ext. 204				
County Clerk County of: San Bernardino Address: 385 N Arrowhead Ave	2nd Floor	Lead Agency (if different from above):				
San Bernardino, CA 92415	5, ZHQ 1 1001	Address:				
		Contact:				
		Phone:				
Resources Code.		ance with Section 21108 or 21152 of the Public				
State Clearinghouse Number (if sub	mitted to State Clearin	ghouse):_2022020105				
Project Title: Line A Stormdrain and						
Project Applicant: City of Highland						
Project Location (include county): 68	892 Cloverhill Drive, Hi	ghland, CA 92346, San Bernardino County				
Project Description:						
Bledsoe Gulch, to which Line A outlets; replied sideslopes in the vicinity of the Line A new of	ace the storm drain outlain a butfall which is severely erod ain. The approximately 300 f at approximately 10 feet dee	es situated between the EHR clubhouse and the nearby cilities in Bledsoe Gulch; regrade Bledsoe Gulch ed and threatening homes; construct new maintenance feet of the existing 48-inch RCP will be replaced with new eper than the existing line to promote positive flow given seek erosion.				
This is to advice that the City of Hi		has approved the above				
described project on March 15, 202 (date)	22 and has made the	e following determinations regarding the above				
described project.						
 ■ A Negative Declaration was pr 3. Mitigation measures [■ were □ 4. A mitigation reporting or monitorin 5. A statement of Overriding Consideration 6. Findings [■ were □ were not] m 	ort was prepared for the epared for this project were not] made a cong plan [was	pursuant to the provisions of CEQA. ARD OF SUPERVISIONAL ARD OF S				
This is to certify that the final EIR wit negative Declaration, is available to City of Highland - 27215 Base Line	the General Public at:					
Signature (Public Agency):	n Stake	Title: Asst. Community Dev. Director				
Date: 3/16/22	Date Receiv	ved for filing at OPR:				



DFW 753.5a (REV. 01/01/22) Previously DFG 753.5a

		100 miles	(Section)	A COLUMN		
36 -			CEIPT NUMBER:			
			36 — 03162022 — 193 TATE CLEARINGHOUSE NUMBER (If applicable)			
						SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.
LEAD AGENCY	LEADAGENCY EMAIL			DATE	er standig o stady of it is trained. Me deliver the standard and a standard a standard and a standard and a standard as the standard and a standard and a standard and a standard as the standard and a s	
City of Highland				03162	322	
COUNTY/STATE AGENCY OF FILING	Control of the second s	Na lilat a de sant ary marindra parametera de anticipar de la composition della comp		DOCUMEN	IT NUMBER	
San Bernardino						
PROJECT TITLE		THE PARTY STATE AND THE PARTY STATE OF THE PARTY ST				
Line A Stormdrain and Bledsoe Gulch Outfall	Decemetaries					
PROJECT APPLICANT NAME					PHONE NUMBER	
City of Highland	PROJECT APPLICANT EMAIL			(909) 864-8732 x204		
PROJECT APPLICANT ADDRESS	OIT!	CTAT		ZIP CODE	- 07 02 X20 1	
	CITY		STATE		92346	
27215 Base Line Street	Highland	CA		92340		
PROJECT APPLICANT (Check appropriate box)	□ ou o o o o la Biataia		toto A	ropov	Private Entity	
✓ Local Public Agency School District	Other Special District		tate Ag	Jency		
CHECK APPLICABLE FEES:						
☐ Environmental Impact Report (EIR)		\$3,539.25	\$		0.00	
✓ Mitigated/Negative Declaration (MND)(ND)		\$2,548.00	\$		2,548.00	
☐ Certified Regulatory Program (CRP) document - payment due	e directly to CDFW	\$1,203.25	\$		0.00	
Certified Regulatory Program (Oral) document - payment dae						
☐ Exempt from fee						
☐ Notice of Exemption (attach)						
☐ CDFW No Effect Determination (attach)						
☐ Fee previously paid (attach previously issued cash receipt cop	py)					
	The standard of the co				0.00	
☐ Water Right Application or Petition Fee (State Water Resources Control Board only) \$850.00			\$_			
☑ County documentary handling fee			\$_		50.00	
☐ Other			\$_			
PAYMENT METHOD:					2 500 00	
☐ Cash ☐ Credit ☐ Check ☐ Other	TOTAL	RECEIVED	\$ _		2,598.00	
IGNATURE	ICY OF FILING PRINTED N	IAME AND TI	ILE			
	Arredondo, Depu	ty Clerk				
Lisa	Allegolido, Depu	Ly Olonk	(") (") () ()	Miles and American		