DI W 100.04 (NEW. 0 110 1/22) 1 16 VIOUSIY DI 0 100.04		Print	t s	StartOver	Save
		RECEIPT	NUMBE	R:	
		36 —			610
		STATE CLEARINGHOUSE NUMBER (If applicable)			
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.		2022030787			
T- C-	LEADAGENCY EMAIL	1078.000.0		ATE	
California Department of State Hospitals	EB ID NOCITOT EMPLE			0914202	2
COUNTY/STATE AGENCY OF FILING				OCUMENT N	
San Bernardino					
PROJECT TITLE	4				1 - 1
Patton State Hospital Waterline Replacement Pr	roject				
PROJECT APPLICANT NAME	PROJECT APPLICANT EMAIL			PHONE NUMBER	
California Department of State Hospitals				(916) 562-2209	
PROJECT APPLICANT ADDRESS	CITY	STATE	ZI	P CODE	
1215 O Street	Sacramento	CA	9	5814	
PROJECT APPLICANT (Check appropriate box)	The second second				
☐ Local Public Agency ☐ School District ☐	Other Special District	✓ St	ate Agen	су	Private Entity
					The state of the
CHECK APPLICABLE FEES:					0.00
☐ Environmental Impact Report (EIR)		\$3,539.25	59 15-		0.00
✓ Mitigated/Negative Declaration (MND)(ND)		\$2,548.00			2,548.00
☐ Certified Regulatory Program (CRP) document - payment due di	rectly to CDFW	\$1,203.25	\$		0.00
Committee to					
Exempt from fee					
<ul><li>☐ Notice of Exemption (attach)</li><li>☐ CDFW No Effect Determination (attach)</li></ul>					
Fee previously paid (attach previously issued cash receipt copy)					
	And the second				
☐ Water Right Application or Petition Fee (State Water Resources	Control Board only)	\$850.00	\$		0.00
☑ County documentary handling fee	condo. Dodro orași	4000.00	\$ —		50.00
☐ Other			\$		- 6
PAYMENT METHOD:			· ·		
☐ Cash ☐ Credit ☐ Check ☐ Other	TOTAL I	RECEIVED	\$		2,598.00
	Y OF FILING PRINTED N	IAME AND TI	TLE		0
X Cent DM Cynt	hia Merendon, De	puty Cler	rk		
4		articular I de	16.		



#### NOTICE

Each project applicant shall remit to the county clerk the environmental filing fee before or at the time of filing a Notice of Determination (Pub. Resources Code, § 21152; Fish & G. Code, § 711.4, subdivision (d); Cal. Code Regs., tit. 14, § 753.5). Without the appropriate fee, statutory or categorical exemption, or a valid No Effect Determination issued by the California Department of Fish and Wildlife (CDFW), the Notice of Determination is not operative, vested, or final, and shall not be accepted by the county clerk.

### COUNTY DOCUMENTARY HANDLING FEE

The county clerk may charge a documentary handling fee of fifty dollars (\$50) per filing in addition to the environmental filing fee (Fish & G. Code, § 711.4, subd. (e); Cal. Code Regs., tit. 14, § 753.5, subd. (g)(1)). A county board of supervisors shall have the authority to increase or decrease the fee or charge, that is otherwise authorized to be levied by another provision of law, in the amount reasonably necessary to recover the cost of providing any product or service or the cost of enforcing any regulation for which the fee or charge is levied (Gov. Code, § 54985, subd. (a)).

	COLLECTION PROCEDURES FOR COUNTY GOVERNMENTS
]	liling Notice of Determination (NOD):  Collect environmental filing fee or copy of previously issued cash receipt. (Do not collect fee if project applicant presents a No Effect Determination signed by CDFW. An additional fee is required for each separate environmental document. An addendum is not considered a separate environmental document. Checks should be made payable to the county.)  Issue cash receipt to project applicant.  Attach copy of cash receipt and, if applicable, previously issued cash receipt, to NOD.  Mail filing fees for CRP document to CDFW prior to filing the NOD or equivalent final approval (Cal. Code Regs. Tit. 14, § 753.5 (b)(5)). The CRP should request receipt from CDFW to show proof of payment for filing the NOD or equivalent approval. Please mail payment to address below made attention to the Cash Receipts Unit of the Accounting Services Branch.
	If the project applicant presents a <b>No Effect Determination</b> signed by CDFW, also:  ☐ Attach No Effect Determination to NOD (no environmental filing fee is due).
Ī	iling Notice of Exemption (NOE) (Statutorily or categorically exempt project (Cal. Code Regs., tit. 14, §§ 15260-15285, 15300-15333))  ☐ Issue cash receipt to project applicant. ☐ Attach copy of cash receipt to NOE (no environmental filing fee is due).

Within 30 days after the end of each month in which the environmental filing fees are collected, each county shall summarize and record the amount collected on the monthly State of California Form No. CA25 (TC31) and remit the amount collected to the State Treasurer. Identify the remittance on Form No. CA25 as "Environmental Document Filing Fees" per Fish and Game Code section 711.4.

# The county clerk shall mail the following documents to CDFW on a monthly basis:

- ✓ A photocopy of the monthly State of California Form No. CA25 (TC31)
- CDFW/ASB copies of all cash receipts (including all voided receipts)
- A copy of all CDFW No Effect Determinations filed in lieu of fee payment
- A copy of all NODs filed with the county during the preceding month
- A list of the name, address and telephone number of all project applicants for which an NOD has been filed. If this information is contained on the cash receipt filed with CDFW under California Code of Regulations, title 14, section 753.5, subdivision (e)(6), no additional information is required.

#### DOCUMENT RETENTION

The county shall retain two copies of the cash receipt (for lead agency and county clerk) and a copy of all documents described above for at least 12 months.

## RECEIPT NUMBER

- # The first two digits automatically populate by making the appropriate selection in the County/State Agency of Filing drop down menu.
- The next eight digits automatically populate when a date is entered.
- The last three digits correspond with the sequential order of issuance for each calendar year. For example, the first receipt number issued on January 1 should end in 001. If a county issued 252 receipts for the year ending on December 31, the last receipt number should end in 252. CDFW recommends that counties and state agencies 1) save a local copy of this form, and 2) track receipt numbers on a spreadsheet tabbed by month to ensure accuracy.

DO NOT COMBINE THE ENVIRONMENTAL FEES WITH THE STATE SHARE OF FISH AND WILDLIFE FEES.

Mail to:

California Department of Fish and Wildlife Accounting Services Branch P.O. Box 944209 Sacramento, California 94244-2090

Posted On: 9-14-22

# **Notice of Determination**

Removed On: 10 - 27 - 22

Appendix D

To:	Receipt No: 54-01	From:
<ul><li>Office of Planning and Resear</li></ul>	ch	Public Agency: CA Dept. of General Services
U.S. Mail:	Street Address:	Address: 707 3rd Street 3-401
P.O. Box 3044	1400 Tenth St., Rm 113	West Sacramento, California 95605
Sacramento, CA 95812-3044	•	Contact: Jennifer Parson
	<b>,</b>	Phone: (916) 376-1604
County Clerk County of: San Bernardino Address: 222 West Hospitali San Bernardino, California	ity Lane 92415	Lead Agency (if different from above): California Department of State Hospitals Address: 1215 O Street
19		Sacramento, California 95814
		Contact: Robert Horsley Phone: (916) 562-2209
SUBJECT: Filing of Notice of L Resources Code.  State Clearinghouse Number (if		ance with Section 21108 or 21152 of the Public nghouse): 2022030787
Project Title: Patton State Hospi	ital Waterline Replaceme	nt Project
Project Applicant: California Der		
Project Location (include county)	: 3102 Highland Ave., Cit	y of San Bernardino, San Bernardino County
Project Description:		
leakage. The new 16-inch diame two existing reduced pressure d	eter waterline would exter ouble detector check and illed with grout. Construc	inch diameter, 115-foot-long waterline due to nd approximately 165 feet and be installed from I pressure reducing valve assemblies. The tion of the Proposed Project is estimated to s.
This is to advise that the Califor	rnia Department of State ■ Lead Agency or ☐ Re	Hospitals has approved the above esponsible Agency)
described project on 9/12/2022 (date		e following determinations regarding the above
described project.		
A Negative Declaration was	Report was prepared for to some prepared for this project was enough wade a controlling plan [ was was wisiderations [ was	this project pursuant to the provisions of CEQA 20 ARD
This is to certify that the final EIF negative Declaration, is available http://bit.ly/DGSCEQA		ponses and record of project approval, on the
Signature (Public Agency):	XXX	Title: Chief Operating Officer (A)
Date: 9/12/2022	Date Rece	ived for filing at OPR: