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

Project Title:					
			Contact Pe	rson:	
			Phone:		
City:Zip:			County:		
Project Location: County:	(	City/Nearest Comn	nunity:		
Cross Streets:					Zip Code:
Longitude/Latitude (degrees, min	utes and seconds):°'	″ N /°	,	_" W Total A	cres:
	Secti				
	Wate				
	Railw				
	Kan v				
Document Type:					
CEQA: NOP	☐ Draft EIR	NEPA:	NOI	Other:	Joint Document
☐ Early Cons	Supplement/Subsequent EIR		EA		Final Document
Neg Dec (1	Prior SCH No.)	. 🔲	Draft EIS		Other:
☐ Mit Neg Dec C	Other:	. $\square$	FONSI		
Local Action Type:					
* *	Caracific Diam	□ n			<b>A</b>
General Plan Update General Plan Amendment	☐ Specific Plan ☐ Master Plan	☐ Rezone ☐ Prezone			☐ Annexation ☐ Redevelopment
General Plan Element	Planned Unit Development	Use Permi	t		Coastal Permit
Community Plan	Site Plan			ision, etc.)	Other:
Development Type:					
Residential: Units	Acres	_			
	Acres Employees		tation: Typ	be	
	nercial:Sq.ft.         Acres         Employees         Mining:         Mineral           trial:         Sq.ft.         Acres         Employees         Power:         Type				
			1 yj reatment∙Tvi	)e	<del></del>
Educational: Waste Treatment: Type   Recreational: Hazardous Waste: Type			<del></del>		
	Facilities:Type MGD Other:				
Project Issues Discussed in	Document:				
Aesthetic/Visual	☐ Fiscal	☐ Recreation/Pa	arks	Г	Vegetation
Agricultural Land	Flood Plain/Flooding	Schools/Univ	ersities	Ī	Water Quality
Air Quality	Forest Land/Fire Hazard	Septic Systems Water Supply/Groundwa			
Archeological/Historical	Geologic/Seismic	Sewer Capacity  Wetland/Riparian			
Biological Resources	Minerals	Soil Erosion/Compaction/Grading Growth Inducement			
Coastal Zone	Noise  Population/Housing Palance	Solid Waste Land Use			
☐ Drainage/Absorption ☐ Economic/Jobs	Population/Housing Balance Public Services/Facilities	☐ Toxic/Hazardous       ☐ Cumulative Effects         ☐ Traffic/Circulation       ☐ Other:			
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Note: The State Clearinghouse will assign identification numbers for all new projects. If a SCH number already exists for a project (e.g. Notice of Preparation or previous draft document) please fill in.

## **Reviewing Agencies Checklist**

Signature of Load Agenc	y Representative: <i>Gab</i>	rislle DuffDate:			
		_ ·			
City/State/Zip:		City/State/Zip:			
Address:		_Address:			
Consulting Firm:		_Applicant:			
Lead Agency (Complete	if applicable):				
		Ending Date			
Local Public Review Peri	od (to be filled in by lead agen	су)			
•	Heritage Commission	Onioi.			
	unity Development	Other:			
Health Services, D	=	Other:			
General Services,	<del>-</del>	water resources, Department of			
•	Protection, Department of	Water Resources, Department of			
Fish & Game Reg		Tanoe Regional Flanning Agency Toxic Substances Control, Department of			
Energy Commission Fish & Game Reg		SWRCB: Water Rights Tahoe Regional Planning Agency			
Education, Depart		SWRCB: Water Quality			
Delta Protection C		SWRCB: Clean Water Grants			
Corrections, Depar		State Lands Commission			
Conservation, Dep		Santa Monica Mtns. Conservancy			
Colorado River Bo		San Joaquin River Conservancy			
Coastal Commissi		San Gabriel & Lower L.A. Rivers & Mtns. Conservan			
	Mtns. Conservancy	S.F. Bay Conservation & Development Comm.			
	od Protection Board	Resources Recycling and Recovery, Department of			
Caltrans Planning		Resources Agency			
Caltrans Division	of Aeronautics	Regional WQCB # 6			
Caltrans District #		Public Utilities Commission			
California Highwa	y Patrol	Pesticide Regulation, Department of			
California Emergency Management Agency		Parks & Recreation, Department of			
Boating & Waterw	vays, Department of	Office of Public School Construction			
	ard	Office of Historic Preservation			

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