

Notice of Completion & Environmental Document Transmittal

Appendix C

For U.S. Mail: State Clearinghouse, P.O. Box 3044, Sacramento, CA 95812-3044
For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814

SCH#

Project Title:

Lead Agency: Contact Person:
Mailing Address: Phone:
City: Zip: County:

Project Location:

County: City/Nearest Community: Total Acres:
Cross Streets: Zip Code:
Assessor's Parcel No. Section: Twp. Range: Base:
Within 2 miles: State Hwy#: Waterways:
Airports: Railways: Schools:

Document Type:

CEQA: NEPA: Other:
NOP Draft EIR NOI Joint Document
Early Cons Supplement to EIR EA Final Document
Neg Dec Subsequent EIR Draft EIS Other:
Mit Neg Dec Other: FONSI

Local Action Type:

General Plan Update Master Plan Use Permit Coastal Permit
General Plan Amendment Planned Unit Development Land Division (Subdivision, etc.) Other:
General Plan Element Site Plan Annexation
Community Plan Rezone Redevelopment
Specific Plan Prezone

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
Educational Waste Treatment: Type MGD
Recreational Hazardous Waste: Type
Other:

Project Issues That May Have A Significant Or Potentially Significant Impact:

Aesthetic/Visual Economic/Jobs Public Services/Facilities Traffic/Circulation
Agricultural Land Fiscal Recreation/Parks Vegetation
Air Quality Flood Plain/Flooding Schools/Universities Water Quality
Archeological/Historical Forest Land/Fire Hazard Septic Systems Water Supply/Groundwater
Biological Resources Geologic/Seismic Sewer Capacity Wetland/Riparian
Coastal Zone Minerals Soil Erosion/ Growth Inducement
Drainage/Absorption Noise Compaction/Grading Land Use
Population/Housing Balance Solid Waste Cumulative Effects
Toxic/Hazardous Other

Present Land Use/Zoning/General Plan Designation:

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

NOTE: The State Clearinghouse will assign identification numbers for all new projects. If a SCH number already exists for a project (e.g. Notice or Preparation or previous draft document) please fill in. Revised 2005

**Reviewing Agencies Checklist**

*Appendix C continued*

Lead Agencies may recommend State Clearinghouse distribution by marking agencies below.

- |   |   |
|---|---|
| <input type="checkbox"/> Air Resources Board                    | <input type="checkbox"/> Office of Emergency Services                                   |
| <input type="checkbox"/> Boating & Waterways, Department of     | <input type="checkbox"/> Office of Historic Preservation                                |
| <input type="checkbox"/> California Highway Patrol              | <input type="checkbox"/> Parks & Recreation   |
| <input type="checkbox"/> Caltrans District # _____              | <input type="checkbox"/> Pesticide Regulation, Department of                            |
| <input type="checkbox"/> Caltrans Division of Aeronautics       | <input type="checkbox"/> Public Utilities Commission                                    |
| <input type="checkbox"/> Caltrans Planning                      | <input type="checkbox"/> Reclamation Board  |
| <input type="checkbox"/> Coachella Valley Mountains Conservancy | <input type="checkbox"/> Regional WQCB # _____  |
| <input type="checkbox"/> Coastal Commission                     | <input type="checkbox"/> Resources Agency   |
| <input type="checkbox"/> Colorado River Board                   | <input type="checkbox"/> S.F. Bay Conservation & Development                            |
| <input type="checkbox"/> Commission                             |   |
| <input type="checkbox"/> Conservation, Department of            | <input type="checkbox"/> San Gabriel & Lower Los Angeles Rivers & Mountains Conservancy |
| <input type="checkbox"/> Corrections, Department of             | <input type="checkbox"/> San Joaquin River Conservancy                                  |
| <input type="checkbox"/> Delta Protection Commission            | <input type="checkbox"/> Santa Monica Mountains Conservancy                             |
| <input type="checkbox"/> Education, Department of               | <input type="checkbox"/> State Lands Commission   |
| <input type="checkbox"/> Office of Public School Construction   | <input type="checkbox"/> SWRCB: Clean Water Grants                                      |
| <input type="checkbox"/> Energy Commission                      | <input type="checkbox"/> SWRCB: Water Quality   |
| <input type="checkbox"/> Fish & Game Region # _____             | <input type="checkbox"/> SWRCB: Water Rights  |
| <input type="checkbox"/> Food & Agriculture, Department of      | <input type="checkbox"/> Tahoe Regional Planning Agency                                 |
| <input type="checkbox"/> Forestry & Fire Protection             | <input type="checkbox"/> Toxic Substances Control, Department of                        |
| <input type="checkbox"/> General Services, Department of        | <input type="checkbox"/> Water Resources, Department of                                 |
| <input type="checkbox"/> Health Services, Department of         |   |
| <input type="checkbox"/> Housing & Community Development        | Other: _____  |
| <input type="checkbox"/> Integrated Waste Management Board      | Other: _____  |
| <input type="checkbox"/> Native American Heritage Commission    |   |

**Local Public Review Period** (to be filled in by lead agency)

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

**Lead Agency** (Complete if applicable):

|                        |                        |
|------------------------|------------------------|
| Consulting Firm: _____ | Applicant: _____       |
| _____                  | Address: _____         |
| Address: _____         | _____                  |
| _____                  | City/State/Zip: _____  |
| City/State/Zip: _____  | _____                  |
| Contact: _____         | Phone: ( _____ ) _____ |
| Phone: ( _____ ) _____ |                        |

**Signature of Lead Agency Representative** \_\_\_\_\_ Date: \_\_\_\_\_

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

