

Notice of Determination

004-25 NOD Appendix D

To:

Office of Planning and Research
U.S. Mail: P.O. Box 3044 Sacramento, CA 95812-3044
Street Address: 1400 Tenth St., Rm 113 Sacramento, CA 95814

County Clerk
County of: Santa Cruz
Address: 701 Ocean Street, Room 520 Santa Cruz, CA 95812

From:

Public Agency: Soquel Creek Water District
Address: 5180 Soquel Drive Soquel, CA 95073
Contact: Taj Dufour
Phone: 831-475-8501 ext 123

Lead Agency (if different from above) RECEIVED
CLERK OF THE BOARD
MAR 05 2025
BOARD OF SUPERVISORS
COUNTY OF SANTA CRUZ

SUBJECT: Filing of Notice of Determination in compliance with Section 21108 or 21152 of the Public Resources Code.

State Clearinghouse Number (if submitted to State Clearinghouse): 2015062021

Project Title: Chromium 6 Water Treatment System Project

Project Applicant: Soquel Creek Water District

Project Location (include county): 1500 Bonita Drive, Aptos, CA 95003. Santa Cruz County

Project Description:

The District initially adopted the IS/MND for the Chrome 6 Water Treatment System Project on September 1, 2015. The project was then put on hold. On October 1, 2024 the District resumed efforts to come into compliance with new state regulation. The 2025 IS/MND Addendum to the IS/MND evaluates minor revisions to the project design and treatment processes. The project objective to provide water treatment to comply with the State Department of Drinking Water Chromium 6 MCL is unchanged.

This is to advise that the Soquel Creek Water District has approved the above (Lead Agency or Responsible Agency)

described project on 3/4/25 and has made the following determinations regarding the above described project.

- 1. The project will not have a significant effect on the environment.
2. An Environmental Impact Report was prepared for this project pursuant to the provisions of CEQA. A Negative Declaration was prepared for this project pursuant to the provisions of CEQA.
3. Mitigation measures were made a condition of the approval of the project.
4. A mitigation reporting or monitoring plan was adopted for this project.
5. A statement of Overriding Considerations was adopted for this project.
6. Findings were not made pursuant to the provisions of CEQA.

This is to certify that the final EIR with comments and responses and record of project approval, or the negative Declaration, is available to the General Public at;

Soquel Creek Water District, 5180 Soquel Drive, Soquel, CA 95073

Signature (Public Agency): [Signature] Title: Engineering Manager

Date: 3/5/2025 Date Received for filing at OPR:

THIS NOTICE HAS BEEN POSTED AT THE CLERK OF THE BOARD OF SUPERVISORS OFFICE FOR A

PERIOD COMMENCING 3/5 2025

Authority cited: Sections 21083, Public Resources Code. Reference Section 21000-21174, Public Resources Code.

AND ENDING 4/9 2025 Revised 2011



State of California - Department of Fish and Wildlife
2025 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

RECEIPT NUMBER:
44-03052025-035
 STATE CLEARINGHOUSE NUMBER (if applicable)
 2015062021

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY Soquel Creek Water District	LEAD AGENCY EMAIL	DATE 3/5/2025
COUNTY/STATE AGENCY OF FILING Santa Cruz	DOCUMENT NUMBER 004-25 NOD	

PROJECT TITLE

Chromium 6 Water Treatment System

PROJECT APPLICANT NAME Taj Dufour	PROJECT APPLICANT EMAIL	PHONE NUMBER 831-475-8501 ext 123
PROJECT APPLICANT ADDRESS 5180 Soquel Dr.	CITY Soquel	STATE CA
		ZIP CODE 95073

PROJECT APPLICANT (Check appropriate box)

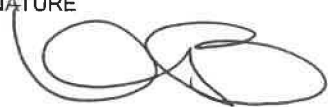
- Local Public Agency School District Other Special District State Agency Private Entity

CHECK APPLICABLE FEES:

- | | | |
|---|----|-------------|
| <input type="checkbox"/> Environmental Impact Report (EIR) | \$ | _____ |
| <input checked="" type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$ | _____ 0.00 |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$ | _____ 0.00 |
|
 | | |
| <input type="checkbox"/> Exempt from fee | | |
| <input type="checkbox"/> Notice of Exemption (attach) | | |
| <input type="checkbox"/> CDFW No Effect Determination (attach) | | |
| <input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy) | | |
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 | | |
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$ | _____ 0.00 |
| <input type="checkbox"/> Count | \$ | _____ |
| <input checked="" type="checkbox"/> Other 3/5/2025 #460667 | \$ | _____ 50.00 |

PAYMENT METHOD:

- Cash Credit Check Other **TOTAL RECEIVED \$ _____ 50.00**

SIGNATURE X 	AGENCY OF FILING PRINTED NAME AND TITLE Helen Bayly, Administrative Aide
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