

Notice of Completion & Environmental Document Transmittal

Mail to: State Clearinghouse, P.O. Box 3044, Sacramento, CA 95812-3044 (916) 445-0613
For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814

2019039117
SCH #

Project Title: Toyon Middle School Wastewater Treatment Plant Upgrade Project

Lead Agency: Calaveras Unified School District
Mailing Address: P.O. Box 788 - 3304 Highway 12
City: San Andreas
Contact Person: Mark Campbell, Superintendent
Phone: (209) 754-2301
County: Calaveras
Zip: 95249

Project Location: County: Calaveras City/Nearest Community: Valley Springs
Cross Streets: State Route 12 and Double Springs Road Zip Code: 95252
Longitude/Latitude (degrees, minutes and seconds): 38 12 50.8 N / 120 45 24.2 W Total Acres: 30.7 ac
Assessor's Parcel No.: SEE BOX 1 BELOW Section: 10 Twp.: T4N Range: R11E Base: Mt. Diablo
Within 2 Miles: State Hwy #: SR 12 and SR 26 Waterways: SEE BOX 2 BELOW
Airports: N/A Railways: N/A Schools: Toyon Middle

BOX 1: APN's 040-004-038, 040-006-043, and 040-006-042 BOX 2: Haupt Creek, Youngs Creek, Spring Valley Creek, New Hogan Lake, Calaveras River

Document Type:

CEQA: [] NOP [] Draft EIR [] Early Cons [] Supplement/Subsequent EIR [] Neg Dec [] (Prior SCH No.) [] Mit Neg Dec [] Other:
NEPA: [] NOI [] EA [] Draft EIS [] FONSI
Other: [] Joint Document [] Final Document [] Other: CE

Local Action Type:

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

Development Type:

[] Residential: Units _____ Acres _____
[] Office: Sq.ft. _____ Acres _____ Employees _____
[] Commercial: Sq.ft. _____ Acres _____ Employees _____
[] Industrial: Sq.ft. _____ Acres _____ Employees _____
[] Educational: _____
[] Recreational: _____
[] Water Facilities: Type _____ MGD _____
[] Transportation: Type _____
[] Mining: Mineral _____
[] Power: Type _____ MW _____
[] Waste Treatment: Type _____ MGD _____
[] Hazardous Waste: Type _____
[] Other: Wastewater Treatment Replacement

Project Issues Discussed in Document:

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

Present Land Use/Zoning/General Plan Designation:

See Continuation Sheet

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

1. Description of Project:

The District is in the process of obtaining a State Water Resources Control Board Clean Water State Revolving Fund Grant to replace the wastewater system at the Toyon Middle School. A detailed project description is included in Section 3 of the environmental document. The Project Alternatives Analysis Report evaluated multiple treatment alternatives against the CUSD Project goals. The CUSD determined that the Onsite Recirculating Sand Filter Treatment with Offsite Disposal Alternative is preferred. A detailed project description is in Section 3 of the Initial Study.

State Clearinghouse Contact:

(916) 445-0613

State Review Began:

3 - 21 - 2019

SCH COMPLIANCE

4 - 19 - 2019

Project Sent to the following State Agencies

X Resources
Boating & Waterways
Central Valley Flood Prot.
Coastal Comm
Colorado Rvr Bd
Conservation
CDFW # 2
Cal Fire
Historic Preservation
Parks & Rec
Bay Cons & Dev Comm.
DWR
Cal EPA
ARB: Airport & Freight
ARB: Transportation Projects
ARB: Major Industrial/Energy Resources, Recycl.& Recovery
SWRCB: Div. of Drinking Water
SWRCB: Div. Drinking Wtr #
SWRCB: Div. Financial Assist.
SWRCB: Wtr Quality
SWRCB: Wtr Rights
Reg. WQCB # 55
Toxic Sub Ctrl-CTC

CalSTA
Aeronautics
CHP
Caltrans# 10
Trans Planning
Other
Education
Food & Agriculture
HCD
OES
State/Consumer Svcs
General Services

Yth/Adlt Corrections
Corrections
Independent Comm
Delta Protection Comm
Delta Stewardship Council
Energy Commission
NAHC
Public Utilities Comm
Santa Monica Bay Restoration
State Lands Comm
Tahoe Rgl Plan Agency
Conservancy
Other:

Please note State Clearinghouse Number (SCH#) on all Comments

SCH#: 2019039117

Please forward late comments directly to the Lead Agency

AQMD/APCD 4

(Resources: 3 / 23)

Reviewing Agencies Checklist

Lead Agencies may recommend State Clearinghouse distribution by marking agencies below with and "X". If you have already sent your document to the agency please denote that with an "S".

- | | |
|---|--|
| <input type="checkbox"/> Air Resources Board | <input checked="" type="checkbox"/> Office of Historic Preservation |
| <input type="checkbox"/> Boating & Waterways, Department of | <input type="checkbox"/> Office of Public School Construction |
| <input type="checkbox"/> California Emergency Management Agency | <input type="checkbox"/> Parks & Recreation, Department of |
| <input checked="" type="checkbox"/> California Highway Patrol | <input type="checkbox"/> Pesticide Regulation, Department of |
| <input checked="" type="checkbox"/> Caltrans District #10 | <input type="checkbox"/> Public Utilities Commission |
| <input type="checkbox"/> Caltrans Division of Aeronautics | <input checked="" type="checkbox"/> Regional WQCB #5F |
| <input type="checkbox"/> Caltrans Planning | <input type="checkbox"/> Resources Agency |
| <input type="checkbox"/> Central Valley Flood Protection Board | <input type="checkbox"/> Resources Recycling and Recovery, Department of |
| <input type="checkbox"/> Coachella Valley Mtns. Conservancy | <input type="checkbox"/> S.F. Bay Conservation & Development Comm. |
| <input type="checkbox"/> Coastal Commission | <input type="checkbox"/> San Gabriel & Lower L.A. Rivers & Mtns. Conservancy |
| <input type="checkbox"/> Colorado River Board | <input type="checkbox"/> San Joaquin River Conservancy |
| <input type="checkbox"/> Conservation, Department of | <input type="checkbox"/> Santa Monica Mtns. Conservancy |
| <input type="checkbox"/> Corrections, Department of | <input type="checkbox"/> State Lands Commission |
| <input type="checkbox"/> Delta Protection Commission | <input checked="" type="checkbox"/> SWRCB: Clean Water Grants |
| <input type="checkbox"/> Education, Department of | <input type="checkbox"/> SWRCB: Water Quality |
| <input type="checkbox"/> Energy Commission | <input type="checkbox"/> SWRCB: Water Rights |
| <input checked="" type="checkbox"/> Fish & Game Region #2 | <input type="checkbox"/> Tahoe Regional Planning Agency |
| <input type="checkbox"/> Food & Agriculture, Department of | <input type="checkbox"/> Toxic Substances Control, Department of |
| <input type="checkbox"/> Forestry and Fire Protection, Department of | <input type="checkbox"/> Water Resources, Department of |
| <input type="checkbox"/> General Services, Department of | Other: _____ |
| <input type="checkbox"/> Health Services, Department of | Other: _____ |
| <input type="checkbox"/> Housing & Community Development | |
| <input checked="" type="checkbox"/> Native American Heritage Commission | |

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

Starting Date 21 March 2019 Ending Date 22 April 2019

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:** 3/19/19

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