

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

SCH #

Project Title: _____

Lead Agency: _____ Contact Person: _____

Mailing Address: _____ Phone: _____

City: _____ Zip: _____ County: _____

Project Location: County: Fresno County City/Nearest Community: Fresno

Cross Streets: _____ Zip Code: _____

Longitude/Latitude (degrees, minutes and seconds): _____° _____' _____" N / _____° _____' _____" W Total Acres: _____

Assessor's Parcel No.: _____ Section: _____ Twp.: _____ Range: _____ Base: _____

Within 2 Miles: State Hwy #: _____ Waterways: _____

Airports: _____ Railways: _____ Schools: _____

Document Type:

- | | | | |
|--------------------------------------|--|------------------------------------|--|
| CEQA: <input type="checkbox"/> NOP | <input type="checkbox"/> Draft EIR | NEPA: <input type="checkbox"/> NOI | Other: <input type="checkbox"/> Joint Document |
| <input type="checkbox"/> Early Cons | <input type="checkbox"/> Supplement/Subsequent EIR | <input type="checkbox"/> EA | <input type="checkbox"/> Final Document |
| <input type="checkbox"/> Neg Dec | (Prior SCH No.) _____ | <input type="checkbox"/> Draft EIS | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Mit Neg Dec | Other: _____ | <input type="checkbox"/> FONSI | _____ |

Local Action Type:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> General Plan Update | <input type="checkbox"/> Specific Plan | <input type="checkbox"/> Rezone | <input type="checkbox"/> Annexation |
| <input type="checkbox"/> General Plan Amendment | <input type="checkbox"/> Master Plan | <input type="checkbox"/> Prezone | <input type="checkbox"/> Redevelopment |
| <input type="checkbox"/> General Plan Element | <input type="checkbox"/> Planned Unit Development | <input type="checkbox"/> Use Permit | <input type="checkbox"/> Coastal Permit |
| <input type="checkbox"/> Community Plan | <input type="checkbox"/> Site Plan | <input type="checkbox"/> Land Division (Subdivision, etc.) | <input type="checkbox"/> Other: _____ |

Development Type:

- | | |
|---|--|
| <input type="checkbox"/> Residential: Units _____ Acres _____ | <input type="checkbox"/> Transportation: Type _____ |
| <input type="checkbox"/> Office: Sq.ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Mining: Mineral _____ |
| <input type="checkbox"/> Commercial: Sq.ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Power: Type _____ MW _____ |
| <input type="checkbox"/> Industrial: Sq.ft. _____ Acres _____ Employees _____ | <input type="checkbox"/> Waste Treatment: Type _____ MGD _____ |
| <input type="checkbox"/> Educational: _____ | <input type="checkbox"/> Hazardous Waste: Type _____ |
| <input type="checkbox"/> Recreational: _____ | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Water Facilities: Type _____ MGD _____ | |

Project Issues Discussed in Document:

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

Present Land Use/Zoning/General Plan Designation:

Miscellaneous commercial and residential land.

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

The California Department of Transportation proposes a roadway rehabilitation project on State Route 99 from 0.2 mile south of the El Dorado Street overcrossing to the Clinton Avenue overcrossing (between post mile 21.2 and post mile 24.4) in Fresno County. The project would remove the existing lanes and shoulders and replace them with continuously reinforced concrete pavement. Between the start of the project, post mile 21.2, and just south of the McKinley Avenue undercrossing, the project would widen the median to 46 feet. Between the McKinley Avenue undercrossing to post mile 24.4, the project would widen the median to 22 feet. The project would construct new auxiliary lanes on the northbound and southbound side of State Route 99 within the Caltrans existing right-of-way. Auxiliary lanes would be constructed between: Stanislaus ramps and the State Route 99/State Route 180 junction, State Route 99/State Route 180 junction and Olive Avenue ramp (one auxiliary lane on the southbound direction and two auxiliary lanes on the northbound direction which tapers to one auxiliary lane just south of Belmont Avenue overcrossing and it would continue onto the Olive Avenue ramp), and Olive Avenue ramps and Clinton Avenue ramps. The auxiliary lanes would be constructed within the Caltrans right-of-way.

Reviewing Agencies Checklist

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

<input type="checkbox"/> Air Resources Board	<input 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 type="checkbox"/> California Highway Patrol	<input type="checkbox"/> Pesticide Regulation, Department of
<input type="checkbox"/> Caltrans District # _____	<input type="checkbox"/> Public Utilities Commission
<input type="checkbox"/> Caltrans Division of Aeronautics	<input type="checkbox"/> Regional WQCB # _____
<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 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 type="checkbox"/> Fish & Game Region # _____	<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	
<input type="checkbox"/> Health Services, Department of	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Housing & Community Development	<input type="checkbox"/> 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.