

Notice of Completion

SEE NOTE BELOW

Control Number # PLNP2020-00192

SCH # _____

Mail to: PO Box 3044, Sacramento CA 95812-3044 (916) 445-0613
For Hand Delivery/Street Address: 1400 Tenth street, Sacramento CA 95814

Project Title: Cal-Am Water Well Project: 2340 & 2344 Cottage Way

Lead Agency: Sacramento County

Contact Person: Josh Greetan

Mailing Address: 827 7th Street, Rm 225

Phone: (916) 876-6425

City: Sacramento Zip: 95814

County: Sacramento

Project Location

County: Sacramento City/Nearest Community: Sacramento

Cross Streets: Cottage Way and Howe Avenue Zip Code: 95825

Lat. / Long.: 38° 36' 10" N/ 121° 24' 31" W

Total Acres: 0.42

Assessor's Parcel No.: 278-0182-035-0000 & 278-0182-036-0000 Section: 28 Twp: 9N Range: 5E Base: Mt Diablo

Within 2 Miles: State Highway # Interstate 80 Business Waterways: Chicken Ranch Slough & Strong Ranch Slough

Airports: N/a Railways: N/A Schools: Howe Avenue Elementary, Saint Philomene School, Leo A. Palmiter

Jr.Sr. HS, Arden Montessori School, Plover Street School, Diamane Montessori School, D.W. Babcock Elementary, Arden Middle School

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: _____

Local Action Type

General Plan Update Specific Plan Rezone Annexation
 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: Use Permit & Minor Use Permit

Development Type

Residential: Units _____ Acres _____ Water Facilities: Type:Well MGD: _____
 Office: Sq. Ft. _____ Acres _____ Employees _____ Transportation: Type: _____
 Commercial: Sq. Ft. _____ Acres _____ Employees _____ Mining: Mineral: _____
 Industrial: Sq. Ft. _____ Acres _____ Employees _____ Power: Type: _____ MW: _____
 Education: _____ Waste Treatment: Type: _____ MGD: _____
 Recreational: _____ Hazardous Waste: Type: _____
 Other: _____

Project Issues Discussed in Document

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

Present Land Use/Zoning/General Plan Use

RD-5 Residential / RD-5 Residential / Low Density Residential

Project Description

1. A Use Permit to allow a Minor Utility and Public Service Facility in the RD-5 zone.

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

2. A Special Development Permit to allow the perimeter wall to exceed seven feet in height.
3. A Design Review to comply with the Countywide Design Guidelines.

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 | <input type="checkbox"/> Office of Public School Construction |
| <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 checked="" type="checkbox"/> Public Utilities Commission |
| <input type="checkbox"/> Caltrans Planning (Headquarters) | <input type="checkbox"/> Reclamation Board |
| <input type="checkbox"/> California Waste Management Board | <input checked="" type="checkbox"/> Regional WQCB # <u>5S (Central Valley)</u> |
| <input type="checkbox"/> Coachella Valley Mountains Conservancy | <input type="checkbox"/> Resources Agency |
| <input type="checkbox"/> Coastal Commission | <input type="checkbox"/> S.F. Bay Conservation & Development Commission |
| <input type="checkbox"/> Colorado River Board | <input type="checkbox"/> San Gabriel & Lower L.A. Rivers and Mtns Conservancy |
| <input type="checkbox"/> Conservation, Department of | <input type="checkbox"/> San Joaquin River Conservancy |
| <input type="checkbox"/> Corrections, Department of | <input type="checkbox"/> Santa Monica Mountains Conservancy |
| <input type="checkbox"/> Delta Protection Commission | <input type="checkbox"/> State Lands Commission |
| <input type="checkbox"/> Education, Department of | <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 |
| <input type="checkbox"/> Health Services, Department of | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Housing & Community Development | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Integrated Waste Management Board | |
| <input type="checkbox"/> Native American Heritage Commission | |
| <input type="checkbox"/> Office of Emergency Services | |

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:** 2/1/21

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