

City of Wildomar

Notice of Completion & Environmental Document Transmittal

Mail to: State Clearinghouse, PO Box 3044, Sacramento, CA 95812-3044
 (916) 445-0613 state.clearinghouse@opr.ca.gov

SCH # _____

PROJECT TITLE Inland Valley Medical Center Project (PA 20-0116)	
LEAD AGENCY City of Wildomar	CONTACT PERSON Matthew C. Bassi, Planning Director
STREET ADDRESS 23873 Clinton Keith Road, Suite 201	
PHONE 951/677-7751, ext. 213	
CITY Wildomar	ZIP CODE 92595
	COUNTY Riverside

PROJECT LOCATION

COUNTY Riverside	CITY/NEAREST COMMUNITY City of Wildomar		
CROSS STREETS Southwest corner of Inland Valley Drive and I-15	ZIP CODE 92595	TOTAL ACRES 22.24	
ASSESSOR'S PARCEL NUMBER 380-250-026, 380-250-027, 380-250-009, 380-260-029, 380-260-037	SECTION N/A	TOWNSHIP N/A	RANGE N/A
WITHIN 2 MILES:			
STATE HIGHWAY NUMBER I-15	AIRPORTS N/A	SCHOOLS Grace Christian School California Lutheran High School Wildomar Elementary School Donald Graham Elementary School Ronald Reagan Elementary School Cole Canyon Elementary School Murrieta Springs Adventist Christian School David Brown Middle School	
RAILWAYS None	WATERWAYS None		

DOCUMENT TYPE

CEQA	<input checked="" type="checkbox"/> NOP <input type="checkbox"/> Early Cons <input type="checkbox"/> MND/IS <input checked="" type="checkbox"/> Draft EIR	<input type="checkbox"/> Supplement/Subsequent EIR <input type="checkbox"/> Other	NEPA	<input type="checkbox"/> NOI <input type="checkbox"/> EA <input type="checkbox"/> Draft EIS <input type="checkbox"/> FONSI	OTHER	<input type="checkbox"/> Joint Document <input type="checkbox"/> Final Document <input type="checkbox"/> Other _____
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LOCAL ACTION TYPE

<input type="checkbox"/> General Plan Update	<input type="checkbox"/> Specific Plan Amendment	<input checked="" 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 checked="" type="checkbox"/> Other Plot Plan

DEVELOPMENT TYPE

<input type="checkbox"/> Residential	Units _____	Acres _____	<input type="checkbox"/> Transportation	Type _____
<input type="checkbox"/> Office	Sq. ft. _____	Acres _____	<input type="checkbox"/> Mining	Mineral _____
<input type="checkbox"/> Shopping/Commercial	Sq. ft. _____	Acres _____	<input type="checkbox"/> Waste Treatment	Type _____
<input type="checkbox"/> Industrial	Sq. ft. _____	Acres _____	<input type="checkbox"/> Hazardous Waste	Type _____
<input type="checkbox"/> Educational	Sq. ft. _____	Acres _____	<input type="checkbox"/> Water Facilities	Type _____
<input checked="" type="checkbox"/> Other (Medical)	Sq. ft. <u>290,000</u>		<input type="checkbox"/> Power	Type _____
<input type="checkbox"/> Recreational	Sq. ft. _____			MGD _____ Watts _____

FUNDING

Federal \$ _____	State \$ _____	Total \$ _____
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PROJECT ISSUES DISCUSSED IN DOCUMENT

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

PRESENT LAND USE/ZONING/GENERAL PLAN DESIGNATION: Land Use: Light Industrial; Zoning: I-P.

The applicant is proposing to expand the existing Inland Valley Medical Center which is located on 22.24 acres east of I-15 south of Clinton Keith Road. The existing buildings include several one- to three-story structures: Buildings A, B-H, C, I, and Central Utility Plant (CUP), and an Administration Building. Demolition of the existing Building C would allow for the construction of a 7-story, 290,000-square-foot tower to commence. Building B-H would be demolished to create new surface parking lots. The new addition to the hospital would include expansion of all services and critical ancillary support for 100 new patient beds, bringing the total number of beds to 202. The proposed project requires four development actions: 1) Environmental Impact Report (EIR) – In accordance with CEQA Guidelines Section 15081, the City has determined that the proposed project will require the preparation of an Environmental Impact Report (EIR); 2) Change of Zone (CZ) – Approval of a zone change to establish the "IVMC Overlay Zone District (IVMC)" designation to the entire hospital properties; 3) Zoning Ordinance Amendment – Approval of a zoning ordinance amendment to establish specific design and development standards (building height, setbacks, parking, etc.) for the IVMC property unique to the proposed project; 4) Conditional Use Permit (CUP) – A conditional use permit to relocate the heliport to accommodate future expansion on the site and to allow approximately 450 spaces of offsite parking during construction activities; and 5) Plot Plan – Approval of a single Plot Plan to redevelop the site consistent with the proposed IVMC overlay development standards.

REVIEWING AGENCIES CHECKLIST

- Resources Agency
- Boating & Waterways
- Coastal Conservancy
- Colorado River Board
- Conservation
- Fish and Wildlife
- Forestry & Fire Protection
- Office of Historic Preservation
- Parks and Recreation
- Reclamation Board
- San Francisco Bay Conservation & Development Commission
- Water Resources

Business, Transportation & Housing

- Aeronautics
- California Highway Patrol
- CALTRANS District # 8
- Department of Transportation Planning (headquarters)
- Housing & Community Development
- Food & Agriculture Health & Welfare
- Health Services _____

State & Consumer Services

- General Services

Environmental Protection Agency

- Air Resources Board
- California Department of Resources Recycling and Recovery (CalRecycle)
- SWRCB: Clean Water Grants
- SWRCB: Delta Unit
- SWRCB: Water Quality
- SWRCB: Water Rights
- Regional WQCB # 8
- Regional WQCB # 9 (San Diego Region)

Youth & Adult Corrections

- Corrections


Independent Commissions & Offices

- Energy Commission
- Native American Heritage Commission
- Public Utilities Commission
- Santa Monica Mountains Conservancy
- State Lands Commission
- Tahoe Regional Planning Agency

PUBLIC REVIEW PERIOD

Starting Date: Wednesday, March 17, 2021

Ending Date: Thursday, April 15, 2021

Signature 
 Matthew C. Bassi, Planning Director
 City of Wildomar Planning Department

Date Tuesday, March 16, 2021

<p>Consultant: Consulting Firm: <u>PlaceWorks</u> Address: <u>3 MacArthur Place, Suite 1100</u> City/State/Zip: <u>Santa Ana, CA 92707</u> Contact: <u>Mark Teague</u> Phone: <u>(714.966.9200)</u></p>
<p>Lead Agency: Matthew C. Bassi, Planning Director City of Wildomar 23837 Clinton Keith Road, Suite 201 Wildomar, CA 92595 Phone: (951) 677-7751</p>

<p>For SCH Use Only:</p> <p>Date Received at SCH _____</p> <p>Date Review Starts _____</p> <p>Date to Agencies _____</p> <p>Date to SCH _____</p> <p>Clearance Date</p> <p>Notes:</p>
