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: Lake County Community Development Department
Contact Person: Sateur Ham
Mailing Address: 255 North Forbes Street
Phone: 707-263-2221
City: Lakeport
Zip: 95453
County: Lake

Project Location: County: Lake
City/Nearest Community: Kelseyville
Cross Streets: Nancy Drive
Zip Code: 95451
Longitude/Latitude (degrees, minutes and seconds): ____° ____′ ____″ N / ____° ____′ ____″ W Total Acres: _____
Assessor's Parcel No.: 011-057-22 & 011-057-23
Section: 7 Twp.: 12N Range: 8W Base: MDB
Within 2 Miles: State Hwy #: _____ Waterways: Cole Creek
Airports: _____ Railways: _____ Schools: _____

Document Type:

CEQA:
- ☐ NOP
- ☐ Early Cons
- ☐ Neg Dec
- ☒ Mit Neg Dec
- ☐ Draft EIR
- ☐ Supplement/Subsequent EIR (Prior SCH No.) _____
- Other: _____

NEPA:
- ☒ NOI
- ☐ EA
- ☐ Draft EIS
- ☐ FONSI

Other:
- ☐ Joint Document
- ☐ Final Document
- ☐ Other: _____

Local Action Type:

- ☐ General Plan Update
- ☐ General Plan Amendment
- ☐ General Plan Element
- ☐ Community Plan
- ☐ Specific Plan
- ☐ Master Plan
- ☐ Planned Unit Development
- ☐ Site Plan
- ☐ Rezone
- ☐ Prezone
- ☒ Use Permit
- ☐ Land Division (Subdivision, etc.)
- ☐ Annexation
- ☐ Redevelopment
- ☐ Coastal Permit
- ☐ Other: _____

Development Type:

- ☐ Residential: Units _____ Acres _____
- ☐ Office: Sq.ft. _____ Acres _____ Employees _____
- ☒ Commercial: Sq.ft. _____ Acres 6 Employees 6
- ☐ 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: _____

Project Issues Discussed in Document:

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

Present Land Use/Zoning/General Plan Designation:

Vacant-Residential/RL-B5-SC/Rural Lands

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

The applicant is requesting to allow a total of 4-acres of outdoor canopy area to be located within a total of 6-acres cultivation between two parcels: 011-057-23 & 011-057-22. Each cultivation area will comprise of 2-acres canopy area within a 3-acre cultivation area segregated by medicinal cannabis and adult-use without the use of artificial light. The proposed site locations are within an approved applications to the Department of Forestry and Fire Protection for a “Less than 3-acre Conversion Exemption, Timber Conservation Plan”. The site will be improved with a 4,750 square feet metal building to be placed on the northern parcel (011-057-22) used for drying and processing, and storage of products, security parking, portable restrooms, and fenced enclosure surrounding the cultivation area. The existing structure include a single residential home.

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

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**".

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

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

Starting Date May 3, 2021 Ending Date June 4, 2021

Lead Agency (Complete if applicable):

Consulting Firm: ____
Address: ____
City/State/Zip: ____
Contact: ____
Phone: ____

Applicant: ____
Address: ____
City/State/Zip: ____
Phone: ____

Signature of Lead Agency Representative: Sateur Ham Digitally signed by Sateur Ham Date: 2021.05.01 16:02:37 -07'00' **Date:** May 1, 2021

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