

Notice of Completion

SEE NOTE BELOW

Control Number # PLNP2020-00215

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: Golden Gate Avenue Parcel Map

Lead Agency: Sacramento County

Mailing Address: 827 7th Street, Rm 225

City: Sacramento Zip: 95814

Contact Person: Meredith Holsworth

Phone: (916) 874-5835

County: Sacramento

Project Location

County: Sacramento City/Nearest Community: Orangevale

Cross Streets: Hazel Avenue at Golden Gate Avenue Zip Code: 95630

Lat. / Long.: 38° 42' 22" N / 121° 13' 01" W

Total Acres: 10

Assessor's Parcel No.: 227-0110-018-0000 Section: 21 Twp: 10N Range: 07E Base: _____

Within 2 Miles: State Highway # N/A Waterways: Linda Creek

Airports: N/A Railways: N/A Schools: Casa Roble Fundamental HS, Clarie's Montessori International Academy, Oakview Community Elementary, Green Oaks Fundamental Elementary, Louis Pasteur Middle School, Ottomon Elementary, Golden Valley Charter School, Trajan Elementary

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: _____

Development Type

Residential: Units _____ Acres 10
 Office: Sq. Ft. _____ Acres _____ Employees _____
 Commercial: Sq. Ft. _____ Acres _____ Employees _____
 Industrial: Sq. Ft. _____ Acres _____ Employees _____
 Education: _____
 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 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: Tribal Cultural Resources, Climate Change,

Present Land Use/Zoning/General Plan Use

AR-2 (Agricultural-Residential --2 Acres)/ AR-2 (Agricultural-Residential --2 Acres)/Ag-Res

Project Description

1.A Tentative Parcel Map to divide approximately 10 gross acres into four lots and a remainder lot.

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 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 type="checkbox"/> Public Utilities Commission |
| <input type="checkbox"/> Caltrans Planning (Headquarters) | <input type="checkbox"/> Reclamation Board |
| <input type="checkbox"/> California Waste Management Board | <input 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"/> Housing & Community Development | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Integrated Waste Management Board | <input type="checkbox"/> Other _____ |
| <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: _____
Address: _____
City/State/Zip: _____
Contact: _____
Phone: (_____) _____

Applicant: _____
Address: _____
City/State/Zip: _____
Phone: (_____) _____

Signature of Lead Agency Representative: _____ **Date:** 6/10/21

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