

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: _____ City/Nearest Community: _____

Cross Streets: _____ Zip Code: _____

Latitude/Longitude: _____° _____' _____" N/ _____° _____' _____" W Total Acres: _____

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

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

Airports: _____ Railways: _____ Schools: _____

Document Type:

CEQA: NOP Draft EIR NEPA: NOI Other: Joint Document
 Early Cons Supplement/Subsequent EIR EA Final Document
 Neg Dec (Prior SCH No.) Draft EIS Other _____
 Mit Neg Dec Other _____ FONSI

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 _____ Water Facilities: Type _____ MGD _____
 Office: Sq.ft. _____ Acres _____ Employees _____ Transportation: Type _____
 Commercial: Sq.ft. _____ Acres _____ Employees _____ Mining: Mineral _____
 Industrial: Sq.ft. _____ Acres _____ Employees _____ Power: Type _____ MW _____
 Educational _____ Waste Treatment: Type _____ MGD _____
 Recreational _____ Hazardous Waste: Type _____
 Other: _____

Project Issues Discussed in Document:

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

Present Land Use/Zoning/General Plan Designation:

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

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 Emergency Services
<input type="checkbox"/> Boating & Waterways, Department of	<input type="checkbox"/> Office of Historic Preservation
<input type="checkbox"/> CalFire	<input type="checkbox"/> Office of Public School Construction
<input type="checkbox"/> California Highway Patrol	<input type="checkbox"/> Parks & Recreation, Department of
<input type="checkbox"/> CalRecycle	<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 (Headquarters)	<input type="checkbox"/> Resources Agency
<input type="checkbox"/> Central Valley Flood Protection Board	<input type="checkbox"/> S.F. Bay Conservation & Development Commission
<input type="checkbox"/> Coachella Valley Mountains Conservancy	<input type="checkbox"/> San Gabriel & Lower L.A. Rivers and Mtns Conservancy
<input type="checkbox"/> Coastal Commission	<input type="checkbox"/> San Joaquin River Conservancy
<input type="checkbox"/> Colorado River Board	<input type="checkbox"/> Santa Monica Mountains Conservancy
<input type="checkbox"/> Conservation, Department of	<input type="checkbox"/> State Lands Commission
<input type="checkbox"/> Corrections, Department of	<input type="checkbox"/> SWRCB: Clean Water Grants
<input type="checkbox"/> Delta Protection Commission	<input type="checkbox"/> SWRCB: Water Quality
<input type="checkbox"/> Education, Department of	<input type="checkbox"/> SWRCB: Water Rights
<input type="checkbox"/> Energy Commission	<input type="checkbox"/> Tahoe Regional Planning Agency
<input type="checkbox"/> Fish & Wildlife Region # _____	<input type="checkbox"/> Toxic Substances Control, Department of
<input type="checkbox"/> Food & Agriculture, 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: Peter Chou Date: _____

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