

### 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:** Tentative Tract Map No. 20514

Lead Agency: City of Adelanto Contact Person: Louis Morales  
Mailing Address: 11600 Air Expressway Phone: 760-246-2300  
City: Adelanto Zip: 92301 County: San Bernardino

**Project Location:** County: San Bernardino City/Nearest Community: City of Adelanto  
Cross Streets: Holly Road and Jonathan Street Zip Code: 92301

Longitude/Latitude (degrees, minutes and seconds): 34 ° 32 ' 38.4" N / 117 ° 24 ' 25.2" W Total Acres: 14.51

Assessor's Parcel No.: 3128-241-09 and 14 Section: 4 Twp.: 5 North Range: 5 West Base: \_\_\_\_\_

Within 2 Miles: State Hwy #: \_\_\_\_\_ Waterways: \_\_\_\_\_  
Airports: \_\_\_\_\_ Railways: \_\_\_\_\_ Schools: Adelanto High Schc

**Document Type:**

- |   |  |                                    |  |
|---|--|------------------------------------|--|
| CEQA: <input type="checkbox"/> NOP              | <input type="checkbox"/> Draft EIR                 | NEPA: <input type="checkbox"/> NOI | Other: <input type="checkbox"/> Joint Document |
| <input type="checkbox"/> Early Cons             | <input type="checkbox"/> Supplement/Subsequent EIR | <input type="checkbox"/> EA        | <input type="checkbox"/> Final Document        |
| <input type="checkbox"/> Neg Dec                | (Prior SCH No.) _____                              | <input type="checkbox"/> Draft EIS | <input type="checkbox"/> Other: _____          |
| <input checked="" type="checkbox"/> Mit Neg Dec | Other: _____                                       | <input type="checkbox"/> FONSI     | _____  |

**Local Action Type:**

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> General Plan Update    | <input type="checkbox"/> Specific Plan            | <input 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 checked="" type="checkbox"/> Land Division (Subdivision, etc.) | <input type="checkbox"/> Other: _____   |

**Development Type:**

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Residential: Units <u>83</u> Acres <u>14.51</u> | <input type="checkbox"/> Transportation: Type _____            |
| <input type="checkbox"/> Office: Sq.ft. _____ Acres _____ Employees _____           | <input type="checkbox"/> Mining: Mineral _____                 |
| <input type="checkbox"/> Commercial: Sq.ft. _____ Acres _____ Employees _____       | <input type="checkbox"/> Power: Type _____ MW _____            |
| <input type="checkbox"/> Industrial: Sq.ft. _____ Acres _____ Employees _____       | <input type="checkbox"/> Waste Treatment: Type _____ MGD _____ |
| <input type="checkbox"/> Educational: _____   | <input type="checkbox"/> Hazardous Waste: Type _____           |
| <input type="checkbox"/> Recreational: _____  | <input type="checkbox"/> Other: _____                          |
| <input type="checkbox"/> Water Facilities: Type _____ MGD _____                     |  |

**Project Issues Discussed in Document:**

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

**Present Land Use/Zoning/General Plan Designation:**

Medium Density Residential (R-M12)

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

The applicant is proposing a Tentative Tract Map (TTM) to subdivide approximately 14.51 acres into 83 single-family residential lots with a minimum lot size of 5,000 square feet.

*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 an "X".  
If you have already sent your document to the agency please denote that with an "S".

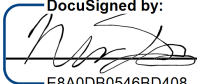
- |  |  |
|--|--|
| <input type="checkbox"/> Air Resources Board                         | <input type="checkbox"/> Office of Historic Preservation                     |
| <input type="checkbox"/> Boating & Waterways, Department of          | <input type="checkbox"/> Office of Public School Construction                |
| <input type="checkbox"/> California Emergency Management Agency      | <input type="checkbox"/> Parks & Recreation, Department of                   |
| <input type="checkbox"/> California Highway Patrol                   | <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                           | <input type="checkbox"/> Resources Agency                                    |
| <input type="checkbox"/> Central Valley Flood Protection Board       | <input type="checkbox"/> Resources Recycling and Recovery, Department of     |
| <input type="checkbox"/> Coachella Valley Mtns. Conservancy          | <input type="checkbox"/> S.F. Bay Conservation & Development Comm.           |
| <input type="checkbox"/> Coastal Commission                          | <input type="checkbox"/> San Gabriel & Lower L.A. Rivers & Mtns. Conservancy |
| <input type="checkbox"/> Colorado River Board                        | <input type="checkbox"/> San Joaquin River Conservancy                       |
| <input type="checkbox"/> Conservation, Department of                 | <input type="checkbox"/> Santa Monica Mtns. Conservancy                      |
| <input type="checkbox"/> Corrections, Department of                  | <input type="checkbox"/> State Lands Commission                              |
| <input type="checkbox"/> Delta Protection Commission                 | <input type="checkbox"/> SWRCB: Clean Water Grants                           |
| <input type="checkbox"/> Education, Department of                    | <input type="checkbox"/> SWRCB: Water Quality                                |
| <input type="checkbox"/> Energy Commission                           | <input type="checkbox"/> SWRCB: Water Rights                                 |
| <input checked="" type="checkbox"/> Fish & Game Region # <u>6</u>    | <input type="checkbox"/> Tahoe Regional Planning Agency                      |
| <input type="checkbox"/> Food & Agriculture, Department of           | <input type="checkbox"/> Toxic Substances Control, Department of             |
| <input type="checkbox"/> Forestry and Fire Protection, Department of | <input type="checkbox"/> Water Resources, Department of                      |
| <input type="checkbox"/> General Services, Department of             | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Health Services, Department of              | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Housing & Community Development             |  |
| <input type="checkbox"/> Native American Heritage Commission         |  |

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

Starting Date 12/19/22 Ending Date 1/17/23

**Lead Agency (Complete if applicable):**

Consulting Firm: <u>EPC Environmental</u>	Applicant: _____
Address: <u>11801 Pierce St. Suite 200</u>	Address: _____
City/State/Zip: <u>Riverside, CA. 92505</u>	City/State/Zip: _____
Contact: <u>Maria Tooker</u>	Phone: _____
Phone: <u>951-710-3010</u>	

Signature of Lead Agency Representative:  \_\_\_\_\_ Date: 12/19/22

DocuSigned by: E8A0DB0546BD408...

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