

Notice of Determination

Appendix D

To:

Office of Planning and Research
U.S. Mail: Street Address:
P.O. Box 3044 1400 Tenth St., Rm 113
Sacramento, CA 95812-3044 Sacramento, CA 95814

County Clerk
County of: San Joaquin
Address: 44 N San Joaquin St
Stockton, CA 95202

From:

Public Agency: Lockeford Community Services
Address: 17725 N Tully Rd
Lockeford, CA 95237
Contact: Joe Salzman, General Manager
Phone: (209) 727-5035

Lead Agency (if different from above):
SAME
Address: _____
Contact: _____
Phone: _____

SUBJECT: Filing of Notice of Determination in compliance with Section 21108 or 21152 of the Public Resources Code.

State Clearinghouse Number (if submitted to State Clearinghouse): 2023010024

Project Title: Lockeford Community Services District Wastewater Facilities Master Plan

Project Applicant: Lockeford Community Services District (LCSD)

Project Location (include county): Lockeford, CA and vicinity

Project Description:

The proposed project is the adoption and implementation of a multi-phase Wastewater Facilities Master Plan (Master Plan). The Master Plan addresses a range of planned improvements to the CSD's wastewater collection, treatment, and disposal systems that will be needed to serve anticipated new development within the CSD's existing service area and Sphere of Influence. The project would also provide for beneficial reuse of treated effluent to recharge the underlying groundwater basin through

This is to advise that the LCSD Board of Directors has approved the above
(Lead Agency or Responsible Agency)

described project on May 11, 2023 and has made the following determinations regarding the above
(date)
described project.

1. The project [will will not] have a significant effect on the environment.
2. An Environmental Impact Report was prepared for this project pursuant to the provisions of CEQA.
 A Negative Declaration was prepared for this project pursuant to the provisions of CEQA.
3. Mitigation measures [were were not] made a condition of the approval of the project.
4. A mitigation reporting or monitoring plan [was was not] adopted for this project.
5. A statement of Overriding Considerations [was was not] adopted for this project.
6. Findings [were were not] made pursuant to the provisions of CEQA.

This is to certify that the final EIR with comments and responses and record of project approval, or the negative Declaration, is available to the General Public at:

17725 N Tully Road, Lockeford, CA 95237

Signature (Public Agency): [Signature] Title: General Manager

Date: 05/11/2023 Date Received for filing at OPR: MAY 15 2023



State of California - Department of Fish and Wildlife
2023 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/23) Previously DFG 753.5a

RECEIPT NUMBER:
39-05152023-137

STATE CLEARINGHOUSE NUMBER (If applicable)
2023010024

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY LOCKEFORD COMMUNITY SERVICES	LEAD AGENCY EMAIL	DATE 05/15/2023
COUNTY/STATE AGENCY OF FILING SAN JOAQUIN	DOCUMENT NUMBER 39-05152023-137	

PROJECT TITLE
 LOCKEFORD COMMUNITY SERVICES DISTRICT WASTEWATER FACILITIES MASTER PLAN

PROJECT APPLICANT NAME LOCKEFORD COMMUNITY SERVICES	PROJECT APPLICANT EMAIL	PHONE NUMBER 209-727-5035 JOE
PROJECT APPLICANT ADDRESS 17725 N TULLY RD	CITY LOCKEFORD	STATE CA
		ZIP CODE 95237

PROJECT APPLICANT (Check appropriate box)

Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity

CHECK APPLICABLE FEES:

<input type="checkbox"/> Environmental Impact Report (EIR)	\$3,839.25	\$ _____
<input checked="" type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)	\$2,764.00	\$ _____ \$2,764.00
<input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW	\$1,305.25	\$ _____
<input type="checkbox"/> Exempt from fee		
<input type="checkbox"/> Notice of Exemption (attach)		
<input type="checkbox"/> CDFW No Effect Determination (attach)		
<input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy)		
<input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only)	\$850.00	\$ _____
<input checked="" type="checkbox"/> County documentary handling fee		\$ _____ \$50.00
<input type="checkbox"/> Other		\$ _____
PAYMENT METHOD:		TOTAL RECEIVED \$ _____ \$2,814.00
<input type="checkbox"/> Cash <input type="checkbox"/> Credit <input checked="" type="checkbox"/> Check <input type="checkbox"/> Other		

SIGNATURE 	AGENCY OF FILING PRINTED NAME AND TITLE Kelley McHugh ,Deputy
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