Notice of Determinat	ion		Appendix
То:		From:	
○ Office of Planning and Research	rch	Public Agency:	CA Governor's Office of
			Emergency Services
U.S. Mail:	Street Address:	Address:	
P.O. Box 3044	1400 Tenth St. Rm 113		Avenue, Mather, CA 95655
Sacramento, CA 95812-3044	Sacramento, CA 95814		andi Chegwidden
		Phone: (91	(6) 845-8583
County Clerk		L   A ///	1:55
County of:		_ Lead Agency (If	different from above):
Address:		Address:	
		_ Address.	
		Contact:	
		Phone:	
			_
UBJECT: Filing of Notice of	Determination in compli	iance with Sectio	n 21108 or 21152 of the Publi
Resources Code.			
State Clearinghouse Number (if so	ubmitted to State Clearinghous	e): 2023030046	
,	· ·	, <u> </u>	
Project Title: Southern Region		r Project	
Project Applicant Name, Address,	Phone Number: Same as	Lead Agency	
Project Location (include county):	2501 Harbor Boulevard, Co	sta Mesa, Orange C	County
Project Description: The proje	ot involves development of an E	imergency Operation	s Center (EOC) on a 15-acre site
and visito other infra project wo emergend begin in n	r parking areas, a 100-foot micro estructure improvements such a ould also include energy infrastri by generators and would be des	owave tower with 20 s utilities, stormwater ucture such as PV pa igned to be Zero Net	landscaping and fencing, paved staff feet of equipment on top, and various , intersections, and roadways. The nels, battery energy storage, and Energy. Construction is expected to ation in 2027. OES is taking no action
<del></del>	rnia Governor's Office of Eme	rgency Services	has approved the above
This is to advise that the	(⊠ Lead Agency or ☐ Re		has approved the above
described project on [2]	= 1		erminations regarding the above
described project on	(date)	ide the following det	erminations regarding the above
described project.			
The project [☐will ☑will not ☐ in the project [☐will in the project [☐will in the project			
2. An Environmental Impact		• '	·
☐ A Negative Declaration was	is prepared for this project pur	suant to the provisio	ns of CEQA.
3. Mitigation measures [⊠ were	were not] made a conditio	n of the approval of	the project.
4. A mitigation reporting or moni	toring plan [⊠was □ was no	t] adopted for this pr	roject.
5. A statement of Overriding Co	nsiderations [□was ☒ was n	ot] adopted for this p	project.
_	t] made pursuant to the provis		•
This is to certify that the final EIR Declaration, is available to the G	with comments and response		ect approval, or the negative
CA Governor's Office of Emerger		Avenue Mather CA	95655
		A	
Signature (Public Agency):	isa ann I Man	Title: Chie	f Deputy Director, by & Administration
Date: 12/19/23	Date Received for filin		