

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: Avalon Harbor Club Dock Replacement ProjectLead Agency: City of AvalonContact Person: Bob Greenlaw, PEMailing Address: 410 Avalon Canyon RoadPhone: 310-510-0220City: AvalonZip: 90704County: Los Angeles**Project Location:** County: Los Angeles City/Nearest Community: AvalonCross Streets: Crescent Avenue/Saint Katherine Way Zip Code: 90704

Longitude/Latitude (degrees, minutes and seconds): _____ ° _____ ' _____ " N / _____ ° _____ ' _____ " W Total Acres: _____

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

Within 2 Miles: State Hwy #: _____ Waterways: Avalon HarborAirports: _____ Railways: _____ Schools: Avalon K-12 School**Document Type:**CEQA: NOP Draft EIRNEPA: NOIOther: 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 _____ 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 _____ Water Facilities: Type _____ MGD _____ Other: Avalon Harbor Club Dock Replacement**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 Growth Inducement Coastal Zone Noise Solid Waste Land Use Drainage/Absorption Population/Housing Balance Toxic/Hazardous Cumulative Effects Economic/Jobs Public Services/Facilities Traffic/Circulation Other: _____**Present Land Use/Zoning/General Plan Designation:**Resort Recreational**Project Description:** (please use a separate page if necessary)

The City of Avalon is proposing to replace the existing dock with an Americans with Disabilities Act (ADA) compliant gangway to enable safer access. The proposed 80-foot- gangway would be attached to the shoreline at the same location as the existing approach pier; thus, the end of the proposed gangway would be at the same approximate location as the existing 20 foot gangway. The proposed project also includes placement of new docks. The new docks would be located at roughly the same location and have roughly the same footprint and seafloor shadow as the existing docks.

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".

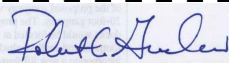
<input type="checkbox"/> Air Resources Board	<input type="checkbox"/> Office of Historic Preservation
<input type="checkbox"/> Boating & Waterways, Department of	<input type="checkbox"/> Office of Public School Construction
<input type="checkbox"/> California Emergency Management Agency	<input type="checkbox"/> 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 checked="" type="checkbox"/> Regional WQCB #4 _____
<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 checked="" 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 #5 _____	<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 checked="" type="checkbox"/> Native American Heritage Commission	

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

Starting Date October 29, 2024 Ending Date November 27, 2024

Lead Agency (Complete if applicable):

Consulting Firm: _____	Applicant: _____
Address: _____	Address: _____
City/State/Zip: _____	City/State/Zip: _____
Contact: _____	Phone: _____
Phone: _____	

Signature of Lead Agency Representative:  Date: 10/28/2024

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