

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: Pediatric Medical Office Building by LLUMC

Lead Agency: <u>City of Loma Linda</u>	Contact Person: <u>Lorena Matarrita</u>
Mailing Address: <u>25541 Barton Road</u>	Phone: <u>(909) 799-2839</u>
City: <u>Loma Linda</u> Zip: <u>92354</u>	County: <u>San Bernardino</u>

Project Location: County: San Bernardino City/Nearest Community: Loma Linda
 Cross Streets: Barton Road and Anderson Street Zip Code: 92354

Longitude/Latitude (degrees, minutes and seconds): 34 ° 02 ' 52.4 " N / 117 ° 15 ' 38.0 " W Total Acres: 5.84

Assessor's Parcel No.: 028419123 Section: 36 Twp.: T1S Range: R4W Base: SBPM

Within 2 Miles: State Hwy #: 10 Waterways: San Timoteo Creek
 Airports: none Railways: Union Pacific RR Schools: Loma Linda Academy

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 checked="" type="checkbox"/> Site Plan	<input type="checkbox"/> Land Division (Subdivision, etc.)	<input type="checkbox"/> Other: _____

Development Type:

<input type="checkbox"/> Residential: Units _____ Acres _____	<input type="checkbox"/> Transportation: Type _____
<input checked="" type="checkbox"/> Office: Sq.ft. <u>105000</u> Acres <u>5.84</u> 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 checked="" 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 checked="" 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:

Institutional-Healthcare/Institutional-Healthcare (I-HC)

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

The proposed project involves the development of a 105,000-square-foot, five-story medical office building on 3.65 acres of a 5.84-acre previously developed site. The facility will house hospital based pediatric clinics with approximately 150 exam rooms and support spaces. Additional improvements include surface parking, patient drop-off/loading areas, landscaping, and site lighting. Existing access points along Barton Road and Anderson Street will remain, as will a portion, about 2+ acres, of the existing surface parking east of the Barton Road entrance. The site, currently a surface parking lot, will be redeveloped in a manner consistent with the campus's architectural character. No General Plan Amendment or Zone Change is required. The current zoning of Institutional-Healthcare allows for medical office buildings and ancillary uses.

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 checked="" 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 checked="" type="checkbox"/> Native American Heritage Commission	

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

Starting Date December 10, 2024 Ending Date January 8, 2025

Lead Agency (Complete if applicable):

Consulting Firm: <u>City of Loma Linda - Lorena Matarrita</u>	Applicant: <u>City of Loma Linda - Lorena Matarrita</u>
Address: <u>25541 Barton Rd.</u>	Address: <u>25541 Barton Rd.</u>
City/State/Zip: <u>Loma Linda, CA 92354</u>	City/State/Zip: <u>Loma Linda, CA 92354</u>
Contact: <u>Lorena Matarrita</u>	Phone: <u>(909) 799-2839</u>
Phone: <u>(909) 799-2839</u>	

Signature of Lead Agency Representative: Lorena Matarrita

 Digitally signed by Lorena Matarrita
Date: 2024.12.09 15:32:50 -08'00'

Date: Dec 9, 2024

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