

**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

<b>SCH #</b>
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**Project Title:** 5204 Marione Dr WCF

Lead Agency: <u>Sacramento County</u>	Contact Person: <u>Julie Newton</u>
Mailing Address: <u>827 7th Street, Rm. 225</u>	Phone: <u>916-876-8502</u>
City: <u>Sacramento</u> Zip: <u>95614</u>	County: <u>Sacramento</u>

**Project Location:** County: Sacramento City/Nearest Community: Carmichael/Old Foothill Farms  
 Cross Streets: Arden Way and Fair Oaks Boulevard Zip Code: 95608

Longitude/Latitude (degrees, minutes and seconds): -121 ° 20 ' 38 " N / 38 ° 35 ' 47 " W Total Acres: 0.73  
 Assessor's Parcel No.: 283-0242-003-0000 Section: \_\_\_\_\_ Twp.: 9N Range: 6E Base: Mt. Diablo  
 Within 2 Miles: State Hwy #: U.S. Route 50 Waterways: American River  
 Airports: \_\_\_\_\_ Railways: \_\_\_\_\_ Schools: Ralph Richardson Center

**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 checked="" type="checkbox"/> Use Permit	<input type="checkbox"/> Coastal Permit
<input type="checkbox"/> Community Plan	<input 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"/> Office: Sq.ft. _____ Acres _____ Employees _____ <input type="checkbox"/> Commercial: Sq.ft. _____ Acres _____ Employees _____ <input type="checkbox"/> Industrial: Sq.ft. _____ Acres _____ Employees _____ <input type="checkbox"/> Educational: _____ <input type="checkbox"/> Recreational: _____ <input type="checkbox"/> Water Facilities: Type _____ MGD _____	<input type="checkbox"/> Transportation: Type _____ <input type="checkbox"/> Mining: Mineral _____ <input type="checkbox"/> Power: Type _____ MW _____ <input type="checkbox"/> Waste Treatment: Type _____ MGD _____ <input type="checkbox"/> Hazardous Waste: Type _____ <input checked="" type="checkbox"/> Other: <u>Wireless Communication Facility (WCF)</u>
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**Project Issues Discussed in Document:**

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

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

RD 2 – Low Density Single-Family Residential/LDR – Low Density Residential

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

The proposed project consists of the construction of a new 79-foot-tall mono-pine stealth design Wireless Communication Facility (WCF) and at the base of the WCF, accompanying equipment cabinet and 30KW backup generator, all within a lease area of about 576 square feet. The WCF is designed to accommodate future wireless tenant collocations. The lease area is located in the southwest corner of the property. The site is proposed to be accessed from a new driveway from Marione Drive from the north side of the lot.

*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 and "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>2</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"/> Health Services, Department of	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Housing & Community Development	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Native American Heritage Commission	

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

Starting Date \_\_\_\_\_ Ending Date \_\_\_\_\_

### Lead Agency (Complete if applicable):

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

Signature of Lead Agency Representative: Julie Newton

Digitally signed by Julie Newton  
DN: cn=Julie Newton, o=Sacramento County, ou=Email, email=julie@psacounty.net, c=US  
Date: 2020.07.16 15:30:44 -0800

Date: 2/19/24

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