



ORANGE COUNTY
CLERK-RECORDER
CEQA FILING COVER SHEET

202585000390

FILED

April 30, 2025

HUGH NGUYEN
CLERK - RECORDER

By H. Nguyen
Deputy clerk

30-04/30/2025-0305

THIS SPACE FOR CLERK'S USE ONLY

Complete and attach this form to each CEQA Notice filed with the County Clerk-Recorder

TYPE OR PRINT CLEARLY

Project Title

CITY VENTURES RESIDENTIAL DEVELOPMENT

Check Document being Filed:

- Environmental Impact Report (EIR)
- Mitigated Negative Declaration (MND) or Negative Declaration (ND)
- Notice of Exemption (NOE)
- Other (Please fill in type):

**FILED IN THE OFFICE OF THE ORANGE
COUNTY CLERK-RECORDER ON 04/30/2025**
 Posted 04/30/2025 Removed _____
 Returned to agency on _____
 DEPUTY 428

Filing fees are due at the time a Notice of Determination/Exemption is filed with our office. For more information on filing fees and No Effect Determinations, please refer to California Code of Regulations, Title 14, section 753.5.

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Jennifer L. Hall

CITY OF SANTA ANA

Planning and Building Agency
20 Civic Center Plaza • P.O. BOX 1988
Santa Ana, California 92702
www.santa-ana.org

NOTICE OF EXEMPTION

From the Requirements of the California Environmental Quality Act (CEQA)

To: COUNTY CLERK
County of Orange
P.O. Box 238
Santa Ana, CA 92702

From: City of Santa Ana
Planning & Building Agency
20 Civic Center Plaza M-20
Santa Ana, CA 92702

Project Title: City Ventures Residential Development
Project Number(s): DP-2024-12-NEW TM-2025-2-VTTM DBA-2025-2-WDV
Project Location: 125 S Harbor Blvd
City: Santa Ana **County:** Orange **ER Number:** ER-2024-80
Project Description: The applicant proposes to construct 36 for-sale townhouse units in four buildings with 82 parking spaces. The three-story development proposes four (4) affordable units at the moderate-income level.

Applicant Name: Kim Prijatel
Applicant Address: 3121 Michelson Dr Suite 150,
Irvine, CA 92612

Name of Public Agency Approving Project: Planning Commission
Name of Person or Agency Carrying Out Project: Tran, Nancy

Exempt Status:
 Ministerial (Sec. 15268)
 Declared Emergency (Sec. 15269 (a))
 Emergency Project (Sec. 15269 (b through e))
 General Rule (Sec. 15061(b)(3)/(5))
 Statutory Exemption:
 Categorical Exemption: 15192 and 15195

Reason(s) Why Project is Exempt From CEQA:

The project meets the threshold requirements of §15192 (a-o) and §15195 criteria. It is consistent the GP, zoning, community plan within 5 years, served by utilities, meets size, transit stop requirements, <100 units, , 100k sf,> 20 du/acre, min 10% moderate income sale.

City Contact: Nancy Tran **Telephone:** (714) 667-2740

Signature: Nancy Tran, AICP **Title:** Senior Planner **Date:** 04/29/2025

FILED

APR 30 2025

HUGH NGUYEN, CLERK-RECORDER

BY: MG. DEPUTY



State of California - Department of Fish and Wildlife
2025 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

Print *Signature* Save

RECEIPT NUMBER:
 30-04/30/2025-0305
 STATE CLEARINGHOUSE NUMBER (if applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY CITY OF SANTA ANA	LEAD AGENCY EMAIL	DATE 04/30/2025
COUNTY/STATE AGENCY OF FILING ORANGE COUNTY	DOCUMENT NUMBER 202585000390	

PROJECT TITLE

 CITY VENTURES RESIDENTIAL DEVELOPMENT

PROJECT APPLICANT NAME KIM PRIJATEL	PROJECT APPLICANT EMAIL	PHONE NUMBER (714) 667-2740
PROJECT APPLICANT ADDRESS 3121 MICHELSON DR SUITE 150	CITY IRVINE	STATE CA
		ZIP CODE 92612

PROJECT APPLICANT (Check appropriate box)

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

CHECK APPLICABLE FEES:


- Environmental Impact Report (EIR) \$ 4,123.50 \$ _____
- Mitigated/Negative Declaration (MND)(ND) \$ 2,968.75 \$ _____
- Certified Regulatory Program (CRP) document - payment due directly to CDFW \$ 1,401.75 \$ _____

- Exempt from fee
 - Notice of Exemption (attach)
 - CDFW No Effect Determination (attach)
- Fee previously paid (attach previously issued cash receipt copy)

- Water Right Application or Petition Fee (State Water Resources Control Board only) \$ 850.00 \$ _____
- County documentary handling fee \$ 50.00 \$ _____ 50.00
- Other \$ _____

PAYMENT METHOD:

- Cash Credit Check Other
 TOTAL RECEIVED \$ _____ 50.00

SIGNATURE 	AGENCY OF FILING PRINTED NAME AND TITLE Melissa Gomez Deputy Clerk
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