Explanation of the Notice of Completion Form

Form A is **required** to be submitted with 15 copies of every draft Environmental Impact Report and Negative Declaration that is reviewed through the State Clearinghouse (see CEQA Guidelines Section 15085[d]).

LEAD AGENCY

Project Title: This is the project's common name. It is best to use project specific words to facilitate database searches.

Lead Agency: This is the name of the public agency that has legal responsibility for preparation and review of the environmental document.

Contact Person: Name of contact person from the Lead Agency. This should not be the consultant's name.

Mailing Address: This is the mailing address for the contact person at the Lead Agency. State comments will be mailed to this address.

Phone: Phone number of the contact person at Lead Agency. **City:** City of the Lead Agency address. This is not necessarily the city in which the project is located.

Zip: Zip code of the Lead Agency. Please indicate the new nine-digit zip code if applicable.

County: County of the Lead Agency address. This is not necessarily the county in which the project is located.

PROJECT LOCATION

County: County in which the project is located. Most state agencies assign projects for review according to the county of the project. The State Clearinghouse is not always able to determine the location of the project based on the address of the Lead Agency. An example of this problem is Los Angeles Department of Airports projects located at Ontario International Airport.

City/Nearest Community: City or town in which the project is located, or the community nearest the location of the project.

Total acres: The total area encompassed by the project site gives some indication of the scope of the project and its regional significance.

Cross Streets: Indicate the nearest major cross street or streets.

Assessor's Parcel Number: For locational purposes.

Section, Township, Range and Base: Please indicate base meridian. If you are not able to provide Assessor's Parcel Number, please indicate Section, Township, and Range.

Highways, Airports, Railroads, Schools, and Waterways (including streams or lakes): These identifiers are of consequence to many projects. By restricting the information to those features within a two-mile radius of the project site, unnecessary data collection can be avoided. Please indicate the name(s) of the waterways, airports, railroads, schools, and the route number(s) of the state highways.

DOCUMENT TYPE

This identifies the nature of the environmental document. Mark appropriate blanks with an "X."

LOCAL ACTION TYPE

This helps reviewers understand the type of local approvals that will be required for the project and the nature of the project and its environmental documentation. Mark appropriate blanks with "X."

DEVELOPMENT TYPE

This data category helps identify the scope of the project for distribution purposes. Additionally, the information serves to identify projects of a similar character to assist in the reuse of environmental documents. For some of the development types, the form asks for the number of acres, square footage, and number of permanent employees. Fill in the blanks.

PROJECT ISSUES DISCUSSED IN DOCUMENT

These are the topics on which the environmental document focuses attention. These are not necessarily the adverse impacts of the project, but the issues which are discussed in some depth. Check appropriate blanks.

PRESENT LAND USE AND ZONING

This enables the agencies to understand the extent of the changes proposed and again helps to identify projects with similar environmental issues for later reuse of information.

PROJECT DESCRIPTION

This response should provide a brief (1-2 paragraph) description of the proposed project, yet thorough enough for the reviewing agencies to understand the total project concept. The data categories can provide guidance and structure to the explanation given.

REVIEWING AGENCIES CHECKLIST

The second page of the form lists the agencies and departments to whom SCH may distribute a draft document. The Lead Agency can indicate for SCH's information any Responsible, Trustee, or concerned agencies they would like to review the document, or who have previously been involved in the project's review. Any agencies that received the document directly from the Lead Agency also should be marked accordingly.

LOCAL PUBLIC REVIEW PERIOD

This section is to be filled in when the Notice of Completion form is being filed and not being submitted with environmental documents.

CONSULTING FIRM

This information is to be filled in only if applicable.

APPLICANT

This identifies whether the applicant/project proponent is a private developer or the Lead Agency.

Form A

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Notice of Completion & Environmental Document Transmittal	
Mail to: State Clearinghouse, P. O. Box 3044, Sacramento, CA 95812-3044 (916) 445-0613	SCH #
For Hand Delivery/Street Address: 1400 Tenth Street, Sacramento, CA 95814	

Lead Agency:	Project Title: Lead Agency:			Contact Person:		
Mailing Address:			Dhana			
	Zip:		County:			
Project Location:						
County: City/Nearest		st Community:			Total Acres:	
Assessor's Parcel No.	Section: -		- Twp	Range	: Base:	
Within 2 Miles: State Hwy #:	Waterways	s:				
•	Railways:					
Document Type:						
☐ Early Cons ☐ ☐ Neg Dec ☐	Draft EIR Supplement to EIR (Note prior SC Subsequent EIR (Note prior SCH Other	CH # below) # below)	□ NOI □ EA □ Draft EIS □ FONSI	Other:	☐ Joint Document ☐ Final Document ☐ Other	
Local Action Type: ☐ General Plan Upda ☐ General Plan Ame ☐ General Plan Elem ☐ Community Plan	endment Master Plan nent Planned Unit Develop	☐ Rezone ☐ Prezon ment ☐ Use Pe ☐ Land □	e rmit	n, etc.)	☐ Annexation ☐ Redevelopment ☐ Coastal Permit ☐ Other	
☐ Educational	Acres Employees	☐ Trans ☐ Minin ☐ Powe ☐ Waste ☐ Hazar	ng: Minera r: Type_ e Treatment: Type_ rdous Waste: Type_ r:		_MGDMWMGD	
Project Issues Discussed in D	Document:					
☐ Aesthetic/Visual ☐ Agricultural Land ☐ Air Quality ☐ Archaelogical/Historical	 ☐ Flood Plain/Flooding ☐ Forest Land/Fire Hazard ☐ Geologic/Seismic ☐ Minerals 	d Plain/Flooding st Land/Fire Hazard logic/Seismic erals Sewer Capa Soil Erosion Se Solid Wast ulation/Housing Balance		ng 🗆	Vegetation Water Quality Water Supply/Groundwater Wetland/Riparian Growth Inducement Land Use Cumulative Effects	
☐ Biological Resources ☐ Coastal Zone ☐ Drainage/Absorption ☐ Economic/Jobs	☐ Population/Housing Balance	☐ Toxic/Hazar				
☐ Biological Resources☐ Coastal Zone☐ Drainage/Absorption	☐ Population/Housing Balance ☐ Public Services/Facilities				Other	

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".

Air Resources Board	Office of Emergency Services		
Boating & Waterways, Department of	Office of Historic Preservation		
California Highway Patrol	Parks & Recreation		
Caltrans District #	Pesticide Regulation, Department of		
Caltrans Division of Aeronautics	Public Utilities Commission		
Caltrans Planning	Reclamation Board		
Coachella Valley Mountains Conservancy	Regional WQCB #		
Coastal Commission	Resources Agency		
Colorado River Board Commission	S.F. Bay Conservation & Development Commission		
Conservation, Department of	San Gabriel & Lower Los Angeles Rivers & Mountains		
Corrections, Department of	Conservancy		
Delta Protection Commission	San Joaquin River Conservancy		
Education, Department of	Santa Monica Mountains Conservancy		
Office of Public School Construction	State Lands Commission		
Energy Commission	SWRCB: Clean Water Grants		
Fish & Game Region #	SWRCB: Water Quality		
Food & Agriculture, Department of	SWRCB: Water Rights		
Forestry & Fire Protection	Tahoe Regional Planning Agency		
General Services, Department of	Toxic Substances Control, Department of		
Health Services, Department of	Water Resources, Department of		
Housing & Community Development			
Integrated Waste Management Board	Other		
Native American Heritage Commission	Other		
Local Public Review Period (to be filled in by lead			
— — — — — — — — — — — — — — — — — — —	Applicant:		
Consulting Firm:	Address:		
Address:	City/State/Zip:		
City/State/Zip:	DI ()		
	<u> </u>		
Contact:			
Phone: ()			
Cianatana a CI a al Assuran D	D /		
Signature of Lead Agency Representative	Date		