

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: _____

Lead Agency: _____ Contact Person: _____

Mailing Address: _____ Phone: _____

City: _____ Zip: _____ County: _____

Project Location: County: _____ City/Nearest Community: _____

Cross Streets: _____ Zip Code: _____

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

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

Within 2 Miles: State Hwy #: _____ Waterways: _____

Airports: _____ Railways: _____ Schools: _____

Document Type:

CEQA: ☐ NOP ☐ Draft EIR NEPA: ☐ NOI Other: ☐ 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 _____
☐ Commercial: Sq.ft. _____ Acres _____ Employees _____
☐ Industrial: Sq.ft. _____ Acres _____ Employees _____
☐ Educational: _____
☐ Recreational: _____
☐ Water Facilities: Type _____ MGD _____
☐ Transportation: Type _____
☐ Mining: Mineral _____
☐ Power: Type _____ MW _____
☐ Waste Treatment: Type _____ MGD _____
☐ Hazardous Waste: Type _____
☐ Other: _____

Project Issues Discussed in Document:

☐ Aesthetic/Visual ☐ Hazards/Hazardous Mat. ☐ Transportation/Traffic ☐ Floodplain/Flooding
☐ Agricultural Land ☐ Hydrology/Water Quality ☐ Tribal Cultural Resources ☐ Economic/Jobs/Fiscal
☐ Air Quality ☐ Land Use/Planning ☐ Utilities/Service Systems ☐ Historic/Archaeological
☐ Biological Resources ☐ Mineral Resources ☐ Wildfire ☐ Endangered Species
☐ Cultural Resources ☐ Noise ☐ Population/Housing Balance ☐ Toxic/Hazardous
☐ Energy ☐ Population/Housing ☐ Coastal Zone ☐ Growth Inducement
☐ Geology/Soils/Seismic ☐ Public Services/Facilities ☐ Wild/Scenic Rivers ☐ Cumulative Effects
☐ Greenhouse Gas ☐ Recreation ☐ Forest Lands/Fire Hazard ☐ Other: _____

Present Land Use/Zoning/General Plan Designation:

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

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".

_____ Air Resources Board	_____ Office of Historic Preservation
_____ Boating & Waterways, Department of	_____ Office of Public School Construction
_____ California Emergency Management Agency	_____ Parks & Recreation, Department of
_____ California Highway Patrol	_____ Pesticide Regulation, Department of
_____ Caltrans District # _____	_____ Public Utilities Commission
_____ Caltrans Division of Aeronautics	_____ Regional WQCB # _____
_____ Caltrans Planning	_____ Resources Agency
_____ Central Valley Flood Protection Board	_____ Resources Recycling and Recovery, Department of
_____ Coachella Valley Mtns. Conservancy	_____ S.F. Bay Conservation & Development Comm.
_____ Coastal Commission	_____ San Gabriel & Lower L.A. Rivers & Mtns. Conservancy
_____ Colorado River Board	_____ San Joaquin River Conservancy
_____ Conservation, Department of	_____ Santa Monica Mtns. Conservancy
_____ Corrections, Department of	_____ State Lands Commission
_____ Delta Protection Commission	_____ SWRCB: Clean Water Grants
_____ Education, Department of	_____ SWRCB: Water Quality
_____ Energy Commission	_____ SWRCB: Water Rights
_____ Fish & Game Region # _____	_____ Tahoe Regional Planning Agency
_____ Food & Agriculture, Department of	_____ Toxic Substances Control, Department of
_____ Forestry and Fire Protection, Department of	_____ Water Resources, Department of
_____ General Services, Department of	
_____ Health Services, Department of	_____ Other: _____
_____ Housing & Community Development	_____ Other: _____
_____ 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: _____ Date: _____

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