Notice of Determination

Appendix D

To:			From:				
	Office of Planning and Resea		Public Agency: City of Address: 200 Civic Center	Way, El Cajon, CA 92020			
	U.S. Mail:	Street Address:	, taa1000.				
	P.O. Box 3044	1400 Tenth St., Rm 113	Contact: Lorena Cordova				
	Sacramento, CA 95812-3044	Sacramento, CA 95814	Phone: (619) 441-1539				
	County Clerk County of: San Diego Address: 1600 Pacific Highway, Suite 260, San Diego, CA 92101		Lead Agency (if different from above):				
	Addioso		Address:				
			Contact:				
			Phone:				
Re	BJECT: Filing of Notice of I sources Code.						
State Clearinghouse Number (if submitted to State Clearinghouse): SCH#2017041047							
Project Title: San Ysidro Health Center							
Project Applicant: Daniel Millman, TH San Diego 875 ECB LP, 3000 Olympic Boulevard, Building 1, Suite 2120, Santa Monica, CA 90404							
Project Location (include county): 823 through 875 El Cajon Boulevard, El Cajon, CA (San Diego County)							
Project Description:							
The project consists of a two-story medical office building							
of 40 479 square feet; 29, 415 Square feet of landscaping;							
The project consists of a two-story medical office building of 40,429 square feet; 29,415 Square feet of landscaping; let vehicle parking spaces; 14 bicycle parking spaces;							
and two outdoor areas.							
This is to advise that the City of El Cajon has approved the above (■ Lead Agency or □ Responsible Agency)							
described project on July 3, 2019 and has made the following determinations regarding the above (date)							
des	cribed project.	,					
4 7	The project [will will pot	l have a significant offest	on the anvironment				
1. The project [will will not] have a significant effect on the environment.							
2. A Nogative Declaration was prepared for this project pursuant to the provisions of CEQA.							
☐ A Negative Declaration was prepared for this project pursuant to the provisions of CEQA. 3. Mitigation measures [■ were ☐ were not] made a condition of the approval of the project.							
	4. A mitigation reporting or monitoring plan [was was not] adopted for this project.						
	. A statement of Overriding Considerations [was was not] adopted for this project.						
	6. Findings [were was not] were was not] made pursuant to the provisions of CEQA.						
0, 1	mango [more	ij maao paroaam to tro p					
This is to certify that the final EIR with comments and responses and record of project approval, or the							
negative Declaration, is available to the General Public at:				Governor's Office of Planning & Resear	rah		
http	os://www.cityofelcajon.us/home/showdocument?id	I=18725			VI		
Sigi	nature (Public Agency):	JC-	Title: Associate Plani	ner JUL 0 8 2019			
Dat	e: July 5, 2019	Date Recei	ved for filing at OPR:	STATE CLEARINGHOUS	E		



State of California - Department of Fish and Wildlife

2018 ENVIRONMENTAL FILING FEE CASH RECEIPT

DFW 753.5a (Rev. 12/15/15) Previously DFG 753.5a

	RECEIPT NUMB					
	37-2018- 048					
*		GHOUSE NUMBER (If applicable)				
SEE INSTRUCTIONS ON REVERSE, TYPE OR PRINT CLEARLY.	2017041047					
LEAD AGENCY LEAD AGE	CY EMAIL	DATE				
CITY OF EL CAJON	·	05/29/2018				
COUNTY/STATE AGENCY OF FILING		DOCUMENT NUMBER				
San Diego County		*20180106*				
PROJECT TITLE						
EL CAJON TRANSIT DISTRICT SPECIFIC PLAN						
•	APPLICANT EMAIL	PHONE NUMBER				
CITY OF EL CAJON COMMUNITY DEVELOPMENT DEPT		619-441-1742				
PROJECT APPLICANT ADDRESS CITY	STATE	ZIP CODE				
200 CIVIC CENTER WAY EL CAJ	N CA	92020				
PROJECT APPLICANT (Check appropriate box)						
X Local Public Agency School District Other Sp	cial District State Age	ency Private Entity				
☑ Environmental Impact Report (EIR) 18010 ☐ Mitigated/Negative Declaration (MND)(ND) ☐ Certified Regulatory Program document (CRP) 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 Both County documentary handling fee ☐ Other PAYMENT METHOD: ☐ Cash ☐ Credit ☑ Check ☐ Other 643989	\$2,280.75 \$ _ \$1,077.00 \$ _	\$3,168.00 \$50.00 \$3,218.00				
SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE						
~		2010				
X Mons San Diego Co	inty RENAE MOF	RRIS , Deputy				
	JUL	of Planning & Research 0 8 2019 EARINGHOUSE				



ORIGINAL - PROJECT APPLICANT

COPY - CDFW/ASB

COPY - LEAD AGENCY

COPY - COUNTY CLERK

DFW 753.5a (Rev. 20151215)



San Diego County

Transaction #:
Receipt #:

3155453 2018236910



Ernest J. Dronenburg, Jr.
Assessor/Recorder/County Clerk
1600 Pacific Highway Suite 260
P. O. Box 121750, San Diego, CA 92112-1750
Tel. (619) 237-0502 Fax (619) 557-4155
www.sdarcc.com

Grand Total - All Documents:

Cashier Date:

05/29/2018

Cashier Location: SI

Print Date:

05/29/2018 4:56 pm

Payment Summary

 Total Fees:
 \$3,218.00

 Total Payments:
 \$3,218.00

 Balance:
 \$0.00

Payment

CHECK PAYMENT

\$3,218.00

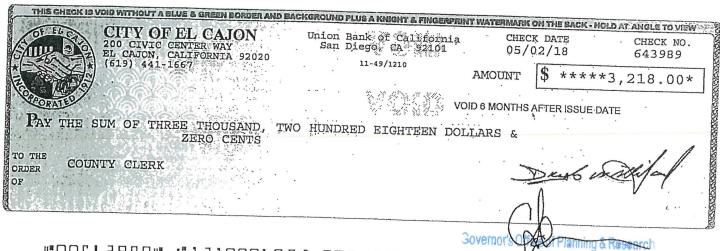
Total Payments

Miscellaneous Item

FISH & WILDLIFE FEES

Fees: Fish & Wildlife County Administrative Fee \$50.00
Fees: Fish & Wildlife Environmental Impact Report \$3,168.00

Total Fees Due:



JUL 08 2019

\$3,218.00