



Referral Early Consultation

Date: May 15, 2019
To: Distribution List (See Attachment A)
From: Christine Smith, Assistant Planner
Planning and Community Development
Subject: USE PERMIT APPLICATION NO. PLN2019-0028 – KEYES COMMUNITY SERVICES DISTRICT
Respond By: May 30, 2019

******PLEASE REVIEW REFERRAL PROCESS POLICY******

The Stanislaus County Department of Planning and Community Development is soliciting comments from responsible agencies under the Early Consultation process to determine: a) whether or not the project is subject to CEQA and b) if specific conditions should be placed upon project approval.

Therefore, please contact this office by the response date if you have any comments pertaining to the proposal. Comments made identifying potential impacts should be as specific as possible and should be based on supporting data (e.g., traffic counts, expected pollutant levels, etc.). Your comments should emphasize potential impacts in areas which your agency has expertise and/or jurisdictional responsibilities.

These comments will assist our Department in preparing a staff report to present to the Planning Commission. Those reports will contain our recommendations for approval or denial. They will also contain recommended conditions to be required should the project be approved. Therefore, please list any conditions that you wish to have included for presentation to the Commission as well as any other comments you may have. Please return all comments and/or conditions as soon as possible or no later than the response date referenced above.

Thank you for your cooperation. Please call (209) 525-6330 if you have any questions.

Applicant: Keyes Community Services District
Project Location: South of the Foote Road and the Union Pacific Railroad intersection, north of East Keyes Road, in the Keyes area.
APN: 045-049-018
Williamson Act Contract: N/A
General Plan: Planned Development (P-D)
Current Zoning: A-2-10 (General Agriculture)

Project Description: Request to construct a new wastewater lift station and supporting facilities on a 4,356 square foot vacant lot for the Keyes Community Services District. The proposed lift station will replace the existing lift station located east and adjacent to the project site; with destruction of the existing lift station occurring upon completion and activation of the new facility. Supporting facilities include construction of the lift stations control and support structure, pipes to divert existing flow, a standby diesel generator, A/C site paving, and a 25 square foot storage shed for operator use.

Full document with attachments available for viewing at:
<http://www.stancounty.com/planning/pl/act-projects.shtm>



USE PERMIT APPLICATION NO. PLN2019-0028 – KEYES COMMUNITY SERVICES DISTRICT.
Attachment A

Distribution List

	CA DEPT OF CONSERVATION Land Resources / Mine Reclamation		STAN CO ALUC
X	CA DEPT OF FISH & WILDLIFE		STAN CO ANIMAL SERVICES
	CA DEPT OF FORESTRY (CAL FIRE)	X	STAN CO BUILDING PERMITS DIVISION
X	CA DEPT OF TRANSPORTATION DIST 10	X	STAN CO CEO
	CA OPR STATE CLEARINGHOUSE		STAN CO CSA
X	CA RWQCB CENTRAL VALLEY REGION	X	STAN CO DER
X	CA STATE LANDS COMMISSION	X	STAN CO ERC
	CEMETERY DISTRICT	X	STAN CO FARM BUREAU
X	CENTRAL VALLEY FLOOD PROTECTION	X	STAN CO HAZARDOUS MATERIALS
	CITY OF:		STAN CO PARKS & RECREATION
X	COMMUNITY SERVICES DIST: KEYES	X	STAN CO PUBLIC WORKS
X	COOPERATIVE EXTENSION		STAN CO RISK MANAGEMENT
	COUNTY OF:	X	STAN CO SHERIFF
X	FIRE PROTECTION DIST: KEYES	X	STAN CO SUPERVISOR DIST 2: CHIESA
	HOSPITAL DIST:	X	STAN COUNTY COUNSEL
X	IRRIGATION DIST: TURLOCK		StanCOG
X	MOSQUITO DIST: TURLOCK	X	STANISLAUS FIRE PREVENTION BUREAU
X	MOUNTIAN VALLEY EMERGENCY MEDICAL SERVICES	X	STANISLAUS LAFCO
X	MUNICIPAL ADVISORY COUNCIL: KEYES		STATE OF CA SWRCB DIVISION OF DRINKING WATER DIST. 10
X	PACIFIC GAS & ELECTRIC		SURROUNDING LAND OWNERS
	POSTMASTER:	X	TELEPHONE COMPANY: AT&T
X	RAILROAD: UNION PACIFIC		TRIBAL CONTACTS (CA Government Code §65352.3)
X	SAN JOAQUIN VALLEY APCD		US ARMY CORPS OF ENGINEERS
X	SCHOOL DIST 1: KEYES UNION		US FISH & WILDLIFE
X	SCHOOL DIST 2: TURLOCK UNIFIED		US MILITARY (SB 1462) (7 agencies)
	WORKFORCE DEVELOPMENT		USDA NRCS
X	STAN CO AG COMMISSIONER		WATER DIST:
	TUOLUMNE RIVER TRUST		

**STANISLAUS COUNTY
CEQA REFERRAL RESPONSE FORM**

TO: Stanislaus County Planning & Community Development
1010 10th Street, Suite 3400
Modesto, CA 95354

FROM: _____

SUBJECT: USE PERMIT APPLICATION NO. PLN2019-0028 – KEYES COMMUNITY SERVICES DISTRICT

Based on this agency's particular field(s) of expertise, it is our position the above described project:

- Will not have a significant effect on the environment.
- May have a significant effect on the environment.
- No Comments.

Listed below are specific impacts which support our determination (e.g., traffic general, carrying capacity, soil types, air quality, etc.) – (attach additional sheet if necessary)

- 1.
- 2.
- 3.
- 4.

Listed below are possible mitigation measures for the above-listed impacts: *PLEASE BE SURE TO INCLUDE WHEN THE MITIGATION OR CONDITION NEEDS TO BE IMPLEMENTED (PRIOR TO RECORDING A MAP, PRIOR TO ISSUANCE OF A BUILDING PERMIT, ETC.):*

- 1.
- 2.
- 3.
- 4.

In addition, our agency has the following comments (attach additional sheets if necessary).

Response prepared by:

Name Title Date

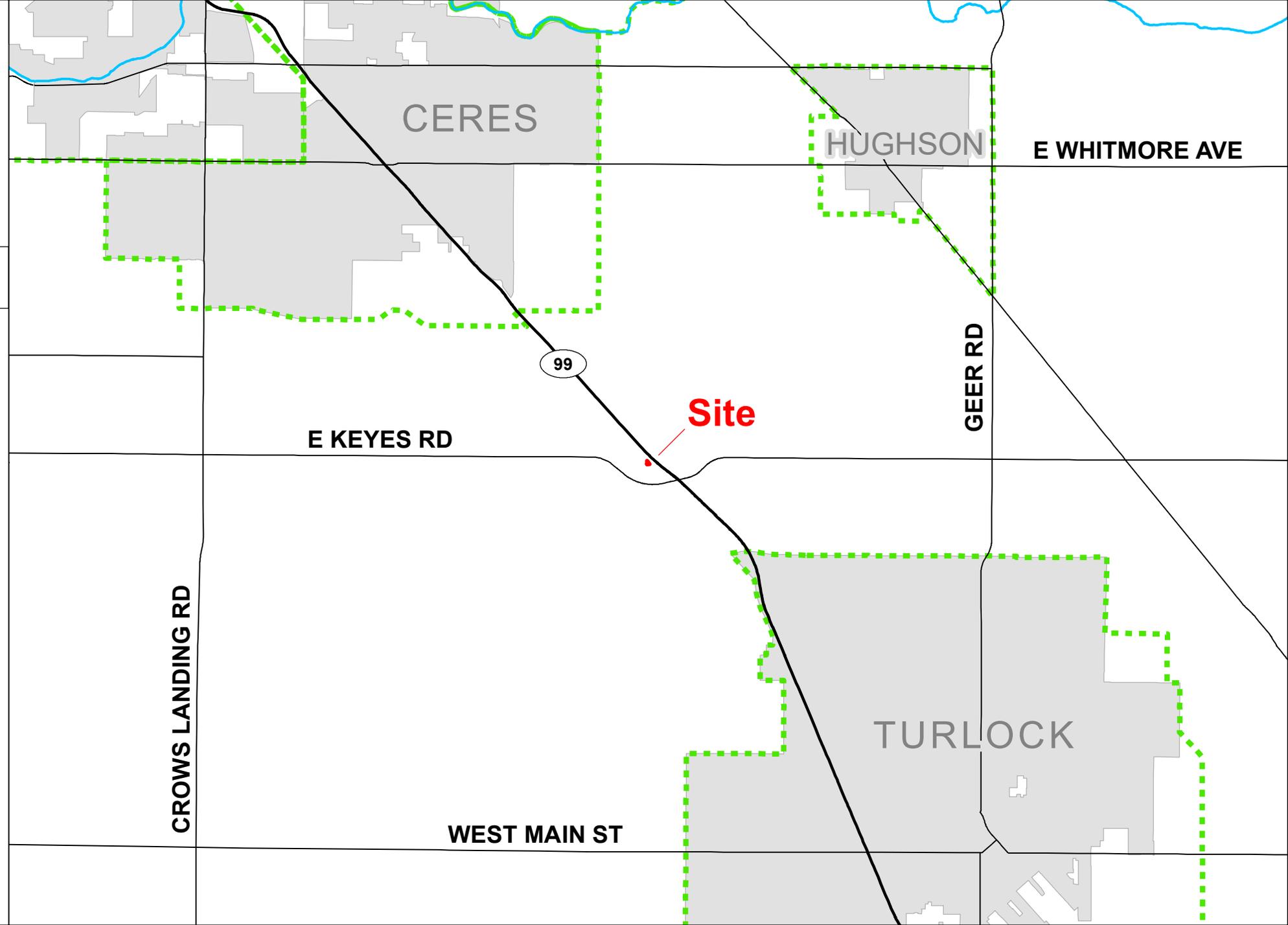
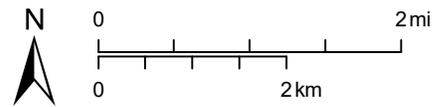
KEYES COMMUNITY SERVICES DISTRICT

UP PLN2019-0028

AREA MAP

LEGEND

-  Project Site
-  Sphere of Influence
-  City
-  Road
-  River



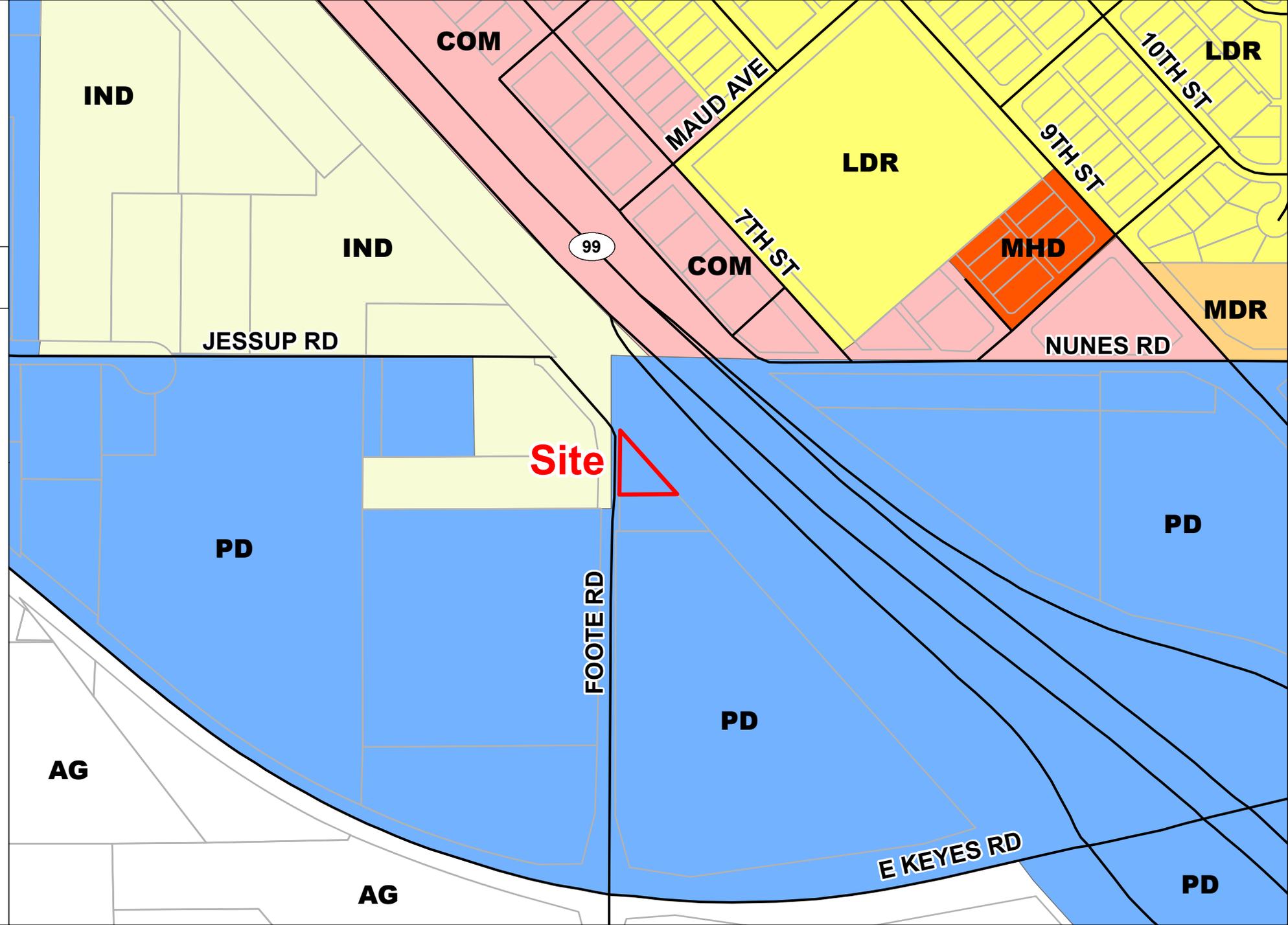
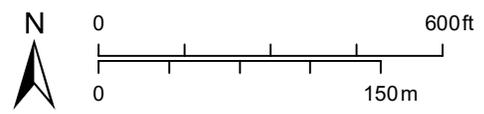
KEYES COMMUNITY SERVICES DISTRICT

UP PLN2019-0028

GENERAL PLAN MAP

LEGEND

-  Project Site
-  Parcel
-  Road
- General Plan**
-  Agriculture
-  Commercial
-  Industrial
-  Residential - Low Density
-  Residential - Low Density
-  Residential - Med/High Den.
-  Planned Development



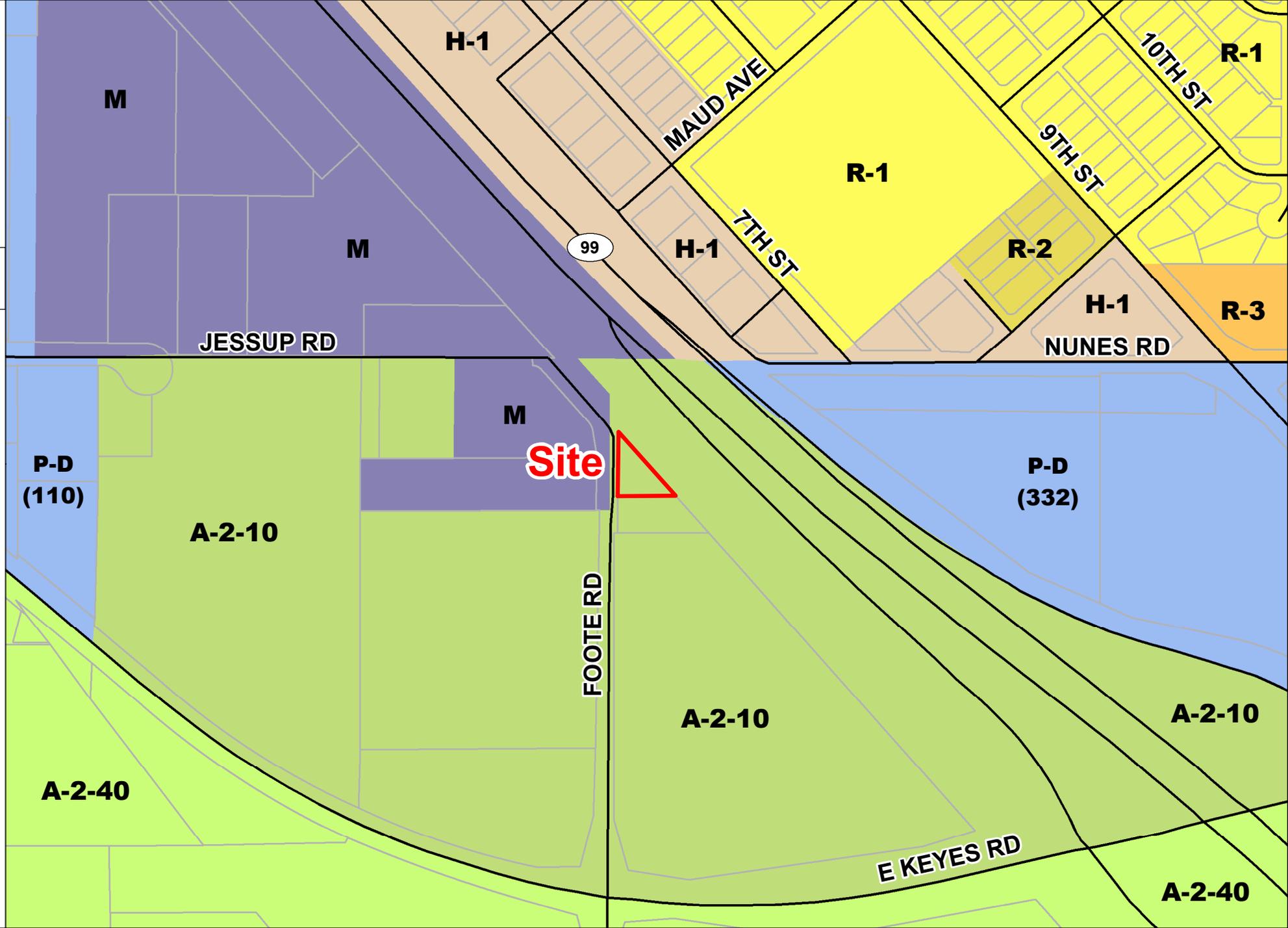
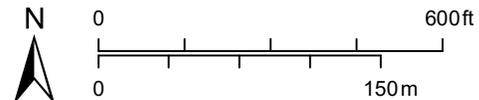
KEYES COMMUNITY SERVICES DISTRICT

UP PLN2019-0028

ZONING MAP

LEGEND

-  Project Site
-  Parcel
-  Road
- Zoning Designation**
 -  General Agriculture 10 Acre
 -  General Agriculture 40 Acre
 -  Highway Frontage
 -  Industrial
 -  Planned Development
 -  Single Family Residential
 -  Medium Density Residential
 -  Multiple Family



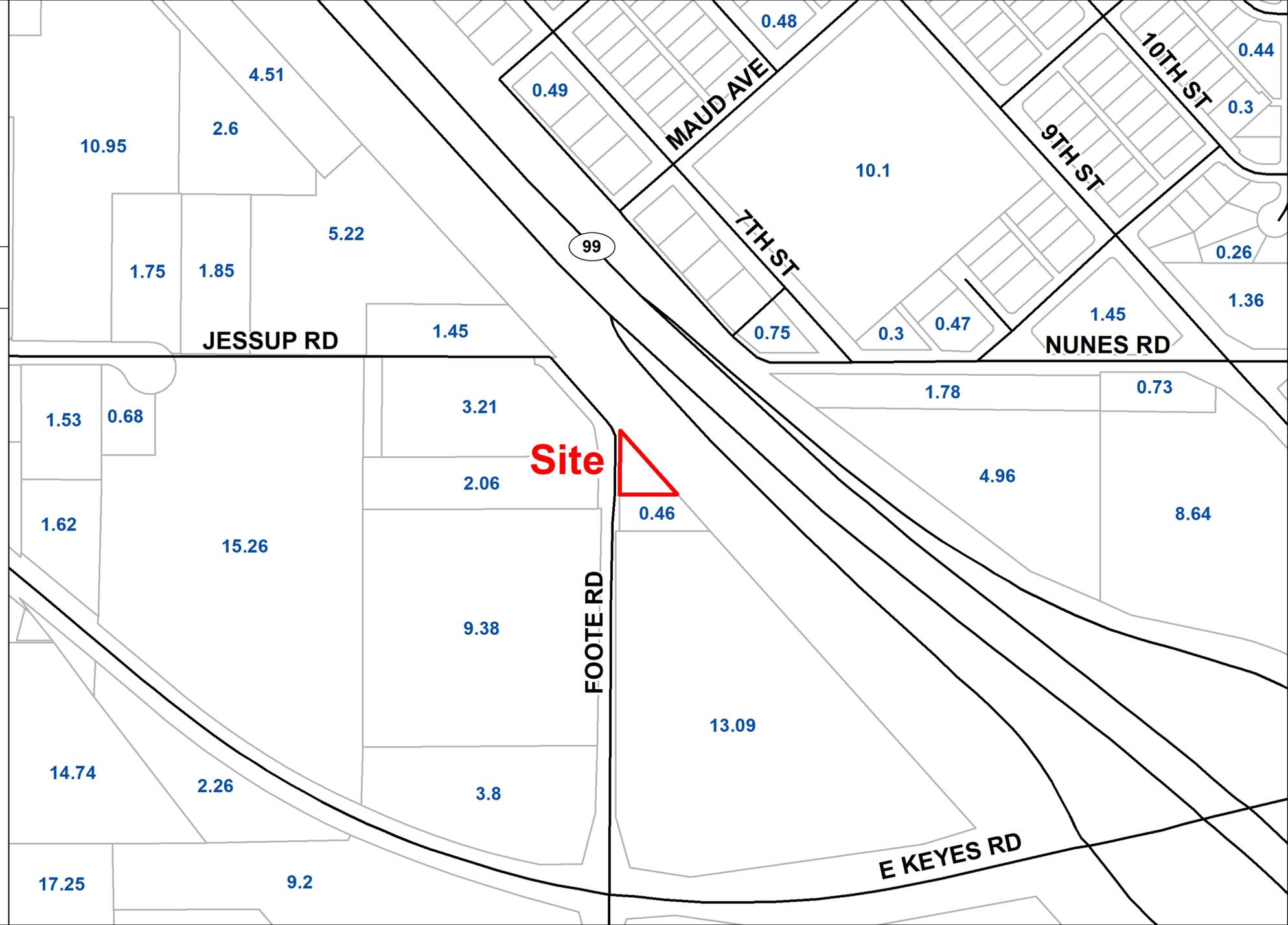
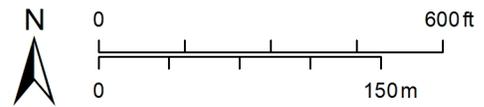
KEYES COMMUNITY SERVICES DISTRICT

UP PLN2019-0028

ACREAGE MAP

LEGEND

-  Project Site
-  Parcel/Acres
-  Road



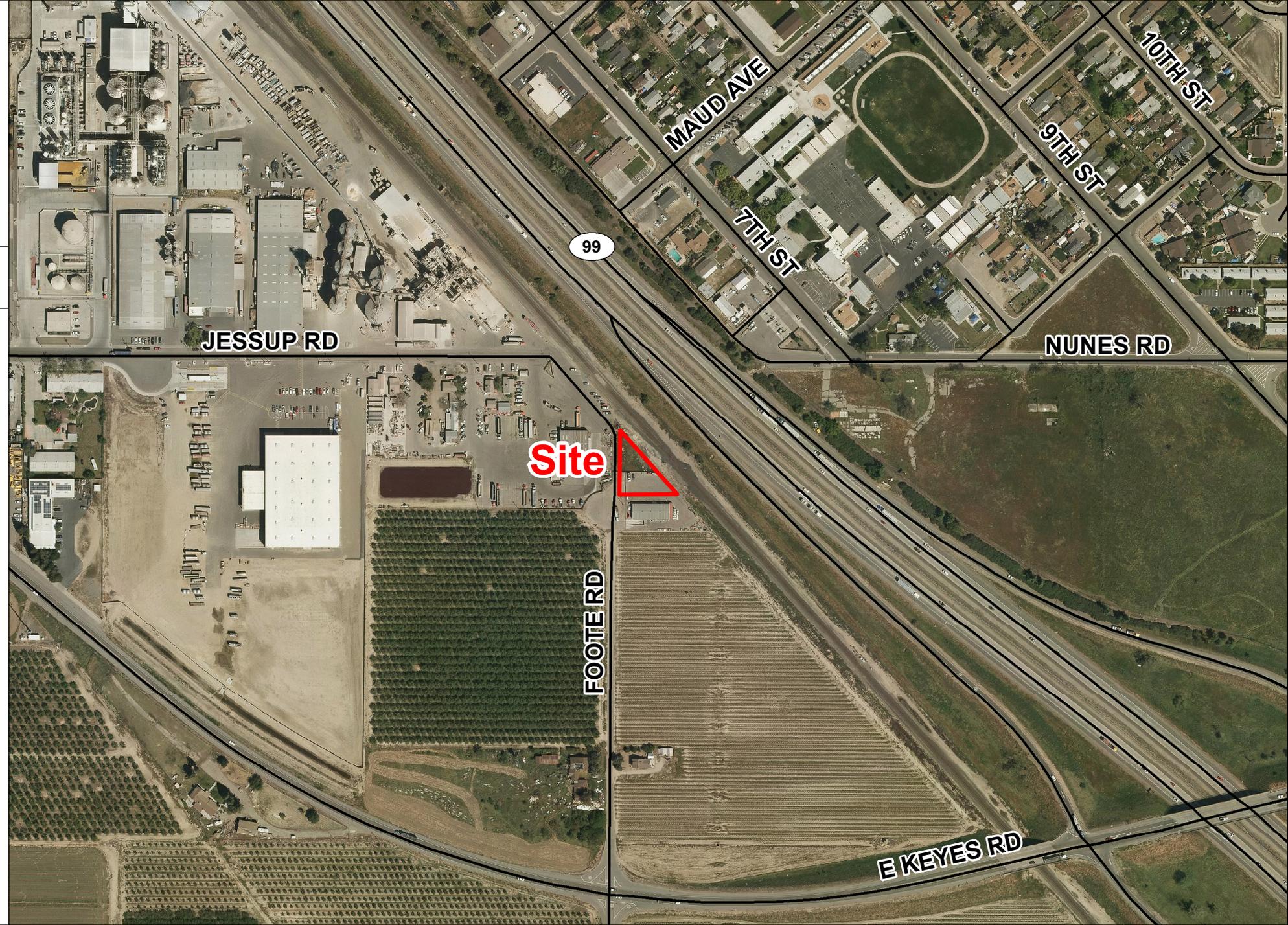
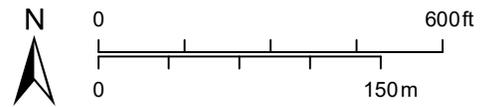
KEYES COMMUNITY SERVICES DISTRICT

UP PLN2019-0028

2017 AERIAL AREA MAP

LEGEND

-  Project Site
-  Road



KEYES COMMUNITY SERVICES DISTRICT

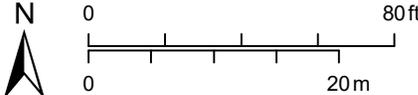
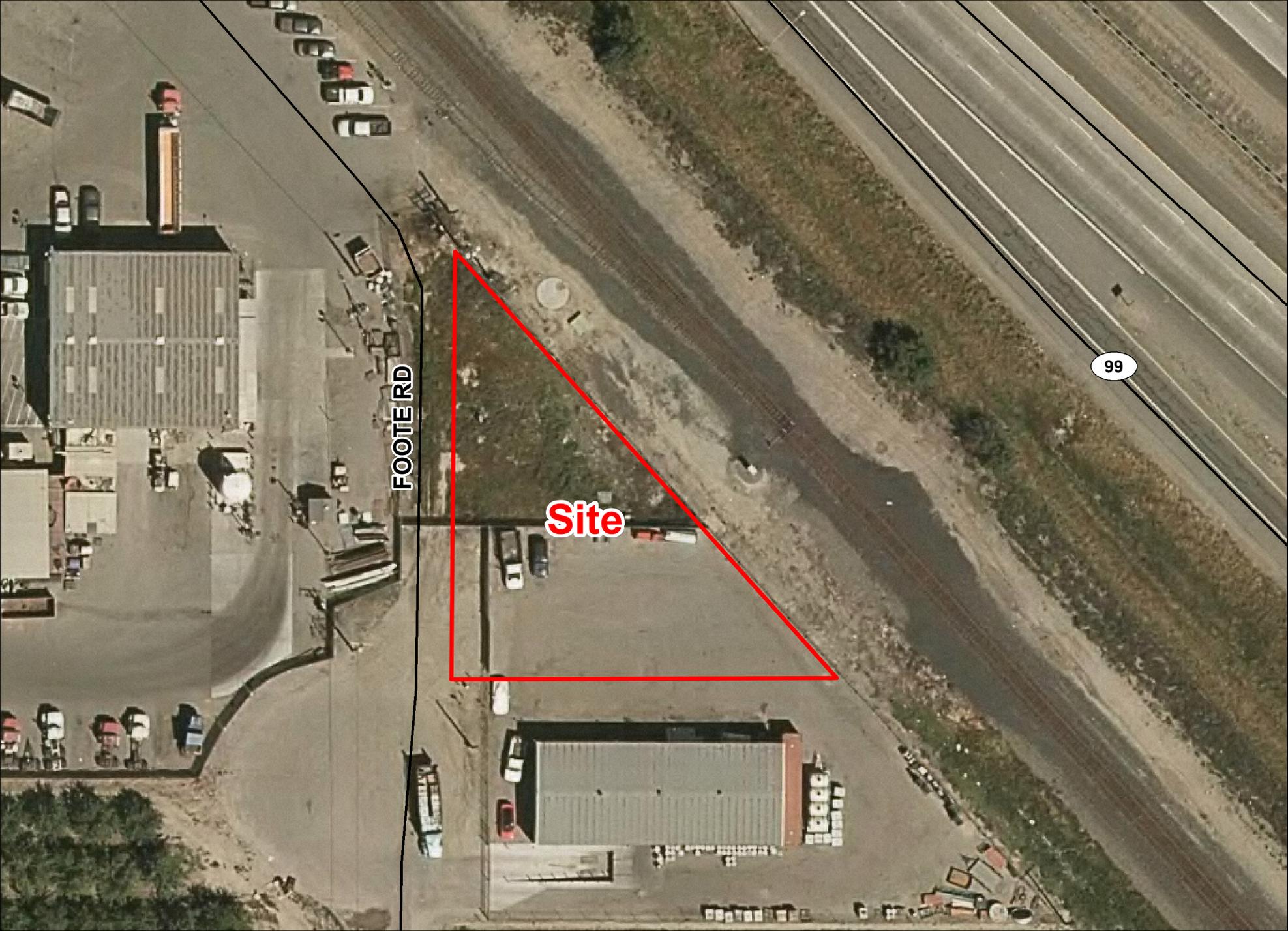
UP PLN2019-0028

2017 AERIAL SITE MAP

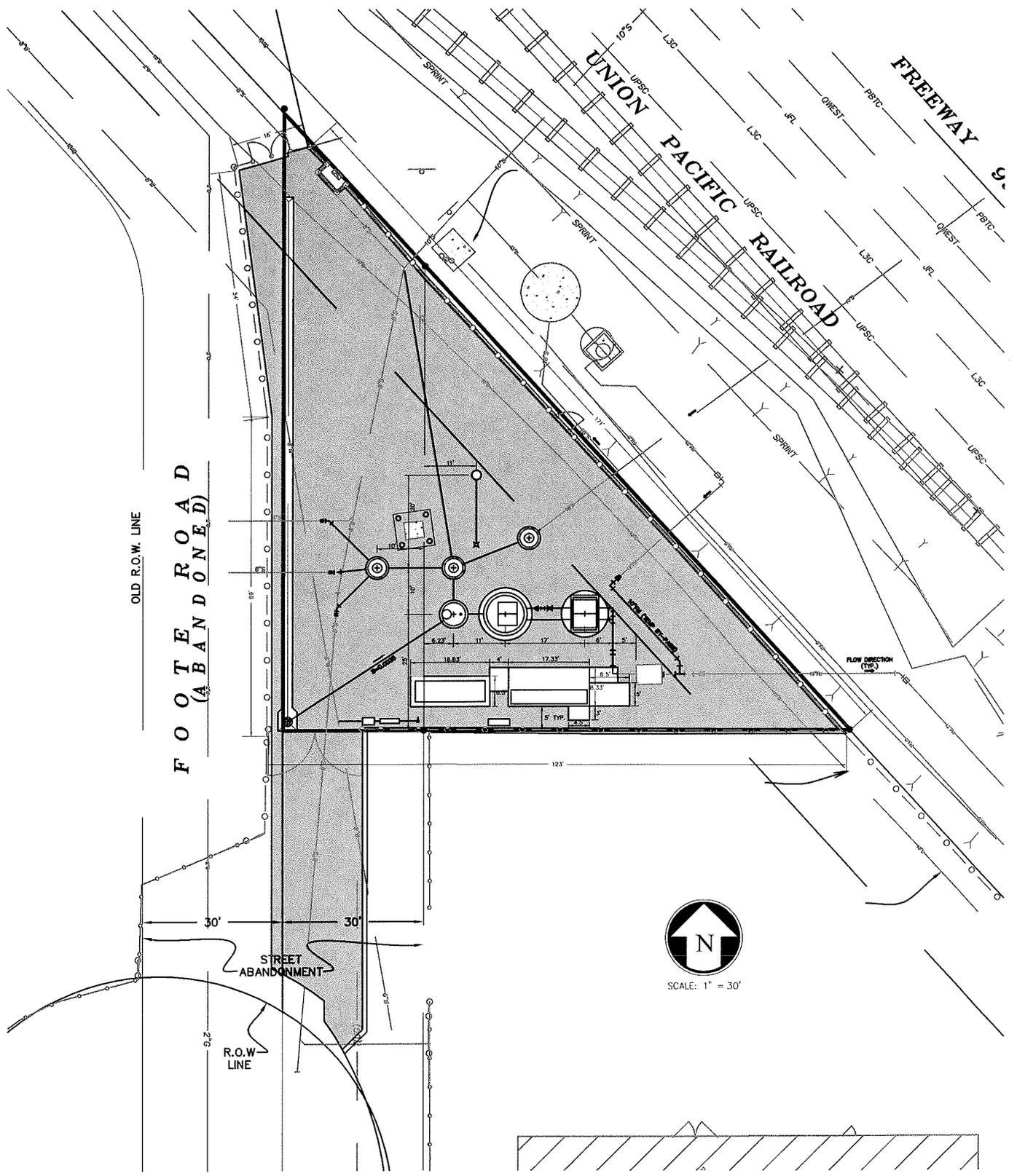
LEGEND

 Project Site

 Road



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PROJECT NO.: **X130306**
 DRAWN BY: **SP**
 QA/QC BY: **LF**
 SCALE: **AS SHOWN**
 SHEET NO.:
1 of 1

Keyes Community Services District
 5601 7th Street
 Keyes, CA 95328
 (209) 668-8341

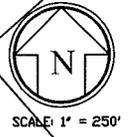
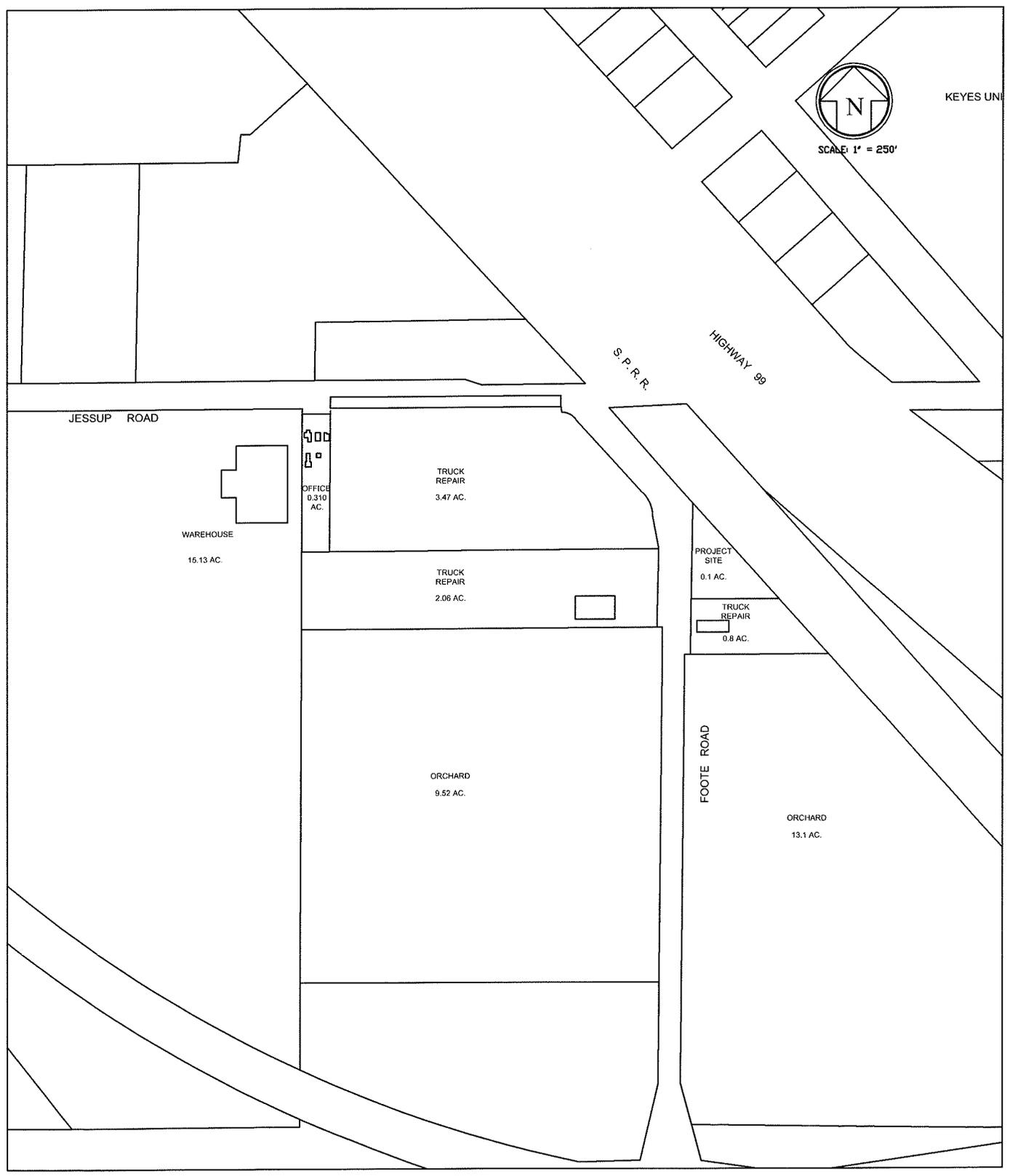
KEYES FOOTE RD. LIFT STATION
Plot Plan

2816 PARK AVENUE
 MERCED, CA 95348

TEL: (209) 723-2066
 WWW.QKINC.COM

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KEYES UN

PROJECT NO: X130306
DRAWN BY: SP
QA/QC BY: LF
SCALE: AS SHOWN
SHEET NO: 1 OF 1

Keyes Community Services District
 5601 7th Street
 Keyes, CA 95328
 (209) 668-8341

KEYES FOOTE RD. LIFT STATION
Vicinity Map

2816 PARK AVENUE
 MERCED, CA 95348

TEL: (209) 723-2066
 WWW.QKINC.COM

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DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT

1010 10TH Street, Suite 3400, Modesto, CA 95354

Planning Phone: (209) 525-6330 Fax: (209) 525-5911

Building Phone: (209) 525-6557 Fax: (209) 525-7759

Form Available Online: <http://www.stancounty.com/planning/applications.shtm>

APPLICATION QUESTIONNAIRE

<p>Please Check all applicable boxes APPLICATION FOR: <i>Staff is available to assist you with determining which applications are necessary</i></p> <table border="0"> <tr> <td><input type="checkbox"/> General Plan Amendment</td> <td><input type="checkbox"/> Subdivision Map</td> </tr> <tr> <td><input type="checkbox"/> Rezone</td> <td><input type="checkbox"/> Parcel Map</td> </tr> <tr> <td><input checked="" type="checkbox"/> Use Permit</td> <td><input type="checkbox"/> Exception</td> </tr> <tr> <td><input type="checkbox"/> Variance</td> <td><input type="checkbox"/> Williamson Act Cancellation</td> </tr> <tr> <td><input type="checkbox"/> Historic Site Permit</td> <td><input type="checkbox"/> Other _____</td> </tr> </table>	<input type="checkbox"/> General Plan Amendment	<input type="checkbox"/> Subdivision Map	<input type="checkbox"/> Rezone	<input type="checkbox"/> Parcel Map	<input checked="" type="checkbox"/> Use Permit	<input type="checkbox"/> Exception	<input type="checkbox"/> Variance	<input type="checkbox"/> Williamson Act Cancellation	<input type="checkbox"/> Historic Site Permit	<input type="checkbox"/> Other _____	<p>PLANNING STAFF USE ONLY: Application No(s): <u>PLAN 2019 0028</u> Date: <u>4/05/19</u> S <u>4</u> T <u>10</u> R <u>31</u> GP Designation: <u>Planned Devel.</u> Zoning: <u>A-2-10</u> Fee: <u>24489.00</u> Receipt No. <u>549084</u> Received By: <u>Christine Smith</u> Notes: _____</p>
<input type="checkbox"/> General Plan Amendment	<input type="checkbox"/> Subdivision Map										
<input type="checkbox"/> Rezone	<input type="checkbox"/> Parcel Map										
<input checked="" type="checkbox"/> Use Permit	<input type="checkbox"/> Exception										
<input type="checkbox"/> Variance	<input type="checkbox"/> Williamson Act Cancellation										
<input type="checkbox"/> Historic Site Permit	<input type="checkbox"/> Other _____										

In order for your application to be considered COMPLETE, please answer all applicable questions on the following pages, and provide all applicable information listed on the checklist on pages i – v. Under State law, upon receipt of this application, staff has 30 days to determine if the application is complete. We typically do not take the full 30 days. It may be necessary for you to provide additional information and/or meet with staff to discuss the application. Pre-application meetings are not required, but are highly recommended. An incomplete application will be placed on hold until all the necessary information is provided to the satisfaction of the requesting agency. An application will not be accepted without all the information identified on the checklist.

Please contact staff at (209) 525-6330 to discuss any questions you may have. Staff will attempt to help you in any way we can.

PROJECT INFORMATION

PROJECT DESCRIPTION: (Describe the project in detail, including physical features of the site, proposed improvements, proposed uses or business, operating hours, number of employees, anticipated customers, etc. – Attach additional sheets as necessary)

***Please note:** A detailed project description is essential to the reviewing process of this request. In order to approve a project, the Planning Commission or the Board of Supervisors must decide whether there is enough information available to be able to make very specific statements about the project. These statements are called "Findings". It is your responsibility as an applicant to provide enough information about the proposed project, so that staff can recommend that the Commission or the Board make the required Findings. Specific project Findings are shown on pages 17 – 19 and can be used as a guide for preparing your project description. (If you are applying for a Variance or Exception, please contact staff to discuss special requirements).

Project encompasses the replacement of a sewer lift station for the Keyes Community Services District.

The existing lift station is to be disconnected and demolished, and a new lift station constructed.

PROJECT SITE INFORMATION

Complete and accurate information saves time and is vital to project review and assessment. Please complete each section entirely. If a question is not applicable to your project, please indicated this to show that each question has been carefully considered. Contact the Planning & Community Development Department Staff, 1010 10th Street – 3rd Floor, (209) 525-6330, if you have any questions. Pre-application meetings are highly recommended.

ASSESSOR'S PARCEL NUMBER(S): Book 045 Page 049 Parcel 018

Additional parcel numbers: _____
Project Site Address
or Physical Location: _____

Property Area: Acres: 0.1 or Square feet: 4,356

Current and Previous Land Use: (Explain existing and previous land use(s) of site for the last ten years)

Vacant, Empty Lot _____

List any known previous projects approved for this site, such as a Use Permit, Parcel Map, etc.: (Please identify project name, type of project, and date of approval)

N/A _____

Existing General Plan & Zoning: Industrial

Proposed General Plan & Zoning: N/A
(if applicable)

ADJACENT LAND USE: (Describe adjacent land uses within 1,320 feet (1/4 mile) and/or two parcels in each direction of the project site)

East: Railroad & Highway

West: Industrial

North: Industrial

South: Agricultural

WILLIAMSON ACT CONTRACT:

Yes No

Is the property currently under a Williamson Act Contract?

Contract Number: _____

If yes, has a Notice of Non-Renewal been filed?

Date Filed: _____

Yes No

Do you propose to cancel any portion of the Contract?

Yes No

Are there any agriculture, conservation, open space or similar easements affecting the use of the project site. (Such easements do not include Williamson Act Contracts)

If yes, please list and provide a recorded copy: _____

SITE CHARACTERISTICS: (Check one or more)

Flat

Rolling

Steep

VEGETATION: What kind of plants are growing on your property? (Check one or more)

Field crops

Orchard

Pasture/Grassland

Scattered trees

Shrubs

Woodland

River/Riparian

Other

Explain Other: Minimal vegetation, grass and weeds

Yes No

Do you plan to remove any trees? (If yes, please show location of trees planned for removal on plot plan and provide information regarding transplanting or replanting.)

GRADING:

Yes No

Do you plan to do any grading? (If yes, please indicate how many cubic yards and acres to be disturbed. Please show areas to be graded on plot plan.) _____

STREAMS, LAKES, & PONDS:

Yes No

Are there any streams, lakes, ponds or other watercourses on the property? (If yes, please show on plot plan)

Yes No

Will the project change any drainage patterns? (If yes, please explain – provide additional sheet if needed) _____

Yes No

Are there any gullies or areas of soil erosion? (If yes, please show on plot plan)

Yes No

Do you plan to grade, disturb, or in any way change swales, drainages, ditches, gullies, ponds, low lying areas, seeps, springs, streams, creeks, river banks, or other area on the site that carries or holds water for any amount of time during the year? (If yes, please show areas to be graded on plot plan)

Please note: If the answer above is yes, you may be required to obtain authorization from other agencies such as the Corps of Engineers or California Department of Fish and Game.

STRUCTURES:

Yes No Are there structures on the site? (If yes, please show on plot plan. Show a relationship to property lines and other features of the site.)

Yes No Will structures be moved or demolished? (If yes, indicate on plot plan.)

Yes No Do you plan to build new structures? (If yes, show location and size on plot plan.)

Yes No Are there buildings of possible Historical significance? (If yes, please explain and show location and size on plot plan.) _____

PROJECT SITE COVERAGE:

Existing Building Coverage: 0 Sq. Ft. Landscaped Area: 0 Sq. Ft.

Proposed Building Coverage: 25 Sq. Ft. Paved Surface Area: 4,356 Sq. Ft.

BUILDING CHARACTERISTICS:

Size of new structure(s) or building addition(s) in gross sq. ft.: (Provide additional sheets if necessary) _____
25 square feet

Number of floors for each building: 1

Building height in feet (measured from ground to highest point): (Provide additional sheets if necessary) _____
10 feet

Height of other appurtenances, excluding buildings, measured from ground to highest point (i.e., antennas, mechanical equipment, light poles, etc.): (Provide additional sheets if necessary) _____

Proposed surface material for parking area: (Provide information addressing dust control measures if non-asphalt/concrete material to be used) _____
Asphalt Concrete

UTILITIES AND IRRIGATION FACILITIES:

Yes No Are there existing public or private utilities on the site? Includes telephone, power, water, etc. (If yes, show location and size on plot plan)

Who provides, or will provide the following services to the property?

Electrical: _____ Sewer*: Keyes CSD

Telephone: AT&T Gas/Propane: PG&E

Water**: Keyes CSD Irrigation: _____

***Please Note: A "will serve" letter is required if the sewer service will be provided by City, Sanitary District, Community Services District, etc.**

****Please Note: A "will serve" letter is required if the water source is a City, Irrigation District, Water District, etc., and the water purveyor may be required to provide verification through an Urban Water Management Plan that an adequate water supply exists to service your proposed development.**

Will any special or unique sewage wastes be generated by this development other than that normally associated with resident or employee restrooms? Industrial, chemical, manufacturing, animal wastes? (Please describe:)

N/A

Please Note: Should any waste be generated by the proposed project other than that normally associated with a single family residence, it is likely that Waste Discharge Requirements will be required by the Regional Water Quality Control Board. Detailed descriptions of quantities, quality, treatment, and disposal may be required.

Yes No Are there existing irrigation, telephone, or power company easements on the property? (If yes, show location and size on plot plan.)

Yes No Do the existing utilities, including irrigation facilities, need to be moved? (If yes, show location and size on plot plan.)

Yes No Does the project require extension of utilities? (If yes, show location and size on plot plan.)

AFFORDABLE HOUSING/SENIOR:

Yes No Will the project include affordable or senior housing provisions? (If yes, please explain)

RESIDENTIAL PROJECTS: (Please complete if applicable – Attach additional sheets if necessary)

Total No. Lots: _____ Total Dwelling Units: _____ Total Acreage: _____

Net Density per Acre: _____ Gross Density per Acre: _____

<i>(complete if applicable)</i>	Single Family	Two Family Duplex	Multi-Family Apartments	Multi-Family Condominium/ Townhouse
Number of Units:	_____	_____	_____	_____
Acreage:	_____	_____	_____	_____

COMMERCIAL, INDUSTRIAL, MANUFACTURING, RETAIL, USE PERMIT, OR OTHER PROJECTS: (Please complete if applicable – Attach additional sheets if necessary)

Square footage of each existing or proposed building(s): 25 square feet

Type of use(s): Storage shed

Days and hours of operation: 8 am to 5 pm

Seasonal operation (i.e., packing shed, huller, etc.) months and hours of operation: _____

N/A

Occupancy/capacity of building: N/A

Number of employees: (Maximum Shift): 2 (Minimum Shift): 1

Estimated number of daily customers/visitors on site at peak time: 0

Other occupants: 0

Estimated number of truck deliveries/loadings per day: 0

Estimated hours of truck deliveries/loadings per day: 0

Estimated percentage of traffic to be generated by trucks: 0

Estimated number of railroad deliveries/loadings per day: 0

Square footage of:

Office area: _____

Warehouse area: _____

Sales area: _____

Storage area: 25 square feet

Loading area: _____

Manufacturing area: _____

Other: (explain type of area) _____

Yes No Will the proposed use involve toxic or hazardous materials or waste? (Please explain)

ROAD AND ACCESS INFORMATION:

What County road(s) will provide the project's main access? (Please show all existing and proposed driveways on the plot plan)

Keyes Road and Foote Road

Yes No Are there private or public road or access easements on the property now? (If yes, show location and size on plot plan)

Yes No Do you require a private road or easement to access the property? (If yes, show location and size on plot plan)

Yes No Do you require security gates and fencing on the access? (If yes, show location and size on plot plan)

Please Note: Parcels that do not front on a County-maintained road or require special access may require approval of an Exception to the Subdivision Ordinance. Please contact staff to determine if an exception is needed and to discuss the necessary Findings.

STORM DRAINAGE:

How will your project handle storm water runoff? (Check one) Drainage Basin Direct Discharge Overland

Other: (please explain) Discharge to sewer system

If direct discharge is proposed, what specific waterway are you proposing to discharge to? _____

Please Note: If direct discharge is proposed, you will be required to obtain a NPDES permit from the Regional Water Quality Control Board, and must provide evidence that you have contacted them regarding this proposal with your application.

EROSION CONTROL:

If you plan on grading any portion of the site, please provide a description of erosion control measures you propose to implement.

Please note: You may be required to obtain an NPDES Storm Water Permit from the Regional Water Quality Control Board and prepare a Storm Water Pollution Prevention Plan.

ADDITIONAL INFORMATION:

Please use this space to provide any other information you feel is appropriate for the County to consider during review of your application. (Attach extra sheets if necessary)
