Notice of Determination		Appendix D	
To: Office of Planning and Research U.S. Mail: Street Address: P.O. Box 3044 1400 Tenth St., Rm 113	From: Public Agency: County of Los Angeles Address: 900 South Fremont Avenue Alhambra, CA 91803		
	Contact: Gillian Tiede		
Sacramento, CA 95812-3044 Sacramento, CA 95814	Phone: (626) 464-4583	0005 045000	
County Clerk County of: Los Angeles Address: 12400 Imperial Highway	Lead Agency (if different f	2025 015226 FILED	
Norwalk, CA 90650	Address:	Jan 23 2025	
		Dean C. Logan, Registrar – Recorder/County Cler	
	Contact:Phone:	Electronically signed by ISAURA CORREA	
SUBJECT: Filing of Notice of Determination in compliances Code. State Clearinghouse Number (if submitted to State Clearinghouse)		or 21152 of the Public	
Project Title: Harbor-UCLA Replacement Program - Cor			
-			
Project Applicant: Los Angeles County Department of Pu	ıblic Works		
Project Location (include county): 1000 W. Carson Street	, Torrance, CA 90502 (Los /	Angeles County)	
This is to advise that the County of Los Angeles County of Los Angeles County of Los Angeles	ha	s approved the above	
described project on December 17, 2024 and has made the	ne following determinations	regarding the above	
(date) described project.			
1. The project [will will not] have a significant effect	t on the environment.		
2. An Environmental Impact Report was prepared for the		provisions of CEQA.	
☐ A Negative Declaration was prepared for this project			
3. Mitigation measures [were were not] made a co			
4. A mitigation reporting or monitoring plan [was] w	i i		
5. A statement of Overriding Considerations [■ was □6. Findings [■ were □ were not] made pursuant to the		ojeci.	
6. Findings [were were not made pursuant to the	provisions of GEQA.		
This is to certify that the final EIR with comments and res negative Declaration, is available to the General Public at County of Los Angeles Public Works Offices		ct approval, or the	
0.	Tu. Capital Prainct	c Program Manager	
Signature (Public Agency):	Title: Capital Project	s Program Manager	
Date: Date Rece	eived for filing at OPR:	THIS NOTICE WAS POSTED	
A 11 12 13 14 O. 11 O. 12 O. 1	01	N January 23 2025	
Authority cited: Sections 21083, Public Resources Code.			
Reference Section 21000-21174, Public Resources Code	ə. U	NTIL February 24 2025	

State of California—Natural Resources Agency CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE

2025 ENVIRONMENTAL FILING FEE CASH RECEIPT

2025 ENVIRONMENTAL FILING FEE CASH RECEIPT	
	RECEIPT # 202501231240015
	STATE CLEARING HOUSE # (If applicable)
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY	
EAD AGENCY	DATE
COUNTY OF LOS ANGELES DEPARTMENT OF PUBLIC WORKS	01/23/2025
COUNTY/STATE AGENCY OF FILING	DOCUMENT NUMBER
LA PROJECT TITLE	2025015226
PROJECT TITLE	
HARBOR =UCLA REPLACEMENT PROGRAM- CONSTRUCTION CHANGE ORDER PROJECT APPLICANT NAME	PHONE NUMBER
GILLIAN TIEDO	, Hone Homber
PROJECT APPLICANT ADDRESS	CITY STATE ZIP CODE
900 SOUTH FREMONT AVENUE	ALHAMBRA CA 91803
PROJECT APPLICANT (Check appropriate box):	
✓ Local Public Agency	t State Agency Private Entity
CHECK APPLICABLE FEES:	
☐ Environmental Impact Report (EIR)	\$4,123.50 \$0.00
☐ Negative Declaration (ND)(MND)	\$2,968.75 \$ 0.00
☐ Application Fee Water Diversion (State Water Resources Control Board Only)	\$850.00 \$ 0.00
☐ Projects Subject to Certified Regulatory Programs (CRP)	
☑ County Administrative Fee	W1,101.10
☐ Project that is exempt from fees	\$ 50.00 \$ <u>75.00</u>
Notice of Exemption	
_	
CDFW No Effect Determination (Form Attached)	
Other	\$
PAYMENT METHOD:	
☐ Cash ☐ Credit ☐ Check ☑ Other <u>Billing</u>	\$
SIGNATURE	TITLE
X I come	ITC
	ITC

Dean C. Logan Los Angeles County Registrar / Recorder 12400 Imperial Highway, Norwalk, CA (800)201-8999

BUSINESS FILINGS REGISTRATION

NORWALK DEPARTMENT HEADQUARTER

Cashier: I. CORREA

* 2 0 2 5 0 1 2 3 1 2 4 0 0 1 5 *

Thursday, January 23, 2025 2:48 PM

5021A COUNTY OF LA - PUBLIC WORKS (FLOO...

Item(s)

Fee	Qf	ty	Total		
NoD - County 2025015226	Posting	Fee	1	\$75.00	

Total \$75.00

Total Documents:

1

Customer payment(s):

Billing

\$75.00

ORIGINAL FILED

Notice of Determination

DEC 2 1 2016

Appendix D

To		LOS ANGELES, CO	UUH TO YHOLERK
\boxtimes	Office of Planning and Rese		Public Agency: L.A. County Dept. of Public Works
	U.S. Mail:	Street Address:	Address: 900 S. Fremont Avenue
	P.O. Box 3044	1400 Tenth St., Rm 113	Alhambra, CA 91803-1331
	Sacramento, CA 95812-304		Contact: Clarice Nash, Project Manager
	Caciamento, Ort 55512 504	4 Oddranomo, on 33014	Phone:(626) 300-2363
×	County Clerk County of: Los Angeles Address: 4716 East Cesar E	Chavez Avenue	Lead Agency (if different from above):
	Los Angeles, CA 90	0022	Address:
			Contact: Phone:
	BJECT: Filing of Notice of sources Code.	Determination in compli	ance with Section 21108 or 21152 of the Public
Stat	e Clearinghouse Number (i	f submitted to State Clearing	nghouse): 2014111004
Proi	ect Title: Harbor-UCLA Medi	cal Center Campus Master Pla	n Project
•	ect Applicant; Los Angeles C		lorks
•			d define the desired the transfer the transfer that and the desired transfer the transfer transfer the transfer
Proj	ect Location (include count	/):1000 W. Carson Street, Tor	rance, CA 90502 (Los Angeles County)
The deve state repla	existing 72-acre Harbor-UCLA cloped with up to approximately law seismic requirements, ren cement of aging facilities. The 200 SF and would support ope	Campus includes 1,279,284 S 2,457,355 SF of developed floovation of the existing Hospita western side of the Campus in space, surface parking, and	ient, research, and support facilities through 2030. F of developed area. The Master Plan Project, to be cor area, includes a new Hospital tower to meet all tower to house non-acute care support uses, and so proposed for a new Bioscience Tech Park of up to other similar ancillary short-term uses.
This	is to advise that the County	of Los Angeles	has approved the above
		(☑ Lead Agency or ☐ Re	sponsible Agency)
desc	ribed project on <u>December 2</u> (date		e following determinations regarding the above
desc	ribed project.		
1 Th	ne project [X] will 🗌 will no	tl have a cignificant effect.	on the equirenment
		•	
			is project pursuant to the provisions of CEQA.
	-		pursuant to the provisions of CEQA.
3. Mi	tigation measures [X] were	were not] made a cond	dition of the approval of the project.
4. A	mitigation reporting or moni	toring plan [🔀 was 🗌 was	s not] adopted for this project.
			as not] adopted for this project.
	ndings [X were were no	·	
0. 1 11	Idings [S] were [] were in	or made paradam to the pr	OVISIONS OF OEGA.
nega	tive Declaration, is available	to the General Public at:	onses and record of project approval, or the
	anguica ocomy popularient of		Transprinting on onou-1001
Signa	ature (Public Agency):	W	Title: Project Manager
Date:	December 20, 2016	Date Receiv	ed for filing at OPR: December 21, 2016

Authority cited: Sections 21083, Public Resources Code. Reference Section 21000-21174, Public Resources Code.



State of California—Natural Resources Agency CALIFORNIA DEPARTMENT OF FISH AND WILDLIFE 2016 ENVIRONMENTAL FILING FEE CASH RECEIPT

				RECEIPT	¥ .		
				20161221	1240045		
				STATE CL	EARING HOUS	E#(If applic	able)
SEE INSTRUCTIONS ON REVE	RSE. TYPE OR PRINT CLE	ARLY					
LEAD AGENCY						DATE	
L.A. COUNTY DEPT. OF PUB	BLIC WORKS					12/21/20)16
COUNTY/STATE AGENCY OF I	FILING					DOCUM	ENT NUMBER
LACC						2016309	060
PROJECT TITLE							
HARBOR-UCLA MEDICAL CE	NTER CAMPUS MASTER	PLAN PROJECT				1	
PROJECT APPLICANT NAME						PHONE	NUMBER
CLARICE NASH L.A. COUNT PROJECT APPLICANT ADDRES		KS	LCITY		LOTATE	710.000	
	33		CITY		STATE	ZIP COD	'E
900 S. FREMONT AVE PROJECT APPLICANT (Check to	soomodate hox):		ALHAMBRA		CA	91803	
☑ Local Public Agency	School District	Other Special Distric	t 🗍 Sta	ite Agency	☐ Private	Entity	
CHECK APPLICABLE FEES:							
Environmental Impact R	eport (EIR)				\$3,070.00	\$	3,070.00
☐ Negative Declaration (N	D)(MND)				\$2,210.25	S	0.00
☐ Application Fee Water D	Diversion (State Water Resou	irces Control Board Only)			\$850.00	s	0.00
☐ Projects Subject to Cert	fied Regulatory Programs (C	CRP)			\$1,043.75	\$	0.00
☑ County Administrative Fellowship	ee				\$50.00		75.00
Project that is exempt from	om fees					\$	70.00
Notice of Exemption							
CDLAN NO Fliedt De	elermination (Form Attached)						
Other	***					\$	0.00
PAYMENT METHOD:							
☐ Cash ☐ Credit	☑ Check	Other				\$	3,145.00
SIGNATURE				ltri	TLE		
:44-				["	I to to		
X							

2025 015226 FILED

FILED Jan 23 2025

Dean C. Logan, Registrar – Recorder/County Clerk

Electronically signed by ISAURA CORREA