



City of Oceanside Planning Division Environmental Information Form

TO BE COMPLETED BY APPLICANT

MAPS REQUIRED:

The project site and surrounding area within 1000-ft. from the project's property lines must be shown on a recent aerial map.

GENERAL INFORMATION: (attach additional sheets as necessary)

1. Name of Applicant: David Dobson
Address: Department of General Services, 5560 Overland Avenue, Suite 410
City: San Diego State: CA Zip: 92123
Telephone: (858) 694-3610
2. Name of Applicant's Representative: Matthew Greiner
Address: 656 Fifth Ave., Suite A
City: San Diego State: CA Zip: 92101
Telephone: (619) 592-0856
3. Project Title and/or Application Number(s): Tri-City Medical Center Psychiatric Health Facility
4. If a Specific Plan has been prepared on the project site, give Specific Plan title:
N/A
5. List any other related permits or approvals, required from agencies other than the City of Oceanside: OSHPD

6. Has the project site had any prior environmental review as part of this or another project? If so, please provide the Planning Application file number(s) of the permits previously applied for (e.g. CUP19-00001 (Conditional Use Permit), D18-00001 (Development Plan), etc.) and/or the name of the project:
D17-00020, CUP17-00024

7. Is the project part of a larger project or series of projects? No If so, describe the project's relationship to the project or series of projects: _____

8. If the project is included in an approved Specific Plan, is it in conformance with the plan?
N/A If not, explain how it differs: _____

9. Existing zoning: CP Proposed zoning: CP
Existing General Plan Land Use Designation: Medical Center
Proposed General Plan Land Use Designation: Medical Center

LOCATION:

- 10. Address of project: 4002 Vista Way, Oceanside, CA 92056
- 11. Project site is located on the N / S / E / (W) (circle one) side of Tri-City Medical Center (street name) between Waring Road and Vista Way (streets).
- 12. Is the project located within the Airport Influence Area? No
- 13. Is the project located within the Coastal Zone? No
- 14. What is the distance in miles on existing roadways from the project site to the nearest: Fire Station 1.2 mile Airport 7.0 mile Hospital less than 1 mile Public Transportation less than 1 mile
- 15. Is the site within 1/2 mile of a former sanitary landfill? No

PROJECT DESCRIPTION:

- 16. Site size: 122,479 SF (acres or square feet)
- 17. Please describe all off-site improvements proposed as part of the project. (Such improvements might include: drainage facilities, street improvements, extension of utilities, cut and fill slopes, pedestrian and bicycle paths, etc., that would be constructed outside of the project boundaries)
Bus Stop relocation

FOR RESIDENTIAL PROJECTS (IF PROJECT IS COMMERCIAL OR INDUSTRIAL, SKIP ITEMS 18 THROUGH 26):

- ~~18. Number of lots/dwelling units: _____~~
- ~~19. Maximum building height: _____~~
- ~~20. Amount of off-street parking: _____~~
 - ~~(a) Number required: _____~~
 - ~~(b) Number proposed: _____~~
 - ~~(c) Type of parking (size, covered or uncovered): _____~~
- ~~21. Please describe any recreational facilities to be provided: _____~~
- ~~22. What is the distance in miles on existing roads from the project site to the nearest: Elementary School _____ Shopping Center _____ High School _____ Public Library _____~~
- ~~23. If applicable, describe the project's relationship to a larger project or series of projects and how it relates or conforms to the larger project: _____~~
- ~~24. Will air conditioning or mechanical ventilation be provided? _____~~
- ~~25. Describe the proposed scheduling or phasing of the project: _____~~
- ~~26. What percentage of the project site will be covered by: Paving _____ %; Buildings _____ %; Landscaping _____ %~~

FOR COMMERCIAL, INDUSTRIAL OR AGRICULTURAL PROJECTS: (IF PROJECT IS RESIDENTIAL, SKIP ITEMS 27 THROUGH 39.)

27. Describe the type of uses proposed: adult in-patient and out-patient psychiatric services
28. Size of proposed buildings: 13,560 square feet.
29. Number of buildings proposed: 1
30. Maximum building height: 23.5 ft
31. Amount of off-street parking to be provided: 48
(a) Will there be a parking structure? If so, how many above-ground levels? N/A
32. Projected number of employees: 36 total 12 per shift. For agricultural projects, give maximum number of employees at harvesting time: N/A; and specify harvesting times: N/A
33. What will be the business hours of operation? 24hr/day
34. Describe the proposed scheduling or phasing of the project: 8-hour work days, no phasing
35. For restaurants, how many seats will there be? N/A
36. If applicable, describe the project's relationship to larger projects or series of projects:
37. What percentage of the project site will be covered by:
Paving 35 %; Buildings 15 %; Landscaping 50 %
38. Does the project involve the handling, storage or disposal of any toxic or hazardous substance? No If so, what safety measures have been incorporated into the project: N/A
39. Will the project result in the emission of any odor, vibration, glare or electrical disturbance? No

ENVIRONMENTAL SETTING:

40. Please attach copies of any special studies that have been prepared in regard to this project or the project site. Examples would include: archaeological survey, biological survey, noise study, geotechnical report, slope analysis, traffic analysis, environmental impact reports, etc.
41. Describe the following environmental conditions as they presently exist (use additional sheets, if necessary):
- (a) Topography Project Site:
Site generally slopes to towards the south east into existing storm water detention systems.
Within 1/2 mile: The area within a 1/2 mile vicinity generally slopes south.
- (b) Water Bodies Project Site:
No water bodies exist within the project limits.
Within 1/2 mile: Buena Vista Creek
- (c) Vegetation Project Site:
Site is previously developed with existing landscaped vegetation.
- (d) Wildlife Project Site: N/A
- (e) Historical/Archaeological/Paleontological Resources Project Site: N/A
Within 1/2 mile: _____

(f) Land Use Project Site:

6002 Office (Low-Rise)

Within 1/2 mile: 6502 Hospital; 5003 Community Shopping Center; 1110 Single Family Detached

42. Has the project site been previously graded? The site was previously graded for storm mitigation purposes.
If so, what percent of the site was graded? Approximately 95%.
43. If mature trees, wetlands, or riparian vegetation exist on site, please attach a map indicating their location.
44. Does the project contain slopes of more than 10 percent? Yes If the project area includes hillsides with slopes of 20 percent or more, the Hillside Development Regulations require that a slope analysis be provided, even if the slopes are not to be graded. The slope analysis must be done on an accurate and recent topographic map with minimum five (5) foot contour lines and a scale of at least 200 feet. The slope categories must be as follows: slopes of less than 20 percent; slopes of 20-40 percent; and slopes over 40 percent. Within these areas, the following must be depicted and labeled: areas with slopes of 20-40 percent and a minimum 50-foot differential, and areas with slopes of more than 40 percent and having a 25-foot differential.
45. Describe any existing structures on the project site and the current use of the structures

N/A - None

ENVIRONMENTAL IMPACT:

46. What is the street classification of any proposed new streets? (e.g., "two-lane collector" or "four-lane major street", per Circulation Element of the General Plan)
N/A
47. What is the percentage grade of the steepest street involved in the project? 7.7%
48. What is the right-of-way standard for proposed new streets? (e.g., private, dedicated, to be acquired, etc.) N/A
49. If new water mains for this project will serve areas beyond the project boundary, please indicate the approximate service area on the map.
50. If new sewer mains for this project will serve areas beyond the project boundary, please indicate the approximate service area on the map.
51. Describe the improvements and extensions of existing electrical lines that will be required to serve the project. Underground extension of electrical service into Electrical Room / equipment
52. If improvements are to be demolished or removed by the project, please describe them briefly. Existing parking lot to be removed for the construction of new building.
53. Identify any roadway or train track located within 500 feet of the project site. Waring Road
54. List any other potential noise sources which could affect the project site (e.g. industrial projects, etc.) and give approximate distances. CA-78 is less than 1 mile away
55. Describe any noise that will be produced by the project during construction and after the project is completed (include equipment operation, blasting, etc.) Equipment operation
56. Estimate the number of motor vehicle trips generated by the project site currently: 2,210 average daily trips ; after development 2,530 average daily trips.
57. If the project is commercial or industrial, list any air pollutants that the project will emit.
58. To what extent will the project be located within a floodplain? (Specify whether U.S. Army Corps

- of Engineers Standard Project Flood or 100-year flood.) N/A
59. If the drainage from the project will not be discharged into an existing public stormwater drainage system, please describe how it will be accommodated. Detention basins
60. What percentage of the project site will be graded? 100 %
61. Volume of cutting: 4,170 cubic yards; maximum cut-slope ratio will be 2:1; maximum cut-slope height will be 9 feet.
62. Volume of fill: 4,200 cubic yards; maximum fill-slope ratio will be 2:1; maximum fill-slope height will be 8 feet.
63. Does the cut-and-fill volume balance? Yes. If not, how will import/export be handled? _____
64. Will the entire site be graded with the first phase? Yes If not, indicate those areas that will be left natural and those areas that will be used as temporary borrow sites. If so, please describe: _____
65. Will the project extract or preclude the extraction of any rock, sand, gravel, or other mineral resources? Yes If so, please describe: For the removal of concrete base
66. Describe or indicate on a map any areas of vegetation to be removed by the project (May be combined with Item 40). Refer to attached map.

CERTIFICATION

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge or belief.

Date 2/4/2021

Signature of Preparer Phummarin Sritongsook

For  Matthew Greiner, AIA - Architect



Tri-City Medical Center

Tri-City Medical Center
Psychiatric Health
Facility

4002 Vista Way
Oceanside, CA 92056

CANNONDESIGN

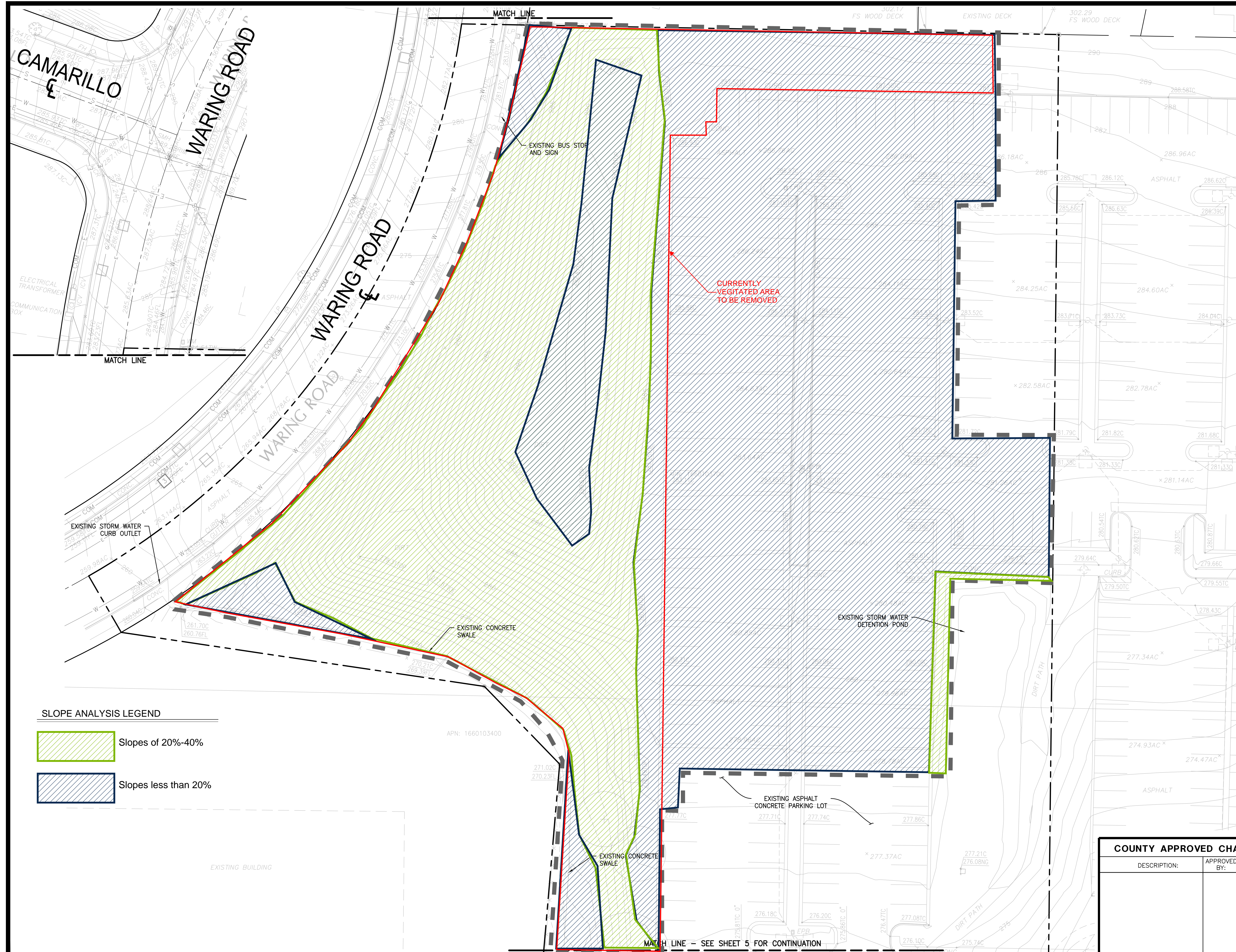
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F: 619.814.1249

www.cannondesign.com

CIVIL & STRUCTURAL
KPFF

kpff

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F: 213.266.5294
www.kpff.com



EXISTING IMPROVEMENTS

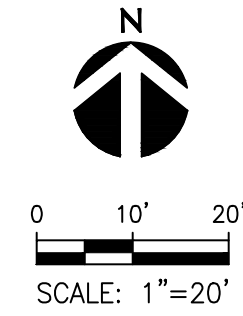
SYMBOL	IMPROVEMENT
---	PROPERTY LINE/RIGHT OF WAY LINE
---	LOT LINE
---	CURB/BACK OF CURB/GUTTER (PVT)
X	FENCE/GATE
100	MAJOR CONTOUR
102	MINOR CONTOUR
G	GAS
W	WATER (PVT)
E	ELECTRIC (PVT)
○	BUS STOP SIGN
○	LIGHT POLE

ABBREVIATIONS

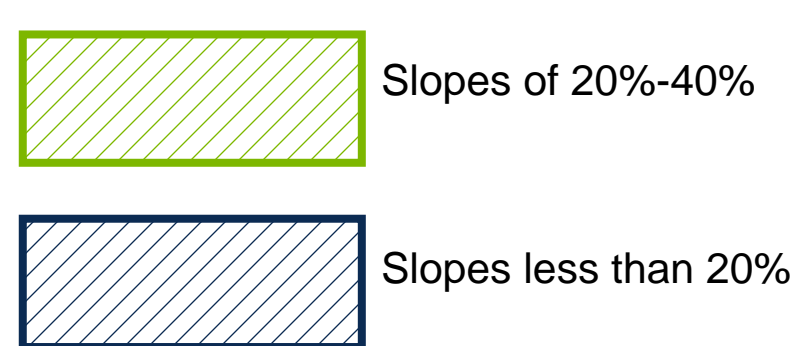
GUARD POST	GP
INDICATES FOUND MONUMENT AS NOTED	●
SIDEWALK	SWK
HANDICAPPED RAMP	HCR
NORTH	N
NORTHEAST	NE
SOUTH	S
SOUTHEAST	SE
EAST	E
SOUTHWEST	SW
WEST	W
NORTHWEST	NW
NORTHEASTERLY	NELY
SOUTHEASTERLY	SELY
SOUTHWESTERLY	SWLY
NORTHWESTERLY	NWLY
HANDICAPPED	HC
TRASH ENCLOSURE	TE
WROUGHT IRON	WI
BUILDING HEIGHT	B.H.
COLUMN	CLM
DRIVEWAY	DWY
CONTROL	CTRL
CENTER	CTR
ENCLOSURE	ENCL
BACK OF WALL	BW
MECHANICAL	MECH
PROPERTY LINE	PL
PROPERTY CORNER	PC
RADIAL BEARING	(RAD)
DELTA ANGLE	Δ
RADIUS	R
LENGTH	L
MOTORCYCLE	M.C.
FLAG POLE	FP
PLANTER	PNTR
UNKNOWN MANHOLE	UMH
UNKNOWN RISER	UR
UNKNOWN CONTROL BOX	UCB
UNKNOWN CLEAN OUT	UCO
UNKNOWN VAULT	UNV
RECORD OF SURVEY	R.O.S.
PARCEL MAP	P.M.

SHEET NOTE:

1. THIS EXISTING CONDITIONS PLAN HAS BEEN CREATED BASED ON PROJECT SPECIFIC SURVEY, SITE VISIT NOTES AND RECORDS INFORMATION. CONTRACTOR SHALL FIELD VERIFY INFORMATION AS PART OF THE CONSTRUCTION PROCESS AND ALERT THE DESIGNER OF RECORD WHEN CHANGES ARE OBSERVED.



SLOPE ANALYSIS LEGEND



COUNTY APPROVED CHANGES

DESCRIPTION:	APPROVED BY:	DATE:

PRIVATE CONTRACT

SHEET 4 OF 21 SHEETS

COUNTY OF SAN DIEGO
DEPARTMENT OF PUBLIC WORKS

PRIORITY DEVELOPMENT PROJECT EXISTING CONDITION - NORTH SHEETS FOR

TRI-CITY MEDICAL CENTER BEHAVIORAL HEALTH FACILITY

CALIFORNIA COORDINATE INDEX

APPROVED FOR WILLIAM P. MORGAN
COUNTY ENGINEER

ENGINEER OF WORK
R.C.E.

GRADING PERMIT NO:
PDS20XX-LDXXXX-XXXX

ENGINEER'S NAME: EVAN LAKIN
PHONE NO. (213)266-5266 // EMAIL: EVAN.LAKIN@KPFF.COM

ISSUE FOR OSHPD SUBMITTAL 19 NOV 2020

Rev.	Description	Date

AGENCY APPROVAL

FACILITY #: 12372
OSHPD #:

ARCHITECT SEAL CONSULTANT SEAL



Drawing Title:

EXISTING CONDITION - NORTH

Issue Date: 19 NOV 2020
Project No.: 006240.00 Checked by: AL/EL

C1003



Tri-City Medical Center

Tri-City Medical Center
Psychiatric Health
Facility

4002 Vista Way
Oceanside, CA 92056

CANNONDESIGN

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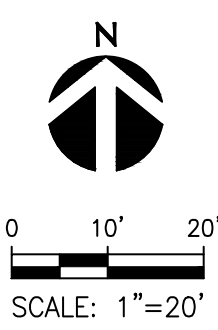
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ARCHITECT SEAL CONSULTANT SEAL

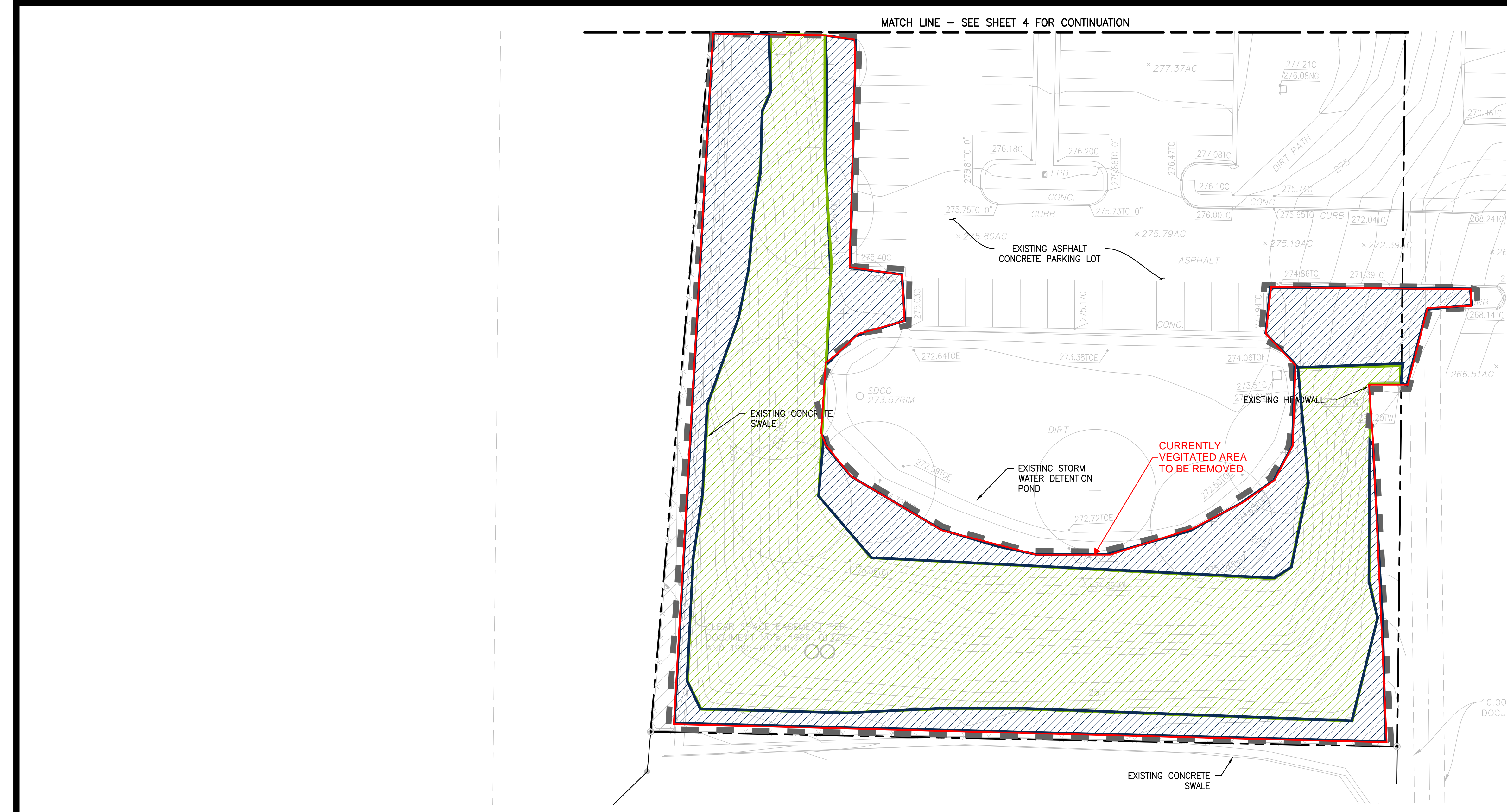


ENGINEER'S NAME: EVAN LAKIN
PHONE NO. (213)266-5266 // EMAIL: EVAN.LAKIN@KPFF.COM



COUNTY APPROVED CHANGES		
DESCRIPTION:	APPROVED BY:	DATE:

PRIVATE CONTRACT		
SHEET 5	COUNTY OF SAN DIEGO DEPARTMENT OF PUBLIC WORKS	21 SHEETS
PRIORITY DEVELOPMENT PROJECT EXISTING CONDITION - NORTH SHEET FOR:		
TRI-CITY MEDICAL CENTER BEHAVIORAL HEALTH FACILITY		
CALIFORNIA COORDINATE INDEX		
APPROVED FOR WILLIAM P. MORGAN COUNTY ENGINEER	ENGINEER OF WORK R.C.E.	GRADING PERMIT NO: PDS20XX-LDXXXX-XXXX

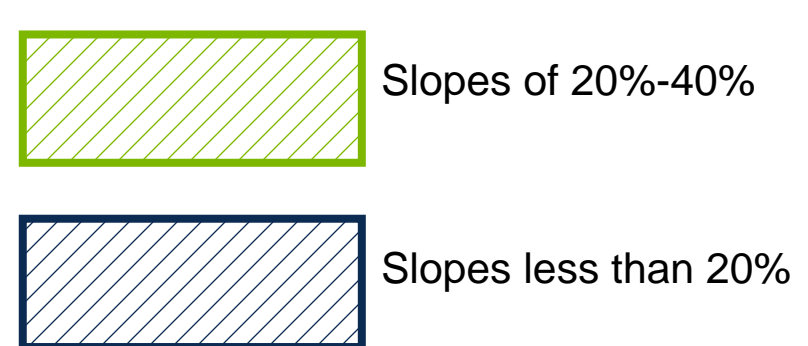


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SLOPE ANALYSIS LEGEND



PERMANENT BMP_TEMPLATE (REV. 7/6/2017)

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Drawing Title:

EXISTING CONDITION - SOUTH PLAN

Issue Date: 19 NOV 2020
Project No.: 006240.00 Checked by: ALJ/EL

C1004