

# *Chapter 10*

## *Mitigation Monitoring*

### ***10.1 Introduction***

In 1988, AB 3180 was signed into law and it became effective on January 1, 1989. AB 3180 added a major requirement to the implementation of the California Environmental Quality Act (CEQA). State and local agencies are required to establish a reporting or monitoring program for projects approved which require CEQA review under AB 3180. As drafted, AB 3180 calls for a reporting or monitoring program *"designed to ensure compliance during project implementation."*

Local agencies are given broad latitude in developing programs to meet the variety of projects and circumstances affecting their jurisdictions. The following Mitigation Monitoring Program Proposal has been developed in accordance with guidance published by the Governor's Office of Planning and Research and is intended to serve as a guide to CSU-STANISLAUS in complying with the provisions of AB 3180 on the CSU Stanislaus Physical Master Plan Update project.

In most cases, development conditions and mitigation measures can be monitored through the construction contract preparation process. Conditions and performance is also included in construction bid documents.

In instances where mitigation requires on-going monitoring, the Mitigation Measure Monitoring Checklist (Form B) will be used until monitoring is no longer needed. The CSU Stanislaus Campus Facilities Services Department will be required to file periodic reports on how the implementation of various mitigation measures is progressing or is being maintained. The Campus Facilities may be required to conduct periodic inspections to assure compliance. In some instances, outside agencies and/or consultants may be required to conduct necessary periodic inspections as part of the mitigation monitoring program.

The following is suggested as the mitigation monitoring program worksheet for the CSU Stanislaus Physical Master Plan Update .

## CSU-STANISLAUS PHYSICAL MASTER PLAN Environmental Mitigation Checklist Form A

**Project Name:** \_\_\_\_\_ **File Number:** \_\_\_\_\_  
**Approval Date:** \_\_\_\_\_ **EIR** \_\_\_\_\_ **Conditional Neg. Dec.** \_\_\_\_\_

The following environmental mitigation measures were incorporated into the Conditions of Approval for this project in order to mitigate identified environmental impacts to a level of insignificance. A completed and signed checklist for each mitigation measure indicates that this mitigation measure has been complied with and implemented, and fulfills the CSU-STANISLAUS Physical Master Plan Update's Mitigation Monitoring requirements with respect to Assembly Bill 3180 (Public Resources Code Section 21081.6)

Mitigation Measure	Type	Monitoring Dept.	Shown on Plans	Verified Implementation	Remarks
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					

(Add additional Measures as Necessary)

***Explanation of Headings:***

- 
- Type: Project, ongoing, cumulative.
  - Monitoring Dept. Department or Agency responsible for monitoring a particular mitigation measure.
  - Shown on Plans: When mitigation measure is shown on plans, this column will be initialed and dated.
  - Verified Implementation: When a mitigation measure has been implemented, this column will be initialed and dated.
  - Remarks: Area for describing status of ongoing mitigation measure, or for other information.
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## The CSU-STANISLAUS Master Plan Update Mitigation Measure Monitoring Checklist Form B

Monitoring Phase:      \_\_\_\_\_ Pre-Construction      \_\_\_\_\_ Construction

Project File Number: \_\_\_\_\_

Project Name: \_\_\_\_\_

Brief Project Description: \_\_\_\_\_

Project Location: \_\_\_\_\_

Requirement Met:			
Date	Yes	No	Description of Mitigation Measures
_____	_____	_____	1. _____
_____	_____	_____	2. _____
_____	_____	_____	3. _____
_____	_____	_____	4. _____
_____	_____	_____	5. _____

Requirement On-Going:			
Date	Yes	No	Description of Mitigation Measures
_____	_____	_____	1. _____
_____	_____	_____	2. _____
_____	_____	_____	3. _____
_____	_____	_____	4. _____
_____	_____	_____	5. _____

Trustee Agency	Date	Yes	No
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

**Copies of This Form Distributed To:**

\_\_\_\_\_ City of Turlock \_\_\_\_\_ County of \_\_\_\_\_ (Dept. \_\_\_\_\_) \_\_\_\_\_ Other  
(List \_\_\_\_\_)  
\_\_\_\_\_ Responsible Agency: (List \_\_\_\_\_)

**I hereby certify that I have inspected the project site and that the above information is true to the best of my knowledge.**

Name: (Print) \_\_\_\_\_  
Representing: (Agency/Firm) \_\_\_\_\_  
Signature: \_\_\_\_\_  
Date: \_\_\_\_\_