Appendix A

City of Perris VMT Scoping Form for Land Use Projects

City of Perris
www.cityofperris.org

CITY OF PERRIS
VMT SCOPING FORM FOR LAND USE PROJECTS

This Scoping Form acknowledges the City of Perris requirements for the evaluation of transportation impacts under CEQA. The analysis provided in this form should follow the City of Perris TIA Guidelines, dated May 12, 2020.

I. Project Description

Tract/Case No.

Project Name:

Project Location:

Project Description:
(Please attach a copy of the project Site Plan)

Current GP Land Use:　　　　　　**Proposed GP Land Use:**

Current Zoning:　　　　　　**Proposed Zoning:**

If a project requires a General Plan Amendment or Zone change, then additional information and analysis should be provided to ensure the project is consistent with RHNA and RTP/SCS Strategies.

II. VMT Screening Criteria

	YES	NO		Attachments:
A. Is the Project 100% affordable housing?				
B. Is the Project within 1/2 mile of qualifying transit?				
C. Is the Project a local serving land use?				
D. Is the Project in a low VMT area?				
E. Are the Project's Net Daily Trips less than 500 ADT?		NO	X	

Low VMT Area Evaluation:

Citywide VMT Averages[1]		
Citywide Home-Based VMT =	15.05	VMT/Capita
Citywide Employment-Based VMT =	11.62	VMT/Employee

WRCOG VMT MAP

Project TAZ	VMT Rate for Project TAZ[1]	Type of Project
	VMT/Capita	Residential:
	VMT/Employee	Non-Residential:

[1] Base year (2012) projections from RivTAM.

Trip Generation Evaluation:

Source of Trip Generation:

Project Trip Generation: | 500 | **Average Daily Trips (ADT)**

	YES	NO	% Trip Credit:
Internal Trip Credit:			
Pass-By Trip Credit:			
Affordable Housing Credit:			
Existing Land Use Trip Credit:			Trip Credit:

Net Project Daily Trips: | 500 | **Average Daily Trips (ADT)** | Attachments:

Does project trip generation warrant an LOS evaluation outside of CEQA? | YES | X | NO

III. VMT Screening Summary

A. Is the Project presumed to have a less than significant impact on VMT?

A Project is presumed to have a less than significant impact on VMT if the Project satisfies at least one (1) of the VMT screening criteria.

- -

B. Is mitigation required?

If the Project does not satisfy at least one (1) of the VMT screening criteria, then mitigation is required to reduce the Project's impact on VMT.

- -

C. Is additional VMT modeling required to evaluate Project impacts?

YES		NO	X

If the Project does not satisfy at least one (1) of the VMT screening criteria AND generates 2,500 or more net daily trips, then additional VMT modeling using RivTAM is required. If the project generates less than 2,500 net daily trips, the Project TAZ VMT Rate can be used for mitigation purposes.

IV. MITIGATION

A. Citywide Average VMT Rate (Threshold of Significance) for Mitigation Purposes:

- -	- -

B. Unmitigated Project TAZ VMT Rate:

- -	- -

C. Percentage Reduction Required to Achieve the Citywide Average VMT:

- -

D. VMT Reduction Mitigation Measures:

Source of VMT Reduction Estimates:	
Project Location Setting	

	VMT Reduction Mitigation Measure:	Estimated VMT Reduction (%)
1.		0.00%
2.		0.00%
3.		0.00%
4.		0.00%
5.		0.00%
6.		0.00%
7.		0.00%
8.		0.00%
9.		0.00%
10.		0.00%
Total VMT Reduction (%)		**0.00%**

(Attach additional pages, if necessary, and a copy of all mitigation calculations.)

E. Mitigated Project TAZ VMT Rate:

- -	- -

F. Is the project pressumed to have a less than significant impact with mitigation?

- -

If the mitigated Project VMT rate is below the Citywide Average Rate, then the Project is presumed to have a less than significant impact with mitigation. If the answer is no, then additional VMT modeling may be required and a potentially significant and unavoidable impact may occur. All mitigation measures identified in Section IV.D. are subject to become Conditions of Approval of the project. Development review and processing fees should be submitted with, or prior to the submittal of this Form. The Planning Department staff will not process the Form prior to fees being paid to the City.

Prepared By		Developer/Applicant	
Company:		**Company:**	
Contact:		**Contact:**	
Address:		**Address:**	
Phone:		**Phone:**	
Email:		**Email:**	
Date:		**Date:**	

Approved by:		
Perris Planning Dept.	Date	**Perris Engineering Dept.**	Date