

**NOTICE OF EXEMPTION**

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| --- | --- | --- | --- |
| TO:[ ]  | Office of Planning and ResearchP. O. Box 3044, Room 113Sacramento, CA 95812-3044 | FROM: (Public Agency) | Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| [ ]  | Clerk of the Board of SupervisorsorCounty Clerk (Include County name)Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

|  |  |
| --- | --- |
| 1. Project Title:
 |  |
| 1. Project Applicant:
 |  |
| 1. Project Location – Identify street address and cross streets or attach a map showing project site (preferably a USGS 15’ or 7 1/2’ topographical map identified by quadrangle name):
 |  |
| 1. Project Location – City:
 | * 1. Project Location – County:
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| 1. Description of nature, purpose, and beneficiaries of Project:
 |  |
| 1. Name of Public Agency approving project:
 |  |
| 1. Name of Person or Agency undertaking the project, including any person undertaking an activity that receives financial assistance from the Public Agency as part of the activity or the person receiving a lease, permit, license, certificate, or other entitlement of use from the Public Agency as part of the activity:
 |  |
| 1. Exempt status: (check one)
 |  |
|  | * 1. [ ]  Ministerial project.
 | (Pub. Resources Code § 21080(b)(1); State CEQA Guidelines § 15268) |
|  | * 1. [ ]  Not a project.
 |  |
|  | * 1. [ ]  Emergency Project.
 | (Pub. Resources Code § 21080(b)(4); State CEQA Guidelines § 15269(b),(c)) |
|  | * 1. [ ]  Categorical Exemption.

 State type and section number: |  |
|  | * 1. [ ]  Declared Emergency.
 | (Pub. Resources Code § 21080(b)(3); State CEQA Guidelines § 15269(a)) |
|  | * 1. [ ]  Statutory Exemption.

 State Code section number: |       |
|  | * 1. [ ]  Other. Explanation:
 |  |
| 1. Reason why project was exempt:
 |  |
| 1. Lead Agency Contact Person:
 |  |
| Telephone: |  |
| 1. If filed by applicant: Attach Preliminary Exemption Assessment (Form “B”) before filing.
2. Has a Notice of Exemption been filed by the public agency approving the project? ⁭ Yes [ ]  ⁭ No [ ]
 |
| 1. Was a public hearing held by the Lead Agency to consider the exemption? ⁭ Yes [ ]  ⁭ No [ ]

If yes, the date of the public hearing was: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ⁭ [ ]  Signed by Lead Agency ⁭ [ ]  Signed by Applicant

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| Date Received for Filing:        |  |
| (Clerk Stamp Here) |  |

Authority cited: Sections 21083 and 21110, Public Resources Code.

Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.