		Р	rint	StartOver	Finalize&Email
		RECEIPT NUMBE		BER:	
		50 —	- 06/2	2/2020 —	082
STAT			STATE CLEARINGHOUSE NUMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.					
LEAD AGENCY	LEADAGENCY EMAIL			DATE	
City of Modesto				06/22/2020	
COUNTY/STATE AGENCY OF FILING	L			DOCUMENT I	NUMBER
Stanislaus			2020-082		
PROJECT TITLE					
City of Modesto Water Master Plan					
PROJECT APPLICANT NAME	PROJECT APPLICANT E	PROJECT APPLICANT EMAIL		PHONE NUMBER	
City of Modesto)			(209) 571	-5557
PROJECT APPLICANT ADDRESS	CITY		ATE	ZIP CODE	
1010 Tenth Street, Suite 4500	Modesto	C	Α	95353	
PROJECT APPLICANT (Check appropriate box)			_		_
✓ Local Public Agency School District	Other Special District	L	State Ag	jency	Private Entity
CHECK APPLICABLE FEES:					
☐ Environmental Impact Report (EIR)		\$3,343.2	5 \$		3,343.25
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,406.7	2 15		
☐ Certified Regulatory Program (CRP) document - payment due of	directly to CDFW	\$1,136.5			
☐ Exempt from fee					
☐ Notice of Exemption (attach)					
☐ CDFW No Effect Determination (attach)			,		
☐ Fee previously paid (attach previously issued cash receipt copy)				
☐ Water Right Application or Petition Fee (State Water Resources	Control Roard only)	\$850.0	n ¢		0.00
✓ County documentary handling fee	s Control Board offly)	φου.υ	0 \$ ₋		57.00
Other			\$		
PAYMENT METHOD:			Ψ -	AADA LOS	
☐ Cash ☐ Credit ☑ Check ☐ Other	TOTAL I	RECEIVE	D \$ _		3,400.25
Λ					
SIGNATURE	CY OF FILING PRINTED N	IAME ANI	O TITLE		
Jennine Creekmore, Deputy Clerk					