2019071070

Notice of Exemption

Appendix E

To: Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044

From: City of Santa Rosa 69 Stony Circle Santa Rosa, CA 95401

County Clerk County of Sonoma 585 Fiscal Drive, Room 103 Santa Rosa, CA 95403 This notice was posted on 07/17/2019 and will remain posted for a period of thirty days through 08/17/2019

Doc No.49-07172019-279

Project Title: Building Demolition

Project Applicant: City of Santa Rosa, Transportation and Public Works Department

Project Location - Specific: 1027 McMinn Ave, Santa Rosa, CA

Name of Public Agency Approving Project:	CITY OF SANTA ROSA		
Name of Person or Agency Carrying Out Project:	Grant Bailey, (707) 543-4508		
Exempt Status: (check one):			
☐ Ministerial (Sec. 21080(b) (1); 15268);	Deva Marie Proto, County Clerk		
☐ Declared Emergency (Sec. 21080(b) (3); 15269 (Betsy Penn, Deputy Clerk		
☐ Emergency Project (Sec. 21080(b) (4); 15269 (b)			
☐ Categorical Exemption. State type and section r	number: 15301 (L)		
☐ Statutory Exemptions. State code number:			
Reasons why project is exempt: Demolition and r Lead Agency Contact Person: Susie Murray, (707)			
If filed by applicant:			
1. Attach certified document of exemption fir	ding.		
2. Has a Notice of Exemption been filed by the	e public agency approving the project?		
□ Yes □ No			
Signature: Muwan Date: July 13	, 2019 Title: Environmental Coordinator		
⊠ Signed by Lead Agency ☐ Signed by	Applicant		

Governor's Office of Planning & Research

		RECEIPT NUM 49-0717201	
DEF MOTULATIONS ON DEVEDOE. TWO OR DRINT OF EARLY		STATE CLEAR	NGHOUSE NUMBER (If applicable)
EEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY CITY OF SANTA ROSA	LEAD AGENCY EMAIL		DATE 07/17/2019
COUNTY/STATE AGENCY OF FILING SONOMA			DOCUMENT NUMBER 19-0717-09
PROJECT TITLE BUILDING DEMOLITION			
PROJECT APPLICANT NAME CITY OF SANTA ROSA	PROJECT APPLICANT E	MAIL	PHONE NUMBER (707) 543-4348
PROJECT APPLICANT ADDRESS 1027 MC MINN AVE	CITY SANTA ROSA	STATE CA	ZIP CODE 95401
PROJECT APPLICANT (Check appropriate box) X Local Public Agency School District	Other Special District	State A	Agency Private Entity
CHECK APPLICABLE FEES: Environmental Impact Report (EIR) Mitigated/Negative Declaration (MND)(ND) Certified Regulatory Program (CRP) document - payment due of			
 ☑ 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 □ County documentary handling fee □ Other 	Control Board only)	\$850.00 \$ \$ \$	
PAYMENT METHOD: Cash Credit Check Cther	TOTALR	ECEIVED \$	\$50.00
De	CY OF FILING PRINTED NA y Penn, Deputy County		der