

CK#04.202865

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		RECI	EIPT NUMB	BER:	
			59 — 03/02/2020 — 017		
			ATE CLEARINGHOUSE NUMBER (If applicable)		
SEE INSTRUCTIONS ON DEVERSE TYPE OF PRINT OF EARLY			190990		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEADAGENCY EMAIL			DATE	
Caltrans District 4				03/02/2020	
COUNTY/STATE AGENCY OF FILING				DOCUMENT	
OPR/SCH					
PROJECT TITLE		Name of the last o			
State Route 29/ State Route 221 Soscol Junction					
PROJECT APPLICANT NAME  PROJECT APPLICANT E				PHONE NUMBER	
California Department of Transportation		-	-	(510) 286	6-5395
PROJECT APPLICANT ADDRESS	CITY		TATE	ZIP CODE	
111 Grand Ave	Oakland		CA	94612	
PROJECT APPLICANT (Check appropriate box)	7	_			
Local Public Agency School District	chool District Other Special District		State Agency Private Entity		Private Entity
CHECK APPLICABLE FEES:					
☐ Environmental Impact Report (EIR)		\$3,343	.25 \$		0.00
✓ Mitigated/Negative Declaration (MND)(ND)			-		0.400.75
☐ Certified Regulatory Program (CRP) document - payment due directly to CDFW		\$1,136			0.00
	-		· -		
☐ Exempt from fee					
☐ Notice of Exemption (attach)					
☐ CDFW No Effect Determination (attach)					
☐ Fee previously paid (attach previously issued cash receipt copy)	)				
	CONTRACTOR OF CONTRACTOR CONTRACTOR (				0.00
☐ Water Right Application or Petition Fee (State Water Resources	Control Board only)	\$850	.00 \$ _		0.00
County documentary handling fee			\$ _		
Other			\$ _		
PAYMENT METHOD:					2,406.75
☐ Cash ☐ Credit ☑ Check ☐ Other	TOTAL	RECEIV	ED \$ _		2,400.75
SIGNATURE AGEN	CY OF FILING PRINTED I	NAME AI	ND TITLE		
Meng Heu Date: 2020.03.02 13:19:35					
- 0 3000					