

2019120492

Notice of Exemption

Appendix E

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

County Clerk

County of: Humboldt

825 5th Street, 5th Floor

Eureka, CA 95501

From: (Public Agency): Humboldt Community Services District
5055 Walnut Dr.

Eureka, CA 95503tlatham@humboldtcsd.org

(Address)

(Email)

Project Title: Water Main Emergency Repair ProjectProject Applicant: Humboldt Community Services District

Project Location - Specific:

APN 305-031-011, lat 40.750719, long -124.187639

Project Location - City: near EurekaProject Location - County: Humboldt

Description of Nature, Purpose and Beneficiaries of Project:

Emergency repair of a water main break, to prevent a potential inability to provide potable water and fire protection flows. (Restore essential public service).

Name of Public Agency Approving Project: Humboldt Community Services DistrictName of Person or Agency Carrying Out Project: Humboldt Community Services District

Exempt Status: (check one):

- Ministerial (Sec. 21080(b)(1); 15268);
 Declared Emergency (Sec. 21080(b)(3); 15269(a));
 Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
 Categorical Exemption. State type and section number: _____
 Statutory Exemptions. State code number: 15269(b)

Reasons why project is exempt:

Project responded to unforeseen water main break. Immediate emergency repair necessary to ensure continued provision of essential public service (potable water/fire flows).

Lead Agency

Contact Person: Tim Latham, SuperintendentArea Code/Telephone/Extension: 707-443-4550

If filed by applicant:

1. Attach certified document of exemption finding.
 2. Has a Notice of Exemption been filed by the public agency approving the project? Yes No

Signature: T.L.Date: 12/18/19Title: INTERIM GENERAL MANAGER Signed by Lead Agency Signed by Applicant

Governor's Office of Planning & Research

Authority cited: Sections 21083 and 21110, Public Resources Code.
 Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR: **DEC 19 2019****12-2019-098** STATE CLEARINGHOUSE

Recorded - Official Records
 Humboldt County, California
 Kelly E. Sanders, Recorder
 Recorded by:

Pages: 1

revised 2011

Recording Fee: \$ 50.00
 Tax Fee: \$0.00
 Clerk: kt Total: \$50.00
 Dec 18, 2019 at 03:35:18

*** CONFORMED COPY ***



State of California - Department of Fish and Wildlife
2019 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (REV. 12/01/18) Previously DFG 753.5a

RECEIPT NUMBER: 12-2019-398
STATE CLEARINGHOUSE NUMBER (if applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY HUMBOLDT COMMUNITY SERVICES DISTRICT	LEAD AGENCY EMAIL TLATHAM@HUMBOLDTCS.D.	DATE 12/18/2019
COUNTY/STATE AGENCY OF FILING HUMBOLDT	DOCUMENT NUMBER 12-2019-398	

PROJECT TITLE
WATER MAIN EMERGENCY REPAIR PROJECT

PROJECT APPLICANT NAME HUMBOLDT COMMUNITY SERVICES DISTRICT	PROJECT APPLICANT EMAIL tlatham@humboldtcsd.org	PHONE NUMBER (707) 443-4550
PROJECT APPLICANT ADDRESS 5055 WALNUT DR	CITY EUREKA	STATE CA
		ZIP CODE 95503

PROJECT APPLICANT (Check appropriate box)

Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity


CHECK APPLICABLE FEES:

<input type="checkbox"/> Environmental Impact Report (EIR)	\$3,271.00	\$ _____
<input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)	\$2,354.75	\$ _____
<input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW	\$1,112.00	\$ _____
<input checked="" type="checkbox"/> Exempt from fee		
<input checked="" type="checkbox"/> Notice of Exemption (attach)		
<input type="checkbox"/> CDFW No Effect Determination (attach)		
<input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy)		
<hr/>		
<input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only)	\$850.00	\$ _____
<input checked="" type="checkbox"/> County documentary handling fee		\$ _____ \$50.00
<input type="checkbox"/> Other		\$ _____

PAYMENT METHOD:

Cash
 Credit
 Check
 Other

TOTAL RECEIVED \$ _____ \$50.00

SIGNATURE X 	AGENCY OF FILING PRINTED NAME AND TITLE K Tritten, Deputy County Clerk-Recorder
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