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 1-8-20and will remain posted for a period of thirty days through 2-9-20

Project Title: UFO Boiler Replacement Project Applicant: City of Santa Rosa, Transportation and Public Works Project Location – Specific: 35 Stony Point Rd Santa Rosa, CA 95401

Name of Public Agency Approving Project:CITY OF SANTA ROSAName of Person or Agency Carrying Out Project:Grant Bailey, (707) 543-4508Exempt Status: (check one):Complete Complete Complete

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: Class 1 Section 15301

□ Statutory Exemptions. State code number:

Reasons why project is exempt: Project will replace existing boilers (3) within a City building resulting in no expansion of the existing use.

Governor's Office of Planning & Research

JAN 14 2020

STATE CLEARINGHOUSE

Lead Agency Contact Person: Amy Nicholson, (707) 543-3258

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?

No Yes

Signature: MM Min M Date: 12 2 19 ____ Title: Environmental Coordinator

igtimes Signed by Lead Agency $\ \ \Box$ Signed by Applicant

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

RECEIPT NUMBER: 49-01082020-002

STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.					
LEAD AGENCY CITY OF SANTA ROSA	LEAD AGENCY EMAIL		DATE 01/08/2	DATE 01/08/2020	
COUNTY/STATE AGENCY OF FILING SONOMA			DOCUME 20-0108	NT NUMBER 3-01	
PROJECT TITLE UFO BOILER REPLACEMENT					
PROJECT APPLICANT NAME CITY OF SANTA ROSA TRANSPORTATION AND	PRÓJECT APPLICANT EMAIL			PHONE NUMBER (707))543-4508	
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE		
69 STONY CIR	SANTA ROSA	CA	95401		
PROJECT APPLICANT (Check appropriate box)			·		
X Local Public Agency School District	Other Special District	Sta	ate Agency	Private Entity	
CHECK APPLICABLE FEES: Environmental Impact Report (EIR) Mitigated/Negative Declaration (MND)(ND) Certified Regulatory Program (CRP) document - payment due Exempt from fee Notice of Exemption (attach) CDFW No Effect Determination (attach) Fee previously paid (attach previously issued cash receipt co		\$3,343.25 \$2,406.75 \$1,136.50	\$		
 Water Right Application or Petition Fee (State Water Resource County documentary handling fee Other 	es Control Board only)	\$850.00	\$ \$	\$50.00	
PAYMENT METHOD:	TOTAL	RECEIVED	\$	\$50.00	
	ENCY OF FILING PRINTED			· 	