## 2020030078

## **Notice of Exemption**

Appendix E

<b>To:</b> Office of Planning and Research P.O. Box 3044, Room 113	P.O. Box 3044, Room 113 Resource Conservation District of Monterey County				
Sacramento, CA 95812-3044	744-A La Guardia St., Salinas CA 93905				
County Clerk County of: Monterey 168 W. Alisal St. #1 Salinas, CA 93901	(Address)	FILED			
Project Title: Wave Rider Nursery: Stabilization		DEC 8 4 2019 STEPHEN L. VAGNINI			
Project Applicant: Chris Boggs, Wave Rider N	ursery Owner	MONTEREY COUNTY CLERK DEPUTY			
Project Location - Specific:		2019-0123			
Drainage area on western side of the Wave Rider	property, located at 145 Zabala Road, Salinas,	. CÁ, 93908			
Project Location - City: Salinas	Project Location - County: Monterey				
Description of Nature, Purpose and Beneficiaries Project safely conveys stormwater from nursery t installation of vegetated swale, armoured underg	o drainage ditch and reduces erosion. Project				
Name of Public Agency Approving Project: Resc Name of Person or Agency Carrying Out Project Exempt Status: (check one):		unty			
<ul> <li>□ Ministerial (Sec. 21080(b)(1); 15268);</li> <li>□ Declared Emergency (Sec. 21080(b)(3);</li> <li>□ Emergency Project (Sec. 21080(b)(4); 1</li> <li>□ Categorical Exemption. State type and s</li> <li>□ Statutory Exemptions. State code numb</li> </ul>		ations to Land			
Reasons why project is exempt: Project involves minor alteration to land to improbank stabilization improvements to significantly		y and provides			
Lead Agency Contact Person: Paul Robins	Area Code/Telephone/Extension: 83	31-975-7757			
	nding. the public agency approving the project?	(es □ No			
☑ Signed by Lead Agency ☑ Signed I	oy Applicant Gove	rnor's Office of Planning & Research			
Authority cited: Sections 21083 and 21110, Public Resourc Reference: Sections 21108, 21152, and 21152.1, Public Re	es Code. Date Received for filing at OPR: esources Code.	MAR 03 2020			

		RECEIPT	NUMB	ER:		
		27-120	42019	9-123		
		STATE CL	EARIN	IGHOUSE NU	MBER (If applicable)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.						
LEAD AGENCY	LEADAGENCY EMAIL			DATE		
RESOURCE CONSERVATION DISTRICT OF				12/04/2019		
COUNTY/STATE AGENCY OF FILING				DOCUMENT	NUMBER	
MONTEREY				2019-012	3	
PROJECT TITLE						
WAVE RIDER NURSERY: STABILIZATION PLAN FOR	DISTURBED AREAS					
PROJECT APPLICANT NAME	APPLICANT NAME PROJECT APPLICANT EMAIL			PHONE NUMBER		
CONTACT: PAUL ROBINS				(831) 975-	7757	
PROJECT APPLICANT ADDRESS	CITY	STATE		ZIP CODE		
744-A LA GUARDIA ST	SALINAS	CA		93905		
PROJECT APPLICANT (Check appropriate box)				I		
X Local Public Agency School District	Other Special District	s	tate Ag	ency	Private Entity	
CHECK APPLICABLE FEES:						
Environmental Impact Report (EIR)		\$3,271.00	\$			
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,354.75				
☐ Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,112.00	\$_			
⊠ Exempt from fee						
Notice of Exemption (attach)     —						
CDFW No Effect Determination (attach)						
Fee previously paid (attach previously issued cash receipt cop	oy) 					
☐ Water Right Application or Petition Fee (State Water Resource	es Control Board only)	\$850.00	\$			
☐ County documentary handling fee	oo oonaar baara amy	Ψ000.00	\$ - \$		\$50.00	
☐ Other			\$			
PAYMENT METHOD:			-			
☐ Cash	TOTAL F	RECEIVED	\$_		\$50.00 	
SIGNATURE AGE	NCY OF FILING PRINTED N	AME AND T	TLE			
X E	rik Rios, Deputy County	Clerk-Rec	order			
/ \					<u></u>	

		RECEIPT NUMBER:				
		27-1204	2019-123			
		STATE CL	EARINGHOL	JSE NUMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.						
LEAD AGENCY	LEADAGENCY EMAIL		DATE			
RESOURCE CONSERVATION DISTRICT OF			12/0	04/2019		
COUNTY/STATE AGENCY OF FILING MONTEREY			1	JMENT NUMBER 9-0123		
PROJECT TITLE						
WAVE RIDER NURSERY: STABILIZATION PLAN FO	OR DISTURBED AREAS					
PROJECT APPLICANT NAME	ROJECT APPLICANT NAME PROJECT APPLICANT EMAIL			PHONE NUMBER		
CONTACT: PAUL ROBINS			(831	1) 975-7757		
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP C	ODE		
744-A LA GUARDIA ST	SALINAS	CA	939	05		
PROJECT APPLICANT (Check appropriate box)			<b>.</b>			
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☒ County documentary handling fee			\$	\$50.00		
☐ Other			\$			
PAYMENT METHOD:				\$50.00		
☐ Cash     Credit   ☐ Check   ☐ Other	TOTAL	RECEIVED	\$	φου.υυ		
SIGNATURE _ A	GENCY OF FILING PRINTED I	NAME AND TI	TLE			
$\mathbf{x}$	Erik Rios, Deputy County	Clerk-Reco	order			