<b>To:</b> Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
County Clerk	
County of:	(Address)
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:  Description of Nature, Purpose and Benefic	
Description of Nature, 1 dipose and Deficit	sianos on inoject.
Name of Public Agency Approving Project:	
Name of Person or Agency Carrying Out P	roject:
Exempt Status: (check one):	
☐ Ministerial (Sec. 21080(b)(1); 1526	88);
☐ Declared Emergency (Sec. 21080)	(b)(3); 15269(a));
☐ Emergency Project (Sec. 21080(b)	
	and section number:
	number:
Reasons why project is exempt:	
Lead Agency Contact Person:	Area Code/Telephone/Extension:
If filed by applicant:	
<ol> <li>Attach certified document of exempt</li> </ol>	ion finding. d by the public agency approving the project?. □ Yes □ No
Signature: Michael McGowa	Date: Title:
☐ Signed by Lead Agency ☐ Sig	
authority cited: Sections 21083 and 21110, Public Re	

Governor's Office of Planning & Research

MAY 06 2020

