

Deva Marie Proto, County Clerk  
BY: Carrie Anderson  
Carrie Anderson, Deputy Clerk

This notice was posted on 05/12/2020  
and will remain posted for a period of thirty days  
through 06/12/2020

**Notice of Exemption**

**Doc No.49-05122020-125 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

**Project Title:** Emergency Well Pump Station - A Place to Play  
**Project Applicant:** *City of Santa Rosa, Transportation and Public Works Department*  
**Project Location – Specific:** *A Place to Play Park: 2375 West 3<sup>rd</sup> Street, Santa Rosa 95401*  
**Project Description:** *Design and construction of the well pump station and appurtenances associated with an Emergency Groundwater Well on the Southwest corner of A Place to Play Park.*

**Name of Public Agency Approving Project:** *City of Santa Rosa*  
**Name of Person or Agency Carrying Out Project:** *Erich Rauber, (707) 543-3847*  
**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: *15303: Class 3 – New Construction or Conversion of Small Structures*  
 Statutory Exemptions. State code number: Insert Number

**Reasons why project is exempt:** *Small building, minor grading paving and underground work associated with the project will not have a significant effect on the environment and thus is categorically exempt from CEQA*

**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?  
 Yes  No

Signature: *Amy Nichols* Date: *3/9/2020* Title: Environmental Coordinator

Signed by Lead Agency  Signed by Applicant

Governor's Office of Planning & Research



State of California - Department of Fish and Wildlife  
**2020 ENVIRONMENTAL FILING FEE CASH RECEIPT**  
 DFW 753.5a (REV. 12/01/19) Previously DFG 753.5a

|  |
|--|
| RECEIPT NUMBER:<br>49-05122020-125         |
| STATE CLEARINGHOUSE NUMBER (if applicable) |

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

|                                   |                   |                    |
|-----------------------------------|-------------------|--------------------|
| LEAD AGENCY<br>CITY OF SANTA ROSA | LEAD AGENCY EMAIL | DATE<br>05/12/2020 |
|-----------------------------------|-------------------|--------------------|

|   |                               |
|---|-------------------------------|
| COUNTY/STATE AGENCY OF FILING<br>SONOMA | DOCUMENT NUMBER<br>20-0512-03 |
|---|-------------------------------|

PROJECT TITLE  
EMERGENCY WELL PUMP STATION - A PLACE TO PLAY

|   |                         |                               |
|---|-------------------------|-------------------------------|
| PROJECT APPLICANT NAME<br>CITY OF SANTA ROSA TRANSPORTATION & | PROJECT APPLICANT EMAIL | PHONE NUMBER<br>(707)543-3847 |
|---|-------------------------|-------------------------------|

|  |                    |             |                   |
|--|--------------------|-------------|-------------------|
| PROJECT APPLICANT ADDRESS<br>69 STONY CIRCLE | CITY<br>SANTA ROSA | STATE<br>CA | ZIP CODE<br>95401 |
|--|--------------------|-------------|-------------------|

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)  | \$3,343.25 | \$ _____ |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)                                   | \$2,406.75 | \$ _____ |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,136.50 | \$ _____ |

- Exempt from fee  
 Notice of Exemption (attach)  
 CDFW No Effect Determination (attach)  
 Fee previously paid (attach previously issued cash receipt copy)

- |   |          |                  |
|---|----------|------------------|
| <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<br><i>X Carrie Anderson</i> | AGENCY OF FILING PRINTED NAME AND TITLE<br>Carrie Anderson, Deputy County Clerk-Recorder |
|---------------------------------------|--|

**Deva Marie Proto**  
**Sonoma County**  
**County Clerk, Recorder, Assessor**  
 585 Fiscal Drive, Suite 103  
 Santa Rosa, CA 95403  
 (707) 565-3800  
 sonomacounty.ca.gov/CRA

**Receipt: 20-30652**

| <b>Product</b>      | <b>Name</b>   | <b>Extended</b>    |
|---------------------|---|--------------------|
| FISH                | CLERK FISH AND WILDLIFE FILING                        | \$50.00            |
|                     | # Pages   | 1                  |
|                     | Document #  | 49-05122020-125    |
|                     | Document Info:  | CITY OF SANTA ROSA |
|                     | Filing Type   | NOE                |
|                     | No F&W Fee- prev paid (requires copy)                 | false              |
| <hr/>               |   |                    |
| <b>Total</b>        |   | <b>\$50.00</b>     |
| Tender (On Account) |   | \$50.00            |
| Account#            | 5220  |                    |
| Account Name        | CITY OF SANTA ROSA-CAPITAL PROJECTS ENGINEERING (CPE) |                    |
| Customer Name       | SUBMITTED BY AIMEE DAVIGNON                           |                    |
| Balance             | \$150.00  |                    |

Tell us how we're doing!!  
 Text SURVEY to 707-755-6777  
 (standard text msg rates may apply)  
 Dejenos saber como fue su servicio!!  
 Texte la palabra SURVEY a 707-755-6777  
 (cargos por mensajes de texto pueden aplicarse)

**5/12/20 3:44 PM canders1**  
**Clerk**