To: 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:	Project Location - County:	
Description of Nature, Purpose and Beneficia	aries of Project:	
Name of Person or Agency Carrying Out Pro Exempt Status: (check one): Ministerial (Sec. 21080(b)(1); 15268 Declared Emergency (Sec. 21080(b)(4) Emergency Project (Sec. 21080(b)(4) Categorical Exemption. State type a)(3); 15269(a));	
Lead Agency Contact Person:	Area Code/Telephone/Extension:	
If filed by applicant: 1. Attach certified document of exemptio 2. Has a Notice of Exemption been filed	on finding. by the public agency approving the project? Yes No	
Signature: Rolin Corboc-Em	Date: Title:	
☐ Signed by Lead Agency ☐ Sign	ned by Applicant	
Authority cited: Sections 21083 and 21110, Public Res Reference: Sections 21108, 21152, and 21152.1, Publ		

Jun 05 2020

STATE CLEARING HOUSE