## **Notice of Determination**

Appendix D

	Office of Planning and Resear U.S. Mail: P.O. Box 3044 Sacramento, CA 95812-3044 County Clerk County of: Calaveras Address: 891 Mountain Ran San Andreas, CA 95249	Street Address: 1400 Tenth St., Rm 113 Sacramento, CA 95814	From: Public Agency: City of Angels Address: P.O. Box 667 Angels Camp, CA 95222 Contact: Amy Augustine, AICP - C Phone: (209) 743-2323  Lead Agency (if different from above Same Address:	e):				
			Contact:Phone:					
	BJECT: Filing of Notice of L sources Code.	Determination in compli	ance with Section 21108 or 21152	of the Public				
Sta	te Clearinghouse Number (if	submitted to State Clearing	nghouse): 2020069030					
Pro	ject Title: RoofScreen							
Pro	ject Applicant: RoofScreen M	Mfg. by Ryan Bruce and L	ad Wallace					
Pro	eject Location (include county)	: Calaveras County, 688	Murphys Grade Rd., Angels Camp					
Pro	ject Description:							
Conditional Use Permit for project management, fulfillment and assembly operations for a light manufacturing facility in two buildings (an office and a manufacturing building) totaling approximately 19,000 square feet								
This is to advise that the City of Angels Planning Commission has approved the above ( Lead Agency or Responsible Agency)								
des			e following determinations regarding	g the above				
des	date cribed project.	)						
2. [ 3. N 4. A 5. A	A Negative Declaration was ditigation measures [ were were] A mitigation reporting or monit	Report was prepared for the project of the project	nis project pursuant to the provisional t pursuant to the provisions of CEQA ndition of the approval of the project as not] adopted for this project. was not] adopted for this project.	٩.				
neg <u>C</u> Sig	ative Declaration, is available	to the General Public at: 200 Monte Verda Street, Date Recei	Suite B, Angels Camp, CA 95222  Title: City Planner  ved for filing at OPR: 's Office of Planning & Research	(ENDORSED) FILED  County of Calaveras Rebecca Turner County Clerk-Recorder 05-2020-042				
	hority cited: Sections 21083, lerence Section 21000-21174	Public Resources Code.	Jul 24 2020 E CLEARING HOUSE	07/23/2020				

		05-202			
		STATE CL 202006		USE NUMBER (If applicable)	
EEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY LEAD AGENCY	LEADAGENCY EMAIL		DATE		
ANGELS CITY	tuolandplanner@gma	tuolandplanner@gmail.com		07/23/2020	
COUNTY/STATE AGENCY OF FILING CALAVERAS			DOC	UMENT NUMBER	
PROJECT TITLE					
ROOFSCREEN					
PROJECT APPLICANT NAME	PROJECT APPLICANT I	E <b>M</b> AIL	PHO	NE NUMBER	
ROOFSCREEN MFG BY RYAN BRUCE ANS LAD	tuolandplanner@gn	nail.com		) 743-2323	
PROJECT APPLICANT ADDRESS PO BOX 667	CITY ANGELS CAMP	STATE CA	ZIP 0 952		
PROJECT APPLICANT (Check appropriate box)					
Local Public Agency School District	Other Special District	St	ate Agency	X Private Entity	
CHECK APPLICABLE FEES:					
☐ Environmental Impact Report (EIR)		\$3,343.25	\$		
Mitigated/Negative Declaration (MND)(ND)		\$2,406.75	\$	\$2,406.75	
☐ 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	сору)				
☐ Water Right Application or Petition Fee (State Water Reso	urces Control Board only)	\$850.00	¢		
□ County documentary handling fee     □ County documentary ha	drees Control Board only)	ψ000,00	\$	\$50.00	
☐ Other			\$	***************************************	
PAYMENT METHOD:				\$2,456.75	
☐ Cash ☐ Credit 🖾 Check ☐ Other	TOTAL	RECEIVED	\$	Ψ2,100.10	
SIGNATURE A	GENCY OF FILING PRINTED I	NAME AND TI	TLE		
Beth Cole, Deputy County Clerk-Recorder					



## Rebecca Turner **Calaveras County** County Clerk-Recorder 891 Mountain Ranch Road San Andreas, CA 95249 (209) 754-6372 http://calaverasgov.us

Receipt: 20-6868

Product	Name	Extended
FISH	FISH AND WILDLIFE FILING	\$2,456.75
	# Pages	1
	Document #	05-2020-042
	Document Info:	ANGELS CITY
	Filing Type	ND
	No F & W Fee	false
	File Endorsed Label	3
Total		\$2,456.75
Tender (Check)		\$2,456.75
Paid By	AUGUSTINE PLANNING	

Check #

1214