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 Benefi	ciaries of Project:
Name of Public Agency Approving Project:	:
Name of Person or Agency Carrying Out F	Project:
Exempt Status: (check one):	
☐ Ministerial (Sec. 21080(b)(1); 152	,
☐ Declared Emergency (Sec. 21080	
☐ Emergency Project (Sec. 21080(b	, , , , , , , , , , , , , , , , , , , ,
	and section number:number:
Reasons why project is exempt:	Humber:
neasons why project is exempt.	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant:	
 Attach certified document of exemp 	
•	ed by the public agency approving the project? Yes No
Signature: Michael McGowe	Date:
☐ Signed by Lead Agency ☐ Si	
Authority cited: Sections 21083 and 21110, Public F Reference: Sections 21108, 21152, and 21152.1, Pu	

Governor's Office of Planning & Research

Sep 18 2020