P.O.	e of Planning and Research Box 3044, Room 113 amento, CA 95812-3044	From: (Public Agency):
Cou	nty Clerk	
Cou	nty of:	(Address)
Project Ti	tle:	
Project A	oplicant:	
Project Lo	ocation - Specific:	
Ducient		
	ocation - City:	Project Location - County:
Name of I	Person or Agency Carrying Out Project:	
Reasons	why project is exempt:	
Lead Age Contact F		Area Code/Telephone/Extension:
1. Att	applicant: ach certified document of exemption fin s a Notice of Exemption been filed by th	ding. he public agency approving the project? □ Yes □ No
Signature	: Michael McGowan [Date: Title:
	□ Signed by Lead Agency □ Signed b	Covernar's Office of Planning & Pessarch
	d: Sections 21083 and 21110, Public Resource ections 21108, 21152, and 21152.1, Public Re	

STATE CLEARING HOUSE