То:	Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044 County Clerk County of:	From: (Public Agency):		
		(Address)		
Proje	ect Title:			
Proje	ect Applicant:			
Proje	ect Location - Specific:			
	ect Location - City:		Location - County:	
Desc	cription of Nature, Purpose and Beneficia	aries of Project:		
	ne of Public Agency Approving Project: _ ne of Person or Agency Carrying Out Proj			
	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: Statutory Exemptions. State code number:			
Reas	sons why project is exempt:			
Lead Agency Contact Person:		Area C	ode/Telephone/Extension:	
	ed by applicant: 1. Attach certified document of exemption 2. Has a Notice of Exemption been filed		cy approving the project?. ☐ Yes ☐ No	
Sign	ature:	Date:	Title:	
	☐ Signed by Lead Agency ☐ Sign	ed by Applicant		
	ity cited: Sections 21083 and 21110, Public Resonce: Sections 21108, 21152, and 21152.1, Publi		Date Received for filing at OPR: Governor's Office of Planning & Research	

Oct 09 2020

STATE CLEARINGHOUSE