To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):
Sacramento, CA 95812-3044	
County Clerk	(Address)
County of:	(Address)
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	Project Location - County:
Description of Nature, Purpose and Beneficia	
Name of Bublic Assess Assessing Businets	
	ject:
Exempt Status: (check one):	GOI
☐ Ministerial (Sec. 21080(b)(1); 15268):
☐ Declared Emergency (Sec. 21080(b)	
☐ Emergency Project (Sec. 21080(b)(4	+); 15269(b)(c));
	nd section number:
	ımber:
Reasons why project is exempt:	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant: 1. Attach certified document of exemption 2. Has a Notice of Exemption been filed	n finding. by the public agency approving the project?. □ Yes □ No
Signature: Michael McGowan	Date: Title:
□ Signed by Lead Agency □ Sign	
Authority cited: Sections 21083 and 21110, Public Res	
Reference: Sections 21108, 21152, and 21152.1, Publi	

Governor's Office of Planning & Research

Oct 14 2020