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 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):	
☐ Ministerial (Sec. 21080(b)(1); 15268)):
□ Declared Emergency (Sec. 21080(b)	
☐ Emergency Project (Sec. 21080(b)(4	, , , , , ,
	nd section number: ımber:
Reasons why project is exempt:	mber.
rieasons why project is exempt.	
Lead Agency Contact Person:	Area Code/Telephone/Extension:
	Area Code/ rerephone/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: /s/ mery L McCaffer	<i>y</i> Date: Title:
☐ Signed by Lead Agency ☐ Sign	
Authority cited: Sections 21083 and 21110, Public Rese Reference: Sections 21108, 21152, and 21152.1, Public	