

JAN 13 2021

Notice of Exemption

Appendix E

TERRY A. HANSEN, Clerk
BY MANDY LUIS
Deputy Clerk

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

County Clerk
County of: Yuba
915 8th Street, #107
Marysville, CA 95901

From: (Public Agency): Reclamation District 784
1594 Broadway
Arboga, CA 95961

(Address)

Project Title: Unit 5 Levee Mile 1.59 Pipe Replacement

Project Applicant: Reclamation District 784

Project Location - Specific:

Unit 5 of the Horseshoe Levee, which is between Highway 65 and near Forty Mile Road

Project Location - City: Arboga Project Location - County: Yuba

Description of Nature, Purpose and Beneficiaries of Project:

The project will involve removing an existing 18" pipe and replacing that pipe with a new 18" pipe. The pipe must be replaced because DWR has determined the pipe likely to fail. The project will involve digging the old pipe out of the levee, replacing the pipe, and then backfilling the trench with the same soil.

Name of Public Agency Approving Project: Reclamation District 784

Name of Person or Agency Carrying Out Project: Reclamation District 784

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: Existing facilities 15301 and 15302
- ☒ Statutory Exemptions. State code number: PRC 21080.21 and Reg. 15282(k) Pipe replacement

Reasons why project is exempt:

The project involves no expansion of size or use. The project consists of typical maintenance work to replace a failing pipe. The project is of limited scope and duration.

Lead Agency
Contact Person: Patrick Meagher Area Code/Telephone/Extension: 530-742-0520

If filed by applicant:

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? ☐ Yes ☐ No

Signature: Patrick Meagher Date: 1/13/2021 Title: General Manager

☒ Signed by Lead Agency ☐ Signed by Applicant

Authority cited: Sections 21083 and 21110, Public Resources Code.
Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR: _____

2021FG-00002



State of California - Department of Fish and Wildlife
2021 ENVIRONMENTAL FILING FEE CASH RECEIPT
DFW 753.5a (REV. 01/01/21) Previously DFG 753.5a

RECEIPT NUMBER:
58 - 01132021 - 2
STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

| | | |
|---|---------------------------------|--------------------|
| LEAD AGENCY RECLAMATION DISTRICT 784 | LEAD AGENCY EMAIL | DATE 01/13/2021 |
| COUNTY/STATE AGENCY OF FILING YUBA | DOCUMENT NUMBER 2021FG-00002 | |

PROJECT TITLE
UNIT 5 LEVEE MILE 1.59 PIPE REPLACEMENT

| | | |
|--|-------------------------|--------------------------------|
| PROJECT APPLICANT NAME RECLAMATION DISTRICT 784 | PROJECT APPLICANT EMAIL | PHONE NUMBER (530) 742-0520 |
| PROJECT APPLICANT ADDRESS 1594 BROADWAY | CITY OLIVEHURST | STATE CA |
| | | ZIP CODE 95961 |

PROJECT APPLICANT (Check appropriate box)

☒ Local Public Agency ☐ School District ☐ Other Special District ☐ State Agency ☐ Private Entity

CHECK APPLICABLE FEES:

| | | |
|---|------------|----------|
| <input type="checkbox"/> Environmental Impact Report (EIR) | \$3,445.25 | \$ _____ |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$2,480.25 | \$ _____ |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,171.25 | \$ _____ |

☒ Exempt from fee
 ☒ Notice of Exemption (attach)
 ☐ CDFW No Effect Determination (attach)
☐ Fee previously paid (attach previously issued cash receipt copy)

| | | |
|---|----------|------------------|
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00 | \$ _____ |
| <input checked="" type="checkbox"/> County documentary handling fee | | \$ _____ \$50.00 |
| <input type="checkbox"/> Other 0.00 | | \$ _____ |

PAYMENT METHOD:

☐ Cash ☒ Credit ☐ Check ☐ Other **TOTAL RECEIVED** \$ _____ \$50.00

| | |
|---|---|
| SIGNATURE X <i>Mandy Luis, Deputy</i> | AGENCY OF FILING PRINTED NAME AND TITLE <i>Mandy Luis</i> Deputy |
|---|---|

01/13/2021

04:05 PM PST

YUBA COUNTY CLERK RECORDER
915 8TH STREET, SUITE 107
MARYSVILLE, CA 95901

TERMINAL NAME: E8077301

ORDER #: 119226053

PURCHASE

CLERK FEES \$50.00

AGENCY SUBTOTAL: \$50.00

LEXISNEXIS SERVICE FEE: \$2.50

TOTAL USD: \$52.50

Yuba County
Terry A. Hansen, County Clerk
and Recorder
915 8th Street, Suite 107
Marysville, CA 95901
(530) 749-7850

Receipt: 21-722

| Product Name | Extended |
|---|----------|
| FG CLERK FISH AND GAME FILINGS | \$50.00 |
| Document # 2021FG-00002 | |
| Filing Type ADMIN FEE (NOTICE OF EXEMPT) | |
| Total | \$50.00 |
| Tender (On Account) | \$50.00 |
| Account# VITALC | |
| Account Name VITALCHER CLERK | |
| Customer RECLAMATION DIST | |
| Name 784 | |
| Comment ML | |

Thank You for Your Business

1/13/21 4:05 PM counterclerk1
Workstation: REC123

CARD #: 0518 VISA
PAYMENT: CREDIT CHIP READ-CONTACT
MODE: ISSUER
MID: *****9867
TID: *****867
AUTH CODE: 03595G
VAL CODE: MMBK
TRAN REF #: 301014003467389
REC #: 0005
APP LABEL: VISA CREDIT
CVM: NO SIG REQUIRED
AID: A0000000031010
TC: 023D12A6BCC0F23
AMOUNT: \$52.50

*** CARD APPROVED ***

AMOUNT PAID:
\$52.50

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

RETAIN THIS COPY FOR
STATEMENT VERIFICATION

CUSTOMER COPY