## **Notice of Exemption**

## Appendix E

<b>To:</b> Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
County Clerk	
County of:	(Address)
<del></del>	
<del></del> -	
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	Project Location - County:
Description of Nature, Purpose and Beneficiari	
Name of Public Agency Approving Project:	
	ct:
Exempt Status: (check one):   Ministerial (Sec. 21080(b)(1); 15268);  Declared Emergency (Sec. 21080(b)(3))	3); 15269(a));
☐ Emergency Project (Sec. 21080(b)(4);	; 15269(b)(c));
	d section number:
☐ Statutory Exemptions. State code nun	nber:
Reasons why project is exempt:	
Lood Aconov	
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 by	
Visic Docare	_ Date: Title:
•	
Signed by Lead Agency Signed	d by Applicant
Authority cited: Sections 21083 and 21110, Public Resou Reference: Sections 21108, 21152, and 21152.1, Public	