To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):	
Sacramento, CA 95812-3044		
County Clerk County of:	(Address)	
	(Hadross)	
Project Title:		
Project Applicant:		
Project Location - Specific:		
Project Location - City:	Project Location - County:	
Description of Nature, Purpose and Beneficia		
Name of Public Agency Approving Project:		
Name of Person or Agency Carrying Out Proj	iect:	
Exempt Status: (check one):		
☐ Ministerial (Sec. 21080(b)(1); 15268)		
☐ Declared Emergency (Sec. 21080(b)		
 ☐ Emergency Project (Sec. 21080(b)(4 ☐ Categorical Exemption. State type as 	-); 15269(b)(c)); nd section number:	
	imber:	
Reasons why project is exempt:		
reaction may project to enompt.		
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:	Date: Title:	
☐ Signed by Lead Agency ☐ Signed	ed by Applicant	
Authority cited: Sections 21083 and 21110, Public Reso Reference: Sections 21108, 21152, and 21152.1, Publi		