To:	Office of Planning and Research U.S. Mail: Street Address:	From: Public Agency: <u>City of Woodlar</u> Address: <u>300 First Street</u> Woodland, CA 95695	Office	1	-068		
	P.O. Box 3044 1400 Tenth St., Rm	113 Contact: Mark Miller		<u>e</u>	-		-
	Sacramento, CA 95812-3044 Sacramento, CA 95	814 Phone: (530) 661-5968	ຫ 	corc	2		-
	County Clerk County of: Yolo	Lead Agency (if different from ab	v clerk		920		
	Address: 625 Court Street # B01 Woodland, California 95695	Address:	County	00 U		22	- - -
		Contact:		lir	80	2021 1 2530.25	, Deputy
		Phone:	<u> </u>	5.0	Ĩ	2021 1 253	
SUI Res	BJECT: Filing of Notice of Determination in co sources Code.	ompliance with Section 21108 or 21		Jesse Yolo (22	08/19/ FISH Pages: Fee: \$	By dho,
Stat	e Clearinghouse Number (if submitted to State C	learinghouse): 2021060290		Cit	<u>v of</u>	Wood	llan
Proj	ect Title: Yolo Bypass West Levee Culvert Repl	acement Project			AUG	1 9 20	21
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Proj	ect Applicant: City of Woodland			FI		NEER	
Proj Proj a si flow wid	ect Applicant: <u>City of Woodland</u> ect Location (include county): <u>County Road 22 a</u> ect Description: The City proposes to replace through the cast-in-place concrete culvert with four bays rs of 1,443 cubic feet per second. The cast-in-place e, and 8 feet tall with four 6-foot by 6-foot bays. C	ee 48-inch culverts in the City's Outfal to accommodate projected buildout s ice culvert will be approximately 115 fo Cast-in-place concrete headwalls will b	Chan torm c eet lon	nel wit Irainag g, 31 fi structe	HGII DIV h je eet d at	NEER /ISIO	ING
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Authority cited: Sections 21083, Public Resources Code. Reference Section 21000-21174, Public Resources Code. **POSTED** 8/19/21 TO

796 A.

RECEIPT NUMBER:	_
57-08192021-068	

STATE CLEARINGHOUSE NUMBER (If applicable) 2021060290

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.	2021060290			
LEADAGENCY	LEADAGENCY EMAIL		DATE	
MARK MILLER	mark.miller@cityofwoodland.org		08/19/2021	
COUNTY/STATE AGENCY OF FILING YOLO			DOCUMENT NUMBER	

PROJECT TITLE

YOLO BYPASS WEST LEVEE CULVERT REPLACEMENT PROJECT

PROJECT APPLICANT NAME	PROJECT APPLICANT	EMAIL		PHONE NUM	IBER
CITY OF WOODLAND	mark.miller@cityof	mark.miller@cityofwoodland.org		(530) 661-5968	
PROJECT APPLICANT ADDRESS	CITY	STATE		ZIP CODE	
300 FIRST STREET	WOODLAND	CA		95695	
PROJECT APPLICANT (Check appropriate box)					
X Local Public Agency School District	Other Special District	s	tate Age	ency	Private Entity
CHECK APPLICABLE FEES:					
Environmental Impact Report (EIR)		\$3,445.25	\$		
Mitigated/Negative Declaration (MND)(ND)		\$2,480.25	\$		\$2,480.25
Certified Regulatory Program (CRP) document - payment	nt 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 receivable) 	pt copy)				
 Water Right Application or Petition Fee (State Water Res County documentary handling fee Other 	sources Control Board only)	\$850.00	\$ \$ \$	\$50.00	
PAYMENT METHOD:					
🗋 Cash 🔲 Credit 🛛 Check 🔲 Other	TOTAL	RECEIVED	\$ _	\$2,530.25	
SIGNATURE	AGENCY OF FILING PRINTED		TLE		
X 22	Dania Ho, Deputy County	Clerk-Reco	order		