P.O. Box 3044, Room 113 Sacramento, CA 95812-3044 County Clerk County of: (Address) Project Title:
County of: (Address) Project Title:
Project Title:
Project Title:
Project Applicant:
Project Location - Specific:
Project Location - City: Project Location - County:
Description of Nature, Purpose and Beneficiaries of Project:
Name of Dublic Assess Assessing Ducinet
Name of Public Agency Approving Project:
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: □ Statutory Exemptions. State code number:
Reasons why project is exempt:
rieasons why project is exempt.
Lead Agency Contact Person:
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: Michael McGowan Date: Title:
□ Signed by Lead Agency □ Signed by Applicant
Authority cited: Sections 21083 and 21110, Public Resources Code. Date Received for filing at OPR: