F	Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
C	County Clerk	
C	County of:	(Address)
-		
_		
Projec	t Title:	
Projec	t Applicant:	
Projec	t Location - Specific:	
Projec	t Location - City:	Project Location - County:
Description of Nature, Purpose and Beneficiaries of Project:		
Name of Public Agency Approving Project:		
Name of Person or Agency Carrying Out 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:		
	Agency	Area Code/Telephone/Extension:
Contac	ct Person:	
1.	 by applicant: Attach certified document of exemption fir Has a Notice of Exemption been filed by t 	nding. the public agency approving the project? \Box Yes \Box No
Signat	ure: Matthew Dulcich	Date: Title:
	□ Signed by Lead Agency □ Signed	by Applicant
A		
Authority cited: Sections 21083 and 21110, Public Resources Code. Date Received for filing at OPR:		