To: Office of Planning and Research P.O. Box 3044, Room 212	From: (Public Agency)			
Sacramento, CA 95812-3044				
County Clerk County of	(Address)			
	-			
Project Title:				
Project Location - Specific:				
Project Location – City:	Project Location – County:			
Description of Nature, Purpose and Beneficiaries of Pro-	oject:			
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(Emergency Project (Sec. 21080(b)(4); 15269(b)(Categorical Exemption. State type and section in Statutory Exemptions. State code number:)(c));			
Reasons why project is exempt:				
Lead Agency				
Contact Person:	Area Code/Telephone/Extension:			
If filed by applicant:1. Attach certified document of exemption finding2. Has a Notice of Exemption been filed by the pu		Yes	No	
Signature: Robin Carthe - Erwin	Date: Title: _			
☐ Signed by Lead Agency ☐ Signed by Applicant ☐ Date receives	ved for filing at OPR:			Revised 2005