To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):	
Sacramento, CA 95812-3044		
County Clerk	(Address)	
County of:	(Auticss)	
Project Title:		
Project Applicant:		
Project Location - Specific:		
Project Location - City:	Project Location - County:	
Description of Nature, Purpose and Benefic	iaries of Project:	
Name of Public Agency Approving Project		
	oject:	
Exempt Status: (check one):	·)	
□ Ministerial (Sec. 21080(b)(1); 1526	8);	
Declared Emergency (Sec. 21080(b)	o)(3); 15269(a));	
Emergency Project (Sec. 21080(b))		
	and section number:	
Reasons why project is exempt:	uniber	
neasons why project is exempt.		
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	on finding. I by the public agency approving the project?. □ Yes □ No	
Signature: Michael McGowa	<i>m</i> _ Date: Title:	
□ Signed by Lead Agency □ Sig		
Authority cited: Sections 21083 and 21110, Public Re Reference: Sections 21108, 21152, and 21152.1, Pub		