To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency): North Coast County Water District 2400 Francisco Boulevard		
Sacramento, CA 95812-3044	Pacifica CA, 94044		
County Clerk County of: San Mateo	(Address)		
555 County Center	( iddress) ENDORSED		
Redwood City, CA 94063	IN THE OFFICE OF THE COUNTY CLERK RECORDER SAN MATEO COUNTY CALIF		
Project Title: Sheila Tank Replacement Proj	FEB 2.3 2022		
Project Applicant: North Coast County Wate	or District		
Project Location - Specific:	By Deputy Clerk		
The project site is located at 1139 Sheila Lane in			
Project Location - City: Pacifica  Description of Nature, Purpose and Beneficiari			
Please see attached Addendum.			
Name of Public Agency Approving Project: No. Name of Person or Agency Carrying Out Project Exempt Status: (check one):  Ministerial (Sec. 21080(b)(1); 15268); Declared Emergency (Sec. 21080(b)(3); Emergency Project (Sec. 21080(b)(4); Categorical Exemption. State type and Statutory Exemptions. State code num	3); 15269(a));		
Please see attached Addendum.  Lead Agency Contact Barrage Adrianne Carr	Area Code/Telephone/Extension: (650) 355-3462		
Contact Person: Authorities Carr	Area Code/Telephone/Extension: (650) 353-3462		
	the public agency approving the project?     Yes   No		
Authority cited: Sections 21083 and 21110, Public Resou Reference: Sections 21108, 21152, and 21152.1, Public I			

## State of California - Department of Fish and Wildlife 2022 ENVIRONMENTAL DOCUMENT FILING FEE **CASH RECEIPT**

DFVV 753.5a (REV. 01/01/22) Previously DFG 753.5a		Print		StartOver	Save	
		RECEIPT N	VI IMBE	ER.		
			02/23/		987	
					BER (If applicable)	
		DIAIL OLL		OF TOOOL TOOK	JEIN (III applicable)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEAD AGENCY EMAIL		Ir	DATE		
North Coast County Water District	LADAGENCT EMAIL			02/23/2022		
COUNTY/STATE AGENCY OF FILING				DOCUMENT NU		
San Mateo			128220			
PROJECT TITLE						
Sheila Tank Replacement Project PROJECT APPLICANT NAME	IDDO IFOT ADDI IQANT F		le le			
	PROJECT APPLICANT EMAIL			PHONE NUMBER		
Adrianne Carr				(650) 355-3462		
PROJECT APPLICANT ADDRESS	CITY	STATE	ľ	ZIP CODE		
PROJECT APPLICANT (Check appropriate box)						
Local Public Agency School District	Other Special District	☐ Sta	ite Age	ency [	Private Entity	
CHECK APPLICABLE FEES:						
☐ Environmental Impact Report (EIR)		\$3,539.25	\$_		0.00	
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,548.00	\$_		0.00	
☐ Certified Regulatory Program (CRP) document - payment due d	lirectly to CDFW	\$1,203.25	\$ _		0.00	
<ul> <li>☑ Exempt from fee</li> <li>☑ Notice of Exemption (attach)</li> <li>☐ CDFW No Effect Determination (attach)</li> <li>☐ Fee previously paid (attach previously issued cash receipt copy)</li> </ul>	)					
☐ Water Right Application or Petition Fee (State Water Resources	Control Board only)	\$850.00	\$		0.00	
	,,	<b>*</b>	* — \$		50.00	
Other			\$			
PAYMENT METHOD:						
☐ Cash ☐ Credit ☑ Check ☐ Other	TOTAL R	ECEIVED	\$_		50.00	
	cy of filing printed na		LE			

ORIGINAL - PROJECT APPLICANT

## County of San Mateo Assessor-County Clerk-Recorder Mark Church

555 County Center Redwood City, CA, 94063

Finalization 2022013965 2/23/22 3:10 pm 022 89

ltem	Title	
1 Docu	EIR Administrative Fee ment ID	Amount
DOC#	‡ 2022-000028	50.00
Total		50.00
Paym	ent Type	Amount
Check # 33	tendered 446	50.00

THANK YOU
PLEASE RETAIN THIS RECEIPT
FOR YOUR RECORDS

0.00

Amount Due