To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):
Sacramento, CA 95812-3044	
County Clerk County of:	(Address)
	(33 332)
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 Approving Ducients	
	ect:
Exempt Status: (check one):	50t
☐ Ministerial (Sec. 21080(b)(1); 15268):	,
☐ Declared Emergency (Sec. 21080(b))	(3); 15269(a));
☐ Emergency Project (Sec. 21080(b)(4)	
	nd section number:mber:
Reasons why project is exempt:	
Lead Agency Contact Person:	Area Code/Telephone/Extension:
If filed by applicant:	
 Attach certified document of exemption 	infinding. by the public agency approving the project? ☐ Yes ☐ No
·	
Signature:	Date: Title:
☐ Signed by Lead Agency ☐ Signed	ed by Applicant
Authority cited: Sections 21083 and 21110, Public Reso Reference: Sections 21108, 21152, and 21152.1, Public	