10:	P.O. Box 3044, Room 212	From: (Public Agency)			
	Sacramento, CA 95812-3044				
	County Clerk County of	(Address)			
Proje	ect Title:				
Proje	ect Location - Specific:				
Proje	ect Location – City:	Project Location – County:			
Desc	ription of Nature, Purpose and Beneficiaries of Project:				
	e of Public Agency Approving Project:				
	e of Person or Agency Carrying Out Project:				
Exen	mpt 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:				
Reas	ons why project is exempt:				
	Agency cact Person:	Area Code/Telephone/Extension:			
	ed by applicant:  1. Attach certified document of exemption finding.  2. Has a Notice of Exemption been filed by the public ago	ency approving the project?	Yes	No	
Sign	ature: Robin Catter - Ewin	Date: Title:			
	☐ Signed by Lead Agency ☐ Date received for ☐ Signed by Applicant	filing at OPR:			Revised 2005