DFW 753.5a (REV. 01/01/22) Previously DFG 753.5a

			RECEIPT NUMBER: 49-09202022-405  STATE CLEARINGHOUSE NUMBER (If applicable)			
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.						
LEAD AGENCY CITY OF SANTA ROSA	LEADAGENCY EMAIL	-		DATE 09/20/2022		
COUNTY/STATE AGENCY OF FILING SONOMA			DOCUMENT NUMBER 22-0920-03			
PROJECT TITLE 2022 PAVEMENT MARKINGS				<u> </u>		
PROJECT APPLICANT NAME CITY OF SANTA ROSA TRANSPORTATION AND	PROJECT APPLICANT	PROJECT APPLICANT EMAIL		PHONE NUMBER (707) 543-3838		
PROJECT APPLICANT ADDRESS 69 STONY CIR	CITY SANTA ROSA	STATE <b>CA</b>		ZIP CODE 95401		
PROJECT APPLICANT (Check appropriate box)						
▼ Local Public Agency	Other Special District	Other Special District State A			Private Entity	
CHECK APPLICABLE FEES:  Environmental Impact Report (EIR)  Mitigated/Negative Declaration (MND)(ND)  Certified Regulatory Program (CRP) document - payment due directly to CDFW  Exempt from fee			\$ .			
Notice of Exemption (attach)						
☐ CDFW No Effect Determination (attach) ☐ Fee previously paid (attach previously issued cash receipt co	рру)					
<ul> <li>□ Water Right Application or Petition Fee (State Water Resources Control Board only)</li> <li>□ County documentary handling fee</li> <li>□ Other</li> </ul>			\$ . \$ . \$ .		\$50.00	
PAYMENT METHOD:  ☐ Cash ☐ Credit ☐ Check K Other TOTAL			\$ .		\$50.00	
	ENCY OF FILING PRINTED I			order		