		RECEIPT NUME	BER:
		04-10262023-093	
		STATE CLEARI	NGHOUSE NUMBER (If application
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINTCLEARLY.			
LEADAGENCY L	EADAGENCY EMAIL		DATE
OROVILLE CITY			10/26/2023
COUNTY/STATE AGENCY OF FILING			DOCUMENT NUMBER
BUTTE			70
PROJECT TITLE			
FEATHER RANCH SUBDIVISION PROJECT			
THE STATE APPLICANT NAME	PROJECT APPLICANT EM	1AIL	PHONE NUMBER
TROCEST AN ELECTRIC TO MALE	11002017412107401211114		(530) 538-2408
MD3 INVESTMENTS	CITY	STATE	ZIP CODE
PROJECT APPLICANT ADDITESS	OROVILLE	CA	95965
1733 MONTOOMERT OT	ONOVILLE		
PROJECT APPLICANT (Check appropriate box) (X Local Public Agency School District	Other Special District	State A	gency Private Enti
-			
CHECK APPLICABLE FEES:	•	3,839.25 \$	\$3,839.25
H Environmental Impact Report (EIR)		\$2,764.00 \$	
☐ Mitigated/Negative Declaration (MND)(ND)			
☐ Certified Regulatory Program (CRP) document - payment due dir	ectly to ODI W	1,000.20	
Exempt from fee			
☐ Notice of Exemption (attach)			
□ CDFW No Effect Determination (attach)			
Fee previously paid (attach previously issued cash receipt copy)			
	O stad Board anha	\$ 850.00 \$	
☐ Water Right Application or Petition Fee (State Water Resources 0	Control Board only)		\$50.00
K] County documentary handling fee		\$50.00 \$	
Other		Ψ	
PAYMENT METHOD: ☐ Cash	TOTAL RI	ECEIVED \$	\$3,889.25
		14E ALIE TITLE	
	CY OF FILING PRINTED NA		
X A- Busslin Reno	Reno Besseghini, Deputy County Clerk-Recorder		