To: Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
County Clerk	
County of:	(Address)
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	Project Location - County:
Description of Nature, Purpose and Beneficiaries of Project:	
Name of Public Agency Approving Project:	
Name of Person or Agency Carrying Out Pr	oject:
Exempt Status: (check one):	
□ Ministerial (Sec. 21080(b)(1); 1526	3);
Declared Emergency (Sec. 21080(
 Emergency Project (Sec. 21080(b)) Categorical Exemption. State type a 	
	and section number:
Reasons why project is exempt:	
ricusons why project is exempt.	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant:	
1. Attach certified document of exemption	
711 5	I by the public agency approving the project? Yes No
Signature: Mariam Farrar	Date: Title:
□ Signed by Lead Agency □ Sig	ned by Applicant
Authority cited: Sections 21083 and 21110, Public Re Reference: Sections 21108, 21152, and 21152.1, Pub	