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 Location - Specific:	
	Project Location - County:
Description of Nature, Purpose and Benef	iciaries of Project:
Name of Dublic Assess Assession Ducies	
	::
	Project:
Exempt Status: (check one):	
 Ministerial (Sec. 21080(b)(1); 152 Declared Emergency (Sec. 21080 	
□ Emergency Project (Sec. 21080(b)	
	e and section number:
	number:
Reasons why project is exempt:	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant: 1. Attach certified document of exemp 2. Has a Notice of Exemption been file	otion finding. ed by the public agency approving the project? \Box Yes \Box No
1.	Date: Title:
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\Box Signed by Lead Agency \Box S	igned by Applicant
Authority cited: Sections 21083 and 21110, Public F Reference: Sections 21108, 21152, and 21152.1, P	