To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):
Sacramento, CA 95812-3044	
County Clerk County of:	(Address)
	(riddioss)
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	
Description of Nature, Purpose and Benefic	ciaries of Project:
Name of Public Agency Approving Project:	
Name of Person or Agency Carrying Out Pr	roject:
Exempt Status: (check one):	
 ☐ Ministerial (Sec. 21080(b)(1); 1526 ☐ Declared Emergency (Sec. 21080(•
☐ Emergency Project (Sec. 21080(b)	
☐ Categorical Exemption. State type	and section number:
☐ Statutory Exemptions. State code i	number:
Reasons why project is exempt:	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant: 1. Attach certified document of exempti 2. Has a Notice of Exemption been filed	ion finding. d by the public agency approving the project? □ Yes □ No
Signature:	Date: Title:
/// □ Signed by Lead Agency □ Sig	
Authority cited: Sections 21083 and 21110, Public Reference: Sections 21108, 21152, and 21152.1, Pu	