

# Shortened Review Request Form

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(To be filled out and signed by the **Lead Agency** and submitted with DEIR or Negative Declaration to SCH)

To: State Clearinghouse  
P.O. Box 3044  
Sacramento, CA 95812-3044

From: City of San Jose  
Lead Agency 200 East Santa Clara Street  
Address San Jose, CA 95113  
Phone #: (408 ) 535-6872

SCH # \_\_\_\_\_ Contact: Reema Mahamood

Project Title: Evans Lane Urban Residential General Plan Amendment

Project Location: San Jose, CA Santa Clara  
*City* *County*

Explain "exceptional circumstances" (CEQA, Section 15205(d)) for requesting a shortened review. Identify which of the 5 criteria in Appendix K are met for this project.

A 20-day circulation period is requested because (1) the project is not requesting state agency review and (2) the project is not of Statewide/regional/area-wide significance.

List responsible and trustee state agencies with contact person, phone number and date of consent for the shortened review, as well as any agencies that have commented on the project (attach additional pages, if necessary):

N/A

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As designated representative for the lead agency, I verify, in their behalf, that there is no "statewide, regional, or areawide significance" to this project.

Length of review being requested: 20 days

6/12/2020 Reema Mahamood  
Today's Date Print Name Signature