

2020070407

Notice of Exemption**Appendix E**

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

County Clerk

County of: Sonoma

From: (Public Agency): County of Sonoma
Permit and Resource Management Department
2550 Ventura Avenue, Santa Rosa, CA 95403

(Address)

Project Title: Certificate of ModificationProject Applicant: Michael Kovac, 1414 Chautauqua Blvd, Pacific Palisades CA 90272

Project Location - Specific:

2272 Upper Nelligan Lane, Glen Ellen (APN 053-030-023)Project Location - City: unincorporated Sonoma County Project Location - County: Sonoma County

Description of Nature, Purpose and Beneficiaries of Project:

Request for Certificate of Modification (CMO) to modify an existing building setback line from 200 feet to 100 feet from the northern property line and 140 feet from the western property line. The proposed CMO is to reduce grading and potential visual impacts in order to accommodate a new accessory dwelling unit / agricultural building and a new primary dwelling unit.

Name of Public Agency Approving Project: County of Sonoma, Permit & Resource Management Dept.Name of Person or Agency Carrying Out Project: Michael KovacExempt Status: **(check one):**

- Ministerial (Sec. 21080(b)(1); 15268);
- Declared Emergency (Sec. 21080(b)(3); 15269(a));
- Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
- Categorical Exemption. State type and section number: Minor Alterations in Land Use Limitations, Sec. 15305
- Statutory Exemptions. State code number: _____


Reasons why project is exempt:

1. The project site has an average slope of less than 20%
2. The project would not result in any changes in land use or density

Lead Agency

Contact Person: Nina Bellucci Area Code/Telephone/Extension: (707) 565-1236**If filed by applicant:**

1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? Yes No

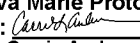
Signature:  Date: July 21, 2020 Title: Planner II Signed by Lead Agency Signed by Applicant**Governor's Office of Planning & Research**

Authority cited: Sections 21083 and 21110, Public Resources Code.
Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR: **Jul 21 2020****STATE CLEARINGHOUSE**

This notice was posted on 07/21/2020
and will remain posted for a period of thirty days
through 08/21/2020

Doc No.49-07212020-225

Deva Marie Proto, County Clerk
BY: 
Carrie Anderson, Deputy Clerk



State of California - Department of Fish and Wildlife
2020 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (REV. 12/01/19) Previously DFG 753.5a

RECEIPT NUMBER: 49-07212020-225
STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY COUNTY OF SONOMA PERMIT & RESOURCE MANAGEMENT	LEAD AGENCY EMAIL	DATE 07/21/2020
COUNTY/STATE AGENCY OF FILING SONOMA	DOCUMENT NUMBER 20-0721-01	

PROJECT TITLE
CERTIFICATE OF MODIFICATION

PROJECT APPLICANT NAME MICHAEL KOVAC	PROJECT APPLICANT EMAIL	PHONE NUMBER (707) 565-1236
PROJECT APPLICANT ADDRESS 1414 CHAUTAUQUA BLVD	CITY PACIFIC PALISADES	STATE CA
		ZIP CODE 90272

PROJECT APPLICANT (Check appropriate box)

Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity

CHECK APPLICABLE FEES:

<input type="checkbox"/> Environmental Impact Report (EIR)	\$3,343.25	\$ _____
<input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)	\$2,406.75	\$ _____
<input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW	\$1,136.50	\$ _____
<input checked="" type="checkbox"/> Exempt from fee		
<input checked="" type="checkbox"/> Notice of Exemption (attach)		
<input type="checkbox"/> CDFW No Effect Determination (attach)		
<input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy)		
<input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only)	\$850.00	\$ _____
<input checked="" type="checkbox"/> County documentary handling fee		\$ 50.00
<input type="checkbox"/> Other		\$ _____

PAYMENT METHOD:

Cash
 Credit
 Check
 Other

TOTAL RECEIVED \$ 50.00

SIGNATURE <i>x Carrie Anderson</i>	AGENCY OF FILING PRINTED NAME AND TITLE Carrie Anderson, Deputy County Clerk-Recorder
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