



CITY OF MARTINEZ

525 Henrietta Street, Martinez, CA 94553-2394

Community Development Department

(925)372-3515 | Fax (925)372-0257

2021-00463

FILED

December 2, 2021
DEBORAH COOPER
CLERK-RECORDER

By 
Deputy clerk

(Con)

NOTICE OF EXEMPTION

Date: December 2, 2021

To: Contra Costa County Clerk-Recorder
555 Escobar Street
Martinez, CA 94553

Office of Planning and Research
1400 Tenth Street, Room 121
Sacramento, CA 95814

Project Title: Waterfront Park Field 5 Improvements
Project Location: Tarantino Drive, Martinez, CA 94553
Assessor's Parcel No.: 373-050-006

Project Applicant: City of Martinez – Community Development Department
525 Henrietta Street, Martinez, CA 94553
Tel: (925) 372-3524

Lead Agency: Same as project applicant

Lead Agency Contact: Hector J. Rojas, AICP, Planning Manager
Tel: (925) 372-3524 | Email: hrojas@cityofmartinez.org

Project Description: The proposed project includes upgrading the existing practice/play field with a new infield, backstop, and shade coverings over the dugouts. Additionally, the project includes options for grading and field irrigation improvements both at Waterfront Field 5 and the larger multi-purpose field to the east.

Exempt Status:

- Ministerial (Section 21080(b)(1); 15268);
- Declared Emergency (Section 21080(b)(3); 15269(a));
- Emergency Project (Section 21080(b)(4); 15269(b)(c));
- Categorical Exemption: Class 1 "Existing Facilities"
- Statutory Exemption:

Reason(s) why Project is Exempt:

The proposed project qualifies for the above CEQA exemption because it involves the repair, maintenance, and minor alteration of existing public structures, facilities, mechanical equipment, or topographical features, involving negligible or no expansion of the existing park use.

Signature:  _____

Hector J. Rojas, AICP
Planning Manager
City of Martinez

Date: 12/2/21 _____



State of California - Department of Fish and Wildlife
2021 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (REV. 01/01/21) Previously DFG 753.5a

Print **StartOver** **Finalize&Email**

RECEIPT NUMBER:
 07-12/02/2021-483
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY CITY OF MARTINEZ	LEAD AGENCY EMAIL	DATE 12/02/2021
COUNTY/STATE AGENCY OF FILING CONTRA COSTA COUNTY	DOCUMENT NUMBER 2021-00463	

PROJECT TITLE

 WATERFRONT PARK FIELD 5 IMPROVEMENTS

PROJECT APPLICANT NAME CITY OF MARTINEZ	PROJECT APPLICANT EMAIL	PHONE NUMBER (925) 372-3524
PROJECT APPLICANT ADDRESS 525 HENRIETTA STREET	CITY MARTINEZ	STATE CA
		ZIP CODE 94553

PROJECT APPLICANT (Check appropriate box)

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


CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) \$ 3,445.25 \$ _____
- Mitigated/Negative Declaration (MND)(ND) \$ 2,480.25 \$ _____
- Certified Regulatory Program (CRP) document - payment due directly to CDFW \$ 1,171.25 \$ _____
- Exempt from fee
 - Notice of Exemption (attach)
 - CDFW No Effect Determination (attach)
- Fee previously paid (attach previously issued cash receipt copy)
- Water Right Application or Petition Fee (State Water Resources Control Board only) \$ 850.00 \$ _____
- County documentary handling fee \$ 50.00 \$ 50.00
- Other \$ _____

PAYMENT METHOD:

Cash Credit Check Other

TOTAL RECEIVED \$ 50.00

SIGNATURE X 	AGENCY OF FILING PRINTED NAME AND TITLE Lara Jeffrey Deputy Clerk
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Rec: 245799

Deborah Cooper
Contra Costa County
Clerk-Recorder
555 Escobar Street
Martinez, CA 94553
(925) 335-7900

Public

Receipt No.: 202100245798

Cashier: 212

Register: WINDOW7

Date/Time: 12/02/2021 09:43 AM

Description	Fee
NOTICE OF EXEMPTION	
Filing Time:	09:43 AM
Filing Total:	\$50.00
Filing Fee:	\$50.00
Total Amount Due:	\$50.00
Total Paid	
Credit Card Tendered:	\$50.00
#5844	
Amount Due:	\$0.00

THANK YOU
PLEASE KEEP FOR REFERENCE



12-02-2021 09:42 AM PST

CONTRA COSTA COUNTY RECORDER
555 ESCOBAR ST
MARTINEZ, CA 94553

TERMINAL ID#: 16182801

ORDER# 135467749

PURCHASE

RECORDER COUNTER PAYMENT \$50.00

AGENCY SUBTOTAL: \$50.00

LEXISNEXIS SERVICE FEE: \$2.50

TOTAL DUE: \$52.50

CARD #: 0894 VISA
PAYMENT: CREDIT CHIP READ CONTACT
NO. : ISSUER
AUTH CODE : 036152
VAL CODE : 4110
TRAN REF #: 301326637206352
REC #: 0004
APP LABEL: VISA CREDIT
CVN: NO SIG REQUIRED
AID: 0000000000000000
AOC: 901154430351453B
AMOUNT: \$52.50

*** CARD APPROVED ***

AMOUNT PAID:

\$52.50

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

RETAIN THIS COPY FOR
STATEMENT VERIFICATION

CUSTOMER COPY