

NOTICE OF EXEMPTION

(For filing pursuant to Public Resources Code, Section 21152)

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

FROM: (Lead Agency)
ALAMEDA COUNTY PUBLIC WORKS AGENCY
399 Elmhurst Street
Hayward, CA 94544

ENDORSED
FILED
ALAMEDA COUNTY

FEB 25 2022

X Alameda County Clerk-Recorder
1106 Madison Street, 1st Floor
Oakland, CA 94607

MELISSA WILK, County Clerk
By [Signature] Deputy

Project Title: Improvements on Crow Canyon Road at Various Locations, Eden Township, Alameda County

Project Location - Specific: The proposed project is located at various locations from East Castro Valley Boulevard to the Alameda/Contra Costa County Line, Eden Township, Alameda County, California.

Project Location - City: N/A Project Location - County: Alameda

Description of, Nature, and Purpose of Project: The proposed project would consist of roadway reconstruction, milling and resurfacing, and crack sealing. Additional work include replacing existing culverts, outfall and inlet structures at mile posts 5.83, 5.91, and 6.10; repairing and resurfacing roadway shoulders (not involving realignment) to construct emergency/law enforcement and pullout areas and wider shoulder areas; installing (new) and replacing (existing) guardrail; installing speed feedback signs; installing traffic signal video (vehicle) detection systems; installing signal interconnect conduit; constructing pedestrian ramps; installing centerline rumble strip; and signing and striping. The project and its construction activities include traffic control measures and BMPs to protect the environment. The purpose of the project is to improve traffic safety along the Crow Canyon Road.

Name of Public Agency Approving Project: County of Alameda

Name of Person or Agency Carrying Out Project: Alameda County Public Works Agency

EXEMPT 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));
[X] Categorical Exemption (Sec 15301) Existing Facilities, Example (c)
Statutory Exemption (state section number).

Reasons Why Project Is Exempt: The proposed improvements constitute repair, maintenance, or minor alterations to existing structures and facilities involving negligible expansion of use.

Lead Agency Contact Person: Jim Browne, R.P.F. Area Code/Telephone/Extension: (510) 670-5796

[Signature]
Signature

February 24, 2022
Date

Acting Environmental Services Supervisor
Title



State of California - Department of Fish and Wildlife  
**2022 ENVIRONMENTAL DOCUMENT FILING FEE**  
**CASH RECEIPT**  
 DFW 753.5a (REV. 01/01/22) Previously DFG 753.5a

Print

Start Over

Save

AC RECEIPT #: 3204992

RECEIPT NUMBER:  
**01-02/25/2022-068**  
 STATE CLEARINGHOUSE NUMBER (If applicable)  
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SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY <b>ALAMEDA COUNTY PUBLIC WORKS AGENCY</b>	LEAD AGENCY EMAIL	DATE <b>02/25/2022</b>
COUNTY/STATE AGENCY OF FILING <b>ALAMEDA</b>	DOCUMENT NUMBER <b>22 - 068</b>	

PROJECT TITLE  
**IMPROVEMENTS ON CROW CANYON ROAD AT VARIOUS LOCATIONS, EDEN TOWNSHIP, ALAMEDA COUNTY**

PROJECT APPLICANT NAME <b>JIM BROWNE</b>	PROJECT APPLICANT EMAIL	PHONE NUMBER <b>(510) 670-5796</b>
PROJECT APPLICANT ADDRESS <b>399 ELMHURST STREET</b>	CITY <b>HAYWARD</b>	STATE <b>CA</b>
		ZIP CODE <b>94544</b>

PROJECT APPLICANT (Check appropriate box)

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

CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) \$3,539.25 \$ \_\_\_\_\_ 0.00
- Mitigated/Negative Declaration (MND)(ND) \$2,548.00 \$ \_\_\_\_\_ 0.00
- Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,203.25 \$ \_\_\_\_\_ 0.00
- 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 \$ \_\_\_\_\_ 0.00
- County documentary handling fee \$ \_\_\_\_\_ 50.00
- Other \$ \_\_\_\_\_

PAYMENT METHOD:

- Cash    
  Credit    
  Check    
  Other    
 TOTAL RECEIVED \$ \_\_\_\_\_ 50.00

SIGNATURE <b>X</b> <i>Dth</i>	AGENCY OF FILING PRINTED NAME AND TITLE <b>DHOLANDA, DEPUTY CLERK</b>
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