

Notice of Exemption

Form D

To: [] Office of Planning and Research
PO Box 3044, 1400 Tenth Street, Room 222
Sacramento, CA 95812-3044

From Placer County Water Agency
P.O. Box 6570
Auburn, CA 95603
(Public Agency and Address)

[X] County Clerk, County of: Placer

Project Title: Alta Loop Pipeline Project

Project Location - Specific: Alta Bonnybrook Road, Alta Powerhouse Road and Cable Road

Project Location - City: Community of Alta Project Location - County: Placer

Description of Project: A segment of treated water pipeline in Alta, in the vicinity of Alta Bonnybrook Road and Alta Powerhouse Road is in need of replacement. The 4-inch wrapped steel pipe which was constructed in 1941 is deteriorated and is experiencing water quality issues. Approximately 2,500-feet of new 8-inch ductile iron pipeline will be installed within the existing alignment and will include replacement of services and appurtenances. There would also be approximately 1,200-feet of new pipeline installed in Cable Road, which would connect and loop the distribution system. There will be minimal amount of ground disturbance and construction will be within a 20-foot corridor with staging areas. The area is thick with vegetation, tree trimming and possible tree removal will occur.

Name of Public Agency Approving Project: Placer County Water Agency

JUL 17 2020

POSTED

Name of Person or Agency Carrying Out Project: Placer County Water Agency Through

RYAN RONCO, COUNTY CLERK

By [Signature] Deputy Clerk

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. State type and section number: Class 2, Section 15302
[] Statutory Exemption. State code number:

20-167

Reasons why project is exempt: The project consists of the replacement of existing public facilities where the new structure will be located on the same site and will have substantially the same purpose and capacity as the structure replaced.(Guidelines Article 19, Section 15302)

Lead Agency Area Code/
Contact Person: Jordan Jacobson, Associate Engineer Telephone/Extension: 530-823-4850

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: [Signature] Date: 7/13/20 Title: Environmental Scientist
Heather Trejo

[X] Signed by Lead Agency

Date received for filing at OPR:

[] Signed by Applicant

State of California -- Department of Fish and Wildlife
2020 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (Rev. 02/19)

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|--|
| RECEIPT# 31-200167 |
| STATE CLEARING HOUSE# (if applicable) |

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY

| | | | |
|--|-------------------|---------------------------|--------------------------------|
| LEAD AGENCY PLACER COUNTY WATER AGENCY | | DATE 07/17/2020 | |
| COUNTY/STATE AGENCY OF FILING PLACER COUNTY CLERK AUBURN | | | |
| PROJECT TITLE ALTA LOOP PIPELINE PROJECT / | | | |
| PROJECT APPLICANT NAME PLACER COUNTY WATER AGENCY | | | PHONE NUMBER |
| PROJECT APPLICANT ADDRESS PO BOX 6570 AUBURN | CITY CA | STATE 95604 | ZIPCODE 530-823-4850 |

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"/> Application Fee Water Diversion (State Water Resources Control Board Only) | \$850.00 | \$ _____ |
| <input type="checkbox"/> Projects Subject to Certified Regulatory Programs (CRP) | \$1,136.50 | \$ _____ |
| <input checked="" type="checkbox"/> County Administrative Fee | \$50.00 | \$ <u>50.00</u> |
| <input checked="" type="checkbox"/> Project that is exempt from fees | | |
| <input checked="" type="checkbox"/> Notice of Exemption (attach) | | |
| <input type="checkbox"/> DFG No Effect Determination (attach) | | |
| <input type="checkbox"/> Other _____ | | \$ _____ |

PAYMENT METHOD:

Cash Credit Check Other _____

TOTAL RECEIVED \$50.00

SIGNATURE

X 

TITLE

S. Kasza, DEPUTY