	Office of Planning and Research 2.O. Box 3044, Room 212	From: (Public Agency)			
S	acramento, CA 95812-3044				
	County Clerk County of	(Address)			
_					
Project	t Title:				
Project	t Location - Specific:				
Project	t Location – City:	Project Location – County:			
Descri	ption of Nature, Purpose and Beneficiaries of Project:				
Name	of Public Agency Approving Project:				
Name	of Person or Agency Carrying Out Project:				
Exemp	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: Statutory Exemptions. State code number:	:			
Reasor	ns why project is exempt:				
	Agency et Person:	Area Code/Telephone/Extension:			
1.	I by applicant: Attach certified document of exemption finding. Has a Notice of Exemption been filed by the public ag	ency approving the project?	Yes	No	
Signat	ure: ES;	Date: Title:			
	☐ Signed by Lead Agency ☐ Date received for ☐ Signed by Applicant	filing at OPR:			Revised 2005