

Notice of Exemption

21-2022-276

Appendix E

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

From: (Public Agency): Ross Valley Sanitary District
2960 Kerner Blvd., San Rafael, CA 94901

County Clerk

County of: Marin

3501 Civic Center Dr., #234

San Rafael, CA 94903

(Address)

FILED

Project Title: Lift Station Improvements Project - Lift Stations 20, 31 and 32

DEC 19 2022

Project Applicant: Ross Valley Sanitary District

SHELLY SCOTT
MARIN COUNTY CLERK

By: [Signature] Deputy

Project Location - Specific:

See attached project description and figure

Project Location - City: Larkspur

Project Location - County: Marin

Description of Nature, Purpose and Beneficiaries of Project:

The Project provides replacement/upgrades to the current pump stations. See attached project description.

Name of Public Agency Approving Project: Ross Valley Sanitary District

Name of Person or Agency Carrying Out Project: Ross Valley Sanitary District

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));
Categorical Exemption. State type and section number: Class 2; Section 15302(c)
Statutory Exemptions. State code number:

Reasons why project is exempt:

The Project consists of the rehabilitation of existing facilities that have been determined to be in need of improvement. It consists of replacement and/or reconstruction of the existing utility systems and/or facilities involving negligible or no expansion of capacity. [Section 15302(c)]

Lead Agency

Contact Person: Philip Benedetti

Area Code/Telephone/Extension: 415-259-2949x212

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: Phil Benedetti

Digitally signed by Phil Benedetti
DN: cn=US, o=Ross Valley Sanitary District, cn=Phil Benedetti
Date: 2022.12.08 10:04:23-08'00'

Date: 12/8/2022

Title: Senior Engineer

Signed by Lead Agency Signed by Applicant

Authority cited: Sections 21083 and 21110, Public Resources Code.

Date Received for filing at OPR:

Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

POSTED 12/19/22 TO 1/18/23 Revised 2011

12/19/2022

11:28 AM PST

MARIN COUNTY CLERK  
3501 CIVIC CENTER DRIVE  
ROOM 234  
SAN RAFAEL, CA 94903

TERMINAL NAME: E5788902

ORDER# 154409923 50.00

**PAYMENT**

MARIN CLERK FEES 50.00  
276 .00

AGENCY SUBTOTAL: \$50.00  
LEXISNEXIS SERVICE FEE: \$2.50

TOTAL USD: \$52.50

CARD #: 8696 MASTERCARD  
PAYMENT: CREDITCHIP READ-CONTACT  
MODE: ISSUER  
AUTH CODE: 682777  
APP LABEL: Mastercard  
CVM: NO SIG REQUIRED  
AID: A0000000041010  
AROC: 0366EF15410185CC  
AMOUNT: \$52.50

\*\*\* CARD APPROVED \*\*\*

**AMOUNT PAID:**  
**\$52.50**

CUSTOMER COPY





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** **StartOver** **Save**

RECEIPT NUMBER:  
 21 — 12/19/2022 — 276  
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY <b>ROSS VALLEY SANITARY DISTRICT</b>	LEAD AGENCY EMAIL	DATE <b>12/19/2022</b>
COUNTY/STATE AGENCY OF FILING <b>Marin</b>	DOCUMENT NUMBER	

PROJECT TITLE

**LIFT STATION IMPROVEMENTS PROJECT - LIFT STATIONS 20, 31 AND 32**

PROJECT APPLICANT NAME <b>ROSS VALLEY SANITARY DISTRICT</b>	PROJECT APPLICANT EMAIL	PHONE NUMBER <b>(415) 259-2949 X 212</b>
PROJECT APPLICANT ADDRESS <b>2960 KERNER BLVD</b>	CITY <b>SAN RAFAEL</b>	STATE <b>CA</b>
		ZIP CODE <b>94901</b>

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)  | \$3,539.25 | \$ | 0.00  |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)   | \$2,548.00 | \$ | 0.00  |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW         | \$1,203.25 | \$ | 0.00  |
| <br>  |            |    |       |
| <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)                   |            |    |       |
| <br>  |            |    |       |
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00   | \$ | 0.00  |
| <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 <b>X</b> <i>O. Lobato</i>	AGENCY OF FILING PRINTED NAME AND TITLE <b>MARIN COUNTY CLERK; O. LOBATO, ARCC SUPERVISOR</b>
--	--

POSTED 12/19/2022 4:25 PM