Print Form

Notice of Exemption

Appendix E

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

County Clerk
County of: _____

From: (Public Agency): Dept. of Social Services
744 P Street, MS 8-4-179
Sacramento, CA 95814
(Address)

Project Title: Lease Renewal, Office Space (DSS 9576)

Project Applicant: California Department of Social Services

Project Location - Specific:
800 S. Barranca Ave, Suite 300 and 400

Project Location - City: Covina Project Location - County: Los Angeles

Description of Nature, Purpose and Beneficiaries of Project:
The Department of Social Services proposes to renew and existing lease for office space. The space is approximately 26,661 square feet and is occupied by the Disability Determinations Services Branch.

Name of Public Agency Approving Project: Department of Social Services

Name of Person or Agency Carrying Out Project: Department of General Services

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 1, Section 15301
- ☐ Statutory Exemptions. State code number: _____

Reasons why project is exempt:
This project is exempt under Class 1, Section 15301 of the CEQA guidlines

Lead Agency Contact Person: Jennifer Sturgis Area Code/Telephone/Extension: 916-215-0185

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: J Sturgis Date: 12/2/22 Title: Staff Services Analyst

▪ Signed by Lead Agency ☐ Signed by Applicant

Authority cited: Sections 21083 and 21110, Public Resources Code.
Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR: _____