Notice of Exemption

To: X	Office of Plann P.O. Box 3044 Sacramento, C County Clerk County of Place	From:	Placer County Planning Services Division 3091 County Center Dr., Suite 140 Auburn, CA 95603			
Project Nu	le: PIVIN MFH mber: PLN22 11-100-041-000	VARIANCE -00440				
Project Lo	cation: 561 H	IILL HAVEN DR COLFAX				
Requesting 50' is normal pad availab Name of Po Placer Cour	a variance for rally required. Replement of the parcel ublic Agency Anty Planning Se	duce side setback to 5' wl without serious grading. pproving	uce front se	etbacks to 25	i' to edge of easements when uired. This is the only building	
Entitlement/Action Date: This project was approved on December 15, 2022 Name of Person or Agency Carrying Out Project: PIVIN RAYMOND					MAR 1 0 2023 DNCO, COUNTY CLERK	
Exempt Sta	atus:			By C. U	Deputy Clerk	
Declared Emerg	ency Project (Se	b)(1); 15268); Sec. 21080(b)(3): 15269(a ec. 21080(b)(4); 15269(b)(. State type and section no State code number:	c)); umber: Se		050 (Class 3: New f Small Structures).	
	ny project is ex t Description	empt:				
		#	23	- 00	07	
Lead Agen	cy Contact Per	son				
George Ros	sasco	Title: Supervising Planne	r	Tel: 530-7	45-3065	

Planning_Notice_Of_Exemption

DI VV 733.34 (NEV. 01/01/25)/1164/003/y DI G 733.34		Print		StartOver		Save	
		RECEIPT NUMBER:					
	31— 01/30/2023 —						
	STATE CLEARINGHOUSE NUMBER (If applicable)						
OFF INOTHUSTIONS ON PEVEDOE. TYPE OF PRINTS I FARLY		0.17.1.2.02		110110002111	JINDLIK	(ii applicable)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEADAGENCY EMAIL			DATE			
PLACER COUNTY PLANNING SERVICES DIVISION	LEAD AGENCT EMAIL			01/30/2023			
COUNTY/STATE AGENCY OF FILING			-	DOCUMENT		R	
Placer		230007					
PROJECT TITLE							
PIVIN MFH VARIANCE							
PROJECT APPLICANT NAME	PROJECT APPLICANT EMAIL			PHONE NUMBER			
PLACER COUNTY PLANNING SERVICES DIVISION				(530) 745-3065			
PROJECT APPLICANT ADDRESS	CITY	STATE		ZIP CODE			
3091 County Center Drive Ste 140	Auburn	CA	95603				
PROJECT APPLICANT (Check appropriate box)							
✓ Local Public Agency School District	Other Special District	☐ St	ate Ag	jency	Pr	ivate Entity	
CHECK APPLICABLE FEES:						0.00	
Environmental Impact Report (EIR)		\$3,839.25				0.00	
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,764.00				0.00	
☐ Certified Regulatory Program (CRP) document - payment due dir	ectly to CDFW	\$1,305.25	\$ _			0.00	
[7] Evenuel from too							
Exempt from feeNotice of Exemption (attach)							
CDFW No Effect Determination (attach)							
Fee previously paid (attach previously issued cash receipt copy)							
The previously paid (attach previously issued east receipt copy)							
☐ Water Right Application or Petition Fee (State Water Resources	Control Board only)	\$850.00	\$			0.00	
	* ****	\$			50.00		
☐ Other	\$						
PAYMENT METHOD:			-				
☐ Cash ☐ Credit ☐ Check ☑ Other	TOTAL F	RECEIVED	\$ _			50.00	
SIGNATURE AGENC	Y OF FILING PRINTED N	AME AND TI	TLE				
v A link							
X (. Where c. wh	neeler Deputy						