



Department of  
Cannabis Control  
CALIFORNIA

**NOTICE of EXEMPTION from CEQA**  
**CALIFORNIA DEPARTMENT OF CANNABIS CONTROL**

P.O. BOX 419106, RANCHO CORDOVA, CA 95741-9106

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

From: Department of Cannabis Control  
Cultivation Licensing Branch  
P.O. Box 419106  
Rancho Cordova, CA 95741-9106

Project Title:

Project Location:

County:

Project Description:

The Department of Cannabis Control, pursuant to authority granted under Business and Profession Code Division 10, Chapter 2, Section 26012, approved a Cannabis Cultivation License.

Project Activities:

Exemption Status:

- Ministerial [PRC, Sec. 21080(b)(1); CCR, Sec. 15268]
- Declared Emergency [PRC, Sec. 21080(b)(3); CCR, Sec.15269(a)]
- Emergency Project [PRC, Sec. 21080(b)(4); CCR, Sec.15269(b)(c)]
- Categorical Exemption: [Class 1 Categorical Exemption Cal. Code Regs., Title 14, §15301]
- Statutory Exemptions: [CCR, Section 15183]
- General Rule [CCR, Sec. 15061(b)(3)]

Reasons Why Project is Exempt:

The Department of Cannabis Control has determined that the project is consistent with the local jurisdiction community plan and/or zoning designations. CEQA mandates that project is consistent with the development density established by existing zoning, community plan, or general plan policies for which an EIR was certified and shall not require additional environmental review, except as might be necessary to examine whether there are project-specific significant effects which are peculiar to the project or its site. The project activity fits within the parameters included in CEQA Guidelines Section 15183 and the activity does not require additional CEQA analysis.

This is to certify that the final environmental document, comments and responses, and the record of project approval are available to the public at the following location:

Department of Cannabis Control  
Cultivation Licensing Branch  
P.O. Box 419106  
Rancho Cordova, CA 95741-9106

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Contact Name

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Contact Title

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Phone #

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TO BE COMPLETED BY OPR ONLY