POSTED MAY 2 5 2023
Through JUL 0 7 2023
RYAN RONCO, COUNTY CLERK
By Deputy Clerk

Notice of Exemption

To: X	Office of Planning and Research P.O. Box 3044, Room 222 Sacramento, CA 95814	From:	Placer County Planning Services Division 3091 County Center Dr., Suite 140 Auburn, CA 95603						
X	County Clerk County of Placer		Auburi, CA 93003						
Project Nu	le: LaPointe ADU Carport Variance mber: PLN23-00007 i4-162-008-000								
Project Lo	cation: 144 Sylvan Vista DR Auburn								
Request ap 25 feet from Accessory *Please not	n of Nature, Purpose, and Beneficiaries proval of a Variance to reduce the north from edge of easement to 10 feet to allow for Dwelling Unit (AD) attached carport.	ont setback an is not depict	from						
Name of Po Placer Cour	plan, applicant will provide an updated site ublic Agency Approving nty Planning Services Division t/Action Date:	e pian.							
	t was approved on May 18, 2023								
Name of P Daniele La	erson or Agency Carrying Out Project: Pointe								
Exempt Sta	atus:								
Ministe	erial (Sec. 2108(b)(1); 15268);								
Declar	ed Emergency (Sec. 21080(b)(3): 15269(a	a));							
Emerg	ency Project (Sec. 21080(b)(4); 15269(b)((c));							
X Categorical Exemption. State type and section number:									
Statuto	ory Exemptions. State code number:								
	ny project is exempt: t Description								
_	ncy Contact Person								
George Ros	Sacco Title: Supervising Planne	er	Tel: 530-745-3065						
Signature	ther Of Exemples	23-							
	The same of the sa		1						



PLACER COUNTY CLERK 2023 ENVIRONMENTAL FILING FEE CASH RECEIPT

RECEIPT NUMBER 31-230094

STATE CLEARING HOUSE NUMBER (if applicable)

LEAD AGENCY PLACER COUNTY PLANNING SERVICES DIV	VISION	LEAD AGENCY EMAIL DAT		5/2023
COUNTY/STATE AGENCY OF FILING PLACER COUNTY CLERK AUBURN	DOCUMENT NUMBER 230094			
PROJECT TITLE LA POINTE ADU CARPORT VARIANCE				1 1 1
PROJECT APPLICANT NAME PLACER COUNTY PLANNING SERVICES DIV	PHONE NUMBER 530-745-3065			
PROJECT APPLICANT ADDRESS 3091 COUNTY CENTER DRIVE STE 140	CITY AUBURN	STATE CA	ZIP CC 95603	
PROJECT APPLICANT (Check appropriate box): Local Public Agency	Other Special Dist	rict □ State Agency □] Private E	ntity
CHECK APPLICABLE FEES: □ Environmental Impact Report (EIR) □ Mitigated/Negative Declaration (MND) (ND □ Certified Regulatory Program (CRP) docu ☑ Exempt from fee ☑ Notice of Exemption (attach) □ CDFW No Effect Determinatio □ Fee previously paid (attach previously is	ment – payment du) n (attach)	e directly to CDFW	\$3,839.25 \$2,764.00 \$1,305.25	\$
☐ Water Right Application or Petition Fee (St ☑ County documentary handling fee ☐ Other	\$ \$_50.00 \$			
PAYMENT METHOD: □ Cash □ Credit □ Check ☒ Other:	Journal _	TOTAL RECE	IVED	\$50.00
SIGNATURE	AGENCY OF FILIN	IG PRINTED NAME AND TI	TLE	
X C.Wheeler	C. Wheele	r, DEPUTY		