## **Notice of Exemption**

Motios of Exomp	
To: X Office of Planning and Research P.O. Box 3044, Room 222 Sacramento, CA 95814	m: Placer County Planning Services Division 3091 County Center Dr., Suite 140
X County Clerk County of Placer	Auburn, CA 95603
Project Title: Field - Variance Project Number: PLN23-00061 APN#: 069-363-006-000	
Project Location: 5533 HEMLOCK DR SODA SPRINGS	
BEN & NANCY FIELD	ers, Ben t front o eaves) v that
Emergency Project (Sec. 21080(b)(4); 15269(b)(c));	S .
X Categorical Exemption. State type and section number: Statutory Exemptions. State code number:  Reason why project is exempt: See Project Description	Section 15303 of the California Environmental Quality Act Guidelines and Section 18.36.050 of the Placer County Environmental Review Ordinance (Class 3 New construction of small structures) and Section 15305 of the California
George Rosasco Title: Supervising Planner	Environmental Quality Act Guidelines and Section 18.36.070 of the Placer County Environmental Review Ordinance (Class 5 Minor alterations in land use limitations).  Tel: 530-745-3065
Signature (1) @ (1)	Date 5/3/23
Symmetry I was die Store een oor	Date $\frac{5 3 /33}{4+23-98}$



## PLACER COUNTY CLERK 2023 ENVIRONMENTAL FILING FEE CASH RECEIPT

RECEIPT NUMBER 31-230098

STATE CLEARING HOUSE NUMBER (if applicable)

LEAD AGENCY		LEAD AGENCY EMAIL DATE		1 <del>77</del>	
PLACER COUNTY PLANNING SERVICES DIV	ISION			2/2023	
COUNTY/STATE AGENCY OF FILING			DOCUMENT NUMBER		
PLACER COUNTY CLERK AUBURN			230098		
PROJECT TITLE					
FIELD-VARIANCE					
PROJECT APPLICANT NAME PROJECT APPLICANT EMA			AIL PHONE NUMBER		
PLACER COUNTY PLANNING SERVICES DIVISION			530-745-3065		
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CC	DDE	
3091 COUNTY CENTER DRIVE STE 140	AUBURN	CA	95603		
PROJECT APPLICANT (Check appropriate box):					
	Other Special Dist	rict State Agency	☐ Private E	ntity	
CHECK APPLICABLE FEES:					
			** *** **	•	
☐ Environmental Impact Report (EIR)				\$	
☐ Mitigated/Negative Declaration (MND) (ND	)		\$2,764.00 \$		
☐ Certified Regulatory Program (CRP) docu	ment – payment du	e directly to CDFW	\$1,305.25	\$	
⊠ Exempt from fee					
·					
🔀 Notice of Exemption (attach)					
☐ CDFW No Effect Determination	a (attach)				
☐ Fee previously paid (attach previously is:	sued cash receipt o	copy)			
_					
☐ Water Right Application or Petition Fee (State Water Resources Control Board Only)			\$850.00		
☑ County documentary handling fee				\$ <u>50.00</u>	
☐ Other				\$	
PAYMENT METHOD: TOTAL REC			IVED	\$50.00	
☐ Cash ☐ Credit ☐ Check ☑ Other:	lournal			-	
	- Carriar				
SIGNATURE	AGENCY OF FILIN	G PRINTED NAME AND T	ITLE		
Y A 1101 - a	O Nheeler, DEPUTY				
^ C. While	C. wneele	T, DEPUTY			