## **Notice of Exemption**

Form D

<b>To:</b> Office of Planning and Research P.O. Box 3044, Room 212 Sacramento, CA 95812-3044	From: (Public Agency) Department of Water Resources Division of Operations and Maintenance
	715 P Street, Sacramento CA 95814
County Clerk County of	(Address)
rroject ritie.	(PSMP) Southern Field Division (SFD) Physical Security Upgrades – Phase 1 (OM-SFD-2023-008)
Project Location - Specific:  Coordinates: 34°30'38 55"NL 117°55'12 09"W	Cross Streets: LE and CA 129
Coordinates: 34°30'38.55"N, 117°55'12.08"W. SWP Facility: Southern Field Division (SFD) O8 Project Location – City:	Cross Streets. 1-3 and CA-136.  RM Center, Pearblossom Pumping Plant and Oso Pumping Plant.  Project Location – County: Los Angeles
Description of Nature, Purpose and Beneficiaries	of Project:
Pumping Plant. Upgrades include a new guard sl	ty upgrades at SFD O&M Center, Pearblossom Pumping Plant and Oso nack, power operated impact rated vehicle gates, personnel gates, card reader rainage improvements, new camera poles, wire fencing, k-rail installation, door tilities. All work will be within DWR right of way.  Department of Water Resources
Name of Person or Agency Carrying Out Project:	Department of Water Resources
Exempt Status: (check one)  Ministerial (Sec. 21080(b)(1); 15268); Declared Emergency (Sec. 21080(b)(3); 1  Emergency Project (Sec. 21080(b)(4); 152  Categorical Exemption. State type and sec  Statutory Exemptions. State code number:	269(b)(c)); etion number: Class 1, Existing Facilities, Section No. 15301(m)
	nd important services to many Californians. This project is exempt because it tructures under the supervision of the Department of Water Resources. This nent.
Lead Agency Contact Person: Sara Paiva-Lowry	Area Code/Telephone/Extension: 916-902-7709
If filed by applicant:  1. Attach certified document of exemption fin  2. Has a Notice of Exemption been filed by the second sec	nding.
Signature: Sara Paiva-lowry	Date: Title: Manager, Environmental Regulatory Compliance
☐ Signed by Lead Agency ☐ Signed by Applicant ☐ Date	received for filing at OPR: