## **Notice of Exemption**

Appendix E

<b>To:</b> Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
County Clerk	
County of:	(Address)
<del></del>	
Project Title:	
Project Applicant:	
Project Location - Specific:	
	Project Location - County:
Description of Nature, Purpose and Beneficia	aries of Project:
Name of Public Agency Approving Project:	
	oject:
	(3); 15269(a)); 4); 15269(b)(c)); and section number:
☐ Statutory Exemptions. State code n	umber:
Reasons why project is exempt:	
Lead Agency Contact Person:	Area Code/Telephone/Extension:
If filed by applicant: 1. Attach certified document of exemptic 2. Has a Notice of Exemption been filed	on finding. by the public agency approving the project? Yes No
Signature: Allacare	Date: Title:
	ned by Applicant
Authority cited: Sections 21083 and 21110, Public Res Reference: Sections 21108, 21152, and 21152.1, Pub	