

## COUNTY OF SAN LUIS OBISPO DEPARTMENT OF PUBLIC WORKS

PLN-1123 06/06/2018

## **Notice of Exemption**

| Project Title and No.: Emergency Bypass Agreem (537R165602/ED23-192)                       | ent for the Devil's Den Pumping Plant                            |  |  |  |
|--|--|--|--|--|
| Project Location (Specific address [use APN or   | Project Applicant/Phone No./Email:                               |  |  |  |
| description when no situs available]):   | San Luis Obispo County Flood Control and Water                   |  |  |  |
| Countywide: San Luis Obispo Flood Control and  | Conservation District / (805) 781-5252 /                         |  |  |  |
| Water Conservation Districtwide.   | pwd@co.slo.ca.us   |  |  |  |
|  | Applicant Address (Street, City, State, Zip):                    |  |  |  |
|  | County Government Center, Room 206, San Luis<br>Obispo, CA 93408 |  |  |  |
|  | of Project: An Emergency Bypass Agreement related to             |  |  |  |
|  | the Devil's Den Pumping Plant (DDPP) on the Coastal              |  |  |  |
| •  | n unplanned outage of the DDPP, an emergency bypass              |  |  |  |
| system was placed within Kern County Water Agency  |  |  |  |  |
|  | e Water Project (SWP) subcontractors and the Central             |  |  |  |
| Coast Water Authority (CCWA). The Emergency Bypa   |  |  |  |  |
| able to meet critical demand from the District and C                                       | CWA until adequate pumping capacity at DDPP was                  |  |  |  |
| reestablished on or about October 19, 2023.  |  |  |  |  |
| Name of Public Agency Approving Project: County  | of San Luis Obispo   |  |  |  |
| Exempt Status: (Check One)   |  |  |  |  |
|  | 80(b)(1); 15268}   |  |  |  |
|  | 80(b)(3); 15269(a)}  |  |  |  |
|  | 80(b)(2)(4); 15269(b)(c)}  |  |  |  |
|  | Class:}}   |  |  |  |
| Statutory Exemption {Sec   |  |  |  |  |
|  | 61(b)(3)} (also complete GRE form PLN-1124)                      |  |  |  |
| Not a Project  |  |  |  |  |
|  | an agreement to memorialize mutual understandings                |  |  |  |
| ·  | ary to maintain service essential to the public health,          |  |  |  |
| safety, and welfare.   |  |  |  |  |
| Kate Shea (kbshea@co.slo.ca.us)  | (805) 781-4469   |  |  |  |
| Lead Agency Contact Person (Name, Number, E-mail)  |  |  |  |  |
| If filed by applicant:   |  |  |  |  |
| 1. Attach certified document of exemption fi   | nding  |  |  |  |
| 2. Has a notice of exemption been filed by the public agency approving the project? Yes No |  |  |  |  |
| Signature: LACE  | Date: <u>December 14, 2023</u>                                   |  |  |  |
| Name: Kate Ballantyne Title: Deputy Director   |  |  |  |  |
| On_January 23, 2024 the project was Approved by:   |  |  |  |  |
| Board of Supervisors Subdivision Review Board Other  |  |  |  |  |
| ☐ Planning Commission ☐ Planning D   | ept Hearing Officer  |  |  |  |
|  |  |  |  |  |

|   |                           | RECEIPT N<br>40-01242 |                  |                       |  |
|---|---------------------------|-----------------------|------------------|-----------------------|--|
|   |                           |                       |                  | UMBER (If applicable) |  |
| SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.             |                           |                       |                  |                       |  |
| LEAD AGENCY   | LEADAGENCY EMAIL          |                       | DATE             |                       |  |
| SAN LUIS OBISPO COUNTY  | kbshea@co.slo.ca.us       |                       |                  | 01/24/2024            |  |
| COUNTY/STATE AGENCY OF FILING                                   |                           |                       | DOCUMENT         | NUMBER                |  |
| COUNTY OF SAN LUIS OBISPO                                       |                           |                       |                  |                       |  |
| PROJECT TITLE   |                           |                       |                  |                       |  |
| EMERGENCY BYPASS AGREEMENT FOR THE DE                           | VIL'S DEN PUMPING PL      | ANT (537R             | R165602/ED23     | 3-192)                |  |
| PROJECT APPLICANT NAME PROJECT APPLICANT EMA                    |                           | /AIL                  | AIL PHONE NUMBER |                       |  |
| SAN LUIS OBISPO COUNTY  | pwd@co.slo.ca.us          |                       | (805) 781        | -5252                 |  |
| PROJECT APPLICANT ADDRESS                                       | CITY                      | STATE                 | ZIP CODE         |                       |  |
| 976 OSOS STREET ROOM 206  | SAN LUIS OBISPO           | CA                    | 93408            |                       |  |
| PROJECT APPLICANT (Check appropriate box)                       |                           |                       |                  |                       |  |
| X Local Public Agency School District                           | Other Special District    | State                 | e Agency         | Private Entity        |  |
| CHECK ADDITION OF LEES.   |                           |                       |                  |                       |  |
| CHECK APPLICABLE FEES:  □ Environmental Impact Report (EIR)     |                           | \$4,051.25            | ¢                |                       |  |
| ☐ Mitigated/Negative Declaration (MND)(ND)                      |                           | \$2,916.75            |                  |                       |  |
| ☐ Certified Regulatory Program (CRP) document - payment du      |                           | \$1,377.25            |                  |                       |  |
|   |                           |                       | ·                |                       |  |
|   |                           |                       |                  |                       |  |
| Notice of Exemption (attach)                                    |                           |                       |                  |                       |  |
| ☐ CDFW No Effect Determination (attach)                         |                           |                       |                  |                       |  |
| ☐ Fee previously paid (attach previously issued cash receipt co | ору)                      |                       |                  |                       |  |
|   |                           |                       |                  |                       |  |
| ☐ Water Right Application or Petition Fee (State Water Resource | ces Control Board only)   | \$850.00              | \$               |                       |  |
| ☐ County documentary handling fee                               |                           | ;                     | \$               |                       |  |
| ☐ Other   | TE.                       | ;                     | \$               |                       |  |
| PAYMENT METHOD:   |                           |                       |                  | <b>\$0.00</b>         |  |
| ☐ Cash ☐ Credit ☐ Check ☑ Other                                 | TOTAL R                   | ECEIVED               | \$               | \$0.00                |  |
| SIGNATURE AG  | ENCY OF FILING PRINTED NA | ME AND TITL           | .E               |                       |  |
|   | scar Palma-Ornelas, Dep   | utv Countv            | Clerk-Record     | er                    |  |

Filed in County Clerk's Office

**Elaina Cano** San Luis Obispo - County Clerk-Recorder

40-01242024-016

01/24/2024 FISH Pages: 2 Fee: \$ 0.00

By opalma, Deputy

## Elaina Cano San Luis Obispo County Clerk-Recorder

Main Office. (805) 781-5080 Atascadero: (805) 461-6041 www.slovote.com

Receipt: 24-2275

| ProductName |                      |                | Extended   |
|-------------|----------------------|----------------|------------|
| FISH        | SH FISH AND WILDLIFE |                | \$0.00     |
|             | FILING               |                |            |
|             | # Pages              |                | 2          |
|             | Document #           | 40-01          | 242024-016 |
| Do          | cument info:         | SAN LUIS OBISE | OCOUNTY    |
|             | Filing Type          |                | NOE        |
| Total       |                      |                | \$0.00     |
| Chang       | e (Cash)             |                | \$0.00     |

PLEASE KEEP FOR REFERENCE

1/24/24 2:21 PM opalma San Luis Obispo