

COUNTY OF LAKE

COMMUNITY DEVELOPMENT DEPARTMENT Planning Division Courthouse - 255 N. Forbes Street Lakeport, California 95453 Telephone 707/263-2221 FAX 707/263-2225 **FILED**

January 29, 2024JENAVIVE HERRINGTON

COUNTY CLERK

Deputy clerk

NOTICE OF EXEMPTION

TO:

County Clerk

Office of Planning & Research

County of Lake

1400 Tenth Street

Lakeport, CA 95453

Sacramento, CA 95814-3044

FROM:

Lake County Community Development Dept.

255 North Forbes Street Lakeport, CA 95453

PROJECT TITLE:

Lucerne Trailer Park Emergency Seawall Repair CEQA Exemption

(CE 24-02)

PROJECT LOCATION:

5877 Lake Street, Lucerne, CA 95458

COUNTY:

Lake

DESCRIPTION OF PROJECT: Dig out areas of erosion underground on the land side of the existing seawall, patch the holes with wood, and fill with a slurry concrete mix per the ZFA Structural Engineering project design (reference #23708).

NAME OF PUBLIC AGENCY APPROVING PROJECT: Lake County Community Development Department

NAME OF PERSON OR AGENCY CARRYING OUT PROJECT: Rich Shields

EXEMPT STATUS (Check One):

	Ministerial [Section 21080(b); 15268];	
	Declared Emergency [Section 21080(b)(3); 15269(a)];	
\boxtimes	Emergency Project [Section 21080(b)(4); 15269(b)(c)];	
	Statutory Exemption: State code number:	;
	Categorical Exemption (Sections 15301(d) and 15303(e) of the State CEQA Guidelines)	
	General Rule [Section 15061(b)(3)]	

REASONS WHY PROJECT IS EXEMPT:

An Emergency Project Statutory Exemption from the California Code of Regulations, Title 14, Division 6, Chapter 3, Section 15269 (b)(c), will be applied to this project:

- 15269(b) Emergency repairs to publicly or privately owned service facilities necessary to maintain service essential to the public health, safety or welfare. Emergency repairs include those that require a reasonable amount of planning to address an anticipated emergency
- 15269 (c), Specific actions necessary to prevent or mitigate an emergency

The existing seawall is severely deteriorating and allowing erosion underground between the seawall and the manufactured homes that have setbacks ranging from 5' - 15'. During a site visit on Wednesday, January 24, 2024, County of Lake building inspection staff noted a sink hole in the setback areas of units 3 and 6. The latter was measured at 6'x2' wide and 3 feet deep.

Due to the rapid increase in erosion at the site, the County of Lake Building Official, along with the engineer of record, have concerns that the forecasted rain within the next week will pose a significant risk of to one or more of the homes falling off their jack stands and possibly into Clearlake.

CONTACT PERSON: Katherine Schaefers TELEPHONE NUMBER: 707-263-2221

Signature: Date: January 29, 2024

Title: Resource Planner



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DFW 753.5a (REV. 01/01/24) Previously DFG 753.5a

		Print	StartOver	Save
		RECEIPT NUM	BER:	Lemita aliane and the same and
		17-01/29/2024-006 STATE CLEARINGHOUSE NUMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLE	EARLY.			
LEAD AGENCY	LEADAGENCY EMAIL		DATE	
LAKE COUNTY COMMUNITY DEVELOPMENT			01/29/2024	
COUNTY/STATE AGENCY OF FILING			DOCUMENT N	UMBER
LAKE COUNTY			2024-010	
PROJECT TITLE				
LUCERNE TRAILER PARK EMERGENCY SEAWALL REPA	UR CEOA EXEMPTION CE 24-02			
PROJECT APPLICANT NAME	PROJECT APPLICANT I	=MAII	PHONE NUMB	FR
RICH SHIELDS	THE COLOR FILE LIGHT	- (va 11C)	THORIZ HOME	
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE	
5877 LAKE ST	LUCERNE	CA	95458	
PROJECT APPLICANT (Check appropriate box)	LOCEINIC		33436	
Local Public Agency School District	Other Special District	☐ State A	gonov	Private Entity
 □ Environmental Impact Report (EIR) □ Mitigated/Negative Declaration (MND)(ND) □ Certified Regulatory Program (CRP) document - paym 	ent due directly to CDFW	\$ 2,916.75 \$	y 	
Exempt from fee				
Notice of Exemption (attach) □ CDSNAN F(x+1)				
CDFW No Effect Determination (attach)	-1-1 5			
☐ Fee previously paid (attach previously issued cash rec	eipt copy)			
☐ Water Right Application or Petition Fee (State Water R	lesources Control Board only)	a 850.00 \$		
□ County documentary handling fee □ County documentary ha	coodiaco Control Board Only)			
Other		\$ 50.00 \$	(<u></u>	00.00
PAYMENT METHOD:		•	(The Oxygen
☐ Cash ☐ Credit 🗵 Check ☐ Other 92	71 TOTAL	RECEIVED \$		50.00
SIGNATURE	AGENCY OF FILING PRINTED I	NAME AND TITLE		
X KO_			Deputy Coun	ty Clerk