

Notice of Exemption

Appendix E

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044
County Clerk
County of: Yuba
915 8th Street, #107
Marysville, CA 95901

From: (Public Agency): Reclamation District 784
1594 Broadway
Arboga, CA 95961
(Address)

ENDORSED FILED
YUBA COUNTY CLERK/RECORDER

FEB 08 2024

DONNA HILLEGASS, Clerk
BY NELIDA WILLIAMS
DEPUTY CLERK

Project Title: Unit 5 Levee Mile 0.12 Pipe Replacement

Project Applicant: Reclamation District 784

Project Location - Specific:

Unit 5 of the Horseshoe Levee, which is between Highway 65 and near Forty Mile Road

Project Location - City: Arboga Project Location - County: Yuba

Description of Nature, Purpose and Beneficiaries of Project:

The project will involve removing an existing 18" pipe and replacing that pipe with a new 18" pipe. The pipe must be replaced because DWR has determined the pipe is likely to fail. The project will involve digging the old pipe out of the levee, replacing the pipe, and then backfilling the trench with the same soil.

Name of Public Agency Approving Project: Reclamation District 784

Name of Person or Agency Carrying Out Project: Reclamation District 784

Exempt Status: (check one):

- Ministerial (Sec. 21080(b)(1); 15268);
Declared Emergency (Sec. 21080(b)(3); 15269(a));
Emergency Project (Sec. 21080(b)(4); 15269(b)(c));
Categorical Exemption. State type and section number: Existing facilities 15301 and 15302
Statutory Exemptions. State code number: PRC 21080.21 and Reg. 15282(k) Pipe replacement

Reasons why project is exempt:

The project involves no expansion of size or use. The project consists of typical maintenance work to replace a failing pipe. The project is of limited scope and duration.

Lead Agency Contact Person: Patrick Meagher Area Code/Telephone/Extension: 530-742-0520

If filed by applicant:

- 1. Attach certified document of exemption finding.
2. Has a Notice of Exemption been filed by the public agency approving the project? Yes No

Signature: Patrick Meagher Date: 2/6/2024 Title: G.M.

Signed by Lead Agency Signed by Applicant

Authority cited: Sections 21083 and 21110, Public Resources Code.
Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR:



State of California - Department of Fish and Wildlife
2024 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/24) Previously DFG 753.5a

RECEIPT NUMBER:
 58 - 02082024 - 10
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY RECLAMATION DISTRICT 784	LEAD AGENCY EMAIL	DATE 02/08/2024
COUNTY/STATE AGENCY OF FILING YUBA	DOCUMENT NUMBER 2024FG-00010	

PROJECT TITLE
 UNIT 5 LEVEE MILE 0.12 PIPE REPLACEMENT

PROJECT APPLICANT NAME RECLAMATION DISTRICT 784	PROJECT APPLICANT EMAIL	PHONE NUMBER (530) 742-0520
PROJECT APPLICANT ADDRESS 1594 BROADWAY	CITY ARBOGA	STATE CA
		ZIP CODE 95961

PROJECT APPLICANT (Check appropriate box)

- Local Public Agency
 School District
 Other Special District
 State Agency
 Private Entity


CHECK APPLICABLE FEES:

- | | | |
|---|------------|----------|
| <input type="checkbox"/> Environmental Impact Report (EIR) | \$4,051.25 | \$ _____ |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$2,916.75 | \$ _____ |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,377.25 | \$ _____ |
|
 | | |
| <input checked="" type="checkbox"/> Exempt from fee | | |
| <input checked="" type="checkbox"/> Notice of Exemption (attach) | | |
| <input type="checkbox"/> CDFW No Effect Determination (attach) | | |
| <input type="checkbox"/> Fee previously paid (attach previously issued cash receipt copy) | | |

- | | | |
|---|----------|------------------|
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00 | \$ _____ |
| <input checked="" type="checkbox"/> County documentary handling fee | | \$ _____ \$50.00 |
| <input type="checkbox"/> Other 0.00 | | \$ _____ |

PAYMENT METHOD:

- Cash
 Credit
 Check
 Other
 TOTAL RECEIVED
 \$ _____ \$50.00

SIGNATURE X 	AGENCY OF FILING PRINTED NAME AND TITLE Nelida Williams Deputy
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Unit 5 CM 0.12

02/08/2024 08:42 AM PST

YUBA COUNTY CLERK RECORDER
915 8TH STREET, SUITE 107
MARYSVILLE, CA 95901

TERMINAL NAME: E8077301

ORDER# 176182114

PURCHASE

CLERK FEES \$50.00
AGENCY SUBTOTAL: \$50.00
LEXISNEXIS SERVICE FEE: \$2.50
TOTAL USD: \$52.50

CARD #: 6405 VISA
PAYMENT: CREDIT CHIP READ-CONTACT
MODE: ISSUER
AUTH CODE: 620757
VAL CODE: HV7C
TRAN REF #: 304039601271742
REC #: 0003
APP LABEL: VISA CREDIT
CVM: NO SIG REQUIRED
AID: A0000000031010
AROC: 75F6DBEC7FDAFC01
AMOUNT: \$52.50

*** CARD APPROVED ***

AMOUNT PAID:
\$52.50

I AGREE TO PAY ABOVE TOTAL AMOUNT
ACCORDING TO CARD ISSUER AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)

RETAIN THIS COPY FOR
STATEMENT VERIFICATION

CUSTOMER COPY

Yuba County

Donna Hillegass, County Clerk
and Recorder
915 8th Street, Suite 107
Marysville, CA 95901
(530) 749-7850

Receipt: 24-1606

ProductName	Extended
FG CLERK FISH AND GAME FILINGS	\$50.00
Document #	2024FG-00010
Filing Type	ADMIN FEE (NOTICE OF EXEMPT)
Comment	COUNTER

Total \$50.00

Tender (On Account) \$50.00

Account# VITALC
Account VITALCHER CLERK
Name
Customer RECLAMATION
Name DISTRICT 784
Comment NW

Thank You for Your Business

2/8/24 8:42 AM PST counterclerk1
Workstation: REC123