Notice of Exemption

Appendix E

To: Office of Planning and Research	From: (Public Agency): Reclamatio		n District 784				
P.O. Box 3044, Room 113 Sacramento, CA 95812-3044 County Clerk County of: Yuba 915 8th Street, #107 Marysville, CA 95901	Arboga, CA 95961	(Address)	YUBA COUNTY CLERK/RECORDER FEB 0 8 2024 DONNA: HILLEGASS, Clerk				
Project Title: Unit 5 Levee Mile 3.06 Pipe R	eplacement		BY NELIDA WILLIAMS DEPUTY CLERK				
Project Applicant: Reclamation District 784							
Project Location - Specific:	on Highway 65 and poor Forty	Mila Paad					
Unit 5 of the Horseshoe Levee, which is between Highway 65 and near Forty Mile Road							
Project Location - City: Arboga		ounty: Yul	oa 				
Description of Nature, Purpose and Beneficiar The project will involve removing an existing 1 must be replaced because DWR has determine pipe out of the levee, replacing the pipe, and t	2" pipe and replacing that piped the pipe is likely to fail. The	project will	involve digging the old				
Name of Public Agency Approving Project: Re	clamation 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)(4)) ☐ Emergency Project (Sec. 21080(b)(4)) ☐ Categorical Exemption. State type an ☐ Statutory Exemptions. State code nur	3); 15269(a)); ; 15269(b)(c)); d section number: Existing fa	cilities 153 eg. 15282(k	01 and 15302 x) Pipe replacement				
Reasons why project is exempt: The project involves no expansion of size or us failing pipe. The project is of limited scope and		cal maintena	ance work to replace a				
Lead Agency Contact Person: Patrick Meagher	Area Code/Telephor	ne/Extensio	n: <u>530-742-0520</u>				
If filed by applicant: 1. Attach certified document of exemption 2. Has a Notice of Exemption been filed b Signature:			i?. □ Yes □ No				
■ Signed by Lead Agency □ Signe	d by Applicant						
Authority cited: Sections 21083 and 21110, Public Reso Reference: Sections 21108, 21152, and 21152.1, Public		ived for filing a	at OPR:				

		DECEMENT	II INADED	
		RECEIPT		10
		58 - 0208		
		STATE CLE	ARINGHO	OUSE NUMBER (If applicable)
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.	· · · · · · · · · · · · · · · · · · ·			
EAD AGENCY	LEAD AGENCY EMAIL		DATI	
RECLAMATION DISTRICT 784			02/0	08/2024
COUNTY/STATE AGENCY OF FILING			DOC	UMENT NUMBER
YUBA			202	4FG-00012
PROJECT TITLE				
JNIT 5 LEVEE MILE 3.06 PIPE REPLACEMENT				
PROJECT APPLICANT NAME	PROJECT APPLICANT E	EMAIL	РНО	NE NUMBER
RECLAMATION DISTRICT 784	11100201741721074117		D 10 10 10	0) 742-0520
PROJECT APPLICANT ADDRESS	CITY	STATE		CODE
1594 BROADWAY	ARBOGA	CA	959	
	ANDOOA			
PROJECT APPLICANT (Check appropriate box) X Local Public Agency School District	Other Special District	□ Sta	te Agency	☐ Private Entity
X Local Public Agency School District				
CHECK APPLICABLE FEES:				
☐ Environmental Impact Report (EIR)		\$4,051.25	\$	2
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,916.75		
☐ Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,377.25		
Gottined regulatory riogram (orally accument paymont use	and any to all the	* 1,***		
☐ CDFW No Effect Determination (attach)				
☐ Fee previously paid (attach previously issued cash receipt cop	y)			
☐ Water Right Application or Petition Fee (State Water Resource	s Control Board only)	\$850.00	\$	
County documentary handling fee			\$	\$50.00
☐ Other 0.00			\$	
PAYMENT METHOD:				
☐ Cash ☑ Credit ☐ Check ☐ Other	TOTAL	RECEIVED	\$	\$50.00
	,		4	
SIGNATURE AGE	NCY OF FILING PRINTED N	IAME AND TIT	LE	
V (MONE)	Helida W	illiam	S	Deputy
	112.100	. 11.00.11		

Unit 5 LM 3.06

Yuba County

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

Receipt: 24-1611

Comment

NW

Product	Name	Extended
FG	CLERK FISH AND	\$50.00
	GAME FILINGS	
Docume	nt # 2	024FG-00012
Fil	ing ADMIN FEE	(NOTICE OF
	Туре	EXEMPT)
Com	ment	COUNTER
Total		\$50.00
Tender	(On Account)	\$50.00
Account#	VITALC	,
Account Name	VITALCHEK CLERK	
Customer	RECLAMATION	
Name	DISTRICT 784	

Thank You for Your Business

2/8/24 8:45 AM PST counterclerk1 Workstation: REC123 02/08/2024

08:45 AM PST

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

TERMINAL NAME: E8077301

ORDER# 176182396

PURCHASE

CLERK FEES

\$50.00

AGENCY SUBTOTAL: \$50.00 LEXISNEXIS SERVICE FEE: \$2.50

TOTAL USD: \$52.50

VISA CARD #: 6405 CHIP READ-CONTACT PAYMENT: CREDIT ISSUER MODE: AUTH CODE: PJM2 VAL CODE: 304039603182193 TRAN REF H: 0005 VISA CREDIT APP LABEL: NO SIG REQUIRED CVM: A00000000031010 AID: F4648BC592118E1F AROC: 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