# **Notice of Exemption**

Appendix E

To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency): Reclamation District 784					
Sacramento, CA 95812-3044	Arboga, CA 95961		<b>ENDORSED</b> FILED			
County Clerk			YUBA COUNTY CLERK/RECORDER			
County of: Yuba 915 8th Street, #107		(Address)	FEB 0 8 2024			
Marysville, CA 95901						
Project Title: Unit 5 Levee Mile 3.23 Pipe R	eplacement		DONNA HILLEGASS, Clerk BY NELIDA WILLIAMS DEPUTY CLERK			
Project Applicant: Reclamation District 784			<u></u>			
Project Location - Specific:						
Unit 5 of the Horseshoe Levee, which is between	en Highway 65 and near Fo	orty Mile Road				
Project Location - City: Arboga	Project Location	- County: Yu	ıba			
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	ries of Project: 8" pipe and replacing that ed the pipe is likely to fail. 1	pipe with a ne he project wil	ew 18" pipe. The pipe I involve digging the old			
Name of Public Agency Approving Project. Re	eclamation District 784					
Name of Public Agency Approving Project: Reclamation District 784  Name of Person or Agency Carrying Out Project: Reclamation District 784						
	501.					
Exempt Status: (check one):						
<ul><li>☐ Ministerial (Sec. 21080(b)(1); 15268);</li><li>☐ Declared Emergency (Sec. 21080(b)(</li></ul>						
☐ Emergency Project (Sec. 21080(b)(4)	: 15269(b)(c)):					
☑ Categorical Exemption State type an	d section number. Existing	g facilities 150	301 and 15302			
Statutory Exemptions. State code nur	mber: PRC 21080.21 and	l Reg. 15282(	k) 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		ypical mainter	nance work to replace a			
Lead Agency Contact Person: Patrick Meagher	Area Code/Tele	ohone/Extensi	on: 530-742-0520			
If filed by applicant:  1. Attach certified document of exemption 2. Has a Notice of Exemption been filed b Signature:		ving the projec	ot?. □ Yes □ No			
y		_ Tido				
Signed by Lead Agency □ Signer	ed by Applicant					
Authority cited: Sections 21083 and 21110, Public Reso Reference: Sections 21108, 21152, and 21152.1, Public		leceived for filing	at OPR:			

		RECEIPT					
		58 - 020	8202	4 - 14			
		STATE CL	EARII	NGHOUSE N	JMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.							
LEAD AGENCY	LEAD AGENCY EMAIL			DATE	2		
RECLAMATION DISTRICT 784				02/08/2024			
COUNTY/STATE AGENCY OF FILING				DOCUMENT	NUMBER		
YUBA					2024FG-00014		
PROJECT TITLE							
UNIT 5 LEVEE MILE 3.23 PIPE REPLACEMENT							
PROJECT APPLICANT NAME PROJECT APPLICANT E			MAIL PHONE NUMBER				
RECLAMATION DISTRICT 784				(530) 742-	0520		
PROJECT APPLICANT ADDRESS	CITY	STATE	Ē	ZIP CODE			
1594 BROADWAY	ARBOGA	CA		95961			
PROJECT APPLICANT (Check appropriate box)							
X Local Public Agency School District	Other Special District	St	tate Ag	gency	Private Entity		
CHECK APPLICABLE FEES:							
☐ Environmental Impact Report (EIR)		\$4,051.25 \$2,916.75					
☐ Mitigated/Negative Declaration (MND)(ND)							
☐ Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,377.25	\$_				
N. Farmer Comp.							
Exempt from fee							
<ul><li>☒ Notice of Exemption (attach)</li><li>☐ CDFW No Effect Determination (attach)</li></ul>							
Fee previously paid (attach previously issued cash receipt cop	iv)						
——————————————————————————————————————	<del></del>						
☐ Water Right Application or Petition Fee (State Water Resource	es Control Board only)	\$850.00	\$				
County documentary handling fee	• • • • • • • • • • • • • • • • • • • •		\$		\$50.00		
☐ Other 0.00			\$				
PAYMENT METHOD:			_				
☐ Cash ☑ Credit ☐ Check ☐ Other	TOTAL F	RECEIVED	\$_		\$50.00		
CIONATURE	NCY OF FILING PRINTED N	IAME AND T	ITI E				
SIGNATURE					D		
x Male	Nelida Wil	Manio			Deputy		

Units LM 3.23

02/08/2024

08:48 AM PST

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

TERMINAL NAME: E8077301

#### ORDER# 176182659

### **PURCHASE**

CLERK FEES

\$50.00

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

TOTAL USD: \$52.50

CARD II: 6405 VISA PAYMENT: CREDIT CHIP READ-CONTACT MODE: ISSUER AUTH CODE: VAL CODE: TRAN REF #: 304039604951779 REC II: 0007 APP LABEL: VISA CREDIT NO SIG REQUIRED CVM: A00000000031010 AID: ARQC: F2303F09E4D0330B AMOUNT: \$52.50 \*\*\* CARD APPROVED \*\*\*

# AMOUNT PAID:

\*

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: 24-1615

Produc				Extended
FG	CLERK	FISH	AND	\$50.00
	GAME F	ILING	SS	
Docume	ent #		2	2024FG-00014
Fil	ADMIT	V FEE	(NOTICE OF	
Туре				EXEMPT)
Com	ment			COUNTER
Total			The state of the s	\$50.00
Tender	(On Ac	count	)	\$50.00
Account#				, 55, 50
Account				

Name Customer VITALCHEK CLERK

Name

RECLAMATION DISTRICT 784

Comment

## Thank You for Your Business

2/8/24 8:48 AM PST counterclerk1 Workstation: REC123