

JUL 12 2024

NOTICE OF EXEMPTION

TO: X Office of Planning Research
P.O. Box 3044, Rm. 212
Sacramento, CA 95812

FROM: Lead Agency:
County Of Yuba
Community Development & Services Agency
915 8th Street, Suite 123
Marysville, CA 95901

DONNA HILLEGASS, Clerk
BY NELIDA WILLIAMS
DEPUTY CLERK

or

X County Clerk, County of Yuba
915 8th Street
Marysville, CA 95901

SUBJECT: Filing of Notice of Exemption

PROJECT TITLE/CASE NO.: CEQA-24-0002 (River Highlands/Gold Village Groundwater Improvement Project Amendment)

PROJECT LOCATION - SPECIFIC AND COMMUNITY:

The project will be located within the County Right of Way on Hammonton Smartsville Road at Latitude: 39° 11' 47.3" N and Longitude: 121° 18' 18.28" W, approximately 0.2 miles west of the intersection of Hammonton Smartsville Road and Chuck Yeager Road in the community of Smartsville.

DESCRIPTION OF NATURE, PURPOSE, AND BENEFICIARIES OF PROJECT:

The County is proposing the River Highlands/Gold Village Well Site and Water System Improvement Project that will consist of the installation of a new well, a new emergency backup generator, and a supervisory control and data acquisition (SCADA) system for the new well. The well will tie into the existing system within the well easement. The goal of the project is to provide a clean and reliable water source to the community of Gold Village /River Highlands in Yuba County, as well as improve the existing water system.

NAME OF PUBLIC AGENCY\CONTACT PERSON\TELEPHONE #: County of Yuba CDSA, Ciara Fisher, (530) 749-5470

NAME OF PERSON OR AGENCY CARRYING OUT PROJECT:

Yuba County Public Works Department
Attn: Robert Pontureri
915 8th Street, Suite 125
Marysville, CA 95901
(530) 749-5636

EXEMPT STATUS:

x Categorical Exemption: Sec. 15269 (c)

REASONS WHY PROJECT IS EXEMPT: This project is exempt from CEQA under Section 15269(c) - Emergency Projects, as the proposed well and backup generator are essential for preventing or mitigating the emergency water supply situation in the River Highlands/Gold Village community. The River Highlands/Gold Village community is designated as a disadvantaged community, relying on potable water from three wells. However, the water demand of the community surpasses the combined well production capacity. In 2013, the community faced a critical situation when the water tank ran dry, and the wells were unable to meet demands. The construction of a second well on this property is crucial to enhancing system capacity, flexibility, and resilience to drought or climate variability.

CONTACT PERSON: Ciara Fisher **TELEPHONE NO.:** 530-749-5463

SIGNATURE

Ciara Fisher

TITLE

Planner III

DATE RECEIVED FOR FILING

7/11/2024



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 - 07122024 - 33
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY YUBA COUNTY COMMUNITY DEVELOP SVCS	LEAD AGENCY EMAIL	DATE 07/12/2024
COUNTY/STATE AGENCY OF FILING YUBA	DOCUMENT NUMBER 2024FG-00033	

PROJECT TITLE
 CEQA-24-0002 (RIVER HIGHLANDS/GOLD VILLAGE GROUNDWATER IMPROVEMENT PROJECT AMENDMENT)

PROJECT APPLICANT NAME YUBA CO PUBLIC WORKS DEPT	PROJECT APPLICANT EMAIL	PHONE NUMBER (530) 749-5636
PROJECT APPLICANT ADDRESS 915 8TH STREET, SUITE 125	CITY MARYSVILLE	STATE CA
		ZIP CODE 95901

PROJECT APPLICANT (Check appropriate box)

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

CHECK APPLICABLE FEES:

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

- Water Right Application or Petition Fee (State Water Resources Control Board only) \$850.00 \$ _____
- County documentary handling fee \$ _____
- Other 0.00 \$ _____

PAYMENT METHOD:

- Cash Credit Check Other **TOTAL RECEIVED** \$ _____ **\$0.00**

SIGNATURE X	AGENCY OF FILING PRINTED NAME AND TITLE Nelida Williams Deputy
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