

Notice of Exemption

Appendix E

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

From: City of Santa Rosa
69 Stony Circle
Santa Rosa, CA 95401

County Clerk
County of Sonoma
585 Fiscal Drive, Room 103
Santa Rosa, CA 95403

Project Title: Transit Mall Roadbed Rehab
Project Applicant: City of Santa Rosa, Transportation and Public Works
Project Location – Specific: 2nd St between Santa Rosa Ave and B St.
Project Description: Rehabilitate 500' of roadway at the Santa Rosa Transit Mall.
Name of Public Agency Approving Project: CITY OF SANTA ROSA
Name of Person or Agency Carrying Out Project: Peter Porata, (707) 543-3865
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: Section 15301(c) Existing Facilities
- Statutory Exemptions. State code number:

Reasons why project is exempt: This project is exempt under CEQA Guidelines Section 15301(c) since it involves rehabilitating and repairing the existing two-lane roadbed in the same location with no use expansion and no creation of additional automobile lanes.

Lead Agency Contact Person: Monet Sheikhali, (707) 543-4698

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: Monet Sheikhali Date: 06/19/2024 Title: Environmental Coordinator

Signed by Lead Agency Signed by Applicant

This notice was posted on 06/19/2024
and will remain posted for a period of thirty days
through 07/20/2024
Doc No.49-06192024-194

Deva Marie Proto, County Clerk
BY: Norma Gonzalez
Norma Gonzalez, Deputy Clerk

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: 49-06192024-194
STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY CITY OF SANTA ROSA	LEAD AGENCY EMAIL	DATE 06/19/2024
COUNTY/STATE AGENCY OF FILING SONOMA	DOCUMENT NUMBER 24-0619-02	

PROJECT TITLE
TRANSIT MALL ROADBED REHAB

PROJECT APPLICANT NAME CITY OF SANTA ROSA, TRANSPORTATION AND	PROJECT APPLICANT EMAIL	PHONE NUMBER (707)543-3865
PROJECT APPLICANT ADDRESS 69 STONY CR	CITY SANTA ROSA	STATE CA
		ZIP CODE 95401

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 | \$ _____ |
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| <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 | | \$ _____ |

PAYMENT METHOD:

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

SIGNATURE 	AGENCY OF FILING PRINTED NAME AND TITLE Norma Gonzalez, Deputy County Clerk-Recorder
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