

Notice of Exemption

Form D

To: [X] Office of Planning and Research
PO Box 3044, 1400 Tenth Street, Room 222
Sacramento, CA 95812-3044

From: Placer County Water Agency
P.O. Box 6570
Auburn, CA 95603
(Public Agency and Address)

[X] County Clerk, County of: Placer

Project Title: Alta Water Treatment Plant Phase II Project

Project Location - Specific: The Alta Water Treatment Plant is located 990 Alta Reservoir Court in Alta.

Project Location - City: Unincorporated area of Alta Project Location - County: Placer

Description of Project: The scope of this project includes replacement of the emergency backup diesel generator, addition of a new above-ground diesel fuel storage tank (approximately 750 gallon, double-walled containment tank), and construction of a new steel building to house the generator. The building will be approximately 13 feet by 21 feet in size and 14 feet in height. The existing generator room in the existing building will be converted to an electrical room to include installation of a new auto-transfer switch, and associated building electrical improvements. The project will also include minor instrumentation, programming and SCADA system modifications.

Construction, access and staging will occur on paved or previously disturbed areas at the Alta Water Treatment Plant site.

Name of Public Agency Approving Project: Placer County Water Agency

Name of Person or Agency Carrying Out Project: Placer County Water Agency

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));
[X] Categorical Exemption. State type and section number: Class 2, Section 15302 and Class 3 Section 15303
Statutory Exemption. State code number:

Reasons why project is exempt: The project consists of replacement or reconstruction of existing structures and facilities where the new structure will be located on the same site as the structure replaced and will have substantially the same capacity as the structure replaced. (Guidelines Article 19, Section 15302). The project consists of construction and location of new, small facilities or structures (Guidelines Article 19, Section 15303).

Lead Agency Area Code/
Contact Person: Jeremy Shepard, Project Manager Telephone/Extension: 530-823-4886

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: Heather Trejo Date: 9/14/16 Title: Environmental Specialist

[X] Signed by Lead Agency

[] Signed by Applicant

POSTED 09/16/2016
Through 11/02/2016
RYAN RONCO, COUNTY CLERK
By Deputy Clerk

#201

State of California -- Department of Fish and Wildlife
2015 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (Rev. 01/16)

RECEIPT# 31-160201
STATE CLEARING HOUSE# (if applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY

LEAD AGENCY PLACER COUNTY WATER AGENCY	DATE 09/16/2016
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COUNTY/STATE AGENCY OF FILING PLACER COUNTY CLERK AUBURN
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PROJECT TITLE ALTA WATER TREATMENT PLANT PHASE II PROJECT

PROJECT APPLICANT NAME PLACER COUNTY WATER AGENCY	PHONE NUMBER
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PROJECT APPLICANT ADDRESS PO BOX 6570 AUBURN	CITY CA	STATE 95604	ZIPCODE 530-823-4850
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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)	\$3,070.00	\$ _____
<input type="checkbox"/> Mitigated/Negative Declaration (MND) (ND)	\$2,210.25	\$ _____
<input type="checkbox"/> Application Fee Water Diversion (State Water Resources Control Board Only)	\$850.00	\$ _____
<input type="checkbox"/> Projects Subject to Certified Regulatory Programs (CRP)	\$1,043.75	\$ _____
<input checked="" type="checkbox"/> County Administrative Fee	\$50.00	\$ <u>50.00</u>
<input checked="" type="checkbox"/> Project that is exempt from fees		
<input checked="" type="checkbox"/> Notice of Exemption (attach)		
<input type="checkbox"/> DFG No Effect Determination (attach)		
<input type="checkbox"/> Other _____		\$ _____

PAYMENT METHOD:
 Cash
 Credit
 Check 162706
 Other

TOTAL RECEIVED \$50.00

SIGNATURE X 	TITLE L. Millanes, DEPUTY
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