



State of California - Department of Fish and Wildlife  
**2025 ENVIRONMENTAL DOCUMENT FILING FEE**  
**CASH RECEIPT**  
 DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

**Print**    **StartOver**    **Save**

RECEIPT NUMBER:  
 34 — 02/19/2025 — 043  
 STATE CLEARINGHOUSE NUMBER (If applicable)

**SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.**

LEAD AGENCY Fair Oaks Water District	LEAD AGENCY EMAIL	DATE 02/19/2025
COUNTY/STATE AGENCY OF FILING Sacramento	DOCUMENT NUMBER 2025-0048	

PROJECT TITLE

Northridge Replacement Well #9

PROJECT APPLICANT NAME Fair Oaks Water District	PROJECT APPLICANT EMAIL	PHONE NUMBER (916) 967-5723
PROJECT APPLICANT ADDRESS 10326 Fair Oaks Blvd.	CITY Fair Oaks	STATE CA
		ZIP CODE 95628

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)  | \$4,123.50 | \$ | 0.00 |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)                                   | \$2,968.75 | \$ | 0.00 |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,401.75 | \$ | 0.00 |
| <br>  |            |    |      |
| <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 | \$ | 0.00  |
| <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

X

Sacramento County  
 Donna Allred, Clerk/Recorder  
 (916) 874-6334

Receipt#: 001699000  
 2/19/2025 10:49:19 AM JBH  
 Order#: 20250023686

Description	Amount
Clerk - CEQA Filing Document 20250048	\$50.00
Notice of Exemption EIR Processing Fee	\$50.00
<b>Total Amount Due</b>	<b>\$50.00</b>
<b>Payments:</b>	
Check# 7896	\$50.00

We Appreciate Your Business  
 Have a Nice Day!