

Notice of Exemption

Appendix E

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044
County Clerk
County of: Sonoma
2300 County Center Drive Ste B177
Santa Rosa, CA 95403

From: (Public Agency):
Lower Lake County Waterworks District No. 1
PO Box 263, Lower Lake, CA 95457

(Address) 2025-017

FILED

February 21, 2025

JENAVIVE HERRINGTON

COUNTY CLERK
LAKE COUNTY

Project Title: Emergency Well Project

Project Applicant: Lower Lake County Waterworks District No. 1

Project Location - Specific:

By: [Signature]
Deputy clerk

Treatment Plant B 15660 and 15665 Schwartz Lane

Project Location - City: Lower Lake Project Location - County: Lake

Description of Nature, Purpose and Beneficiaries of Project:

The District operates six wells (Well 6A, 7, 8, 9, 10 and 11) at the Treatment Plant B site as well as the water treatment facilities for the well water produced there prior to introduction to the distribution system. Well 11 is not currently in operation and needs to be redeveloped in its existing location. Wells 9 and 10 would also be improved by the project. Proposed improvements include the following: assessment of well condition; rehabilitate wells, as needed; install new well pump and meter, as needed; and pump test well for yield and water quality.

Name of Public Agency Approving Project: Lower Lake County Waterworks District No. 1

Name of Person or Agency Carrying Out Project: Lower Lake County Waterworks District No. 1

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 1, Section 15301
Statutory Exemptions. State code number:

Reasons why project is exempt:

The project rehabilitates and improves existing public owned utilities (wells) used to provide public utility services (water). None of the proposed improvements would increase overall water capacity and would not result in expansion of use of the overall publicly owned water system. No exceptions per Section 15300.2 exist.

Lead Agency
Contact Person: James Kingland Area Code/Telephone/Extension: (707) 994-6009

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: [Signature] Date: 2/20/2025 Title: General Manager

[X] Signed by Lead Agency [] Signed by Applicant

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
2025 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

RECEIPT NUMBER:
 17-02/21/2025-012
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY LOWER LAKE COUNTY WATER WORKS DIST NO 1	LEAD AGENCY EMAIL	DATE 02/21/2025
COUNTY/STATE AGENCY OF FILING LAKE COUNTY	DOCUMENT NUMBER 2025-017	

PROJECT TITLE

EMERGENCY WELL PROJECT

PROJECT APPLICANT NAME LOWER LAKE COUNTY WATER WORKS DIST NO 1	PROJECT APPLICANT EMAIL	PHONE NUMBER
PROJECT APPLICANT ADDRESS PO BOX 263	CITY LOWER LAKE	STATE CA
		ZIP CODE 95457

PROJECT APPLICANT (Check appropriate box)

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

CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) \$ 4,123.50 \$ _____
 Mitigated/Negative Declaration (MND)(ND) \$ 2,968.75 \$ _____
 Certified Regulatory Program (CRP) document - payment due directly to CDFW \$ 1,401.75 \$ _____

- 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 \$ 50.00 \$ _____ 50.00
 Other \$ _____

PAYMENT METHOD:

- Cash Credit Check Other
 TOTAL RECEIVED \$ _____ 50.00

SIGNATURE X	AGENCY OF FILING PRINTED NAME AND TITLE Deputy County Clerk
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