To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency):
Sacramento, CA 95812-3044	
County Clerk County of:	(Address)
	(* 1881-555)
	
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	
Description of Nature, Purpose and Beneficia	irles of Project:
Name of Public Agency Approving Project: _	
Name of Person or Agency Carrying Out Pro	ject:
Exempt Status: (check one):	
☐ Ministerial (Sec. 21080(b)(1); 15268	
□ Declared Emergency (Sec. 21080(b)□ Emergency Project (Sec. 21080(b)(4)	
	nd section number:
	umber:
Reasons why project is exempt:	
Lead Agency	
Contact Person:	Area Code/Telephone/Extension:
If filed by applicant: 1. Attach certified document of exemptio	
·	by the public agency approving the project? ☐ Yes ☐ No
Signature:	Date: Title:
☐ Signed by Lead Agency ☐ Sign	ed by Applicant
Authority cited: Sections 21083 and 21110, Public Res Reference: Sections 21108, 21152, and 21152.1, Publi	