

NOTICE OF EXEMPTION

RECEIVED

2023 DEC 12 A 10:55

TO: Santa Barbara County Clerk of the Board of Supervisors

FROM: Henry Wakamiya, Planner, Planning and Development

The project or activity identified below is determined to be exempt from further environmental review requirements of the California Environmental Quality Act (CEQA) of 1970, as defined in the State and County Guidelines for the implementation of CEQA.

APN: 155-240-030 Case No.: 23EMP-00013

Location: 892 Toro Canyon Road

Project Title: Sheridan Family Trust – Emergency Permit

Project Applicant: ~~Braun and Associates, Inc.~~ BOB EASTON, AIA, ARCHITECT

Project Description: EMERGENCY DRIVEWAY SLIDE REPAIR

Name of Public Agency Approving Project: Santa Barbara County

Name of Person or Entity Carrying Out Project: ~~Braun and Associates, Inc.~~ LYNCH CONSTRUCTION

- Exempt Status:
- Ministerial
  - Statutory Exemption
  - Categorical Exemption
  - Emergency Project
  - Declared Emergency

Cite specific CEQA and/or CEQA Guidelines Section: Section 15269(c), Emergency Projects

Reasons to support exemption findings: CEQA Guidelines Section 15269(c) exempts "specific actions necessary to prevent or mitigate an emergency." Emergency action is warranted in this case because the 2023 winter storms damaged and undermined the existing roadway, creating emergency conditions. Therefore, this statutory exemption applies to the proposed project.

Lead Agency Contact Person: Henry Wakamiya

Phone #: 805-568-3017 Department/Division Representative: Henry Wakamiya

Date: \_\_\_\_\_

Sheridan Family Trust – Emergency Permit, 23EMP-00013  
September 27, 2023  
Attachment C – 2

Acceptance Date: 12/5/23

Distribution: Hearing Support Staff

Date Filed by County Clerk: 12/12/23



# 2023 CEQA Transmittal Memorandum

County of Santa Barbara - Clerk of the Board of Supervisors

105 E. Anapamu St. Room 407 • Santa Barbara • CA • 93101

(805) 568-2240

Complete this form when filing a Negative Declaration, Mitigated Negative Declaration, Environmental Impact Report or Notice of Exemption.

You will need to submit one original for posting plus one copy for the Department of Fish & Wildlife. A scanned copy including the date/time of posting will be emailed to the Lead Agency and Project Applicant. If you would like a return copy, please submit an extra copy along with a pre-addressed, stamped envelope.

Contact Person <b>Henry Wakamiya</b>		Phone <b>805-568-3017</b>	
Lead Agency <b>County of Santa Barbara - Planning and Development</b>		Lead Agency Email <b>wakamiyah@countyofsb.org</b>	
Project Title <b>Sheridan Family Trust Emergency Permit; 23EMP-00013</b>			
Project Applicant <b>Bob Easton</b>	Email <b>BOB@BOBEASTON.COM</b>	Phone	
Project Applicant Address <b>215 E. MOUNTAIN DRIVE</b>	City <b>SANTA BARBARA</b>	State <b>CA</b>	Zip <b>93108</b>

### DOCUMENT BEING FILED:

<input type="checkbox"/> Environmental Impact Report (EIR) .....	
<input type="checkbox"/> 2023 Filing Fee .....	\$3,839.25
<input type="checkbox"/> Previously Paid (must attach receipt) .....	\$0.00
<input type="checkbox"/> No Effect Determination (must be attached).....	\$0.00
<input type="checkbox"/> Negative Declaration or Mitigated Negative Declaration .....	
<input type="checkbox"/> 2023 Filing Fee .....	\$2,764.00
<input type="checkbox"/> Previously Paid (must attach receipt) .....	\$0.00
<input type="checkbox"/> No Effect Determination (must be attached).....	\$0.00
<input checked="" type="checkbox"/> Notice of Exemption .....	\$0.00
<input checked="" type="checkbox"/> County Administrative Handling Fee (required for all filings, effective 7/19/18) .....	\$50.00

TOTAL: **\$ 50.00**

### PAYMENT METHOD: ALL APPLICABLE FEES MUST BE PAID AT THE TIME OF FILING

Cash     Credit Card     Check # 1865     Journal Entry # \_\_\_\_\_  
(in person only)



COUNTY OF SANTA BARBARA

X 2180969

COB

Department

Date 12/12/23

Received from William P Sheridan

In Payment of NOE Processing Fee

Fifty

and 00 Dollars \$ 5000  
100

Received original of the above numbered receipt

CREDIT CARD	
CASH	
CHECK	X

*Kathy Peltier*  
SIGNATURE OF PAYOR

1865

*Kathleen Douglas*  
AUTHORIZED SIGNATURE



State of California - Department of Fish and Wildlife  
**2023 ENVIRONMENTAL DOCUMENT FILING FEE**  
**CASH RECEIPT**  
 DFW 753.5a (REV. 01/01/23) Previously DFG 753.5a

RECEIPT NUMBER:  
 42 — 12/12/2023 — 341  
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY County of Santa Barbara Planning & Development		LEAD AGENCY EMAIL wakamiyah@countyofsb.org	DATE 12/12/2023
COUNTY/STATE AGENCY OF FILING Santa Barbara			DOCUMENT NUMBER
PROJECT TITLE			

Sheridan Family Trust Emergency Permit; 23EMP-00013

PROJECT APPLICANT NAME Bob Easton	PROJECT APPLICANT EMAIL BOB@BOBEASTON.COM	PHONE NUMBER ( )
PROJECT APPLICANT ADDRESS 215 E. Mountain Drive	CITY Santa Barbara	STATE CA
		ZIP CODE 93108

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)  | \$3,839.25 | \$ | 0.00  |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)   | \$2,764.00 | \$ | 0.00  |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW         | \$1,305.25 | \$ | 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)                   |            |    |       |
| <hr/>   |            |    |       |
| <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 <i>X Katherine Douglas</i>	AGENCY OF FILING PRINTED NAME AND TITLE Katherine Douglas, Deputy Clerk
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