

NOTICE OF EXEMPTION

TO: County of Santa Barbara Clerk of the Board of Supervisors

FROM: Michael Soderman, Chief Financial and Administrative Office (on behalf of John T. Savrnock, District Attorney)

2023 DEC 13 P 4:37

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(s): N/A **Case No.:** N/A

Location: County of Santa Barbara

Project Title: California Governor’s Office of Emergency Services (Cal OES) Unserved/Underserved Victim Advocacy and Outreach (UV) Program Grant.

Project Description: The UV Grant Program is funded by Cal OES, and has been awarded to the District Attorney’s Office for advocacy and outreach to unserved/underserved victims in Santa Barbara County.

Exempt Status: (Check one)

- Ministerial
- Statutory
- Categorical Exemption
- Emergency Project
- Not a Project: Section 15378(b)(4)
- Other

Cite specific CEQA Guideline Section: Section 15378(b)(4); the actions are not a project as they are the creation of government funding mechanisms or other government fiscal activities which do not involve any commitment to any specific project which may result in a potentially significant impact on the environment.

Reasons to support exemption findings: The Santa Barbara County Office of the District Attorney is applying for and anticipates being awarded grant funding for the UV program. The District Attorney is requesting that the Board authorize the District Attorney to execute the grant agreement, if awarded. The Unserved/Underserved Victim Advocacy and Outreach (UV) Program provides outreach to victims of violent crime within the unserved and underserved communities of the immigrant Spanish- and Indigenous-speaking agriculture workforce in the Santa Maria area.



Michael Soderman, Chief Financial and Administrative Officer
Department/Division Representative

11/30/23

Date

Acceptance Date (date of final action on project): _____

Date Filed by County Clerk: _____

Distribution: (for posting six days prior to action, and posting original after approval)



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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 Notice of Determination (Negative Declaration, Mitigated Negative Declaration, Environmental Impact Report) or Notice of Exemption.

A scanned copy of the Department of Fish and Wildlife Receipt, Transmittal Memorandum and the CEQA filing 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 John DeAlba		Phone x82434	
Lead Agency County of Santa Barbara		Lead Agency Email jodealba@countyofsb.org	
Project Title Cal OES Unserved/Underserved Victim Advocacy and Outreach Program Program (UV)			
Project Applicant County of Santa Barbara District Attorney	Email jodealba@countyofsb.org	Phone x82434	
Project Applicant Address 1112 Santa Barbara St	City Santa Barbara	State CA	Zip 93101

DOCUMENT BEING FILED:

- Notice of Determination - Environmental Impact Report (EIR)
 - 2023 Filing Fee\$3,839.25
 - Previously Paid (must attach receipt) \$0.00
 - No Effect Determination (must be attached)..... \$0.00

Environmental Filing Fees will be collected *only* for projects that are approved. The Applicant must attest to the following:

- This project has been approved. Date of Approval: Click or tap to enter a date.

- Notice of Determination - Negative Declaration (ND) or Mitigated Negative Declaration (MND).....
 - 2023 Filing Fee \$2,764.00
 - Previously Paid (must attach receipt) \$0.00
 - No Effect Determination (must be attached)..... \$0.00

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- 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
In person only
- Check # _____
- Journal Entry # 0258247
In FIN send to 'COB CEQA' in CEO Dept



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7-15-C



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

Print **StartOver** **Save**

RECEIPT NUMBER:
42 — 12/13/2023 — 346
STATE CLEARINGHOUSE NUMBER (if applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY County of Santa Barbara		LEAD AGENCY EMAIL jodealba@countyofsb.org	DATE 12/13/2023
COUNTY/STATE AGENCY OF FILING Santa Barbara			DOCUMENT NUMBER

PROJECT TITLE

Cal OES Unserved/Underserved Victim Advocacy and Outreach Program (UV)

PROJECT APPLICANT NAME County of Santa Barbara District Attorney	PROJECT APPLICANT EMAIL jodealba@countyofsb.org	PHONE NUMBER (805) 568-2434
PROJECT APPLICANT ADDRESS 1112 Santa Barbara St	CITY Santa Barbara	STATE CA
		ZIP CODE 93101

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 |
|
 | | | |
| <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 <i>X Katherine Douglas</i>	AGENCY OF FILING PRINTED NAME AND TITLE Katherine Douglas, Deputy Clerk
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