Attachment 2

ATTACHMENT 2

CEQA Notice of Exemption

Date

Case Number

NOTICE OF EXEMPTION

Dept/Div/Year/Project#/NOF

TO: Santa Barbara County Board of Supervisors

FROM LEAD AGENCY: GENERAL SERVICES DEPARTMENT

Clerk of the Board-Filing Date

	TENED MODING IN GENERA	, ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	020 02.7		CIETK	oj tile bouru-	rilling Dute	
Staff Contact:			Division:					
Phone:	Fax:		Email:					
Address:		City:			State:	Zip:		
PROJECT INFORMATION:		Does this project involve			a state/federal agency?		Yes	No
Project Name:				District:				
Address:		City/Are	ea:		Z	ip Code:		
APN:	Project #:		NOE #:	Funding/POPP	A:			
Project Description: (Se	ection §15124 of the CEQA Guidelines defines the	e types of informa	ution that should be	included in a project desc	cription)			
DETERMINATION	(select category)	Scope of Ex	emption:					
Not a Projec	† (§15378)							
	emption (§15268)							
Statutory Exe	emption (§15260)							
Categorical	Exemption (§15354 [15302-33])							
	existing Facilities (§15300)							
Emergency I	Project Exemption (§ 15359)							
PRIMARY reason	for the Determination:							
FINDING TO SUP	PORT DETERMINATION: (atto	ach additio	nal material,	only if necessary	<i>'</i>)			
				7 //				
Department/Div	vision Du	ene Do	doson C	falt				

DISTRIBUTION:

Representative

NOTE: A copy must be posted at least 6 days prior to consideration of the activity by the decision-makers to comply with County CEQA guidelines and a copy must be filed with the County Clerk of the Board after project approval to begin a 35 day statue of limitations on legal challenges.

(print name:

)

Date



2021 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 Lead Agency			Phone Lead Agency Email		
Project Applicant	Phone	Phone			
Project Applicant Address	City	State	Zip		
	DOCUMENT BEING FILED):	_I		
☐ Environmental Impact Report (EIR)					
□2021 Filing Fee			\$3,445.25		
☐ Previously Paid (must atta	ch receipt)		\$0.00		
☐ No Effect Determination (must be attached)			\$0.00		
☐ Negative Declaration or Mitigated N	egative Declaration				
□2021 Filing Fee			\$2,480.25		
☐ Previously Paid (must atta	ch receipt)		\$0.00		
☐ No Effect Determination (r	nust be attached)		\$0.00		
☐ Notice of Exemption			\$0.00		
☐ County Administrative Handling Fee	(required for all filings, effective 7/	/19/18)	\$50.00		
		TOTA	L:		
PAYMENT METHOD: AL	L APPLICABLE FEES MUST BE	PAID AT THE TIME OF	F FILING		
☐ Cash ☐ Credit Card	□ Check # □.	Journal Entry # XXXX	XXXXX		

JE-0233294

		RECEIPT NUMBER:				
		_		_	_	
		STATE CLE	=ARIN	IGHOUSE N	UMBER (If applicable)	
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SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY	LEADAGENCY EMAIL			DATE		
ELAD AGENOT	LEADAGENCY EWAIL			DAIL		
COUNTY/STATE AGENCY OF FILING				DOCUMENT	T NUMBER	
PROJECT TITLE						
PROJECT APPLICANT NAME	PROJECT APPLICANT E	MAII		PHONE NUI	MBER	
THOSE OF ALL EIGHT INAME	TROSECT AT LICANT LIMAL			THONE NOMBER		
PROJECT APPLICANT ADDRESS	CITY	STATE		ZIP CODE		
PROJECT APPLICANT (Check appropriate box)						
Local Public Agency School District	Other Special District	Sta	ate Ag	ency	Private Entity	
CHECK APPLICABLE FEES:						
☐ Environmental Impact Report (EIR)		\$3,445.25	\$			
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,480.25				
☐ Certified Regulatory Program (CRP) document - payment due	directly to CDFW	\$1,171.25	\$_			
☐ Exempt from fee						
□ Notice of Exemption (attach)						
☐ CDFW No Effect Determination (attach)						
Fee previously paid (attach previously issued cash receipt cop	py)					
☐ Water Right Application or Petition Fee (State Water Resource	es Control Board only)	\$850.00	\$_			
☐ County documentary handling fee			\$_			
☐ Other			\$_			
PAYMENT METHOD:						
☐ Cash ☐ Credit ☐ Check ☐ Other	TOTAL F	RECEIVED	\$_			
SIGNATURE AGE	NCY OF FILING PRINTED N	AME AND TI	TLE			
X						
l l						

ORIGINAL - PROJECT APPLICANT COPY - CDFW/ASB COPY - LEAD AGENCY COPY - COUNTY CLERK DFW 753.5a (Rev. 01012021)