Attachment 2

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CEQA Notice of Exemption



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		Phone	
Lead Agency		Lead Agency Email	
Project Title			
Project Applicant	Email	Phone	
Project Applicant Address	City	State	Zip

DOCUMENT BEING FILED:

Environmental Impact Report (EIR)
□2021 Filing Fee\$3,445.25
□ Previously Paid (must attach receipt)\$0.00
□ No Effect Determination (must be attached)\$0.00
□ Negative Declaration or Mitigated Negative Declaration
□2021 Filing Fee\$2,480.25
□ Previously Paid (must attach receipt)\$0.00
□ No Effect Determination (must be attached)\$0.00
□ Notice of Exemption
County Administrative Handling Fee (required for all filings, effective 7/19/18)

TOTAL:_____
PAYMENT METHOD: ALL APPLICABLE FEES MUST BE PAID AT THE TIME OF FILING
Cash Credit Card Check #_____ Journal Entry #_____

NOTICE OF EXEMPTION

TO: Santa Barbara County Clerk of the Board of Supervisors

FROM: GENERAL SERVICES DEPARTMENT, LEAD AGENCY

Clerk of the Board-Filing Date

Based on a review of the project and project description, the following activity is determined as indicated below. Specific findings are indicated below and environmental review requirements of the California Environmental Quality Act (CEQA) of 1970, as amended, as defined in the State and County Guidelines for the implementation of CEQA are included, if applicable.

APN(s): 029-121-022 Case No. <u>GSD-</u> 05032022-21018-0001 (current date, project# and NOE number for this project)

LOCATION (city/unincorporated area/NA): Santa Barbara, CA

PROJECT TITLE: <u>Santa Barbara Engineering Building Roof Replacement and</u> <u>Restoration; District 1</u>

PROJECT DESCRIPTION (attach continuation page, if necessary): Replacement of the existing Built Up Roofing (BUR) system at the lower roof and restoration of the existing BUR system at the upper roof at the Engineering Building located at 123 E. Anapamu Street, Santa Barbara, CA.

DETERMINATION:

□ NOT A PROJECT (§15378): A project as defined by CEQA is one in which the whole of the action has a potential for resulting in either a direct or indirect physical change in the environment, or a reasonably foreseeable indirect physical change in the environment. The action described above has been determined by the Lead Agency to not be a Project under CEQA. No further environmental review is required.

EXEMPT STATUS: (Check Only One)
☐ Ministerial (§15369)
☐ Statutory (§15260)
☑ Categorical Exemption (§15354)
☐ Emergency Project (§15359)
Cite specific CEQA Guideline Sub-Section(s) (§§15301(a))

FINDINGS TO SUPPORT DETERMINATION: (attach additional material, if necessary):

The replacement of the existing lower roof system and restoration of the upper roof system are minor alterations to the existing facility. The project is categorically exempt from the provisions of CEQA pursuant to Sections 15301, subdivisions (a) (minor alterations to existing facilities) of Title 14 of the California Code of Regulations involving negligible or no expansion of existing or former use. The Santa Barbara Engineering Building is greater than 50 years old; however, the building does not have a historic distinction and there currently is no plan for such distinction. The Project will not cause a substantial adverse change in the potential significance of the buildings. The exceptions to this Categorical Exemption do not apply.

DISTRIBUTION: Clerk of the Board, Project File, Public Notice Board

	DocuSigned by:		
John L. Green	John L. Green	5/10/2022 10	52 AM PD1
Department/Division Representative	(print & sign name)	Date	

Department/Division Representative (print & sign name)

Date