Notice of Exemption

Appendix E

To: Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044

From: City of Santa Rosa 69 Stony Circle Santa Rosa, CA 95401

County Clerk County of Sonoma 585 Fiscal Drive, Room 103 Santa Rosa, CA 95403 This notice was posted on 07/17/2019 and will remain posted for a period of thirty days through 08/17/2019

Doc No.49-07172019-272

Project Title: Building Demolition

Project Applicant: City of Santa Rosa, Transportation and Public Works Department

Project Location - Specific: Doyle Park, 700 Doyle Park Dr, Santa Rosa, CA

Name of Public Agency Approving Project:	CITY OF SANTA ROSA		
Name of Person or Agency Carrying Out Project:	Grant Bailey, (707) 543-4508		
Exempt Status: (check one):			
☐ Ministerial (Sec. 21080(b) (1); 15268);	Deva Marie Proto, County Clerk		
☐ Declared Emergency (Sec. 21080(b) (3); 15269 (☐	(a)); BY: 187 —— Betsy Penn, Deputy Clerk		
☐ Emergency Project (Sec. 21080(b) (4); 15269 (b)	(c));		
□ Categorical Exemption. State type and section r	number: 15301 (L)		
☐ Statutory Exemptions. State code number:			
Reasons why project is exempt: Demolition and re	emoval of individual small structures.		
Lead Agency Contact Person: Susie Murray, (707)	543-4348		
16.61-11			
If filed by applicant:			
Attach certified document of exemption fin Attach certified document of exemption fine Attach certified	_		
2. Has a Notice of Exemption been filed by the	e public agency approving the project?		
□ Yes □ No			
Signature: AMILIANA Data: July 13	2010 Title: Environmental Coordinates		
Signature: AMunam Date: July 13,	2019 Title: Environmental Coordinator		
□ Digited by Lead Agency □ Digited by	Applicant		

Governor's Office of Planning & Research

			PT NUMBER: 172019-272		
		STATE CL	EARING	HOUSE NUMBER (If applicable)	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARL				ATE	
LEAD AGENCY CITY OF SANTA ROSA		L		DATE 07/17/2019	
COUNTY/STATE AGENCY OF FILING SONOMA			DOCUMENT NUMBER 19-0717-02		
PROJECT TITLE BUILDING DEMOLITION					
PROJECT APPLICANT NAME CITY OF SANTA ROSA	PROJECT APPLICANT EMAIL		4	PHONE NUMBER (707) 543-4508	
PROJECTAPPLICANT ADDRESS 700 DOYLE PARK DR	CITY SANTA ROSA	STATE CA	- 1	IP CODE 95405	
PROJECT APPLICANT (Check appropriate box) X Local Public Agency School District	Other Special District	St	ate Age	ncy Private Entity	
CHECK APPLICABLE FEES: Environmental Impact Report (EIR) Mitigated/Negative Declaration (MND)(ND) Certified Regulatory Program (CRP) document - payment	nt due directly to CDFW	\$3,271.00 \$2,354.75 \$1,112.00	\$		
	pt copy)				
☐ Water Right Application or Petition Fee (State Water Red ☐ County documentary handling fee ☐ Other	sources Control Board only)	\$850.00	\$ \$ \$		
PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☐ Other	TOTAL	RECEIVED	s _	\$50.00	
X TBM	AGENCY OF FILING PRINTED NAME AND TITLE Betsy Penn, Deputy County Clerk-Recorder				