Notice of Exemption

Appendix E

To: Office of Planning and Research P.O. Box 3044, Room 113	From: (Public Agency): Jeff Mitchem, Planning Director City of Mt Shasta, 305 N Mt Shasta Blvd				
Sacramento, CA 95812-3044 County Clerk	Mt Shasta, CA 96067	FHED			
County of: Siskiyou	(Addres	s) Siskiyou County			
		JAN 09 2024			
Project Title: 2023-31 Housing Element U	Jpdate	LAURA BYNUM, CLERK BY: ENDORSED-E FE			
Project Applicant: City of Mt Shasta		Deputy Cler			
Project Location - Specific: City-wide					
Project Location - City: Mt Shasta	Project Location - County:	Siskiyou			
Description of Nature, Purpose and Beneficiaries Comply with State Housing Element La					
Name of Public Agency Approving Project: City	of Mt Shasta				
Name of Person or Agency Carrying Out Project:	Jeff Mitchem				
Exempt Status: (check one): Ministerial (Sec. 21080(b)(1); 15268); Declared Emergency (Sec. 21080(b)(3); Emergency Project (Sec. 21080(b)(4): 15	15269(a)); 3269(b)(c)):				
☐ Categorical Exemption. State type and se		ise" 15061(b)(3)			
Reasons why project is exempt: The City, as lead agency, determined the 2023-31 Housing Element update of the California Environmental Cuality Act (CECA) under Section. 15061(b)(3) or changes to the environment; the Housing Element does not make any change densities, or land use intensities established by the General Plan; the revision allowed by the General Plan and those standards currently required by State I new development or rehabilitation of existing development, but rather updates	oes not have the potential to cause a significant impa f the CEQA Guidelines as the Housing Element will n is to the General Plan land use map and would not m is would not result in any changes to the intensities or law, the Housing Element does not entitle, propose, o	ot result in any direct or Indirect physical odify any land use designations, allowed densities of allowed uses beyond those or otherwise require the construction of			
Lead Agency Contact Person: Jeff Mitchem	Area Code/Telephone/Exte	nsion: 971.400.1840			
79.00	e public agency approving the pro	oject? Yes No Planning Director			
Authority cited: Sections 21083 and 21110, Public Resource Reference: Sections 21108, 21152, and 21152.1, Public Res		lling at OPR:			

CALIFORNIA ENVIRONMENTAL FEE FORM

On _	01.09.2024 (Date)	,	City of Mt Shasta (Name)	filed an application
for de	evelopment with	the	City of Mt Shasta (Name of City)	Before the application
is acc	cepted as comple	ete for	processing, fees in the following amount(s) n	nust be deposited with
the C	ounty Clerk.			
	T	х	Clerk Processing Fee	\$50.00
			Negative Declaration	\$2,916.75*
			EIR	\$4,051.25
			Categorically Exempt	\$0.00
			Statutorily Exempt	\$0.00
			Fee Exemption issued by the DFG	\$0.00
			Other	\$
_	coject shall be op §21089 (b)	perative	e, vested or final until the required fee is paid.	Public Resources
On _	1/09/24	,	(Name) Sharta deposited \$	50°50,
with t	the Siskiyou Co	unty Cl	ENDORSED-E. FHANCO	·
Appli (To b	ication No. <u>N</u> e completed wh	en appl	Receipt # 6	<u>1024002968</u> 7-01/09/2024-∞1

^{*} If it is determined by Siskiyou County that the fee required for a Negative Declaration does not apply to your project a refund will be granted.

2024 Fee.Form

DFW 753.5a (REV. 01/01/24) Previously DFG 753.5a

		Print		Save
		RECEIPT NUM	MBER:	
		47-01/09/2024	-001	
		STATE CLEAR	RINGHOUSE NU	MBER (If applicable)
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.				
LEAD AGENCY	LEADAGENCY EMAIL		DATE	
CITY OF MT SHASTA			01/09/2024	
COUNTY/STATE AGENCY OF FILING			DOCUMENT	NUMBER
SISKIYOU COUNTY			2024-47-001	
PROJECT TITLE				
2023-31 HOUSING ELEMENT UPDATE PROJECT APPLICANT NAME	PROJECT APPLICANT	EMAII	PHONE NUM	RED
CITY OF MT SHASTA	INOJECI APPLICANI	LIVOIL	FINONE NOW	DEIX
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE	
305 N. MT. SHASTA BLVD	MOUNT SHASTA	CA	96067	
PROJECT APPLICANT (Check appropriate box)	1			
X Local Public Agency	Other Special District	State	Agency	Private Entity
CHECK APPLICABLE FEES: Environmental Impact Report (EIR) Mitigated/Negative Declaration (MND)(ND) Certified Regulatory Program (CRP) document - payment due d	lirectly to CDFW		.	
 ☑ Exempt from fee ☑ Notice of Exemption (attach) ☐ CDFW No Effect Determination (attach) ☐ Fee previously paid (attach previously issued cash receipt copy))			
☐ Water Right Application or Petition Fee (State Water Resources	Control Board only)	s 850.00 ^{\$}	.	
County documentary handling fee	2,		<u> </u>	
☐ Other			s	
PAYMENT METHOD:				
☑ Cash ☐ Credit ☐ Check ☐ Other	TOTAL	L RECEIVED \$		50.00
ENDORSED-E. FRANCO AGEN	CY OF FILING PRINTED	NAME AND TITLE		
	ralda Franco Deputy C	Clerk		
<u> </u>				

COPY - LEAD AGENCY COPY - COUNTY CLERK DFW 753.5a (Rev. 01012024)