To: Office of Planning and Research P.O. Box 3044, Room 113 Sacramento, CA 95812-3044	From: (Public Agency):
County Clerk	
County of:	(Address)
Project Title:	
Project Applicant:	
Project Location - Specific:	
Project Location - City:	Project Location - County:
Description of Nature, Purpose and Beneficia	aries of Project:
Name of Person or Agency Carrying Out Pro- Exempt Status: (check one): Ministerial (Sec. 21080(b)(1); 15268) Declared Emergency (Sec. 21080(b)(4)) Emergency Project (Sec. 21080(b)(4)) Categorical Exemption. State type and)(3); 15269(a));
Lead Agency Contact Person:	
	Date: Title:
□ Signed by Lead Agency □ Sign	
Authority cited: Sections 21083 and 21110, Public Res Reference: Sections 21108, 21152, and 21152.1, Publi	