

**2026 ENVIRONMENTAL DOCUMENT FILING FEE CASH RECEIPT**

DFW 753.5a (REV. 01/01/26) Previously DFG 753.5a

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RECEIPT NUMBER:

59 — 09/17/2026 — 84

STATE CLEARINGHOUSE NUMBER (If applicable)

2024060942

**SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.**

LEAD AGENCY

University of California

LEAD AGENCY EMAIL

Brian.Harrington@ucop.edu

DATE

09/17/2026

COUNTY/STATE AGENCY OF FILING

OPR/SCH

DOCUMENT NUMBER

PROJECT TITLE

Berkeley Air &amp; Space Center at NASA Research Park

PROJECT APPLICANT NAME

Brian Harrington

PROJECT APPLICANT EMAIL

Brian.Harrington@ucop.edu

PHONE NUMBER

(510) 587-6116

PROJECT APPLICANT ADDRESS

1111 Franklin Street

CITY

Oakland

STATE

CA

ZIP CODE

94607

**PROJECT APPLICANT** (Check appropriate box)☐ Local Public Agency☐ School District☐ Other Special District☒ State Agency☐ Private Entity**CHECK APPLICABLE FEES:**

|                                                                                                     |            |    |          |
|-----------------------------------------------------------------------------------------------------|------------|----|----------|
| <input checked="" type="checkbox"/> Environmental Impact Report (EIR)                               | \$4,227.50 | \$ | 4,227.50 |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND)                                   | \$3,043.75 | \$ | 0.00     |
| <input type="checkbox"/> Certified Regulatory Program (CRP) document - payment due directly to CDFW | \$1,437.25 | \$ | 0.00     |

☐ Exempt from fee☐ Notice of Exemption (attach)☐ CDFW No Effect Determination (attach)☐ Fee previously paid (attach previously issued cash receipt copy)

|                                                                                                             |          |    |      |
|-------------------------------------------------------------------------------------------------------------|----------|----|------|
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00 | \$ | 0.00 |
| <input type="checkbox"/> County documentary handling fee                                                    |          | \$ |      |
| <input type="checkbox"/> Other                                                                              |          | \$ |      |

**PAYMENT METHOD:**☐ Cash ☐ Credit ☒ Check ☐ Other**TOTAL RECEIVED** \$ 4,227.50

SIGNATURE

X THOMAS.HUBBARD  
BBARDDigitally signed by  
THOMAS.HUBBARD  
Date: 2026.09.17  
11:30:35 -07'00'

AGENCY OF FILING PRINTED NAME AND TITLE

Thomas Hubbard, Jr. CEQA Analyst - State Clearinghouse