



ORANGE COUNTY
CLERK-RECORDER
CEQA FILING COVER SHEET

30-09/04/2025-0652

202585000832

FILED

September 4, 2025

HUGH NGUYEN

CLERK - RECORDER

By Hugh Nguyen
Deputy clerk

Complete and attach this form to each CEQA Notice filed with the County Clerk-Recorder

TYPE OR PRINT CLEARLY

Project Title

CIP 7335: BIRCH STREET IMPROVEMENTS

Check Document being Filed:

- Environmental Impact Report (EIR)
- Mitigated Negative Declaration (MND) or Negative Declaration (ND)
- Notice of Exemption (NOE)
- Other (Please fill in type):

**FILED IN THE OFFICE OF THE ORANGE
COUNTY CLERK-RECORDER ON 09/04/2025**

Posted 09/04/2025 Removed _____

Returned to agency on _____

DEPUTY 483

Filing fees are due at the time a Notice of Determination/Exemption is filed with our office. For more information on filing fees and No Effect Determinations, please refer to California Code of Regulations, Title 14, section 753.5.



CEQA NOTICE OF EXEMPTION

TO: Orange County Clerk-Recorder
601 N. Ross Street
Santa Ana, CA 92701

FROM City of Brea
Community Development Department
1 Civic Center Circle
Brea, CA 92821

PROJECT TITLE: CIP 7335: Birch Street Improvements

PROJECT LOCATION: Birch Street, from Brea Boulevard to South Associated Road

PROJECT DESCRIPTION: This project will improve the pavement on Birch Street, from Brea Boulevard to South Associated Road, pursuant to the City's Pavement Management Plan. The improvements will include paving upgrades, the removal and reconstruction of curb, gutter, sidewalk, and ADA ramps.

Name of Public Agency Approving Project: City of Brea

Project Applicant, Mailing and Email Address, Phone Number: City of Brea
Public Works Department
1 Civic Center Circle, Brea, CA 92821
pwencroachmentpermit@cityofbrea.gov | (714) 990-7691

Exempt Status: (Check one)

- | | |
|---|---|
| <input type="checkbox"/> Ministerial | <input checked="" type="checkbox"/> Categorical Exemption: <i>Section 15301(c), Class 1</i> |
| <input type="checkbox"/> Declared Emergency | <input type="checkbox"/> Statutory Exemption |
| <input type="checkbox"/> Emergency Project | <input type="checkbox"/> Other: |

Reason why project is exempt: The project consists of pavement upgrades to existing streets involving negligible or no expansions of use beyond that existing at the time of the lead agency's determination. In accordance with CEQA guidelines, the project is found categorically exempt under the above-mentioned statute.



Jessica Newton, Senior Planner

9/2/2025

Date

FILED

SEP 04 2025

HUGH NGUYEN, CLERK-RECORDER

BY:  DEPUTY

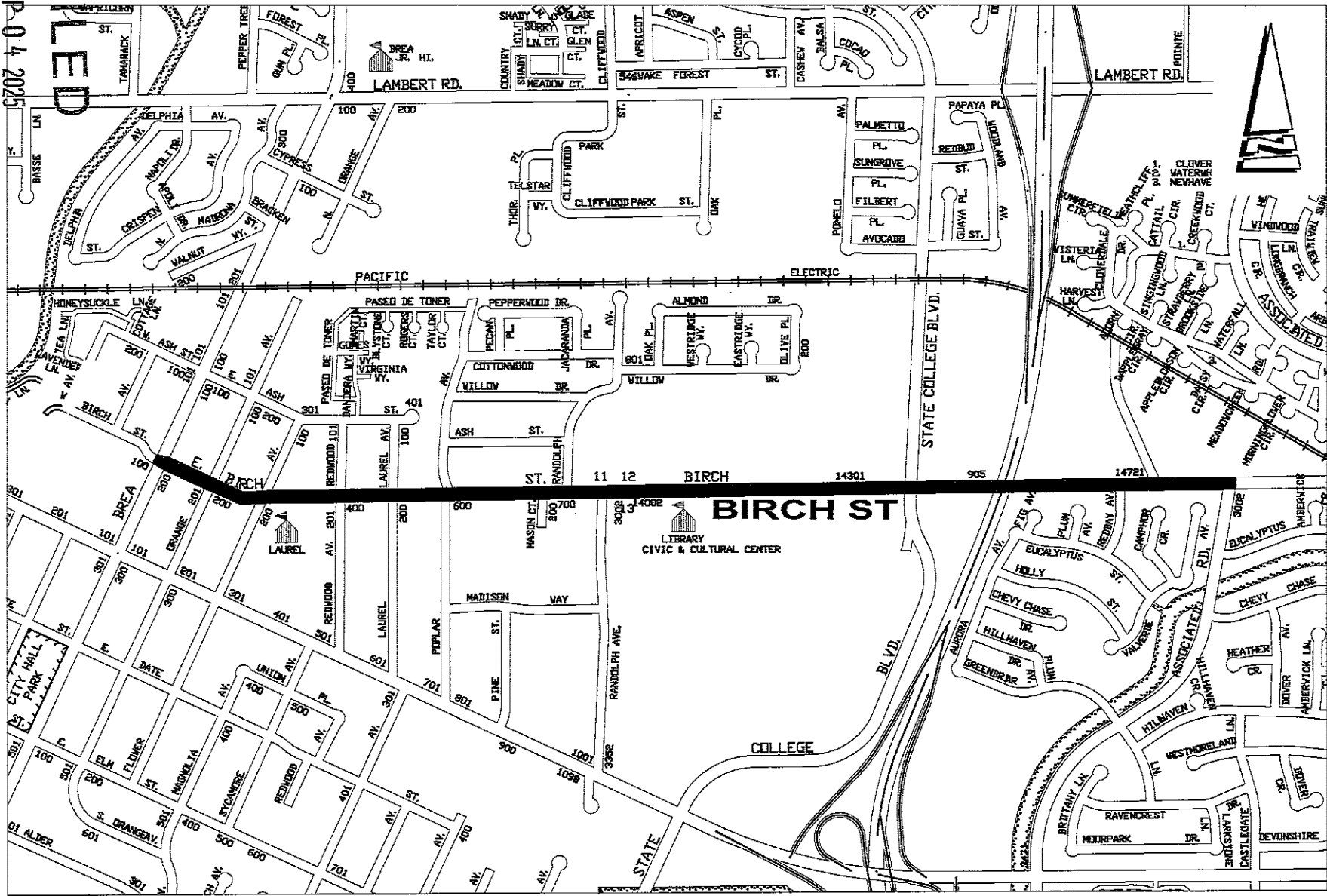
PROJECT 7335

STREET IMPROVEMENTS - BIRCH STREET IMPROVEMENTS BREA BLVD. TO S. ASSOCIATED RD.

BY:  HUGH NGUYEN, CLERK-RECORDER
DEPUTY

SEP 04 2025

FILED



VICINITY MAP
NOT TO SCALE



State of California - Department of Fish and Wildlife
2025 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
 DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a

RECEIPT NUMBER:
 30-09/04/2025-0652
 STATE CLEARINGHOUSE NUMBER (if applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY CITY OF BREA	LEAD AGENCY EMAIL	DATE 09/04/2025
COUNTY/STATE AGENCY OF FILING ORANGE COUNTY	DOCUMENT NUMBER 202585000832	

PROJECT TITLE
 CIP 7335: BIRCH STREET IMPROVEMENTS

PROJECT APPLICANT NAME CITY OF BREA	PROJECT APPLICANT EMAIL	PHONE NUMBER (714) 990-7691
PROJECT APPLICANT ADDRESS 1 CIVIC CENTER CIRCLE	CITY BREA	STATE CA
		ZIP CODE 92821

PROJECT APPLICANT (Check appropriate box)

Local Public Agency School District Other Special District State Agency Private Entity

CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) \$ 4,123.50 \$ _____
- Mitigated/Negative Declaration (MND)(ND) \$ 2,968.75 \$ _____
- Certified Regulatory Program (CRP) document - payment due directly to CDFW \$ 1,401.75 \$ _____

- 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) \$ 850.00 \$ _____
- County documentary handling fee \$ 50.00 \$ _____
- Other \$ _____

PAYMENT METHOD:

- Cash Credit Check Other **TOTAL RECEIVED \$ _____ 0.00**

SIGNATURE X	AGENCY OF FILING PRINTED NAME AND TITLE Kalci Do Deputy Clerk
--------------------	--