Notice of Exemption

To: Office of Planning and Research 1400 Tenth Street, Room 121 Sacramento, CA 95814	222 Hospitality Lane, 2 nd Floor San Bernardino, CA 92415-0450
 Clerk of the Board of Supervisors County of San Bernardino 385 North Arrowhead Avenue, Second Floor San Bernardino, CA 92415-0130 	BUARD OF SU 2021 APR -7 CALIFO
PROJECT DESCRIPTION	APPLICANT AN BERNAME AND SUPERVISOR APPLICANT AND STRUCK AND STRUC
The project involves replacing an existing mechanish sludge dewatering equipment which was abandoned a removed from the treatment plant facility. The purpose the new mechanical sludge dewatering equipment is more efficiently separate liquids from the solid material to the control of the solid material to the control of the solid material to the control of the solid material to the solid materi	c/o Special Districts Department 222 West Hospitality Lane, 2nd Floor of San Bernardino, CA 92415-0450 to hat
is processed through the treatment plant. The equipmen not designed to increase the existing volume of the slud	dge REPRESENTATIVE
material. General Location: Lytle Creek North Wastewater Recycling Plant 18101 Institution Road	County of San Bernardino Special Districts Department 222 West Hospitality Lane, 2 nd Floor San Bernardino, CA 92415-0450 DATE FILED & POSTED Posted On: 04/07/2021
San Bernardino, CA 92407	Removed On: 05/20/2021
State Clearing House Number: N/A	Receipt No: 36-0407202) - 185
Donald Day, Division Manager Lead Agency Contact Person	(909) 386-8817 Area Code/Telephone Number
Exempt Status: (check one)	
☐ Ministerial [Sec. 21080(b)(1); 15268];	
Declared Emergency [Sec. 21080(b)(3); 15269(a)];	
☐ Emergency Project [Sec. 21080(b)(4); 15269(b)(c)];	
Categorical Exemption. State type and section numb	er: 15301, Class 1 – Existing Facilities
Statutory Exemptions. State code number:	
Reasons why project is exempt: The Lytle Creek North Was Facilities Alteration Project is consistent with Guidelines Section involves the operation, repair, maintenance, permitting, leasing, I structures, facilities, mechanical equipment, or topographic feat purpose of installing a mechanical sludge dewatering equipment is liquid from barder solids that cannot be handled by the existing equipment in the structure of the structure of the structure.	in 15301, Class 1 "Existing Facilities" in that the Project icensing, or minor alteration of existing public or private ares, involving negligible or no expansion of use. The sto more efficiently process the sludge by separating the impment.
Signature (Public Aceptu)	3/10/2021 Division Manager
Signature (Public Agency)	Date Title
Date received for filing at OPR:	Planning Division- Revised March 2000

County of San Bernardino Special Districts Department COUNTY/STATE AGENCY OF FILING San Bernardino PROJECT TITLE CSA 70 GH Screw Press PROJECT APPLICANT NAME County of San Bernardino Special Districts Department County of San Bernardino Special Districts Department County of San Bernardino Special Districts Department				Print		StartOver	Save		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY County of San Bernardino Special Districts Department COUNTY/STATE AGENCY OF FILING San Bernardino PROJECT APPLICANT NAME COUNTY of San Bernardino Special Districts Department COUNTY of San Bernardino Special Districts Department PROJECT APPLICANT NAME COUNTY of San Bernardino Special Districts Department PROJECT APPLICANT ADRESS CITY STATE 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) Certified Regulatory Program (CRP) document - payment due directly to CDPW St.171.25 State Agency State Agency Other State Agency State Agency State Agency Other State Agency State Agency Other State Agency State Agency Other State Agency Other State Agency State Agency State Agency Other State Agency State Agency State Agency Other Other State Agency Other Other State Agency Other					UME	BER:		_	
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY County of San Bernardino Special Districts Department COUNTY/STATE AGENCY OF FILING San Bernardino PROJECT APPLICANT NAME COUNTY of San Bernardino Special Districts Department COUNTY of San Bernardino Special Districts Department PROJECT APPLICANT NAME COUNTY of San Bernardino Special Districts Department PROJECT APPLICANT ADRESS CITY STATE 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) State Agency Rough State Agency State Agency Private Entity CHECK APPLICABLE FEES: County State Agency					2021 —				
LEAD AGENCY									
LEADAGENCY County of San Bernardino Special Districts Department COUNTYSTATE AGENCY OF FILING DOCUMENT NUMBER	SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.							•	
COUNTY/STATE AGENCY OF FILING San Bernardino PROJECT TITLE CSA 70 GH Screw Press PROJECT APPLICANT NAME County of San Bernardino Special Districts Department PROJECT APPLICANT ADDRESS CITY STATE ZIP CODE 92415-0450 PROJECT APPLICANT (Check appropriate box) Clourly of San Bernardino CA 92415-0450 PROJECT APPLICANT (Check appropriate box) Clourly School District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Christonenetial Impact Report (EIR) Check Application (MND)(ND) Certified Regulatory Program (CRP) document - payment due directly to CDFW S1,171.25 COPW No Effect Determination (attach) COPW No Effect Determination (attach) COPW No Effect Determination (attach) COPW S1,171.25 COUNTY S850.00 Additional County documentary handling fee S0,000 County documentary handling fee County documentary handling fee County documentary handling fee S0,000 County Mourmentary handling fee S0,000 County Mourmentary handling fee S0,000 County Mourmentary handling fee County documentary han	LEAD ACTUOY					DATE			
San Bernardino PROJECT TITLE	County of San Bernardino Special Districts Department					04072021			
PROJECT APPLICANT NAME COUNTY of San Bernardino Special Districts Department PROJECT APPLICANT ADDRESS 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District State Agency Private Entity CHECK APPLICANT (Check appropriate box) Indicated/Negative Declaration (MND)(ND) Certified Regulatory Program (CRP) document - payment due directly to CDFW S1,171.25 S S S S S S S S S	COUNTY/STATE AGENCY OF FILING					DOCUMENT	IUMBER	_	
PROJECT APPLICANT NAME County of San Bernardino Special Districts Department PROJECT APPLICANT EMAIL County of San Bernardino Special Districts Department PROJECT APPLICANT ADDRESS CITY STATE ZIP CODE 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) S1,445,25 \$ 0.00 Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171,25 \$ 0.00 Certified Regulatory Program (CRP) document - payment due directly to CDFW S1,171,25 \$ 0.00 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) County documentary handling fee Other AGENCY OF FILING PRINTED NAME AND TITLE	San Bernardino								
PROJECT APPLICANT NAME County of San Bernardino Special Districts Department PROJECT APPLICANT ADDRESS CITY STATE ZIP CODE 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) State Agency State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) State Agency State Agency Private Entity CHECK APPLICABLE FEES: State Agency Private Entity State Agency Private Entity CHECK APPLICABLE FEES: State Agency Private Entity Private Entity State Agency Private Entity Private Entity State Agency Private Entity Private Entity State Agency P	PROJECT TITLE							_	
County of San Bernardino Special Districts Department PROJECT APPLICANT ADDRESS 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District 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 directly to CDFW 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) Water Right Application or Petition Fee (State Water Resources Control Board only) AGENCY OF FILING PRINTED NAME AND TITLE	CSA 70 GH Screw Press								
PROJECT APPLICANT ADDRESS 222 West Hospitality Lane, 2nd Floor PROJECT APPLICANT (Check appropriate box) Local Public Agency School District 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 directly to CDFW Motice 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) Water Right Application or Petition Fee (State Water Resources Control Board only) AGENCY OF FILING PRINTED NAME AND TITLE	· · · · · · · · · · · · · · · · · · ·		ROJECT APPLICANT EMAIL				PHONE NUMBER		
222 West Hospitality Lane, 2nd Floor San Bernardino CA 92415-0450 PROJECT APPLICANT (Check appropriate box) Local Public Agency School District Other Special District State Agency Private Entity CHECK APPLICABLE FEES: Environmental Impact Report (EIR) \$3,445.25 \$ 0.00 Mitigated/Negative Declaration (MND)(ND) \$2,480.25 \$ 0.00 Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 Exempt from fee Notice of Exemption (attach) CDFW No Effect Determination (attach) Ree previously paid (attach previously issued cash receipt copy) Water Right Application or Petition Fee (State Water Resources Control Board only) \$850.00 \$ 0.00 County documentary handling fee Other PAYMENT METHOD: AGENCY OF FILING PRINTED NAME AND TITLE	County of San Bernardino Special Districts Department					(909) 386-8817			
PROJECT APPLICANT (Check appropriate box) Local Public Agency	PROJECT APPLICANT ADDRESS	CITY	5	STATE		ZIP CODE			
CHECK APPLICABLE FEES: Environmental Impact Report (EIR) \$3,445.25 \$ 0.00 Mitigated/Negative Declaration (MND)(ND) \$2,480.25 \$ 0.00 Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 Exempt from fee	222 West Hospitality Lane, 2nd Floor	San Bernardino		CA		92415-0450			
CHECK APPLICABLE FEES: Environmental Impact Report (EIR)									
□ Environmental Impact Report (EIR) \$3,445.25 \$ 0.00 □ Mitigated/Negative Declaration (MND)(ND) \$2,480.25 \$ 0.00 □ Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 □ 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 AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE	✓ Local Public Agency School District	Other Special District		Sta	ate Ag	gency	Private Entity		
□ Environmental Impact Report (EIR) \$3,445.25 \$ 0.00 □ Mitigated/Negative Declaration (MND)(ND) \$2,480.25 \$ 0.00 □ Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 □ 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 AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE	CUECK ADDI IOADI E PEPO.			,				_	
☐ Mitigated/Negative Declaration (MND)(ND) \$2,480.25 \$ 0.00 ☐ Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 ☐ Exempt from fee ☑ Notice of Exemption (attach) ☐ CDFW No Effect Determination (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 \$ 0.00 ☐ County documentary handling fee \$ 50.00 ☐ Other \$ \$ 50.00 PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☐ Other TOTAL RECEIVED \$ SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE			00.44				0.4	20	
☐ Certified Regulatory Program (CRP) document - payment due directly to CDFW \$1,171.25 \$ 0.00 ☐ Exempt from fee ☑ Notice of Exemption (attach) ☐ CDFW No Effect Determination (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 \$ 0.00 ☐ County documentary handling fee \$ 50.00 ☐ Other \$ 70.00 ☐ Cash ☐ Credit ☐ Check ☐ Other FAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☐ Other AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE								_	
□ 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 \$50.00 AGENCY OF FILING PRINTED NAME AND TITLE					Þ.			_	
Motice 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 \$ 0.00 ☐ County documentary handling fee \$ 50.00 ☐ Other \$ PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☑ Other TOTAL RECEIVED \$ 50.00 SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE		aneony to ODI VV	φ1,17	1.20	Φ,		0.0	<u> </u>	
☐ 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 \$ 0.00 ☐ County documentary handling fee \$ 50.00 ☐ Other \$ \$ PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☑ Other TOTAL RECEIVED \$ 50.00 SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE	Exempt from fee								
□ Fee previously paid (attach previously issued cash receipt copy) □ Water Right Application or Petition Fee (State Water Resources Control Board only) \$850.00 \$ 0.00 □ County documentary handling fee \$ 50.00 □ Other \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	✓ Notice of Exemption (attach)								
Use Water Right Application or Petition Fee (State Water Resources Control Board only) \$850.00 \$ 0.00 County documentary handling fee \$50.00 Other \$ PAYMENT METHOD: Cash □ Credit □ Check ☑ Other TOTAL RECEIVED \$ SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE	☐ CDFW No Effect Determination (attach)								
☐ County documentary handling fee ☐ Other PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☑ Other AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE	☐ Fee previously paid (attach previously issued cash receipt copy	<i>'</i>)							
☐ County documentary handling fee ☐ Other PAYMENT METHOD: ☐ Cash ☐ Credit ☐ Check ☑ Other AGENCY OF FILING PRINTED NAME AND TITLE AGENCY OF FILING PRINTED NAME AND TITLE									
Other PAYMENT METHOD: Cash Credit Check Other TOTAL RECEIVED \$ 50.00 SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE		s Control Board only)	\$85	0.00	\$			_	
PAYMENT METHOD: Cash Credit Check Other TOTAL RECEIVED \$ 50.00 SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE					\$		50.0	00	
Cash Credit Check Other TOTAL RECEIVED \$ 50.00 SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE					\$,			_	
SIGNATURE AGENCY OF FILING PRINTED NAME AND TITLE							E0.6		
	☐ Cash ☐ Credit ☐ Check ☑ Other	TOTAL	RECEI	VED	\$,		50.0	<u> </u>	
	SIGNATURE AGEN	ICY OF FILING PRINTED I	NAME A	AND TI	rLE			_	