Notice of Exemption To: From: Napa Sanitation District Office of Planning and Research P.O. Box 1515 Soscol Ferry Road 3044, Room 113 Sacramento, CA 95812-Napa, CA 94558 3044 \boxtimes County Clerk County of Napa 1127 1st Street Napa, CA 94559 Project Title: Headworks Equipment Replacement Project (CIP 17726) **Project Location - Specific:** Soscol Water Recycling Facility, 1515 Soscol Ferry Road, Napa CA 94558. Project Location - City ____Napa __ Project Location - County: ____Napa County_ **Description of Project:** The project will replace and rehabilitate the Headworks Equipment in the Headworks Building and related electrical equipment and wiring. Name of Public Agency Approving Project: Napa Sanitation District Name of Person or Agency Carrying Out Project: Napa Sanitation District **Exempt Status:** (check one) ☐ Ministerial (Sec. 21080(b)(l); 15268); Declared Emergency (Sec. 21080(b)(3); 15269(a)); Emergency Project (Sec. 21080(b)(4); 15269(b)(c)); ☐ Categorical Exemption. State type and section number: 15302 (c) Statutory Exemptions. State code number: Reasons why project is exempt: Replacement or rehabilitation of existing utility system involving negligible or no expansion of capacity. Lead Agency: Napa Sanitation District Area Code/Telephone/Extension: 707-258-6030 Contact Person: Simon Kobayashi If filed by applicant: 1. Attach certified document of exemption finding. 2. Has a Notice of Exemption been filed by the public agency approving the project? \(\subseteq \text{Yes} \subseteq \subseteq \text{No} \) _____ Date: _____ Title: Associate Engineer Signature: ____ Engineer's name

Date received for filing at OPR:_____

☐ Signed by Applicant