

**NOTICE OF EXEMPTION**

TO: \_\_\_\_\_ Office of Planning and Research  
 1400 Tenth Street, Room 121  
 Sacramento, CA 95814

FROM: City of Cypress  
 5275 Orange Avenue  
 Cypress, CA 90630

X  County Clerk-Recorder  
 Public Services Division  
 P.O. Box 238  
 Santa Ana, CA 92702

10-19-11

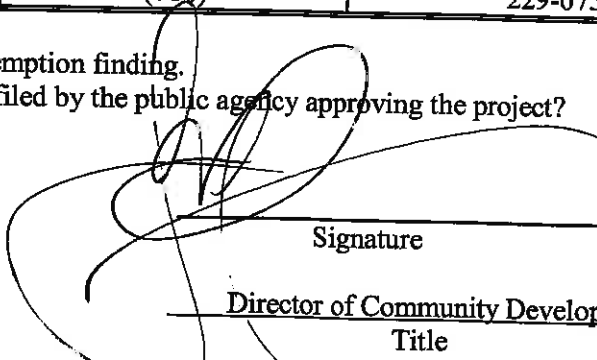
Exempt per Govt. Code Section 6103

<b>Project Title</b> Myra Avenue Storm Drain (SD2), Public Works Project No. 2008-06		
<b>Project Location - Specific</b> Myra Avenue, between Denni Street and Moody Street		
<b>Project Location - City</b> Cypress		<b>Project Location - County</b> Orange
<b>Description of Nature, Purpose, and Beneficiaries of Project</b> A request to replace ½ mile of existing sewer main and extension of ¼ mile of underground detention for Myra Avenue Pump Station No. 2 in the City of Cypress.		
<b>Name of Public Agency Approving Project</b> City of Cypress		
<b>Name of Person or Agency Carrying Out Project (Applicant's Name and Address)</b> Kamran Dadbeh, Assistant City Engineer, City of Cypress, 5275 Orange Avenue, Cypress, CA 90630		
<b>Exempt Status: (Check One)</b> <input type="checkbox"/> Ministerial (Sec. 21080(b)(1);15268); <input type="checkbox"/> Declared Emergency (Sec. 21080(b)(3);15269(a)); <input type="checkbox"/> Emergency Project (Sec. 21080(b)(4); 15269(b)(c)); <input checked="" type="checkbox"/> Categorical Exemption. Class 2, Section 15302 and Class 3, Section 15303 <input type="checkbox"/> Statutory Exemptions. State Code Number:		
<b>Reasons why project is exempt:</b> This project replaces existing sewer facilities in-place with no expansion of capacity and provides utility extensions, including street improvements, of reasonable length to serve the rehabilitated pump station facility.		
<b>Lead Agency Contact Person</b> Kamran Dadbeh, Assistant City Engineer	<b>Area Code</b> (714)	<b>Telephone Number</b> 229-6756

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?  
 Yes  X  No \_\_\_\_\_

\_\_\_\_\_  
 Date Received for Filing at OPR

  
 \_\_\_\_\_  
 Signature  
 \_\_\_\_\_  
 Director of Community Development  
 Title

- Signed by Lead Agency  
 Signed by Applicant