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

Print [redacted] Save

RECEIPT NUMBER:
47-09/10/2025-045

STATE CLEARINGHOUSE NUMBER *(If applicable)*

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY	LEAD AGENCY EMAIL	DATE
CITY OF MT SHASTA		09/10/2025
COUNTY/STATE AGENCY OF FILING		DOCUMENT NUMBER
SISKIYOU COUNTY		2025-47-045

PROJECT TITLE

CHESTNUT PARKING LOT

PROJECT APPLICANT NAME	PROJECT APPLICANT EMAIL		PHONE NUMBER
CITY OF MT. SHASTA			(530) 926-7510
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE
305 N MT. SHASTA BLVD.	MT. SHASTA	CA	96067

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	$ 50.00
☐ Other		$

PAYMENT METHOD:

☐ Cash ☐ Credit ☒ Check ☐ Other 54156 **TOTAL RECEIVED** $ 50.00

SIGNATURE	AGENCY OF FILING PRINTED NAME AND TITLE
X ENDORSED-W. WINNINGHAM	Wendy Winningham Deputy Clerk

ORIGINAL - PROJECT APPLICANT | COPY - CDFW/ASB | COPY - LEAD AGENCY | COPY - COUNTY CLERK | DFW 753.5a (Rev. 01012025)

Notice of Exemption

Appendix E

To: Office of Planning and Research
P.O. Box 3044, Room 113
Sacramento, CA 95812-3044

County Clerk
County of: _____

From: (Public Agency): CITY OF MT. SHASTA
305 N. MT. SHASTA BLVD.
MT. SHASTA, CA 96067
(Address)

FILED
Siskiyou County
SEP 10 2025
LAURA BYNUM, CLERK
BY DORSED-W WINNINGHAM
Deputy Clerk

Project Title: CHESTNUT PARKING LOT

Project Applicant: CITY OF MT. SHASTA

Project Location - Specific:

Project Location - City: MT. SHASTA Project Location - County: SISKIYOU

Description of Nature, Purpose and Beneficiaries of Project:

REPLACEMENT, RE-PAVING OF EXISTING PARKING LOT AT 415 N. CHESTNUT STREET TO PROVIDE PUBLIC PARKING. BENEFICIARIES ARE VISITORS TO MT. SHASTA -

Name of Public Agency Approving Project: CITY OF MT. SHASTA

Name of Person or Agency Carrying Out Project: KIM FOWLER / CITY OF MT. SHASTA

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 number: 15302 — Replacement / Reconstructa
- ☐ Statutory Exemptions. State code number: _____

Reasons why project is exempt:

Replacement of existing facility. New parking lot will be located on same site as existing parking lot and will have substantially the same purpose and capacity.

Lead Agency
Contact Person: KIM FOWLER Area Code/Telephone/Extension: 530-480-9258

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 No

Signature: Kim Fowler Date: 8/13/25 Title: PLANNING DIRECTOR

Signed by Lead Agency Signed by Applicant

Authority cited: Sections 21083 and 21110, Public Resources Code.
Reference: Sections 21108, 21152, and 21152.1, Public Resources Code.

Date Received for filing at OPR: _____

Revised 2011

CALIFORNIA ENVIRONMENTAL FEE FORM

On 9/10/2025 (Date), KIM FOWLER (Name) filed an application for development with the CITY OF MT. SHASTA (Name of City). Before the application is accepted as complete for processing, fees in the following amount(s) must be deposited with the County Clerk.

☒	Clerk Processing Fee	$50.00
☐	Negative Declaration	$2,968.75*
☐	EIR	$4,123.50
☒	Categorically Exempt	$0.00
☐	Statutorily Exempt	$0.00
☐	Fee Exemption issued by the DFG	$0.00
☐	Other _____	$_____

No project shall be operative, vested or final until the required fee is paid. *Public Resources Code* §21089 (b)

On 9/10/2025 (Date), City of Mt. Shasta (Name) deposited $ 50.00,

with the Siskiyou County Clerk ENDORSED-W. WINNINGHAM (Attest).

Application No. _____ Receipt # 47-09/10/2025-045/20250044
(To be completed when application is received for processing)

* If it is determined by Siskiyou County that the fee required for a Negative Declaration does not apply to your project a refund will be granted.