

Notice of Exemption

To: Office of Planning and Research
1400 Tenth Street, Room 121
Sacramento, CA 95814

From: San Bernardino County
Land Use Services Department
Planning Division
385 North Arrowhead Avenue, First Floor
San Bernardino, CA 92415-0187

Clerk of the Board of Supervisors
County of San Bernardino
385 North Arrowhead Avenue, Second Floor
San Bernardino, CA 92415-0130

DATE FILED & POSTED

Posted On: 10/05/2021

Removed On: 11/17/2021

Receipt No: 36-10052021-609

Project Description

APN:	Countywide
APPLICANT:	San Bernardino County, Land Use Services Department
PROPOSAL:	An ordinance to amend Title 8 of the County Code (Development Code) Chapter 83.03 and Tables 82-9A, 82-9B and 82-9C related to affordable housing incentives and density standards.
PROJECT #:	PMISC-2020-00059
COMMUNITY:	All unincorporated communities
LOCATION:	Countywide

Applicant

County of San Bernardino
Land Use Services Department
Name

385 N. Arrowhead Ave., 1st Floor
Address

San Bernardino, CA 92415-0187

(909) 387-8311
Phone

Representative

Heidi Duron, Planning Director
Name

Same as Applicant
Address

Same as Applicant
Phone

Heidi Duron, Planning Director
Lead Agency Contact Person

(909) 387-4110
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 number: 15061(b)(3) & 15308
- Statutory Exemptions. State code number: _____
- Other Exemption: _____

Reasons why project is exempt: The ordinance is exempt from the requirements of the CEQA pursuant to Section 15061(b)(3) of the CEQA Guidelines because it can be determined with certainty that there is no possibility that the Development Code Amendment may have a significant effect on the environment; and Section 15308 because the updated density bonus regulations are intended to assure the enhancement or protection of the environment by combatting the current housing crisis, including the environmental harms caused by the housing crisis, as declared by the State Legislature.


Signature Heidi Duron

Planning Director
Title

October 5, 2021
Date

Signed by Lead Agency Signed by Applicant
Date received for filing at OPR: _____



State of California - Department of Fish and Wildlife
2021 ENVIRONMENTAL FILING FEE CASH RECEIPT
 DFW 753.5a (REV. 01/01/21) Previously DFG 753.5a

Print **StartOver** **Save**

RECEIPT NUMBER:
 36 — 10052021 — 609
 STATE CLEARINGHOUSE NUMBER (If applicable)

SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

LEAD AGENCY San Bernardino County/Land Use Services Dept.	LEAD AGENCY EMAIL	DATE 10052021
COUNTY/STATE AGENCY OF FILING San Bernardino	DOCUMENT NUMBER	

PROJECT TITLE

PMISC-2020-00059, amends Tables 82-9A, 82-9B and 82-9C, related to minimum density residential development standards, and Chapter 83.03

PROJECT APPLICANT NAME San Bernardino County/Land Use Services Dept.	PROJECT APPLICANT EMAIL	PHONE NUMBER (909) 387-4110
PROJECT APPLICANT ADDRESS 385 N. Arrowhead Avenue, 1st Floor	CITY San Bernardino	STATE CA
		ZIP CODE 92415

PROJECT APPLICANT (Check appropriate box)

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

CHECK APPLICABLE FEES:

- | | | | |
|---|------------|----|------|
| <input type="checkbox"/> Environmental Impact Report (EIR) | \$3,445.25 | \$ | 0.00 |
| <input type="checkbox"/> Mitigated/Negative Declaration (MND)(ND) | \$2,480.25 | \$ | 0.00 |
| <input type="checkbox"/> 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)

- | | | | |
|---|----------|----|-------|
| <input type="checkbox"/> Water Right Application or Petition Fee (State Water Resources Control Board only) | \$850.00 | \$ | 0.00 |
| <input checked="" type="checkbox"/> County documentary handling fee | | \$ | 50.00 |
| <input type="checkbox"/> Other | | \$ | |

PAYMENT METHOD:

- Cash
 Credit
 Check
 Other *SAP*
 TOTAL RECEIVED \$ 50.00

SIGNATURE <i>X Jennifer Luna</i>	AGENCY OF FILING PRINTED NAME AND TITLE Jennifer Luna, Deputy Clerk
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