Notice of Exemption

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

From: {Public Agency}:
   San Francisco Bay Restoration Authority
   1515 C Lay St., 10th Floor
   Oakland, CA 94612

Project Title: Heron's Head Park Shoreline Resilience Project: Phase 2

Project Applicant: San Francisco Bay Restoration Authority

Project Location - Specific:
Heron's Head Park in the Bayview and Hinters Pount neighborhoods.

Project Location - City: San Francisco          Project Location - County: San Francisco

Description of Nature, Purpose and Beneficiaries of Project:
This project will monitor and report on the performance of nature-based shoreline stabilization elements recently constructed at the park for sea level rise adaptation. Monitoring and reporting will occur in set intervals over the next 10 years on rock groyne piles, gravel beach, subtidal reef balls, etc.

Name of Public Agency Approving Project: San Francisco Bay Restoration Authority

Name of Person or Agency Carrying Out Project: Port of San Francisco

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: 15305 info collection; 15333 small habitat restoration
☐ Statutory Exemptions. State code number: ______________________

Reasons why project is exempt:
The project as a whole (consisting of the Authority funded phase 1 and 2) is categorically exempt because it consists of habitat restoration and shoreline stabilization activities in areas of the park less cumulatively less than 5 acres; The current phase (phase 2) of the project consists of basic data collection that will not result in serious or major disturbance environmental resources.

Lead Agency
Contact Person: Erica Johnson
Area Code/Telephone/Extension: 510-286-5203

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: ______________________ Date: 03/15/23 Title: Project Manager

☐ Signed by Lead Agency ☐ Signed by Applicant

Date Received for filing at OPR: 03/15/23

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

2023–0000019

FILED
SAN FRANCISCO COUNTY CLERK
March 28, 2023
by: Marledyne Nadonza
Deputy County Clerk

Revised 2011
State of California - Department of Fish and Wildlife
2023 ENVIRONMENTAL DOCUMENT FILING FEE
CASH RECEIPT
DFW 753.5a (REV. 01/01/23) Previously DFG 753.5a

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<th>RECEIPT NUMBER:</th>
<th>38-03/28/2023-028</th>
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<tr>
<td>STATE CLEARINGHOUSE NUMBER (If applicable)</td>
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SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.

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<th>LEAD AGENCY</th>
<th>LEAD AGENCY EMAIL</th>
<th>DATE</th>
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<td>SAN FRANCISCO BAY RESTORATION AUTHORITY</td>
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PROJECT TITLE

HERON'S HEAD PARK SHORELINE RESILIENCE PROJECT: PHASE 2

<table>
<thead>
<tr>
<th>PROJECT APPLICANT NAME</th>
<th>PROJECT APPLICANT EMAIL</th>
<th>PHONE NUMBER</th>
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<tbody>
<tr>
<td>ERICA JOHNSON</td>
<td></td>
<td>(510) 286-5203</td>
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<tr>
<th>PROJECT APPLICANT ADDRESS</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
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</thead>
<tbody>
<tr>
<td>1515 CLAY ST., 10TH FLOOR</td>
<td>OAKLAND</td>
<td>CA</td>
<td>94612</td>
</tr>
</tbody>
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PROJECT APPLICANT (Check appropriate box)

- [x] Local Public Agency
- [ ] School District
- [ ] Other Special District
- [ ] State Agency
- [ ] Private Entity

CHECK APPLICABLE FEES:

- Environmental Impact Report (EIR) $3,839.25
- Mitigated/Negative Declaration (MND)(ND) $2,764.00
- Certified Regulatory Program (CRP) document - payment due directly to CDFW $1,305.25
- 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 $75.00
- Other $75.00

PAYMENT METHOD:

- [ ] Cash
- [ ] Credit
- [x] Check
- [ ] Other

TOTAL RECEIVED $75.00

SIGNATURE

[Signature]

AGENCY OF FILING PRINTED NAME AND TITLE

[Signature]
Mariedy Nadonza  Deputy Clerk