2024-0000030

FILED

JUN 0 7 2024

MNd-a

by: Mariedyne Nadonza

Deputy County Clerk

NOTICE OF EXEMPTION

TO: COUNTY CLERK 1 Dr. Carlton B. Goodlett Pl. City Hall, #160 San Francisco, CA 94102-4678

FROM: Golden Gate Bridge, Highway & Transportation District
P.O. Box 29000, Presidio Station
San Francisco, CA 94129-9000

Project Title:

FY 2024/2025 Golden Gate Transit (GGT) public transit services.

Project Location-Specific:

GGT serves cities in the following counties: San Francisco, Marin, Napa, Sonoma, and Contra Costa.

Description:

General public transportation service provided within the areas described above.

Name of Public Agency Approving Project:

Metropolitan Transportation Commission

-		_

Exemption Status:

	Declared Emergency
	Emergency Project
X	Categorical Exemption

State: Existing Facilities 15301 Federal: 23 CFR Sec. 771.11 (b) (16)

Reason Why Project is Exempt:

Existing services have been provided under Categorical Exemption for the past fifty (50) years. There are no significant new services or changes planned.

Contact Person:

Lauren dePaschalis, Capital & Grant Programs Analyst, 925.301.5444

Date Received for Filing

County Clerk

Signature – Lauren de Paschalis

POSTED JUN 0 7 2024'
TO _____

State of California - Department of Fish and Wildlife 2024 ENVIRONMENTAL DOCUMENT FILING FEE CASH RECEIPT

DFW 753.5a (REV. 01/01/24) Previously DFG 753.5a

		Print	Save	,
		RECEIPT NUME	MBER:	
		38-06/07/2024-0	49	
		STATE CLEARINGHOUSE NUMBER (If applicable)		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY.				
LEAD AGENCY	LEADAGENCY EMAIL		DATE	
GOLDEN GATE BRIDGE, HIGHWAY & TRANSPORTATION DISTRICT			06/07/2024	
COUNTY/STATE AGENCY OF FILING			DOCUMENT NUMBER	
SAN FRANCISCO COUNTY			2024-0000030	
PROJECT TITLE FY 2024/2025 GOLDEN GATE TRANSIT (GGT) PUBLIC TRANSIT (SERVICES.			
PROJECT APPLICANT NAME	PROJECT APPLICANT	EMAIL	PHONE NUMBER	
LAUREN DEPASCHALIS			(925) 301-5444	
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP CODE	
P.O. BOX 29000, PRESIDIO STATION	SAN FRANCISCO	CA	94129-9000	
PROJECT APPLICANT (Check appropriate box)				
	X Other Special District	☐ State A	gency Private E	ntity
CHECK APPLICABLE FEES: ☐ Environmental Impact Report (EIR) ☐ Mitigated/Negative Declaration (MND)(ND) ☐ Certified Regulatory Program (CRP) document - payment due ☑ Exempt from fee ☑ Notice of Exemption (attach) ☐ CDFW No Effect Determination (attach) ☐ Fee previously paid (attach previously issued cash receipt cop		\$ 2,916.75 \$		1
 □ Water Right Application or Petition Fee (State Water Resource ☑ County documentary handling fee 			79.00	
□ Other		\$		
PAYMENT METHOD:				
☐ Cash ☐ Credit ☑ Check ☐ Other 00065910	TOTAL	RECEIVED \$		79.00
SIGNATURE	NCY OF FILING PRINTED	NAME AND TITLE		
X Marie Marie	edyne Nadonza Deputy	Clerk		