	CEQA Statute Section 21080.	
\boxtimes	Categorical Exemption. State type and section number:	Section 15301: Existing Facilities
	Statutory Exemption. State code number:	

Reasons why project is exempt:

The project allowed for the continued operation of an existing commercial cannabis retail storefront. Project proposes no alterations to the existing structure and the only expansion of use is to include sale of adult-use recreational cannabis.

Lead Agency Area Code/ Contact Person: Telephone/Extension: Evan Mattes (530) 621-5345 evan.mattes@edcgov.us

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?

Signature (Public Agency)

Signed by Lead Agency Signed by Applicant

IAN 12 2024

JANELLE K. HORNE, Recorder-Clerk

EL DORADO CO. RECORDER-CLERK DATE POSTED: 112 2029 DATE REMOVED: Q 16 Q 4

DATE RETURNED: 3/7/24

	The state of the s		PT NUMBER: 1122024-004		
SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY	v	STATE CLEARINGHOUSE NUMBER (If applicable)			
LEAD AGENCY	LEADAGENCY EMAIL	DATE			
EL DORADO CO BUILDING DEPT		aaron.mount@edcgov.us		01/12/2024	
COUNTY/STATE AGENCY OF FILING		DC		DOCUMENT NUMBER	
EL DORADO		FW2024-		24-0004	
PROJECT TITLE					
CCUP19-0003/KANA					
PROJECT APPLICANT NAME	PROJECT APPLICANT E	EMAIL	PHONE NUMBER		
BOSSY & COMPANY INC	ryanc@bluelightgrov	vs.com	(530) 621-5345		
PROJECT APPLICANT ADDRESS	CITY	STATE	ZIP COD	E	
2850 FAIRLANE COURT	PLACERVILLE	CA	95667		
PROJECT APPLICANT (Check appropriate box)				 	
	Other Special District	☐ Sta	ate Agency	Private Entity	
CHECK APPLICABLE FEES:					
☐ Environmental Impact Report (EIR)		\$4,051,25	\$		
☐ Mitigated/Negative Declaration (MND)(ND)		\$2,916.75	\$		
☐ Certified Regulatory Program (CRP) document - payment do	ue directly to CDFW	\$1,377.25	\$		
☐ CDFW No Effect Determination (attach)					
☐ Fee previously paid (attach previously issued cash receipt c	ору)				
☐ Water Right Application or Petition Fee (State Water Resour	rces Control Board only)	\$850.00	\$		
□ County documentary handling fee			\$	\$50.00	
☐ Other			\$		
PAYMENT METHOD:				4.25	
Cash Credit Check Other TOTAL RECE		RECEIVED	\$	\$50.00	
SIGNATURE AG	ENCY OF FILING PRINTED N	AME AND TIT	LE		
X Kumbuly Preston Ja	nelle K. Horne Recorder-Cl	erk, by Kimb	erly Preston,	Dpty	