



State of California – The Natural Resources Agency  
 DEPARTMENT OF PARKS AND RECREATION  
**CEQA Compliance Certification**

Grantee: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Is the CEQA analysis complete?  Yes  No

**What document was filed, or is expected to be filed for this project’s CEQA analysis:**  
 (check one) Date complete/expected to be completed

Notice of Exemption (attach recorded copy if filed) \_\_\_\_\_

Notice of Determination (attach recorded copy if filed) \_\_\_\_\_

If CEQA is complete, and a Notice of Exemption or Notice of Determination was not filed, attach a letter from the Lead Agency explaining why, certifying the project has complied with CEQA and noting the date that the project was approved by the Lead Agency.

**Lead Agency Contact Information**

Agency Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: ( \_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

**Certification**

I hereby certify that the above referenced Lead Agency has complied or will comply with the California Environmental Quality Act (CEQA) and that the project is described in adequate and sufficient detail to allow the project’s construction or acquisition.

I further certify that the CEQA analysis for this project encompasses all aspects of the work to be completed with grant funds.

\_\_\_\_\_  
 AUTHORIZED REPRESENTATIVE  
 (Signature)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 AUTHORIZED REPRESENTATIVE  
 (Printed Name and Title)

FOR OGALS USE ONLY		
CEQA Document	Date Received	PO Initials
<input type="checkbox"/> NOE <input type="checkbox"/> NOD		