NOTICE OF INTENT TO APPEAR

County of Solano	plans to participate in the	water right hearing	regarding
(name of party or partici	·	J. 1	<i>y</i> -9 9
	CALIFORNIA WATERFIX HEARING partment of Water Resources and U.S. B Hearing scheduled to commence on Thurs	ureau of Reclama	
	: pate in Part I of the hearing pate in Part II of the hearing		
the hearing. (Please Hearing, and Pre-He "interested persons"	ple boxes below. Be sure to accurately de refer to Enclosure D of the October 30, 20 paring Conference (Hearing Notice) for description (Hearing Notice) for description (Hearing Notice) pate in the hearing as an interested person	015 <u>Notice of Petiti</u> criptions of "parties	ion, Public s" and
statement only. ✓	Part I Part II pate in the hearing as a party by cross-example.		
□ Part I: I/we plan to participate in Part I as a party and call the following witnesses to testify at the hearing. (Fill in the following table for Part I of the hearing <u>only</u>)			
NAME	SUBJECT OF PROPOSED TESTIMONY (Please indicate Application Number if Appropriate)	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
(If more space is require	ed, please add additional pages.)	<u> </u>	
hearing. Please note		lemental Notice of	Intent to
Note: If have protest and indicate your integration of the state of th	sted the Petition in accordance with Water ted the Petition, you must also fill out section tent to appear at the hearing to present evice your protest with the petitioners prior to the porting your protest at the hearing, your protest at the hearing,	ons 1 and 2 of this dence in support of the hearing, and the	form above f your protest. n do not
and indicate your int If you do not resolve present a case supp	ent to appear at the hearing to present evice your protest with the petitioners prior to the	dence in support of e hearing, and the	f your pr n do not

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Representative: Name (Print): County of Solano (William Emlen, Director of Resource Management) Mailing Address: 675 Texas Street, Suite 5500, Fairfield, CA 94533 Phone Number: (707, 784-6765) Fax Number: (707) 784-4805 E-mail: WFEmlen@solanocounty.com Optional: I/we decline electronic service of hearing-related materials. If you are unable to accept electronic service for any reason, please contact the hearing team by Tuesday, January 5, 2016, at 916-319-0960 or by email at CWFhearing@waterboards.ca.gov.

Signature: _____ Date: _____

4) Fill in the following information of the Participant, Party, Attorney, or Other