NOTICE OF INTENT TO APPEAR

Friant North Auth	ority pla	ans to participate ir	n the water
right hearing regarding (name of party or participant)		
-	CALIFORNIA WATERFIX HEARING partment of Water Resources and U.S. B Hearing scheduled to commence on Thurs	ureau of Reclama	
1) Check <u>all</u> that apply I/we intend to partici	: pate in Part I of the hearing pate in Part II of the hearing		
the hearing. (Please Hearing, and Pre-He "interested persons") I/we intend to particile only. Part I F	pate in the hearing as an interested person Part II pate in the hearing as a party by cross-exal	O15 Notice of Petitical Petitics of "parties and present a police of the present a police of the present applications of the present applicati	on, Public s" and icy statement
	articipate in Part I as a party and call the fone following table for Part I of the hearing o		to testify at
NAME	SUBJECT OF PROPOSED TESTIMONY (Please indicate Application Number if Appropriate)	ESTIMATED LENGTH OF DIRECT TESTIMONY	EXPERT WITNESS (YES/NO)
N/A			
(If more space is require	ed, please add additional pages.)		
hearing. Please note	participate in Part II as a party and will call to that you will be required to submit a Supple determined for Part II of the hearing that etc.	lemental Notice of	Intent to
3) Check if applicable: I/we have also prote	sted the Petition in accordance with Water	Code section 1703	3.2.
and indicate your int If you do not resolve present a case supp	red the Petition, you must also fill out section to appear at the hearing to present evidence your protest with the petitioners prior to the porting your protest at the hearing, your protest to participate in the hearing.	dence in support of e hearing, and ther	f your protest n do not

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Representative:				
Name (Print): <u>David Orth, Executive Officer</u> Mailing				
Address: Friant North Authority, 2907 N. Maple Aven	ue, Fresno, CA 93725			
Phone Number: (559) 289-2181 F	ax Number: (559) 233-7708			
E-mail: dorth@davidorthconsulting.com				
Optional:				
I/we <u>decline</u> 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: January 4, 2016			

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