



DEMAND FOR PAYMENT

Annual Permit Fees Required by Sections 13260 & 13269 of the California Water Code

Date: 10/21/2009
Facility ID: 9 371021782
Facility Name: LITE STONE CONCRETE
1105 N MARSHALL AVE
EL CAJON, CA 92020

Fiscal Year: 2009/10
Invoice Number: SW-0000304
Billing Period: 07/01/09 - 06/30/10
Invoice Date: 8/11/2009
Amount Past Due: \$ 1,008.00
Region: 9
Index Number: 040010

LITE STONE CONCRETE
JOHN WARD
1105 N MARSHALL AVE
EL CAJON, CA 92020

For details please refer to the original invoice

DEMAND FOR PAYMENT OF ANNUAL STORM WATER PERMIT FEES

This is a FORMAL DEMAND FOR PAYMENT on the above delinquent invoice. Our accounting office records indicate that you have failed to pay the required annual fee. Failure to pay the required fee is considered a misdemeanor under California law (Water Code Section 13261) and could result in a civil liability assessment of up to \$1000 per day for each day that the fees go unpaid, revocation of your discharge permit, or referral to a collection agency. Please return payment in the attached envelope along with the bottom portion of the invoice. Payment must be received no later than 30 days from the date of this notice.

Please note that a transfer of ownership or relocation of a facility requires a new Storm Water Permit. If your facility is closed or project completed, please file a Notice of Termination. Forms can be accessed on our website at:

(Construction) http://www.swrcb.ca.gov/water_issues/programs/stormwater/docs/constnot.doc
Or (Industrial) http://www.swrcb.ca.gov/water_issues/programs/stormwater/docs/indusnot.doc

If you have any questions about this invoice, please call the
State Water Resources Control Board at (916) 341-5247.

For payment status of your invoice, please go to the "Stormwater and Wastewater Permit Fee Invoice Information" link at
<http://water101.waterboards.ca.gov/dwqdas/feeunit/search/DischargerInvoiceInfo.asp>

Please allow 15 business days after mailing for your payment to be posted to the database.



Please detach and return this portion with your payment

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(Please print the above number on check or money order)

RM #: 351217

SWRCB
PO BOX 1888
SACRAMENTO, CA 95812-1888

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