



State Water Resources Control Board

January 14, 2019

VIA CERTIFIED OVERNIGHT MAIL

Lake Canyon Mutual Water Co. PO Box 866 Los Gatos, CA 95030

FAILURE TO SUBMIT NOTICE OF INTENT TO APPEAR AT PUBLIC HEARING CONCERNING THE IMPOSITION OF ADMINISTRATIVE CIVIL LIABILITY UPON LAKE CANYON MUTUAL WATER CO.

Lake Canyon Mutual Water Co. (Respondent) failed to submit to the State Water Resources Control Board (State Water Board) a Notice of Intent to Appear (NOI) for the March 11, 2019 Public Hearing to determine whether to impose administrative civil liability (ACL) upon the Respondent.

On October 19, 2018, the State Water Board, Division of Water Rights (Division) issued an ACL Complaint alleging that the Respondent failed to file Supplemental Statements for 2016 and 2017. On November 8, 2018, the Respondent submitted a request for hearing. On December 20, 2018, the State Water Board issued a Notice of Public Hearing.

The Notice of Public Hearing specifies:

If the State Water Board does not receive a NOI from the Respondent indicating the Respondent's intent to participate in the hearing as a party by the deadline specified below (January 11, 2019), the Board may deem the Respondent's request for a hearing regarding the administrative civil liability complaint to be withdrawn and may impose the administrative civil liability without further notice.

FELICIA MARCUS, CHAIR | EILEEN SOBECK, EXECUTIVE DIRECTOR



If the Respondent did not intend to withdraw their hearing request, they must immediately submit a NOI addressed as follows:

By Email:	wrhearing@waterboards.ca.gov With Subject of "Lake Canyon Mutual Water Co. Failur to File Water Use Report(s) Hearing"			
By Fax:	(916) 341-5400			
By Mail:	State Water Resources Control Board Division of Water Rights Attention: Michael Buckman, Hearings Unit Supervisor PO Box 2000 Sacramento, CA 95812-2000			
By Hand Delivery (see note below):	Joe Serna Jr. CalEPA Building Water Rights Records Room 1001 I Street, 2 nd Floor Sacramento, CA 95814			

How to Submit Documents to the Board

If we do not <u>**RECEIVE</u>** a NOI from the Respondent by **January 22**, **2019**, **12:00** noon, the State Water Board will immediately issue a notice cancelling the public hearing the Respondent previously requested and may immediately impose ACL upon them without further notice.</u>

If the scheduled hearing continues, the deadline of **January 29, 2019, 12:00 noon** for service of all parties' exhibits, exhibit identification indices, and statements of service to all other parties and for the Board to receive these documents, remains in effect.

Additional information concerning this hearing can be found on the Division's website at: https://www.waterboards.ca.gov/waterrights/water_issues/programs/hearings/acl_2016/.

Questions concerning non-controversial procedural matters should be directed to Lisa Hong at (916) 323-5175, or by e-mail at lisa.hong@waterboards.ca.gov; or Amanda Pearson at (916) 324-0145, or by e-mail at amanda.pearson@waterboards.ca.gov. (Gov. Code, § 11430.20, subd. (b).) If you have any legal or technical questions concerning the allegations in the ACL Complaint, or if you wish to discuss settlement of the ACL Complaint prior to hearing, you may contact prosecution team member John Prager, at (916) 341-5542, or by email at john.prager@waterboards.ca.gov.

Sincerely,

C. fitterhof

Conny Mitterhofer, Supervisor Hearings and Special Projects Section Division of Water Rights

NOTICE OF INTENT TO APPEAR FORM

(Name of Participant or Party)

_____ plans to participate in

,

the water right hearing regarding the (Name of Respondent and Enforcement Action)

Scheduled to commence on ONE of the following dates: February 7, 2019 February 8, 2019 March 11, 2019 March 12, 2019

1) Check only <u>one</u> of the following boxes:

Option 1: I/we intend to present a policy statement only and, therefore, to not participate as a party.

Option 2: I/we intend to participate as a party by presenting any of the following: an opening statement, direct testimony, cross-examination, and/or rebuttal.

2) If you selected Option 2 above and intend to provide direct testimony, complete the witness table below. If not, skip to instruction #3 below.

Witness Name	Expert Witness?		Subject of Proposed Testimony	Estimated Length of Oral
	Yes	No		Direct Testimony (minutes)

(If more space is required, please add additional pages.)

3) Fill in the following information of the participant, party, attorney, or other representative:

Name (type or print): _____ Mailing Address: _____ Phone Number: Fax Number: E-mail Address: Optional: □ I/we decline electronic service of hearing-related materials.

Signature: _____ Date: _____