



State Water Resources Control Board

January 14, 2019

VIA CERTIFIED OVERNIGHT MAIL

Skylawn Memorial Park PO Box 5070 San Mateo, CA 94402

FAILURE TO SUBMIT NOTICE OF INTENT TO APPEAR AT PUBLIC HEARING CONCERNING THE IMPOSITION OF ADMINISTRATIVE CIVIL LIABILITY UPON SKYLAWN MEMORIAL PARK

Skylawn Memorial Park (Respondent) failed to submit to the State Water Resources Control Board (State Water Board) a Notice of Intent to Appear (NOI) for the February 8, 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 Annual Water Use Report for 2017. On October 23, 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the Board may deem the Respondent's request for a hearing regarding the administrative civil liability complaint to be withdrawn and may impose the administrative civil liability without further notice.

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

How to Submit Documents to the Board

By Email:	wrhearing@waterboards.ca.gov With Subject of "Skylawn Memorial Park Failure 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		

If we do not RECEIVE 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.

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,

Conny Mitterhofer, Supervisor Hearings and Special Projects Section

Division of Water Rights

C. Jitterhof

NOTICE OF INTENT TO APPEAR FORM

(Name of Participant or	plar	s to participate in				
the water right hearing	regard	ing the	e (Name of Respondent and Enforcemen	nt Action)		
Schedu	Febr	uary 7	mence on <u>ONE</u> of the following dates: 7, 2019 February 8, 2019 1, 2019 March 12, 2019			
party.	o pres	ent a p	poxes: poolicy statement only and, therefore, to note that are a party by presenting any of the follo			
statement, direct testimonyIf you selected Option witness table below.	2 abo	ve <u>an</u>	<u>d</u> intend to provide direct testimony, o	complete the		
Witness Name		pert ess?	Subject of Proposed Testimony	Estimated Length of Oral Direct Testimony (minutes)		
				,		
(If more space is required,	please	add a	additional pages.)			
 Fill in the following in representative: 	forma	tion o	f the participant, party, attorney, or ot	her		
Name (type or print):						
Mailing Address:						
	Fax Number:					
E-mail Address:						
Optional: I/we <u>decline</u> electronic s	service	of he	aring-related materials.			
Signature:			Date:			
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