



GAVIN NEWSOM  
GOVERNOR



JARED BLUMENFELD  
SECRETARY FOR  
ENVIRONMENTAL PROTECTION

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## State Water Resources Control Board

January 14, 2019

### VIA CERTIFIED OVERNIGHT MAIL

Robert A. Lawson  
PO Box 298  
Victor, CA 95253

### **FAILURE TO SUBMIT NOTICE OF INTENT TO APPEAR AT PUBLIC HEARING CONCERNING THE IMPOSITION OF ADMINISTRATIVE CIVIL LIABILITY UPON ROBERT A. LAWSON**

Robert A. Lawson (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 November 5, 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the Board may deem the Respondent's request for a hearing regarding the administrative civil liability complaint to be withdrawn and may impose the administrative civil liability without further notice.

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FELICIA MARCUS, CHAIR | EILEEN SOBECK, EXECUTIVE DIRECTOR

1001 I Street, Sacramento, CA 95814 | Mailing Address: P.O. Box 100, Sacramento, CA 95812-0100 | [www.waterboards.ca.gov](http://www.waterboards.ca.gov)



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:                             | <a href="mailto:wrhearing@waterboards.ca.gov">wrhearing@waterboards.ca.gov</a><br>With Subject of “ <b>Robert A. Lawson Failure to File Water Use Report(s) Hearing</b> ” |
| By Fax:                               | (916) 341-5400  |
| By Mail:                              | State Water Resources Control Board<br>Division of Water Rights<br>Attention: Michael Buckman, Hearings Unit Supervisor<br>PO Box 2000<br>Sacramento, CA 95812-2000       |
| By Hand Delivery<br>(see note below): | Joe Serna Jr. CalEPA Building<br>Water Rights Records Room<br>1001 I Street, 2 <sup>nd</sup> Floor<br>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/](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](mailto:lisa.hong@waterboards.ca.gov); or Amanda Pearson at (916) 324-0145, or by e-mail at [amanda.pearson@waterboards.ca.gov](mailto: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](mailto:john.prager@waterboards.ca.gov).

Sincerely,



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 one 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 Direct Testimony (minutes) |
|--------------|--------------------------|--------------------------|-------------------------------|---|
|              | Yes                      | No                       |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |
|              | <input type="checkbox"/> | <input type="checkbox"/> |                               |   |

(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: \_\_\_\_\_