

**WRITTEN OBJECTION PURSUANT TO GOVERNMENT CODE SECTION 53759.1 -
REQUIRED TO PRESERVE RIGHT TO BRING COURT CHALLENGE (SEWER)**

- (1) THIS FORM IS PROVIDED FOR YOUR CONVENIENCE. PLEASE FILL OUT EACH PART OF THIS FORM COMPLETELY.**
- (2) TO EXHAUST ADMINISTRATIVE REMEDIES PURSUANT TO GOVERNMENT CODE SECTION 53759.1 ALL WRITTEN OBJECTIONS MUST BE TIMELY RECEIVED BY 5:00 P.M. ON JUNE 24, 2026. FAILURE TO TIMELY SUBMIT A WRITTEN OBJECTION WILL PROHIBIT YOU FROM BRINGING A JUDICIAL ACTION OR PROCEEDING ALLEGING NONCOMPLIANCE WITH ARTICLE XIII D OF THE CALIFORNIA CONSTITUTION FOR THESE PROPOSED WATER RATE FEE CHANGES.**
- (3) GENERALIZED OBJECTIONS ARE INSUFFICIENT. TO SATISFY THIS EXHAUSTION OF ADMINISTRATIVE REMEDIES REQUIREMENT, OBJECTING PARTIES MUST PRESENT THE SPECIFIC GROUNDS ON WHICH THE PROPOSED RATES ARE ALLEGED TO FAIL TO COMPLY WITH ARTICLE XIII D, SECTION 6 OF THE CALIFORNIA CONSTITUTION.**
- (4) LATE-FILED, NONCOMPLIANT, OR INCOMPLETE WRITTEN OBJECTIONS WILL NOT BE CONSIDERED AS SATISFYING THE EXHAUSTION OF ADMINISTRATIVE REMEDIES REQUIREMENT.**
- (5) THE DISTRICT WILL PREPARE A WRITTEN RESPONSE TO EACH TIMELY OBJECTION PRIOR TO THE CLOSE OF THE PUBLIC HEARING ON JUNE 25, 2026.**
- (6) SUBMITTING THIS OBJECTION IS A SEPARATE PROCESS FROM FILING A WRITTEN PROTEST UNDER THE REQUIREMENTS OF PROPOSITION 218. A WRITTEN PROTEST MUST BE SEPARATELY SUBMITTED AS SET FORTH IN THE NOTICE OF THE PUBLIC HEARING.**

NAME OF PROPERTY OWNER OR RATEPAYER: _____

I AM THE (___) RECORD OWNER/ (___) TENANT DIRECTLY LIABLE FOR THE CHARGE/ (___) / OTHER (SPECIFY): _____.

OWNER OR RATEPAYER'S ADDRESS: _____
(Must be subject to proposed rates)

APN OF PROPERTY: _____

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- 1. Identify the specific ways in which you believe the proposed rates fail to comply with Article XIII D, Section 6 of the California Constitution. (Attach additional pages as necessary.)**

- 2. Describe, with reference to your property and usage of sewer, how the proposed rates violate the provisions of law you cited above. (Attach additional pages as necessary.)**
