

Monthly Meter Reporting Form
 Water Supply Systems with Return Line Meters or Multiple Meters

Return to: BS/EACD 1124 Regal Row, Austin, Texas 78748, Fax: (512)282-7016
 E-mail: bseacd@bseacd.org

Permittee: _____

Meter Reading Date: _____ 20 ____ Check here if there is a change of address or contacts names. See reverse side of this form.

	Meter A	Meter B	Meter C
Current Month Meter Reading	_____	_____	_____
Prior Month Meter Reading	(-) _____	(-) _____	(-) _____
Gross Pumpage	= _____	= _____	= _____

<u>For Return Line Meter(s)</u>			
Current Month Meter Reading	_____	_____	_____
Prior Month Meter Reading	(-) _____	(-) _____	(-) _____
Return Pumpage	= _____	= _____	= _____
Gross Pumpage	_____	_____	_____
Return Pumpage	(-) _____	(-) _____	(-) _____
Net Pumpage	= _____	= _____	= _____

Gallons Sold	(-) _____	(-) _____	(-) _____
Gallons "Lost"	= _____	= _____	= _____

Comments: _____

Signed: _____ Date: _____

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