



FOX CANYON GROUNDWATER MANAGEMENT AGENCY

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OPV Additional Reporting Requirements Allocation Ordinance for Municipal Wells

Water Year: October 1, 2023 - September 30, 2024

FCGMA CombCode:

COMPLETED FORM MUST BE LEGIBLE

Mutual water companies, special districts and municipalities supplying groundwater or in lieu deliveries for municipal and industrial use in the Oxnard and Pleasant Valley Basins shall provide: 1) total volume of water from each source being supplied by the mutual water company, special district, or municipality; 2) total volume of monthly deliveries for all water being supplied by the mutual water company, special district, or municipality, and 3) separate list of all assessor's parcel numbers (or GIS shapefile) served by the mutual water company, special district, or municipality in accordance with the Ordinance to Establish Allocation System for Oxnard and Pleasant Valley (OPV) Basins, [Article 7.3](#). This information is required to be reported digitally for each water year. Email completed form and digital files, as listed above, to FCGMA.Report@ventura.org. Fillable forms are available at FCGMA.org/public-documents/forms/. Assessor information is available at assessor.countyofventura.org/assessor-data/property-search/.

Water Source (Purveyor)	Total Water Received
Name of each water purveyor providing water supplied by CombCode listed above, during this Water Year.	Yearly total of water in acre feet (AF), received from each Water Source listed in column to the left. The yearly value shall include total for this Water Year (WY).
Example: Calleguas Municipal Water District	632.000
Total Water Received:	

Total Monthly Water Delivered	
Monthly total of water in acre feet (AF) delivered from the CombCode listed above. Each monthly value shall include total from the 1st of the month to the last day of the month.	
<i>First Half of the Water Year</i>	<i>Second Half of the Water Year</i>
October:	April:
November:	May:
December:	June:
January:	July:
February:	August:
March:	September:
<i>Total from October to March:</i>	<i>Total From April to September:</i>
Total Water Delivered:	

Complete documentation is required to be submitted by an authorized representative of the Well Owner or designated Well Operator on record with the Agency. Failure to submit complete documentation may result in assessment of civil penalties in accordance with [Resolution No. 2019-01](#).

I declare under penalty of perjury under the laws of the State of California that the information contained within this document is true and correct.

Name of Authorized Well Owner or designated Well Operator

Signature of Authorized Well Owner or designated Well Operator

Date

Well Owner

Business Name

Well Operator

Street Address

City

State

Zip

Phone Number

Email

Supplemental files will be emailed to FCGMA.Report@ventura.org along with this signed, completed form.