FOX CANYON GROUNDWATER MANAGEMENT AGENCY



800 S. Victoria Avenue Ventura, CA 93009-1610 | (805) 654-2014 | FCGMA.Flowmeter@venturacounty.gov

Flowmeter Update Form

Refer to the <u>Flowmeter Update Instructions</u> document for information on how to complete this form.

State Well Number:		CombCode:					
Well Owner:		Well Operator:					
Owner Address:		Operator Address:					
City, State, Zip:		City, State, Zip:					
Owner Email:		Operator Email:					
Contact Person:		Contact Person:					
*If reported Owner and/or Oper	rator differs from Owner and/or O	perator registered with	the Agency	ı, submit a	Registration Form.		
Current Meter Information		Old Meter Information					
		For first time meter installations, leave this section blank.					
Current Flowmeter Is		Date of Failure*	Date of R	emoval	End Meter Reading		
☐ New From Manufacturer	☐ Repaired/Refurbished						
☐ Transferred to Location	☐ Other:	*If failure was disco	failure was discovered during a flowmeter calibration test,				
Date of Installation Start Meter Reading		submit the failed Flowmeter Calibration Test Report.					
		Meter Manufacturer	•	Meter M	lodel Number		
Meter Manufacturer	Meter Model Number						
		Meter Serial Number	r				
Meter Serial Number							
		Meter Units of Meas	sure				
Meter Units of Measure	Meter Multiplier		F	☐ Gal ☐ Other			
☐ AF ☐ CF ☐ Gal ☐ Other		Meter Multiplier		Meter Size (inches)			
Meter Size (inches)	Discharge Pipe Size (inches)						
		Comments					
Meter Use							
☐ Agricultural ☐ Domestic ☐ Municipal/Industrial		☐ Check here if groundwater was extracted between the date of					
Well/Flowmeter Access		-	-		on of the repaired /		
☐ Shed ☐ Open	☐ Behind Locked Gate	refurbished / new meter and complete the Groundwater Usage					
☐ Underground Vault	☐ Other	Estimate form on page 2.					
For all flowmeter change	es, complete all fields on th	his form and subm	it the fol	lowing i	tems:		
☐ Proof of flowmeter accur	acv						
	n the manufacturer, provide a co	opy of the manufactur	er's calibra	tion repoi	rt.		
	from the manufacturer, or if a n		ion report	is not ava	ilable, submit proof		
	rom an <u>Agency-approved calibr</u>	ation contractor.					
☐ Flowmeter invoice or inst							
	nstallation showing the location		d piping to	the well	in the same frame		
Clear photo(s) of the metClear photo of the meter	er face with totalizer, units, and	a multiplier visible					
Clear photo of the meter	seriai ilullibei	Reminder: Update y	our AMI v	endor up	on meter changes.		
Owner / Operator Sign	nature:						
• •	under the laws of the State of Cali	fornia that the information	on containe	d in this for	rm is true and correct.		
Print Name:	·						
Signature:							

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Groundwater Usage Estimate Form

The well operator must complete this form if unmetered groundwater use occurred between the date of flowmeter failure and the installation date of the repaired/refurbished/new flowmeter.

Resolution No. 2019-02 requires that broken or inaccurate meters be reported to the Agency and repaired or replaced within 30 days of failure. Per Agency Ordinance Code Section 3.1.2., operators shall be prepared to provide an acceptable method of computing extractions that occurred between the date of meter failure and the date of meter repair or replacement.

State Well Number:			CombCode:					
Start Date of Estimate End Date of		e Estimated		Groundwater Use				
				C	□ gallons	□ acre-fee		
Identify the Data Sources Used for	the Groundwater U	sage Estimate						
☐ Advanced Metering Infrastructure (AMI) Data		☐ Irrigation	Logs	☐ Southern California Edison Pump Test and Bill Data				
☐ Average of Previous Extraction Reporting		☐ Backup Flo	owmeter	☐ Other:				
Describe the Nature of the Meter I	Failure							
Describe How the Groundwater Us	sage Estimate Was C	Calculated						
Required Documentati	ion:							
Provide copies of any data source	ces used to suppor	t the groundwa	iter usage	estimate calculation. Some exa	imples in	clude, but		
are not limited to the following:								
Spreadsheet files contaAMI data export files	lining estimate cald	culations						
Copies of irrigation run	time logs and docu	umentation of t	he GPM fl	owrate				
		Rer	minder: U _l	pdate your AMI vendor upon	meter cl	nanges.		
Owner / Operator Sign	nature:							
I DECLARE under penalty of perjury		ne State of Califor	nia that the	e information contained in this for	m is true a	ınd correct.		
Print Name:				Date:				
Signature:				,				
	(For Agency (Use Only	·)				
Approved Total (AF) Date Range	e of Estimate	Reviewed By		Approval Signature		Date		

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