



San Bernardino Valley Water Conservation District

Established 1932

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 Redlands, Ca 92373-8032
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P.O. Box 1839
 Redlands, Ca 92373-0581

GROUNDWATER PRODUCTION STATEMENT

For Period July 1, 2014 to December 31, 2014

To be completed and filed by the operator of the following water producing facility within the San Bernardino Valley Water Conservation District:

State Well No:
Recordation No:
Local Name

Agency:
 Contact Name:
 Address:
 City, State, Zip

Instructions

Complete Steps 1 through 3; sign and date the certification;
 Keep duplicate copy of form for your records.

Mail this form and Enclose check or money order payable to:

**SAN BERNARDINO VALLEY WATER
 CONSERVATION DISTRICT**
 on or before **Jan 31, 2015**

(Please make any corrections to the above information, particularly if you no longer own or operate this facility.)

Step

	Method of Measurement	Water Meter	Electric Meter	Estimated
[a]	Meter Reading at End of Period			
[b]	Meter Reading at Beginning of Period			
[c]	Difference = [a] - [b]			
[d]	Meter Multiplier			
[e]	Total Meter Units = [c] × [d]			
[f]	Conversion Factor to Acre-Feet			
[g]	Total Ground Water Production in Acre-feet = [e] × [f] or [e] ÷ [f]			

CLASSIFICATION OF USE OF WATER

Step Measured in Acre-Feet to the nearest 0.1

Amount of water from [g] used for **Agricultural purposes** _____ x \$ 3.23 = \$ _____

Amount of water from [g] used for **all other purposes:** _____ x \$ 11.62 = \$ _____

Step (Add values from Step 2) **TOTAL GROUNDWATER CHARGE** (If paid by Jan 31, 2015): \$

Step **Late Fees (add 1% additional late fee per month late)**

If paid by February 28, 2015 multiply step 3 x 1.01 = \$

If paid by March 31, 2015 multiply step 3 x 1.02 = \$

CERTIFICATION

I DECLARE under the penalties of perjury that this water production statement, including the statements made and the figures shown, has been examined by me, and to the best of my knowledge and belief, is a true, correct and complete statement.

(Phone No.) _____ (Printed Name) _____ (Title) _____

(Date) _____ (Signature) _____