

Water Withdrawal Weekly Meter Reading Form

Forms to be retained at facility

Name of Facility:
Facility Contact:
GLWW Permit:
County:
Year:
Month:

Source Type:				
Source Name:				
Withdrawal Parcel ID:				
Crop Type:				
Total Acres:				
Weekly Meter Readings:	Week 1	Week 2	Week 3	Week 4
Date of Readings:				
Beginning Meter Reading:				
Ending Meter Reading:				
Gallons Used: *				
Meter Reader Initials:				

Monthly Total Gallons Used (add up all gallons used* for all source types)

* This figure to be reported to EHS office: *Kara Bugis - kmb388@cornell.edu*