NORTH HARRIS COUNTY REGIONAL WATER AUTHORITY

Groundwater and/or Surface Water Reporting and Billing Form - 2017

File Report Online! Online Pumpage Reporting System http://oprs.nhcrwa.com/

	of Well Owner:					
Identi	fy well #: Well #1:		Well #2:	Well #3:	Well	#4:
		Check the rep	porting period for w	which this report is being filed	<u>.</u>	
Reporting Period			Monthly Rate per 1,000 gallons			Due Date
	January 1-31, 2017		\$2.40 Groundwater / \$2.85 Surface Water			March 18, 2017
	February 1-29, 2017		\$2.40 Groundwater / \$2.85 Surface Water			April 18, 2017
	March 1-31, 2017		\$2.40 Groundwater / \$2.85 Surface Water			May 18, 2017
	April 1-30, 2017		\$2.90 Groundwater / \$3.35 Surface Water			June 18, 2017
	May 1-31, 2017		\$2.90 Groundwater / \$3.35 Surface Water			July 18, 2017
	June 1-30, 2017		\$2.90 Groundwater / \$3.35 Surface Water			August 18, 2017
	July 1-31, 2017		\$2.90 Groundwater / \$3.35 Surface Water			September 18, 2017
	August 1-31, 2017		\$2.90 Groundwater / \$3.35 Surface Water			October 18, 2017
	September 1-30, 2017		\$2.90 Groundwater / \$3.35 Surface Water			November 18, 2017
	October 1-31, 2017		\$2.90 Groundwater / \$3.35 Surface Water			December 18, 2017
	November 1-30, 2017		\$2.90 Groundwater / \$3.35 Surface Water			January 18, 2018
	December 1-31		ndwater / \$3.35 Surface Water		February 18, 2018	
Gallons of Groundwater Pumped and/or Imported for Reporting Period:						
	Well #1	Start IV	leter Reading	End Meter Reading		Total
	Well #2					
Well #3						
Well #4						
For additional wells, attach a second reporting form and put total from all wells below.						
IMPORTED from outside Source:						
NHCRWA Meter Reading:						
Gallons of Surface Water received for Reporting Period:						
		Start M	Start Meter Reading End Meter Reading		Total	
Meter #1 Meter #2						
For additional meters, attach a second reporting form and put total from all meters below.						
REUSE Water						
	1 Enter total gallons of Groundwater pumped and/or Imported				1	
2	Divide by 1,000				2	
3	Total Groundwater fee due (multiply line 2 x \$2.40 or \$2.90 effective 4/1/2017)				3	
4	Enter total gallons of Surface Water received					
5	Divide by 1,000					
6	Total Surface Water fee due (multiply line 5 x \$2.85 or 3.35 effective 4/1/2017)					
7	Deduct 2003 Capital Contribution Credit amount, if applicable					
8	Deduct 2005 Capital Contribution Credit amount, if applicable				8	
9	Deduct 2008 Capital Contribution Credit amount, if applicable					
10	Deduct Chloramination System Credit or other asset credit, if applicable					
11	Total due					
If your payment is received late, the Authority will send you an invoice for the late fees set forth in the I declare that the above information is true and correct to the best of my knowledge and beli						
,						
Dated: By:						
Phone: Name:						
Title:						

Make check payable to: North Harris County Regional Water Authority
Dept. 35
P. O. Box 4346