

**NORTH HARRIS COUNTY REGIONAL  
WATER AUTHORITY  
Groundwater and/or Surface Water  
Reporting and Billing Form - 2020**

**\*\*\*File Report Online!\*\*\*  
Online Pumpage Reporting System  
<http://oprs.nhcrwa.com/>**

Name of Well Owner: \_\_\_\_\_  
Identify well #: Well #1: \_\_\_\_\_ Well #2: \_\_\_\_\_ Well #3: \_\_\_\_\_ Well #4: \_\_\_\_\_

| <i>Check the reporting period for which this report is being filed.</i> |                                       |  |                    |
|---|---------------------------------------|--|--------------------|
| <i>Reporting Period</i>   | <i>Monthly Rate per 1,000 gallons</i> |  | <i>Due Date</i>    |
| <input type="checkbox"/>  | January 1-31, 2020                    | \$3.85 Groundwater / \$4.30 Surface Water        | March 18, 2020     |
| <input type="checkbox"/>  | February 1-29, 2020                   | \$3.85 Groundwater / \$4.30 Surface Water        | April 18, 2020     |
| <input type="checkbox"/>  | March 1-31, 2020                      | \$3.85 Groundwater / \$4.30 Surface Water        | May 18, 2020       |
| <input type="checkbox"/>  | April 1-30, 2020                      | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | June 18, 2020      |
| <input type="checkbox"/>  | May 1-31, 2020                        | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | July 18, 2020      |
| <input type="checkbox"/>  | June 1-30, 2020                       | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | August 18, 2020    |
| <input type="checkbox"/>  | July 1-31, 2020                       | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | September 18, 2020 |
| <input type="checkbox"/>  | August 1-31, 2020                     | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | October 18, 2020   |
| <input type="checkbox"/>  | September 1-30, 2020                  | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | November 18, 2020  |
| <input type="checkbox"/>  | October 1-31, 2020                    | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | December 18, 2020  |
| <input type="checkbox"/>  | November 1-30, 2020                   | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | January 18, 2021   |
| <input type="checkbox"/>  | December 1-31, 2020                   | <b>\$4.25 Groundwater / \$4.70 Surface Water</b> | February 18, 2021  |

**Gallons of Groundwater Pumped and/or Imported for Reporting Period:**

|         | Start Meter Reading | End Meter Reading | Total |
|---------|---------------------|-------------------|-------|
| Well #1 |                     |                   |       |
| Well #2 |                     |                   |       |
| Well #3 |                     |                   |       |
| Well #4 |                     |                   |       |

**For additional wells, attach a second reporting form and put total from all wells below.**

|   |         |  |  |
|---|---------|--|--|
| <b>IMPORTED</b> from outside<br>NHCRWA Meter Reading: | Source: |  |  |
|   |         |  |  |

**Gallons of Surface Water received for Reporting Period:**

|          | 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.**

| <b>REUSE Water</b> |  |    |  |
|--------------------|--|----|--|
| 1                  | Enter total gallons of <b>Groundwater</b> pumped and/or Imported                         | 1  |  |
| 2                  | Divide by 1,000  | 2  |  |
| 3                  | Total <b>Groundwater</b> fee due (multiply line 2 x \$3.85 or \$4.25 effective 4/1/2020) | 3  |  |
| 4                  | Enter total gallons of <b>Surface Water</b> received                                     | 4  |  |
| 5                  | Divide by 1,000  | 5  |  |
| 6                  | Total <b>Surface Water</b> fee due (multiply line 5 x \$4.30 or 4.70 effective 4/1/2020) | 6  |  |
| 7                  | Deduct 2003 Capital Contribution Credit amount, if applicable                            | 7  |  |
| 8                  | Deduct 2005 Capital Contribution Credit amount, if applicable                            | 8  |  |
| 9                  | Deduct 2008 Capital Contribution Credit amount, if applicable                            | 9  |  |
| 10                 | Deduct Chloramination System Credit or other asset credit, if applicable                 | 10 |  |
| 11                 | Total due  | 11 |  |

If your payment is received late, the Authority will send you an invoice for the late fees set forth in the Rate Order.  
I declare that the above information is true and correct to the best of my knowledge and belief.

Dated: \_\_\_\_\_ By: \_\_\_\_\_  
Phone: \_\_\_\_\_ Name: \_\_\_\_\_  
Title: \_\_\_\_\_

**Make check payable to: North Harris County Regional Water Authority  
Dept. 35  
P. O. Box 4346  
Houston, Texas 77210-4346**

**PLEASE FILE ONLINE AT [HTTP://OPRS.NHCRWA.COM/](http://OPRS.NHCRWA.COM/)  
OR MAIL THIS FORM WITH THE PAYMENT OR FAX TO 281-440-4104, PHONE: 281-440-3924**