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WELL CUSTOMER INFORMATION FORM

Instructions: This customer information form provides the North Harris County Regional Water Authority with contact information related to the Owner's approved groundwater well. This form is to be completed for all new wells and for any contact information changes to existing customers. Completed form to be returned by email to NHCRWAProgram@carollo.com.

Section I. Well Information			
Well Number:			
Well Address:			
Well Location:	Latitude:		Longitude:

Section II. Owner Information	
Name:	
Address:	
Email:	
Phone:	

Section III. Owner is: <i>(select all that apply)</i>	
<input type="checkbox"/>	New Customer. Complete all fields in Section IV.
<input type="checkbox"/>	New Water District. Additionally, complete all fields in Section V.
<input type="checkbox"/>	Existing Customer:
<input type="checkbox"/>	I verify that the information required in Section IV and V has been previously provided to NHCRWA and has not changed within the last 6 months.
<input type="checkbox"/>	Information required in Section IV or V has changed and updated information is provided below.
<input type="checkbox"/>	Interested in funding opportunities for water reuse projects.

Section IV. Information		
Well Operator if Different than Owner:	Company:	
	Name:	
	Email:	
	Phone:	
Billing Contact if Different than Owner:	Name:	
	Email:	
	Phone:	
Well Access Instruction: (e.g. Pets, Gates, Prior Notice Requests)		

Section V. Water District Information	
District Website Link:	
District Engineer	Company Name:
	Contact Name:
	Phone:
	Email:
District Attorney	Company Name:
	Contact Name:
	Phone:
	Email:

Provide List of Directors and Contact Information	
Director Name	Director Email