



# PERIODIC WATER USE REPORTING FORM



**Mail to:** Northwest Florida Water Management District  
**ATTN:** Division of Regulatory Services  
 152 Water Management Drive  
 Havana, Florida 32333-9700  
**Telephone:** (850) 539-5999

Month and Year of Reporting : \_\_\_\_\_

Permit Number and County: \_\_\_\_\_

Name of Permittee: \_\_\_\_\_

Withdrawal Station ID Number: \_\_\_\_\_

Crop Type: \_\_\_\_\_

Net Acres Irrigated: \_\_\_\_\_

Irrigation Method: \_\_\_\_\_

Notes on Equipment Failures: \_\_\_\_\_

	METER READING - Start	METER READING - End	USAGE - Gallons	TOTAL WEEKLY
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____
5	_____	_____	_____	_____
6	_____	_____	_____	_____
7	_____	_____	_____	_____
8	_____	_____	_____	_____
9	_____	_____	_____	_____
10	_____	_____	_____	_____
11	_____	_____	_____	_____
12	_____	_____	_____	_____
13	_____	_____	_____	_____
14	_____	_____	_____	_____
15	_____	_____	_____	_____
16	_____	_____	_____	_____
17	_____	_____	_____	_____
18	_____	_____	_____	_____
19	_____	_____	_____	_____
20	_____	_____	_____	_____
21	_____	_____	_____	_____
22	_____	_____	_____	_____
23	_____	_____	_____	_____
24	_____	_____	_____	_____
25	_____	_____	_____	_____
26	_____	_____	_____	_____
27	_____	_____	_____	_____
28	_____	_____	_____	_____
29	_____	_____	_____	_____
30	_____	_____	_____	_____
31	_____	_____	_____	_____

### REPORTING SUMMARY (Gallons)

Total Monthly Usage: \_\_\_\_\_

Maximum Daily Usage of the Month: \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please Print Name and Title:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_