## Submit to: metersupport@water.nv.gov Nevada Division of Water Resources 901 South Stewart Street, Suite 2002 Carson City, NV 89701

(775) 684-2800

## **TOTALIZING METER FORM**

Form 7001

Permit (water right) No(s).:		( <u>on</u>	e form per meter)
Well Name, if applicable: Well Log No.:			
In accordance with State Engineer's requirement for the installation a is being submitted as notice that the required totalizing meter has been		meter, the follow	wing information
METER LOCATION: Address:			
Assessor's Parcel Number (APN):		_	County, Nevada
or in the Quarter of the Quarter of Section	Township	N./S., Range circle one	E.
1. Meter Serial No.:	Date Installed:	h day	
2. Manufacturer of Meter:	3. Meter Model No.:	h day	year
4. Meter Units: Gallons Acre-feet Cubic Feet	Other:		
5. Multiplier: None (x1) x1000 x100 x1	0 x.01 x.001	Other:	
6. Meter Type: Analog Digital Total number of	f digits (including "fixed" zeros		
7. Meter Reading on Date Installed:	Date:		
8. Current meter reading:			
9. This meter is: Existing New Replacement If this is a replacement meter, answer items 10 and 11 for retired			
10. Retired Meter Serial No.:	Date Removed:		
11. Meter Reading on Date Removed:	mont	h day	year
Additional Notes (e.g., which gauge should be read for electronic met	ers, instructions for access to m	neter):	
OWNERSHIP INFORMATION	Data		
Please Print or Type	Date		
Owner Tenant Agent Correspondent Name:			
Address:	City, State, ZIP:		
Telephone: Cell Phone:	Email:		
CONTACT FOR WELL/METER			
Name:	Email:		
Telephone:	Cell Phone:		