Submit to: <u>metersupport@water.nv.gov</u> Nevada Division of Water Resources

Nevada Division of Water Resources 901 S. Stewart St., Ste. 2002

Carson City, NV 89701

O: (775) 684-2800 / F: (775) 684-2811

TOTALIZING METER FORM

Form 7001

Permit (water right) Number(s):	(one form per meter)			
Well Name (if any):	Well Log Number:			
In accordance with State Engineer's requinformation is being submitted as notice	L.		Ç ,	
METER LOCATION Address:				
Assessor's Parcel Number (APN): _		County:		
in the Quarter of the	Quarter of Section	Township	N./S. RangeE.	
1. Meter Serial Number:				
2. Manufacturer of Meter:		3. Meter Model:		
4. Meter Units: Gallon	Acre-Feet	Other:		
5. Multiplier: None (x1)	$\begin{bmatrix} x1000 & \boxed{x}100 & \boxed{x}10 \end{bmatrix}$	x.01	x.001 Other:	
6. Meter Type: Analog Digital 7. Total Number of Digits (including 'fixed' zeros if present):				
8. Installation Meter Reading:		Installation Date:		
9. Current Meter Reading:		Current Date:		
10. This Meter is: Existing Ne	ew Replacement (if a replacement)	cement meter, ans	wer items 11 & 12 for old meter)	
11. Old Meter Serial Number:	Date Old Meter was Removed:			
12. Meter Reading on Old Meter wh	en Removed:			
Additional Notes (e.g. which gauge sh	nould be read for electronic mete	rs, instructions fo	r access to meter, etc.):	
OWNERSHIP INFORMATION Please Print or Type		Date:		
Owner Tenant Agent	Correspondent	Name:		
Address:		_ City, State, ZIP:		
Phone Number:	_ Cell Phone:	_ Email Addres	s:	
CONTACT FOR WELL/METER				
Name:		_ Email Addres	s:	
Phone Number:		_ Cell Phone: _		