

**DELAWARE RIVER BASIN COMMISSION
PO BOX 7360
WEST TRENTON, NEW JERSEY 08628-0360
609/883-9500; FAX: 609/883-9522**

**WATER-USE REPORT
QUARTER _____ YEAR _____**

1. **NAME OF USER:** _____

CITY/TOWN: _____ **STATE:** _____ **ZIP** _____

2. **SOURCE OF WATER SUPPLY** _____

3. **LOCATION OF SOURCE:** Latitude _____ Longitude _____
Please supply in decimal degrees.

4. **TOTAL SURFACE WATER WITHDRAWAL - 1000 GALLONS**

	MONTH	WITHDRAWAL AMT.
a. First Month in Quarter		
b. Second Month in Quarter		
c. Third Month in Quarter		
TOTAL WATER USE - 1000 GALLONS		

FOOTNOTES/REMARKS: _____

5. **QUARTERLY CHARGES**

a. **Consumptive Water Use** _____ **1000 gal.**
x \$.06/thousand gallons = \$ _____

b. **Non-consumptive Water Use** _____ **1000 gal.**
x \$.0006/thousand gallons = \$ _____

6. **AMOUNT DUE, Required with Report (Sum of 5a + 5b)** \$ _____

Date

Signature of Certifying Official

Print Name

Title

Telephone Number

E-mail Address

If ENTITLEMENT applicable, also complete page 2.

DELAWARE RIVER BASIN COMMISSION, QUARTERLY WATER-USE REPORT, continued

7. LEGAL ENTITLEMENT, if applicable

a. Calculate Quarterly Entitlement, based on average monthly values shown on Certificate of Entitlement.

Quarterly Entitlement - 1000 gallons

1. Consumptive Water Use _____ million gallons per month,
x 3 months x 1000 = _____

2. Non-consumptive Water Use _____ million gallons per month,
x 3 months x 1000 = _____

b. Use in Excess of Entitlements - 1000 gallons

1. Consumptive Use _____ thousand gallons this quarter
minus _____ (a1 above)
= _____
(enter in 5a)

2. Non-consumptive Use _____ thousand gallons this quarter
minus _____ (a2 above) = _____
(enter in 5b)