

**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		
<b>TOTAL WATER USE - 1000 GALLONS</b>		

**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)