

South Florida Water Management District Alternative Method Calibration Report Form



Online reporting is available at www.sfwmd.gov/regpermitting

PERMIT INFORMATION			
W	WATER USE PERMIT NUMBER: PERMITTEE NAME:		
PF	ROJECT NAME:COMPLIANCE CONTACT:		
WELL/PUMP/STATION INFORMATION			
DISTRICT ID:NAME:			
TIME CRITERIA – SELECT ONE			
	ELECTRIC CONSUMPTION – show calculations for converting kWh to hours run.		
	PUMP HOUR METHOD – no supporting information required.		
	LOG BOOK – no supporting information required.		
FLOW RATE CHECK – SELECT ONE			
	PUMP CURVE – describe how you determined flow rate and provide a copy of the pump curve.		
	CARPENTER SQUARE – describe how you determined flow rate and provide calculations.		
	SPRINKLER APPLICATION RATE – describe how you determined flow rate and provide calculations.		
	BUCKET METHOD – describe how you determined flow rate and provide calculations.		
	STRAP-ON or INSERTION TURBINE METER – provide the following:		
	METER MANUFACTURER: SERIAL # ON TEST METER: DATE OF LAST CALIBRATION:		

□ OTHER – describe how you dete	ermined flow rate.	
CALCULATED FLOW RATE		
FLOW RATE (gpm):	DATE OF TEST:	
	TESTER INFORMATION	
NAME OF PERSON PERFORMING	TEST:	
PHONE NUMBER:	EMAIL ADDRESS:	

I certify that to the best of my knowledge and belief that all of the information on this form is correct. I understand that any permit issued shall be subject to review and modification, enforcement action, or revocation, in whole or in part, for any material false statement in an application to continue, initiate, or modify a use, or for any material false statement in any report or statement of fact required of the permittee [Section 373.243(1), Florida Statutes].

For assistance, please contact: www.gov

Phone: (561)686-8800 or 1-800-432-2045

Please mail form to: Regulatory Support/Regulation Division South Water Management District 3301 Gun Club Road West Palm Beach, Florida 33406