

FLOW METER POST-INSTALLATION INFORMATION REIMBURSEMENT FORM

Eligible Reimbursement Amount (ERA): \$ _____

Expected Install Date: _____

District Approval _____ Date Issued: _____

WUP Number: _____ DID Number: _____ SID Number: _____

Permittee Section

The Permittee requests reimbursement of the stated Eligible Reimbursement Amount or the ATTACHED CONTRACTOR INVOICE (whichever is less) for costs associated with the installation of a flow meter. The Permittee certifies that the flow meter meets the requirements of Section 3.9.4.4.1 of the Water Use Permit Applicant's Handbook ("Applicant's Handbook"), incorporated by reference in Rule 40D-2.091(1)(a), F.A.C., was installed per current manufacturers' specifications with flow straightening vanes, records in gallons, and has a pulse output or other capability of functioning with Automated Meter Reading Equipment to be installed by the District at a future date. Pursuant to Section 3.9.4.4.2 of the Applicant's Handbook, incorporated by reference in Rule 40D-2.091(1)(a), the Permittee will own the meter and be responsible for future operation and maintenance requirements.

Flow Meter Model Installed: _____

Serial Number: _____ Flow Meter Size (Mainline Diameter): _____

a. Complete below if Permittee is responsible for flow meter installation:

Permittee Name: _____

Agent Name & Title (if permittee is an entity): _____

Permittee or Agent Signature: _____ Date: _____

b. Complete below if a lessee is responsible for flow meter installation:

Lessee Name: _____

Lessee Signature: _____ Date: _____

c. Complete below to authorize payment directly to your installation contractor:

Name of Contractor _____ Permittee or Lessee initials _____

* Proof of payment to installation contractor will be required unless option "c" above is chosen. *

* Final payment will require photographs showing: 1) installed meter; 2) well tag; and 3) replumbing (if required). *

* Through submittal of this Form, Permittee authorizes District staff to access the subject property in order to verify proper installation of the flow meter, well tag, and replumbing (if necessary). *

Check all attachments that are included:

Contractor Invoice Proof of Payment Proof of Installation W-9*

**Pursuant to Section 119.071(5)(a), Florida Statutes, the Taxpayer ID Number (SSN or EIN) you provide will only be used for the purpose of complying with Internal Revenue Service reporting requirements. The District is required by 26 C.F.R. § 1.6041-1(a) to issue a Form 1099 for any flow meter installation reimbursement payment in excess of \$600.00, which requires use of the permittee's Taxpayer ID Number.*

Return To: Southwest Florida Water Management District
Water Use Permit Bureau
7601 U.S. Hwy. 301 North
Tampa, FL 33637-6759

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813-985-7481
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