



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF WATER RESOURCES – DRINKING WATER UNIT

William R Snodgrass Tennessee Tower
312 Rosa L. Parks Avenue, 11th Floor
Nashville, Tennessee 37243-1102
615-532-0191

WATER PUMPAGE DATA REPORT

PWSID:

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 Month: _____ Year: _____

Water System Name: _____

Address: _____

City/State/Zip: _____

<u>Source Name</u>	<u>Source Types*</u>	<u>Emerg.</u>	<u>Monthly Average</u>	<u>Maximum Day</u>
1. _____	S G P	E	<div></div>	<div></div>
2. _____	S G P	E	<div></div>	<div></div>
3. _____	S G P	E	<div></div>	<div></div>
4. _____	S G P	E	<div></div>	<div></div>
5. _____	S G P	E	<div></div>	<div></div>
6. _____	S G P	E	<div></div>	<div></div>
7. _____	S G P	E	<div></div>	<div></div>
8. _____	S G P	E	<div></div>	<div></div>
9. _____	S G P	E	<div></div>	<div></div>
10. _____	S G P	E	<div></div>	<div></div>

*SOURCE TYPE KEY: S=Surface Water, G=Ground Water, P=Purchased Water, E=Emergency Source

Print Name: _____

Signature: _____

Phone: _____

E-mail: _____

Report water data in MGD as examples below:

1,900 gallons = 0.0019 MGD

15,255 gallons = 0.0153 MGD

154,427 gallons = 0.1544 MGD

Each source must report monthly. If there is no pumpage or purchase, still list all sources. No pumpage = 0.0000 MGD. Keep sources in the same numerical order.

* Circle source type (S, G, P) and Circle (E) if it is an emergency connection.

INSTRUCTIONS ON FILLING OUT A WATER PUMPAGE DATA REPORT

PWSID – Enter the public water system identification number assigned to the public water system. TN prefix and 7 digits, e.g., TN0000150)

MONTH – Type or print the name of the month the water was pumped, purchased or treated.

YEAR – Type or print the year that the water was pumped, purchased or treated.

WATER SYSTEM NAME – Type or print the legal name of the water system.

ADDRESS – Type or print the street, road or post office box number used for receiving mail.

CITY/STATE/ZIP – Type or print the name of the city, state and zip code used for correspondence.

SOURCE NUMBER – Source(s) should be arranged in the numerical order with the main source first (number 1). The other sources should be listed next with the backup and emergency sources last. All sources that are connected to the water system must be numerically listed and named. This numerical setup will remain throughout this project.

SOURCE NAME – Type or print the name of the water source(s) on one of the forms. Each water source has a name. Name all sources that correspond to the source number.

SOURCE TYPES – Circle the appropriate letter, G=Ground Water, S=Surface Water, P=Purchase Water indicating the source type for this source. Circle E=Emergency if the source is an emergency connection.

MONTHLY AVERAGE – Record the daily total volume of water pumped each day of the month. Add the total number of gallons at the end of the month for each day. Divide the total number of gallons for the month by the number of days that pumpage was recorded in the month. Use only the days that water was pumped. This will give the monthly average. Report the monthly average in million gallons per day (MGD). Each water source should have a value entered on the report form. Source(s) that were not used during the month, including emergency connections, please enter ZERO. Please type or print the data. **Water systems that purchased water, use the total volume purchased during the month divided by the number of days in the month.**

MAXIMUM DAY – Print the maximum recorded day pumpage for each source for that particular month.

All sources that are connected to the water system are to be listed. Any water supply connected to your water system by any means is considered as a source. List the source even if the source has not been used in years. Report all water pumpage, including water that was used for testing or flushing a source.

The monthly pumpage report is due to the Division of Water Supply (DWS) by the 10th day of the month, and it should report the previous month's pumpage data.

Mail or deliver the completed form to the address at the top of Page 1: