

UNITED WATER CONSERVATION DISTRICT

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Flowmeter Calibration Test Form

All flowmeters shall be tested for accuracy every to demonstrate accuracy within a range of $\pm 5\%$.

State Well Number: _____	Assessor Parcel No.: _____
Well Owner: _____	Well Operator: _____
Owner Address: _____	Operator Address: _____
City, State, Zip: _____	City, State, Zip: _____
Owner Email: _____	Operator Email: _____
Contact Person: _____	Contact Person: _____

Customer Meter Information		
Meter Manufacturer	Meter Model Number	Meter Serial Number
Meter Units of Measure <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> Gal <input type="checkbox"/> Other	Meter Multiplier	
Meter Use <input type="checkbox"/> Agricultural <input type="checkbox"/> Domestic <input type="checkbox"/> Municipal/Industrial	Meter Size (inches)	Discharge Pipe Size (inches)

Control Meter Information	
Test Instrument(s) Used in the Flowmeter Accuracy Test	Control Meter Units of Measure <input type="checkbox"/> AF <input type="checkbox"/> CF <input type="checkbox"/> Gal <input type="checkbox"/> Other

Calibration Test Results for In-Place Flowmeter Testing

		End Meter Reading	Start Meter Reading	Volume Pumped	Run Time (mins)	Flow Rate (gpm)	Accuracy (%)
1	Customer			Units			
	Control			Units			
2	Customer			Units			
	Control			Units			
3	Customer			Units			
	Control			Units			

Approved Flowmeter Calibration Contractor: Is the Customer Meter within a range of $\pm 5\%$ compared to the Control Meter for all three test segments? YES / PASS NO / FAIL

Remarks: _____

Calibration Contractor / Vendor: _____

Technician Name: _____ Date and Time of Test: _____