



**San Bernardino Valley
Water Conservation District**
Helping Nature Store Our Water

San Bernardino Valley Water Conservation District

Established 1932

1630 West Redlands Boulevard, Suite A Redlands, Ca 92373-8032

Office: (909) 793-2503

Fax: (909) 793-0188

GROUNDWATER PRODUCTION STATEMENT

For Period July 1, 2024 to December 31, 2024

To be completed and filed by the operator of the following water producing facility within the San Bernardino Valley Water Conservation District:

StateWell No:

Recordation No:

Local Name:

Instructions

Complete Steps 1 through 3; sign and date the certification;
Keep duplicate copy of form for your records.

Mail this form and Enclose check or money order payable to:

**SAN BERNARDINO VALLEY WATER
CONSERVATION DISTRICT**

on or before **January 31, 2025**

(Please make any corrections to the above information, particularly if you no longer own or operate this facility.)

Step 1

	Method of Measurement	Water Meter	Electric Meter	Estimated
[a]	Meter Reading at End of Period			
[b]	Meter Reading at Beginning of Period			
[c]	Difference = [a] - [b]			
[d]	Meter Multiplier			
[e]	Total Meter Units = [c] × [d]			
[f]	Conversion Factor to Acre-Feet			
[g]	Total Ground Water Production in Acre-feet = [e] × [f] or [e] ÷ [f]			

CLASSIFICATION OF USE OF WATER

Step 2 Measured in Acre-Feet to the nearest 0.1

Amount of water from [g] used for **all other purposes**: _____ x \$ 17.80 = \$ _____

(Includes \$0.00 Replenishment/Sustainability Component)

Step 3 (Add values from Step 2) TOTAL GROUNDWATER CHARGE (If paid by January 31, 2025): \$

Step 4 To Include Late Fees (fee increases an extra 1% each month late)

If paid by February 28, 2025 multiply step 3 x 1.01 = \$

If paid by March 31, 2025 multiply step 3 x 1.02 =, etc. \$

CERTIFICATION

I DECLARE under the penalties of perjury that this water production statement, including the statements made and the figures shown, has been examined by me, and to the best of my knowledge and belief, is a true, correct and complete statement.

(Phone No.) _____ (Printed Name) _____ (Title) _____

(Date) _____ (Signature) _____