

California Department of Water Resources Water Transfers Program Flow Meter Installation and Calibration Certification Report



Seller: _____

State Well Number: _____

Inspection Date: _____

Local Well Name: _____

Flow Meter Information

Manufacturer:	Type (propeller, magnetic, etc.):
Model number:	Serial number:
Date of last calibration:	Calibration report attached (yes/no)?

Installation Information

Manufacturer's installation specifications attached (yes/no)?
Installation photographs (near and far view) attached (yes/no)?
Nominal discharge pipe diameter (inches):
Upstream obstruction:
Manufacturer's recommended distance from flow meter reference point to upstream obstruction (inches):
Actual distance from flow meter reference point to upstream obstruction (inches):
Downstream obstruction:
Manufacturer's recommended distance from flow meter reference point to downstream obstruction (inches):
Actual distance from flow meter reference point to downstream obstruction (inches):
Is pipeline full at the flow meter during typical operation (yes/no)?
Are straightening vanes installed (yes/no)? If yes, fill out applicable information below.
Manufacturer:
Model number:
Type (bolt-on/weld-in):
Installation specifications attached (yes/no)?

Certification Statement

Name of Professional Engineer (P.E.) or Professional Geologist (P.G.):
Firm or Agency:
I, the undersigned, certify that the information provided in this report is complete and accurate to the best of my knowledge and belief. Based on the information collected during my inspection, I believe the above-referenced flow meter and associated equipment have been properly installed in accordance with the manufacturer's specifications and calibrated according to DWR guidelines.
Signature
Date
Professional License Stamp