**South Florida Water Management District**

**Alternative Method Calibration Report Form**

Online reporting is available at [www.sfwmd.gov/ePermitting](http://www.sfwmd.gov/ePermitting)

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### PERMIT INFORMATION

| WATER USE PERMIT NUMBER: __________________ | PERMITTEE NAME: ________________________________ |
| PROJECT NAME: ___________________________ | COMPLIANCE CONTACT: ___________________________ |

### WELL/PUMP/STATION INFORMATION

| DISTRICT ID: ___________________________ | NAME: ____________________________ |

### TIME CRITERIA – SELECT ONE

- [ ] ELECTRIC CONSUMPTION – show calculations for converting kWh to hours run.

- [ ] PUMP HOUR METHOD – no supporting information required.
- [ ] LOG BOOK – no supporting information required.

### FLOW RATE CHECK – SELECT ONE

- [ ] PUMP CURVE – describe how you determined flow rate and provide a copy of the pump curve.

- [ ] CARPENTER SQUARE – describe how you determined flow rate and provide calculations.

- [ ] SPRINKLER APPLICATION RATE – describe how you determined flow rate and provide calculations.

- [ ] BUCKET METHOD – describe how you determined flow rate and provide calculations.

- [ ] STRAP-ON or INSERTION TURBINE METER – provide the following:
  - METER MANUFACTURER: ____________________
  - SERIAL # ON TEST METER: ____________________
  - DATE OF LAST CALIBRATION: ________________
☐ OTHER – describe how you determined flow rate.

_______________________________________________________________________________

_______________________________________________________________________________

CALCULATED FLOW RATE

FLOW RATE (gpm): ________________   DATE OF TEST: ________________

TESTER INFORMATION

NAME OF PERSON PERFORMING TEST: ___________________________________________

PHONE NUMBER: ________________ EMAIL ADDRESS: _____________________

I certify that to the best of my knowledge and belief that all of the information on this form is correct. I understand that any permit issued shall be subject to review and modification, enforcement action, or revocation, in whole or in part, for any material false statement in an application to continue, initiate, or modify a use, or for any material false statement in any report or statement of fact required of the permittee [Section 373.243(1), Florida Statutes].

For assistance, please contact: wucompliance@sfwmd.gov
Phone: (561)686-8800 or 1-800-432-2045

Please mail form to:
Regulatory Support/Regulation Division
South Water Management District
3301 Gun Club Road
West Palm Beach, Florida 33406