Ojai Basin Groundwater Management Agency
P.O. Box 1779
Ojai, CA 93024
Phone: (805) 640-1207 Fax: (805) 640-1247
www.obgma.com
obgma@aol.com

FORM FOR METER REGISTRATION

PLEASE COMPLETE:

OPERATOR: **Name:**
Address:
City/State/Zip:
Telephone: **Email:**

OPERATOR WELL NUMBER/NAME:

STATE WELL NUMBER:

DATE INSTALLED_____

Well Depth in Feet: Casing Diameter, in Inches:

Pump Motor/engine (HP):

Water Meter Size: Serial No: Manufacturer:

THIS STATEMENT IS NOT COMPLETE UNLESS SIGNED

DATE: _____ **SIGNATURE:**_____

OPERATOR: _____

Return this form to: Ojai Basin GMA
P.O. Box 1779
Ojai, CA 93024