



# West Harris County Regional Water Authority

## Contact Information Request Form

**Well Number(s):**

**New**

**Modify**

**Delete**

**Site Address:**

**Billed to:  
Address:**

**Well Status:**

**Meter Brand:**

**Multiplier:**

**Serial Number:**

**Meter Size:**

**Engineering Firm:  
Address:**

**Owner Firm:**

**Address:**

**Engineer Name:**

**Office Phone:**

**Email:**

**Owner Contact:**

**Office Phone:**

**Email:**

**Law Firm:**

**Address:**

**Operator Firm:**

**Address:**

**Attorney Name:**

**Office Phone:**

**Email:**

**Operator Name:**

**Office Phone:**

**Mobile Phone:**

**Email:**

**Back Up Operator:**

**Name:**

**Office Phone:**

**Mobile Phone:**

**Email:**

**Field Contact**

**Name:**

**Office Phone:**

**Mobile Phone:**

**Email:**

**Office Contact**

**Name:**

**Office Phone:**

**Email:**

1. Save fillable form (different name (suggested filename to contain: well number, owner name, etc.)), prior to using "Submit Form" button for future editing as needed.

2. Depress the "Submit Form" button when complete and ready to send back to DEC via the auto-launched email with the attached .pdf back to DEC.

3. After sending the email save the auto-created not-editable final version of the .pdf created after depressing the "Submit Form" button in step 2 above with a different name (final) for your records.

Please fill in the following information in the provided fields regarding the contact information for your wells within the WHCRWA's GRP.

Email completed form to [cindy.gloyna@decorp.com](mailto:cindy.gloyna@decorp.com)