DATE:

## WEST HARRIS COUNTY REGIONAL WATER ATHORITY (WHCRWA) Interconnect Notification Form

This form is to clarify water use, confirm interconnects, and assist in operations and planning.

## PROCEDURE:



- This Form is to be completed by Owners or Operators of non-exempt wells who are planning to utilize or are already utilizing an interconnection with another MUD during an emergency or planned system maintenance or repairs.
- Please complete form and email WHCRWA to cindy.gloyna@decorp.com.

| The O                          | The Owner named in B., below, is the: ☐ Provider/Supplier, or the ☐ User/Receiver of water (check one).  |  |   |   |        |  |
|--------------------------------|--|--|---|---|--------|--|
| Owne                           | r Information  |  |   |   |        |  |
| Owner                          | r:   |  |   |   |        |  |
| Opera                          | ting Co.:  |  |   |   |        |  |
| Engine                         | eer/Firm:  |  |   |   |        |  |
|                                | ant: Person Completing & Submitting thi  |  |   |   |        |  |
| Name:                          | <u> </u>   |  |   |   |        |  |
| Phone                          | :  | Ext.   |   |   |        |  |
| Email:                         |  |  |   |   |        |  |
| Interco                        | onnect Information   |  |   |   |        |  |
| Date ir                        | nterconnect was/is to be open:   |  | Estimated Days int  | erconnect will be open:   |        |  |
| Is the i                       | interconnect Metered? ☐ Yes, ☐ No  |  |   |   |        |  |
|                                | n for use of interconnect:   |  |   |   |        |  |
| Reason                         | in for use of interconnect.  |  |   |   |        |  |
|                                |  |  |   |   |        |  |
|                                |  |  |   |   |        |  |
|                                |  |  |   |   |        |  |
|                                |  |  |   |   |        |  |
| ☐ Wai<br>☐ Wai<br>☐ Wai<br>Not | one of the following: ter is being conveyed between a Provider ter is being conveyed from a Provider/Sup ter is being conveyed from a Provider/Sup te: water imported into the WHCRWA from ordance with Section 3.03 of the Authorit | pplier <b>within the</b> pplier <b>outside th</b> m outside of the | e WHCRWA to a User<br>ne WHCRWA to a Use<br>e Authority may be su | /Receiver outside the Wher/Receiver within the Whelper to an imported wat | HCRWA. |  |
|                                | <ul><li>(i) The Authority has consented to</li><li>(ii) Water is received for a period n</li><li>due to emergency conditions.</li></ul>  | not to exceed 60   | days and only if the  |   |        |  |
|                                | ou requesting that WHCRWA waive the im<br>take up to 60 days for the Board to act o  | -  | ee? Yes   | O No  |        |  |

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What wells are affected by use of the interconnect? For each well, indicate whether the well will be used more or less than 'normal' (or not used at all).

| Does the User/Receiver have any alternatives to using this interconnect (including other interconnects)? If yes, please ex | xplain. |
|--|---------|
| Will the Provider/Supplier be repaid for the water in kind to the source MUD?  |         |
| If the interconnect is not metered, describe how the quantity of water will be estimated:                                  |         |
| Email completed form to cindy.gloyna@decorp.com  |         |
|  |         |

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