

SYSTEM SUMMARY REPORT

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**Division of Water
Commercial and Government Services Section
Water Supply Assessment & Protection
89 Kings Highway
Dover, DE 19901**

**Phone: 302-739-9948
Fax: 302-739-2296
<https://dnrec.delaware.gov/water>**

PLEASE TYPE OR PRINT CLEARLY

1. OWNER OF SYSTEM _____
2. ADDRESS _____ ZIP _____
3. RESPONDENT _____
4. TITLE _____
5. PHONE NO. _____ WORK HOURS-FROM _____ TO _____
6. FACILITY(S) _____

	7. TOTAL MONTHLY SELF-SUPPLIED (GALLONS)	8. TOTAL MONTHLY PURCHASED (P) SOLD (S) (gal.)	9. SUPPLIER NAME FROM / TO	10. TOT. MONTHLY BILLED – FOR (PUBLIC ONLY)
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
11. TOTAL				

12. SIGNATURE _____ DATE _____