

# Daily Water Monitoring Sheet

Month:



Consent holder: \_\_\_\_\_

Address: \_\_\_\_\_

Start meter reading: \_\_\_\_\_

Consent number:

Records due by:

Date	Purpose*	Pumping hours	Meter reading	Used	Rate	Office use
	(FP/I)	(hh:mm)	(m <sup>3</sup> )	(m <sup>3</sup> )	(L/s)	Comply
1						
2						
3						
4						
5						
6						
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11						
12						
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22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
<b>End meter reading</b>						

\*Purpose: FP = Frost Protection, I = Irrigation

**Declaration:** I have read & understood the conditions of my consent. This is a true and accurate record of my water usage.

Name: \_\_\_\_\_ Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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ATTACH  
STAMP  
HERE

Pollution Prevention Officer – Irrigation  
**Bay of Plenty Regional Council**  
PO Box 364  
Whakatāne 3158

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