

BANDERA CO. RIVER AUTHORITY &
GROUNDWATER DISTRICT

Registration No. R- _____

PUMP INSTALLER COMPLETION REPORT
ALL FIELDS REQUIRED

Owner(s): _____ Address: _____

Phone No. _____

Pump Installer Information

Date Installed: _____

Pump Motor Size: _____ hp Pump Yield _____ (in gal/min)

Pump Depth: _____

Pump Installer: _____ State License No.: _____

Address: _____

I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief, and that this pump was installed by me or under my supervision.

Pump Installer Signature: _____ State License No.: _____

Address: _____

-----District Use Only-----

Date Pump Installation Completion Returned: _____