

## Appendix 2

## Wastewater (Sewage) or Effluent Water Intake Quantity Report Form

| Reporting unit  | (or name of the association/legal person)  | ID number or organization or business establishment Business Tax ID |    |    |    |    |    |    |    |    |    | Address | Phone number |
|---|--|---|----|----|----|----|----|----|----|----|----|---------|--------------|
|   |  |   |    |    |    |    |    |    |    |    |    |         |              |
| Reporter  |  |   |    |    |    |    |    |    |    |    |    |         |              |
| Permission legal basis  | <input type="checkbox"/> Reclaimed Water Operator (approval obtained in accordance with Article 9 of the Act)<br><input type="checkbox"/> Self-user (approval obtained in accordance with Article 11 of the Act) |   |    |    |    |    |    |    |    |    |    |         |              |
| Project name  | <input type="checkbox"/> Reclaimed Water Development Project name:<br><input type="checkbox"/> Name of sewer system used:  |   |    |    |    |    |    |    |    |    |    |         |              |
| Water intake construction outline   | <input type="checkbox"/> Diversion by natural flow<br><input type="checkbox"/> Diversion by mechanical power pumping<br><input type="checkbox"/> Others:   |   |    |    |    |    |    |    |    |    |    |         |              |
|   | Detailed drawings or descriptions:   |   |    |    |    |    |    |    |    |    |    |         |              |
| Location of water intake/diversion  | Coordinates:<br>Description of the location:   |   |    |    |    |    |    |    |    |    |    |         |              |
| Automatic water quantity monitoring equipment and installation location       | Automatic water quantity monitoring equipment:<br>Coordinates and description of installation location:  |   |    |    |    |    |    |    |    |    |    |         |              |
| Number of water use days for current month (days)                             | Year_____Month_____  |   |    |    |    |    |    |    |    |    |    |         |              |
|   | Number of water use days for current month: total_____days   |   |    |    |    |    |    |    |    |    |    |         |              |
| Daily water intake quantity record<br>(cubic meters)<br>(Year_____Month_____) | 1  | 2   | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 |    |         |              |
|   |  |   |    |    |    |    |    |    |    |    |    |         |              |
|   | 11   | 12  | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |    |         |              |
|   |  |   |    |    |    |    |    |    |    |    |    |         |              |
|   | 21   | 22  | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |         |              |

|   |   |  |  |  |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|--|--|
|   |   |  |  |  |  |  |  |  |  |  |  |  |
| Total water intake quantity for current month<br>(cubic meters)<br>Record (Year_____) | Month:_____   |  |  |  |  |  |  |  |  |  |  |  |
|   | Total water intake quantity for current month: total_____cubic meters |  |  |  |  |  |  |  |  |  |  |  |
| Other required information  |   |  |  |  |  |  |  |  |  |  |  |  |

### Reclaimed Water Supply Quantity Information Report Form

|  |  |  |    |    |    |    |    |    |    |    |    |         |              |
|--|--|--|----|----|----|----|----|----|----|----|----|---------|--------------|
| Reclaimed Water Operator   | (or name of the<br>association/legal<br>person)  | ID number or organization or<br>business establishment Business Tax ID |    |    |    |    |    |    |    |    |    | Address | Phone number |
|  |  |  |    |    |    |    |    |    |    |    |    |         |              |
| Reporter   |  |  |    |    |    |    |    |    |    |    |    |         |              |
| Permission legal basis   | <input type="checkbox"/> Reclaimed Water Operator (approval obtained in accordance with Article 9 of the Act)<br><input type="checkbox"/> Self-user (approval obtained in accordance with Article 11 of the Act) |  |    |    |    |    |    |    |    |    |    |         |              |
| Automatic water quantity<br>monitoring equipment and<br>installation location            | User:<br>Automatic water quantity monitoring equipment:<br>Coordinates and description of installation location:   |  |    |    |    |    |    |    |    |    |    |         |              |
| Number of water supply days<br>for current month (days)                                  | Year_____Month_____  |  |    |    |    |    |    |    |    |    |    |         |              |
|  | Number of water supply days for current month: total_____days  |  |    |    |    |    |    |    |    |    |    |         |              |
| Daily water supply quantity<br>(cubic meters)  | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 |    |         |              |
|  |  |  |    |    |    |    |    |    |    |    |    |         |              |
| Daily water supply quantity<br>(cubic meters)  | 11   | 12   | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 |    |         |              |
|  |  |  |    |    |    |    |    |    |    |    |    |         |              |
| Daily water supply quantity<br>(cubic meters)  | 21   | 22   | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |         |              |
|  |  |  |    |    |    |    |    |    |    |    |    |         |              |
| Total water supply quantity for<br>current month<br>(cubic meters)<br>Record (Year_____) | Month:_____  |  |    |    |    |    |    |    |    |    |    |         |              |
|  | Total water supply quantity for current month: total _____cubic meters   |  |    |    |    |    |    |    |    |    |    |         |              |
| Other required information   |  |  |    |    |    |    |    |    |    |    |    |         |              |