

<b>Office Use</b> Test Date _____
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IDAHO DEPARTMENT OF WATER RESOURCES  
**FLOW METER CERTIFICATION SUBMITTAL FORM**  
 Complete one form for each meter model submitted

**Submit this completed and signed form, along with a factory calibration curve for the tested meter, to the Idaho Department of Water Resources *prior* to the UWRL test date.**

**Meter Manufacturer** \_\_\_\_\_

**Meter Model Name** \_\_\_\_\_  
*show model name as it should appear on Approved List*

**Manufacturer Representative:** Contact Utah Water Research Laboratory (435-797-3214) five business days prior to testing if a manufacturer representative will be present during meter testing.

Name \_\_\_\_\_ Relationship to Manufacturer \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_  
 City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

**Submitted Meter Information:**  Check here if installation of the meter(s) requires special fittings

**Power Supply** *Primary power source for transmitter/converter*  
**AC (110 V)** **DC (integral battery pack)**

*Note: AC and DC powered meter options of the same model must be tested separately*

**Meter Type** *Select **only one** of the five available meter types*

**Full-profile Electromagnetic** **OR** **Spooled Ultrasonic**  
*(10" diameter required for testing)*

Sensor Model No. \_\_\_\_\_ Sensor Serial No. \_\_\_\_\_

Available sensor sizes as of test date \_\_\_\_\_

Transmitter/Converter Model No. \_\_\_\_\_ Transmitter/Converter Serial No. \_\_\_\_\_

Is converter available in a remote (field) mount option?  Yes  No

**Ultrasonic, Clamp On** **OR** **Ultrasonic, Wetted Transducer**

Meter Model No. \_\_\_\_\_ Meter Serial No. \_\_\_\_\_

Transducer Frequency (Mhz) \_\_\_\_\_ Transducer Serial No. \_\_\_\_\_

### Meter Type, continued

#### Small Diameter (Meters manufactured in 2" diameter and smaller only.)

Meter Model No. \_\_\_\_\_

Size #1 (in) \_\_\_\_\_

Size #2 (in) \_\_\_\_\_

Meter Serial Numbers (five total):

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- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### Attachments and Signature

#### Calibration Verification

Each meter submitted for testing shall not be calibrated beyond normal factory default calibrations. Each model must have a factory calibration curve submitted.

I certify that the meter(s) identified above submitted for the Idaho Department of Water Resources testing at Utah Water Research Laboratory is a representative sample of the model manufactured and sold to end users and has not been calibrated beyond normal factory default calibrations for this manufacturer.

\_\_\_\_\_ initials

#### Release of Test Results by UWRL

Utah State University's Utah Water Research Laboratory (UWRL), upon completion of laboratory testing of the flow meter(s) identified above, and pursuant to criteria specified by the Idaho Department of Water Resources (IDWR), will produce a written report of test results. This report will be used by IDWR to determine placement on IDWR's Approved Flow Meter List, in accordance with IDWR's Minimum Acceptable Standards for Open Channel and Closed Conduit Measuring Devices.

I give the UWRL permission to release a written report of test results to IDWR pursuant to IDWR's testing criteria for flow meters and the meter identified above.

\_\_\_\_\_ initials

\_\_\_\_\_  
Manufacturer Representative Name (Print)

\_\_\_\_\_  
Manufacturer Representative Signature

\_\_\_\_\_  
Date

#### Submit this form and attachments to:

Idaho Department of Water Resources  
Salmon Field Office  
102 South Warpath  
Salmon ID 83467-4435  
Fax: 208-287-6700

OR email to:

[cindy.yenter@idwr.idaho.gov](mailto:cindy.yenter@idwr.idaho.gov)  
Phone: 208-742-0655

**A copy of this form and all attachments should accompany the meters submitted for testing. Meters must be shipped to Utah Water Research Laboratory, 1600 Canyon Rd, Logan UT 84321**