





# Indiana Online Water Use Reporting

Electronic Annual Water Use Data Submission for Registered Significant Water Withdrawal Facilities Online Water Use Reporting Website & Account Activation

### On your 2012 Annual Water Use Report:

- Find the "Activation Link" for the Website Address directly to Online reporting; or use
- The link from Division of Water Homepage.
- Find your facility codes and unique activation code(s) on label affixed to your annual water use form;
- Keep your annual water use form and the provided "Get Started" instructions on hand for reference.

### **Account Activation**

Account Verification	Linduding and dealers		
Activation Code:	i, including any dashes.		
ABC123ABC123ABC123ABC123ABC			
Facility Registration Number:			
12345678			
			Next
			Horas
All correspondences will be sent to Email Address:	this email address.		
JohnDoe@xyz.com			
JohnDoe@xyz.com		Previous	Next
JohnDoe@xyz.com		Previous	Next
JohnDoe@xyz.com Owner/Contact List Select your name if it appears in th	ne list. Otherwise select 'Not Liste	Previous d'.	Next
JohnDoe@xyz.com Owner/Contact List Select your name if it appears in th O Jane Doe (CONTACT)	ne list. Otherwise select 'Not Liste	Previous d'.	Next
JohnDoe@xyz.com Owner/Contact List Select your name if it appears in th O Jane Doe (CONTACT) O John Doe (OWNER)	ne list. Otherwise select 'Not Liste	Previous d'.	Next
JohnDoe@xyz.com Owner/Contact List Select your name if it appears in th O Jane Doe (CONTACT) O John Doe (OWNER) O J.Q. Public (SIGNED BY)	ne list. Otherwise select 'Not Liste	Previous d'.	Next

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Next



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# Account Activation (cont.)

#### **User Information**

Entering a valid zip code will populate the city and state and filter the counties and townships if available. For 4 digit zip codes, pad with a zero (0). (Portland, Maine: 04106 instead of 4106.)

Salutation:	First Name:	Mid: Last Name:		Generation:	
~				~	
Company/Organia	zation:				
Job Title:					
P.O. Box Only					
Number:	Direction: Stre	eet:	r	ype:	
	×				~
Address Line 2:					
Address Line 3:		_			
-					
Zip: +4: 0	City:				
	[Not Listed]	×			
Civil Township:	Cou	unty:			
[Unknown]	▲ [Un	known]	×		
State:					
Indiana	×				
Country:					
United States		×			
[Required]			Previo	Ne:	xt

## Account Activation (cont.)

ohnDoe@xyz	com		
lternate E	mail Address:		
ontact #:	Telephone Number:	Ext:	
۲	317 - 333 - 4444		
	Alternate Number:	Ext:	
0			
	Cellular Number:		
0			
	Fax Number:	Ext:	

## Account Activation (cont.)

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Online Access User Account User ID:	
JohnDoe@xyz.com	
Password (8 to 16 Characters):	
•••••	
Verify Password:	
•••••	
✓ I affirm that the information submitted herewith is to accurate, and complete.	the best of my knowledge and belief, true,
	Previous Submit

#### 7.

#### Additional Facility Registrations

If you have more than one Facility Registration and received additional Activation Codes you may enter them individually below. If you do not have any more facilities [Click] the Finished button.

Activation Code:		
ABCDEFGHI123456789JKLMNOP987		
Facility Registration Number:		
987654321		
Activate		
	Previous	Finisher

# Pulling Up Use Report(s)

#### **Division of Water**

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		Help
Menu Options		
Main Manu	Annual Water Use Form	
Main Menu		Water use
Annual Water Use Form	Select the year of the water withdrawal	Water use
		reporting year
		roporting you
Section Navigation		
Previous Section		
Next Section		
Form Checklist		
Vear and Registration	Facility Registration: (Example: 31-01234-XX):	xx Search
Owner and Contact		
Annual Operation Time		
Units Used	T	
Ground Water Sources		
Surface Water Sources		
Method of Measurement	-	Facility
Statement of Affirmation		
		Registration
		N la sera la la la
		Number

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### Verify Owner & Contact Info ~Edit if Needed~

#### Division of Water Help Menu Options Main Menu Use the 'Next Section' and 'Previous Section' buttons located in the left column (Section Annual Water Use Form Navigation) to navigate between sections. Facility Registration Number: 54-00827 Annual Water Use Report Form Section Navigation Previous Section 🖉 Owner Information Coptact Information Next Section Company/Orq: Mew Farms LLP Company/Org: Name: Name: Aaron Whalen Address: P.O. Box 395 Address: Weaver Popcorn Co Form Checklist Address: 9321 North New Richmond Boad Address: Year and Registration Address: Address: Owner and Contact City: Van Buren City: New Richmond Annual Operation Time State: IN State: IN Units Used Zip Code: 46991 Zip Code: 47967 Ground Water Sources Telephone: (317) 934-2101 Telephone: (765) 339-4339 Surface Water Sources Method of Measurement Click on the Statement of Affirmation miniature form icon to make any changes to

**Owner or Contact** 

Info

### Edit Owner/Contact Page

#### **Division of Water**

	Hel	p
Menu Options Main Menu Annual Water Use Form	Annual Water Use Report Form Owner Information Entering a valid zin code will populate the city and state and filter the counties. If the state is Indiana, it	
Section Navigation Previous Section Next Section	will also filter the townships. For 4 digit zip codes, pad with a 0. (Portland, Maine: 04106 instead of 4106.) Add New Owner	
<ul> <li>✓ Year and Registration Owner and Contact Annual Operation Time Units Used Ground Water Sources Surface Water Sources Method of Measurement</li> </ul>	Salutation: First Name: Mid: Last Name: Generation: Company/Organization: Job Title:	
Statement of Animation	Address Line 1: Address Line 2: Address Line 3: Zip Code: (+4): City:	

#### **Division of Water**



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## **Annual Operation Time**

Divis	ion	of	Wa	ter

Menu	Options

Main Menu

Annual Water Use Form

Section	Navigation
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**Previous Section** 

Next Section

#### Form Checklist

 Year and Registration
 Owner and Contact Annual Operation Time Units Used Ground Water Sources Surface Water Sources Method of Measurement Statement of Affirmation

Choose the time unit appropriate for your facility and your method of determining withdrawals.

Facility Registration Number: 54-00827

Help

#### **■**

# **Select Reporting Units**

#### **Division of Water**

		Help
Menu Options		
Main Menu	Annual Water Use Report Form	Facility Registration Number: 54-00827
Annual Water Use Form	Water Withdrawal The unit selection is for all ground water and/or surface	water entries.
Section Navigation	Units Used in Reporting Amounts of Withdrawn:	O Thousand Gallons
Previous Section		Million Gallons
Next Section		

#### Form Checklist

- Year and Registration
- Owner and Contact
- Annual Operation Time Units Used Ground Water Sources Surface Water Sources Method of Measurement Statement of Affirmation

## Are there any Source changes?

Division of Water		
Menu Options		Help
Main Menu       Annual Water Use Form       Section Navigation       Previous Section       Next Section	Annual Water Use Report Form Add, Remove, and/or Alter Wells Do you need to add a new well, alter or remove	Facility Registration Number: ••••••••••••••••••••••••••••••••••••
<ul> <li>Form Checklist</li> <li>✓ Year and Registration</li> <li>✓ Owner and Contact</li> <li>✓ Annual Operation Time</li> <li>✓ Units Used Ground Water Sources</li> </ul>		

## Adding, Removing, or Changing A Well...

Annual Water Use Report Form Well Changes	Help Facility Registration Number: 54-00827
O New Well  New Well  All information is required to add a new well. T  Well ID:  Capacity (GPM):  Depth (FT):  Diameter (IN):  Aquifer Utilized:  Well Location:  Save Well Cancel	Remove Well The Well ID should not conflict with any existing Well ID's.
	Innual Water Use Report Form Vell Changes New Well Vew Well Vew Well Vew Well Capacity (GPM): Depth (FT): Diameter (IN): Aquifer Utilized: Well Location: Save Well Cancel

### ...Or, Adding, Removing, or Changing an Intake

#### **Division of Water**

			Help
Menu Options			
Main Menu	Annual Water Use Repo	ort Form	Facility Registration Number: 54-00827
Annual Water Use Form	Intake Changes		
	New Intake     Alt	er Intake CRemove	Intake
Section Navigation Previous Section Next Section Form Checklist Year and Registration Owner and Contact Annual Operation Time Units Used Ground Water Sources Surface Water Sources Method of Measurement Statement of Affirmation	New Intake All information is required to add ID's. Intake ID: Capacity (GPM): Waterbody Source: Intake Location: Save Intake Cancel	d a new Intake. The Intake ID	should not conflict with any existing Intake

### Enter Monthly Withdrawal Amounts for All Wells

Water Withdrawal Units Used in Reporting Amounts Withdrawn: Millions       Each Source is indicated by registered "Source I         Monthly Report for Ground Water Sources       registered "Source I         Ground Water Source:       4         January:       0.046         February:       0         May:       0         June:       0         July:       0         August:       0         September:       0         October:       0         November:       0         Data       0         Save Changes       Cancel Changes         Vell 1D       JAN         FEB       MAR         APR       MAY         Jun       JUL         AUGUS       0.002         Save Changes       Cancel Changes         Vell       10         JAN       FEB         MAR       APR         May       0         Jun       JUL         AUGUS       0.002         Save Changes       Cancel Changes	Annual Water Use Report Form								Facil	ity Re	gistrat	tion Nu	mber: •		
Monthly Report for Ground Water Sources       registered "Source I         Ground Water Source:       4         January:       0.046         February:       0         May:       0         June:       0         July:       0         April:       0         September:       0         October:       0         November:       0         December:       0         Save Changes       Cancel Changes         1       2.022       0.042       0.023       0.002       1.3       0.004       0       0       0.133       0.012       0.002       0.013       1.592         4       0       0       0       0       0       0       0       0       0	Water Withdrawal Units Used in Reporting Amounts Withdrawn: Millions								Each Source is						
Monthly Report for Ground Water Sources       registered "Source I         Ground Water Source:       4         January:       0.046         February:       0         May:       0         June:       0         September:       0         October:       0         November:       0         December:       0         Save Changes       Cancel Changes         Vell ID       JAN       FEB       MAR         APR       MAY       JUN       JUL       AUG         September:       0       0.002       0.013       0.012       0.002         Vell ID       JAN       FEB       MAR       APR       MAY       JUN       JUL       AUG       SEP       OCT       NOV       DEC       Total         1       2.022       0.042       0.002       0.018       0.11       0       0.32       0.002       0.003       3.543         2       1.1       0.024<										i	ndic	ated	by		
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January:       0.046       February:       0       March:       0       April:       0         May:       0       June:       0       July:       0       August:       0         September:       0       October:       0       November:       0       December:       0         Swe       Changes       Cancel Changes         Well ID       JAN       FEB       MAR       APR       MAY       JUN       JUL       AUG       SEP       OCT       NOV       DEC       Total         1       2.022       0.042       0.023       0.002       1.3       0.004       0       0       0.133       0.012       0.003       3.543         2       1.1       0.024       0.010       0.020       0.018       0.11       0       0.32       0.002       0.01       1.592         4       0       0       0       0       0       0       0       0       0       0       0       0       0       0	Ground	Water	Sourc	æ: 4			$\overline{}$		<b>~</b> <						
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1       2.022       0.042       0.023       0.002       1.3       0.004       0       0       0.133       0.012       0.002       0.003       3.543         2       1.1       0.024       0.001       0.002       0.018       0.11       0       0.32       0.002       0.001       0.001       1.592         4       0       0       0       0       0       0       0       0       0       0       0	Well ID	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	ост	NOV	DEC	Total	
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	4	0	0	0	0	0	0	0	0	0	0	0	0	0	
6 0 0 0 0 0 0 0 0 0 0 0 0	6	0	0	0	0	0	0	0	0	0	0	0	0	0	

## Enter Monthly Withdrawal Amounts for All Intakes

Annual Water Use Report Form Facility Registration Number: +9-99193						
Water Withdrawal Units Used in Reporting	Amounts Withdr	awn: Millions				
Monthly Report for S	Surface Water	r Sources				
Surface Water Source:	1 Record Found Apply 1st Surf	ace Water Entry to All Int	akes,			
January:	February:	March:	April:			
May:	June:	July:	August:			
September:	October:	November:	December:			
		Save (	Cancel Changes			
Intake ID JAN FEB MA	AR APR MAY J	UN JUL AUG SEP OC	T         NOV         DEC         Total           43         0.039         0.004         0.25			



### Select Method of Measurement

Annual Water Use F Method of Measurer Are withdrawal amore	Report Form nent unts based on flow m	Facility Registration Number: ++++++++++++++++++++++++++++++++++++
<ul> <li>Hours Operated</li> <li>Acre Inches</li> <li>NPDES Data</li> <li>Other</li> </ul>	□ Hour Meter ☑ Man Number of Acres: Consumptive Use:	ual Record Number of Inches: %
Other	S	ave Changes Cancel Changes

#### **Division of Water**





You can easily double check yourself.. make sure each entry on the "Form Checklist" has a green checkmark... This shows which sections have been properly completed.

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# Return to Main Menu Page to enter additional facilities; or to log out.

Annual Water Use Form					
Select the year of the water withdrawal. 2012 💌					
Select your facility registration from the list submitted registration.	or click the resubmit button to manually enter a previously				
Facility Registration List: Record Found					
Resubmit Number & Availa	of Activated Facilities Associated Together Here ble for Selection from the Drop Down Menu				
Facility Registration: (Example: 31-01234-XX): - XX Search Cancel					

**DNR DIVISION OF WATER** Water Rights & Use Section Phone (317) 232-4160 Toll Free (877) 928-3755 **Mark Basch** mbasch@dnr.in.gov **Monique Riggs** mriggs@dnr.in.gov THENT OF NDIANA DEPART Allison Mann almann@dnr.in.gov Indiana Department of Natural Resources VISION OF WA