



WATER RESOURCES COMMISSION (WRC)
WATER QUALITY DATA REQUEST FORM B
(FOR NON-WRC STAFF)

1. Applicant Information

Name:

Institution:

Position:

Title:

Contact: phone:

Email:

Postal address:

2. Purpose of Request

- Research/Academic
- Consultancy/Project
- Advocacy/NGO work
- Other (Please specify):
- Media/Publication

3. Specific Data Being Requested

Water quality Index (WQI)

Raw water quality data (Please specify parameter(s)):

Time period: From

To

Sampling site(s):

4. Intended use

(Describe how you intend to use or publish the data. If additional space is required, attach a separate sheet):

6. Declaration

I understand that the Water Resources Commission of Ghana retains ownership of the data, and I will not modify, or redistribute this data without prior written consent from the Water Resources Commission of Ghana.

Signature:

Date:

[For Official Use Only]

Approvals

Executive Secretary:

Head of Water Quality Unit:

Signature:

Signature:

Date:

Date:

Ref #:

Fee (if applicable):