

**NONRECURRING CHARGE COST JUSTIFICATION**

Type of Charge: \_\_\_\_\_ Meter Test Charge \_\_\_\_\_

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

\_\_\_\_\_

**Total Field Expense** \$ \_\_\_\_\_

2. Clerical and Office Expense

A. Supplies \$ 3.00

B. Labor 10.80

**Total Clerical and Office Expense** \$ 13.80

3. Miscellaneous Expense

A. Transportation \$ 13.50

B. Other (Itemize)

_____ Outside Lab Testing _____	_____ 40.00 _____
_____ Shipping _____	_____ 15.00 _____
_____	_____

**Total Miscellaneous Expense** \$ 55.00

**Total Nonrecurring Charge Expense** \$ 68.80