



DATE: _____ OHIO REGISTRATION #: _____
 NAME: _____ COMPANY AFFILIATION: _____
 MAILING ADDRESS: _____
 CITY, STATE, ZIP: _____
 TELEPHONE: _____ EMAIL ADDRESS: _____

APPLYING FOR: **Scale Serviceperson**

Meter Serviceperson

1. Have you ever been registered as a serviceperson in another state? Yes No
 If Yes, specify state(s): _____
 2. Have you ever had a registration suspended or revoked? Yes No
 3. Have you ever been convicted of a felony? Yes No

If you answered "Yes" to Questions 1, 2, or 3, please explain fully on a separate sheet and return it with the application.

Please check the category(s) for which you are applying:

- | | | |
|---|--|--|
| <input type="checkbox"/> Railroad Track Scales | <input type="checkbox"/> Livestock & Animal Scales | <input type="checkbox"/> Agri. Chemical Meters |
| <input type="checkbox"/> Hopper & Crane Scales | <input type="checkbox"/> Bench Scales | <input type="checkbox"/> Motor Fuel Dispensers |
| <input type="checkbox"/> Belt Conveyor Scales | <input type="checkbox"/> Class II Scales | <input type="checkbox"/> Kerosene Dispensers |
| <input type="checkbox"/> Large Capacity Platform Scales (40,000 lbs. & greater) | <input type="checkbox"/> Computing Scales | <input type="checkbox"/> Timing Devices |
| <input type="checkbox"/> Platform Scales (Less than 40,000 lbs.) | <input type="checkbox"/> Grain Moisture Meters | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Medium Capacity Scales (500 to 5,000 lbs.) | <input type="checkbox"/> Bulk Rack Meters | 1. _____ |
| <input type="checkbox"/> Vehicle Tank Meters (Other than L.P. Gas) | <input type="checkbox"/> L.P. Gas Meters | 2. _____ |

PAYMENT REQUIRED:

Remittance of **\$100.00 due at the time of exam** and made payable to: **Treasurer State of Ohio.** Payment by check or money order only:

Payment Method: Check # _____ Money Order
 Amount: \$100.00

INSTRUCTIONS:

- Submit this application form with the appropriate report form(s) for the device category(s) for which you are applying.
- Must submit calibration reports for equipment and a copy of your "Placed in Service Form".**
- \$100 fee No Cash Is Accepted.** Check or Money Order only accepted on at time of exam.

If you would like a copy of the completed application, please check this box.

FOR OFFICE USE ONLY:

<input type="checkbox"/> Acceptable Report Forms	Registration:	Date:
<input type="checkbox"/> Certified Standards	<input type="checkbox"/> Approved	
<input type="checkbox"/> Examination Completed	<input type="checkbox"/> Denied	
<input type="checkbox"/> Registration Fee Paid		Assigned Registration Number:

