



Florida Department of Agriculture and Consumer Services
 Division of Consumer Services, Bureau of Standards

PLACED IN SERVICE REPORT

Sections 525.07 and 531.41, Florida Statutes
 Rule 5J-22.003, Florida Administrative Code

**NICOLE "NIKKI" FRIED
 COMMISSIONER**

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SCALES AND OTHER DEVICES

PETROLEUM

Out Of Service Device
 (Return To Service Device)

New Installation

Other Devices Restored

BUSINESS NAME				PHONE NUMBER	DATE OF SERVICE
MAILING ADDRESS		COUNTY	CITY	STATE	ZIP
PHYSICAL LOCATION OF DEVICE IF DIFFERENT THAN ABOVE					
ADDRESS/LOCATION					Phone Number
COUNTY		CITY	CONTACT PERSON		
DEVICE DESCRIPTION					
DEVICE MANUFACTURER	MODEL NUMBER	SERIAL NUMBER	NTEP NUMBER	CAPACITY	COMMENTS/COC
SERVICE AGENCY INFORMATION					
AGENCY NAME				REGISTRATION NUMBER	
ADDRESS					
CITY		STATE	ZIP	PHONE	
<p>By signing, I certify that the device(s) listed above was/were installed and/or calibrated to applicable tolerances as set forth in NIST Handbook 44, as adopted by department rule, utilizing procedures as outlined in said publication and as adopted by rule. I also verify that the standards used in such testing and calibrations hold a valid certification and are traceable to NIST standards, as required by NIST Handbook 130 and adopted in department rule. I verify that I have physically sealed all adjustment mechanisms capable of being physically sealed, as required by department rule. I understand that I must fax, mail or e-mail this form to the department within <u>twenty-four (24) hours</u> of, but not more than <u>10 days</u> prior to placing or returning listed device(s) into commercial service.</p>					
NAME OF SERVICE AGENT (PRINT)		SIGNATURE OF SERVICE AGENT		INITIALS {AS SHOWN ON SEAL}	