



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**

2005 Apalachee Parkway, Tallahassee, FL 32399-1650
 Phone (850) 921-1545 Fax (850) 921-1548
 Email Address: flwm@FDACS.gov

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}	