

State of Wyoming, Department of Agriculture
 Technical Services Division
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 http://agriculture.wy.gov

PLACING IN SERVICE REPORT



SCALES (1,001+ lbs)

MAILING ADDRESS:

LOCATION ADDRESS:

Firm Name:	Business Name:
Mailing Address:	Location Address:
City: State:	City: State:
Zip: Phone:	Zip: Phone:

DEVICE INFORMATION:

WEIGHING / LOAD RECEIVING ELEMENT

Make:	Model:	S/N:
CLC:	Nmax:	Nominal Cap'y: Min. Grad:
# of Sections:	Length:	Width:

INDICATOR

Make:	Model:	S/N:
Nmax:	Nominal Cap'y:	Min Grad:

LOAD CELLS

Make:	Model:	Number of Cells:
Nmax:	v _{min} :	Min Grad:

INSTALLATION:

APPLICATION:

CHECK ONE: New Device Installation Replaces Existing Device Repaired Device Tag # ____	CHECK ONE:	Belt Conveyor	Livestock	Other
		Floor	Single Animal	(Describe:)
		Hopper	Vehicle	_____

This report is to certify that the device(s) described above have been repaired, or placed in service, and left correct as REQUIRED BY WYOMING WEIGHTS & MEASURES LAW. This report allows the temporary commercial use of the device(s) described herein, pending its official inspection by the Wyoming Department of Agriculture.

Service Person:	License Number:
Installed by (Company Name):	Installation Date:
Address:	Phone:
City:	State: Zip:

Additional Comments:

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Please retain a copy for your records, provide a copy for establishment and submit a copy to WDA Technical Services Division