



Maryland Department of Agriculture
Weights and Measures
P.O. Box 17304
Baltimore, Maryland 21297-1304
410-841-5790

Application for Service Agency/Service Technician

Complete an application for each Service Agency or Service Technician

Applicant (Check applicable box):			
<input type="checkbox"/> Service Agency		<input type="checkbox"/> Service Technician	
Company Name			
Mailing Address		City	State
			Zip
Telephone	Service Agency Contact Name		Technician Name (if applicable)
Mailing Address of Work Location (if different than above)			Telephone (if different)

Have you ever been registered as a service agency/service technician in another state? Yes No
If yes, specify state(s)

1.	2.	3.
4.	5.	6.

Has your registration ever been suspended or revoked? Yes No

(If you answered yes to the question above, please explain fully in writing and return with the application.)

PLEASE CHECK THE CATEGORY(S) FOR WHICH YOU ARE APPLYING		
<input type="checkbox"/> Scales up to 100 lb	<input type="checkbox"/> Railroad Scales	<input type="checkbox"/> Liquefied Petroleum Gas (meters 3/4 inch diameter or under)
<input type="checkbox"/> Scales over 100 lbs to 2000 lbs	<input type="checkbox"/> Retail Petroleum Meters (under 20 gallons/min)	<input type="checkbox"/> Liquefied Petroleum Gas (meters over 3/4 inch diameter)
<input type="checkbox"/> Scales over 2000 lbs	<input type="checkbox"/> Retail Petroleum Meters (over 20 gal/min)	<input type="checkbox"/> Grain Moisture Meters
<input type="checkbox"/> Vehicle scales	<input type="checkbox"/> Bulk Petroleum Meters (20-150 gal/min)	<input type="checkbox"/> Other _____
<input type="checkbox"/> Belt Conveyor Scales	<input type="checkbox"/> Bulk Petroleum Meters (> 150 gal/min)	<input type="checkbox"/> Other _____

Please submit with this application form, a \$25 application fee and appropriate report form(s) for the device category(s) for which you are applying.

The biennial fee (occurring every second year) is \$200.00 for a Service Agency and \$50.00 for each Service Technician. You will be billed after a review of this application. You will be notified by mail of the date, time and location of the qualifying examination(s).

FOR OFFICIAL USE ONLY		
<input type="checkbox"/> Acceptable Report Forms	Registration:	<input type="checkbox"/> Approved
<input type="checkbox"/> Certified Standards		<input type="checkbox"/> Denied
<input type="checkbox"/> Examination Completed	Date:	
<input type="checkbox"/> Registration Fee Paid	Assigned Registration No.	