

## Public Works

**County of Orange** Agricultural Commissioner Sealer Weights & Measures

## **WEIGHTS & MEASURES** LOCATION/DEVICE REGISTRATION

PERMIT NO.

IF NEW, LEAVE BLANK

Send completed form to County of Orange Sealer of Weights & Measures: 222 East Bristol Lane, Orange, CA 92865 | Email: ocacwm@ocpw.ocgov.com | Phone: (714) 955-0100 | Fax: (714) 921-2713

Please check one:					Effective or As of Date	QTY.	Device Type/Description	CG
	New Location	n Registrati	ion		AS OI Date		Price Scanner; Point of Sales system (POS), Price Verification, Price Look-Up System (PLU)	PV
	Change of Ow	vnership					Scale: Jewelry/Prescription	WE/WO +Dist#
	Store Locatio						Scale: Class II - Cannabis	CL
	No Longer Active (no device) Changes to Registration/Permit					-	Computing - Scale with capacity (<100 lb.)	WE/WO +Dist#
[Add in comment section change(s) needed]							Counter - Scale with capacity (<100 lb.)	
STORE/LOCATION INFORMATION							Hanging - Scale with capacity (<100 lb.)	
Co. Name:							Portable Platform - Scale w/ capacity (100 to <2,000 lb.)	UK-0
Address:							Hopper & Tank - Scale w/ capacity (100 to <2,000 lb.)	UK-0
City:				ST	Zip		Livestock - Scale w/ capacity (100 to <2,000 lb.)	UK-0
Phone:	:						Monorail & MeatBeam-Scale w/ capacity (100 to <2,000 lb.)	UK-0
Email:							Dormant - Scale w/ capacity (2,000+ to <10,000 lb.)	UK-2
							Hopper & Tank - Scale w/ capacity (2,000+ to <10,000 lb.)	UK-1
OWN	NERINFO	RMAT	ION				Livestock - Scale w/ capacity (2,000+ to <10,000 lb.)	UK-5
Owner Name: (Responsible/Legal Entity)							Dormant - Scale w/ capacity (10,000+ lb.)	UK-2 UK-2
Co. Name:							Crane - Scale w/ capacity (10,000+ lb.) Hopper & Tank - Scale w/ capacity (10,000+ lb.)	UK-2 UK-1
(If different from owner name)						_	Livestock - Scale w/ capacity (10,000+ lb.)	UK-5
Address:							Railway - Scale w/ capacity (10,000+ lb.)	UK-3
City: ST Zip					Zip		Vehicle - Scale w/ capacity (10,000+ lb.)	UK-3
Phone:							Other Weighing device:	WE/WO
Email:							NOTE: RECYCLING [UK-7] and POSTAL [UK-8]	+Dist #
BILLING INFORMATION - If different from Owner Info.					n Owner Info	7	Compressed Natural Gas meter	CNG
[Where Registration/Renewal Invoices Are Mailed To]						AC	EVSE Make/Mfg:	
Co. Name:						DC	Model:Install Eff. Date:	EV
Attention:						DC	S/N:	
Address:						1	[Use comments section or additional page for more device info.]	
City: ST Zip							Hydrogen Meter (Gen.)	HM
Phone:							LPG meter - Stationary VIN:	LPS (was LP)
Email:							LPG meter - Truck-Mounted VIN:	LPT (was LP)
COMMENTS/ADDITIONAL INFO./ INSTRUCTIONS					<b>FRUCTIONS</b>	1	Fabric/Cord/Wire Meter (Gen.)	ME/MO +Dist#
							Grease & Lube Meter (Gen.)	ME/MO +Dist#
							Odometer or Ambulances VIN:	TO
							Retail Motor Fuel Meters - per grade (Gen.) (ex: 1 nozzle w/3 grades of fuel, put qty. 3)	ME/MO +Dist#
							Retail Water Vending Machines w/ Meters (Gen.)	AQ
							Sub-meter - Electric	EG
							Sub-meter - Vapor	EG
FORM COMPLETED/SUBMITTED BY:						ר	Sub-meter - Water [ ] Hot [ ] Cold	EG
Name:						<u>_</u>	Taxi Meter VIN:	TO
Email:							Vehicle Meter - Truck-mounted	WT
Phone: Date:						╡┝──	VIN: Wholesale Meter - Stationary	(was ME-4) WS
COUNTY USE ONLY	VERIFIED BY INITIALS:	DATE:	INSPECTED BY INITIALS:	DATE:	PROCESSED DATE: BY INITIALS:		VIN: Other Measuring device:	(was ME-4) ME/MO
							, v v v v v v v v v v v v v v v v v v v	+Dist#

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