



**WEIGHTS & MEASURES
 REQUEST TO TEST / INSPECT DEVICE
 REQUEST AUTHORIZATION TO INSTALL
 FORM WM 1003**

Send completed request form to County of Orange Sealer of Weights & Measures:

222 East Bristol Lane, Orange, CA 92865 | Email: ocweightsandmeasures@ocpw.ocgov.com | Phone: (714) 955-0100 | Fax: (714) 921-2713

Must submit request for approval BEFORE device delivery to Orange County.
*Devices sent to Orange County for testing/inspection may require the manufacturer's seal to be broken.
 Devices may be placed out of service for violations of BPC 12107.*

PLEASE CHECK ONE:

<input type="checkbox"/> AUTHORIZATION REQUEST TO INSTALL SUBMETERS IN ORANGE COUNTY TESTED BY _____ COUNTY BPC 12210.7	<input type="checkbox"/> AUTHORIZATION REQUEST TO TEST SUBMETERS FOR INSTALL OUTSIDE ORANGE COUNTY DESTINATION COUNTY _____ [HOURLY RATE APPLIES] BPC 12210.3	<input type="checkbox"/> REQUEST TO TEST DEVICE [Hourly rate applies if not registered with County] Permit no. if available:
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PROPERTY LOCATION INFORMATION				OWNER/BILLING RESPONSIBILITY					
Total No. of Submeters in Property:	Water	Electric	Gas	Co. Name:					
Co. Name:				Attention:					
Contact Name:				Contact Name:					
Address:				Address:					
City:				City:					
State:		Zip:		State:		Zip:			
Phone:		Email:		Phone:		Email:			
SUBMETER TYPE AND COUNT FOR TESTING/INSTALL				OTHER DEVICE TYPE AND COUNT					
Qty. WATER		CTEP/ NTEP:		Qty. DEVICE		DEVICE TYPE:			
Qty. ELECTRIC		CTEP/ NTEP:		Qty. DEVICE		DEVICE TYPE:			
Qty. GAS		CTEP/ NTEP:		Qty. DEVICE		DEVICE TYPE:			
REGISTERED SERVICE AGENCY (RSA) INFORMATION									
Agency Co.:			Agency Co. License #		Agency Co. Contact Name:		Agency Co. Contact Email:		
Agency Address:					City:		ST	Zip	
Agent Name:			Agent License #		Agent Email:		Agent Phone:		
COMMENTS/ADDITIONAL INFO./ INSTRUCTIONS:									
Request Completed by:									
Name:			Phone:		Email:		Date:		
COUNTY USE ONLY - Do not fill!				Approved By:		Date:			
Device Release:		Picked Up by:		Phone:		Total Fees Due \$		Check No.	Date:
QTY.	DEVICE			QTY.	DEVICE			QTY.	DEVICE