



**Mailing address**

Business name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Contact name: \_\_\_\_\_ Email \_\_\_\_\_  
Address: \_\_\_\_\_  
City/st/zip: \_\_\_\_\_

**Meter location address** Check here if the mailing and location addresses are the same

Business name: \_\_\_\_\_ Phone # \_\_\_\_\_  
Contact name: \_\_\_\_\_ Email \_\_\_\_\_  
Address: \_\_\_\_\_  
City/st/zip: \_\_\_\_\_

**Meter information**

	Manufacturer	Model Number	NTEP CC # (Certificate of Conformance)	# Devices Installed	Mfg. Rated GPM
Meter	1. _____	_____	_____	_____	_____
	2. _____	_____	_____	_____	_____
Register	3. _____	_____	_____	_____	_____
	4. _____	_____	_____	_____	_____

**Installation type (check one)** **Meter type (check one)**

New meter installation  Replaces existing meter  1" pipe diameter or under (license type M)  
 Submitting report for lost repair tag, Tag # \_\_\_\_\_  Over 1" pipe diameter (license type N)

**Automatic temperature compensated (check one)** **Application (check one)**

Electronic  Manual  Stationary  Truck mount  Card/keylock

**Installer responsibilities**

- Devices must
- comply with the National Institute of Standards and Technology, Handbook 44, current adopted edition.
  - have intact security seals and must not have access to external calibration, unless equipped with an approved audit trail.
  - be installed within applicable tolerances, not predominantly in favor of the device user, and adjusted as closely as practicable to zero.
  - have an active National Type Evaluation Program (NTEP) Certificate of Conformance (CC) (e.g. 00-000).
  - be installed in accordance with manufacturer's instructions.

**Installed by**

Self, or  Service person  
(if installed by service person complete the following):

Service company: \_\_\_\_\_ Date installed \_\_\_\_\_

Contact name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ Email \_\_\_\_\_

City/st/zip: \_\_\_\_\_

**Important reminders**

- Oregon law requires weighing and measuring devices to be licensed prior to being used in commercial transactions.
- This form is only to be submitted for commercially used petroleum meters.
- Placed in Service Reports shall be submitted within 24 hours of placing a device into service.
- The service person shall provide a copy of the Placed in Service Report to the owner/operator of the device.

## Instructions for completing this form

### Request assistance

If you are unable to fully complete this form, please check the box to request assistance. Either someone from our office will contact you or the report will be forwarded to your inspector for follow-up.

### Mailing address

Mailing address for the owner/operator of the equipment. All licensing correspondence will be sent to the mailing address.

### Meter location address

Address where the meter is located. If the location address is identical to the mailing address you may write "same as above" and leave the rest blank. A separate form must be completed for different locations.

### Meter information

This section applies to the meters(s) being placed into service. Multiple meters may be listed on the same line if they are the same model and flow rate.

### Meter

Use this section for information on the meter.

### Register

Use this section for information on the register.

### Manufacturer

Name of the company that manufactured the device.

### Model number

Model number for the device.

### NTEP CC#

National Type Evaluation Program (NTEP) Certificate of Conformance (CC) number. Devices used in commercial transactions must have an NTEP CC. You may find NTEP CC numbers online at <http://www.ncwm.com/ntep-certificates> or by contacting the seller or manufacturer of the device.

### # Devices installed

Total number of devices of the same model and flow rate being placed into service.

### Mfg. rated GPM

Manufacturer's rated gallons per minute for the device.

### Installation type

Check only one box. The installation must either be: a new installation, a replacement of an existing meter, or repairs to an existing meter for which a repair tag and/or stop use tag was issued and lost.

### Meter type

Check only one box. Indicate whether or not the meter has one inch pipe diameter or under (license type M) or has over a one inch pipe diameter (license type N).

### Automatic temperature compensated

Check only one box. Indicate whether or not automatic temperature compensation is electronic or manual.

### Application

Check only one box. Indicate if the meter is stationary (bottle fill), truck mounted, or a card/keylock meter.

### Installer responsibilities

Responsibilities of the person installing the meters. This may be an owner, operator, or service person.

### Installed by

If the owner or operator is completing the form and the contact information is the same as the top of the form, you may check "Self" and skip ahead to the date installed.

If installed by a service person, check the service person box and enter the following: the service company name, contact name, address, and phone number or email address of the person installing the meters.

### Date installed

The date the meter(s) was installed. If the meter was already in place and was either repaired or being newly licensed, put the date the form is being completed.

### Submit the form by one of the following methods

e-mail: [owm@oda.oregon.gov](mailto:owm@oda.oregon.gov)

mail: Oregon Department of Agriculture, Weights & Measures Program, 635 Capitol St NE, Salem, OR 97301-2532.