



Florida Department of Agriculture and Consumer Services  
Division of Consumer Services, Bureau of Standards

**WEIGHTS AND MEASURES DEVICE MECHANIC  
REGISTRATION APPLICATION**

**NICOLE "NIKKI" FRIED  
COMMISSIONER**

Sections 525.07 and 531.41, Florida Statutes  
Rule 5J-22.003, Florida Administrative Code

3125 Conner Blvd., Bldg. #2, MS L-2, Tallahassee, FL 32399-1650  
Phone: (850) 921-1545 · Fax: (850) 921-1548

Category (Check all that apply):

Registering as (Check one):

**Petroleum** (s. 525.07, F.S. / Rule Chapter 5J-21, F.A.C.)

**Device Mechanic** (Individual)

**Weights & Measures** (s. 531.41, F.S. / Rule Chapter 5J-22, F.A.C.)

**Service Agency** (Company)

Applicant's Name:

\_\_\_\_\_  
Last First Middle Home Phone

Home Address:

\_\_\_\_\_  
Address City State ZIP

Applicant E-mail Address: \_\_\_\_\_

Company Name:

\_\_\_\_\_ Business Phone: \_\_\_\_\_

Company Address:

\_\_\_\_\_  
Address City State ZIP

Company E-mail Address: \_\_\_\_\_

**Seal Identification Marks**



FRONT



BACK

**Applicant Must Have Proper Sealing Iron and Seals**

**Test Equipment**

**Has a current copy of the calibration report for ALL test equipment used by applicant/company been included with this application?**

**YES**

**NO**

*(Note: A copy of a valid calibration report MUST be provided in order to complete registration as a device mechanic or service agency)*

Operating under this registration requires adherence to the laws and rules adopted pursuant to Chapter(s) and Rule(s) selected above.

Signature: \_\_\_\_\_

Print Name / Title: \_\_\_\_\_

Date: \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**APPROVED**

**DENIED**

Registration #: \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_