

Oklahoma Dept. of Agriculture  
Food & Forestry  
Consumer Protection Services  
2800 N. Lincoln Boulevard  
Oklahoma City, OK 73105-7298

Ph. (405) 522-5968

**PLACING IN SERVICE REPORT**

Firm \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Scale Location \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Ph. \_\_\_\_\_ County \_\_\_\_\_

Owner/Mgr. \_\_\_\_\_

MAIL ORIGINAL AND SECOND COPY TO OSDA WITHIN FIVE WORKING DAYS  
THIRD COPY IS FOR YOUR RECORDS

Type of Device: Digital \_\_\_\_\_ Dial \_\_\_\_\_ Beam \_\_\_\_\_ Capacity \_\_\_\_\_ Xd \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Class \_\_\_\_\_

Indicator NTEP C of C No. \_\_\_\_\_ Indicator Serial No. \_\_\_\_\_

Weighing Element C of C No. \_\_\_\_\_ Weighing Element Serial No. \_\_\_\_\_

Load Cell NTEP C of C No. \_\_\_\_\_

1. The above device is: Replacement Scale \_\_\_\_\_ Replaces Serial No. \_\_\_\_\_  
Additional Scale \_\_\_\_\_ Rejected Scale \_\_\_\_\_  
Loaner \_\_\_\_\_

2. Reason for Service: Scale Rejected by OSDA \_\_\_\_\_ Red Tag Attached \_\_\_\_\_  
Service Agreement \_\_\_\_\_ How Often \_\_\_\_\_  
New Scale \_\_\_\_\_  
Service Requested By \_\_\_\_\_

3. Was there a charge: Yes \_\_\_\_\_ No \_\_\_\_\_ State Inspector Present: Yes \_\_\_\_\_ No \_\_\_\_\_

4. Name of Scale Company Represented: \_\_\_\_\_  
City and State of Scale Company: \_\_\_\_\_

5. Technician Name(s): \_\_\_\_\_ License No. \_\_\_\_\_

6. Describe any repairs performed or adjustments made: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to certify that I, within the last five days, tested and placed the above device in service and that it complies with the laws of the State of Oklahoma.

TECHNICIAN SIGNATURE: \_\_\_\_\_

DO NOT WRITE THIS LINE - FOR STATE INSPECTORS USE ONLY

Scale Serial No. \_\_\_\_\_ NTEP Cert. No. \_\_\_\_\_

Date \_\_\_\_\_ New Scale \_\_\_\_\_ Follow Up \_\_\_\_\_

Sealed As Correct \_\_\_\_\_ Rejected \_\_\_\_\_

REMARKS \_\_\_\_\_

INSPECTOR \_\_\_\_\_