

2021 – 2022 License Year



Office of the City Clerk  
City of New Berlin  
3805 S Casper Dr.  
New Berlin WI 53151  
ph (262)786-8610  
fax (262)786-6121

A \$25.00 per business address nonrefundable license fee must accompany this application.

Clerk's Office: \_\_\_\_\_  
License Number \_\_\_\_\_

## Application for Annual Weights and Measures License

(please print)

<b>Business Name:</b>	<b>Business Address:</b>
<b>Type Of Business:</b>	<b>Business Telephone:</b>
<b>Applicant Name:</b>	<b>Applicant Address:</b>
	<b>Applicant Phone:</b>

The named  Individual  Partnership  Limited Liability Co.  Corporation

hereby makes application for a New or Renewal **Weights and Measures License**. (please circle one)

**Name and Address of Individual or Partners:** (Use other side if more space is needed)

\_\_\_\_\_  
Last Name/First Name/Middle Initial                      Street                      City/State/Zip

\_\_\_\_\_  
Last Name/First Name/Middle Initial                      Street                      City/State/Zip

**Corporation/Limited Liability Companies:** (Registered name)

**Names and Addresses of all Officers and Agents:**

	Full Name	Address
President		
Vice Pres.		
Secretary		
Treasurer		
Agent		
Directors		
Use other side if needed		

<u>Type of Device</u>	<u>Number of Devices</u>	<u>Location of Devices</u>	<u>Number of Checkout Lanes</u>
Liquid Measuring (gas nozzles)	_____	_____	_____
Truck Meters	_____	_____	_____
Vehicle Scales	_____	_____	_____
Counter Scales – up to 30 lbs.	_____	_____	_____
Scales – 31 lbs. and over	_____	_____	_____
Point of Sale Systems (scale, register, scanner combination)	_____	_____	_____
Packages	_____	_____	_____
Other – please designate	_____	_____	_____

**Authorized Signature of Applicant** \_\_\_\_\_

**Application Date** \_\_\_\_\_