



State of New Hampshire
Department of Agriculture, Markets & Food
Division of Weights and Measures
 State House Annex Building

New Hampshire
 Department of Agriculture,
 Markets & Food

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 www.agriculture.nh.gov

APPLICATION FOR SERVICE TECHNICIAN EXAM AND LICENSE

Pursuant to RSA 438; Agr 1404 and Agr 1405

INSTRUCTIONS

- ⇒ Complete a typed application that is accurate. Applications will not be processed until all requirements are met.
- ⇒ Send the completed application via email or to the mailing address listed above.
- ⇒ Upon receipt of the completed application, the Division will notify the applicant and/or employer via email of the total amount due for exam and license fees, which depends on scheduled exam date.
- ⇒ Send a non-refundable check or money order to the above mailing address with the correct payment amount made payable to "Treasurer, State of NH".
- ⇒ Upon receipt of the payment, the Division will notify the applicant and/or employer via email of the reserved examination date and applicable exam information.
- ⇒ If you need additional information on the service technician examination and licensing process, see *For Service Technicians* on the NH Division of Weights and Measures website at www.agriculture.nh.gov.

APPLICANT INFORMATION

Name:
Last (full) First (full) Middle (full)

Mailing Address:
Street City State Zip

Personal Phone #: Personal Email:

Are you within 30 days of 18 years of age or older? Yes No Date of Birth:
MM/DD/YYYY

Drivers License #: State Issued:

Have you been licensed as a NH Service Technician in the past? Yes No

If you answered yes to the previous question, provide the name you used on your license:
First Choice Second Choice Third Choice

Indicate your preferred exam dates (reference website for exam listings):

EMPLOYER INFORMATION

Company Name: DBA Name:
(If Applicable)

Mailing Address:
Street or PO Box City State Zip

Contact Person: Phone #:

Fax #: Email:

DEVICE CATEGORIES

SCALES:

A 30 lbs or less B 31 to 300 lbs C 301 to 3000 lbs D 3001 to 20 000 lbs
E 20 001 and up F Vehicle Scales G Analytical Balances R Lift Truck Onboard Weighing Systems

RETAIL MOTOR FUEL DEVICES:

H Gasoline Pumps I LP Gas Pumps J Natural Gas Pumps

LARGE VOLUME:

K Vehicle Tank Meters L Bulk Storage Meters M LPG Vehicle Tank Meters Q Bulk Motor Oil Meters

OTHER:

N Taxi Meters O Linear & Cordage Measures P Farm Bulk Milk Tanks

APPLICANT SHALL READ, SIGN, AND DATE:

1) I understand that I shall pass a written examination for the device categories indicated above. 2) I understand that the only test standards to be used shall be those certified by an accredited laboratory and that I shall submit a certificate of calibration for all test standards used. 3) I certify that I possess the necessary standards and testing equipment to service the device categories for which I am requesting a license. 4) I certify that I have a current edition of NIST Handbook 44 and all relevant Examination Procedure Outlines. 5) I certify that I have a current copy of the New Hampshire code of administrative rules, Agr 1400, and that I shall operate in accordance with these rules. 6) I certify that there are no willful misrepresentations or falsifications in the information provided above. 7) I understand if an investigation discloses any willful misrepresentations or falsifications my application shall be rejected. 8) If, after issuance of my service technician license, should an investigation disclose any willful misrepresentations or falsifications, my license shall be suspended and I shall be subject to penalties under RSA 438:40.

Applicant Signature: Date:

FOR DIVISION USE ONLY

DATE RECEIVED:	CHECK #:	EXAM FEE:	CERTIFICATE COPY: <input type="checkbox"/>
DATE RECEIVED:	CHECK #:	LIC. FEE:	SEAL PRESS COPY: <input type="checkbox"/>
EXAM DATE:	EXAM SCORE:	LIC. #:	