

Application For A Weights and Measures License - 2018
City of Manitowoc, Wisconsin

Submit to City Clerk,
 900 Quay Street
 Manitowoc, Wisconsin 54220

1. The named: Individual Partnership Limited Liability Company Corporation/Non-Profit Organization
 Hereby makes application for the weights and measures license for:

_____ (Name of licensed premises)

2. Address of Licensed Premises: _____
 3. Phone Number of Licensed Premises: () _____
 4. The following shall be completed listing each individual applicant, each member of a partnership, each officer, director and agent of a corporation or non-profit organization, and each member/manager and agent of a limited liability company. List the name, title and place of residence of each person.

Name	Title	Home Address	City	Zip Code

5. Partnership, limited liability company, corporation or organization please list:
 a. Registered Name: _____
 b. Address: (If different from above) _____
 c. Phone: (_____) _____

6. Please indicate type and number of weighing and measuring devices used by this establishment and their location.

TYPE	NUMBER	LOCATION
METER	Vehicle Tank - Petroleum	
METER	Vehicle Tank - Lubricant	
METER	Liquid Measuring Device	
SCALE	Bench, Counter & Spring Hanging	
SCALE	Computing	
SCALE	Jeweler, Prescription, & Precious Metals	
SCALE	Point of Sale System (list # of scales)	
SCALE	Prepackaging	
SCALE	Vehicle	
SCANNER	Point of Sale System (list # of scanners)	
TIMER	Coin Operated (car wash, vacuum, air)	
MISC		

Date _____

 Signature of Applicant

 (Title)