## **Application for Private Label**





Note: If completing application by hand, do so legibly. Illegible applications will delay processing.

This application is used for: a company marketing a device from another manufacturer and relabeling it under its own name. A separate application is required for <u>each</u> National Type Evaluation Program (NTEP) Certificate of Conformance (CC).

| For Use by NCWM | _ |
|-----------------|---|
| Control #:      |   |
| CC #:           |   |

## **Preparation:**

- Complete application, provide payment information and signature. If not included, application will not be processed.
- Submit to <a href="mailto:info@ncwm.com">info@ncwm.com</a>: two digital photos of device.
- Mail three (3) Identification Labels\* to:

National Conference on Weights and Measures

Attention: NTEP Specialist 9011 South 83<sup>rd</sup> Street Lincoln, Nebraska 68516

\*If you are unable to use USPS please contact Danyelle Dolan at <a href="mailto:danyelle.dolan@ncwm.com">danyelle.dolan@ncwm.com</a> for additional shipping information\*

\*Note: Identification Labels must meet the marking requirements listed in *Handbook 44: Specifications, Tolerances ad Other Technical Requirements for Weighing and Measuring Devices* – Table S.6.3.a. Marking Requirement.

| Part 1. Who will be the Primary Contact during the NTEP evaluation process?               |  |                |   |            |                                      |          |  |  |
|---|--|----------------|---|------------|--------------------------------------|----------|--|--|
| Today's Date:   | Are you or someone within your company a National Conference of Weights and Measures (NCWM) Member: Yes No |                | on NCWM N                                 | lember ID: | Member Name:                         |          |  |  |
|   | weights and Measures (NCWN   | n) Member:     |   |            |                                      |          |  |  |
| Company:  |  |                |   |            |                                      |          |  |  |
| Street Address:   |  |                |   |            |                                      |          |  |  |
| City:   |  |                | State:                                    |            | Zip Code:                            | Country: |  |  |
| Primary Contact Name:   |  |                | Primary Contact Email Address (Required): |            |                                      |          |  |  |
| Phone Number with Extension if Applicable: Fax Number:                                    |  |                | Website:                                  |            |                                      |          |  |  |
| Other Authorized Contact Name: Other Authorized Contact E                                 |  |                | Address:                                  | (          | her Authorized Contact Phone Number: |          |  |  |
| Part 2. What Contact Information should appear on the amended Certificate of Conformance? |  |                |   |            |                                      |          |  |  |
| Company:  |  |                |   |            |                                      |          |  |  |
| Street Address:   |  |                |   |            |                                      |          |  |  |
| City:   |  |                | State:                                    |            | Zip Code:                            | Country: |  |  |
| Phone Number with Extension if Applicable:  |  |                | Fax Number:                               |            |                                      |          |  |  |
| Contact Name:   |  | Email Address: |   | Website:   |                                      |          |  |  |

## NTEP Application for Private Label

| Part 3. Where do you want ALL Billing to be sent?  |                                      |  |         |                           |             |                              |                          |              |               |
|--|--------------------------------------|--|---------|---------------------------|-------------|------------------------------|--------------------------|--------------|---------------|
| Company:   |                                      | Contact Name:                              |         |                           |             |                              |                          |              |               |
| Street Address:  |                                      |  |         |                           |             |                              |                          |              |               |
| City:  |                                      |  | State:  |                           |             | Zip Co                       | de:                      | Country:     |               |
| Email Address (Required):  |                                      | Phone Number with Extension if Applicable: |         |                           |             |                              |                          |              |               |
| Part 4. NTEP Fees (Required at t   | time of application)                 |  |         |                           |             |                              |                          |              |               |
|  | NCWM Membe                           | er   |         |                           |             |                              | Non-Men                  | nber         |               |
| Application Fee (non-refundable)   | \$800                                |  |         | \$1,200                   |             |                              |                          |              |               |
| Certificate Processing Fee   | \$150                                |  |         | \$225                     |             |                              |                          |              |               |
| Certificate Drafting Fee   | \$350                                |  |         |                           |             |                              | <sup>\$</sup> 525        |              |               |
| Total Fees   | \$1,300 (Application, Processing     | Fee,                                       | Draftin | ng Fee)                   | \$ <b>1</b> | <b>,950</b> (A               | pplication, Process      | sing Fee, Dr | afting Fee)   |
| ** Additional laboratory fees may apply. A   | annual Maintenance Fees will also ap | ply.                                       | See Pu  | ıblication 14             | l: Admir    | nistrativ                    | e Policy for details     | s.           |               |
| ** Save instantly on your NTEP Application   | fees by becoming an NCWM Membe       | er at                                      | www.n   | ncwm.com/r                | nember      | ship.                        |                          |              |               |
| Part 5. Publications   |                                      |  |         |                           |             |                              |                          |              |               |
| PUBLICATION<br>(Current Edition)   |                                      |  |         | NCWM MEMBER<br>UNIT PRICE |             |                              | NON-MEMBER<br>UNIT PRICE |              | AMOUNT<br>DUE |
| Handbook 44  Specifications, Tolerances and Other Technical Requirements for Weighing and Measuring Devices," as adopted by the National Conference on Weights and N |                                      |  | sures   | <sup>\$</sup> 46          | \$46 \$46   |                              |                          | \$           |               |
| Publication 14: Administrative Policy  |                                      |  |         | <sup>\$</sup> 60          |             |                              | <sup>\$</sup> 120        |              | \$            |
| Publication 14: Grain Moisture Meters & Near Infrared Grain Analyzers Technical Policy, Checklists and Procedures  |                                      |  |         | <sup>\$</sup> 60          |             |                              | <sup>\$</sup> 120        |              | \$            |
| Publication 14: Measuring Technical Policy, Checklists and Procedures  |                                      |  |         | \$60 \$1.                 |             | <sup>\$</sup> 120            |                          | \$           |               |
| Publication 14: Weighing Devices Technical Policy, Checklists and Procedures   |                                      |  |         | <sup>\$</sup> 60          |             | <sup>\$</sup> 120            |                          | \$           |               |
| ☐ Publication 14: Bundle Includes: Administrative Policy, Grain Moisture Meters & Near Infrared Grain Analyzers, Measuring Devices and Weighing Devices              |                                      |  |         | <sup>\$</sup> 135         |             | <sup>\$</sup> 270            |                          |              | \$            |
| SHIPPING & HANDLING  |                                      |  |         | USA ONLY                  |             | OUTSIDE USA                  |                          | SHIPPING DUE |               |
| For quantities larger than those listed, please contact elisa.stritt@ncwm.com for pricing.   |                                      |  |         | Book(s):<br>1 = \$12      |             | Contact NCWM at 402.434.4872 |                          | ٥            |               |
| piease contact <u>ensa.stritt@ncwm.com</u> ror pricing.  |                                      |  |         | <b>2-3</b> = \$19         |             | for shipping rates.          |                          | \$           |               |
| Part 6. Payment Information (Required at time of application)  |                                      |  |         |                           |             |                              |                          |              |               |
| □ VISA     □ MasterCard     □ Discover     □ American Express     □ Check Enclosed (made payable to NCWM)  |                                      |  |         |                           |             |                              |                          |              |               |
| Account<br>Number:   |                                      |  |         | Expira<br>Date:           | ition       |                              | Secu<br>Code             |              |               |
| Billing Address:   |                                      |  | 1 1     | 1 - 2 - 2 - 2             | L           | I                            | Zip Code:                |              |               |
| Name on Credit Card:  Total Ar   |                                      |  |         | Total Amount Er           | nclosed:    |                              |                          |              |               |

## NTEP Application for Private Label

| Part 7.  | About the Original Manufacturer   |                         |                 |  |  |  |  |  |
|--|---|-------------------------|-----------------|--|--|--|--|--|
| Company:   |   |                         |                 |  |  |  |  |  |
| What is the N  | TEP Certificate of Conformance Number:  | What is/are the Model I | Designation(s): |  |  |  |  |  |
| Part 8.  | About the Private Labeler   |                         |                 |  |  |  |  |  |
| Model Designation(s) How It/They Will Appear on the NTEP Certificate of Conformance: |   |                         |                 |  |  |  |  |  |
| Part 9.  | Original Manufacturer Signature   |                         |                 |  |  |  |  |  |
| Sign<br>Here   | The Original Manufacturer authorizes the Private Labeler to use the results of the evaluation conducted in conjunction with this National Type Evaluation Program Certificate of Conformance to seek a National Type Evaluation Program Certificate of Conformance in the Private Labeler name. The device provided to the Private Labeler is identical to the original type for which the aforementioned National Type Evaluation Program Certificate of Conformance was received and other than a change in the name plate, the Original Manufacturer agrees to make no changes to the device. Please be aware that an electronic signature is as legally binding as a handwritten signature.   |                         |                 |  |  |  |  |  |
|  | Signature   | Date                    | Title           |  |  |  |  |  |
| Part 10.   | Private Labeler Signature   |                         |                 |  |  |  |  |  |
| Sign<br>Here   | By checking this box, the applicant authorizes the National Type Evaluation Program to disclose to Regulatory Officials, upon their request, that this application has been submitted and whether the file is currently open or closed.  Applicant agrees to and accepts all of the following terms and conditions for application for a National Type Evaluation Program (NTEP) Certificate of Conformance (US) and the Notice of Approval (Canad). 1) All the devices manufactured as the type referenced will continue to conform to the same specifications and tolerances and be of the same type without technical or metrological deviation of consequence. 2) All costs incurred by the NTEP, participating laboratory(s) and Approval Services Laboratories; Measurement Canada will be paid by the applying company. 3) The NCWM policies, practices and procedures set forth in its Bylaws and publications are incorporated by reference as terms and conditions of the issuance/renewal under NTEP. 4) Applicant agrees that the law of the State of Nebraska shall control the interpretation and construction of NTEP and business relationships, including choice of law provisions. The parties agree that the exclusive legal forum of choice of the parties shall be the Lancaster County State District Court located in Lincoln, Nebraska. 5) Applicant agrees that NCWM, its officers, directors, employees and agents shall have no liability for any damages of any nature in excess of the application fee or the annual renewal fee, as applicable. This limitation of liability is a condition of the issuance of any certificate of conformance or renewal certificate under the NTEP Program. Please be aware that an electronic signature is as legally binding as a handwritten signature. |                         |                 |  |  |  |  |  |
|  | Signature   | Date                    | TITIE           |  |  |  |  |  |