National Conference on Weights and Measures / National Type Evaluation Program

## **Application for Liquid Measuring Device**



Control #:\_\_

CC #:\_

For Use by NCWM

**This application should be used if** the device or equipment is designed to measure and deliver liquid. Means may or may not be provided to indicate automatically, for one of a series of unit prices, the total money value of the liquid measured, or to make deliveries corresponding to specific money values at a definite unit price.

## **Application Instructions:**

- Complete applicable checklist in "NCWM, Publication 14: Measuring Devices."
- Read "NCWM, Publication 14: Administrative Policy."
- Read "NIST, Handbook 44: Specifications, Tolerances and Other Technical Requirements for Weighing and Measuring Devices," current code requirements.
- Sign application. **Unsigned applications will not be accepted.**
- Submit payment with application.
- Submit a copy of the amended CC with changes clearly marked.
- Submit two digital photos of the device via email or on CD.
- Submit application in one of the following ways:

Email: info@ncwm.com

Mail: National Conference on Weights and Measures

Attention: Project Coordinator

9011 South 83<sup>rd</sup> Street Lincoln, Nebraska 68516

**Fax:** 402.434.4878

If completing application by hand, do so <u>legibly</u> and in <u>blue ink</u>. Illegible applications may delay processing times.

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Part 1. W	ho Will the <u>Contact</u> Be <u>D</u>	uring the National Type Evo	aluation Pro	gram (N1	EP) <u>Application Proc</u>	:ess			
Today's Date:	,	our company a National Conference CWM) Member: 🗌 Yes 🔲 No	ce NCWM N	WM Member ID: Member Name:					
Company:									
Street Address:									
City:			State:		Zip Code:	Country:			
Primary Contac	t Name:	P	Primary Contact Email Address (Required):						
Phone Number	Fax Number:	Web site:							
Other Authorize	d Contact Name:	Other Authorized Contact Email Address:			Other Authorized Contact Phone Number:				
Part 2. What Contact Information Do You Want to Appear on the NTEP Certificate of Conformance									
Company:									
Street Address:									
City:	State:		Zip Code:	Country:					
Phone Number with Extension if Applicable:			Fax Number:						
Contact Name: Email Address:				Web site:					

Part 3. Where Do You Want <u>ALL Billing</u> to Be Sent												
Company:	Co	Contact Name:										
Street Address:												
City:	State	e: Zip			Zip Code:		Country:					
Email Address (Required):	ione N	lumber with Extension if Applicable:										
Part 4. NTEP Fees (Due at time	of application.)											
				Non-M	Nembe	er						
Application Fee (non-refundable)	Application Fee (non-refundable) \$800.00					\$1,200.00						
Certificate Processing Fee	\$150.00						\$22	5.00				
Total Fees	\$ <b>950.00</b> (Application & Pro	oces	sing Fe	es)		\$1,42	<b>25.00</b> (Applicati	on & P	rocessin	g Fee:	3)	
** Additional laboratory fees may ap	ply. Annual Maintenance Fees	will	also a	ıpply. See I	Publico	ition	14 Administra	itive P	olicy fo	r det	ails.	
** Save instantly on your NTEP Applica	ation fees by becoming an NC\	٧M	Meml	ber at www	.ncwn	n.cor	m/membershi	p.				
Part 5. Publications												
PUBLI	NCWM MEMBER UNIT PRICE		N	NON-MEMBER UNIT PRICE		QUANTITY		NOUNT DUE				
Handbook 44 (2020 Edition) Specifications, Tolerances and Other T Measuring Devices," as adopted by the Measures	\$46	\$46		\$46		\$						
Publication 14: Administrative Policy (2		<sup>\$</sup> 60			<sup>\$</sup> 120			\$				
Publication 14: Grain Moisture Meters 8 Technical Policy, Checklists and Proce	\$60			<sup>\$</sup> 120								
Publication 14: Measuring Devices (202 Technical Policy, Checklists and Proced	\$60			<sup>\$</sup> 120								
Publication 14: Weighing Devices (2020 Technical Policy, Checklists and Procedure)		\$60			<sup>\$</sup> 120		\$					
Publication 14 CD (2020 Edition) Includes: Administrative Policy, Grain N Analyzers, Measuring Devices and Wei	1-3 CDs \$135 4-9 CDs \$100 10+ CDs \$85		'	1-3 CDs \$270 4-9 CDs \$200 10+ CDs \$170		\$						
SHIPPING & HANDLING				USA C	ONLY		OUTSIDE USA	Δ.	SHII	PPING	DUE	
For quantities larger than those listed, please contact NCWM at 402.434.4872 or <a href="mailto:elisa.stritt@ncwm.com">elisa.stritt@ncwm.com</a> for pricing.					Book(s): 1 = \$12.00 2-3 = \$19.00 CD(s): 1-3 = \$10.00 4-6 = \$16.00		Contact NCWM at 402.434.4872 for shipping rates.		\$			
Part 6. Payment Information												
□ VISA □ MasterCard □ Dis	cover American Express		☐ Ch	eck Enclose	d (mad	e pa	yable to NCWM	.)				
Account Number:				Expira Date:				Security Code:	/			
Billing Address:							Zip Code:					
Name on Credit Card:	Name on Credit Card:  Total Amount Enclosed: \$											

Part 7. What Laboratory Would You Like to Conduct the Evaluation (NTEP reserves the right to select laboratory.)

☐ First Available ☐ California ☐ <i>M</i>	North Carol	ina			
Part 8. Where Would a Field Test Be	Conducted				
Business Name:					
Street Address:					
City:		State:		Zip Code:	Country:
S.17.		oraro.		210 0000.	Goorniy.
Part 9. General Information					
Is this Evaluation to Addend An Existing NTER	P Certificate of Conformance	e (CC):	Yes, Provide	e CC Number:	□No
Part 10. Model Designation					
Model Designation(s) How It/They Will Appear on	the NTEP Certificate of Conforma	ince:			
Model Besignation (3) New II, IIIe, Mill Appear on	IND THE COMMERCE OF COMMONTO				
Part 11. Device Type					
Device Type (Check All That Apply):					
Card Reader	Console Controller			er Indicating Ma	
Meter Indicating Volume	Register		☐ Reta	il Motor-Fuel Disp	penser
Part 12. Display Type					
Device Type (Check All That Apply):  7 or 14 Segment Alphanumeric	☐ Cathode Ray Tube (CR	PT1	□liabt	Emitting Diode	(LED)
Liquid Crystal Display (LCD)	☐ Touch Screen	(I)	Othe		(LLD)
Part 13. Means of Sealing					
Is There a Physical Seal:					☐ Yes ☐ No
Describe the Means and Location of Physical Sea	ling:				
Is There an Audit Trail:					☐ Yes ☐ No
If There Is an Audit Trail, what is the Categor	γ:				1 2 3
Part 14. Standard Features and Option	ons				
	Description				Check One
Air Eliminator:				☐ Sta	ndard Option NA
Analog Indications:				☐ Sta	ndard Option NA
Automatic Temperature Compensating:				☐ Sta	ndard Option NA
Card Reader:				☐ Sta	ndard Option NA
Cash Acceptor:				☐ Sta	ndard Option NA
Computer Interface:				☐ Sta	ndard Option NA
Computing Device:					ndard Option NA
Digital Indications:					ndard Option NA
Flow Rate Indication:					ndard Option NA
Preset Money:				<u> </u>	ndard Option NA
Preset Volume:					ndard Option NA
Ticket Printer:				∐ Sta	ndard Option NA
Part 15. Device Configuration					

Check One:  Blend Dispense  Self-Contained	r		l Product le Produc		☐ Multiple Product		Remote (Submersible)	
Part 16. Devic	e Specificatio	ns						
Return to Zero:	Check One:	☐ Key	□ мо	anual 🔲 1	Time Delay	Other:		
Totalizer:	Check One and Fill in Areas:  Mechanical  Volume:  Other:  Electronic  Volume:  Other:							
Pulsar:	Check One:  □ Electronic Pulsar □ Mechanical Pulsar							
Display:	Check One:	Check	☐ Segn	nent Check	□NA			
		0.1	0.01	0.001		Other		
Minimum	Gallons:							
Indication or Graduation:	Liters:							
	Other:							
	☐ Gallons:	'		Liters:		Other Units:		
Maximum Quantity	Maximum Total Sales Display:							
Display:	Unit Pricing Capabilities:							
Power Backup:	Check One:  NA Battery Backup Uninterruptable Power Supply Other:							
Part 17. Measuring Element								
Check One:  Positive Displacement Turbine Other:								
Meter Sizes Available		Range of Flow Rates			Spe	cified Product Family(s)	Meter Construction Material	

Part 18.	General Description								
Describe the reason this application is being submitted:									
Part 19.	Signature								
	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.								
Sign Here	Applicant agrees to and accepts all of the following terms and acceptificate of Conformance. 1) All the devices manufactured as the tolerances and be of the same type without technical or metrolary participating laboratory(s) will be paid by the applying company. 3 publications are incorporated by reference as terms and conditions the State of Nebraska shall control the interpretation and construct The parties agree that the exclusive legal forum of choice of the parties agree that the parti	e type referenced ogical deviation o 3) The NCWM polic s of the issuance/re tion of NTEP and b arties shall be the L nployees and ager pplicable. This limi	will continue to conform to the same specifications and f consequence. 2) All costs incurred by the NTEP and ies, practices and procedures set forth in its Bylaws and enewal under NTEP. 4) Applicant agrees that the law of usiness relationships, including choice of law provisions, ancaster County State District Court located in Lincoln, ats shall have no liability for any damages of any nature tation of liability is a condition of the issuance of any						
	Signature	Date	Title						