National Conference on Weights and Measures / National Type Evaluation Program

## **Application for Automatic Weighing System**





**This application should be used if** the device automatically weighs pre-assembled discrete loads or single loads or loose materials. Some weigh-labelers and checkweighers may also include a scale that is incorporated in a conveyor system that weighs packages in a static or non-automatic weighing mode.

## **Application Instructions:**

- Review applicable checklist in "NCWM, Publication 14: Weighing Devices."
- Review "NCWM, Publication 14: Administrative Policy."
- Review applicable sections of "NIST, Handbook 44: Specifications, Tolerances and Other Technical Requirements for Weighing and Measuring Devices."
- 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

AND N	AND M
For Use by	NCWM
Control #:	
CC #:	

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

Part 1. Who Will the Contact Be During the National Type Evaluation Program (NTEP) Application Process								
Today's Date:	,	our company a National Confere CWM) Member: 🗌 Yes 🔲 No	ence NCWM N	Member ID:	Member Name:			
Company:			·					
Street Address:								
City:	State:		Zip Code:	Country:				
Primary Contac	t Name:		Primary Contact Email Address (Required):					
Phone Number	with Extension if Applicable:	Fax Number: Web si			e:			
Other Authorized Contact Name: Other Authorized Contact Em			nail Address: Other Authorized Contact Phone Number:					
Part 2. W	hat <u>Contact Information</u>	Do You Want to Appear	on the NTEP (	Certificate	e 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>Al</u>	<u>LL Billing</u> to Be Sent						
Company: Contact N			t Name:				
Street Address:							
City:		Sta	te:	Ziţ	o Code:	Country:	
Email Address (Required):		Phone	Number with	Extension if	f Applicable:		
Part 4. NTEP Fees (Due at time	of application.)						
	NCWM Me	ember			Non-M	ember	
Application Fee (non-refundable)	\$800.0	00			\$1,20	00.00	
Certificate Processing Fee	\$150.C	00			\$225	5.00	
Total Fees	<b>\$950.00</b> (Application 8	& Processing F	ees)	\$1,	<b>425.00</b> (Application	on & Processin	ng Fees)
** Additional laboratory fees may ap	ply. Annual Maintenance Fe	ees will also	apply. See	Publicatio	on 14 Administrat	rive Policy fo	or details.
** Save instantly on your NTEP Applic	ation fees by becoming an	NCWM Men	nber at www	.ncwm.c	om/membership	<b>)</b> .	
Part 5. Publications							
PUBLI	ICATION		NCWM M UNIT PR		NON-MEMBER UNIT PRICE	QUANTITY	AMOUNT DUE
Handbook 44 (2015 Edition) Specifications, Tolerances and Other Tolerance			<sup>\$</sup> 46		<sup>\$</sup> 46		\$
Publication 14: Administrative Policy (2015 Edition)					<sup>\$</sup> 120		\$
Publication 14: Grain Moisture Meters & Near Infrared Grain Analyzers (2015 Edition) Technical Policy, Checklists and Procedures				\$60 \$			\$
Publication 14: Measuring Devices (20) Technical Policy, Checklists and Proce			\$60		\$1 <b>20</b>		\$
Publication 14: Weighing Devices (2015) Technical Policy, Checklists and Proces			\$60		<sup>\$</sup> 120		\$
Publication 14 CD (2015 Edition) Includes: Administrative Policy, Grain Moisture Meters & Near Infrared Grain Analyzers, Measuring Devices and Weighing Devices				\$135 \$100 \$85	1-3 CDs <sup>\$</sup> 270 4-9 CDs <sup>\$</sup> 200 10+ CDs <sup>\$</sup> 170		\$
SHIPPING & HANDLING			USA	ONLY	OUTSIDE USA	SHI	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.			CD(s): 1-3	= \$19.00 Contact NCWM at 402.434.4872 \$			
Part 6. Payment Information			4-6	= \$16.00			
-							
☐ VISA ☐ MasterCard ☐ Dis	scover American Expre	ess LC	heck Enclose Expira	• •	payable to NCWM)	ecurity	
Number:			Date:		C	ode:	
Billing Address:					Zip Code:		
Name on Credit Card:					Total Amoun	t Enclosed:	

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

Check One: ☐ First Available ☐ California ☐ Ma	ryland 🔲 New York	Ohio		
Part 8. Where Would a Field Test Be C				
Business Name:				
Street Address:				
City:		State:	Zip Code:	Country:
Part 9. General Information				
Is this Evaluation to Addend An Existing NTEP (	Certificate of Conforma	nce(CC): 🗌 Yes, Provide	e CC Number:	□No
Part 10. About the Device				
Check All That Apply:				
Automatic Gravimetric Filling Machine				
☐ Automatic Checkweigher☐ Automatic Weigh-Labeler☐		utomatic and Non-Autor utomatic and Non-Autor		
Part 11. Model Designation	_ Combination / C	nomane and Non Acron	Halle Weight Labelet	
Model Designation(s) How It/They Will Appear on the	e NTEP Certificate of Confo	rmance:		
medel Besignation(s) new ti, mey mit Appear on the	o titel commedia of come	manee.		
Part 12. About the Device Type				
Capacity:	d:		Check One: Accuracy Class: 🗌 III	□IIIS
Platform Material:		<u>,                                      </u>		
n <sub>max</sub> :		V <sub>min</sub> :		
Platform Size				
Length:	Width:			
Load Cells(s) Used:		Load Cells CC Number:		
Part 13. Recording Element				
Check One:  Label Printer Page Printer	Preprinted Weigh Ticket	Printer		
Model:		-		
Manufacturer:				
Part 14. Indicating Element				
Model:				
Manufacturer:				

Part 15. Standards and Features				
Description	Check One			
Variable Print Format:	☐ Standard ☐ Option ☐ NA			
Dot Matrix Printer:	☐ Standard ☐ Option ☐ NA			
Integral Printer:	☐ Standard ☐ Option ☐ NA			
Label Printer:	☐ Standard ☐ Option ☐ NA			
Tape Printer:	☐ Standard ☐ Option ☐ NA			
Thermal Printer:	☐ Standard ☐ Option ☐ NA			
Ticket Printer:	☐ Standard ☐ Option ☐ NA			
UPC Printer:	☐ Standard ☐ Option ☐ NA			
Prints Identification Number:	☐ Standard ☐ Option ☐ NA			
Prints Time and Date:	☐ Standard ☐ Option ☐ NA			
Alphanumeric Display:	☐ Standard ☐ Option ☐ NA			
Integral Weight Display:	☐ Standard ☐ Option ☐ NA			
Liquid Crystal Display:	☐ Standard ☐ Option ☐ NA			
Remote Customer Display:	☐ Standard ☐ Option ☐ NA			
Separate Tare Display:	☐ Standard ☐ Option ☐ NA			
Keyboard PLU Keys:	☐ Standard ☐ Option ☐ NA			
Multiplier Keys:	☐ Standard ☐ Option ☐ NA			
Programmable Commodity Keys:	☐ Standard ☐ Option ☐ NA			
Tare Save Key:	☐ Standard ☐ Option ☐ NA			
Unit Price Save Key:	☐ Standard ☐ Option ☐ NA			
Keyboard Tare:	☐ Standard ☐ Option ☐ NA			
Multiple Tare Memories:	☐ Standard ☐ Option ☐ NA			
Programmable Tare with PLUs:	☐ Standard ☐ Option ☐ NA			
Semi-Automatic Tare:	☐ Standard ☐ Option ☐ NA			
Gross/Tare/Net Display Modes:	☐ Standard ☐ Option ☐ NA			
Training Mode:	☐ Standard ☐ Option ☐ NA			
Price Look-Up Capability:	☐ Standard ☐ Option ☐ NA			
Multiple Pound/Item Pricing:	☐ Standard ☐ Option ☐ NA			
Manual Weight Entries:	☐ Standard ☐ Option ☐ NA			
Pound/Kilogram Conversion:	☐ Standard ☐ Option ☐ NA			
Consecutive Ticket Numbering:	☐ Standard ☐ Option ☐ NA			
Semi-Automatic Zero:	☐ Standard ☐ Option ☐ NA			
Initial Zero-Setting Mechanism (IZSM):	☐ Standard ☐ Option ☐ NA			
Zero Tracking:	☐ Standard ☐ Option ☐ NA			
Audit Trail:	☐ Standard ☐ Option ☐ NA			
AC to DC Adapter:	☐ Standard ☐ Option ☐ NA			
Battery Power Supply:	☐ Standard ☐ Option ☐ NA			
Battery Saving Feature (Auto Shut-Off):	☐ Standard ☐ Option ☐ NA			
Intrinsically Safe (If an Option, the Intrinsically Safe Version Must Be Submitted):	☐ Standard ☐ Option ☐ NA			

Part 16. Load Cell Data										
Check One:  ☐ Compression ☐ Hydraulic ☐ Inductive ☐ Strain Gage ☐ Tension ☐ Other										
Model:										
Capacity:	Capacity:									
Quantity (nui	mber of cells):									
m V/V:										
Part 17.	Model(s) to B	e Covered	by the CC							
	Minimum	Сар	acity		Weigh	bridge	Belt	Number	Load Cell	Load Cell
Model	Acquisition	Minimum	Maximum	Platform Size	Length	Width	Width	of Chains	Model	Capacity
Part 18.	Method of Se	alina								
			udit Trail Oper	ation if Applicable:						
Describe into	THO IT IOU OF OOU	19, 11101001119 7	odii irdii opore	anor ii Applicabio.						
Part 19.	Part 19. General Description									
Describe the reason this application is being submitted:										

Part 20.	Signature		
	By checking this box, the applicant authorizes the National Type that this application has been submitted and whether the file in		
Sign Here	Applicant agrees to and accepts all of the following terms and Certificate of Conformance. 1) All the devices manufactured as the tolerances and be of the same type without technical or metro participating laboratory(s) will be paid by the applying company, publications are incorporated by reference as terms and condition the State of Nebraska shall control the interpretation and construction the parties agree that the exclusive legal forum of choice of the Nebraska. 5) Applicant agrees that NCWM, its officers, directors, ein excess of the application fee or the annual renewal fee, as certificate of conformance or renewal certificate under the NTEP as a handwritten signature.	he type referenced blogical deviation of 3) The NCWM policins of the issuance/rection of NTEP and be parties shall be the Lemployees and agerapplicable. This limit	will continue to conform to the same specifications and if 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 vusiness relationships, including choice of law provisions. Concaster County State District Court located in Lincoln, nts shall have no liability for any damages of any nature itation of liability is a condition of the issuance of any
	Signature	Date	Title