

# Application for Load Cell



**This application should be used if** the device, whether electric, hydraulic or pneumatic, that produces a signal (change in output) proportional to the load applied.

## 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](mailto: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

## For Use by NCWM

Control #: \_\_\_\_\_

CC #: \_\_\_\_\_

**If completing application by hand, do so legibly and in blue ink.** 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:	Are you or someone within your company a National Conference on Weights and Measures (NCWM) Member: <input type="checkbox"/> Yes <input type="checkbox"/> No	NCWM Member ID:	Member Name:
Company:			
Street Address:			
City:	State:	Zip Code:	Country:
Primary Contact Name:		Primary Contact Email Address (Required):	
Phone Number with Extension if Applicable:	Fax Number:	Web site:	
Other Authorized 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 ALL Billing to Be Sent**

Company:		Contact Name:	
Street Address:			
City:	State:	Zip Code:	Country:
Email Address (Required):		Phone Number with Extension if Applicable:	

**Part 4. NTEP Fees (Due at time of application.)**

	NCWM Member	Non-Member
Application Fee (non-refundable)	\$800.00	\$1,200.00
Certificate Processing Fee	\$150.00	\$225.00
<b>Total Fees</b>	<b>\$950.00</b> (Application & Processing Fees)	<b>\$1,425.00</b> (Application & Processing Fees)

**\*\* Additional laboratory fees may apply. Annual Maintenance Fees will also apply. See Publication 14 Administrative Policy for details.**

**\*\* Save instantly on your NTEP Application fees by becoming an NCWM Member at [www.ncwm.com/membership](http://www.ncwm.com/membership).**

**Part 5. Publications**

PUBLICATION	NCWM MEMBER UNIT PRICE	NON-MEMBER UNIT PRICE	QUANTITY	AMOUNT DUE
<input type="checkbox"/> <b>Handbook 44</b> (2015 Edition) Specifications, Tolerances and Other Technical Requirements for Weighing and Measuring Devices," as adopted by the National Conference on Weights and Measures	\$46	\$46		\$
<input type="checkbox"/> <b>Publication 14: Administrative Policy</b> (2015 Edition)	\$60	\$120		\$
<input type="checkbox"/> <b>Publication 14: Grain Moisture Meters &amp; Near Infrared Grain Analyzers</b> (2015 Edition) Technical Policy, Checklists and Procedures	\$60	\$120		\$
<input type="checkbox"/> <b>Publication 14: Measuring Devices</b> (2015 Edition) Technical Policy, Checklists and Procedures	\$60	\$120		\$
<input type="checkbox"/> <b>Publication 14: Weighing Devices</b> (2015 Edition) Technical Policy, Checklists and Procedures	\$60	\$120		\$
<input type="checkbox"/> <b>Publication 14 CD</b> (2015 Edition) Includes: Administrative Policy, Grain Moisture Meters & Near Infrared Grain Analyzers, Measuring Devices and Weighing Devices	1-3 CDs \$135 4-9 CDs \$100 10+ CDs \$85	1-3 CDs \$270 4-9 CDs \$200 10+ CDs \$170		\$
<b>SHIPPING &amp; HANDLING</b>	<b>USA ONLY</b>	<b>OUTSIDE USA</b>	<b>SHIPPING DUE</b>	
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**

<input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express <input type="checkbox"/> Check Enclosed (made payable to NCWM)	
Account Number:	Expiration Date:
Billing Address:	
Zip Code:	
Name on Credit Card:	Total Amount Enclosed:
\$	

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

Check One

☐ First Available ☐ California ☐ NIST Force Group**Part 8. General Information**Is this Evaluation to Addend An Existing NTEP Certificate of Conformance (CC): ☐ Yes, Provide CC Number: ☐ No**Part 9. Analysis Requested**

NIST, Handbook 44 Accuracy Class (Check One):

Single Cell: ☐ II ☐ III ☐ III LMultiple Cell: ☐ II ☐ III ☐ III LMaximum Number of Load Cell Intervals ( $n_{max}$ ):

Directions of Loading (Check One):

☐ Tension ☐ Compression ☐ Tension & Compression (Universal) ☐ Beam (Specify Direction):

Safe Load Limit:

Limits of Temperature:

Upper: ☐ 40°C ☐ Other \_\_\_\_\_ °CLower: ☐ -10°C ☐ Other \_\_\_\_\_ °C

Construction Material of Counterforce (Check One):

☐ Aluminum ☐ Stainless Steel ☐ Other (Specify Material):

Is There Sensitivity to Barometric Pressure Changes:

☐ Yes ☐ No

Describe the Mounting Configuration:

Load Cell Excitation (Check One):

☐ 4 Wire ☐ 6 Wire

Maximum Excitation Voltage:

\_\_\_\_\_ ☐ AC ☐ DC

Recommended Excitation Voltage:

\_\_\_\_\_ ☐ AC ☐ DC

Load Cell Nominal Output:

\_\_\_\_\_ mV/V

Load Cell Impedance (Input):

Load Cell Impedance (Output):

**Part 10. Load Cell(s) Model Designation(s) to Be Covered by the CC**

Model	Max Capacity ( $E_{max}$ )	Minimum Load Cell Interval ( $V_{min}$ )		Minimum Dead Load ( $E_{min}$ )	Maximum Number of Intervals ( $n_{max}$ )
		Single Cell	Multiple Cell		

Secondary Equipment Submitted (i.e. Load Adapters):

**Part 11. General Description**

Describe the reason this application is being submitted:

**Part 12. Signature****Sign  
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. 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 and participating laboratory(s) 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

Title