



**ARIZONA DEPARTMENT OF AGRICULTURE
WEIGHTS AND MEASURES SERVICES DIVISION**

Mailing Address: 1802 W Jackson St #78, Phoenix, AZ 85007
 Physical Address: 1110 W Washington St, Suite 450, Phoenix, AZ 85007
 Phone: 602-542-3578 Fax: 602-542-0466 E-mail: licensing@azda.gov
 Web: agriculture.az.gov State Ombudsman: 602-277-7292

**LIMITED PUBLIC WEIGHMASTER
APPLICATION**

About the applicant:

NAME:		TELEPHONE:	
MAILING ADDRESS:	CITY:	STATE:	ZIP CODE:

Location where you will serve as a Limited Public Weighmaster (note that a separate application must be filed for each location where you will issue weight certificates):

LOCATION NAME:		TELEPHONE:	
MAILING ADDRESS:	CITY:	STATE:	ZIP CODE:

Scales at this location that will be used to produce weight certificates:

TYPE:	DECK/PLATFORM DIMENSIONS:	MAX CAPACITY:	lb
TYPE:	DECK/PLATFORM DIMENSIONS:	MAX CAPACITY:	lb
TYPE:	DECK/PLATFORM DIMENSIONS:	MAX CAPACITY:	lb
TYPE:	DECK/PLATFORM DIMENSIONS:	MAX CAPACITY:	lb

What type of Seal of Authority will you use to certify weight certificates?

EMBOSSING PRESS INK STAMP ELECTRONIC

Are you a Limited Public Weighmaster at any other location in Arizona?

1	NAME:	TELEPHONE:	
	PHYSICAL ADDRESS:	CITY:	ZIP CODE: BMF #:
2	NAME:	TELEPHONE:	
	PHYSICAL ADDRESS:	CITY:	ZIP CODE: BMF #:

I certify that I have a thorough knowledge and understanding of the laws, rules, and policies that apply to a Limited Public Weighmaster in the State of Arizona. In addition, I certify that I will only act as a Limited Public Weighmaster within the scope of my official duties as the employee of a city, county, or the state.

APPLICANT NAME _____ SIGNATURE _____ DATE