

02/03/2015



ND Public Service Commission
Testing & Safety Division
600 East Boulevard Avenue
Bismarck, ND 58505

Request for a Permanent Variance Permit:

CHS, Inc. d.b.a. CHS – Milton Group (CHS) is requesting a permanent variance permit for the completed installation of two new truck scales with floating slab foundations that are located at the following site:

CHS Calvin Grain Terminal
401 Railroad Street
Calvin, ND 58323

Both truck scales are above ground RLWS SURVIVOR® OTR Model EZ11712-SC-100-OTR truck scales with guide rails. The deck size is 117' x 12'. The concentrated load capacity (CLC) is 100,000lbs. The truck scale serial numbers at the Calvin Site are 56E3 & 56DP.

CHS complied with all conditions set forth in the Temporary Variance Permit Approval (Case No. WM-13-808). Please see the enclosed scale test reports completed by Northwest Scale, Inc. (a registered service company) for your review. The scale test reports show that the scales have held calibration throughout the temporary variance permit trial year.

Upon receipt of a permanent variance, CHS will continue to operate the scales according to all applicable North Dakota laws and rules, including having the scales tested by a registered service company on an annual basis.

Please let me know if you have any questions regarding this request, or if you require any further information. Thank you for your consideration.

Respectfully,

A handwritten signature in black ink, appearing to read 'Tom Lehar', is positioned below the word 'Respectfully,'.

Tom Lehar
General Manager
CHS – Milton Group
515 W. Montrose Ave.
Milton, ND 58260
tom.lehar@chsinc.com
(701) 496-3141

Northwest Scale, Inc.

2210 E Main Ave, Unit 2A • West Fargo, ND 58078
 office (701) 298-9527 • fax (701) 356-9520
 toll free (800) 854-5885

Invoice Number

Operator No.	Date	Date Last Tested (P&S Only)	Check All That Apply	
	2-4-14		<input type="checkbox"/> Self-Certification <input type="checkbox"/> Non-Commercial <input type="checkbox"/> Equipment Repair <input checked="" type="checkbox"/> New Installation <input type="checkbox"/> Routine Service <input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Rejected Equipment Tag # (Attach) _____ <input type="checkbox"/> Service Contract? Expires _____	
Name of Business				
Location of Device				
Mailing Address				
City	State	Zip Code	Variance Posted	Date of Variance
Calvin	ND	58323	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	11-18-13 - 11-18-14
County	Telephone Number	PSC Device Code	Quantity (of like devices)	
Cavalier	701-697-5121	3UG	2	

Make(s)	Regulating Element(s)	Serial Number(s)	Lever System
Rice Lake	920:	1620400036	1/36E3 / 2 Load Cells
No. of Sections	<input type="checkbox"/> Monorail/Track <input type="checkbox"/> MTD <input type="checkbox"/> Hopper <input type="checkbox"/> Livestock <input type="checkbox"/> Platform <input type="checkbox"/> Axle Load <input type="checkbox"/> Multiple		Pit Depth
6	<input type="checkbox"/> Aux. Beam <input checked="" type="checkbox"/> MT <input type="checkbox"/> Hanging <input type="checkbox"/> Counter Scale <input type="checkbox"/> Dormant/Deck <input type="checkbox"/> Other		Pitless
Capacity & Min. Grad.	Class	Size of Platform	Approaches (Length/Condition)
60,000 lbs x 20 lbs	III L	12' x 117'	Concrete / Good
Printer Model	Printer Serial Number	Wind	Temperature
Computer	System	5-10 mph	-5°
SR (Sensitivity Response) OR Discrimination Test	Motion Detection	Device Location	
ZERO LOAD = 1.4d = 2d lbs. LOADED = 1.4d = 2d lbs.	Range = 60 lb.	Outside	
		AZSM (auto zero) Range = 60 lb.	

Device/ Load Position	Amount of Test Equipment Used	Actual Readings		Device/ Load Position	Amount of Test Equipment Used	Actual Readings	
		As Found	As Left			As Found	As Left
LBP #1	10,000		0	Section #1 #2 #3 #4 #5 #6 B/C	20,000 20,000 20,000 20,000 20,000 20,000 00	165	
#2	10,000		0				
#3	10,000		0				
#4	10,000		0				
#5	10,000		0				
#6	10,000		0				
#7	10,000		0				
#8	10,000		0				
#9	10,000		0				
#10	10,000		0				
#11	10,000		0				
#12	10,000		0				
B/C	0		0				0

STRAIN LOAD TEST	Section #1	Section #3	Section #6	Section #
Empty Truck Weight	37,440 lbs	37,440 lbs	37,440 lbs	
Total Test Weight Added	20,000 lbs	20,000 lbs	20,000 lbs	
Truck Plus Weights	57,440 lbs	57,440 lbs	57,440 lbs	
Error on Added Test Weights	0	0	0	

I hereby declare the statements made here are correct:

Are there any other jurisdictional devices at this location that require testing? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	REMARKS & ADJUSTMENTS MADE Set-up new Truck Scale, adjusted all corners to match, calibrated + performed strain test. Applied stickers, sealed equipment + placed in service
HAS SECURITY SEAL AND STICKER BEEN APPLIED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected Service Agency (Print) Northwest Scale, Inc.	
Inspector/Permit Holder Signature _____ Permit No. 1606	
Owner/Operator Signature _____	

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 office (701) 298-9527 • fax (701) 356-9520
 toll free (800) 854-5885

Invoice Number

Operator No.	Date 2-4-14	Date Last Tested (P&S Only)	Check All That Apply	
Name of Business CHS, Inc.			<input type="checkbox"/> Self-Certification <input type="checkbox"/> Non-Commercial <input type="checkbox"/> Equipment Repair <input checked="" type="checkbox"/> New Installation <input type="checkbox"/> Routine Service <input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Rejected Equipment Tag # (Attach) _____ <input type="checkbox"/> Service Contract? Expires _____	
Location of Device OutBrand Scale				
Mailing Address 401 Railroad Street P.O. Box 8				
City Calvin	State ND	Zip Code 58323	Variance Posted <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date of Variance 11-18-13 - 11-18-14
County Cassidy	Telephone Number 701-687-5121	PSC Device Code 3V6	Quantity (of like devices) 2	

Make(s) Rice Labbe	Regulating Element(s) 920i	Serial Number(s) 16704000 37	Scale 56DP	Lever System 12 Load Cells
No. of Sections 6	<input type="checkbox"/> Monorail/Track <input type="checkbox"/> MTD <input type="checkbox"/> Hopper <input type="checkbox"/> Livestock <input type="checkbox"/> Aux. Beam <input checked="" type="checkbox"/> MT <input type="checkbox"/> Hanging <input type="checkbox"/> Counter Scale <input type="checkbox"/> Platform <input type="checkbox"/> Axle Load <input type="checkbox"/> Dormant/Deck <input type="checkbox"/> Other	<input type="checkbox"/> Platform <input type="checkbox"/> Axle Load <input type="checkbox"/> Dormant/Deck <input type="checkbox"/> Other	Multiple 1:1	Pit Depth Pitless
Capacity & Min. Grad. 160,000 lbs x 20 lbs	Class TTL	Size of Platform 12' x 117'	Approaches (Length/Condition) Concrete / board	
Printer Model Computer	Printer Serial Number System	Wind 10-15 mph	Temperature -5°	Device Location Outside
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.4d = 2d lb. LOADED = 1.4d = 2d lb.		Motion Detection Range = 60 lb.	AZSM (auto zero) Range = 60 lb.	

Device/ Load Position	Amount of Test Equipment Used	Actual Readings		Device/ Load Position	Amount of Test Equipment Used	Actual Readings		
		As Found	As Left			As Found	As Left	
ZBP #1	10,000 lbs		0	Section #1	20,000		0	
#2	10,000		0		#2	20,000		0
#3	10,000		0		#3	20,000		0
#4	10,000		0		#4	20,000		0
#5	10,000		0		#5	20,000		0
#6	10,000		0		#6	20,000		0
#7	10,000		0	BLC	00		0	
#8	10,000		0					
#9	10,000		0					
#10	10,000		0					
#11	10,000		0					
#12	10,000		0					
BLC	00		0					

STRAIN LOAD TEST	Section # 1	Section # 3	Section # 6	Section #
Empty Truck Weight	37,440 lbs	37,440 lbs	37,440 lbs	
Total Test Weight Added	20,000 lbs	20,000 lbs	20,000 lbs	
Truck Plus Weights	57,440 lbs	57,440 lbs	57,440 lbs	
Error on Added Test Weights	+20	0	0	

I hereby declare the statements made here are correct:

REMARKS & ADJUSTMENTS MADE

Are there any other jurisdictional devices at this location that require testing? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Set-up new Truck Scale, adjusted corners to match, calibrated & performed strain tests. Applied stickers, sealed equipment & placed scale in service.
HAS SECURITY SEAL AND STICKER BEEN APPLIED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected Service Agency (Print) Northwest Scale, Inc.	
Inspector/Permit Holder Signature 	
Owner/Operator Signature 	Permit No. 1606

Northwest Scale, Inc.

2210 Main Ave E, Ste 2A
West Fargo, ND 58078-2221

Phone: (701) 298-9527
Fax: (701) 356-9520

www.northwestscale.com
info@northwestscale.com

Date 6/24/14	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS			<input checked="" type="checkbox"/> New Installation (w/ RFI Check)	<input checked="" type="checkbox"/> Performed Calibration
Mailing Address 401 Railroad St.			<input checked="" type="checkbox"/> Modified Equipment	<input checked="" type="checkbox"/> Use as a Reference Scale
City Calvin	State ND	Zip Code 58323	<input checked="" type="checkbox"/> Replaced Existing Equipment	<input checked="" type="checkbox"/> Non-Commercial
County Cavalier	Telephone Number 701-697-9121	Cell Phone Number	<input checked="" type="checkbox"/> Variance Permit Posted; Exp. Date: 11.18.2014	
Device Contact Person/Manager Bruce			<input checked="" type="checkbox"/> Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
E-mail Address Bruce.CAHILL@CHSINC.COM			<input checked="" type="checkbox"/> Software is NTEP Approved	
Device Location Calvin IN Scale			<input checked="" type="checkbox"/> Built-In Standards; Date Certified: _____	
			<input checked="" type="checkbox"/> Multiple Decks/Single Indicator	<input checked="" type="checkbox"/> Customer Has Clear View
			<input checked="" type="checkbox"/> Clearance Below Scale Clear	<input checked="" type="checkbox"/> Video Camera Working
			<input checked="" type="checkbox"/> Approach Requirements Met	<input checked="" type="checkbox"/> View Distance > 200'
			<input checked="" type="checkbox"/> Pit Coping & Crush Strip Good	<input checked="" type="checkbox"/> Two-Way Audio Working
			<input checked="" type="checkbox"/> In Response to PSC Quality Assurance Inspection	

SCALE INFORMATION

Scale Manufacturer NCC LAVE OTR	Indicator Manufacturer/Model NCC LAVE 920i	Indicator Serial Number 1670400036	Weighing Elements 12 - 75K cells
Capacity/Divisions/Units 160,000 x 20 lbs.	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class 111 L	Printer Manufacturer/Model LEXMARK 2800
Deck Size 117' x 12'	Clearance (Inches) 12"	Approach (12' Concrete Level) 12'	Printer Serial Number 86-33580
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.48-2 lb. LOADED = 1.48-2 lb.	Motion Detection Range = 60 lb.	Hard Surface Approach (Length/Slope/Condition) 37' / 1" TO 3" / Good	AZSM (Auto Zero) Range = 60 lb.

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-	
		As Found	As Left			As Found	As Left
LAP #1	10,000 lbs		0				
#2			-20	SECTION			
#3			-20	#1	20,000 lbs	0	0
#4			0	#2		-20	0
#5			-20	#3		-40	0
#6			-20	#4		0	0
#7			0	#5		-20	0
#8			0	#6	20,000 lbs	-20	0
#9			0				
#10			-20	n/c	0 lbs	0	0
#11			0				
#12	10,000 lbs		0				
dc	0 lbs.		0				

STRAIN LOAD TEST 3

Section (Increasing or Decreasing) 36,140	Full Truck Weight 56,140	Test Weight 20,000	Empty Truck Weight 36,140	Errors 0	Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary. INSPECTED TESTED ADJUSTED CORNERS.
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Electronic Audit Trail: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Meets tolerance in PSC adopted NIST Handbook 44? <input type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Acceptance			
Date: 2014 Type: LOAD	Audit Trail Information:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied			QUANTITY TEST.
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.					
Permit Holder Signature Cash Mont	Permit No. 1398	Operator Signature Cash Mont			
Date 6-24-14					

Northwest Scale, Inc.

2210 Main Ave E, Ste 2A
West Fargo, ND 58078-2221

Phone: (701) 298-9527
Fax: (701) 356-9520

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info@northwestscale.com

Date 6/24/14	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS			<input checked="" type="checkbox"/> New Installation (w/ RFI Check)	<input checked="" type="checkbox"/> Performed Calibration
Mailing Address 401 Railroad St.			<input checked="" type="checkbox"/> Modified Equipment	<input checked="" type="checkbox"/> Use as a Reference Scale
City Calvin	State ND	Zip Code 58323	<input checked="" type="checkbox"/> Replaced Existing Equipment	<input checked="" type="checkbox"/> Non-Commercial
County Cavalier	Telephone Number 701-697-5121	Cell Phone Number	<input checked="" type="checkbox"/> Variance Permit Posted; Exp. Date: 11-18-2014	
Device Contact Person/Manager Bruce	E-mail Address Bruce.CANTILL@CHSINC.COM		<input checked="" type="checkbox"/> Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
Device Location Calvin Out Scale			<input checked="" type="checkbox"/> Software is NTEP Approved	
			<input checked="" type="checkbox"/> Built-In Standards; Date Certified: _____	
			<input checked="" type="checkbox"/> Multiple Decks/Single Indicator	<input checked="" type="checkbox"/> Customer Has Clear View
			<input checked="" type="checkbox"/> Clearance Below Scale Clear	<input checked="" type="checkbox"/> Video Camera Working
			<input checked="" type="checkbox"/> Approach Requirements Met	<input checked="" type="checkbox"/> View Distance > 200'
			<input checked="" type="checkbox"/> Pit Coping & Crush Strip Good	<input checked="" type="checkbox"/> Two-Way Audio Working
			<input checked="" type="checkbox"/> In Response to PSC Quality Assurance Inspection	

SCALE INFORMATION

Scale Manufacturer ACE LAKE OTR	Indicator Manufacturer/Model ACE LAKE 922i	Indicator Serial Number 1670400037	Weighing Elements 12-95R Cells
Capacity/Divisions/Units 160000 x 20 lbs.	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class 111 L	Printer Serial Number 86-33580
Deck Size 117' x 12'	Clearance (Inches) 18"	Printer Manufacturer/Model LUX-MARK 2500	Hard Surface Approach (Length/Slope/Condition) 37' 1/2" to 3' / Good
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.40 = 0 lb. LOADED = 1.40 = 0 lb.	Motion Detection Range = 60 lb.	AZSM (Auto Zero) Range = 60 lb.	

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		
		As Found	As Left			As Found	As Left	
LBP #1	10,000 lbs.	0	0	SECTION				
#2		0	0					
#3		0	0		#1	20,000 lbs	0	0
#4		0	0		#2		0+	0+
#5		0	0		#3		0	0
#6		0/-20	0/20		#4		0	0
#7		-20	0		#5		0	0
#8		0	0		#6	20,000 lbs	-40	0
#9		0	0					
#10		0	0		#11	10 lbs	0	0
#11		0	0					
#12	10,000 lbs.	0	0					
0/c	0 lbs.		0					

STRAIN LOAD TEST

Section (Increasing or Decreasing)	1	3		Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary.
Full Truck Weight	56,160	56,140		
Test Weight	20,000	20,000		
Empty Truck Weight	36,160	36,140		
Errors	0	0		INSPECTED ADJUSTED 2 CORRECTIONS.
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Electronic Audit Trail: <input type="checkbox"/> Y <input type="checkbox"/> N			
Date: 2014 Type: LOAD	Audit Trail Information:			QUANTUM TEST.
Meets tolerance in PSC adopted NIST Handbook 44? <input type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Acceptance				
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied				
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.				
Permit Holder Signature [Signature]	Permit No. 1398			
Operator Signature [Signature]	Date 6-24-14			

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Date 9/23/2014	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS, Inc. dba CHS - Milton Group			<input type="checkbox"/> N New Installation (w/ RFI Check)	<input type="checkbox"/> N Performed Calibration
Mailing Address 515 W Montrose Ave			<input type="checkbox"/> N Modified Equipment	<input type="checkbox"/> N Use as a Reference Scale
City Milton	State ND	Zip Code 58260	<input checked="" type="checkbox"/> Y Replaced Existing Equipment	<input type="checkbox"/> N Non-Commercial
County Cavalier	Telephone Number 701-496-3141		<input type="checkbox"/> Y Variance Permit Posted; Exp. Date: 2/4/2015	
Device Contact Person/Manager Bruce Cahill	Cell Phone Number 701-697-5121		<input type="checkbox"/> NA Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
E-mail Address bruce.cahill@chsinc.com			<input type="checkbox"/> NA Software is NTEP Approved	
Device Location Calvin IN Scale - 401 Railroad St; Calvin, ND 58323			<input type="checkbox"/> NA Built-In Standards; Date Certified: NA	
			<input type="checkbox"/> N Multiple Decks/Single Indicator	<input checked="" type="checkbox"/> Y Customer Has Clear View
			<input checked="" type="checkbox"/> Y Clearance Below Scale Clear	<input checked="" type="checkbox"/> Y Video Camera Working
			<input checked="" type="checkbox"/> Y Approach Requirements Met	<input checked="" type="checkbox"/> Y View Distance > 200'
			<input checked="" type="checkbox"/> Y Pit Coping & Crush Strip Good	<input checked="" type="checkbox"/> Y Two-Way Audio Working
			<input type="checkbox"/> N In Response to PSC Quality Assurance Inspection	


SCALE INFORMATION

Scale Manufacturer Rice Lake Weighing Systems	Indicator Manufacturer/Model RLWS / 920i	Indicator Serial Number 1670400036	Weighing Elements 12 - 75K Load Cells
Capacity/Divisions/Units 160,000 x 20 lbs	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class IIIL	Printer Manufacturer/Model Lexmark 2500
Deck Size 117' x 12'	Clearance (Inches) 12" (Pitless)	Approach (12' Concrete Level) 12' Concrete, Good	Printer Serial Number 8G-33580
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.4d = 2d lb. LOADED = 1.4d = 2d lb.	Motion Detection Range = 60 lb.	AZSM (Auto Zero) Range = 60 lb.	

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-	
		As Found	As Left			As Found	As Left
LBP #1	10,000 lbs	0	0	Section #1	20,000 lbs	0	0
LBP #2	10,000 lbs	0	0	Section #2	20,000 lbs	0	0
LBP #3	10,000 lbs	-20	-20	Section #3	20,000 lbs	0/-20	0/-20
LBP #4	10,000 lbs	0	0	Section #4	20,000 lbs	0	0
LBP #5	10,000 lbs	0	0	Section #5	20,000 lbs	0	0
LBP #6	10,000 lbs	-20	-20	Section #6	20,000 lbs	0/-20	0/-20
LBP #7	10,000 lbs	0	0				
LBP #8	10,000 lbs	0	0	BC	00	0	0
LBP #9	10,000 lbs	0	0				
LBP #10	10,000 lbs	-20	-20				
LBP #11	10,000 lbs	0	0				
LBP #12	10,000 lbs	0	0				
BC	00	0	0				

STRAIN LOAD TEST

Section (Increasing or Decreasing)	3 (IN)	6 (IN)	NA	Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary. Replaced damaged load cell in LBP #3. Tested scale, made no adjustments.
Full Truck Weight	57,280	57,300	NA	
Test Weight	20,000	20,000	NA	
Empty Truck Weight	37,300	37,300	NA	
Errors	-20	0	NA	
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Date: 2014 Type: Lead	Electronic Audit Trail: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Audit Trail Information: NA			
Meets tolerance in PSC adopted NIST Handbook 44? <input checked="" type="checkbox"/> Maintenance <input type="checkbox"/> Acceptance <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied				
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.				
Permit Holder Signature: 			Permit No. 1637	
Operator Signature: _____			Date 9/23/2014	

Date 9/23/2014	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS, Inc. dba CHS - Milton Group			<input type="checkbox"/> New Installation (w/ RFI Check)	<input type="checkbox"/> Performed Calibration
Mailing Address 515 W Montrose Ave			<input type="checkbox"/> Modified Equipment	<input type="checkbox"/> Use as a Reference Scale
City Milton	State ND	Zip Code 58260	<input type="checkbox"/> Replaced Existing Equipment	<input type="checkbox"/> Non-Commercial
County Cavalier	Telephone Number 701-496-3141		<input type="checkbox"/> Variance Permit Posted; Exp. Date: 2/4/2015	
Device Contact Person/Manager Bruce Cahill	Cell Phone Number 701-697-5121		<input type="checkbox"/> Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
E-mail Address bruce.cahill@chsinc.com			<input type="checkbox"/> Software is NTEP Approved	
Device Location Calvin OUT Scale - 401 Railroad St; Calvin, ND 58323			<input type="checkbox"/> Built-in Standards; Date Certified: NA	
			<input type="checkbox"/> Multiple Decks/Single Indicator	<input type="checkbox"/> Customer Has Clear View
			<input type="checkbox"/> Clearance Below Scale Clear	<input type="checkbox"/> Video Camera Working
			<input type="checkbox"/> Approach Requirements Met	<input type="checkbox"/> View Distance > 200'
			<input type="checkbox"/> Pit Coping & Crush Strip Good	<input type="checkbox"/> Two-Way Audio Working
			<input type="checkbox"/> In Response to PSC Quality Assurance Inspection	

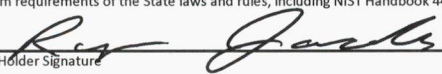
SCALE INFORMATION

Scale Manufacturer Rice Lake Weighing Systems	Indicator Manufacturer/Model RLWS / 920i	Indicator Serial Number 1670400037	Weighing Elements 12 - 75K Load Cells
Capacity/Divisions/Units 160,000 x 20 lbs	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class IIIL	Printer Manufacturer/Model Computer System
Deck Size 117' x 12'	Clearance (Inches) 12" (Pitless)	Approach (12' Concrete Level) 12' Concrete, Good	Printer Serial Number NA
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.4d = 2d lb. LOADED = 1.4d = 2d lb.	Motion Detection Range = 60 lb.		Hard Surface Approach (Length/Slope/Condition) 27' Concrete, Good
		AZSM (Auto Zero) Range = 60 lb.	

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-	
		As Found	As Left			As Found	As Left
LBP #1	10,000 lbs	0	0	Section #1	20,000 lbs	0	0
LBP #2	10,000 lbs	0	0	Section #2	20,000 lbs	0/+20	0/+20
LBP #3	10,000 lbs	0	0	Section #3	20,000 lbs	0	0
LBP #4	10,000 lbs	0	0	Section #4	20,000 lbs	0	0
LBP #5	10,000 lbs	0	0	Section #5	20,000 lbs	0	0
LBP #6	10,000 lbs	0	0	Section #6	20,000 lbs	0	0
LBP #7	10,000 lbs	0	0				
LBP #8	10,000 lbs	0	0	BC	00	0	0
LBP #9	10,000 lbs	0	0				
LBP #10	10,000 lbs	0	0				
LBP #11	10,000 lbs	0	0				
LBP #12	10,000 lbs	0	0				
BC	00	0	0				

STRAIN LOAD TEST

Section (Increasing or Decreasing)	3 (IN)	6 (IN)	NA	Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary.
Full Truck Weight	57,280	57,300	NA	
Test Weight	20,000	20,000	NA	
Empty Truck Weight	37,280	37,300	NA	
Errors	0	0	NA	
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Date: 2014 Type: Lead	Electronic Audit Trail: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Audit Trail Information: NA			Tested scale, made no adjustments.
Meets tolerance in PSC adopted NIST Handbook 44? <input checked="" type="checkbox"/> Maintenance <input type="checkbox"/> Acceptance <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied				
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.				
Permit Holder Signature 	1637 Permit No.			
Operator Signature	9/23/2014 Date			

Northwest Scale, Inc.

2210 Main Ave E, Ste 2A
West Fargo, ND 58078-2221

Phone: (701) 298-9527
Fax: (701) 356-9520

www.northwestscale.com
info@northwestscale.com

Date 1/28/2015	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS, Inc. dba CHS - Milton Group			<input type="checkbox"/> New Installation (w/ RFI Check)	<input type="checkbox"/> Performed Calibration
Mailing Address 515 W Montrose Ave			<input type="checkbox"/> Modified Equipment	<input type="checkbox"/> Use as a Reference Scale
City Milton	State ND	Zip Code 58260	<input type="checkbox"/> Replaced Existing Equipment	<input type="checkbox"/> Non-Commercial
County Cavalier	Telephone Number 701-496-3141		<input type="checkbox"/> Variance Permit Posted; Exp. Date: 2/4/2015	
Device Contact Person/Manager Bruce Cahill	Cell Phone Number 701-697-5121		<input type="checkbox"/> Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
E-mail Address bruce.cahill@chsinc.com			<input type="checkbox"/> Software is NTEP Approved	
Device Location Calvin IN Scale - 401 Railroad St; Calvin, ND 58323			<input type="checkbox"/> Built-In Standards; Date Certified: NA	
			<input type="checkbox"/> Multiple Decks/Single Indicator	<input type="checkbox"/> Customer Has Clear View
			<input type="checkbox"/> Clearance Below Scale Clear	<input type="checkbox"/> Video Camera Working
			<input type="checkbox"/> Approach Requirements Met	<input type="checkbox"/> View Distance > 200'
			<input type="checkbox"/> Pit Coping & Crush Strip Good	<input type="checkbox"/> Two-Way Audio Working
			<input type="checkbox"/> In Response to PSC Quality Assurance Inspection	

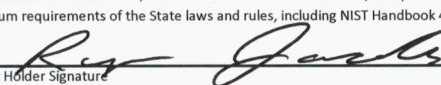
SCALE INFORMATION

Scale Manufacturer Rice Lake Weighing Systems	Indicator Manufacturer/Model RLWS / 920i	Indicator Serial Number Scale:56E3 / Ind:1670400036	Weighing Elements 12 - 75K Load Cells
Capacity/Divisions/Units 160,000 x 20 lbs	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class IIIL	Printer Manufacturer/Model Lexmark 2500
Printer Serial Number 8G-33580	Deck Size 117' x 12'	Clearance (Inches) 12" (Pitless)	Approach (12' Concrete Level) 12' Concrete, Good
Hard Surface Approach (Length/Slope/Condition) 27' Concrete, Good	SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.4d = 2d lb. LOADED = 1.4d = 2d lb.	Motion Detection Range = 60 lb.	AZSM (Auto Zero) Range = 60 lb.

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors + / -		LBP / Section / Product Weight	Value of Test Weights Used	Errors + / -	
		As Found	As Left			As Found	As Left
LBP #1	10,000 lbs	0	0	Section #1	20,000 lbs	0	0
LBP #2	10,000 lbs	0	0	Section #2	20,000 lbs	0	0
LBP #3	10,000 lbs	-20	-20	Section #3	20,000 lbs	0/-20	0/-20
LBP #4	10,000 lbs	0	0	Section #4	20,000 lbs	0	0
LBP #5	10,000 lbs	0	0	Section #5	20,000 lbs	0	0
LBP #6	10,000 lbs	-20	-20	Section #6	20,000 lbs	0/-20	0/-20
LBP #7	10,000 lbs	0	0				
LBP #8	10,000 lbs	0	0	BC	00	0	0
LBP #9	10,000 lbs	0	0				
LBP #10	10,000 lbs	-20	-20				
LBP #11	10,000 lbs	0	0				
LBP #12	10,000 lbs	0	0				
BC	00	0	0				

STRAIN LOAD TEST

Section (Increasing or Decreasing)	3 (IN)	6 (IN)	NA	Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary.
Full Truck Weight	57,600	57,580	NA	
Test Weight	20,000	20,000	NA	
Empty Truck Weight	37,580	37,580	NA	
Errors	-20	0	NA	
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Electronic Audit Trail: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			Tested scale, made no adjustments.
Date: 2014 Type: Lead	Audit Trail Information: NA			
Meets tolerance in PSC adopted NIST Handbook 44? <input checked="" type="checkbox"/> Maintenance <input type="checkbox"/> Acceptance				
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied				
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.				
Permit Holder Signature 	Permit No. 1637			
Operator Signature	Date			

Date 1/28/2015	PSC Device Code 3V6	Number of Sections 6	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business CHS, Inc. dba CHS - Milton Group			<input type="checkbox"/> N New Installation (w/ RFI Check)	<input type="checkbox"/> N Performed Calibration
Mailing Address 515 W Montrose Ave			<input type="checkbox"/> N Modified Equipment	<input type="checkbox"/> N Use as a Reference Scale
City Milton	State ND	Zip Code 58260	<input type="checkbox"/> N Replaced Existing Equipment	<input type="checkbox"/> N Non-Commercial
County Cavalier	Telephone Number 701-496-3141		Y Variance Permit Posted; Exp. Date: 2/4/2015	
Device Contact Person/Manager Bruce Cahill	Cell Phone Number 701-697-5121		<input type="checkbox"/> NA Stored/Recalled Weights Meet NDAC §§ 69-10-02-23 & 69-10-02-24	
E-mail Address bruce.cahill@chsinc.com			<input type="checkbox"/> NA Software is NTEP Approved	
Device Location Calvin OUT Scale - 401 Railroad St; Calvin, ND 58323			<input type="checkbox"/> NA Built-In Standards; Date Certified: NA	
			<input type="checkbox"/> N Multiple Decks/Single Indicator	<input type="checkbox"/> Y Customer Has Clear View
			<input type="checkbox"/> Y Clearance Below Scale Clear	<input type="checkbox"/> Y Video Camera Working
			<input type="checkbox"/> Y Approach Requirements Met	<input type="checkbox"/> Y View Distance > 200'
			<input type="checkbox"/> Y Pit Coping & Crush Strip Good	<input type="checkbox"/> Y Two-Way Audio Working
			<input type="checkbox"/> N In Response to PSC Quality Assurance Inspection	

SCALE INFORMATION

Scale Manufacturer Rice Lake Weighing Systems	Indicator Manufacturer/Model RLWS / 920i	Indicator Serial Number Scale:56DP / Ind:1670400037	Weighing Elements 12 - 75K Load Cells
Capacity/Divisions/Units 160,000 x 20 lbs	Legible Label <input checked="" type="checkbox"/> Y <input type="checkbox"/> N	Class IIIL	Printer Manufacturer/Model Computer System
Deck Size 117' x 12'	Clearance (Inches) 12" (Pitless)	Approach (12' Concrete Level) 12' Concrete, Good	Printer Serial Number NA
SR (Sensitivity Response) OR Discrimination Test ZERO LOAD = 1.4d = 2d lb.	LOADED = 1.4d = 2d lb.	Motion Detection Range = 60 lb.	Hard Surface Approach (Length/Slope/Condition) 27' Concrete, Good
		AZSM (Auto Zero) Range = 60 lb.	

SCALE TEST DATA

LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-		LBP / Section / Product Weight	Value of Test Weights Used	Errors +/-	
		As Found	As Left			As Found	As Left
LBP #1	10,000 lbs	0	0	Section #1	20,000 lbs	0	0
LBP #2	10,000 lbs	0	0	Section #2	20,000 lbs	0/+20	0/+20
LBP #3	10,000 lbs	0	0	Section #3	20,000 lbs	0	0
LBP #4	10,000 lbs	0	0	Section #4	20,000 lbs	0	0
LBP #5	10,000 lbs	0	0	Section #5	20,000 lbs	0	0
LBP #6	10,000 lbs	0	0	Section #6	20,000 lbs	0	0
LBP #7	10,000 lbs	0	0				
LBP #8	10,000 lbs	0	0	BC	00	0	0
LBP #9	10,000 lbs	0	0				
LBP #10	10,000 lbs	0	0				
LBP #11	10,000 lbs	0	0				
LBP #12	10,000 lbs	0	0				
BC	00	0	0				

STRAIN LOAD TEST

Section (Increasing or Decreasing)	3 (IN)	6 (IN)	NA	Remarks (Include environmental conditions, if applicable.) Attach additional sheets as necessary.
Full Truck Weight	57,600	57,600	NA	
Test Weight	20,000	20,000	NA	
Empty Truck Weight	37,600	37,600	NA	
Errors	0	0	NA	
Physical Seal: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N Date: 2014 Type: Lead	Electronic Audit Trail: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N Audit Trail Information: NA			Tested scale, made no adjustments.
Meets tolerance in PSC adopted NIST Handbook 44? <input checked="" type="checkbox"/> Maintenance <input type="checkbox"/> Acceptance <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Rejected <input type="checkbox"/> Taken Out of Service <input checked="" type="checkbox"/> Sticker Applied				
By signing this test report, I declare that I have examined this report and to the best of my knowledge and belief, the report is complete and the facts stated are sufficient, true and correct. I also declare that, except for conditions noted in "Remarks", the device meets the minimum requirements of the State laws and rules, including NIST Handbook 44, for use of the device in commerce.				
Permit Holder Signature <i>Ryan Jacobs</i>	1637			
Operator Signature	Date			

Bauske, Shelly A.

From: Tiffany Jacobs <tiffany@northwestscale.com>
Sent: Tuesday, February 03, 2015 11:33 AM
To: Bauske, Shelly A.; Fahn, Patrick J.
Cc: jim@northwestscale.com; tom.lehar@chsinc.com
Subject: CHS - Calvin, ND Permanent Scale Variance Request
Attachments: CHS, Inc. Calvin - ND Request for Permanent Variance.pdf; CHS - Calvin, ND Scale SN# 56DP Test Reports - Variance Trial Year.pdf; CHS - Calvin, ND Scale SN#56E3 Test Reports - Variance Trial Year.pdf

Importance: High

Pat & Shelly,

CHS is requesting a permanent variance be issued for the truck scales that were installed at their Calvin, ND site. Please see the attached letter and supporting test reports for the trial year of the temporary variance. Let us know if you have any questions or need any more information!

Thank you,
Tiffany Jacobs

Northwest Scale, Inc.
2210 Main Avenue East, Suite 2A
West Fargo, ND 58078
Phone: (701) 298-9527
Fax: (701) 356-9520
www.northwestscale.com

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