



APPLICATION FOR REGISTRATION AS A REGISTERED SERVICE COMPANY
Public Service Commission
SFN 81277 (4/2013)

TYPE OR PRINT - AN INCOMPLETE OR ILLEGIBLE APPLICATION WILL BE REJECTED

Name of Company Hobart Sales + Svc	Email Address skt1412@cs.com	Application Date 3-28-14	
Mailing Address P.O. Box 1663	City Bismarck	State ND	Zip Code 58502-1663
Telephone Number 701-222-0450	Cell Phone Number 701-226-5015	Fax Number 701-222-0456	

Select below all device types your company will certify:

Scales (Include maximum capacity, if applicable)	Liquid (Include maximum flow rate, if applicable)
<input type="checkbox"/> 1. Rail <input type="checkbox"/> 2. Truck <input type="checkbox"/> 3. Livestock <input type="checkbox"/> 4. Hopper: Max. Capacity: _____ <input type="checkbox"/> 5. Belt <input checked="" type="checkbox"/> 6. Over 30 lbs.: Max. Capacity: 350 <input checked="" type="checkbox"/> 7. 30 lbs. or less <input checked="" type="checkbox"/> 8. Class II (indicate on your calibration report which weight kit is Class II certified) <input type="checkbox"/> 9. Other: Please List:	<input type="checkbox"/> 1. Retail Fuel (less than 20 gal. per minute) <input type="checkbox"/> 2. High Flow Retail Fuel (20 gal. per minute or greater) <input type="checkbox"/> 3. Vehicle Tank: Max. Flow Rate: _____ <input type="checkbox"/> 4. Stationary Bulk (fuel or oil): Max. Flow Rate: _____ <input type="checkbox"/> 5. LPG <input type="checkbox"/> 6. Stationary LPG <input type="checkbox"/> 7. Fertilizer: Max. Flow Rate: _____ <input type="checkbox"/> 8. Chemical <input type="checkbox"/> 9. Anhydrous <input type="checkbox"/> 10. Loading Rack <input type="checkbox"/> 11. Other: Please List:

List below all persons employed by your company as a North Dakota Registered Service Person and the device types they are registered to certify (attach a separate sheet to list additional employees):

Permit No.	Employee	Device Types Registered to Certify (list using device type numbers from above)
e.g. 1001	e.g. John Doe	e.g. Scales - 2, 3, 6, 8; e.g. Liquid - 1, 2, 6
1326	Jeff Endersbe	Scales 6, 7, 8
1333	Kyle Hamming	Scales 6, 7, 8
1332	Jim Lindquist	Scales 6, 7, 8

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List below all field standards (attach current calibration reports):

1) 30 pound Set	
6) 50 pound	
1) 25 pound	

Include the following additional items with this application:

- A sample of your standardized test report as required by North Dakota Administrative Code Section 69-10-04-05.
- A sample of your "tested and approved" sticker as required by North Dakota Administrative Code Section 69-10-01-03.
- A photocopy of each side of your crimped lead wire seal.

Public Company Listing:

Include my company information on your registered service company list for public contact.

Yes No

I am Jim Lindquist, and have authority to represent this company.
 By signing this application, I declare that I have examined this form and accompanying documentation, and to the best of my knowledge and belief, the facts stated and documentation provided is true, correct, and complete.

Jim Lindquist
Signature

Send Completed Application and Related Documents To:

Public Service Commission
 600 E Boulevard Ave Dept 408
 Bismarck ND 58505-0480
 Telephone: (701) 328-2400
 Fax: (701) 328-2410



Weights & Measures Division
14305 Southcross Drive #150
Burnsville, MN 55306-7008
651.215.5821 FAX 952.435.4040 TTY 952.435.4045

Receipt Date: March 26, 2014
Test Date: March 27, 2014
Report Date: March 27, 2014

State Test No.: 332317
Set Serial No.: None
Bar Code: 201599

Calibration Report

HOBART SALES & SERVICES
1412 EAST FRONT AVENUE
BISMARCK, ND 58504
Contact: JIM LINDQUIST
Phone: 701-222-0450
PO Number: NONE
SOP: 12
Technician ID: 07

Item(s) Submitted: Cast Handle Weights
Manufacturer: Asst Cast Mfg
ASTM E617 Type: II
Equipment ID#: None
Condition: Good
Temperature: 18.7°C
Pressure: 723.4 mmHg
Relative Humidity: 32. %

Kit contents:

Nominal Value	Quantity
50 lb	6
25 lb	1

When used as a set, these weights meet NIST Class F.

The items listed above have been compared to the Standards of the State of Minnesota which are currently in control. These Standards are traceable to the SI through NIST. Calibration processes were monitored and found to be in control. Uncertainty calculation methods conform to NIST Technical Note 1297. Actual uncertainties will be provided upon request. Results apply to items identified in this report only.

Mark Nicollet
Mark Nicollet
Metrologist

Reviewed by:
Heidi Jones
Heidi Jones
Approved Signatory



Weights & Measures Division
14305 Southcross Drive #150
Burnsville, MN 55306-7008
651.215.5821 FAX 952.435.4040 TTY 952.435.4045

Receipt Date: March 26, 2014
Test Date: March 27, 2014
Report Date: March 27, 2014

State Test No.: 332316
Set Serial No.: None
Bar Code: 201594

Calibration Report

HOBART SALES & SERVICES
1412 EAST FRONT AVENUE
BISMARCK, ND 58504
Contact: JIM LINDQUIST
Phone: 701-222-0450
PO Number: NONE
SOP: 12
Technician ID: 07

Item(s) Submitted: 30lb Weight Kit
Manufacturer: Rice Lake
ASTM E617 Type: I & II
Equipment ID#: None
Condition: Good
Temperature: 20.4°C
Pressure: 723.8 mmHg
Relative Humidity: 44. %

Kit contents:

Nominal Value	Quantity				
5 lb	5				
1 lb	5				
0.5 lb	1				
Decimals	9	From	0.2 lb	To	0.002 lb

When used as a set, these weights meet NIST Class F.

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TEST REPORT HOBART SALES & SERVICE

P.O. BOX 1663
BISMARCK, NORTH DAKOTA 58502
(701) 222-0450

Invoice Number

Operator No., Date, Date Last Tested (P&S Only), Name of Business, Location of Device, Mailing Address, City, State, Zip Code, County, Telephone Number, Check All That Apply (Self-Certification, Equipment Repair, etc.), Variance Posted, PSC Device Code, Quantity (of like devices)

Make(s), Regulating Element(s), Serial Number(s), Lever System, No. of Sections, Capacity & Min. Grad., Printer Model, Printer Serial Number, Wind, Temperature, Device Location, SR (Sensitivity Response) OR Discrimination Test, Motion Detection, AZSM (auto zero), Device/Load Position, Amount of Test Equipment Used, Actual Readings (As Found, As Left)

STRAIN LOAD TEST, Empty Truck Weight, Total Test Weight Added, Truck Plus Weights, Error on Added Test Weights, Section #

I hereby declare the statements made here are correct: REMARKS & ADJUSTMENTS MADE, Are there any other jurisdictional devices at this location that require testing?, HAS SECURITY SEAL AND STICKER BEEN APPLIED?, Service Agency (Print), Inspector/Permit Holder Signature, Permit No., Owner - Operator Signature

Hobart Sales & Service
1412 E. Front Ave.
Bismarck, ND 58504
701-222-0450

1	2	3	4	5	6
7	8	9	10	11	12
06	07	08	09	10	11
12	13	14	15	16	17

Tested & Approved