



APPLICATION FOR REGISTRATION AS A REGISTERED SERVICE COMPANY

Public Service Commission
SFN 51277 (2/2014)



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

Name of Company Midwest Pump & Tank	Email Address mpt@midwestpump.com	Application Date Feb 11, 2015	
Mailing Address 820 South Hwy 281 PO Box 2105	City ABERDEEN	State SD	Zip Code 57401
Telephone Number 605-225-0577	Cell Phone Number 605-380-5185	Fax Number 605-225-0516	

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 type="checkbox"/> 6. Over 30 lbs.: Max. Capacity: _____ <input type="checkbox"/> 7. 30 lbs. or less <input 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 checked="" type="checkbox"/> 1. Retail Fuel (less than 20 gal. per minute) <input checked="" type="checkbox"/> 2. High Flow Retail Fuel (20 gal. per minute or greater) <input checked="" type="checkbox"/> 3. Vehicle Tank: Max. Flow Rate: <u>60</u> <input checked="" type="checkbox"/> 4. Stationary Bulk (fuel or oil): Max. Flow Rate: <u>60</u> <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
1415	JOE JUVE	Liquid 1, 2, 3, 4
1533	JERRY SJERVEN	Liquid 1, 2, 3, 4

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

SERAPHIN	5 gal	S# 42208
SERAPHIN	5 gal	S# 07-05607
ELLISCO	5 gal	No S#
GAS SERVICES + Supply	100 gal	S# 1221


Additional Application Items (initial where appropriate):

Standardized Test Report	<input checked="" type="checkbox"/> Copy enclosed <input checked="" type="checkbox"/> No change in report filed previously
Tested and Approved Sticker	<input checked="" type="checkbox"/> Copy enclosed <input checked="" type="checkbox"/> No change in sticker filed previously
Photocopy of Crimped Lead Wire Seal	<input checked="" type="checkbox"/> Copy enclosed <input checked="" type="checkbox"/> No change in crimped lead wire seal filed previously

Public Company Listing:

Include my company information on your registered service company list for public contact.
 Yes No

I am JERRY SIERVEN, 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.


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