

Date 08/25/2015	PSC Device Code 3V5	No. of Sections 5	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business Growmax LLC.			<input checked="" type="checkbox"/> New Installation (w/ RFI Check)	<input checked="" type="checkbox"/> Performed Calibration
Mailing Address PO Box: , Street Address: 221 Lafayette Road Devils Lake ND 58301			<input checked="" type="checkbox"/> Modified Equipment	<input checked="" type="checkbox"/> Use as a Reference Scale
Device Location/Name Webster RLWS OTR PO Box: , Street Address: 6015 Hwy 20			<input checked="" type="checkbox"/> Replaced Existing Equipment	<input checked="" type="checkbox"/> Non-Commercial
City Webster	State ND	Zip Code 58382	<input checked="" type="checkbox"/> Variance Permit Posted; Expiration Date: 08/31/2016	
County	Telephone Number		<input checked="" type="checkbox"/> Stored/Recalled Weights meet NDAC 69-10-02-23 & 69-10-02-24	
Device Contact/Manager Ron	Cell Number		<input checked="" type="checkbox"/> Software is NTEP Approved	
Email Address andersonr@gvtel.com			<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 and 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 RLWS OTR	Indicator Manufacturer/Model RLWS 720i-2A	Indicator Serial No. 1736900065	Weighing Elements 10 Cell - 75K
Capacity/Divisions/Units 160,000 x 20 lbs	Legible Label X Y _ N	Class IIIL	Printer Manufacturer/Model TM-U590
Deck Size 11' x 80'	Clearance (inches) 12"	Approach - 12' Concrete Level 12' 2"	Printer Serial No. J9SF014591
SR or Discrimination Test Zero Load = NA Loaded = NA	Motion Detection Range = 3d	Hard Surface Approach (Length/Slope/Condition) New/New/New	
		AZSM (Auto Zero) Range = 3d	

Test Data

LBP / Section / Product Wt.	Value of Test Weights Used	Serial/Test Number	Errors +/-		LBP / Section / Product Wt.	Value of Test Weights Used	Serial/Test Number	Errors +/-	
			As Found	As Left				As Found	As Left
Description: Corner Test					Description: Section Test				
1	10,000 lbs			0	1	20,000 lbs			0
2	"			0	2	"			0
3	"			0	3	"			0
4	"			0	4	"			0
5	"			0	5	20,000 lbs			0
6	"			0					
7	"			0		BC=0			
8	"			0					
9	"			0					
10	10,000 lbs			0					
	BC=0								

Strain Load Test

Section (Increasing or Decreasing)	Increasing #5	Remarks (include environmental conditions, if applicable). Attach additional sheets as necessary. Arrived at location, pulled load cell cables through conduits and wired into summing boards. Worked with electricians on running conduit and pulling homerun cable/ground wire. Wired homerun cable into transient protection. Wired into indicator as needed, programmed indicator. Calibrated scale and adjusted into tolerance. Scale does have a temporary variance posted. Which states "This permit allows the above reference scale with a floating slab foundation to be operated in commerce. Variance was put on wall.
Full Truck Weight	62,100 lbs	
Test Weight	20,000 bs	
Empty Truck Weight	42,100 lbs	
Errors	0	
Physical Seal <input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N Electronic Audit Trail: <input type="checkbox"/> Y <input type="checkbox"/> N	Audit Trail Information:	
Seal Date: 08/25/2015	Seal Type: Lead	
Meets tolerances in PSC adopted NIST Handbook 44? <input type="checkbox"/> Maintenance <input checked="" type="checkbox"/> Acceptance <input checked="" type="checkbox"/>		
<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.		
Cody Rannick	1718	
Permit Holder Signature	Permit Number	
Jan D. Nitar	08/25/2015	
Operator Signature	Date	