



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 Prairie Scale Systems Inc	Email Address service@prairiescale.com	Application Date 12/2015	
Mailing Address PO Box 69	City Harace	State ND	Zip Code 58047
Telephone Number 701-281-9591	Cell Phone Number 701-361-2970	Fax Number 701-281-9373	

Select below all device types your company will certify:

Scales (include maximum capacity, if applicable)	Liquid (include maximum flow rate, if applicable)
<input checked="" type="checkbox"/> 1. Rail <input checked="" type="checkbox"/> 2. Truck <input checked="" type="checkbox"/> 3. Livestock <input checked="" type="checkbox"/> 4. Hopper: Max. Capacity: <u>400,000 lbs</u> <input checked="" type="checkbox"/> 5. Belt <input checked="" type="checkbox"/> 6. Over 30 lbs.: Max. Capacity: _____ <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
1719	Cooper Anderson	Scales 1-8
1640	Ryan Andringa	Scales 1-8
1337	Mike Berg	Scales 1-8
1336	Bill Bernstein	Scales 1-8
1514	Mark Cottrell	Scales 1-8
1718	Cody Remmick	Scales 1-8
1334	Vern Anderson	Scales 1-8

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1768	Corant Tegtmeier	Scales 1-8
1769	Greg Bauman	Scales 1-8

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

(4) 4,000 lb carts	(3) 30 lb Kits - Class F
(18) 1,000 lb block weights	(3) Metric Kits - Class F
(4) 1,000 Basket weights	
(4) 500 lb Black weights	
(140) 50 lb weights	
(2) 20 lb weights	

Additional Application Items (initial where appropriate):

Standardized Test Report	<u>CA</u> Copy enclosed _____ No change in report filed previously
Tested and Approved Sticker	<u>CA</u> Copy enclosed _____ No change in sticker filed previously
Photocopy of Crimped Lead Wire Seal	<u>CA</u> Copy enclosed _____ 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 Amanda Mcowell, 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.

Amanda Mcowell
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

PRAIRIE SCALE SYSTEMS, INC.
P.O. Box 69 Horace, ND 58047-0069 701-281-9591

Invoice: RA-101265
Scale ID: 005660

Date 11/06/2014	PSC Device Code 11	No. of Sections 2	Complete each item with Y (Yes), N (No), or NA (Not Applicable)	
Name of Business PIONEER HI-BRED INTERNATIONAL			Y New Installation (w/ RFI Check)	Y Performed Calibration
Mailing Address PO Box: 93, Street Address: 17835 HWY 13 W WAHPETON ND 58075-0093			N Modified Equipment	N Use as a Reference Scale
Device Location/Name WAHPETON A&D EK-1200i ID:005660 PO Box: 93, Street Address: 17835 Hwy 13 W			N Replaced Existing Equipment	N Non-Commercial
City Wahpeton	State ND	Zip Code 58075	N Variance Permit Posted; Expiration Date:	
County Richland	Telephone Number 701-642-5300		NA Stored/Recalled Weights meet NDAC 69-10-02-23 & 69-10-02-24	Public Service Commission
Device Contact/Manager Jeff Pehl Ext. 127	Cell Number		Y Software is NTEP Approved	
Email Address jeff.pehl@pioneer.com			N Built-In Standards; Date Certified:	
			N Multiple Decks/Single Indicator	NA Customer Has Clear View
			NA Clearance Below Scale Clear	NA Video Camera Working
			NA Approach Requirements Met	NA View Distance > 200'
			NA Pit Coping and Crush Strip Good	NA Two-Way Audio Working
			N In response to PSC Quality Assurance Inspection	

Scale Manufacturer A&D	Indicator Manufacturer/Model EK-1200i	Indicator Serial No. DP1841156	Weighing Elements Electronic 1-Cell
Capacity/Divisions/Units 1200g X .1g	Legible Label X Y _ N	Class III	Printer Manufacturer/Model None
Deck Size 5" X 6.5"	Clearance (inches)	Approach - 12' Concrete Level	Printer Serial No.
SR or Discrimination Test Zero Load = Loaded =		Motion Detection Range = .1g	Hard Surface Approach (Length/Slope/Condition)
		AZSM (Auto Zero) Range = Off	

LBP / Section / Product Wt.		Value of Test Weights Used	Serial/Test Number	Errors +/- As Found As Left	LBP / Section / Product Wt.		Value of Test Weights Used	Serial/Test Number	Errors +/- As Found As Left
Description: Dist. Test					Description: Shift Test				
		1200g		0	1		500g		0
		1000g		0	2		500g		0
		500g		0			500g		0
		100g		0			500g		0
		10g		0					
		1g		0			BC = 0		
		BC = 0							

Strain Load Test		Remarks (include environmental conditions, if applicable). Attach additional sheets as necessary. Inspected and set up the new balance. Configured and tested. Found running plus. Calibrated and retested. Found scale to work well at this time. Placed scale into service.
Section (Increasing or Decreasing)		
Full Truck Weight		
Test Weight		
Empty Truck Weight		
Errors		
Physical Seal X Y _ N Electronic Audit Trail: _ Y X N		
Seal Date: 11/06/2014 Audit Trail Information:		
Seal Type: Lead		
Meets tolerances in PSC adopted NIST Handbook 44? _ Maintenance X Acceptance		
X Approved _ Rejected _ Taken out of Service X 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	1640	Permit Number
Operator Signature	11/06/2014	Date