



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 <i>Mott Grain Company</i>	Email Address <i>mottgrain@ndsupernet.com</i>	Application Date <i>8/11/16</i>	
Mailing Address <i>9101 71st St. SW</i>	City <i>Mott</i>	State <i>ND</i>	Zip Code <i>58646</i>
Telephone Number <i>(701) 824-4536</i>	Cell Phone Number <i>(701) 824 260-2458</i>	Fax Number <i>(701) 824-4537</i>	

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 checked="" type="checkbox"/> 2. Truck <input type="checkbox"/> 3. Livestock <input checked="" type="checkbox"/> 4. Hopper: Max. Capacity: <i>39,000 lbs.</i> <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: <i>Dockage scales</i>	<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)
<i>e.g. 1001</i>	<i>e.g. John Doe</i>	<i>e.g. Scales - 2, 3, 6, 8; e.g. Liquid - 1, 2, 6</i>
	<i>self employed</i>	<i>N/A</i>

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

N/A	

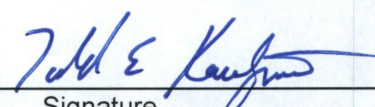
Additional Application Items (initial where appropriate):

Standardized Test Report	<u> </u> Copy enclosed
	<u> </u> No change in report filed previously
Tested and Approved Sticker <i>N/A</i>	<u> </u> Copy enclosed
	<u> </u> No change in sticker filed previously
Photocopy of Crimped Lead Wire Seal	<u> </u> Copy enclosed
	<u> </u> 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 Todd Kautzman, 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



APPLICATION FOR AUTHORITY - TESTING AND SAFETY
 Public Service Commission
 SFN 16415 (08/04)



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

Date 8/11/16	Name of Applicant Todd Kautzman		
Personal Address 7079 Highway 8	City Mott	State ND	Zip Code 58646
Telephone Number (701) 824-2201	Cell Phone Number (701) 260-2458	Email Address mottgrain@ndsupernet.com	

Name of Employer Self		Telephone Number (701) 824-4536	
Employer Address 9101 71 st St. SW	City Mott	State ND	Zip Code 58646

I hereby apply for authority to break seals and place in service weights and measures equipment for use in commercial trade in the State of North Dakota, in accordance with Public Service Commission laws, rules and regulations.

I certify that I, or my company, have the necessary and adequate field standards for the repair and installation of commercial weighing, measuring, or liquid dispensing devices.

Signature of Applicant

Send Completed Application To:

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

Include with the Application:

- Registered Service Person Work History (SFN 54027)
- Request for Registered Service Person Testing (SFN 19665)