



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>CMS petroleum Equip Co</i>	Email Address <i>CMSpetroleum@hotmail.com</i>	Application Date <i>11-9-17</i>	
Mailing Address <i>P.O. Box 85</i>	City <i>Morris</i>	State <i>ND</i>	Zip Code <i>58267</i>
Telephone Number <i>320-589-9017</i>	Cell Phone Number <i>320-760-9680</i>	Fax Number <i>320-589-2827</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 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 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 checked="" type="checkbox"/> 3. Vehicle Tank: Max. Flow Rate: <u>100</u> <input checked="" type="checkbox"/> 4. Stationary Bulk (fuel or oil): Max. Flow Rate: <u>100</u> <input checked="" type="checkbox"/> 5. LPG <input checked="" 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>1729</i>	<i>Joel McNally</i>	<i>3456</i>
<i>1785</i>	<i>Tyler McNally</i>	<i>3456</i>
<i>1730</i>	<i>Jeff Firke</i>	<i>3456</i>
<i>1733</i>	<i>John Schilitz</i>	<i>3456</i>

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

100 Gallon Arrow LP	
100 Gallon Refined Fuel Kloespr	

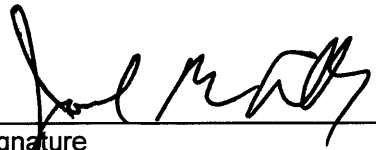
Additional Application Items (initial where appropriate):

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 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 Co/owner, 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



SECRETARY OF STATE NORTH DAKOTA



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CMS PETROLEUM EQUIPMENT CO.

Corporation Details

System ID: 12648800 **Phone:** (320) 589-9017
Type: FOREIGN BUSINESS CORPORATION
Status: Active & Good Standing
Original File Date: 04/07/1999 **Effective Date:** 04/07/1999
State of Origin: Minnesota

Nature of Business

PETROLEUM EQUIPMENT SALES & SERVICE

Principal Office

48505 210TH ST PO BOX 85 MORRIS, MN 56267-0085

Registered Agent

QUAM PETROLEUM SERVICE, INC.
4720 HWY 6 S
MANDAN, ND 58554-8513
Established Date: Jun 06, 2005

Generate an Annual Report To File


To Generate a Annual Report form to be filed with the Secretary of State, select the appropriate year of the report you intend to file. This report does not contain details of a report previously filed with the Secretary of State. The annual report years reflected are an indication of the various report forms available in this site and is not an indication that an entity needs to file reports for all years. Missing years indicate that the forms for the missing year have not yet been deployed to the website, or have already been removed, and can be obtained by contacting the Secretary of State.


[2017](#) (generates a forms-fillable pdf in a new pop-up window)

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