


TR-WM-30a (12/14)		Permit Number Issued	
	Wisconsin Department of Agriculture, Trade and Consumer Protection, (608) 224-4959 Division of Trade and Consumer Protection PO Box 8911 Madison, WI 53708-8911		
	<h2 style="text-align: center;">Vehicle Scale Report of Completed Installation Form</h2> <p style="text-align: center;">Sec. ATCP 92.30(5), Wis. Adm. Code</p>		
Name of Vehicle Scale Installation Permit Applicant:			
Street Address			
City		State	Zip
Phone () -		E-Mail	

Enclosed is your approved permit application, and a Vehicle Scale Operator License Application. You are required by law to submit the following information within 5 days of scale installation:

- The Completed Installation Report below. Be sure all requested information is included.
- A scale test report. A licensed service company must conduct the inspection of the scale.

Complete the enclosed Vehicle Scale Operator License Application, and return with the above information. Your Vehicle Scale operator's license will not be issued until all of the above information is received. **Do not operate your Vehicle Scale until you receive your Vehicle Scale License from DATCP.** If you have any questions please call me at (608) 224-4959 or e-mail datcpweightsandmeasures@wi.gov

Return all of the above information to:

WDATCP
Box 93479
Milwaukee, WI 53293-0479

Completed Installation Report

Permit number issued.		
Date of the installation or relocation.		
Location of the installation or relocation.		
Name of the scale manufacturer.		
Brand name of the scale.		
Model or serial number of the scale.		
The capacity of the scale.		
The sectional capacity of the scale if the scale was constructed before January 1, 1989, or the concentrated load capacity of the scale if the scale was manufactured on or after Jan. 1, 1989.		
Scale test report completed within 5 days of installation	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Indicate whether the previous scale was sold in connection with the installation or relocation of the new scale.		
If the previous scale was sold identify the name, and address of the buyer and seller.		
If the previous scale was sold, indicate the date of the sale.		
SCALE OWNER (PRINT NAME)	SCALE OWNER (SIGNATURE)	DATE SIGNED
DATE OF SCALE TEST REPORT		
MAILED TO DATCP BY (PRINT NAME)	DATE MAILED TO DATCP	

Personal information you provide may be used for purposes other than that it for it was originally collected (s.15.04(1)(m), Wis. Stats.).