



# TENNESSEE DEPARTMENT OF AGRICULTURE

Consumer and Industry Services | Phone: 615-837-5109

PO Box 40627 - Nashville, TN 37204

## SERVICEPERSON'S PLACED IN SERVICE REPORT

This report is issued in accordance with the Tennessee Serviceman Registration Act Tennessee Code Annotated 47-26-508.  
Only those devices that are to be used in commercial transactions are to be reported.

Name of Establishment where the device is located: \_\_\_\_\_

Street Address of Establishment where the device is located: \_\_\_\_\_  
(No PO Boxes or Rural Routes)

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

Device Manufacturer: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Type of Device: \_\_\_\_\_  
(Truck or Livestock Scale, Computing Scale, Retail Dispenser, LPG Meter, Wholesale Meter, etc)

Name of ServicePerson: \_\_\_\_\_ Company Represented: \_\_\_\_\_

Remarks: \_\_\_\_\_

SERVICEPERSON OATH: I certify that I am a licensed serviceperson in the State of Tennessee in accordance with the Tennessee Serviceman Registration Act, T. C. A. 47-26-502, and hold registration number \_\_\_\_\_. Upon completion of this service, the weighing/measuring device was tested in accordance with all procedures outlines in the most current edition of the National Institute of Standards and Technology Handbook 44. This device was adjusted as close to zero as possible and I certify that the maximum indicated error does not exceed tolerances as mandated in Handbook 44.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

This form shall be completed in its entirety. This form is the only acceptable format for reporting weighing/measuring devices PLACED IN SERVICE in Tennessee and one (1) copy of this form must be submitted to one of the following addresses within twenty-four (24) hours of placing the device in service:

Tennessee Department of Agriculture / Weights and Measures Division  
PO BOX 40627, Melrose Station, Nashville, TN 37204  
Email: [weights.measures@tn.gov](mailto:weights.measures@tn.gov) / Phone: 615-837-5109 / Fax: 615-837-5015

FOR W&M OFFICE USE ONLY

Date Received: \_\_\_\_\_

Routed To: \_\_\_\_\_

Due Date: \_\_\_\_\_

