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|--------------------------------------|-------------------------------------|-------------------------------------|
| CHEMUNG COUNTY | YATES COUNTY | SCHUYLER COUNTY |
| WEIGHTS & MEASURES DEPT. | WEIGHTS & MEASURES DEPT. | WEIGHTS & MEASURES DEPT. |
| 425 Pennsylvania Avenue, P.O Box 588 | 417 Liberty Street | 910 South Decatur Street |
| Elmira, New York 14902 | Penn Yan, New York 14527 | Watkins Glen, New York 14891 |
| (607) 483-5413 / Fax (607) 535-2768 | (607) 483-5413 / Fax (607) 535-2768 | (607) 483-5413 / Fax (607) 535-2768 |

DEVICE INSPECTION AND TEST REPORT

| | | | | | |
|---|------|--------------------------------|-------------|----------|-------------------|
| Firm/Individual/Partnership/Corp./Assn. | | Contact | | | Date |
| Location | | Mailing Address (if different) | | | Establishment No. |
| Type | City | County | State NY | Zip Code | Telephone No. |

INSPECTION FEE INVOICE # _____
CHEMUNG - SCHUYLER WEIGHTS AND MEASURES DEPARTMENT

Scales:

| | | |
|---|----------------------|---------------|
| Up to 33 pound scale capacity, first 5 scales | tested__ x fee \$20 | total \$_____ |
| Up to 33 pound scale capacity, 6-above | tested__ x fee \$10 | total \$_____ |
| Over 33-661 pound scale capacity | tested__ x fee: \$40 | total \$_____ |
| Over 661-3307 pound scale capacity | tested__ x fee \$100 | total \$_____ |

Linear field measures

| | | |
|------------------------------------|----------------------|---------------|
| Up to 39" | tested__ x fee: \$4 | total \$_____ |
| Over 39" and including 52' | tested__ x fee: \$8 | total \$_____ |
| Wire and Cordage measuring devices | tested__ x fee: \$40 | total \$_____ |

Petroleum Dispensing Devices

| | | |
|------------------------|----------------------|---------------|
| Single dispensing pump | tested__ x fee: \$20 | total \$_____ |
| Dual dispensing pump | tested__ x fee: \$40 | total \$_____ |
| Blend dispensing pump | tested__ x fee: \$40 | total \$_____ |

Vehicle

| | | |
|---|-----------------------|---------------|
| Vehicle metering systems (79 gpm) or less | tested__ x fee: \$100 | total \$_____ |
| Metering systems over (79 gpm) | tested__ x fee: \$120 | total \$_____ |

Stationary Metering Systems

| | | |
|-----------------|-----------------------|---------------|
| Up to (106 gpm) | tested__ x fee: \$100 | total \$_____ |
|-----------------|-----------------------|---------------|

Timing Devices

All commercially used devices where time is a basis for charge

| | | |
|--|---------------------|---------------|
| | tested__ x fee: \$4 | total \$_____ |
|--|---------------------|---------------|

Department Cost

Cost associated with testing of device(s) (_____)

| | |
|--|---------------|
| | total \$_____ |
|--|---------------|

Other

| | |
|--|---------------|
| | total \$_____ |
|--|---------------|

***TOTAL AMOUNT DUE \$_____**

Method of Payment: (**All fees must be paid within 30 days - please note invoice number on check / money order - thank you*)

*Check / money order: Payable to: Chemung-Schuyler Weights and Measures Department

*Mail invoice & payment to: Chemung-Schuyler Weights and Measures, 910 South Decatur Street, Watkins Glen, NY, 14891

*Credit Card: Call 607-535-2531; please have your credit card information available (3% service fee will be added to your invoice)

*Cash: Not accepted for payment

PLEASE NOTE

Failure to pay invoice balance will result in additional late fees/penalty for appropriate collection efforts as indicated below

- Late Fee: \$25 for any invoice amount up to and including \$100, all other invoices; 25% of total due