COLICULIUM COLICULIUM	Solution MERS			n Carolina and C ards Divis	onsume	er Sei	rvice	es			
I DUNDED	ISTI-			Raleigh,	51 Mail Serv North Carol (984) 236-4800	lina 2769	99-105				
APPLICATION FOR REGISTRATION - PETROLEUM DEVICE TECHNICIAN (Note: Fill out in ink or other indelible substance - Please Print / or Type)											
I,				Н	ome Phone: ()	-		Age:		
	(Full Na	ume)									
	Home Ad	ldress			City		State		Zip Co	ode	
				m Device Technicia , Chapter 42, Section						lorth	
I am employed by:					Business Pho	one: (_) _			ext	
	Business Ad	danaaa		Cit		County		State	Zin	Code	
 that I understand and will comply with the applicable sections of the Gasoline & Oil Inspection Law (Chapter 119 of the NC General Statutes), North Carolina Gasoline & Oil Regulations (Title 2, Chapter 42 of the NC Administrative Code) of the North Carolina Department of Agriculture & Consumer Services, and to the General and Liquid Measuring Device Code Sections of the currently adopted edition of NIST (formerly NBS) Handbook 44. If registered, I will test each retail pump, meter, or other liquid measuring device, which I install, repair, or adjust, with a 5 gallon or 20 liter test measure which has been sealed by the State of NC or another certified lab since October 1 of the year preceding this registration period. List device test information below. < OR > If registered, I will test each wholesale meter with a prover that has been sealed by the state of North Carolina or another 											
				eter with a prover the ree (3) years. List d				North Ca	ırolina or a	unother	
		gallo	ons		/	/					
Volume of Test				State	Test Date (1		•••		est Numb		
				n information must attached if test mea							
				subject to revocation	n due to misrepr	resentation	of fact,	incompe	tency, or f	ailure to	
render satis 4. I will make	•	• •		o error in accuracy a	s possible.						
5. I will seal a	. I will seal all adjustments with a lead and wire seal stamped with a 'bulldog' sealer with my three (3) initials on one side										
and the curr A les			scribe	ed above must be at	tached before	this applic	cation c	an be pr	ocessed.		
6. I will notify	the directo	or's office of	the fa	ct that I have repaire	d or adjusted a	rejected p	ump, me	eter, or of	ther liquid		
notice the sa	-	-		mer, location, and dation is made.	ite service rend	ered, and n	ny regis	tration ni	imber, and	l mail this	
7. FOR NEW attached tv	TECHNIO vo letters o	CIANS ON f recomme	LY. I ndatio	f I was not licensed on which were solic				istration	period, I	have	
8. Please en	close the	required	\$201	iee.							
Applicant's Signature					Tł	nis the	day o	f	,	20	
	The	e Standards E	ivision	does not consider crim	ninal history in tl	he issuance	of this lie	cense			
Optional Info Fax numb	ormation:			E-n	nail address:						
Form Number	NCA31 31641	Povision	4 2	Petrole 24 Aug 2021	um Device Techi	nician Appl	ication				
Document ID	51041	Revision	4 4	Auy 2021							