

WEIGHTS AND MEASURES ACT 1985

PART III

**Application for Certificate as
Keeper of Public Weighing or Measuring Equipment**

I (full name)

of (private address)

apply to be tested with a view to being granted a Certificate as required by Section 18 of the Weights and Measures Act 1985.

Name and Address of
Present Employer:

Address at which test is
required to be given:
(If different from above)

Most suitable time(s) for
Test (Monday – Friday;
9.30 am – 4 pm):
Work phone number:

Description of equipment: Make:
On which test is desired:

Type of Indications: Digital – Steelyard – Chart/dial - other

Signature of Applicant _____

To be returned to
Trading Standards
Regulatory Services
Brent Civic Centre
Engineers Way
Wembley, HA9 0FJ
Phone 020 8937 5555 Fax: 020 8937 5544

FOR OFFICE USE ONLY

Date received:

Date of Test:

Examiner:

Result of Test:

Certificate No. _____ Date issued _____