

Nebraska Department of Agriculture
 Food Safety and Consumer Protection
 Weights and Measures
 P.O. Box 94757
 Lincoln, NE 68509
 402-471-3422

PUMP AND METER IN SERVICE REPORT
By Registered Service Company

Name _____ Phone _____

NTEP CC # _____ Address _____ City _____ State _____

CUSTOMER					CUSTOMER PHONE					
ADDRESS (Device Location)				CITY			STATE		ZIP CODE	
Device Serial Number										
Manufacturer										
Model #										
Type of Fuel										
Totalizer Reading: End/Beginning										
Totalizer Seal #										
Cubic Inch Error:	a. Fast									
	b. Slow									
Total Gallons Pumped										
Prover Size (gallons)										
Interlock (on Pumps)										
Anti Drain Valve										

WORK REQUIRED TO PLACE IN SERVICE:

 Date Placed in Service

 Serviceman's Signature

 Registration No.

 Customer's Signature