

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 _____ Email _____
 Phone _____ Address _____ City _____ State _____

CUSTOMER		CUSTOMER EMAIL			CUSTOMER PHONE	
ADDRESS (Device Location)				CITY		STATE
						ZIP CODE
Device Serial Number						
Manufacturer						
Model #						
Type of Fuel						
Seal #						
Cubic Inch Error:	a. Fast					
	b. Slow					
CC #						
Prover Size (gallons)						
Prover Serial #						
Prover Cert. Date						

WORK REQUIRED TO PLACE IN SERVICE:

 Date Placed in Service Serviceman's Signature Registration No. Customer's Signature