

INSTRUCTIONS FOR FILLING THE FORM:

(i) Complete this form; Submit SEPERATE form for different class of standards; and
(ii) 'SAVE AS PDF' and Email to laboratory@mbie.govt.nz; and
(iii) Print out your form and send it along with your standards .

NAME AND ADDRESS FOR REPORTING

Address (standards stored):

Date Submitted:

Date Required:

Contact Person:

Phone No:

Email:

BILLING DETAILS FOR INVOICE

Legal name of the organisation:

Postal Address:

PO Number:

Email:

TYPE OF STANDARDS

Please tick appropriate box(es)

Mass

Submit SEPERATE form for different class of standards

Volume

Length

Permission to Adjust

☐ MPE

☐ Actual Value

REASON FOR TESTING

Please tick appropriate box(es)

☐ Annual Verification

☐ Brand New Standard

☐ Damaged/Repaired☐ Other (Specify):

TRADING STANDARDS USE ONLY

Date received:

Date finished:

Report No:

Number of worksheets attached:

Condition of Standards on receipt:

Equipment Used: *Tick appropriate box(es)*

1500 kg ≤ Weighing Capacity < 20 kg	20 kg ≤ Weighing Capacity < 5000 g	5000 g ≤ Weighing Capacity < 200 g	200 g ≤ Weighing Capacity < 20 g	20 g ≤ Weighing Capacity ≤ 1 mg
KD 1500 ☐ 150-IGH ☐	XPE32 ☐	XP 5003S ☐	XP 205/XPR 205 ☐	CC21 ☐
XPE2003 ☐ XK 155 ☐	XPE26003LC ☐	XPR 5003SC ☐		XPE26C ☐

Examined by:

Date:

Calculations checked by:

Date: