



Colorado Department of Labor and Employment
 Division of Oil and Public Safety - Weights and Measures Section
 633 17th Street, Suite 500
 Denver, CO 80202-3610

Phone: 303-318-8505
 Fax: 303-318-8488
 Email: cdle_oil_inspection@state.co.us
 Web: www.colorado.gov/ops

Company Application to Adjust and Seal Retail Motor Fuel Meters in Colorado

(Revised 8/11/2016)

Submit this completed form and the items listed below to the Division of Oil and Public Safety (OPS) within 7 days via email (Subject: RSA) using the information above.

- Documentation of proving can certification from a state metrology laboratory
- A legible copy of the company's seal (for new applicants only)
- Signed and notarized individual application for each person listed below
- Signed [Requirements for the Inspection and Calibration of Motor Fuel Devices](#) form for each person listed below

Application Type: New Renewal

Applicant Information

Company Name:			
Mailing Address:		City/State/ZIP:	
Contact Name:		Title:	
Contact Email Address:		Contact Phone Number:	

List all other states in which the company is authorized to adjust retail meters.

List all manufacturers that have authorized the company to calibrate and adjust its retail meters.

Has any state or manufacturer ever rescinded its authorization to allow the company to calibrate and adjust its retail meters?

Yes No

If the answer is yes, provide details here.

List all employees and their serial numbers designated by company to adjust and seal retail meters. Attach a completed [Individual Application to Adjust and Seal Retail Motor Fuel Meters in Colorado](#) form for each person listed.

Notarized Applicant Certification

The undersigned certifies to each of the following.

1. I am the appropriate person to sign this application form on behalf of the applicant company.
2. I have read the document entitled [Requirements for Adjusting and Sealing Retail Meters in Colorado](#) and I agree to abide by and to enforce all provisions of this document.
3. Each employee named above is qualified to adjust and seal retail meters.
4. Documentation exists to verify the licensing or certification by other states or meter manufacturers identified on both the Company's and on each Individual's Application. I will provide this document to the OPS upon request.
5. Should any person employed by this company leave this employment, I will require that person to turn in the company's seal.
6. Only those company employees authorized by the OPS will adjust and seal meters.
7. Only N.I.S.T.-compliant equipment authorized by the OPS and certified by a state metrology laboratory will be used to calibrate and adjust meters.
8. I understand that misrepresentation of any information in this application, knowing it to be false, or failure to abide by the [Requirements for the Inspection and Calibration of Motor Fuel Devices](#) may result in the company above-named losing its authorization to calibrate, adjust and seal retail meters in Colorado.

Name:		Title:	
Signature:		Date:	

Subscribed and sworn to before me in _____ County, State of _____, this _____ day of _____, 20_____.

My commission expires: _____

Notary Public signature: _____