

VERMONT AGENCY OF AGRICULTURE, FOOD & MARKETS
116 STATE STREET
MONTPELIER, VT 05620-2901
(802) 828-2436

APPLICATION FOR DEALER OR REPAIRMAN REGISTRATION

_____ New Application

_____ Renewal Application

_____ Dealer
Registration (To sell, buy, exchange or
trade weighing or measuring
devices in Vermont.)

_____ Repairman
Registration (To install, service, repair, or
or recondition commercial
weighing or measuring devices in
Vermont.)

NAME AND ADDRESS OF APPLICANT:

NAME AND ADDRESS OF EMPLOYER:

Telephone # _____

Telephone # _____

I am a dealer for, and/or am qualified to adjust, repair and/or install devices as indicated below:

- | | | |
|--|---|---|
| <input type="checkbox"/> Counter & Small Scales | <input type="checkbox"/> Gasoline & Oil Pumps | <input type="checkbox"/> Taxi Meters |
| <input type="checkbox"/> Platform & Dormant Scales | <input type="checkbox"/> Vehicle Tank Meters | <input type="checkbox"/> Other Devices - list below |
| <input type="checkbox"/> Heavy Duty Scales | <input type="checkbox"/> LP Gas Meters | _____ |
| <input type="checkbox"/> Monorail & Meat Beam Scales | <input type="checkbox"/> Change of Register (Printer) | |
| | <u>Only</u> No Registration for Calibration | |

List trade names of commercial devices you sell: _____

DIES OF HAND SEAL TO BE REGISTERED: Registration Number _____ Initials If Used _____

I hereby agree that I will comply with N.B.S. Handbook 44, and all amendments thereto, and the Vermont Law covering this Dealer/Repairman's Registration.

Signature of Applicant _____ Date _____

INSTRUCTIONS

NOTE: Registration is required annually and expires on June 30 each year, unless suspended or revoked.

1. Fill in all information requested, **including the back of this form**. If self-employed so indicate. **Application must be signed and include Social Security or Federal Identification number.**
2. Check appropriate box for New or Renewal, and for the type of registration you require. **If you are both a dealer and a repairman, you may have a combination Dealer/Repairman's Registration for one fee of \$25.00.**
3. Fill in your registration number. **(If you do not have a number call (802) 828-2436, and a registration number will be assigned to you; it is your responsibility to purchase a die for your hand seal with that number.)** (Dealers do not need a hand seal, if they do not repair or install devices; Bulk Tank dealers and repairmen do not need a hand seal.)
4. Repairmen put an "X" beside the devices you are qualified to install and repair. Dealer's put an "X" beside the type of devices you sell.
5. **INCLUDE THE FOLLOWING ITEMS WITH THIS APPLICATION, OR IT CANNOT BE PROCESSED.**

Repairman Registration: * \$25.00 Registration Fee
* Sample of security seal used on devices following installation or repair.
* Copy of certificate showing that your weight kit or liquid test measure has been tested for accuracy and approved.

Dealer's Registration: * \$25.00 Registration Fee

To order hand seals, you may contact: United Seal Co. at 614-443-7633.

REQUIREMENT OF THE VERMONT DEPARTMENT OF TAXES

PLEASE COMPLETE THIS FORM AS PART OF THE APPLICATION

By law (32 V.S.A. Section 3113), no agency of the State may renew a license or other authority to conduct a trade or business (including a license to practice a profession) unless the person or business first certifies, under the pains and penalties of perjury, that he or she is in good standing with the Department of Taxes. A person is in good standing if no taxes are due, if the liability for any tax that may be due is on appeal, if the taxpayer is in compliance with a payment plan approved by the Commissioner of Taxes, or if the licensing authority determines that immediate payment of taxes due and payable would pose an unreasonable hardship.

The maximum penalty for perjury is fifteen (15) years in prison, a \$10,000 fine or both.

CERTIFICATION OF COMPLIANCE WITH 32 V.S.A. SECTION 3113

I hereby certify, under the pains and penalties of perjury, that I AM IN GOOD STANDING with respect to, or in full compliance with a plan approved by the Commissioner of Taxes to pay, any and all taxes due the State of Vermont as of the date of this application.

SIGNATURE: _____

SOCIAL SECURITY OR FEDERAL I.D. NUMBER: _____

DATE: _____

IF YOU ARE NOT IN GOOD STANDING AT THIS TIME, you may do one of the following three things:

- (1) Discontinue this registration or renewal application.
- (2) Arrange with the Vermont Department of Taxes to bring yourself into good standing through a payment plan approved by the Commissioner.
- (3) Seek a determination from the issuing agency that immediate payment of taxes due and payable would impose an unreasonable hardship.

If you desire to continue this application, you should complete the statement below.

ALTERNATE CERTIFICATION

I am not in good standing with the Department of Taxes at this time and will take one of the following steps:

_____ (a) I will arrange with the Department of Taxes to bring myself into good standing.

_____ (b) I will seek a determination from the issuing agency that immediate payment of taxes due and payable would impose an unreasonable hardship.

SIGNATURE: _____

SOCIAL SECURITY OR FEDERAL I.D. NUMBER: _____

DATE: _____

Arrangements to achieve good standing should be made by contacting:

William Hayden
Director of Operations
Vermont Department of Taxes
Montpelier, VT 05602
Telephone: (802) 828-2524