



**CITY OF DANBURY  
CONSUMER PROTECTION  
Weights and Measures  
(203) 796-8094**

(Rev 07/12)

**ANNUAL APPLICATION FOR REGISTRATION OF WEIGHING AND MEASURING DEVICES**

- \* **All spaces must be completed** - please print or type.
- \* Application fees are non-refundable.
- \* Multiple locations need to file separate applications and payments for each location.
- \* This application must be accompanied by a check or money order (NO CASH) for the appropriate amount, made payable to: **City of Danbury Consumer Protection**

**Mail To:** **City of Danbury - Consumer Protection**  
**Attn: Finance Dept.**  
**155 Deer Hill Avenue**  
**Danbury, CT 06810**

Business Trade Name:			Federal ID or Soc. Sec No.	
Business Street Address (Location of Business)	City	State	Zip Code	Business Telephone Number
Corporation Name (If Applicable)			Billing Address	
Applicant's Name			Applicant's Title	

DEVICE TYPE	FEE PER UNIT	NO. UNITS	TOTAL AMOUNT	DEVICE TYPE	FEE PER UNIT	NO. UNITS	TOTAL AMOUNT
Scale 0 TO 50 lbs. In capacity	\$ 35.00			Truck Petroleum Meter	\$ 70.00		
Scale OVER 50 lbs. In capacity	\$140.00			Taxi Meter	\$ 35.00		
Retail Petroleum Dispenser Meter	\$ 35.00						
<b>TOTAL AMOUNT DUE</b>							

I certify that I am authorized to exercise principal authority in the State of Connecticut on behalf of the above applicant for the registration of these weighing and measuring devices. I also subscribe and affirm under the penalties of perjury, that the statements made in this application have been examined by me and to the best of my knowledge and belief are true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

<b>***FOR OFFICE USE ONLY***</b>						
Notes:			Approved By:	Approval Date:	Registration Expires:	New Registration #
Inspection Dates:			Inspected By:	Fee Due:	Balance Due:	Current Registration #
New License	Addition of Devices	Name Change	Renewal Application	<b>Date Collected:</b>	<b>Fee Collected</b>	<b>Check or MO #</b>