

 Central Bureau of Weights and Measures/ Branch Bureau of Weights and Measures	Notifying Form for Requesting Certificate of Business Operation of Manufacture, Import, Sale or Repair of Measuring Instruments, and Providing Service of Weighing	For Competent Official Notifying Form No..... Date of Receipt..... Receiver.....
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A. Submission of Notifying Form

To.....

I request a certificate of the business operation under the Measurement Act, B.E. 2542 (1999) as follows:

Name of Person Who Notifies.....

Place of Business Operation Located at No....., Village No....., Alley/Lane..... Road.....,
Sub-district/Sub-area....., District/Area....., Province....., Postal Code.....,
Telephone....., Facsimile.....

Having Intention to Proceed to

Be Business Operator of Manufacture Import Sale Repair
 Providing Service of Weighing

Category Weighing Machine Volume Measuring Tool Measurer

Type

Information and Documents or Evidence Supporting Notification

(1) Number of Factory Operation Permit (For Manufacturer)

(2) Number of House Registration of Person Who Notifies (In Case of Person Who Notifies being Ordinary Person)
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(3) Number of House Registration of Place of Business Operation.....

(4) Name and Registration Number of Juristic Person (In Case of Person Who Notifies being Juristic Person)
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Copy of Report on Result of Inspection of Accuracy of Measurement Standard and List of Tools and Equipment
(As for Manufacturer, Importer, Repairer)

Copy of Evidence Indicating Ownership or Possession Right of Place Used as Place of Business Operation or Letter of
Consent to Use Building

Power of Attorney (If any) together with Specifying Identification Numbers of Grantor and Grantee

Letter of Consent to Allow Competent Official to Access to Information under (1) – (4) for Benefit of Inspection

I hereby certify that the facts specified in this notifying form, supporting information and documents or evidence above are correct and true in all respects.

(Affixing of Juristic Person's Seal)

(Signed).....Person Who Notifies

(.....)

Date.....Month.....B.E.

B. Consideration of Competent Official

Opinion.....
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(Signed).....
(.....)
Rank.....
Date.....Month.....B.E.

Opinion.....
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(Signed).....
(.....)
Rank.....
Date.....Month.....B.E.