

Application for Inspection for Providing Verification of Measuring Instrument Under Measurement Act, B.E. 2542 (1999) and as amended

For Competent Official
Application No
Receiving Date
Receiver

Branch Bureau of Weights and Measures	and	d as amended		Receiver		
_		Submission of App	lication			
To I hereby submit an application for the inspection for providing the verification of the measuring instrument under						
the Measurement Act, B.E. 2542 (1999) and as amended, as follows:						
Information Supporting Application						
Name of Applicant						
Doing Business of ☐ Manufacturing ☐ Importing ☐ Selling ☐ Repairing Measuring Instrument						
Certificate of Business Operation No, Verification Mark,						
In Case of Import, Importing the measuring instrument into the Kingdom on DateMonthB.EB.E.						
Release Order No, No. of Identity/ Registration No. of Juristic Person, Domicile/Place of Business Operation						
Located at No, Village No	, Alley/Lane	, Road	, Su	ıb-district/ Sub-area,		
District/Area	Province	, Postal Code	,	Telephone,		
Facsimile,	E-mail					
In Case of Granting Power (If Any) Name –Surnameas Appointee Telephoneas						
Information of Owner/Possessor (In Case of Submitting Application on Behalf of Owner/Possessor)						
Name of Owner/Possessor			Dom	nicile/Place of Business Operation of		
Owner/Possessor Located at No, Village No, Alley/Lane, Road,						
Sub-district/ Sub-area	, District/Area	, Provii	nce	, Postal Code,		
Telephone	, Facsimile	, E-mail				
Having Intention to						
inspect for providing \square initial verification \square subsequent verification of measuring instruments having details, as follows (in						
the case where there is not enough space to fill out information, additional documents can be attached)						
Instrument/Type		Capacity	Number	Total		
haraby raquest a competent o	fficial to inspect for	providing the verificat	ion of moss	uving instruments O at the office		
hereby request a competent official to inspect for providing the verification of measuring instruments \square at the office (the Central Bureau or the Branch Bureau) \square outside the office in the case of outside the office because of being						
the measuring instrument \square fixed at the place \square difficult to be moved \square many instruments, the place of installed measuring						
instrument/the place of operation located at No, Village No, Alley/Lane, Road,						
Sub-district/ Sub-area, Province, Province, Postal Code,						
Telephone, Facsimile, E-mail, E-mail						
wish to use the tools or equipment of the Central Bureau/the Branch Bureau of Weights and Measures (the fee shall be						
in accordance with the Ministerial Regulation)						
do not wish to use the tools or equipment of the Central Bureau/the Branch Bureau of Weights and Measures						
in the case of the inspection unit for providing the verification being an inspector of measuring instrument, please specify						
the name of the inspection unit						

Documents or Evidence	Supporting Application	
a power of attorney (if any) together with the copies of	the identity card of an appointor	and an appointee which are
certified correct copy		
I hereby certify that the facts as specified in the a correct and true in all respects.	pplication and supporting docum	nents or evidence above are
(a juristic person's seal to be stamped)	(Signed)	
	()
	Date Month	B.E