



DEAWARE DEPARTMENT OF AGRICULTURE
 PLANT INDUSTRIES SECTION
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APPLICATION - COMMERCIAL GRAIN ELEVATOR

APPLICANT:

Business:		Date:	
Address:		Phone:	
Location:		Fax:	
City/State:		County:	

Contact Person:		or	
e-mail:			

SCALE DATA:

	MAKE/MODEL	SERIAL NUMBER
1		
2		
3		

GRAIN TESTING EQUIPMENT:

	MAKE/MODEL	SERIAL NUMBER
CHARTS		
TEST WEIGHT		
SHAKER		
DOCKAGE TESTER		
DIVIDER		
PROBE		
OTHER		
OTHER		

MOISTURE METER:

	MAKE/MODEL	SERIAL NUMBER	MAKE/MODEL	SERIAL NUMBER
1			9	
2			10	
3			11	
4			12	
5			13	
6			14	
7			15	
8			16	

OTHER TESTING EQUIPMENT:

