

CITY OF PHILADELPHIA – DEPARTMENT OF LICENSES AND INSPECTIONS

WHEN COMPLETED MAIL TO:



# SCALES AND SCANNERS

## FEE - \$25.00

DEPARTMENT OF LICENSES AND INSPECTIONS  
CUSTOMER CARE UNIT  
PUBLIC SERVICE CONCOURSE  
1401 JOHN F KENNEDY BLVD.  
PHILADELPHIA, PA 19102

For additional information call 311 or 215-686-8686

USE A CHECK OR MONEY ORDER PAYABLE TO "CITY OF PHILADELPHIA"

**1. LICENSE NUMBER (For Office Use Only)**

### LICENSEE INFORMATION

**2. NAME OF LICENSEE (BUSINESS or OWNER)**

**3. PRIMARY CONTACT PERSON**

**4. DAYTIME PHONE NUMBER**

**5. EVENING PHONE NUMBER**

**6. E-MAIL ADDRESS**

**7. COMMERCIAL ACTIVITY LICENSE NUMBER**

**8. BUSINESS INCOME & RECEIPTS TAX NUMBER**

**9. LOCATION ADDRESS**

**10. MAILING ADDRESS (PO Boxes Are Not Acceptable)**

Select all of the following that apply to your business:

- Electronic Scanners Systems
- Vehicle tank/Load Rack Meters
- Scales – 0 to 1,000 pounds
- Scales – 1,001 to 10,000 pounds
- Scales – Over 10,000

*I certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make false statements herein I am subject to the possible revocation of any licenses issued as a result of my false application and such penalties as prescribed by law.*

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_