



VILLAGE OF HALES CORNERS

5635 S. New Berlin Road
Hales Corners, WI 53130
(414) 529-6161

APPLICATION FOR WEIGHTS & MEASURES LICENSE

License Fee: \$10.00 + Per Device Fee

License # _____

In accordance with Municipal Code Chapter 432 the following questions must be answered completely and legibly.

Applicants Last Name:	Applicants First Name:	Applicants M.I.:
Applicants Home Address:		
City, State, Zip:	Phone Number:	Email:
Business Name:		
Business Address:		
City, State, Zip:	Business Phone:	Business Email:
Business Mailing Address (if different):		
Business Type: <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Corporation		
If Business is a Partnership:		
Partner Last Name:	Partner First Name:	Partner M.I.:
Partner Home Address:		
If Business is a LLC or Corp:		
President Name:	Home Address:	
Vice President Name:	Home Address:	
Secretary Name:	Home Address:	
Treasurer Name:	Home Address:	

Agent Name:	Home Address:
Director/Manager Name:	Home Address:

Type of Devices: Indicate the number of each type of device.

Type of Scale	Number of Devices
Computing Scales/Counter Scales	
Hopper/Tower/Livestock Scales	
Portable Platform Scales	
Prepackage Scale	
Vehicle Scales	
Other Scales	

Total Scales _____ X \$15.00/Scale = _____

Type of Meter	Number of Devices
LMD (Gasoline Pumps)	
LPG Meters	
Vehicle Tank Meters	
Other Meters	

Total Meters _____ X \$10.00/Meter = _____

TOTAL FEE = \$10.00 + _____ + _____ = _____
(Scale Fees) (Meter Fees)

The undersigned hereby applies for a license to maintain and operate commercial weighing or measuring devices during the license year ending **June 30, 2026**.

Said business to be conducted under the provisions of Chapter 98 of the Wisconsin Statutes, as amended, and other laws governing such operation or maintenance of said devices.

I certify that I am familiar with the laws, ordinances and regulations pertaining to this license, and I hereby agree if granted said license, to obey all provisions of said laws.

Signature of Applicant: _____ **Dated:** _____