

SERVICE CERTIFICATION

I am a Qualified Scale Serviceman, registered with the Georgia Department of Agriculture, to install, service and/or repair weighing and measuring devices. On this date I have Reconditioned Repaired Installed this device. I certify that I used certified test weights and tested the device as shown in the following report.

Owner No.	Name <u>Macon Iron</u>	Address <u>LP</u>	
City <u>Macon</u>	County <u>Bibb</u>	Zip Code	Kind of Ind. <u>Electronic</u>
Serial No. of Ind. <u>LP</u>	Make of Ind. <u>Rice Lake</u>	Capacity <u>60 TON</u>	Min. Grad. <u>20 lb</u>
Serial No. of Scale	Make of Scale	Bal. Conditioner	Printer <input checked="" type="checkbox"/>
			Pit Depth <u>4</u>
			Platform Size <u>60 x 10</u>
			Owner or Agent's Signature

TEST RESULTS - INCREASING LOAD TEST

SR AT ZERO LOAD				LBS.	SR AT MAXIMUM LOAD				LBS.
TEST WEIGHTS					TEST WEIGHTS				
Position	Balance	Pounds	Scale Indication	Error	Position	Balance	Pounds	Scale Indication	Error
		0					0		
<u>Sec#1</u>		<u>3000</u>	<u>3000</u>	<u>0</u>	<u>Sec#2</u>		<u>21000</u>	<u>21010</u>	<u>+10</u>
		<u>7000</u>	<u>7000</u>		<u>#3</u>		<u>21000</u>	<u>21010</u>	<u>+10</u>
		<u>11000</u>	<u>11000</u>		<u>#4</u>		<u>21000</u>	<u>21010</u>	<u>+10</u>
		<u>15000</u>	<u>15000</u>						
		<u>18000</u>	<u>18000</u>						
		<u>21000</u>	<u>21000</u>	<u>0</u>					

STRAIN LOAD TEST

	LEFT TO RIGHT		RIGHT TO LEFT	
	Section 1	Section 2	Section 4	Section 3
Indicate Weight of Empty Truck	<u>26240</u>			
Amount of Test Weights Added	<u>21000</u>			
Scale Indication, Truck Plus Weights	<u>47240</u>			
Error on Test Weights Added				

REMARKS: Scale checked good

This device has been adjusted to within NBS HANDBOOK 44 specifications and tolerances and rules and regulations of the State of Georgia.

All weighing and measuring devices repaired or installed must be reported to Fuel and Measures Division at the above address.

REJECTION TAG ENCLOSED

Service Company S & S SCALE SERVICE, INC.

Number 50

Serviceman Rep Smith

Number

FOR W&M OFFICE USE ONLY			
INPUT CODE 701	702	703	DISP. CODE <u>8</u> INSPECTION NO. _____
TEAM NO. _____	TYPE REPAIR <u>3</u>		

Date 6-26-07

SERVICE CERTIFICATION

I am a Qualified Scale Serviceman, registered with the Georgia Department of Agriculture, to install, service and/or repair weighing and measuring devices. On this date I have Reconditioned Repaired Installed this device. I certify that I used certified test weights and tested the device as shown in the following report.

Owner No.	Name <u>MACON IRON</u>	Address <u>7th St</u>	
City <u>MACON</u>	County <u>BIBB</u>	Zip Code	Kind of Ind. <u>GSE</u>
Serial No. of Ind.	Make of Ind. <u>GSE</u>	Capacity <u>60 TON</u>	Min. Grad. <u>20</u>
Serial No. of Scale	Make of Scale <u>Thurman</u>	Bal. Conditioner	Printer <input checked="" type="checkbox"/>
			Pit Depth <u>-</u>
			Platform Size <u>60x10</u>
			Owner or Agent's Signature

TEST RESULTS - INCREASING LOAD TEST

SR AT ZERO LOAD				LBS.	SR AT MAXIMUM LOAD				LBS.
TEST WEIGHTS					TEST WEIGHTS				
Position	Balance	Pounds	Scale Indication	Error	Position	Balance	Pounds	Scale Indication	Error
		0					0		
<u>Sec #</u>		<u>3000</u>	<u>3000</u>		<u>Sec #2</u>		<u>21000</u>	<u>21000</u>	
		<u>7000</u>	<u>7000</u>		<u>#3</u>		<u>21000</u>	<u>21020</u>	<u>+20</u>
		<u>11000</u>	<u>11000</u>						
		<u>15000</u>	<u>15000</u>						
		<u>18000</u>	<u>18000</u>						
		<u>21000</u>	<u>21000</u>						

STRAIN LOAD TEST

	LEFT TO RIGHT		RIGHT TO LEFT	
	Section 1	Section 2	Section 4	Section 3
Indicate Weight of Empty Truck	<u>26460</u>			
Amount of Test Weights Added	<u>21000</u>			
Scale Indication, Truck Plus Weights	<u>47460</u>			
Error on Test Weights Added	<u>0</u>			

REMARKS: Adjust for 40lbs at Section #2. Scale Checked good

This device has been adjusted to within NBS HANDBOOK 44 specifications and tolerances and rules and regulations of the State of Georgia.

All weighing and measuring devices repaired or installed must be reported to Fuel and Measures Division at the above address.

REJECTION TAG ENCLOSED

Service Company S & S SCALE SERVICE, INC.

Number 55

Serviceman Rep Smith

Number

FOR W&M OFFICE USE ONLY			
INPUT CODE	701	702	703
DISP. CODE	<u>8</u>		
INSPECTION NO.	_____		
TEAM NO.	_____		
TYPE REPAIR	<u>3</u>		