

2320 SOUTH DUPONT HIGHWAY
DOVER, DELAWARE 19901
AGRICULTURE.DELAWARE.GOV



TELEPHONE: (302) 698-4500
TOLL FREE: (800) 282-8685
FAX: (302) 697-6287

DELAWARE WEIGHMASTER LICENSE INITIAL APPLICATION

Application is hereby made for a Weighmaster License under Title 6, Chapter 51, Delaware Code as amended 1987.

Email to Valerie.Forbes@delaware.gov or Mail to: DE Dept. of Agriculture, Weights and Measures, 2320 S. DuPont Hwy, Dover, DE 19901

APPLICANT NAME: _____ DATE: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIPCODE: _____

APPLICANT PHONE: _____ CELL PHONE: _____ EMAIL: _____

BUSINESS NAME: _____

MAILING ADDRESS: _____ CITY: _____ STATE: _____ ZIPCODE: _____

BUSINESS PHONE: _____ FAX: _____ EMAIL: _____

YEARS OF WEIGHMASTER EXPERIENCE: _____ YEARS WITH THIS COMPANY: _____

As evidence of good moral character, secure the endorsement of three persons to the following certification:

“The undersigned is acquainted with the applicant, and I hereby certify that I know him/her to be of good moral character.”

SIGNATURE

NAME

ADDRESS

SIGNATURE	NAME	ADDRESS

I have read the conditions under which a Weighmaster License is issued and agree to comply with all requirements contained therein.

Signature of Applicant

NOTE: License Fee is \$25 for three calendar years. Payment or proof of payment must accompany application.

Please make Check or Money Order Payable to: Delaware Department of Agriculture Weights and Measures **OR** Pay Online with our Credit Card Online Payment Portal at: <https://agriculture.delaware.gov/weights-measures/> or pay in person at the address above.