

COMMONWEALTH OF PENNSYLVANIA
MILK MARKETING BOARD
2301 NORTH CAMERON STREET- ROOM 110
HARRISBURG PA 17110-9408
(717) 787-4194
www.mmb.pa.gov

**NEW APPLICATION FOR
WEIGHER & SAMPLER CERTIFICATE**

JANUARY 1, _____ through DECEMBER 31, _____

FEE \$55.00

Have you previously been issued a certificate by the Milk Marketing Board as a Weigher/Sampler? Y / N

If yes, please provide the most recent year _____ and license number _____

Please check one: _____ I haul milk from farms. _____ I take samples but do not haul milk _____

NAME: _____
LAST FIRST MIDDLE

STREET ADDRESS _____

CITY _____ **COUNTY** _____ **STATE** _____

ZIP _____ **PHONE** () _____

EMAIL: _____

LIST Name, Address, and License number of *each dairy or hauling company* by whom you are or will be employed. If employed by more than one, please list all. Use back of this page if necessary. Indicate if you are self-employed and provide your haulers' license number.

NAME	ADDRESS	LICENSE #
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby affirm that this information is true and correct to the best of my knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa. C.S. Section 4904 (relating to unsworn falsification to authorities).

SIGNATURE _____ **DATE** _____

NO CASH PAYMENTS ACCEPTED

MAKE CHECKS OR MONEY ORDER PAYABLE TO: COMMONWEALTH OF PENNSYLVANIA.

Note: There is a \$20.00 service charge for any returned checks, and you may be subject to interest and penalties

TO BE COMPLETED BY PMMB or PDA STAFF W/S TEST SCORE: _____

DATE _____ **STAFF SIGNATURE:** _____

FOR PMMB OFFICE USE ONLY:	
LICENSE NUMBER: _____	Date License mailed: _____
<i>Comments:</i> _____	Check Date: _____ Check Number: _____
_____	Amount: _____ M.O. Date: _____
_____	M.O. Number: _____
Exam fee= \$30.00 + Application \$25.00 = \$55.00	