

	Permit Number Issued:
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**Illinois Department of Agriculture
Bureau of Weights and Measures**

P.O. Box 19281
Springfield, IL 62794-9281
217/785-8301 • TDD 217/524-6858 • Fax 217/524-7801

Vehicle Scale Installation Variance Request Form

Name of Vehicle Scale Installation Permit Applicant:

Name of Scale Owner:

Physical Address of Vehicle Scale:

City	State : IL	Zip
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Phone () -	E-Mail
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Attach the following to this form:

1. The specific variance request you are making.
2. Reason/justification for requesting variance.
3. a. A letter from the scale manufacturer that evaluates and approves of the requested variance
b. A letter from a utility company, county, city or township with proof of property boundaries, setbacks, underground utilities.
4. Any additional relevant information

Should the variance be approved, the Department may impose any conditions on the variance, including an alternative construction, maintenance requirements, increased testing or other conditions it considers necessary. The variance request must include all materials listed in 1 – 4 above.

Variance requests will not be processed without all the signatures and requested information.

Print Applicant Name -	<u>Date</u>
Signature of Applicant -	

<input type="checkbox"/> Variance blueprints attached	_____ Print scale manufacturer and contact name.
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Print scale owner name	Scale owner signature	Date
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Print Registered Service Person name	Registered Service Person signature	Date

Variance Request Approved <input type="checkbox"/>	Variance Request Reviewed by:	Date
Variance Request Not Approved <input type="checkbox"/>		

Special conditions imposed: