

**INSTRUCTIONS FOR  
DEVICE REGISTRATION CERTIFICATE APPLICATION  
FORM NO. RWM-700**

In order to obtain a Device Registration Certificate, you must submit a complete signed application along with the appropriate fees. The license will be issued to the name appearing under Section B of this application. Businesses operating, scales, and LPG meters, must register these devices with the Department annually. Complete this application if you are registering commercial devices at your business for the first time. You may use this form to register more than one device type.

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**SECTION A**

**1. TYPE OF APPLICATION**

Check the box that identifies the application type.

- A new business application is an application for a business that has not held a TDA license or is a recently established business.
- A change of ownership application is an application where a business has been acquired from a previous owner or is an established business changing type (see below).
- A change in location is an application where the registered devices are being moved to a new physical location. If the most recent license account number is known please indicate in space provided.

**2. BUSINESS TYPE**

Check the box that identifies your type of business. Once submitted, this information cannot be changed. If you have to change in your business type, a new application will be required.

**3. CLIENT INFORMATION**

This information will be used to generate your license. Enter the full legal business name as it is registered. If applicable, also enter a Doing-Business-As (DBA) name. For in state businesses a Comptroller Taxpayer ID is required. For out of state businesses and Federal ID is required.

The applicant must provide either a driver license number or a state-issued ID number.

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**SECTION B**

**1. RESPONSIBLE PERSON INSTRUCTIONS** (see form)

**2. RESPONSIBLE OFFICER, PARTNER, MANAGER, OR OWNER**

Indicate name of person responsible for the business. Enter contact information.

**3. RESPONSIBLE PERSON MAILING ADDRESS**

Enter mailing address for indicated responsible person. If a web address is available for company please provide (optional).

**NOTE: The Person to Contact, named by the business in Section C of this form, is the preferred signatory of this application. That person may be the Responsible Person.**

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## SECTION C

### 1. PERSON TO CONTACT FOR LICENSE-RELATED MATTERS

Enter the name of a designated person, along with that person's contact information, who can discuss and answer questions about license-related issues.

**NOTE: The Person to Contact, named by the business, is the preferred signatory of this application. That person may be the Responsible Person.**

All correspondence, licenses, and other documents will be sent to the Person to Contact at the email address listed below. Approximately 30 – 45 days in advance of the expiration date of the license/certificate, the contact employee will receive a renewal invoice via email that will include a login ID and password to access TDA's internet website. The contact employee will then be able to conduct business related to their assigned license(s) online, including viewing their licenses, making changes to their company information, and renewing their licenses. A business can appoint one contact person to manage online all of the company's licenses.

### 2. MAILING ADDRESS

Enter the address at which the Person to Contact receives general correspondence, where applicable.

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## SECTION D

### 1. FACILITY INFORMATION

Enter facility name.

### 2. PHYSICAL ADDRESS OF LOCATION OF LICENSEE, LICENSED ACTIVITIES or EQUIPMENT

Enter the actual physical street address of the licensee, licensed activities or the equipment, including directions to this location if the address is difficult to locate. Please do not enter a P.O. Box. This information will assist TDA inspectors in locating your business in the event that an inspection is needed.

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## SECTION E

### 1. OUT-OF-STATE APPLICANTS ONLY

If the address provided in section A is out of state, resident agent information is required before a license can be issued.

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## **SECTION F**

### **1. DEVICE CLASSIFICATION**

Indicate in the space provided the total number of devices in commercial use at your business. To calculate the total fee, multiply the total number of devices by the fee per device. Calculate the total fee for each device type and indicate the sum of all total fees in the space marked Total Fees Due. No refunds can be made for devices removed from commercial use. If the number of devices at your business decreases, notify TDA by mail within 10 days and the changes will be made on your next renewal statement.

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## **SECTION G**

**NOTE: Texas Department of Agriculture only accepts checks, cashier's checks, or money orders.**

### **1. PAYMENT**

Check method of payment. Enter check number or money order number. See fee table for payment information in Section F of form, total fees due. Enter amount remitted.

Please remit to: Texas Department of Agriculture, P.O. Box 12076, Austin, TX. 78711-2076.

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## **SECTION H**

### **1. SIGNATURE**

After reading the summary, print and sign your name, and date the form. Your signature here indicates that you have read the summary and that you are aware of your responsibilities regarding the issuance of the requested license.

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## **SECTION I**

**NOTE: An incomplete application may result in processing delays.**

### **1. CHECKLIST**

Check all boxes to verify you have completed the application process and attached/enclosed the necessary items (e.g., payment, reports, schedules, labels, etc).