

COMPREHENSIVE TEST REPORT

Customer Name	G&R Cold Forge		SERVICE TICKET/ WORK ORDER #	SV1207130379			
Unit Location	SHIPPING G1		Customer #	N/A			
Mfg/Model #	MT VIPER SD30		Serial #	2574369-7HE			
Capacity	75	Unit of Measure	16	Number of Divisions	15000	Division Size	0.005 16

The weighing equipment noted on this report has been tested and/or calibrated in compliance with METTLER TOLEDO procedure VP0023IR, and NIST Handbook 44 and/or Canada Standard where applicable.

SHIFT TEST

Weights Applied: 30 16

Max. Permissible Error: ± 4 (d)


Position	As Found	As Left
1	30.010	30.000
2	30.010	30.000
3	30.010	30.000
4	30.010	30.000

<input checked="" type="checkbox"/>	In tolerance with out adjustment
<input type="checkbox"/>	In tolerance after adjustment
<input type="checkbox"/>	Out of tolerance
<input type="checkbox"/>	Shift test not applicable

Test Load	Weights Applied	As Found	Error: Plus or Minus (d)	Allowable Error (d)	As Left	Within Tolerance? Y/N
Zero	0 16	0.000	0	0	0.000	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	10 16	10.005	+1	± 2	10.000	Y <input type="checkbox"/> N <input type="checkbox"/>
	30 16	30.010	+2	± 4	30.000	Y <input type="checkbox"/> N <input type="checkbox"/>
	50 16	50.020	+4	± 6	50.000	Y <input type="checkbox"/> N <input type="checkbox"/>
Max. Load*	75 16	75.025	+5	± 8	75.000	Y <input type="checkbox"/> N <input type="checkbox"/>
	50 16	50.020	+4	± 6	50.000	Y <input type="checkbox"/> N <input type="checkbox"/>
	30 16	30.010	+2	± 4	30.000	Y <input type="checkbox"/> N <input type="checkbox"/>
	10 16	10.005	+1	± 2	10.000	Y <input type="checkbox"/> N <input type="checkbox"/>
Zero	0 16	0.000	0	± 1	0.000	Y <input type="checkbox"/> N <input type="checkbox"/>

* Maximum load used in test

No decreasing load applicable

REMARKS:			
WEIGHT IDENTIFICATION NUMBERS:		KIT 87914 W11	
Weight Traceability Certificate #:	1359P58 B59689	CUSTOMER CALIBRATION DATE:	SEP. 6 2012
		CUSTOMER CALIBRATION DUE:	MAR/2013
PERFORMED BY:	KARL MIKES		
	Technician Name (Please print)		Technician Signature
Where Applicable:	Customer Name (Please print)		Customer Signature

COMPREHENSIVE TEST REPORT

Customer Name	G & R Cold Forging			SERVICE TICKET/ WORK ORDER #	SV1207130379		
Unit Location	SHIPPING G1			Customer #	W 1919		
Mfg/Model #	MT 2256			Serial #	1118906-7BE		
Capacity	5000	Unit of Measure	16	Number of Divisions	5000	Division Size	116

The weighing equipment noted on this report has been tested and/or calibrated in compliance with METTLER TOLEDO procedure VPO023IR, and NIST Handbook 44 and/or Canada Standard where applicable.

SHIFT TEST


Position	As Found	As Left
1	500	500
2	500	500
3	500	500
4	500	500

Weights Applied: 500 16
 Max. Permissible Error: ± 2 (d)

<input checked="" type="checkbox"/>	In tolerance without adjustment
<input type="checkbox"/>	In tolerance after adjustment
<input type="checkbox"/>	Out of tolerance
<input type="checkbox"/>	Shift test not applicable

Test Load	Weights Applied	As Found	Error: Plus or Minus (d)	Allowable Error (d)	As Left	Within Tolerance? Y/N
Zero	0 16	0	0	0	0	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
						Y <input type="checkbox"/> N <input type="checkbox"/>
	500 16	500	0	± 1	500	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
						Y <input type="checkbox"/> N <input type="checkbox"/>
Max. Load*	1000 16	1000	0	± 2	1000	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
						Y <input type="checkbox"/> N <input type="checkbox"/>
	500 16	500	0	± 1	500	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
						Y <input type="checkbox"/> N <input type="checkbox"/>
Zero	0 16	0	0	± 1	0	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>

- * Maximum load used in test
- No decreasing load applicable

REMARKS:			
WEIGHT IDENTIFICATION NUMBERS:		W11 - W30	
Weight Traceability Certificate #:	1359699	CUSTOMER CALIBRATION DATE:	SEP 6, 2012
		CUSTOMER CALIBRATION DUE:	MAR / 2013
PERFORMED BY:	KARE MIKES		
	Technician Name (Please print)		Technician Signature
Where Applicable:	Customer Name (Please print)		Customer Signature

COMPREHENSIVE TEST REPORT

Customer Name	G & R Cold Foreinc		SERVICE TICKET/ WORK ORDER #	SV1207130379			
Unit Location	PLANT G1		Customer #	N/A			
Mfg/Model #	DIGIWEIGH DWP 121		Serial #	82464A07070085			
Capacity	400	Unit of Measure	16	Number of Divisions	20000	Division Size	0.02 16

The weighing equipment noted on this report has been tested and/or calibrated in compliance with METTLER TOLEDO procedure VPO023IR, and NIST Handbook 44 and/or Canada Standard where applicable.

SHIFT TEST

Position	As Found	As Left
1	20.00	20.00
2	20.00	20.00
3	20.00	20.00
4	20.00	20.00


Weights Applied: 20 16
 Max. Permissible Error: ± 2(d)

<input checked="" type="checkbox"/>	In tolerance without adjustment
<input type="checkbox"/>	In tolerance after adjustment
<input type="checkbox"/>	Out of tolerance
<input type="checkbox"/>	Shift test not applicable

Test Load	Weights Applied	As Found	Error: Plus or Minus (d)	Allowable Error (d)	As Left	Within Tolerance? Y/N
Zero	0 16	0.00	0	0	0.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	10 16	10.00	0	± 1	10.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	20 16	20.00	0	± 2	20.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	50 16	50.02	+1	± 3	50.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Max. Load*	100 16	100.04	+2	± 4	100.02	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	50 16	50.02	+1	± 3	50.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	20 16	20.00	0	± 2	20.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
	10 16	10.00	0	± 1	10.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
Zero	0 16	0.00	0	± 1	0.00	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>

- * Maximum load used in test
- No decreasing load applicable

REMARKS:

WEIGHT IDENTIFICATION NUMBERS:	W12, W16 KIT # 87914		
Weight Traceability Certificate #:	13596991359858	CUSTOMER CALIBRATION DATE:	SEPT 6, 2012
		CUSTOMER CALIBRATION DUE:	MAR / 2013
PERFORMED BY:	KARL MILLER		
	Technician Name (Please print)		Technician Signature
Where Applicable:	Customer Name (Please print)		Customer Signature