Form TM 6 Request for Verification
Verification

DEPARTMENT OF NATIONAL TRADE MEASUREMENT & STANDARDS
TRADE MEASUREMENT DIVISION

I request a verification under the National and Trade Measurement Decree 1989 of the following instruments located at

_____

_____

_____

Principal _____

Signature of Applicant

Repairer's Name:_____

_____

Licence # _____

Date: _____

			Inspectors Use Only		
Particulars of Appliances	**Form A Number**	**S or R**	**Fees Code**	**Amount $**	**Cents ¢**
Vat 12.5%					
TOTAL					

Certifying Officer:_____ ***Signature*:**_____
Date:_____