



MINISTRY OF COMMERCE, INDUSTRY AND TOURISM

TYPE ΣΤ

S/N

THE WEIGHTS AND MEASURES REGULATIONS OF 1981 TO 2000
(Regulation 8)

APPLICATION FOR REGISTRATION AS A REPAIRER
OF WEIGHTS AND MEASURES

Applicant's full name:

Identification Number

Address:

P.O.Box: Town/village Telephone:

Types of weights or measures for which registration is requested:

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I declare that-

- (α) I know the articles of the Measures and Weights Laws from 1974 to 2000 and the Regulations that were issued in virtue of these Laws, referred to the types of weights or measures for which registration is requested'
- (β) I am a technician obliged by contract and I have the required training and experience, such as to enable me to execute repairs related to the above mentioned types of weights and measures, according to the Weights and Measures Regulations of 1981 to 2000.

Date:

Signature: