OMB Control No. 0581-0308

U.S. DEPARTMENT OF AGRICULTURE AGRICULTURAL MARKETING SERVICE FAIR TRADE PRACTICES PROGRAM PACKERS AND STOCKYARDS DIVISION				Vehicl	e Scal	e Test Re		1 Pag	ge
2a. Test Agency	3a. Scale Owner								
b. Address				b. Physical Address of Scale					
				c. City d. State					
e. Phone f. E-mail			4. Name and Address of Poultry Processor, Packer, or Dealer using Scale						
						j	,	,	2
5. Indicator Manu	facturer 6. S	Serial Number		7. Model Number 8. Type of Indicator Beam Dial Digital					
9. Primary Catego	ory Weighed		10 Tv	pe of System	∐ Веа	am 📙 Dia	I ∐ D1;	gital	
Poultry [Feed Livest		Str	aight Truss [ells 6 Cells
11. Test Date (mm/dd/yyyy) 12. Previous Test Date (mm/dd			mm/dd/yyyy)	13. Scale Capacity Lbs 14. Minimum Division Lbs			15. I	Platform Size X	
			Т	Test Data		<u> </u>		<u> </u>	
	16. Tes	st Data				16. 7	Гest Data		
Position (16a)	Weight (16b)	Scale Indication (lbs)	(4.6.)		-	Scale Indication (lb		/	
Balance	(100)	(16c)	(16d)	(16a)		(16b)	(16c)	(16d)
						17. Test loa	d bearing	points	T-
					2	3		4	5
			C4	-	9	8		7	6
				n-Load Test			Diah	t to Left	
		Section 1	Left to Righ Section 2	Section 3	Se	Section 4		ion 5	Section 6
18 Indicated Weight of Empty Truck		Section 1	Section 2	Section 3			Sect	1011 5	Section 0
19 Amount of Tes									
20 Scale Indicatio	n, Truck Plus Weigh	nts							
21 Error on Test V	•								
22 Test Results Marking approved indicates that the errors indicated requirements specified in National Institute of Standa 44 as required in the regulations (9 CFR 201.71)								Appro Conde Reject Other	emned ted
23 Remarks (If s	serial number has o	changed, please note	here)				, ⊆		
24 Receipt of Ro	eport Acknowledg	ed (Signature):		25 Scale Inspect	or (Sign	nature):			

Response is required in order to assure that tests and inspections have been made on scales to show their accuracy so that live poultry, feed or livestock may be weighed (9 CFR 201.72). Information held confidential (9 CFR 201.96)

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0581-0308. The time required to complete this information collection is estimated to average .75 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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Instructions to Complete Vehicle Scale Test Report Form PSD 4400

The scale inspector or person testing the scale must complete Form PSD 4400 to document the scale tests required by the Packers and Stockyards Division.

Submit the completed form to the PSD regional office that covers your area. The areas covered by each regional office are listed below the regional office's address.

For questions about Form PSD 4400, or additional copies of the form, please contact the regional office that covers your area, as listed below. Forms and instructions are also located on PSD's website at https://www.ams.usda.gov/resources/forms.

Regional Offices of the Packers and Stockyards Division Agricultural Marketing Service, Fair Trade Practices Program					
Eastern Regional Office	Midwestern Regional Office	Western Regional Office			
	210 Walnut Street, Room 317	3950 Lewiston St., Suite 200			
Atlanta, GA 30303-3308	Des Moines, IA 50309-2110	Aurora, CO 80011-1556			
Telephone: (404) 562-5840	Telephone: (515) 323-2579	Telephone: (303) 375-4240			
FAX: (404) 562-5848	FAX: (515) 323-2590	FAX: (303) 371-4609			
e-mail:	E-mail:	E-mail:			
PSDAtlantaGA@ams.usda.gov	PSDDesMoinesIA@ams.usda.gov	PSDDenverCO@ams.usda.gov			
Areas Covered	Areas Covered	Areas Covered			
AL, AR, CT, DC, DE, FL, GA,	IA, IL, IN, KY, MI, MN, MO,	AK, AZ, CA, CO, HI, ID, KS,			
LA, MA, MD, ME, MS, NC,	ND, NE, OH, SD, WI	MT, NM, NV, OK, OR, TX,			
NH, NJ, NY, PA, PR, RI, SC,		UT, WA, WY			
TN, VA, VT, WV					

Line No.	Subject	Instruction
1	Page Number	The page number is normally 1 of 1. If additional space is needed, number pages identifying the current page number and the total number of pages. For example, page 2 of 3.
2 a through f	Scale Test Agency	Enter the name, address, city, state, phone number, and e-mail address of the scale test agency.
3 a through d	Scale Owner and Location	Enter name of firm that owns or operates the scale and the full address of scale being tested, including street address, city, and state.
4	Processor, Packer, or Dealer Name	Enter name and address of poultry processor, packer, or dealer using scale.
5	Indicator Manufacturer	Enter the name of the manufacturer of the beam, dial or digital indicator

Line No.	Subject	Instruction
6	Serial Number	Enter the serial number of the indicator being tested. If the
		serial number has changed since the last test, show the previous
7	N 1 1 N 1	serial number in the remarks.
7	Model Number	Enter the model number from the manufacturer's ID plate.
8	Type of Indicator	Check the appropriate box to indicate the type of indicator.
9	Category Weighed	Check the appropriate box to indicate the category weighed
10	Type of System	Check the appropriate boxes to indicate the type or design of
11	Test Date	the lever system or load cell. Enter the date you tested the scale (mm/dd/yyyy).
12	Previous Test Date	Enter the date the scale was previously tested (mm/dd/yyyy).
13	Scale Capacity	Enter the total scale capacity (maximum nominal capacity), in
14	Minimum Division	Enter minimum graduation. For example, 10 lbs., or 20 lbs.
15	Platform Size	Enter length and width of platform, in feet.
16	Test Data	It is important that you conduct the test in accordance with
a		Handbook 44 procedures and that you fill out the test report
through		in the sequence and in the manner you conduct the test. If you
d		begin a test and determine that the scale is defective, and then
		correct the defective condition, record this in sequence on the
		test report. Enter each of the following in the respective
		columns:
		(a) The location or position on the platform (left to right looking from the scale indicator) used for the test.
		(b) The total amount of test weights on the scale, in pounds.
		(c) The indicated or printed weight amount in pounds
		(d) Subtract column c from column b; enter the
		amount, in pounds, as the error.
17	Test load bearing	-
17	points	Test pattern prescribed in Handbook 44 N.1.3.3.2. Enter
1.0		indicated error in pounds.
18	Empty Truck Weight	Enter the indicated weight of empty truck in pounds.
19	Test Weights	Enter the amount of test weights added in pounds.
20	Scale Indication	Enter the scale indication, truck plus weights in pounds.
21	Error on Test Test Results	Enter the error on test weights added in pounds.
22		The scale inspector or person(s) testing the scale enters the test results.
23	Remarks	Use the "Remarks" section to enter needed explanations,
		comments, adjustments you made, recommendations
		needed to correct a defective condition, etc. If the serial
24	Receipt Signature	The owner or responsible person must sign the form
	-100 Tp v 21 Silator	acknowledging receipt of a copy of the test report form.
25	Inspector Signature	The scale inspector or person(s) testing the scale must sign
		the test report form.
		the test report form.