

AMUSEMENT SUPPLEMENT APPLICATION

(Include Acord Application)

Mailing Address.			Location Addre			
Is applicant properly license Number of active owners/of						
Number of active owners/of: Estimated annual: Payro	ll (excl. ow	ner)	Receipts		Subs Costs _	
Does applicant subcontract v				Yes □ No		
If yes, are certificates of insurance required?						Yes □ No
Do subcontractors name the applicant as additional insured?						Yes □ No
Does applicant operate on a seasonal basis?						Yes □ No
Are signs clearly posted with	n rules of c	onduct, height	requirements, and	size limi	itations? 🗆 🗅	Yes □ No
Is there a refreshment stand?	If yes, red	ceipts: \$				Yes □ No
	Sc	hedule of amuser	nent devices or rides	S	Maximum	Attendant/
Name & Type	Age	Manufacturer	Description	ı	Operating Speed	Employee Present
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
						☐ Yes ☐ No
Please detail any "yes" answ			ions below.			
Are attendants on duty during all operating times?						Yes □ No
Are maintenance logs kept on each device or ride?						
Are any devices or rides more If yes, list radius of operations						Yes □ No
Are devices and rides regularly inspected?						Yes □ No
If yes, are these inspections	performed	by properly lic	ensed entities whe	re requir	ed? □ \	Yes □ No
Does applicant have a training program for its employees? ☐ Yes ☐ No						
Any multi-level driving rang	ges?					Yes □ No
Any firework or pyrotechnic exposure?						Yes □ No
Any animal rides or animal exposure?						Yes □ No
Are any devices available for rent?						Yes □ No



Please list and explain devices:		
Does lease agreement contain hold ha	armless in applicant's favor?	\square Yes \square No
Details:		
Attach a copy of the lease agreemen	nt.	
application for insurance containing f	intent to defraud any insurance compandalse information, or conceals for the purcommits a fraudulent insurance act, whimplete the insurance transaction.	rpose of misleading, information
Applicant's Signature	Producer's Signature	Date