

Amusement Attraction Inspection Request Form

30 DAY NOTICE REQUIRED

Does the filing of this inspection request form provide the Commissioner with at least 30 days of advance notice of the need for INSPECTION as required by law? YES NO If no, you must provide a written explanation:

Forward Completed Form and Required Documentation To Below Address

IN ACCORDANCE WITH BUSINESS REGULATION ARTICLE, TITLE 3 AND COMAR 09.12.62, **EACH INDIVIDUAL OWNER IS RESPONSIBLE** FOR SUBMITTING THE REQUIRED AMUSEMENT RIDE INSPECTION INFORMATION FOR EACH PLAYING LOCATION.

Owner Identification

Name of Amusement Ride Company: Eastern Baptist Association			
Owner / Representative Name: Bruce C. Glisson			
Street Address: 1303 Snow Hill Road		City: Salisbury	
State: MD	Zip Code: 21804	Email: bglisson@allenmemorial.org	
Phone: 410-742-2659	Cell: 443-944-6157	Fax: 410-742-6748	
Signature of Owner/Authorized Representative:			

In making this request for inspection I affirm that all of the amusement attractions are covered by general liability insurance in accordance with Business Regulation Article Title 3 and that a certificate of insurance detailing the coverage was submitted to the Commissioner as required by COMAR 09.12.62

Inspection Requested for: Date Time

Location Information

Site Name:			
Site Address:			
County:	City:	Zip Code:	# of Rides:
Arrival Date:		Departure Date:	
Contact Person On Site (Sponsor):			Phone:

The information requested below is for scheduling purposes and must be completed. Inspections are prioritized based upon the required 30 day advance notice for the rides you identify. If after the Inspection Request is submitted there are changes in playing dates, location or if the rides will not be ready for inspection call 410-767-2178, also scan and send an amended Inspection Request Form to ARrequest@dllr.state.md.us , or fax to 410-333-7683.

Site Name: _____

If this is an inflatable ride,
is it 4 feet or over?

Maryland Registration Number	Ride Name	If this is an inflatable ride, is it 4 feet or over?	
13793	Star Spangled Slide	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
13794	Rainbow Slide	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
13795	Purple Castle w/Slide	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
13796	Blue Castle w/Slide	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Special Amusement Structures require an additional inspection by the Local Fire Marshall, contact the Local Fire Marshall directly If any of the above listed rides are defined as a Special Amusement Structure.