Pennsylvania Department of Agriculture
Bureau of Ride and Measurement Standards
Inspection Affidavit

For your convenience and to save time, this form may be completed on-line at http://pda.state.pa.us/amusementrides/Default.aspx. If you are unable to complete this on-line using your account, you can email, fax, or mail it to the Bureau.

This Form must be returned to: PA Department of Agriculture
Bureau of Ride and Measurement Standards
2301 North Cameron St, Harrisburg, PA 17110-9408
Phone: (717) 787-2291 Fax: (717) 783-4158
Email: RA-amusementrides@pa.gov

PA Owner ID	Date
Owner Name	Phone ( )
Permanent Address-Street/City/State/Zip	
Event Name	
Sponsor Contact	Phone ( )
Location of Inspection-Street/City/State/Zip	
Show Dates From	To

Item	PA Ride ID	Attraction Name (What is it registered as)	Inspection Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

Certification

I hereby certify that the facts contained in this report are true and correct to the best of my knowledge and information; and that I give this verification subject to the provisions of Section 16(B). The Amusement Ride Inspection Act, which provides a person who knowingly makes any false statement, representation of certification in any application, record report, plan or other document filed or required to be maintained pursuant to this Act commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine not exceeding $2,500 or a term of imprisonment not exceeding six months, or both.

Printed Name of the Qualified Inspector **Signature** **Inspector License #** **Date**

Printed Name and Title of Owner/Rep on site **Signature** **Date**