

Office Use Only

Paid _____	Check # _____	Date _____
Pass/Fail Date _____	Credits Earned _____	
License Sent Date _____	Exp Date _____	

This Form and payment 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

<p>Instructions: Complete every applicable section on this application or it will be returned. Resumes are not considered a substitute for complete answers. Application must be signed and dated at the bottom of this form for consideration.</p> <p>A check or money order payable to the Commonwealth of PA in the amount of \$50 per affiliation must accompany this application.</p> <p>Certification: <input type="checkbox"/> New <input type="checkbox"/> Renewal PA Inspector ID # _____</p>					
Last Name		First Name		MI	
Mailing Address					
City		State	Zip	County	
Home Phone ()	Work Phone ()	Date of Birth		Email	
Highest grade of school completed <input type="checkbox"/> High School Grad <input type="checkbox"/> Higher Level (indicate below) <input type="checkbox"/> Other (indicate below)					
Other schools or training (for example: trade, vocational, armed forces or business). Give for each: the name and location (city, state, zip code of school and dates attended)					
<p>Class of Certification applying for or renewing:</p> <input type="checkbox"/> Affiliated Qualified Inspector Level 1- All Limited Equipment (24 hours - every 3 years) <input type="checkbox"/> Affiliated Qualified Inspector Level 2- All Limited + Advanced Equipment (24 hours - every 3 years) <input type="checkbox"/> General Qualified Inspector - All Limited + Advanced Equipment (48 hours - every 3 years) Please note: A General Inspector can inspect for any company and may require additional documents with direct approval from the Department.			<p>Limited Affiliated Certification (16 hours – every 3 years)</p> <input type="checkbox"/> Water Attractions <input type="checkbox"/> Inflatable Amusement Attractions <input type="checkbox"/> Go Carts & Bumper Boats <input type="checkbox"/> Extreme Sports <input type="checkbox"/> Walk-through Attractions <input type="checkbox"/> Trackless Towed Attractions Please note: certification in more than one of these categories will classify you as an affiliated Qualified Inspector level 1 (24 hours – every 3 years).		
Company #1 Owner ID #		Name of Company #1 for whom you will be inspecting for			
Company #2 Owner ID #		Name of Company #2 for whom you will be inspecting for (additional \$50)			
Company #3 Owner ID #		Name of Company #3 for whom you will be inspecting for (additional \$50)			
What knowledge, training and experience do you possess that would qualify you for the inspector level you are applying for per TITLE 7. AGRICULTURE. § 139.9. Qualified Inspectors. (http://www.pacode.com/secure/data/007/chapter139/007_0139.pdf)					

Certification

I certify that there are no misrepresentations or false statements in this document. All representations in this application are made subject to the criminal penalties for unsworn falsification to authorities (Pennsylvania Crimes Code, 18 Pa. C.S.A. §4904) and 7 Pa Code §139.13 (c) which provides a person who knowingly makes any false statement, representation, or 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 to a term of imprisonment not exceeding six months, or both.

Print Name _____

Signature _____

Date _____