

Company Name: _____
 Address: _____ City, State, Zip: _____
 Owner: _____ Phone: _____ Email: _____
 Contact Person: _____ Phone: _____ Email: _____

Address of **FIRST** Site Location: _____
 Date of Operation (m/d/yyyy): _____ To (m/d/yyyy): _____
 Date of Arrival on Lot (m/d/yyyy): _____ Requested Inspection Date (m/d/yyyy): _____

Use additional sheets as necessary and attach hereto.

	Ride Name	# of Passengers	Major or Kiddie	Manufacturer	Serial No.	RPM	Fees
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

NOTE: Reverse Bungee is not permitted in Nebraska

Total Fee to be remitted at time of inspection: _____

Permit Fee = \$50.00 per unit. Mechanical Inspection Fee = \$130.00 per unit. Total fee per unit = \$180.00

Required to be submitted with this Permit Application Form:

- a. Non-Destructive Test Reports on rides that require NDT'S (48-1803);
- b. Nebraska Route of Events with locations and Dates (48-1814);
- c. List of Trained Ride Operators for Each Ride ;
- d. Written Policy for Ride Operation and Operator Training (Title 228 – Ch.40-003);
- e. Proof of Liability Insurance (If an event provides insurance each ride must be reinspected and permitted) (48-1806, Title 228 Ch.2- 005.

I certify the information provided is correct.

Printed Name and Title

Signature

Date