



## AMUSEMENT RIDE SAFETY INSPECTION REPORT

Missouri Division of Fire Safety  
Amusement Ride Safety Unit  
P.O. Box 844  
Jefferson City, MO 65102  
(573) 751-2263  
amusement@dfs.dps.mo.gov

| OWNER INFORMATION   |  |  |                          |
|---|--|--|--------------------------|
| OWNER NAME  |  |  | DATE OF INSPECTION       |
| BUSINESS NAME   |  | PHONE  |                          |
| ADDRESS   | CITY   | STATE  | ZIP                      |
| RIDE INFORMATION  |  |  |                          |
| RIDE NAME   |  | RIDE DESCRIPTION (EX: METAL ROLLER COASTER, CAROUSEL, ETC) |                          |
| MANUFACTURER  |  | MANUFACTURE DATE   |                          |
| SERIAL NO.  | CAPACITY   | RPM  | DATE OF LAST NDT TEST(S) |
| Satisfactory - S  |  | UnSatisfactory - XX  |                          |
| Explain orders below under REMARKS  |  |  |                          |
| <b>FUNDAMENTAL</b>  | <b>ENTRANCE &amp; EGRESS</b>   | <b>ELECTRICAL</b>  |                          |
| Upholstery / Seat Conditions  | Steps  | Portable Generator Grounded per NFPA                       |                          |
| Safety Restraints - Lap Bar, Seat Belts, Harness  | Ramps  | Midway Electrical Boxes - Guarding                         |                          |
| Tub / Seat Numbering  | Platforms  | Electrical Wiring Protected                                |                          |
| Tubs / Hazardous Projections / Conditions   | Fencing  | Electrical Disconnect for Ride                             |                          |
| Fiber Glass Conditions  | Warning Signs / Rider Restrictions   | Lighting Equipment Wiring & Secured                        |                          |
| Fire Extinguisher - NFPA 101  |  | Emergency Stop Switches                                    |                          |
| Ride Clearance of Obstructions  | <b>MECHANICAL</b>  |  |                          |
| Manufacturer's Manual   | Drive  | <b>STRUCTURAL</b>  |                          |
| Daily Inspection Log  | Sheaves  | Bracing  |                          |
| Maintenance Log   | Single Point Suspension  | Sweeps   |                          |
| Operator Training Program   | Guarding Moving Parts & Chains & Belts                                       | Blocking   |                          |
| Proper Operating Procedures when Observed   | Hydraulic System   | Gears  |                          |
| Dark Rides - per NFPA 101   | Lubrication  | Correct Grade of Bolts                                     |                          |
|   | Anti-Rollback Devices  | Fasteners, Safety Clips, R-Keys, Pins, Etc                 |                          |
|   | Brakes   | Wire Rope Inspection                                       |                          |
|   | Air Tank - requires Missouri Inspection Certificate if >5 cu. ft. or 38 gal. |  |                          |
| <b>OTHER</b>  |  |  |                          |
| Reviewed NDT Test Reports   |  |  |                          |
| <b>IN THE ABSENCE OF ASTM STANDARDS FOLLOW MANUFACTURER'S INSPECTION GUIDELINES</b>   |  |  |                          |
| <b>REMARKS:</b>   |  |  |                          |
|   |  |  |                          |
| <b>NOTE:</b> This is a general check list and is not intended to be "all inclusive". It is the responsibility of the inspector to perform the annual safety inspection per ASTM National Standards, Manufacturer's Inspections Guidelines and all Missouri laws, rules and regulations. I state that the above described amusement ride was inspected in accordance with required safety standards / guidelines and met these requirements/guidelines on the date of this inspection. |  |  |                          |
| SIGNATURE OF INSPECTOR  |  |  | DATE                     |
| PRINTED NAME AND TITLE OF INSPECTOR AND COMPANY   |  |  |                          |