

## LOUISIANA DEPARTMENT OF PUBLIC SAFETY PUBLIC SAFETY SERVICES

## OFFICE OF STATE FIRE MARSHAL

## **AMUSEMENT INFLATABLE / ATTRACTION RIDE REGISTRATION**

NOTE: La. R.S. 40:1484.4 requires the owner of an amusement ride, amusement attraction, and/or inflatable amusement device to register the devices with the Office of State Fire Marshal prior to being used in the state.

REASON FOR APPLICATION:									
☐ INITIAL (NEW) ☐	ANNUAL RENEWAL	OWNERSHIP CHANGE	☐ ADDRESS CHANGE						
AMUSEMENT DEVICE TYPE:									
☐ AMUSEMENT ATTRACTION	☐ CHECK IF DEVICE IS LOCATED AT FIXED / PERMANENT SITE	A AMUSEMENT RIDE INFLATABLE DEVI							
OWNER:	OSFM LICENSE NUMBER: EXPIRATION DATE: (IF APPLICABLE)								
ADDRESS:	CITY:	ST	TATE: ZIP:						
TELEPHONE:	FAX:	EMAIL ADDRESS:							
ACKNOWLEDGEMENT  The information entered on this application is true to the best of my knowledge and belief.  (NOTE: This application must be signed by the individual listed above. No stamped or preprinted signatures will be accepted.)									
SIGNA	•	DATE							
Please mail the completed application with the documentation and payment calculated below:  □ Certificate of Inspection from an OSFM licensed Third Party or Limited Third Party inspector. Certificate of Inspection shall not be dated earlier than 60 days prior to the date of submission of device [s] registration application).  □ Copy of general liability insurance (NOTE: Declaration page must list all devices that will be used in the state).  □ Initial application fees (Pursuant to La. R.S. 40:1484.18).									
NUMBER DEVICE	TVDE	OF DEVICE	TOTALS	3					
	Inflatable device(s) x \$100	.00 =							
	Child or "Kiddie" devices x	\$100.00 =							
	Adult amusement devices								
Replacement registration plate(s) x \$30.00 =									
TOTAL FEES DUE:									

## AMUSEMENT INFLATABLE / ATTRACTION RIDE REGISTRATION (CONTINUATION)

NAME OF LICENSED FIRM:	OSFM LICENSE NO:	

NAME OF INFLATABLE / ATTRACTION RIDE	INFLATABLE / KIDDIE / ADULT	MANUFACTURER	SERIAL NO.	YEAR BUILT	OSFM PLATE NO.	ANNUAL INSPECTION FORM ATTACHED?	
						☐ YES	□NO
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FOR ADDITIONAL DEVICES, COPY THIS PAGE AND COMPLETE