

State of New Jersey  
Department of Community Affairs  
Carnival/Amusement Rides  
P.O Box 816  
Trenton, New Jersey 08625

**APPLICATION FOR PERMIT REGISTRATION OF AMUSEMENT RIDE**

January 1, 20\_\_\_\_ To December 31, 20\_\_\_\_

Permit application will not be processed without type certification or individual approval number

Phone (609) 292-2097

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Company Name _____	Date _____
Trading As _____	Phone _____
Office Address _____	Cell _____
_____	Fax _____
NJ Service Address _____	Email _____
_____	
Owner Name _____	
Print	
Authorized Signature _____	Title _____

Location of rides if at permanent site:

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(If traveling carnival or rental-company, attach itinerary)

Request is made that a permit registration be issued to the owner identified above as required by N.J.S.A. 5:3-41. The following information must be submitted along with this application:

- ☐ Fee as per the following schedule (Make check payable to: Treasurer, State of NJ):
- |                      |        |
|----------------------|--------|
| Each Inflatable Ride | \$ 280 |
| Each Kiddie Ride     | \$ 280 |
| Each Major Ride      | \$ 560 |
| Each Super Ride      | \$ 840 |
- ☐ Required proof of insurance for a minimum of \$1,000,000 general liability as per N.J.A.C. 5:14A-2.9
- ☐ Type Certification or Individual Approval number
- ☐ Notification by manufacturer of ride serial number to be added to their Type Certification
- ☐ Certification of Fabrication and Testing **OR** Weld Integrity Certification for used rides  
(Not required for Inflatable Rides or Soft Play Units)
- ☐ NDT (Non-Destructive Testing) as required
- ☐ Manual for each ride (Operations, Maintenance and Set-Up Manuals)  
(Unless provided for Individual Approval Application by same applicant)
- ☐ Fixed site requirements as per N.J.A.C. 5:14A-2.13:  
(Not required for Inflatable Rides)
- Certification of Erection and Assembly
  - Certification of the Foundation by NJ licensed professional engineer
  - Certificate of Occupancy or Approval

LIST OF RIDES TO PERMIT:

Ride Name and Year Fabricated	NJ Serial #	Manufacturer Name	Ride Serial Number	Type Certification Or Individual Approval #

**OFFICE USE ONLY**

I.D. Number \_\_\_\_\_

DATE INSURANCE EXPIRES \_\_\_\_\_

Total Permit Fee: \_\_\_\_\_

Check Number: \_\_\_\_\_

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Record No. \_\_\_\_\_

Date Entered \_\_\_\_\_