State of New Jersey
Department of Community Affairs
Carnival/Amusement Rides
P.O. Box 816
Trenton, New Jersey 08625
Phone (609) 292-2097

## APPLICATION FOR INDIVIDUAL APPROVAL OF SOFT PLAY EQUIPMENT

THIS APPLICATION IS TO BE COMPLETED BY THE OWNER OF THE RIDE

Page 1 of 2

COMPANY NAME:	Phone: ( )
NJ SERVICE ADDRESS:	Cell: ( )
	Tax. ( )
OFFICE ADDRESS:	
CONTACT PERSON:	
RIDE NAME:	
RIDE MFG.	MODEL —
ASTM F1918-12-10.1.1, signed and s N.J.A.C. 5:14A –7;  Illustration and the lay out of the ride; A statement that the ride is in compliated \$280 application fee, MAKE CHECK PARTICLE STATES STATES AND STATES AN	F1918-12, Section 10 <b>OR</b> One set of design calculations as per sealed by a licensed professional engineer <b>OR</b> Compliance with sealed by a licensed professional engineer <b>OR</b> Compliance with ASTM F 1918-12  AYABLE TO: TREASURER, STATE OF N.J.  CHECK PAYABLE TO: TREASURER, STATE OF N.J.  OR RIDES WITH N.J. SERIAL NUMBER:  assembly manual, per ASTM F1918-12, Section 11; as safety requirements, per ASTM F1918-12, Section 12; arrictions;  AYABLE TO: TREASURER, STATE OF N.J.
Documents not marked as pr	oprietary shall be considered public record
SIGNATURE	TITLE
PRINT	DATE



Our Mission: To Assure Public Safety On All Amusement Rides