APPLICATION FOR AMENDED TYPE CERTIFICATION
THIS APPLICATION IS TO BE COMPLETED BY THE RIDE MANUFACTURER
Must have a Type Certification to complete this application

MANUFACTURER: ____________________________
RIDE NAME __________
CONTACT PERSON: ____________________________
MODEL __________
SERVICE ADDRESS: ____________________________
Phone: ( ) ______ - ______
OFFICE / MANUFACTURING ADDRESS: __________
Cell: ( ) ______ - ______
Fax: ( ) ______ - ______
TYPE CERTIFICATION NUMBER: __________
Email: ______________________
OTHER INTERESTED PARTY: __________

ENGINEERING REQUIREMENTS FOR AMENDED TYPE CERTIFICATION:

☐ A copy of the original Type Certification issued by the Department;
☐ All supplemental safety bulletins, safety alerts, or notifications issued following the issuance of the original type certification;
☐ One full set of drawings, designs, specifications, and other construction documents, signed and sealed by a licensed professional engineer, that demonstrate compliance with the design requirements of N.J.A.C. 5:14A-7, that comply with N.J.A.C. 5:14A-2.12, and are necessary for a full and complete review of the ride modification.
☐ The differences between the information submitted in support of the original type certification and that provided with the application for an amended type certification shall be clearly shown.
☐ The reason for the modifications;
☐ List of serial numbers that will be covered by this application;
☐ $280 application fee, MAKE CHECK PAYABLE TO: TREASURER, STATE OF N.J.
☐ Engineering review fee: One percent of the cost of modifications [minimum of $140 and maximum of $4196], MAKE CHECK PAYABLE TO: TREASURER, STATE OF N.J.

Documents not marked as proprietary shall be considered public record

SIGNATURE ____________________________ TITLE____________________
PRINT ____________________________ DATE __________________

ES-90D(01/20)

Our mission: To Assure Public Safety on all Amusement Rides