



Robert L. Quinn
Commissioner of Safety

NEW HAMPSHIRE DEPARTMENT OF SAFETY
DIVISION OF FIRE SAFETY
TRAMWAY & AMUSEMENT RIDE SAFETY
33 HAZEN DR., CONCORD, NH 03305
Telephone: (603) 223-4289 Fax: (603) 223-4295

CARNIVAL-AMUSEMENT DEVICE REGISTRATION FORM

NAME (OWNER/OPERATOR): _____

Permanent Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____

NAME OF CARNIVAL-AMUSEMENT COMPANY:

Address if different from above: _____

City: _____ State: _____ Zip: _____ Phone: _____

EQUIPMENT:

Name & Make of Device

Serial Number

NH Identification
Number

Decal Number
Issued

Fee
(\$130.00 Per Device)

Name & Make of Device	Serial Number	NH Identification Number	Decal Number Issued	Fee (\$130.00 Per Device)

NOTE: Where a device bears no Serial number (i.e., it is home made or made from composite parts) a number shall be assigned to that device by the owner or insurer so that it is possible to make a positive identification of the device. New Hampshire assigned identification numbers shall be permanently affixed to each device.

Signature of Applicant

Date

FOR OFFICIAL USE ONLY: Check # _____ Amount of Check: \$ _____