



Florida Department of Agriculture and Consumer Services
 Division of Consumer Services/Bureau of Fair Rides Inspection

FAIR RIDES OWNER'S DAILY INSPECTION REPORT (WATER PARK)

**NICOLE "NIKKI" FRIED
 COMMISSIONER**

Section 616.242(16), Florida Statutes, Rule 5J-18.0012, Florida Administrative
 Code Phone: 1-800-435-7352; Fax: (850) 410-3797
 FairRides@FDACS.gov

COMPANY _____ RIDE NAME _____ USAID OR SERIAL # _____

INSTRUCTIONS: Use this form for daily inspections of each amusement ride as required by Section 616.242(16), Florida Statutes. When completing an inspection requirement, place a check mark "√" in the space provided to indicate the inspection has taken place and there are no deficiencies. If a deficiency is found, place "X" in the space provided. On the back of this form, record the date the deficiency was found, the deficiency, corrective action and signature and date of person taking corrective action. If an inspection item is not applicable to this ride, put "N" in the space provided. Inspections shall also include all criteria listed on the pre-opening checklists submitted to the department.

Inspection dates (MM/DD/YY)																				
Insp. Requirements:																				
Walkways/Stairs																				
Fencing/Guarding																				
Braces/Supports																				
Signs																				
Electrical																				
Structure Integrity																				
Surface of slide																				
Pool Condition																				
Water markings																				
Wave Pool:																				
Buoy line																				
Emergency stop																				
Grates																				
Inspected By Signature																				

DEFICIENCY LOG *

Document deficiency noted with "X" on front in this table

Date deficiency noted	Deficiency	Corrective Action	Signature and date

* Draw horizontal lines to separate entries. Make copies of this form as required.