Pennsylvania Department of Agriculture Bureau of Ride and Measurement Standards Inspection Affidavit

For your convenience and to save time, this form may be completed on-line at http://www.uda.pa.gov/amusementrides/. If you are unable to complete this on-line using your account, you can email, fax, or mail it to the Bureau.

This Form must be returned to: PA Department of Agriculture

PA Owner ID
Business Name

Bureau of Ride and Measurement Standards 2301 North Cameron St, Harrisburg, PA 17110-9408

Phone: (717) 787-2291 Fax: (717) 783-4158

Email: RA-amusementrides@pa.gov

Permanent Address-Street/City/State/Zip 1050 Edge wood Rd. Lower Makefield, fa.						
Event Name PermanenT						
Sponsor Contact Bub Copein Phone (245) 520-8960						
Location of Inspection-Street/City/State/Zip /						
Same as a howe.						
Show D	ates From	May 25, 20	022 TO JUNE 2	5,2022		
Item	PA Ride ID		me (What is it registered as)	Inspection Date		
1	8173	Water S	lide	MO/25, 2022		
2				/ /		
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10			, No year to be seen that describe surface to deep to the gas to see (Anni 1888) (Anni 1888), (Anni 1889) (Anni 1889)			
Certification I hereby certify that the facts contained in this report are true and correct to the best of my knowledge and information; and that I give this verification subject to the provisions of Section 16(B). The Amusement Ride Inspection Act, which provides a person who knowingly makes any false statement, representation of certification in any application, record report, plan or other document filed or required to be maintained pursuant to this Act commits a misdemeanor of the third degree and shall, upon conviction, be sentenced to pay a fine not exceeding \$2,500 or a term of imprisonment not exceeding six months, or both. Printed Name of the Qualified Inspector Signature Inspector License # Date May 25 22 Printed Name and Title of Owner/Rep on site Signature Date						
rinced Ma	merand Title of Owner/	rehousite sidu	arai e	U Date		

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Bureau of Ride and Measurement Standards

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Email: RA-amusementrides@pa.gov

PA Owner ID	Date May 24	2022				
Business Name Lower Makefield Townsh	Phone ()					
Permanent Address-Street/City/State/Zip 1050 Ecgewood Ed Lower Makefield fa.						
1050 Ecgewood						
Lower Wake	etield ta.					
Event Name permanent						
Sponsor Contact Bob Copen Phone (215) 520 - 8960						
Location of Inspection-Street/City/State/Zip						
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	CONTROL OF THE SECOND					
Show Dates From May 24, 2012	TO May 24 2027	TO SECRETARISE FOR SECRETARISE SEC. SOCIETY SECRETARISE SECTION SECRETARISE SECRETARISMENT				
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Certification	. F- U - b - F - I - I - I					
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exceeding six months, or both.						
2 7/1	@ ca//	101/0-02				
Printed Name of the Qualified Inspector Signature Inspector License # / Date						
A Signature of the Galantica property () Sign						
Kopert Copers W	No	424 2028				
Printed Name and Title of Owner/Rep on site Signature	A CONTRACTOR OF THE CONTRACTOR	Date				