

**APPLICATION FOR AMUSEMENT RIDES AND DEVICES  
COUNTY OF AMELIA  
P.O. BOX A  
AMELIA, VA 23002**

Date of Application: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Owner/Operator: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tax Map – Section \_\_\_\_\_ Lot \_\_\_\_\_ Acreage \_\_\_\_\_ State Route \_\_\_\_\_

**Please Provide the Following:**

**Name and Brief Description of Amusement Device**

**Serial or Identification Number**

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_

\_\_\_\_\_

7. \_\_\_\_\_

\_\_\_\_\_

8. \_\_\_\_\_

\_\_\_\_\_

9. \_\_\_\_\_

\_\_\_\_\_

10. \_\_\_\_\_

\_\_\_\_\_

**Proof of Liability Insurance**

**Length of time that amusement device(s) will be in operation.**

\_\_\_\_\_

**I the applicant certify that I am legally authorized to make this application and that all operations will be executed in accordance with the applicable provisions of the Virginia Amusement Device Regulations as enforced by the Uniform Statewide Building Code and the Ordinances of Amelia County.**

\_\_\_\_\_  
**Applicant**

**Date:** \_\_\_\_\_