Division of Labor and Industry
1100 N. Eutaw St. Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID#	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
B	H4963	9 / 11 / 13	9:00	2:00	5

Ride Location	City	County	Certificate Expiration Date
Frederick Fair	Frederick	Frederick	10 / 12 / 13

AR Number	Ride Name	Insp. Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Attendant	Work Orders	Certificate Number Tab
4569	Mini Jet	PY	# Found														
			# Corrected														
5576	Play Stition	PY	# Found														
			# Corrected														
10099	Monkey Mayhem	PY	# Found														
			# Corrected														
7153	Slide	PY	# Found														
			# Corrected														
4303	Ballon Ride	PY	# Found														
			# Corrected														
4569	Mini Jet	PY	# Found														
			# Corrected														
			# Found														
			# Corrected														
			# Found														
			# Corrected														
			# Found														
			# Corrected														
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			# Corrected														
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			# Found														
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Comments

Inspector's Signature	Date	Owner's Signature	Date
James R Harper	9/11/13		

√

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Backyard INflatables	G6500	6 /14 /13			

Ride Location	City	County	Certificate Expiration Date
797 E. Patrick St	Frederick	FR	6 /14/14

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
5890	Rock n Rail Jousting	I	# Vio. Found		1								1			2	402872
			# Corrected		0								0				
6570	Spong Bob 5in1	I	# Vio. Found		1								1			2	402873
			# Corrected		0								0				
7749	Modular Slide	I	# Vio. Found		1								1			2	402874
			# Corrected		0								0				
5245	Club House IN	I	# Vio. Found		1								1			2	402875
			# Corrected		0								0				
			# Vio. Found														
			# Corrected														
			# Vio. Found														
			# Corrected														
			# Vio. Found														
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			# Corrected														

Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]	6-14-13	[signature]	6-14-13

Email Contact Information:
Inspection Requests and general Correspondance: ARrequest@dllr.state.md.us Incidents, Accidents, Complaints: ARdirect@dllr.state.md.us

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Amusement Ride Safety Order Form

State of Maryland
Division of Labor and Industry
Amusement Ride Safety Inspection
1100 N. Eutaw St. Baltimore, MD 21201
Office 410-767-2178 / Fax 410-333-7721

OWNER:	INSPECTOR'S ID:	DATE:
Backyard Inflatables	G6500	6-14-13

RIDE LOCATION:	CITY:	COUNTY:
797 E. Patrick st	Frederick	FR

	NAME OF AMUSEMENT RIDE	AR Number
1	Rockin N Roll Jousting	5890
2	Spong bob 5 in 1	6570
3	Modular slide	7749
4	Club House Inflatable	5245
5		
6		

category	corrected	Safety Order Description	1	2	3	4	5	6
CA	X	Provide to have the end of the stakes covered to prevent a tripping hazard. Per Comar	X	X	X	X		
GE	X	Provide to have documentation on site for all operaters and attendents. Per Comar.	X	X	X	X		

Following an inspection of the above referenced equipment, ***safety violations*** were identified. It is your obligation to correct the above deficiencies. ***Failure to comply with this notice will result in seal out of the equipment and prohibition of operation. Under the authority of the Commissioner of Labor and Industry.***

Inspector Signature, Authorized Representative of Commissioner of Labor and Industry.	DATE:
Chad T Lacy	6-14-13
Signature of Owner or Authorized Agent Acknowledging Receipt of Order.	**DATE:**
[signature]	6-14-13

Division of Labor and Industry
1100 N. Eutaw St. Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID#	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Reithoffer Shows	P0288	9/12/13			

Ride Location	City	County	Certificate Expiration Date
E Patrick St	Frederick	FK	10/12/13

AR Number	Ride Name	Insp. Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Attendant	Work Orders	Certificate Number Tab
10601	Stinger	I	# Found													0	404290
			# Corrected														
3336	Tornado	PY	# Found													—	—
			# Corrected														
1835	SuperCat | Arctic Blast	PY	# Found													—	—
			# Corrected														
5982	Freak Out	PY	# Found													—	—
			# Corrected														
5102	Choo Charlie	I	# Found													0	404291
			# Corrected														
			# Found														
			# Corrected														
			# Found														
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Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]	9/12/13	[signature]	

Division of Labor and Industry
1100 N. Eutaw St. Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID#	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
S+S Amusement	P0288	9/12/13			

Ride Location	City	County	Certificate Expiration Date
E Patrick St	Frederick	FK	10/12/13

AR Number	Ride Name	Insp. Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Attendant	Work Orders	Certificate Number Tab
10199	Zipper	I	# Found													0	404295
			# Corrected														
4352	Wipe Out	I	# Found													0	404292
			# Corrected														
			# Found														
			# Corrected														
			# Found														
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Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]	9/12/13	[signature]	

Division of Labor and Industry 1100 N. Eutaw St. Balto. Md 21201	# Amusement Ride Report	Amusement Ride Safety Inspection Unit Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID#	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Reithoffer Shows	P0288	9 / 11 / 13			

Ride Location	City	County	Certificate Expiration Date
E. Patrick St	Frederick	FK	10 / 11 / 13

AR Number	Ride Name	Insp. Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Attendant	Work Orders	Certificate Number Tab
6634	Wild Mouse	I	# Found													0	404292
			# Corrected														
4908	Tornado	I	# Found													0	404293
			# Corrected														
4542	Pharoah's Fury	I	# Found													0	404294
			# Corrected														
			# Found														
			# Corrected														
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Comments

Pharoah - R Keys on step

Inspector's Signature	Date	Owner's Signature	Date
[signature]	9/11/13	[signature]	

Division of Labor and Industry
1100 N. Eutaw St. Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID#	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Reithoffer Shows	P0288	9 / 13 / 13			

Ride Location	City	County	Certificate Expiration Date
E Patrick St	Frederick	FK	10 / 13 / 13

AR Number	Ride Name	Insp. Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Attendant	Work Orders	Certificate Number Tab
3336	Tornado	I	# Found													0	404286
			# Corrected														
1835	Arctic Blast	I	# Found													0	404287
			# Corrected														
5982	Freak Out	I	# Found													0	404288
			# Corrected														
3086	Dutch Wheel	I	# Found													0	404289
			# Corrected														
			# Found														
			# Corrected														
			# Found														
			# Corrected														
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Comments

Inspector's Signature [signature] Date 9/13/13 Owner's Signature [signature] Date

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Berthoffer shows	F5398	9/12/13			

Ride Location	City	County	Certificate Expiration Date
Frederick County Fair	Frederick	Fred.co	10/12/13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
4290	Supertruck	I	# Vio. Found	1												Ø	408344
			# Corrected	1													
7101	STORM	I	# Vio. Found													Ø	408345
			# Corrected														
5753	Starship 3000	I	# Vio. Found										1			Ø	408346
			# Corrected										1				
8297	Buggy	I	# Vio. Found													Ø	408347
			# Corrected														
101296	Kiddie Scrambler	I	# Vio. Found		1		1						1			1	408348
			# Corrected		1		1						0				
			# Vio. Found														
			# Corrected														
			# Vio. Found														
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Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]		[signature]	

Email Contact Information:
Inspection Requests and general Correspondance: ARrequest@dllr.state.md.us Incidents, Accidents, Complaints: ARdirect@dllr.state.md.us

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Amusement Ride Safety Order Form

State of Maryland
Division of Labor and Industry
Amusement Ride Safety Inspection
1100 N. Eutaw St. Baltimore, MD 21201
Office 410-767-2178 / Fax 410-333-7721

OWNER:	INSPECTOR'S ID:	DATE:
Reithoffer Shows	F5998	9/12/13
RIDE LOCATION:	**CITY:**	**COUNTY:**
Frederick County Fair	Frederick	Fred.

	NAME OF AMUSEMENT RIDE	AR Number
1	Kiddie Scrambler	101296
2		
3		
4		
5		
6		

category	corrected	Safety Order Description	1	2	3	4	5	6
		Provide to Replace missing Bumper on tub/Cap Bar before next Set-up	X					

Following an inspection of the above referenced equipment, ***safety violations*** were identified. It is your obligation to correct the above deficiencies. ***Failure to comply with this notice will result in seal out of the equipment and prohibition of operation. Under the authority of the Commissioner of Labor and Industry.***

Inspector Signature, Authorized Representative of Commissioner of Labor and Industry.	DATE: 9/12/13
Signature of Owner or Authorized Agent Acknowledging Receipt of Order.	DATE:

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
S&S Amusements	F5998	9 / 12 / 13			

Ride Location	City	County	Certificate Expiration Date
Frederick County Fair	Frederick	Fred	10 / 12 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
10197	Vertigo	I	# Vio. Found	1								1				Ø	408343
			# Corrected	1								1					
			# Vio. Found														
			# Corrected														
			# Vio. Found														
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			# Corrected														

Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]		[signature]	

Email Contact Information:
Inspection Requests and general Correspondance: **ARrequest@dllr.state.md.us** Incidents, Accidents, Complaints: **ARdirect@dllr.state.md.us**

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Cristiani Amusements	G6500	9 / 12 / 13			

Ride Location	City	County	Certificate Expiration Date
797 E. Patrick St	Frederick	FR	10 / 12 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
10767	Water Roller	I	# Vio. Found										1			Ø	407091
			# Corrected										1				
10768	Water Roller	I	# Vio. Found										1			Ø	407092
			# Corrected										1				
			# Vio. Found														
			# Corrected														
			# Vio. Found														
			# Corrected														
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Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]	9-12-13	[signature]	9-12-13

Email Contact Information:
Inspection Requests and general Correspondance: ARrequest@dllr.state.md.us Incidents, Accidents, Complaints: ARdirect@dllr.state.md.us

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Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Keithoffer Shows Inc	G6500	9 / 12 / 13			

Ride Location	City	County	Certificate Expiration Date
797 E Patrick st	Frederick	FR	10 / 12 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
4102	Orient Express	I	# Vio. Found		1		1									Ø	407097
			# Corrected		1		1										
3335	Spider Man	I	# Vio. Found				1	1								Ø	407098
			# Corrected				1	1									
4225	Mini Himalaya	I	# Vio. Found				1	1								Ø	407099
			# Corrected				1	1									
4046	Mini Indie	I	# Vio. Found													Ø	407101
			# Corrected														
3782	Fire chief	I	# Vio. Found													Ø	407102
			# Corrected														
4541	Tilt A whirl	I	# Vio. Found		1											1	407103
			# Corrected		0												
			# Vio. Found														
			# Corrected														
			# Vio. Found														
			# Corrected														
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			# Vio. Found														
			# Corrected														

Comments

Inspector's Signature	Date 9-12-13	Owner's Signature	Date 9-12-13

Email Contact Information:
Inspection Requests and general Correspondance: **ARrequest@dllr.state.md.us** Incidents, Accidents, Complaints: **ARdirect@dllr.state.md.us**

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Amusement Ride Safety Order Form

State of Maryland
Division of Labor and Industry
Amusement Ride Safety Inspection
1100 N. Eutaw St. Baltimore, MD 21201
Office 410-767-2178 / Fax 410-333-7721

OWNER: Reithoffer Shows INC	INSPECTOR'S ID: G-6500	DATE: 9-12-13
RIDE LOCATION: 197 E Patrick St	CITY: Frederick	COUNTY: FR

	NAME OF AMUSEMENT RIDE	AR Number
1	Tilt A whirl	4541
2		
3		
4		
5		
6		

category	corrected	Safety Order Description	1	2	3	4	5	6
CA		Provide to repair or replace all worn bonnet hooks before the next setup in Maryland.	X					

Following an inspection of the above referenced equipment, ***safety violations*** were identified. It is your obligation to correct the above deficiencies. ***Failure to comply with this notice will result in seal out of the equipment and prohibition of operation. Under the authority of the Commissioner of Labor and Industry.***

Inspector Signature, Authorized Representative of Commissioner of Labor and Industry.	DATE: 9-12-13
Signature of Owner or Authorized Agent Acknowledging Receipt of Order.	DATE: 9-12-13

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Broetsky family entertainment	66500	9 / 12 / 13			

Ride Location	City	County	Certificate Expiration Date
797 E Patrick St	Frederick	FR	10 / 12 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
4303	Balloon Ride	I	# Vio. Found									1				Ø	407093
			# Corrected									1					
7153	Kiddie FunSlide	I	# Vio. Found				1	1								Ø	407094
			# Corrected				1	1									
5409	Pirate ship	I	# Vio. Found					1			1					1	407095
			# Corrected					1			0						
10100	Happy Swing	I	# Vio. Found				1									Ø	407096
			# Corrected				1										
			# Vio. Found														
			# Corrected														
			# Vio. Found														
			# Corrected														
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			# Vio. Found														
			# Corrected														

Comments

Inspector's Signature	Date	Owner's Signature	Date
[signature]	9-12-13	[signature]	9-12-13

Email Contact Information:
Inspection Requests and general Correspondance: ARrequest@dllr.state.md.us Incidents, Accidents, Complaints: ARdirect@dllr.state.md.us

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Amusement Ride Safety Order Form

State of Maryland
Division of Labor and Industry
Amusement Ride Safety Inspection
1100 N. Eutaw St. Baltimore, MD 21201
Office 410-767-2178 / Fax 410-333-7721

OWNER:	INSPECTOR'S ID:	DATE:
Broestsky Family Entertainment	G6500	9-12-13
RIDE LOCATION:	**CITY:**	**COUNTY:**
797 E Patrick St	Frederick	FR

	NAME OF AMUSEMENT RIDE	AR Number
1	Pirate Ship	5409
2		
3		
4		
5		
6		

category	corrected	Safety Order Description	1	2	3	4	5	6
ST		Provide to have the holding brake working properly before the next setup in Maryland.	X					

Following an inspection of the above referenced equipment, ***safety violations*** were identified. It is your obligation to correct the above deficiencies. ***Failure to comply with this notice will result in seal out of the equipment and prohibition of operation. Under the authority of the Commissioner of Labor and Industry.***

Inspector Signature, Authorized Representative of Commissioner of Labor and Industry.	DATE:
Chad T Key	9-12-13
Signature of Owner or Authorized Agent Acknowledging Receipt of Order.	**DATE:**
Mark Wagoner	9-12-13

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Reithoffer Shows INC	G6500	9 / 13 / 13			

Ride Location	City	County	Certificate Expiration Date
797 E Patrick Street	Frederick	FR	10 / 13 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
4347	Sizzler	I	# Vio. Found	2												Ø	407104
			# Corrected	2													
3086	Dutch wheel	AS	# Vio. Found													–	–
			# Corrected														
3336	Tornado	AS	# Vio. Found													–	–
			# Corrected														
			# Vio. Found														
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			# Vio. Found														
			# Corrected														

Comments

Inspector's Signature	Date	Owner's Signature	Date
Chad T Foley	9-15-13	[signature]	9-13-13

Email Contact Information:
Inspection Requests and general Correspondance: ARrequest@dllr.state.md.us Incidents, Accidents, Complaints: ARdirect@dllr.state.md.us

This inspection report reflects the condition of the rides at the time of inspection and is not intended to take the place of the owners daily inspection as required by the manufacturer and/or COMAR 9.12.62.18.

Division of Labor and Industry
1100 N. Eutaw St, Balto. Md 21201

Amusement Ride Report

Amusement Ride Safety Inspection Unit
Office 410-767-2348, Fax 410-333-7683

Amusement Company Name	Insp. ID #	Inspection Date	Arrival Time	Depart Time	Inspection Hrs.
Reithoffer Shows Inc	G6500	9 / 13 / 13			

Ride Location	City	County	Certificate Expiration Date
797 E Patrick street	Frederick	FR	10 / 13 / 13

AR Number	Ride Name	Insp Type		Electrical	Carriers	Restrainer	Structure	Fasteners	Drive System	Air / Hyd. System	Stops / Brakes	Clearance / Fencing	General Safety	Signs Posted	Ride Attendant	Work Orders	Certificate Number
6861	Dizzy Dragon	I	# Vio. Found								1					0	407105
			# Corrected								1						
6140	Chance Carousel	I	# Vio. Found													0	407106
			# Corrected														
5055	Mardi Gras	I	# Vio. Found													0	407107
			# Corrected														
3571	Auto Mania	I	# Vio. Found	1			1									0	407108
			# Corrected	1			1										
10123	Speedway	I	# Vio. Found													0	407109
			# Corrected														
8172	Euro Scooter	I	# Vio. Found													0	407110
			# Corrected														
11328	Justice league	I	# Vio. Found													0	407100
			# Corrected														
			# Vio. Found														
			# Corrected														
			# Vio. Found														
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			# Vio. Found														
			# Corrected														

Comments
AR11328 Justice league Cert expires 9-13-14.

Inspector's Signature	Date	Owner's Signature	Date
Chad T Bury	9-13-13	[signature]	9-13-13

Email Contact Information:
Inspection Requests and general Correspondance: **ARrequest@dllr.state.md.us** Incidents, Accidents, Complaints: **ARdirect@dllr.state.md.us**

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