ROANOKE

Date

Permit #

Permit Application For

# Amusement Devices

**Planning Building & Development**
215 Church Ave., SW, Room 170
Roanoke, VA 24011
Phone: **(540) 853-1090** Fax: **853-1594**
www.roanokeva.gov/building
permitcenter@roanokeva.gov

Complete Form & Click Here to Submit Electronically

Property Address | Tax Map #

Permit Requested by

Relationship to Property Owner ◯ Owner ◯ Ride Owner / Agent ◯ Amusement Device Inspector

Applicant Address | City | State | Zip Code

Phone Number | Fax Number | email

Amusement Device Inspector

Inspector Address | City | State | Zip Code

Phone Number | Fax Number | email

## Ride Information

| | | ◯ City Inspected (normal hours) | ◯ City Inspected (after hours) | ◯ Third Party Inspected |
|---|---|---|---|---|
| # Small mechanical ride or inflatable amusement device: | | x $35.00 | x $52.50 | x $3.75 |
| # Inflatable/s with valid certificate of inspection that is within one year of date of inflatable/s to be used. (per Event - when inspected) | | x $50.00 | x $75.00 | x $12.50 |
| # Circular ride or Flat ride less than 20 feet in height: | | x $55.00 | x $82.50 | x $13.75 |
| # Spectacular ride which cannot be inspected as Circular ride or Flat ride due to complexity or height : | | x $75.00 | x $112.50 | x $18.75 |
| # Coaster that exceeds 30 feet in height: | | x $200.00 | x $300.00 | x $50.00 |

**RIDE SUBTOTAL**

State Surcharge - 2% **(ride subtotal X 0.02)** =

Basic Development Plan Fee = **$25.00**

**Total Fees**

Event Start Date | Event End Date

**Description of Event**

**The Current Code in effect is the**

**2012 Virginia Uniform Statewide Building Code.**

### Checklist For Submission

- ☐ Application Completed.
- ☐ Basic Site Plan showing layout of the site and rides. fire hydrants, fire apparatus accessibility & fencing
- ☐ Ride Listing with Safety & Test Reports
- ☐ Certificate of Liability Insurance ($1,000,000 min)
- ☐ Attach Copy of VA Amusement Inspector Certification

I understand that all applications for permits, along with all additional required information, must be provided to the Permit Center prior to processing of this application. All information submitted will be reviewed prior to the issuance of a permit. Should information be missing or additional information be required, the review process may be delayed. I also understand that I am required to conform to all applicable requirements of the Virginia Uniform Statewide Building Code, the Zoning Ordinance for the City of Roanoke and all other applicable laws and ordinances.

| Print Name | | Signature | |
|---|---|---|---|

**Please Do Not Enter Information Below This Line - FOR OFFICE USE ONLY**

## ZONING APPROVAL

**Site Zoning**

| Base Zoning | | Overlay | |
|---|---|---|---|

| Zoning Approval By: | |
|---|---|