



PRINCE WILLIAM COUNTY
Department of Development Services – Building Development Division

AMUSEMENT DEVICE CERTIFICATION

Version 2015-08-31

PERMIT NUMBER _____	PRIVATE INSPECTOR _____
APPLICANT/OPERATOR _____	DATE _____
LOCATION NAME _____	PHONE _____
ADDRESS _____	
DATES OF OPERATION	FROM _____ TO _____

TO BE COMPLETED BY APPLICANT/OPERATOR				TO BE COMPLETED BY INSPECTOR ON SITE	
ITEM	DEVICE DESCRIPTION	SERIAL NUMBER	TYPE Small Mech (SM), Adult (A), Spectacular (S)	CERTIFICATE OF INSPECTION #	INSPECTOR VERIFICATION
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Signature of Applicant/Operator

DATE

Signature of 3rd Party Inspector

DATE