

# **Amusement Ride Schedule of Operations in Texas**

(AR-102)

Required pursuant to the Amusement Ride Safety Inspection and Insurance Act and 28 Texas Administrative Code Section 5.9004, Amusement Ride operation requirements.

#### Mobile amusement rides

Owner / Operator (insured)

Physical address of Owner / Operator \_\_\_\_\_\_

### Schedule of mobile operations in Texas for each six-month period

This information must be provided by the owner / operator to the address on this form a minimum of 10 days in advance of each six-month period. Any changes in the schedule must be submitted on an amended TDI form AR-102 to TDI by the owner / operator within 10 days of such change. Please use additional sheets if necessary to complete the schedule.

Start date	End date	City	County
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

#### Signature

## **Questions?**

Call the Amusement Rides Program at 512-676-6750 or email <u>amusements@tdi.texas.gov</u>.

### How to submit this form

For Texas Department of Insurance inspections, mail or email the completed form to:

Texas Department of Insurance Amusement Rides Program, PC-INSP P.O. Box 12030 Austin, TX 78711-2030 Email: <u>amusements@tdi.texas.gov</u>