KANSAS DEPARTMENT OF LABOR
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AMUSEMENT RIDE COMPLIANCE REVIEW

K-ISH 516 (Rev. 6-17)

☐ Temporary Ride ☒ Permanent Ride ☐ Non-profit/Municipality

Inspection date: 12/28/17 Name of KDOL auditor: MARLEA JAMES

Ride owner: JON BELKER - URBAN AIR #5 Ride location: WICHITA, KS (9545 W. Irving) 67209

Number of rides: _____

Contact person: Jay Hedger (mgr on site) Jon Belker - owner Phone: 316-252-8340 Email: jon@urbanairwichita.com

YES	NO	
☐	☒	1. Valid permit and inspection decal affixed to each ride;
☐	☒	2. The current certification of an inspector's qualifications to inspect amusement rides;
☐	☒	3. The current certificate of inspection for each ride signed by a qualified instructor;
☒	☐	4. Daily maintenance and inspection records for each ride;
☐	☒	5. The amusement ride manufacturer's operational manual for each ride;
☒	☐	6. The amusement ride manufacturer's nondestructive testing recommendations for each ride and results;
☐	☒	7. The amusement ride manufacturer's inspection guidelines for each ride;
☐	☒	8. Operator training records for each operator trained on each ride;
☐	☒	9. Report of itinerary for the current year;
☐	☒	10. Written certification that the ride meets the applicable ASTM international F24 committee standards;
☐	☒	11. Signage must be posted at the point of admission or ticket sale and at least two other locations in close proximity to the amusement ride explaining a patron's duty to report injuries;
☐	☒	12. Proof of insurance policy in effect at the time of operation of the amusement ride with certain coverage in place required by K.S.A. 40-4802 and;
☒	☐	13. All safety instructions for the ride must be posted in plain view on or near the ride in a location where they can be easily read.

Supplemental Compliance Review form (K-ISH 516-A) will detail any violation/violations marked **NO, for each ride**.

Note: All amusement ride records shall be grouped according to ride and shall be maintained by the owner for three years and kept at the location of the ride's operation.

This form reflects the observations at the time of review in accordance with the Kansas Amusement Ride Act. This is a compliance review, and does not certify the safety or integrity of the amusement ride itself, nor provide affirmation that the owner or operator is in full compliance with Kansas statutes and regulations.

Auditor signature: Marlea James Date: 12-28-17

On-site contact signature: _____ Date: 12-28-17

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AMUSEMENT RIDE COMPLIANCE REVIEW - SUPPLEMENTAL

K-ISH 516-A (Rev. 7-17)

☐ Temporary Ride ☒ Permanent Ride ☐ Non-profit/Municipality

Inspection date: 12/28/17 Name of KDOL auditor: MARLEA JAMES

Ride owner: JON BECKER Ride location: 8545 W. Irving, Wichita 67209

Number of rides: _____

Contact person: Jay Hedger Phone: 316-252-8340 Email: jon@urbanairwichita.com

COMMENTS:

#5 - Unknown by manager. Will check with owner.

#7 - Unknown by manager. Will check with owner

#8. Employees are all trained. Currently no written records. Urban Air will create training records for all employees, to be signed by trainer and employee.

#9 - Will be turned in with permit application

#10. " " " "

#11 - Marlea Will provide Urban Air a sample and they will post ASAP.

#12 - Unknown by manager. Will check with owner and provide ASAP. Manager knows insurance is place, unsure of location.