



STATE OF ARKANSAS

ARKANSAS DEPARTMENT OF LABOR AND LICENSING

Safety Division - AOSH Compliance

10421 West Markham • Little Rock, AR 72205-2190

Phone: 501-690-8774 TRS: 1-800-285-1131

AMUSEMENT RIDE / ATTRACTION ACCIDENT / INJURY REPORTING FORM

In the event of a fatality or serious physical injury, the owner/operator of an Amusement Ride or Attraction shall:

- \* immediately cease operation of the ride;
\* within four (4) hours of incident, notify AOSH by telephone or fax;
\* within twenty-four (24) hours of incident, file a written report with AOSH ; and
\* not operate, move, alter, repair or tamper with a ride except to protect life, limb or property until authorized in writing by AOSH.

ACCIDENT DATE \_\_\_\_\_

COMPANY \_\_\_\_\_

ACCIDENT LOCATION \_\_\_\_\_

NAME OF PERSON FILING REPORT \_\_\_\_\_

PHONE \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

RIDE \_\_\_\_\_ RIDE SERIAL # \_\_\_\_\_

OPERATOR NAME \_\_\_\_\_

OPERATOR PERMANENT ADDRESS \_\_\_\_\_

ACCIDENT DETAILS \_\_\_\_\_

WAS A FATALITY INVOLVED? [ ] YES [ ] NO

REPORT TO: AOSH COMPLIANCE / AMUSEMENT RIDE
PHONE: 501-690-8774 ARKANSAS DEPT. OF LABOR AND LICENSING
EMAIL: mark.lawrence@arkansas.gov 10421 WEST MARKHAM
LITTLE ROCK, AR 72205-2190

24-HOUR EMERGENCY #: 501-690-8774