

MINIATURE RAILROAD APPLICATION

Name of Operation: _____

Mailing Address: _____

Location Address: _____

Name of Owner/Contact: _____ Home/Cell Phone Number: _____

Applicant is: Owner: _____ Lessee _____ Operator _____ Fax Number: _____

Operation is: Corporation: _____ Partnership: _____ Sole Prop: _____ Other: _____

Web Address: _____ E-mail: _____

Number of years in business: _____ Number of employees on duty: _____

Number of days p/week open: _____ Hours of operation: _____

Additional Insured: (name/address of landowner, lessor, etc.) _____

SALES/REVENUE INFORMATION

Number of patrons last year: _____ Number of patrons anticipated this year: _____

Sales revenue last year: _____ Anticipated revenue this year: _____

Concessions revenue: _____

Other revenue (explain): _____

Number of events per year: _____

TRAIN INFORMATION

Manufacturer: _____ Year Built: _____

Engine: _____ Cars: _____

Number of cars: _____ Max # of patrons per car: _____

Max weight per car: _____ Age/height require. to ride: _____

Length of track: _____ Width of track: _____

Any: bridges? _____ tunnels? _____ Number of crossings: _____

Describe how crossings are protected: _____

Distance of bottom of car to ground: _____ Speed limit: _____

SAFETY INFORMATION

Safety officer at location: _____ Yes _____ No

Type of training for engineers, conductors, station master (attach a copy of manual if applicable):

Minimum age of engineer: _____

