



Vermont Secretary of State
APPLICATION FOR CERTIFICATE OF OPERATION for an
 Amusement Ride Operating in the State of Vermont

Business ID: _____

1. PLEASE RETURN ACKNOWLEDGEMENT TO. Required - Name and mailing address

Name

Address

Address

Address

Processed by: _____
 FOR OFFICE USE ONLY

**A certificate of operation must be applied for at least 15 days before the ride is first operated in Vermont. 31 V.S.A. § 722(b).
 An operator who operates without a certificate of operation may be fined up to \$500.00 per day for each day the violation continues. 31 V.S.A. § 724.**

Please review instructions page before beginning

2. OPERATOR. Required – Exactly as appearing on attached certificate of liability insurance under “INSURED.”

a. _____
Name

b. _____
 Address City/Town State Zip Code Zip + 4

3. LIABILITY INFORMATION. Required - Exactly as appearing on attached certificate of liability insurance.

a. _____
Name of Insurer(s) (This is not the PRODUCER)

b. _____
Policy Number

c. _____
Amount of Coverage (This is the GENERAL AGGREGATE)

d. _____
Effective Date of Coverage

e. _____
Expiration Date of Coverage

4. THE FOLLOWING DOCUMENTS MUST BE ENCLOSED WITH THIS APPLICATION. Required.

- a. **Complete List of Rides** to be operated in Vermont that are covered under this policy using page 2 of this application.
- b. **Certificate of Liability Insurance** that:
 - (1) Insures both the owner and the operator listed above against liability for injury to persons and property arising out of the operation of the ride in an amount of not less than \$1,000,000.00.
 - (2) Includes a list of all rides covered under the policy (this list is distinct from the list required under part 4.a.)

5. CERTIFICATION STATEMENT. Required.

I certify, under penalty of law (Title 13 V.S.A. Ch. 65), the operator or an authorized representative thereof, that:

- a. all facts provided in this application, and in documents provided with this application, are true and accurate;
- b. all documents required under Part 4 above are enclosed;
- c. the operator named above in Part 2 above is fully compliant with the requirements of 21 V.S.A. ch. 9, Employer's Liability and Workers' Compensation; and
- d. a check or money order in the amount of \$100.00 payable to “VT SOS” is enclosed.

 Printed Name of Certifier Signature of Certifier Title Date

Please review instructions page on reverse before submitting.



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	Name and Model	Serial Number	Passenger Capacity	Recommended Max. Speed must include unit of measurement
1.				
2.				
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SUBMISSION INSTRUCTIONS

- 1. Required Documents:** Both pages of this application must be filed with a Certificate of Liability Insurance and a check or money order in the amount of the statutory filing fee of \$100.00 payable to "VT SOS".
- 2.** This form can only be accepted by mail or in person at:

**Vermont Secretary of State
Corporations Division
128 State Street
Montpellier, VT 05633-1104**

Note: This form cannot be accepted by phone, fax, website, or email. This filing is available in on-line format at <https://bizfilings.vermont.gov/online>

- 3. Returned Evidence of Filing:** Once processed, this application will be returned with the following documentation:
 - a. If approved:**
 - 1.** The approved duplicate of this form;
 - 2.** a Certificate of Operation (for each declared ride) in accordance with 31 V.S.A. § 722;
 - 3.** a Record of Inspection form (for each declared ride) to be completed and returned to the Secretary of State under 31 V.S.A. § 723a(b)(1).
 - 4.** a Certification of Inspection form (for each declared ride) to be completed and a copy of which provided to the organization hosting each fair, field day, or other event or location, at which the operator intends to operate a ride under 31 V.S.A. § 723a(b)(3)
 - 4.** An inspection sticker for each declared ride in accordance with 31 V.S.A. § 723a(b)(2).
 - 5.** Instructions for use and/or retention of each of the above documents.
 - b. If rejected:**
 - 1.** All documents submitted, to include the check/money order included.
 - 2.** A checklist detailing the reason(s) for the rejection.
- 4. Processing Time:** Processing may take up to 5-7 business days (based on seasonal filing volume) from the day the form is received in our office.