



Amusement Star Program Application

The Amusement Star Program application must address each item listed below. Use of the numbering system below helps speed review of your application. Where existing policies, guidelines and forms describe your programs, you are encouraged to enclose them and add the appropriate number used in the numbering system for this application.

I. General Information

Date of Application: _____

Company Name:	Site Address:	City:	State:	ZIP Code:
Company Contact Name:	Company Address (if different):	City:	State:	ZIP Code:
Company Phone Number:	Number of Employees at Site: Total Number: _____ Full Time: _____ Part Time: _____			

Number of Pieces of Equipment by Type:

Total Pieces of Equipment: _____	Major Rides: _____
Go Karts: _____	Permanent Roller Coasters: _____
Inflatables: _____	Rock Walls: _____
Kiddie Rides: _____	Other: _____
Water Slides: _____	

II. Management Commitment and Planning

A. Commitment:

1. Attach a copy of your site's safety and health training program.
2. Describe your current goals for the safety and health training program with the objectives for meeting those goals. Attach additional pages if necessary.

B. Organization:

- 1. Provide a description of how the safety and health training function fits into the overall management organization. Attach additional pages if necessary.**

- 2. Include a description of personnel and other resources devoted to the safety and health training program (attach additional pages if necessary).**

- 3. Include information about any certified professionals used, including how they are used and in what capacity. Attach additional pages if necessary.**

- C. Responsibility: Describe how your show assigns staff safety and health training responsibility. Attach additional pages if necessary.**
- D. Accountability: Describe the accountability system you use for management and supervisors. Appropriate examples may include job performance and evaluations. Explain how the system is documented. Attach additional pages if necessary.**
- E. Seasonal Workers: Describe how seasonal workers' past performances in safety and health training is taken into account in the hiring process. Describe oversight, coordination and enforcement methods used to ensure that the seasonal workers' safety and health training program is adequate and is implemented properly. Specify site entry and exit procedures for seasonal workers. Describe the means used to ensure prompt correction and control of hazards, however detected, under a seasonal worker's control. Describe the methods used to ensure that all injuries and illnesses occurring during work performed during a season are recorded and submitted to you. List the number of seasonal employees on the site during the most recent calendar year. Attach additional pages if necessary.**

F. Employees' Rights: Describe the methods used to ensure that all employees, including new hires as they arrive, will be notified about participation in the Amusement Star Program, their rights to contact the NCDOL Elevator and Amusement Device Bureau, and their rights to obtain safety equipment and training. Various methods may include one or a combination of the following: bulletin boards, tailgate meetings and new employee orientation. Does your company have current copies of the NCDOL posters properly displayed? Attach additional pages if necessary.

G. Organizational Chart: Attach a copy of your organizational chart.

III. Employee Involvement

A. Employee Involvement: Describe the ways employees are involved in the safety and health training program, providing specific information about decision processes that employees impact such as hazard assessment, hazard analysis, safety and ride training, and evaluation of the safety and health training program. A separate hazard assessment for each amusement device and supporting equipment for the device such as electrical needs, hydraulic needs and mechanical stored energy will vary depending on ride specifics. Fuel storage and environmental conditions that will affect the operation of the ride or device may vary, requiring a separate assessment. Attach additional pages if necessary.

B. Safety and Health Director or Committee: If you have a safety and health director or committee, complete the following information where applicable:

1. Date of committee inception.

2. Method of selecting employee members. Attach additional pages if necessary.

3. Describe the hazard recognition training or other specific training for the committee members. Attach additional pages if necessary.

4. Name, job and length of service of each member. Attach additional pages if necessary.

- 5. Average length of service of employee members.**

- 6. Description of committee meeting requirements (e.g., frequency, quorum rules, minutes - you may attach samples). Attach additional pages if necessary.**

- 7. Description of person or committee role (e.g., frequency and scope of committee inspections, procedures for inspecting entire worksite, role in accident investigation, role in employee hazard notification). Attach additional pages if necessary.**

- 8. List safety and health training information accessible to and used by the committee. Attach additional pages if necessary.**

IV. Worksite Analysis

- A. Pre-Use Analysis: Explain how new equipment, materials and processes are analyzed for potential hazards prior to use. Attach additional pages if necessary.**

- B. Comprehensive Surveys: Indicate how you spot potential safety hazards at the site. Attach additional pages if necessary.**

- C. Self-Inspections: Describe your work site safety inspection procedures. Include information about inspection schedules. Indicate who performs inspections and how any necessary corrections are tracked. You may attach sample forms and internal time frames for correction. Where applicable to health hazards, summarize the testing and analysis procedures used and qualifications of personnel who conduct them. Attach additional pages if necessary.**

D. Job Hazard Analysis: Relate how you review jobs, processes and interaction of activities to determine safe work procedures (not to be confused with self-inspections). Include procedures or guidance techniques used in conducting job hazard analysis. Attach additional pages if necessary.

E. Employee Notification of Hazards: Describe how employees notify management when they see conditions or practices that may be hazardous to safety. What mechanism is used for responding to employees? How are corrections tracked? You may attach forms or procedures. Attach additional pages if necessary.

F. Accident Investigations: Describe or attach any forms and procedures for conducting accident investigations. What training or guidance is given to investigators? Are all accidents, including first-aid cases, investigated? What about near-miss incidents? Attach additional pages if necessary.

- G. Medical Program: Describe the medical/first-aid program. Include on-site and off-site medical service or physician availability. Include a list or number of people trained in first-aid, CPR and paramedical training, and indicate which training they have received. Attach additional pages if necessary.**

V. Hazard Prevention and Control

- A. Professional Expertise: Provide details concerning your use of the services of certified professionals. Attach additional pages if necessary.**

- B. Safety Rules: List your company's rules, and describe the disciplinary system you use for enforcing them. Attach additional pages if necessary.**

C. Personal Protective Equipment: Describe your company's rules regarding personal protective equipment requirements. Attach additional pages if necessary.

D. Emergency Preparedness: Describe your company's emergency planning and preparedness program. Include information on emergency or evacuation drills. Attach additional pages if necessary.

E. Preventive Maintenance: Provide a summary and description of your procedures for preventive maintenance of your equipment. Attach additional pages if necessary.

VI. Safety and Health Training

Describe formal and informal safety and health training programs for your employees. Include supervisors' training schedules, personal protective equipment and handling of emergency situations. Sample attendance lists and tracking methods, if any, may also be attached if desired. Attach additional pages if necessary.

VII. Program Evaluation

- A. Safety and Health Training Program Self-Evaluation: Provide a copy of last year's comprehensive review and evaluation of your entire safety and health training program subject to site review. Assessments of the effectiveness of the areas listed in these application guidelines should be included. Attach additional pages if necessary.**

B. Describe your involvement within your industry to assist other companies in providing knowledge and resources pertaining to both safety and health training. Attach additional pages if necessary.

C. Include any other information you may consider crucial to the safety and health training program. Attach additional pages if necessary.

VIII. Statement of Commitment

A Statement of Commitment similar to the sample in Attachment A must be placed on your stationery and signed, or a letter that provides the same assurances in your words must be attached to this application. **A statement of this type regarding management commitment to safety and health training is required for the application.**

_____	_____
Signature	Date
_____	_____
Name (Please Print or Type)	Title (Please Print or Type)

Send Amusement Star Program Application information to:

N.C. Department of Labor
Attn: Thomas M. Chambers
Amusement Star Program Manager
Elevator and Amusement Device Bureau
1101 Mail Service Center
Raleigh, NC 27699-1101

ATTACHMENT A

Statement of Commitment

We are committed to doing our best to provide outstanding safety and health training programs to our employees and the general public through management systems and employee involvement. We are also committed to the achievement and maintenance of the Amusement Star Program requirements and to the goals and objectives of this ongoing process.

We agree to provide the information listed below for NCDOL Elevator and Amusement Device Bureau review on site. We agree to retain these records until NCDOL Elevator and Amusement Device Bureau communicates its decision regarding the Amusement Star participation. We will likewise retain comparable records for the period of Amusement Star participation to be covered by each subsequent evaluation by NCDOL Elevator and Amusement Device Bureau:

- A written safety and health training program;
- Management statement of commitment to safety and health;
- Safety and health training manuals;
- Safety rules, emergency procedures and examples of safe work procedures will be maintained;
- Self-inspection procedures, reports and correction tracking;
- Accident/incident investigation reports;
- Employee orientation and safety training programs and attendance records;
- Annual safety and health training program evaluations and site and/or corporate audits, including the documented follow-up activities, for at least the last three years;
- Preventive maintenance program line supervision accountability documentation;
- Other records that provide relevant documentation of qualifications.

In agreeing to make this information available to NCDOL Elevator and Amusement Device Bureau, we understand that materials needed to document the safety and health training program that may involve invasion of privacy or a trade secret will not be included in the application. Instead, such materials will be described in the application and provided for viewing only at the site during an application assistance visit and/or during the pre-approval on-site review.

We also agree to correct all hazards identified through self-inspection, employee reports or accident investigations in a timely manner. We will provide the results of self-inspections and accident investigations to our employees upon request. Employees with safety-related duties will be protected from discriminatory actions (including unofficial harassment) resulting from these duties.

It is important that we continue to be a leader within our community and to assist other companies at our discretion with knowledge and resources pertaining to both safety and health.

We understand that both parties and the Commissioner of Labor may withdraw our participation at any time or for any reason should we so desire.