



Florida Department of Agriculture and Consumer Services  
 Division of Consumer Services/Bureau of Fair Rides Inspection

**OWNER'S DAILY INSPECTION REPORT (GO KART TRACK/VEHICLE)**

**ADAM H. PUTNAM**  
**COMMISSIONER**

Section 616.242(15), Florida Statutes, Rule 5J-18.0012, Florida Administrative Code

Phone: 1-800-435-7352; Fax: (850) 410-3797  
 FairRides@FreshFromFlorida.com

COMPANY \_\_\_\_\_ RIDE NAME \_\_\_\_\_ USAID & SERIAL # \_\_\_\_\_

**INSTRUCTIONS:** Use this form for daily inspections of each amusement ride as required by Section 616.242(15), Florida Statutes. Inspection requirements are listed on the left side of the table below. Each day the ride is inspected, enter the month, date and year in the space provided across the top of the table. When completing an inspection requirement, place a check mark "√" in the space provided to indicate the inspection has taken place and there are no deficiencies. If a deficiency is found, place "X" in the space provided. On the back of this form, record the date the deficiency was found, the deficiency, corrective action and signature and date of person taking corrective action. If an inspection item is not applicable to this ride, put "N" in the space provided. The inspection requirements in the table are the minimum requirements for inspection. Note that the administrative information on this form: company name, ride name, USAID/SN and inspectors signature must be completed. The last 14 days of inspections must be kept on site and made available immediately to the department inspector upon request. This table was constructed to record 14 days of inspection on one report. The person inspecting the ride must sign across the bottom of this form after each daily inspection and thereby certifies that the ride complies with all requirements of Section 616.242, Florida Statutes.

<b>Enter inspection dates across the top →</b>																			
<b>Insp. Requirements:</b>																			
Track:																			
Signs																			
Monitors																			
Condition																			
Emergency controls																			
Fire protection																			
Refueling area																			
Pit area																			
Barriers																			
Vehicles:																			
Governor/Speed limiting																			
Restraints																			
Brakes/Throttle																			
Padding/Roll Bars																			
Wheels/Tires																			
Fuel tank leakage																			
Frame/steering/fasteners																			
<b>Inspector Signature →</b>																			

DEFICIENCY LOG \*

Document deficiency noted with "X" on front in this table

Date deficiency noted	Deficiency	Corrective Action	Signature and date

\* Draw horizontal lines to separate entries. Make copies of this form as required.