

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: _____

