



SMALL TOWN, BIG BEACH™

**AIR INFLATED STRUCTURES
PUBLIC PROPERTY USE INSPECTION FORM**

For the safety of the community the permit holder, lessee, or other party, that operates or allows to operate air inflated structures, bounce houses, or similar structures, on public property shall be responsible for compliance with the City of Gulf Shores Codes and Regulations and the manufacturers published instructions and safety requirements. Code References: Code of Ordinances City of Gulf Shores, Alabama Chapter 1, Section 1-9; 2015 International Fire Code 101.3, 109.1, 105.6.5 (3103.3).

Date / Time:	
Location:	
Permit Information:	PUBLIC PROPERTY USE
Permit Holder/File#:	
Responsible Person:	
Inspector:	

PASS	FAIL	
		Permit holder shall provide written proof that the operator of the air inflated structure shall provide an approved and trained employee operator to be present at site of use and is responsible for the setup, cleaning, operation, inspection and customer safety. The operator shall be responsible for ensuring that the manufacturer’s operation and safety requirements are complied with at all times.
		Permit holder and operator shall provide proof of insurance acceptable to the City of Gulf Shores prior to use. Contact Temple Smith 251-968-2425
		Proof that the inflatable is cleaned and sanitized prior to use (company representative may sign this form as proof).
		The manufacturer’s safety rules shall be posted in a clearly visible location at the site of the inflatable.
		Inspection Status. If “FAIL” is marked no occupancy or use may occur until cleared by re-inspection.

INSPECTOR COMMENTS/INSTRUCTIONS:

Permit Holder Verification of Compliance:

I the undersigned attest and affirm that I am the permit holder and the responsible party for the safe operation of each inflatable(s) being utilized under this permit and I am responsible for the safety of the occupants. Prior to use the inflatable(s) have each been inspected, sanitized, and set up according to the manufacturers published requirements. I am responsible for preventing occupancy of the inflatable(s) when no trained operator is present.

Operators Name:

_____ ; Signature: _____ Date: _____

_____ ; Signature: _____ Date: _____

If you need assistance with this form please contact: George F. Surry, Fire Code Official
P.O. Box 299 Gulf Shores, AL 36547 O: (251) 968-7422; Direct/Text: (251) 269-7996; gsurry@gulfshoresal.gov