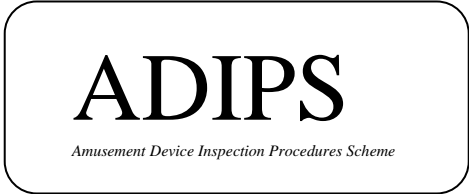


FORM B (Qualifications)



**RULES FOR THE ACCREDITATION OF BODIES PERFORMING INSPECTION OF COIN OPERATED DEVICES WITHIN THE A.D.I.P.S. SCHEME**

**COMPANY**

**NAME OF INSPECTOR**

**DATE**

<b>Discipline / Inspection type &amp; category claimed</b>	<b>claimed :</b>		
INITIAL TEST CHILDREN'S RIDES	TICK	Details of past experience and any relevant qualifications:-	Sources of continued professional development / training during the last year e.g Technical Bulletins, Industry guidance, inspectors seminars etc., :-
THOROUGH TEST CHILDREN'S RIDES			
INITIAL TEST MINICARS			
THOROUGH TEST MINI CARS			
INITIAL TEST ARCADE SIMULATORS			
THOROUGH TEST ARCADE SIMULATORS			