



**ITINERARY FOR MOBILE OR TEMPORARY (Form 102)  
 AMUSEMENT RIDE OWNER/LESSEE/OPERATOR**

One (1) itinerary must be completed for each location or setup. Use for SCLD/LIC102A, if more space is needed. ALL INFORMATION MUST BE COMPLETED OR FORM WILL BE RETURNED.

Owner Name: \_\_\_\_\_ Owner No.: \_\_\_\_\_

Set-Up Location: \_\_\_\_\_ Site No.: \_\_\_\_\_

Set-Up Location Address: \_\_\_\_\_  
 (Enter complete address)

Email Address: \_\_\_\_\_  
**(MANDATORY FOR AMUSEMENT PORTAL REGISTRATION)**

Requested Inspection Date: \_\_\_\_\_ AM/PM

Dates of Operation: From: \_\_\_\_\_ To: \_\_\_\_\_

Operation Hours: From: \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

Name of Sponsor: (If applicable) \_\_\_\_\_ Telephone: \_\_\_\_\_

Sponsor Address: \_\_\_\_\_  
 (Enter complete address)

Name of Landowner: (If applicable) \_\_\_\_\_ Telephone: \_\_\_\_\_

Land Owner Address: \_\_\_\_\_  
 (Enter complete address)

1. Was a Form LIC103 issued to the sponsor/landowner? **(Mandatory)**  Yes  No
2. Are there any other amusement device owners that will be booked and/or operated at this location?  Yes  No
  - a.) If Yes, give name of other owner: \_\_\_\_\_
  - b.) Telephone No.: \_\_\_\_\_
  - c.) Will booked in rides be on your insurer?  Yes  No

**Note: All owners of amusement devices operated within South Carolina must complete all necessary forms whether booked in or not.**

\_\_\_\_\_  
 Signature of Owner/Lessee

\_\_\_\_\_  
 Date

