

Program Manager Industry Inspection Bureau 65 Court Street, Room 400 Buffalo, New York 14202 (716) 847-7134 voice

Company name and address: DLFE MANAGEMENT CO., INC 9993 Allegheny Road Darien Center, New York 14040 DBA: Darien La FEIN: 20-83872 Site location: 9993 Allegeny R		ocation: Title:			
Main phone Business: (585) 599-4641	Second phone S	Select:	E-mail:	website: www.godarien.com	
Jurisdiction: Amusement Devices	Municipality: Town of Darien		County: Genesee	Type of visit: Accident	Page: 1 of 3

	Addend	u m	
Notes:			
On Friday, July 8, 2011 ar Genesee County, 14040.			d at 9993 Allegheny Road, Darien,

was ejected from the Ride of Steel, struck by the coaster train, and thrown to the ground, coming to rest between the track sections of the 2nd and 3rd hills. The coaster train continued to the end of the track, and Darien Lake staff sounded an alert to the incident. Mr. Hackemer's body was found face down and in a state of obvious death by Darien Lake security and EMS staff- no medical attention was rendered.

The Ride of Steel (serial # CXMG402), formerly known as the Superman Ride of Steel, is a roller coaster manufactured by Intamin, LTD. The manufacturer refers to the Ride of Steel as the brand name of Mega Coaster. The Ride of Steel was manufactured and installed at Darien Lake in 1999. The Rochester office performed the initial inspection of the Ride of Steel and issued the first Amusement Device permit in that year. The most recent inspection of the Ride of Steel was conducted jointly over several days in April and May, 2011 by Sr. Inspector Richard Brown, Sr. Inspector Edward Mc Ewan and Inspector Brian Koch, with Sr. Inspector Brown issuing Amusement Device Permit A-12872 on May 13, 2011.

The Ride of Steel is a roller coaster approximately 5400 feet long and at its highest point reaches 208 feet. Two separate trains convey patrons, with each train holding a maximum of 32 passengers with a maximum weight of 4800 pounds through a series of hill climbs and falls, along with horizontal turns at speeds up to 73 miles per hours during the rides duration of approximately 2 minutes and 10 seconds. There is no inversion of the passenger train. The Ride of Steel is rated by the manufacturer at a maximum capacity of 1100 riders per hour.

Mr. Hackemer, a military veteran, did not have a left leg or left hip, and his right leg was amputated above the knee due to injuries suffered during his military service. Mr. Hackemer was not wearing prosthetic limbs while at Darien Lake, and was using a wheel chair during his visit to the park.

At approximately 4:05 pm on July 8, 2011, Mr. Hackemer entered the Guest Relations building near the entrance of the park and inquired about handicapped boarding policies. According to interviews, the Guest Relations staff explained their "go up the exit" procedure, which permits those passengers with disabilities to enter ride platforms through the exit ramp. Guest Relations staff further offered Mr. Hackemer a copy of the brochure titled "A Guide to Fun at the Park for Guests with Disabilities" which outlines restrictions and polices for patrons at Darien Lake. Mr. Hackemer refused the brochure and indicated that he already possessed a copy. Guest Relations staff further explained to Mr. Hackemer the policy regarding the loading and unloading disabled patrons onto their rides. Mr. Hackemer then exited Guest Relations.

At approximately 5:30 pm on July 8, 2011, Mr. Hackemer, along with his nephew, entered the Ride of Steel through the exit ramp and stopped at the gate adjacent to the unload platform. The unload attendant notified the ride operator that a disabled guest needed to be loaded. Mr. Hackemer was loaded into the Red Train (car 11 seat 2) with the assistance of his nephew, who then seated himself next to Mr. Hackemer (car 11 seat 1). The rest of the Red Train was loaded in its usual manner with all restraints checked by the attendants and then launched. According to witnesses, shortly after cresting the 3rd hill, Mr. Hackemer was ejected from his seat. The Red Train continued along the track and completed its run. Upon stopping in the braking station, passengers began to inform the ride attendants of the accident and gave an approximant location of the incident as the train was brought into the station to unload. Ride staff began the notification of Darien Lake Emergency Response, to respond to the accident. Darien Lake Security and EMS staff located the body of Mr. Hackemer

and secured the scene. No medical attention was rendered to Mr. Hackemer based on the EMS staffs protocols. There are no other reports of any physical injuries to any patrons who were on the Red Train at the time of the accident. Due to the operational functions of the Ride of Steel, the Blue Train had been loaded with passengers and launched in order for the Red Train to be brought into the station. After the Blue Train completed its trip, the Red Train was launched again with no passengers in order to bring the Blue Train into the station to be unloaded. After the Blue Train was unloaded, the Red Train was stopped in the braking station and the Ride of Steel was shut down.

I was notified by a text message from Sr. Inspector McEwan that an accident had occurred at Darien Lake. After talking with my Supervisor, I left several phone messages for Darien Lake staff that I was enroute to the accident. Upon my arrival, I met with Darien Lake Ride Maintenance Staff and members of the Genesee County Sheriff's Office. I was brought up to speed as to what had happened and started my investigation of the accident with the assistance of Darien Lake Staff.

I proceeded to take photo documentation in the vicinity of the accident and surrounding area. I then went to the loading station and took photo documentation of the Red Train and both the loading and unloading stations, including both the regular entrance and ADA accessible entrance and all related signage. With the assistance of Ride Maintenance mechanics, the Blue Train was backed out of the station and the Red Train was brought into the station. I took additional photo documentation of the Red Train. Darien Lake Management provided copies of the "souvenir" pictures taken of the red train during its cycle in which the accident occurred. I requested that copies of numerous documents related to this device, including the owner's manual, operator training records and maintenance inspections be made available to me the next morning. Darien Lake personnel informed that they had already begun compiling the requested information. Under the direction of Supervising Inspector Frederick, I issued a order not to operate the device in order to facilitate the investigation, and made arrangement to perform a mechanical inspection of the device for the next morning.

On July 9, 2011, with the assistance of Sr. Inspectors Mc Ewan and Brown and after a brief meeting with Darien Lake and a representative from Herschend, the corporate management company of Darien Lake, I conducted a mechanical inspection of the Ride of Steel. With the assistance of Darien Lake Ride Maintenance mechanics, a complete review of the Red Train was conducted, with no deficiencies found. The Blue Train was not inspected at this time. Further review of the signage for the Ride of Steel was conducted, and I took additional photo documentation of the entrance and exit to the device, and also additional photos of the Red Train. Darien Lake supplied me with copies of the documents requested the previous night.

On July 11, 2011 after my complete inspection and photo documentation of the ride and area around ride, the ride was released to Darien Lake to allow operation for maintenance functions and cleaning, with the understanding that the ride was still not allowed to operate with patrons.

On July 12, 2011, Sr. Inspector Mc Ewan and I met at Darien Lake to interview the Ride of Steel attendants and operators who were working at the time of the accident. In addition to speaking individually with each employee, I requested that each employee provided a written statement, all of which occurred in the presence of a representative from Herschend. Sr. Inspector Mc Ewan and I next completed a mechanical inspection of the Ride of Steel Blue Train, with no deficiencies found. Sr. Inspector Mc Ewan and I then traveled to the Genesee County Sheriff's Office, where we met with Sgt. Steve Mullen and Sheriff Maha, along with the Undersheriff and the Chief of Operations. Mr. Clarke from the DOL was also present at the meeting. Sgt. Mullen provided copies of reports and statements that they had obtained in the course of their investigation. During the meeting, we discussed the mechanical inspection of the Ride of Steel and that we had found no deficiencies, we also indicated that we were still in the process of reviewing all documents provided by Darien Lake. Sheriff Maha informed us that his office had concluded their investigation, and that they were not planning on issuing any charges related to the accident, pending a review of their report by the Genesee County District Attorney's Office.

After considerable review of all documentation, as well as interviews with employees, it can be concluded that the accident was caused by operator error. While Mr. Hackemer used the appropriate entrance to board the Ride of Steel, he did not meet the minimum requirements to be a passenger on the Ride of Steel. Ride operators and attendants permitted Mr. Hackemer to board the Red Train with the assistance of his nephew, contrary to their training of the manufacturer's restrictions for passengers and Darien Lake's policies. Mr. Hackemer did not meet the minimum height requirements, nor did he possess the requisite two legs, as pointed out in the ride information signage provided at the regular and the "handicap access entrance", as well as the brochure distributed by customer services. The brochure states that passengers must possess two legs to ride this ride. It should be noted that part of the passenger restraint system on the ride is specifically designed to lock the passenger's shins in place to help ensure that a passenger cannot fall out or be ejected from the ride.

Over the days since the accident occurred, all documentation has been reviewed in various work sessions by me with assistance by Sr. Inspectors Mc Ewan and Brown, Supervising Inspector Frederick, and Program Manager Guizzotti. After exhaustive review of all the documentation and interviews, it appears that the ride operator and ride attendant training materials met the requirements of the manufacturer; however, issues concerning the employee's comprehension of the training material and their ability to retain the associated requirements of their position, specifically in reference to rider restrictions, became apparent.

Numerous conversations were held with representatives from Herschend and Darien Lake to discuss suggestions to enhance the ride operator and ride attendant training programs for the Ride of Steel. Additionally, modifications to passenger warning signage and ways to provide visual reminders of rider restrictions for use by employees were discussed. Furthermore, Herschend brought additional corporate training and safety resources as well as outside consultants to the facility to review and enhance all facets of operation for not only the Ride of Steel, but all amusement devices at Darien Lake. Herschend has created a new "auditor" position at Darien Lake to review all training programs, and also to routinely audit employees related to the requirements for the amusement device and the employee's retention of the training information, pertaining to their respective assignment. Hershend has provided copies of all revised training materials and also copies of the new safety and audit procedures and forms, which Supervising Inspector Frederick and I both found acceptable.

On July 19, 2011, Supervising Inspector Frederick and myself witnessed the revised training procedures to be implemented in a training session for operators and attendant positions for the Ride of Steel at Darien Lake. The enhanced changes to the program were acceptable to both of us; we observed the entire training session.

Mechanical deficiencies were not found with the amusement device during the course of the entire investigation.

A draft proposal of a Notice of Violation with two citations to be issued to Darien Lake has been forwarded to Supervising Inspector Frederick for review before they are issued.

Documentation obtained during the investigation is attached as follows:

- 1. Copy of Ride of Steel 2011 Permit A-12872
- 2. Draft copy of Ride of Steel Do Not Operate Order 7/8/11
- 3. Ride of Steel Do Not Operate order final draft 7/8/11
- 4. Darien Lake Gusts with Disabilities Guide
- 5. Photos of J.T. Hackemer in Guest Relations
- 6. Darien Lake Guest Relations employee statements
- 7. Darien Lake souvenier pictures of Ride of Steel during accident cycle cars 1-8
- 8. Darien Lake EMS report- John Doe (J.T. Hackemer)
- 9. Ride of Steel turnstile report 7/8/11
- 10. Darien Lake work schedule for Ride of Steel employees 7/8/11
- 11. Darien Lake employee break sheet 7/8/11
- 12. Ride of Steel restraint monitoring documentation
- 13. Ride of Steel 2011 annual opening certification
- 14. Ride of Steel Maintenance Notes 2011
- 15. Ride of Steel 2011 Daily Inspection Reports
- 16. Ride of Steel pre-opening inspection checklist 7/8/11
- 17. 1999 Superman Ride of Steel manufacturers guidelines
- 18. 2004 restraint system documentation for Ride of Steel
- 19. Witness statements taken by Darien Lake Security
- 20. Employee statements taken by Darien Lake Security
- 21. Ride of Steel employees and positions at time of accident
- 22. Darien Lake 2011 General Training powerpoint presentation
- 23. Darien Lake 2011 General Training records
- 24. Ride of Steel 2011 operating proceedures
- 25. Employee training records- Ride of Steel 2011
- 26. Ride of Steel Operator training test 2011
- 27. Ride of Steel Attendent training test 2011
- 28. Ride of Steel employee statements taken by DOL
- 29. Darien Lake ADA court case 2006
- 30. Genesee County Sheriff Report 2011-00012448
- 31. Sketch made by Genesee County Sheriff's Office
- 32. Genesee County Sheriff incident follow up sheets
- 33. Genesee County Sheriff printed report- NYS ID check for James T. Hackemer
- 34. Genesee County Sheriff hand written notes
- 35. Ride of Steel souvenier pictures provided by Genesee County Sheriff's Office
- 36. Overhead images of Ride of Steel provided by Genesee County Sheriff's Office
- 37. Genesee County Sheriff's Office copy of security image from Guest Relations
- 38. Genesee County Sheriff's Office Ride of Steel employee statements
- 39. Genesee County Sheriff's Office witness statements
- 40. Darien Lake witness statement provided by Genesee County Sheriff's Office
- 41. Department of Labor Darien Lake Ride of Steel photo report

Name: Brian Koch SH 988 (0408)	Orders issued 🗵	Date: July 19, 2011 Addendum v1.2

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State of New York - Department of Labor Division of Safety and Health

PERMIT TO OPERATE AN AMUSEMENT DEVICE PERMIT TO USE A EVIEWING STAND AND/OR TENT

This permit to operate is issued to the owner, agent or lessee for the amusement device, viewing stand and/or tent specified below and is not transferable. It is valid for a period of one year from its date of issuance unless the device, stand or tent is substantially rebuilt or modified, or the holder voluntarily discontinues operation of the device, viewing stand or tent. The Commissioner may revoke a permit if the device, viewing stand, or tent is being operated or used without the liability insurance required by law or with a mechanical, structural or design defect which presents an excessive risk of serious injury to passengers or occupants.

Any amusement device viewing stand or tent accident which results in a serious injury must be reported to the program manager for industry inspections prior to the close of the next buisness day. The manager is located at 65 Court Street, Room 400, Buffalo, NY 14202. Telephone Number (716) 847-7134; Fax (716) 847-7108.

			. PER	MIT IN	FORMA	TION				
1. Name and Mailir	ng Address		Owner Agent	[]] L	.essee	2. d.b.a if any	,	3. Туре		
DLFE Managemer 9993 Alleghany ro P.O. Box 91 Darien Center, NY	ad					Darien Lake Park Resort	Theme	Ride of Steel		
4. Status	5. Classification	1 6	6. Capacity			7. Maximum	Speed	8. Name of Manufacturer		
Temporary	(A.D. ONLY)		No. of Persons	32 pe	r train	(A.D. Only	(A.D. Only) 75 mph		Intamin	
Permanent	☐ Kiddie 🙀	Adult	Maximum Weigh	4,6	300	75 mp				
9. Insurance	a. Liability	Initials	b. Workers' Comp		Initials	c. Disability	Initials	10. Identificatio	n No.	
Expiration Date	12/1/2011	RME	1/24/2012		RMB	12/31/2011	DUAR	12. Dist Off.	13. Expiration Date	
1,000					ur M Bro			5/31/2012		
14. Permit No. A-12872 SH-82A (7-08) Date Printed: 5/10/2011						Man	Whi a Co-y recon Cas, Director connection of Labor			



Program Manager Industry Inspection Bureau 65 Court Street, Room 400 Buffalo, New York 14202 (716) 847-7134 voice

Company name and address:		DBA: Dari	ien Lake Theme Park	Contact n		· -
DLFE MANAGEMENT CO. LLC.			20-8387268 Theresa Hoover			
9993 Allegheny Road				Title:		
Darien Center, New York 14040		Site location			s Manager	•
		9993 Alleg	heny Road	Speradon	anayor	
Main phone Select:	Second phone	Select:	E-mail:	Website:		
()						
Jurisdiction:	Municipality:		County:	Type of vi	sit:	Page:
Amusement Devices	Town of Darier	1	Select Genesee	Accident		1 of 1
Not complied			Inspector			
140t complica	Date July 08	, 2011	BCK09	Out of servic	e tag 🔲	
			Inspector	Orders vo	olded	
All complied 🛛	Date July 22	, 2011	BCK09			
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	Not	tice of Vi	olation and Order to (Comply		
You are hereby ordered to con	anly with the follo	wina roavir	ements of NVS Labor Law a	nd Industrial Code	Dulas at	the above premises
Anyone wishing to file an appe	al of the violation	s cited may	do so by filipa a potition with	the Industrial Res	ed of App	cale within 60 days of
the date of this notice.	ai oi trie violatioi	i Citeu may	do so by illing a peddon widi	uie iliuusulai boa	iid oi App	eals will lift ou days of
	••				All - Jalace	
Requirements explained to: There	esa Hoover		Notice GIVEN to: Theresa Hoo	over	within	ons shall be complied
Agent Ride of Steel s/n CXMG402 DLID#	1162	1	Agent		WILLIAM	
Nide of Steel Sti Chino-102 DEID	102					
1. Labor Law Code Rule 45 Section	on 870(g)(4)					
Maintain device shut down and do	not operate until in	ispection is c	onducted by an agent of the Co	mmissioner.		
ie: DO NOT OPERATE UNTIL AU	ITHORIZED BY A	SAFETY AND	HEALTH INSPECTOR FROM	אירואטט ויטט אירוי	JDLISTRY I	INSPECTION AFTER A
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33						
NOTE: This order replaces the ha	nd written copy tha	it was labeled	d "Draft".			
Name: Brian Koch						Date: July 8, 2011



Program Manager Industry Inspection Bureau 65 Court Street, Room 400 Buffalo, New York 14202 (716) 847-7134 voice

Company name a	nd address:	<u> </u>				
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6			Violatio	in		
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Reason Ord	ers Voided Or Giv	en Time Ex	tension	To Legal Unit Final Disposition (See notes below	of Prosecution v)	n or Tagging
Date of visit	Contact name	Complied orders	Reason given i	or non-compliance and mmendations	Revised compliance date	Inspector
Notes:		•			'	



Program Manager Industry Inspection Bureau 65 Court Street, Room 400 Buffalo, New York 14202 (716) 847-7134 voice

Company name and address: DLFE MANAGEMENT CO. LLC. 9993 Allegheny Road Darien Center, New York 14040		DBA: Darien Lake Theme Park FEIN: 20-8387286 Site location: 9993 Allegheny Road		Contact name: Theresa Hoover Title: Operations Manager	Theresa Hoover Title:	
Main phone Select: (585) 599-4641	Second phone S	Select:	E-mail:	Website: www.godarienlake.com		
Jurisdiction: Amusement Device	Municipality: Town of Darien		County: Genesee	Type of visit: Accident	Page: 1 of 2	

Not complied	Date	Inspector	Out of service tag	
All complied x	Date July 22, 2011	Inspector BCK 09	Orders voided	
	Notice of V	iolation and Order to	Comply	

You are hereby ordered to comply with the following requirements of NYS Labor Law and Industrial Code Rules at the above premises.

Anyone wishing to file an appeal of the violation cited may do so by filing a petition with the Industrial Board of Appeals within 60 days of the date of this notice.

Requirements explained to: Theresa Hoover, Manager

Notice given to: Theresa Hoover, Manager

All violations shall be complied within

Immediately

Ride of Steel s/n CXMG402 DLID #162- Initial inspection occurred on July 8, 2011; ride was shut down until authorized by the Commissioner of Labor.

Violation 1. Labor Law Code Rule § 45-1.4 General responsibility for compliance.

Every manager and owner of an amusement device, temporary structure, viewing stand or tent shall comply with or effect compliance with all provisions of this Part (rule), and every employer and employee shall comply with all provisions which concern or affect his conduct.

Findings:

Ride operators and ride attendants of Ride of Steel roller coaster were unfamiliar with the restrictions of said ride and were unfamiliar with the proper operation of the restraint system which requires two legs to be effective; their acts and failures resulted in a fatality of a passenger.

Requirement: Management shall provide training for and implement procedures that provide for continuous review and verification that all ride operators and ride attendants are properly trained and proficient in the duties of their positions in accordance with all of the manufacturer's guidelines and restrictions. Ride operators and attendants have been retrained, and on July 19, 2011, Department of Labor inspectors observed hands-on training of Ride of Steel employees.

Violation 2. Labor Law Code Rule § 45-2.8 Control of operation.

Amusement devices shall be operated only by competent operators at least 16 years of age for devices designed primarily for the use of small children and/or an accompanying adult and 18 years of age for all other devices. Every operator shall have knowledge of the use and function of all normal and emergency operating controls and of the proper use of the device. An operator shall be in the immediate vicinity of the operating controls during operation and no other person shall be suffered or permitted to handle such controls during normal operation. No operator shall be responsible for the operation of more than one amusement device at a time. This provision does not apply to amusement devices designed to be operated or controlled safely by a passenger.

Findings:

Ride operators and ride attendants of Ride of Steel roller coaster were unfamiliar with the restrictions of said ride and were unfamiliar with the proper operation of the restraint system which requires two legs to be effective; their acts and failures resulted in a fatality of a passenger.

Requirement:

Management shall provide that all ride operators and ride attendants are trained in the proper use of the device and that they perform the duties of their positions in accordance with all of the manufacturer's requirements and restrictions. Establish and implement control measures to verify that ride operators and ride attendants are performing their duties with the manufacturer's requirements and restrictions. Ride operators and attendants have been retrained, and on July 19, 2011, Department of Labor inspectors observed hands-on training of Ride of Steel employees.

Additional Requirements:

DLFE Management Co. LLC is instructed to install signage detailing rider restrictions to be displayed in plain view of all ride operators and attendants' stations so that they may be readily accessible for review. DLFE Management Co. LLC is instructed to establish a procedure requiring ride operators and attendants to review such restrictions prior to each shift they work. As of July 19, 2011, additional signs have been installed at every operator and attendant station listing the ride restrictions.

Name:	Prion	\sim	Kooh
name:	Brian	١.	Kocn



Program Manager Industry Inspection Bureau 65 Court Street, Room 400 Buffalo, New York 14202 (716) 847-7134 voice

Company name an	d address:	00 T.	Service Servic			en e
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D	14:1-10	<u> </u>				
Reason Orde	ers Voided Or	Given Time	Extension	To Legal Unit _ Final Dispositio (See notes belo	n of Prosecut	ion or Tagging
Date of visit	Contact name	Complied orders	Reason given for recomm	non-compliance and endations	Revised compliance date	Inspector
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Notes:						
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Company Name & Address: PARC DARIEN LAKE LLC 9993 Allegheny Road Darien Center, Ny 14040 dba: Darien Lake Lake Lake Lake Lake Lake Lake Lake			Contact Name: Teresa Hoover Justin Kipfer Title: Director Of Operations Safety Manager		
Business: (585) 599-5223 OPER	Business: (585) 599-5394	MAIN	e-mail:	www: godarienlake.com	
Jurisdiction: Amusement Devices	Municipality: Town of Darien Center		County: Genesee	Type of Visit: Accident	Page: 1 of 4

	ACCIDENT-INJURY REPOR			
	PERSON#1			
NAME:	GENDER	AGE	OCCUPATION Unknown	
ADDRESS: Unknown		PHYSICAL CONDITION BEFORE THE ACCIDENT Unknown		
TELEPHONE ()				
	ACCIDENT-INJURY INFORMATION	1		
DATE OF ACCIDENT Friday, June 05, 2009		OF ACCIDENT 4:55 PM	ACCIDENT TYPE SERIOUS	
BODY PARTS INVOLVED HEAD		E OF INJURIES EELING ON RIGHT SIDE	MEDICAL TREATMENT HOSIPTALIZATION	
	SOURCE OF INFORMATION	DATE RECEIVED June 5, 2009		
	MECHANISM OF INJURIES			
	E01110145151	NI (OL) (ED (ODEOIEIO)	DEDCONTINIONA	

MECHANISM OF INJURIES			
EQUIPMENT INVOLVED (GENERAL) WATERSLIDE	EQUIPMENT INVOLVED (SPECIFIC)	PERSON IN CHARGE TERESA HOOVER	
LOCATION OF EQUIPMENT DARIEN LAKE THEME PARK	POTENTIAL CODE RULE VIOLATIONS	TITLE DIR. OF OPERATIONS	
POTENTIAL ACCIDENT CAUSE	NONE		

NUMBER OF Select INJURIES Select =	ORDERS PENDING? Select
CORRECTIVE ACTIONS CURRENTLY REQUIRED	
	LAST INSPECTION May 18, 2009
	Select =

	LIST OF WITNESSES		
NAME: CONTACT	NAME: CONTACT ()	NAME: CONTACT ()	
NAME: D.P. Dygert	ORDERS ISSUED □		DATE: June 9, 2009

NAME: David P. Dygert



PROGRAM MANAGER Industry Inspection Bureau State Office Building Campus, Room 157 Albany, New York 12240-0100 (518) 457-1327 voice

DATE: June 9, 2009

Company Name & Address: PARC DARIEN LAKE LLC 9993 Allegheny Rd Darien Center, Ny 14040	·	dba: Darien La FEIN: 20-84908 Site Location: 9993 Allegheny		Contact Name: Teresa Hoover Justin Kipfer Title: Director Of Operations Safety Manager	•
Business: (585) 599-5223 OPER	Business: (585) 599-5394	MAIN_	e-mail:	www: godarienlake.com	
Jurisdiction: Amusement Devices	Municipality: Town of Darien	Center	County: Genesee	Type of Visit: Accident	Page: 2 of 4

_	9993 Allegh	eny Rd	Safety Manager	
Business:	Business:	e-mail:	www:	
(585) 599-5223 OPER	(585) 599-5394 MAIN		godarienlake.com	Page:
Jurisdiction:	Municipality:	County: Genesee	Type of Visit: Accident	2 of 4
Amusement Devices	Town of Darien Center	Geriesee	Academ	2014
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		ADDENDUM		
NOTES:				
On Friday, June 5, 200	O Torogo Hogyor Director	of Operations at I	Darien Lake Theme Park in Darien	Center New York
On Friday, June 5, 200	s injured perior that day w	chilo ridina a dout	ble tube in the 'Cuda Falls waterslice	to The injured quest
reported that a guest wa	s injured, earlier that day, w	Tille Holling a doub	cuffered a head injury when t	the tube
, who res	ides at	augustus and while	, suffered a head injury when t	ille tube was
riding on with	address unknown	, overturned while	descending the slide.	22 ovnisos Mov
The 'Cuda Falls Water	slide (Manufactured by Wa	terworld Products	, serial # 1807, N.Y. permit # A-76	35 - expires iviay
2010) is a typical waters	lide in which riders sit on in	flated tubes (Pho	to # 1). The structure is comprised	or rour separate
fiberglass slides starting	from a common starter poo	ol (Photo # 2) and	emptying into a common catch po	ool (Photo # 3).
Signage which includes	a description of the ride, sa	fety information a	ind slide rules is posted at the entra	ance (Photo #4). In
addition, a sign including	instructions and proper rid	ling positions is po	osted at both the entrance and star	rter pool (Photo # 5).
The water volume in the	slide is monitored at the st	arting pool by the	slide attendants observing that the	e water level in
starting pool is near the	bottom of the vellow line are	ound the top edge	e of the starting pool (Photo # 6). T	he slide which
			ne left) includes a section, mid-way	
where the 'U' shaped sli	de trough widens and has a	flat bottom (Pho	to # 7). This area, commonly referr	red to as the 'tub'.
functions as a braking n	not to slow the tubes before	entering the cate	ch pool at the bottom. It is in the tu	rn directly above the
			Snyder was riding on overturned.	
Asserting to the First	Aid Papart filed by Erank G	alland the EMT	who treated the second that the sc	ene was seated
According to the First	Ald Report filed by Frank G	allatiu, tile E.ivi. i	roached at 5:00 P.M was	chie, was sealed
outside the entrance to	the Cuda Falls waterslide a	he vision in	abt ave that the right side tippled	and that "it burte a let"
right side of the nead ar	nad lost t	ne vision in	ght eye, that right side tingled	their and reducted and
explained that	had hit head after the ra	was riding	at the waterslide overturned. After	being evaluated and
		DE rie County Me	dical Center by Mercy Flight helico	pter at 5:46 P.M.,
where was admitted	j.			
According to writte	en statement	a Darien Lak	ce employee, was walking up the s	tairs leading to the top
of the slide structure at	the time of the incident.	observed Control	and overturn in	the section of the
			ead. After yelling to the attendants	
stop dispatching riders.	turned back and saw the	em get back on th	eir tube and continue down the slid	de "as if nothing were
wrong".	_	-		_
I was unable to intervi	ew as as was	still hospitalized	and no response has been receive	d to a message left on
the cell phone of				
	en Lake management close	d the 'Cuda Falls	waterslide at approximately 5:30 F	P.M., The following
			Lake staff and myself. No structura	
			rslide was reopened. While perfor	
possible continuumg lat	out observing success siding	the waterslide as	o unusual occurrences were obser	way mina a annaednem
operational inspection a	ind observing guests riding	ule water Silve, 110	Juliusual occultetices were obset	YGU,
Attached con the fellow	inn dee			
Attached are the follow		0.00	hata Dianlau (DOCU 009) 0 =====	
1. Incident Report (DO			hoto Display (DOSH 998) 2 pages	
3. Darien Lake First Aid			ritten Statement from	· Chaoldigh for
5. Darien Lake Daily In	spection for 'Cuda Falls 6-5		arien Lake Aquatic safety & Qualit	y Unecklist for
			uda Falls 6/5/09	
7. Copy of New York S	tate Amusement Device Pe	ermit # A-7633		

ORDERS ISSUED [



State of New York - Department of Labor Division of Safety and Health

☑ PERMIT TO OPERATE AN AMUSEMENT DEVICE PERMIT TO USE A ☐ VIEWING STAND AND/OR ☐ TENT

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ANY AMUSEMENT DEVICE VIEWING STAND OR TENT ACCIDENT WHICH RESULTS IN A SERIOUS INJURY MUST BE REPORTED TO THE PROGRAM MANAGER FOR INDUSTRY INSPECTIONS PRIOR TO THE CLOSE OF THE NEXT BUSINESS DAY. THE MANAGER IS LOCATED IN NUMBER (518) 485-8054.

	ddress Lake-LLC eny Road,	包 d	<u>.</u>	ORMATI Lesson 4040			3. TypeWater:	Flume Ride-
4. Status Temporary. Permanent	5. Claneiscation (A.D. ONLY		6. Casacity No. of Persons/2_ Maximum Weight 42	7 7		ly)	a. Name of Monufact Waterworld	· ····
8. Insurance	n. Uability	Initiala	-b. Workers' Comp.	initials	c. Disability	Initials	10. Identification No.	
Expiration Date	4/6/10	DPD	4/6/10	PPD	4/8/10	DPD	1807	
New Expiration Date	·						Rochester	13. Date of bauance
11. Permit issued By: 14; Fermit No. A. SH-82A. (7-07)	DAVID - 763		LULAR COMPANY	957	Signa pro			····



Company Name & Address: PARC DARIEN LAKE LLC 9993 Allegheny Rd Darien Center, Ny 14040		dba: Darien La FEIN: 20-84908 Site Location: 9993 Allegheny		Contact Name: Teresa Hoover Fred Kaufman Title: Director Of Operations Ride Maintenance Supen	visor
Business: (585) 599-5223 OPER	Business: (585) 599-5394 MAIN		e-mail:	www: godarienlake.com	
Jurisdiction: Amusement Devices	Municipality: Town of Darien	Center	County: Genesee	Type of Visit: Accident	Page: 1 of 2

	ACCIDENT-INJURY REPORT		
	PERSON #1		
NAME:	GENDER	AGE	OCCUPATION Unknown
ADDRESS:	PHYSICAL CONDITION BI Unkno		
TELEPHONE TELEPHONE			

	ACCIDENT-INJURY INFORMATION		
DATE OF ACCIDENT	· · · · · · · · · · · · · · · · · · ·	F ACCIDENT	ACCIDENT TYPE
Tuesday, August 12, 2008		:20 PM	SERIOUS
BODY PARTS INVOLVED		OF INJURIES	MEDICAL TREATMENT
HIP, HEAD		ACTURE	AMBULANCE
	SOURCE OF INFORMATION	DATE RECEIVED August 13, 2008	

MECHANI	ISM OF INJURIES		
EQUIPMENT INVOLVED (GENERAL) MOTOCOASTER ROLLER COASTER	EQUIPMENT INVOLVED (SPECIFIC)	PERSON IN CHARGE TERESA HOOVER	
LOCATION OF EQUIPMENT DARIEN LAKE THEME PARK RESORT	POTENTIAL CODE RULE VIOLATIONS	TITLE DIRECTOR OF OPERATIONS	
POTENTIAL ACCIDENT CAUSE			
	With the second section of the section of the second section of the section of the second section of the section		

HIS	STORICAL INFORMATION	
NUMBER OF SIMILAR ACCIDENTS PAST YEAR = 0	NUMBER OF Select INJURIES Select =	ORDERS PENDING
PREVIOUS CORRECTIVE ACTIONS TAKEN	CORRECTIVE ACTIONS CURRENTLY REQUIRED	LAST INSPECTION August 11, 2008

	LIST OF WITNESSES	
NAME.	NAME	NAME: CONTACT
NAME: David P. Dygert	ORDERS ISSUED □	DATE: September 8, 2008



PARC DARIEN LAKE LLC 9993 Allegheny Rd Darien Center, Ny 14040		dba: Darien L FEIN: 20-8490 Site Location: 9993 Allegheny		Contact Name: Teresa Hoover Fred Kaufman Title: Director Of Operations Ride Maintenance Supervis	Teresa Hoover Fred Kaufman Title: Director Of Operations	
Business: (585) 599-5223 OPER	Business: (585) 599-5394 MAIN		e-mail:	www: godarienlake.com		
Jurisdiction: Amusement Devices	Municipality: Town of Darien Center		County: Genesee	Type of Visit: Accident	Page: 1 of 1	

		ADDENDUM		
NOTES:		•		
York, reported that a guest disembarking from the 'Moto loaded, when the accident dexited from the wrong side of the state	was injured, on Tuesday, oCoaster' amusement rid occurred. of the train and fell off the saresult of the fall.	August 12, 2008, at e. The roller coaster platform to the grou	approximately 4:20 P.I train was in the station and below, a distance of	n, in the process of being was injured when
two, single passenger moto level with the station platfor three employees. The operation	rcycles, side by side. When the mean of the mean of the mean of the second to the platform once / exit stairway located	en positioned in the solution the solution the second of the second of the second on the west side of the station platform which at the station platform platform the station platform.	station for loading / unle e east side of the station cated at the northeast so n includes the queue ling the train, where the second	on. The station is staffed by side of the station. A second nes and the entrance and exit ondary control panel is
incident. At some point dur secondary ride attendant we me to ask where the exit was did not cross over the west side. Walked off the handrail, falling to the ground	go" opened to op	aint devices were close the restraint devices a also said disect side of the station dept to the exit, local nued walking towards rough the opening be grough which devices tely 18 inches wide we	sed in preperation for seand those guests proceed not want to ride. Accomplatform, and the set of the front of the setween the front of the setween the front is approximate thile the train is rolling of	tarting the ride when two eded to the exit gate without ording to the exit gate without ording to the exit gate without the station. However, the down the platform on the first motorcycycle and the ely 3 feet wide when the train out of the station (see photo
				d to refer all questions to er than being told to "walk the
Center in Batavia where			was transported to	United Memorial Medical
After was tre MotoCoaster has a current				imed normal operation. The
NAME: David P. Dygert		ORDERS ISSUED [DATE: September 8, 2008



STATE OF NEW YORK - DEPARTMENT OF LABOR DIVISION OF SAFETY AND HEALTH

笆 PERMIT TO OPERATE AN AMUSEMENT DEVICE PERMIT TO USE A □ VIEWING STAND AND/OR □ TENT

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MOWIRE (218) 482-20								
			PERMIT INFO	ORMATI	ON			<u> </u>
1 NAME AND MALING PARC DATION L 9993 Alleghen					Darien La Theme Par		BOTE MOT	o Conster
4. STATUS Temporary Permanent	5. CLASSIFICAT (A.D. ONLY)		6. CAPACITY No. of Persons 3/	ري ندج <u>آ</u> وتوارجهان	7. MAXIMUM S (A.D. ONL	۲) ۶	B. NAME OF MANL ・ Zタック VICマッナ	FACTURER OR IN J.
9. INSURANCE	B. LIABILITY	Initials	b. WORKERS' COMP.	Initials	c. DISABILITY	fnitials	10. IDENTIFICATION	043 25 US
Expiration Date	4-6-09	Rus	4-6-09	Cont	4-6-199	Right	12. DIST. OFF.	13. DATE OF ISSUANCE
New Expiration Date				1			0.6	5-7-08
11. PERMIT ISSUED B		Prim Ni	ABROWN I	ska .	Signature /	n.	aut	Ammi
14 PERMIT NO. SH-82A (3-04)	7 4100			_,,				finant, Acting Director MISSIONER OF LABOR



Company Name & Address: PARC DARIEN LAKE LLC 9993 Allegheny Rd Darien Center, Ny 14040 dba: Darien La FEIN: 20-84908 Site Location: 9993 Allegheny		Title: Director Of Operations		sor	
Business: (585) 599-5223 OPER	Business: (585) 599-5394	MAIN	e-mail:	www: godarienlake.com	
Jurisdiction: Amusement Devices	Municipality: Town of Darien Center		County: Genesee	Type of Visit: Accident	Page: 1 of 2

	ACCIDENT-INJURY REPORT								
PERSON #1									
NAME:	GENDER	AGE	OCCUPATION Ride Operator						
ADDRESS:	PHYSICAL CONDITION BE Unkno								
TELEPHONE ()		Till and the second second							

	ACCIDENT-INJURY INFORMATION	N			
DATE OF ACCIDENT Wednesday, August 13, 2008		TIME OF ACCIDENT 8:00 AM			
BODY PARTS INVOLVED TAILBONE, RIBS		NATURE OF INJURIES FRACTURE			
	SOURCE OF INFORMATION	DATE RECEIVED August 14, 2008	±2 × × 1 × 1		

MECHANISM OF INJURIES								
	EQUIPMENT INVOLVED (GENER ROCKWALL	AL)	EQUIPMENT INVOLVED (SPECIFIC)	PERSON IN CHARGE RON BRIGHAM				
LOCATION OF EQUIPMENT DARIEN LAKE THEME PARK RESORT POTENTIAL ACCIDENT CAUSE			POTENTIAL CODE RULE VIOLATIONS	TITLE ATTRACTION MANAGER				
25.3	N. 1. 187 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1							

HIS	STORICAL INFORMATION		
NUMBER OF SIMILAR Select Select =	NUMBER OF Select INJURIES Select =	ORDERS PENDING?	
PREVIOUS CORRECTIVE ACTIONS TAKEN	CORRECTIVE ACTIONS CURRENTLY REQUIRED	LAST INSPECTION August 11, 2008	

	LIST OF WITNESSES	
NAME: CONTACT:	NAME: CONTACT;	NAME: CONTACT
NAME: David P. Dygert	ORDERS ISSUED □	DATE: August 20, 2008



PARC DARIEN LAKE LLC 9993 Allegheny Road Darien Center, Ny 14040 FEIN: 20-84 Site Locatio		dba: Darien La FEIN: 20-84908 Site Location: 9993 Allegheny		Contact Name: Teresa Hoover Fred Kaufman Title: Director Of Operations Ride Maintenance Manage	Teresa Hoover Fred Kaufman Title: Director Of Operations	
Business: (585) 599-5223 OPER	Business: (585) 599-5394 MANT		e-mail:	www: godarienlake.com		
Jurisdiction: Amusement Devices	Municipality: Town of Darien Center		County: Genesee	Type of Visit: Accident	Page: 2 of 2	

		AD	DENDUM			
NOTES:						
On Tuesday, August 13, 2, park in Darien Center, Nev and a patron, observe connected to the auto-be momentarily hung by a second	v York. Two op were assigned ed Example lin lay cable.	erators, I to work at the R nbing the more di further	ockwall from 4 P.I fficult section of th observed that on	M. until closing. le wall while we ce	At approximately	8 P.M., thich was not
	king up climbir nding on the p	ng harnesses for adding at the bas narness on but ne	two boys when e of the west side	heard a scree of the wall. Acc	es." was treat	At ed by Darien
The Rock Wall structure permanent installation and The ride has a current N' opening that day, as per noted.	chored to a co YS permit to o	ncrete base. The perate, issued or	auto belay syster n 5-19-08 (copy a	m was manufac ttached). The ri	tured by Extreme de was also inspe	Engineering.
partial is a intermediate intermediate language and Endagge and Endagge and Endagge and Endagge intermediate	nglish. The train I summers. The that the carab tart. [Page 19 is for situations the purpose of the perators to cli	he operator's train biner, which conner of the 'Standard where the operator f assisting a gues mb the wall during	ning program for the cts the harness to Operating Proce or would need to put in desending. In any slow times when	international em ne Rock Wall ac the auto-belay dure' (attached) ut on a harness order to gain ex en they aren't a	ddresses the import cable, is properly of cable, is properly of and use an adjace operience and expensisting customer	een employed rtance of and closed before e S.O.P. also ent auto-belay ertise, Darien s. Attractions
After the accident, the ride Labor and Darien Lake ope					inspected by the C	Department of
NAME: David P. Dygert		ORDE	RS ISSUED 🗌		DATE: Aug	gust 20, 2008



STATE OF NEW YORK - DEPARTMENT OF LABOR DIVISION OF SAFETY AND HEALTH

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			PERMIT INFO	ORMATI	ON				j
PARC Darien La 1993 Alleghen					Datiene Par Theme Par		3. TYPE ROC	k Wall	
4. STATUS Temporary Permanent	5. CLASSIFICAT (A.D. ONLY)	ION	6. CAPACITY No. of Persons (A) Maximum Weight (A) Z 50.11	Ib MI		10	8. NAME OF MANIL EXTREMA (13.5 SOLID ROCK	JFACTURER E ENGINEERING CLAY SYSTEM LWANSYSTEMS () WA-1
9. INSURANCE	a. LIABILITY	Initials	b. WORKERS COMP.	Initials	c. DISABILITY	Initials	10. IDENTIFICATION	on no. -167	
Expiration Date	4-6-09	OPO	4-6-69	060	4-8-09	DPD	12. DIST. OFF.	13. DATE OF ISSUANCE	
New Expiration Date							08	5-19-08	
11. PERMIT ISSUED BY	DAVID 4158			\ ~ ~	Signature		Anthony Ge	mago, Acting Director	
SH-82A (3-04)							FOR THE COM	MISSIONER OF LABOR	j