



**Rhode Island State Police**  
**Planning, Research & Accreditation Unit**  
 311 Danielson Pike, North Scituate, RI 02857  
 Phone: (401) 444-1000



**Rollover Simulator**

The Rollover Simulator simulates a motor vehicle in a rollover crash utilizing dummies that are belted and unbelted. The simulator demonstrates that when seatbelts are used properly, they can save lives. The Rollover Simulator is available free of charge on a limited basis for events that meet certain criteria. The Rollover Simulator is available from the last week of March to October 30th, due to weather conditions and funding guidelines.



**Criteria**

- A paved, level outdoor surface measuring at least 30 feet x 60 feet
- Rain-free climate during spring, summer and early fall
- Over 200 people
- **Electricity, 120-volt power outlet**

**Duration**

- Each demonstration lasts about 45 minutes
- Set-up time and travel time about 2 hours

**Target Audience**

- All ages

If you would like to request the simulator for a special event and if the upcoming event meets the criteria, email a completed ***Rollover Simulator Request Form*** to both of the email addresses below:

<b>Sergeant Gregory Cunningham</b>	<a href="mailto:gregory.cunningham@risp.gov">gregory.cunningham@risp.gov</a>
<b>Trooper Wesley Pennington</b>	<a href="mailto:wesley.pennington@risp.gov">wesley.pennington@risp.gov</a>

**NOTE: All requests must be made at least three (3) to four (4) weeks prior to the event.**

If your upcoming event meets the criteria, the request will be considered and you will be contacted. To ensure fair and equitable treatment, your request will be considered in order of receipt. All Rollover Simulator details are dependent on available grant funding and adequate staffing levels.



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**Rollover Simulator Request Form**

**ORGANIZATION INFORMATION**

<b>Organization Name:</b>		<b>Office Telephone:</b>	
<b>Address:</b>	<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

**CONTACT PERSON INFORMATION**

<b>Contact Name:</b>		
<b>Office Telephone:</b>	<b>Cell Phone:</b>	<b>E-Mail Address:</b>

**EVENT INFORMATION**

<b>Type of Event:</b>	<b>Address of Event:</b>
<b>Date:</b>	<b>Time:</b>
<b>Estimated Attendance:</b>	<b>Audience Type (i.e. teens, senior citizens, general public):</b>
<b>Type of Advertising (i.e. flyers, newspaper ads, news coverage):</b>	
<b>Please describe the event site and estimate size:</b>	