MONMOUTHSHIRE
EVENTS SAFETY ADVISORY GROUP

Safety and Welfare at Events

EVENTS NOTIFICATION FORM

Section 1 - EVENT OVERVIEW

Name of the event:	
Event Type **(e.g. sponsored walk, fun day):**	
Event location:	
Event date:	
Event opening times:	**From** _____:_____ **to** _____:_____
Date and time of arrival on site:	
Date and time of departure from site:	
Anticipated number of people attending per day:	<50 ☐ 50 – 99 ☐ 100 – 199 ☐ 200 -499 ☐ 500 – 999 ☐ 1000 – 2000 ☐ >2000 ☐ If more than 2000, please state number anticipated each day: _____ Maximum number of people expected on site at any one time: _____

Further forms and information available at:
www.monmouthshire.gov.uk/licensing/safety-advisory-group

If any section is not relevant to your event, please write N/A and go to the next section.

Section 2 - ORGANISER DETAILS	
Name of organisation	
Event Organiser/s Name	
Contact address	Postcode
Tel. No.	(day) (evening)
Mobile No.	
Email address	
Contact Tel No. on day of event:	
Please gives details of any previous experience the organiser has in running such an event:	

Section 3 – EVENT DETAILS		
Please provide a description of event:		
Will your event involve any display of Fireworks? (please circle)	YES	NO

	Type:	**Please tick**
Will any of the following take place at the event?	Sale of Alcohol	
	Live/recorded music	
	Dancing	
	Exhibitions of films	
	Indoor sporting events	
	Sale of Hot Food and Drink after 11pm and before 5am	
	The sale of goods or services	
	Inflatables (bouncy castles)	
	Fair rides/children's rides	

	Other entertainment i.e. zorbing, bungee jumping (please state)	
	Animals (including reptiles)	
	Beauty treatments/regulated treatments (acupuncture, tattooing etc.)	

Please provide details of the entertainment to be held and the items you intend to sell at the event:

Section 4 - CATERING

If hot/cold food or drink is to be supplied as part of your event, please give details:

Will food be: **hot** / **cold** / **both** (please circle)

Times that hot food will be available: from _____:_____ to _____:_____

All food/drink traders must be registered with their home (local) authority under the requirements of the food hygiene regulations? Provide details of Local Authorities. Also provide the Food Hygiene Rating Score (FHRS) for each trader.

Will food traders have access to a potable water supply (clean, uncontaminated and suitable for drinking) to facilitate hand washing, washing of equipment and food preparation?

(Please provide a list of all traders with contact details including forwarding addresses with this application form)

Will any of the food be **on sale** during the event?	YES	NO

Section 5 - PUBLIC LIABILITY INSURANCE (essential for all events):

Name of insurance company	
Policy number	
Amount of cover	**£**

Section 6 - STEWARDS		
Number of stewards	Pit area (if stage)	
	Entrance or exit	
	Vehicle parking	
	Patrols	
	Other	
	Total	
Name and address of security company (if applicable)		
Contact name and telephone number		
How will any emergencies be communicated to stewards?		

Section 7 - COMMUNICATIONS		
Will radios be used?	YES	NO
Is there a Public Announcement System?	YES	NO
Is it capable of being silenced in an emergency?	YES	NO

Section 8 – TEMPORARY STRUCTURES ***e.g. Stage, dance platforms or marquees***		
Will temporary structures be erected?	YES	NO
If yes, please provide details of the type, size and number, and attach detailed structural drawings from the Supply/Building Company where appropriate:		

Section 9 – WELFARE FACILITIES			
Sanitary conveniences - *please record the number of each to be provided:*			
Male	No. WCs	No. Urinals	Number of Wash Hand basins
Female	No. WCs		Number of Wash Hand basins
Disabled	No. WCs		Number of Wash Hand basins

Will drinking water be provided?	YES	NO

Section 10 – ELECTRICAL SYSTEMS		
The electrical system for the event must be installed by a competent person. Provide details below of the person installing the system and how the electrical system is protected and made safe :		
Will emergency lighting be provided?	YES	NO
Will generators and/or transformers be used?	YES	NO
Will RCD's be used?	YES	NO
Section 11 – SPECIAL EFFECTS – *Will any of the following be used during the event?*		
Please circle: Lasers/Strobe lighting/Ultraviolet light/Pyrotechnics/Smoke/Fog Machines Other (please state):		
Section 12 – CHILD SAFETY POLICY		
Do you have a child policy in place?	YES	NO
Do you have persons who have had a Disclosure and Barring Service check (DBS)?	YES	NO
Do you have a post allocated for lost children?	YES	NO
Do you have a PA announcement system at the event?	YES	NO

Section 13 – FIRST AID – provide details of the arrangements for the following:	
First Aiders	
First Aid Post	
Ambulances	
Paramedics	
Name of Organisation providing these facilities	

Section 14 – FIRE SAFETY		
Have you prepared a fire risk assessment for the event?	YES	NO
Further information on fire safety is available at: http://www.communities.gov.uk/publications/fire/firesafetyassessment and http://www.communities.gov.uk/documents/fire/pdf/158379.pdf		
Section 15 – HIGHWAYS		
Is the event held on public highway?	YES	NO
Name Streets involved:		
Will you require a works embargo on the highways being used? *A works embargo stops any planned highway works from taking place on the Public Highway, such as traffic lights or even road closures. Without a works embargo in place, it could potentially seriously disrupt your event. However, it cannot stop emergency works from taking place.*	YES	NO
Will the highway need to be temporarily closed?	YES	NO
Will the footway need to be temporarily closed?	YES	NO
Is the event held on Council owned land?	YES	NO
Will your event have an impact on the normal flow of traffic?	YES	NO
Please give details of any car parking arrangements and the estimated number of vehicles attending the event each day:		
If your event will have an impact on traffic flow please provide a traffic management plan (diagram/map) indicating position of traffic signs, barriers, marshals, etc – see www.monmouthshire.gov.uk/licensing/safety-advisory-group for example traffic management plans.		

Section 16 – EMERGENCY PLANNING		
	YES	**NO**
Has an emergency plan of action been established?		
Does your event emergency plan include arrangements for:		
Identification of key decision making personnel		
Stopping the event		
Identification of emergency routes		
Holding areas: performers/audience		
Coded 'stand down' and 'alert' messages		
Script of public address announcements		
Rendezvous points for emergency services		
Ambulance loading points and triage area		

Secure traffic routes to hospitals?		

Section 17 – VENUE AND SITE DESIGN ***Provide a detailed site plan and clearly identify the following where applicable***	
Entry and exit points	Stage
Perimeter fencing	Mixing and delay towers
Seating arrangements	Sanitary accommodation
Stairways and ramps	Lost property
Slopes	Meeting point
Disabled viewing areas	Lost children
First Aid	Public telephones
Location of stewards	Emergency access/egress routes
Video screens	Control Centre

PLEASE PROVIDE ANY OTHER INFORMATION YOU FEEL IS RELEVANT TO THIS APPLICATION

SUPPORTING DOCUMENTATION
Please ensure that you have included all relevant documents as part of this application

If not attached with this application, they must be sent to the Monmouthshire Events Safety Advisory Group (ESAG) at least six weeks before the event in order for the group to support the event.

Mandatory Documents	**Tick if attached**	**Date documents will be available if not attached**
Risk Assessments		
Public/Employer Liability Insurance		
Map/Plan of site		
Emergency Plan		
Other documents:		
List of food/drink traders and contact details		
Traffic management plan (if applicable)		
Route (run/walk/cycle/parade) (if applicable)		
Technical drawings of temporary structures (if applicable)		
Event Insurance (mandatory for some venues)		

FURTHER INFORMATION:
You may wish to discuss your proposals with the appropriate services as part of your planning process:

Service	**Contact Tel No.**	**Name of Person Contacted**	**Date Contacted**
Ambulance Service	01633 626262		
South Wales Fire and Rescue Service	01443 232500		

Gwent Police Traffic Management Gwent Police Force Planning Team	01633 642276 01633 645747		
Licensing	01633 644644		
Health and Safety			
Food Safety			
Environmental Protection Team			
Building Control			
Highways			
Emergency Planning			
Leisure Facilities			
Recreational Sites			
Area One Stop Shops			

The Criminal Records Bureau (CRB) and the Independent Safeguarding Authority (ISA) have merged to become the **Disclosure and Barring Service (DBS).** CRB checks are now called **DBS** checks and act to reduce the risk of abuse by ensuring that those who are unsuitable are not able to work with children and vulnerable adults. If you or your staff will be in direct contact with children or vulnerable adults at your event we recommend that you complete a disclosure application form available from:

https://www.gov.uk/government/organisations/disclosure-and-barring-service

Please return *(if possible by e mail)* to:

Events Safety Advisory Group
Monmouthshire County Council
The Drama Centre
Pen-y-Pound
Abergavenny
NP7 5UD

Tel No: (01873) 735420
Email: licensing@monmouthshire.gov.uk