

RHS RISK ASSESSMENT FORM 2018

It is recommended that this form is completed by a trained/competent Health & Safety person and that it is completed using **BLOCK CAPITALS**.

The completed Risk Assessment should cover **all** the 'Risks' associated with the **build-up, breakdown and general running** of your stand. You must endeavour to remove or reduce these risks and protect people from harm.

Failure to comply with this requirement will result in you being removed from the site.

This signed and completed form must be maintained and available for inspection by the Health & Safety Executive, Event Organiser and Council Officials at all times. A copy must also be sent to the Trade Stand department at time of application form.

If you have your own Risk Assessment paperwork in place then we are happy to accept it; provided it is deemed to be suitable and sufficient by our H&S Advisers.

IT IS YOUR RESPONSIBILITY TO ENSURE THAT SUITABLE AND SUFFICIENT RISK ASSESSMENTS AND FIRE RISK ASSESSMENTS ARE CARRIED OUT FOR YOUR UNDERTAKING (OPERATIONS).

| | |
|---|--|
| Company Name: | |
| Address: | |
| Name, Telephone & Email Contact Details: | |
| Description of Stand, design, layout, contents, type of product/s on display and processes being assessed i.e. build-up, during Show & breakdown. Please include details of your procedure for dealing with conditions such as high wind speeds. | |

ARE YOU EMPLOYING A CONTRACTOR TO MANAGE THE STAND BUILD YES / NO
If Yes please provide details of the company and enclose their H&S paperwork

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WILL YOU BE USING ANY EXTERNAL / INDEPENDENT COMPANIES TO BUILD OR SUPPLY ANY OF YOUR STAND YES / NO
If Yes please provide details of the company and enclose their H&S paperwork

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WILL YOU OR ANY APPOINTED CONTRACTORS BE BREAKING THE GROUND SURFACE OF THE STAND YES / NO
If Yes the person (company) breaking the surface **MUST** have a completed permit to break the ground application form before they start any work. Has this application form been completed and submitted to the Trade Stand Department? If not please do so by 1st May 2018

WILL YOU BE USING ANY EXTERNAL / INDEPENDENT COMPANIES TO DELIVER AND ASSIST WITH ANY OF YOUR STAND BUILD OR STAND ACTIVITIES YES / NO
If Yes please provide details of the company and enclosed their H&S paperwork

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DO YOU HAVE PUBLIC LIABILITY INSURANCE? YES / NO
Please provide details of cover and provide copy of Insurance certificate

BUILD UP:

| Hazard | PERSONS AT RISK | Severity (H/M/L) | Likelihood (H/M/L) | Control Measures To minimise Risk | Overall Rating (With Controls) |
|--------|-----------------|------------------|--------------------|-----------------------------------|--------------------------------|
| | | | | | |
| | | | | | |
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DURING SHOW/ GENERAL:

| Hazard | PERSONS AT RISK | Severity (H/M/L) | Likelihood (H/M/L) | Control Measures To minimise Risk | Overall Rating (With Controls) |
|--------|-----------------|------------------|--------------------|-----------------------------------|--------------------------------|
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BREAKDOWN:

| Hazard | PERSONS AT RISK | Severity (H/M/L) | Likelihood (H/M/L) | Control Measures To minimise Risk | Overall Rating (With Controls) |
|--------|-----------------|------------------|--------------------|-----------------------------------|--------------------------------|
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RISK ESTIMATION TABLE:

| RISK RATING = SEVERITY x LIKELIHOOD | | |
|-------------------------------------|--|----------------------------------|
| RATING | SEVERITY (of injury/disease) | LIKELIHOOD of occurrence |
| HIGH | Fatality; major injury or illness causing long term disability | Certain or near certain to occur |
| MEDIUM | Injury or illness causing short term disability | Reasonably likely to occur |
| LOW | Other injury or illness | Unlikely to occur |

| | | | |
|---|--|-----------------------------------|---|
| Date Completed: | | OVERALL ASSESSMENT RESULT: | Low/Medium/ High |
| Signature: | | Further action required: | Yes/No (If YES Please attach) |
| Name & Designation of person completing form: | | External Contractors being Used | Yes/No (If YES Please attach details and copy of the Contractors Risk Assessments) |

RHS FIRE RISK ASSESSMENT FORM 2018

The completed Fire Risk Assessment should cover **all** the 'Fire Risks' associated with the **build-up, breakdown and general running** of your stand. You must endeavour to remove or reduce these risks and protect people from fire.

You **MUST answer ALL** the following **questions** by ticking the appropriate box.

| | YES | NO | N/A |
|---|-----|----|-----|
| 1. Are adequate exits provided for the numbers of persons within the unit/stand? (Are the staff and customers able to evacuate if the normal exit is blocked?) | | | |
| 2. Where necessary, are there sufficient directional signs indicating the appropriate escape route and do they comply with current regulations? | | | |
| 3. Are the exits maintained available, unobstructed and unlocked at all times the premises are in use? | | | |
| 4. If the normal lighting failed would the occupants be able to make a safe exit? (consider back up lighting such as torches) | | | |
| 5. Do you ensure that your marquee never becomes overcrowded to guarantee the safe escape if the occupants in the event of a Fire? | | | |
| 6. Is all electrical equipment PAT tested by a competent person and kept in a safe condition? | | | |
| If Yes to No 6 please bring copies of all PAT certification with you to the Show (& provide copies with this form, if able) | | | |
| 7. Do you have an adequate number of fire extinguishers/fire blankets available in prominent positions and easily available for use? | | | |
| If you said Yes to No 7 please provide details of what fire equipment you will have onsite: | | | |
| 8. Has the fire-fighting equipment been tested within the last 12 months? Note: a certificate of compliance will normally be required and should be brought with you. | | | |
| 9. Have any of the staff been instructed on how to operate the fire-fighting equipment provided? Note: equipment should only be used by trained personnel | | | |
| 10. Have all staff been made aware of what to do should an incident occur, how to raise the alarm, evacuate the stand as well as the exit locations? | | | |
| 11. Have you identified combustible materials that could promote fire spread beyond the point of ignition such as paper/cardboard, bottled L.P.G. etc. and reduce the risk of them being involved in an incident? | | | |
| If you said yes to No 11 please provide more info. | | | |
| 12. Have you identified all ignition sources and ensured that they are kept away from all flammable materials? | | | |
| 13. Are the structure/roofing/walls and fittings of your stand flame retardant? Note: a certificate of compliance will normally be required. | | | |
| 14. If any staff sleep in the stand is there a working smoke detector and a clear exit route at night? Note: Persons should not be allowed to sleep within high risk areas. | | | |
| If any staff will be sleeping onsite please give details and number of staff who will be staying overnight below: | | | |

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| 15. Are you aware that you must not stock or sell certain items listed within the Trade Exhibitor Guide i.e. fireworks, garden flares etc.? | | | |
| 16. Do you have sufficient bins for refuse collection within your stand? | | | |
| 17. Are you aware that only silent running generators, fully serviced/maintained and certified for safe use are permitted on site? | | | |
| 18. Do you have an inspection/gas safe certificate for the appliances and pipework (copy to be available for inspection) and are all hose connections made with 'crimped' fastenings? | | | |
| If Yes to No 18 please provide copies of all Gas safety certification and bring them along to the Show with you. | | | |
| 19. Are the L.P.G cylinders kept outside, secured in the upright position and out of the reach of the general public? | | | |
| 20. Are appliances fixed securely on a firm non-combustible heat insulating base and surrounded by shields of similar material on three sides? | | | |
| 21. Are the L.P.G. cylinders located away from entrances, emergency exits and circulation areas? | | | |
| 22. Are the L.P.G cylinders readily accessible to enable easy isolation in case of an emergency? | | | |
| 23. Do you ensure that all gas supplies are isolated at the cylinder, as well as the appliance when the apparatus is not in use? | | | |
| 24. Do you ensure that only those L.P.G. cylinders in use are kept at your stand? Any spares should be kept to a minimum and in line with an specific conditions for the event | | | |
| 25. Is a member of staff, appropriately trained in the safe use of L.P.G., present in the stand at all times? | | | |
| If you are using/ will have L.P.G onsite please provide detailed risk assessment for use, below or attached: | | | |

**If the answer to any of the above questions is 'No',
Please detail the actions you have taken to remedy the situation.**

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| Date Completed: | |
| Signature: | |
| Name & Designation of person completing form: | |

PLEASE NOTE: This document does not preclude you from possible prosecution or removal from the site by organisers, should a subsequent inspection reveal unsatisfactory standards.