

EVENT NOTIFICATION FORM – Initial Outline

This form will be circulated to members of the North Yorkshire Safety Advisory Group (SAG) for the purpose of notifying key agencies (Police, Licensing, NYCC Highways etc) that an event is taking place.

This form acts as the initial brief to highlight to members of the SAG the nature and size of your event. It will enable key agencies to provide advice and guidance on specific aspects of your event (road closures, licensing requirements) helping to inform safe planning and delivery of your event; minimising the risk to public safety.

Whilst this is an initial notification of your event, please complete each section in as much detail as possible so that the relevant key agencies can provide the correct level of support and guidance.

Please refer to the supporting guidelines for submission details and timescales.

1. EVENT DETAILS

Please complete each section and provide as much detail as possible in relation to the type and nature of your event. **(Please tick as appropriate – double click on the box and select ‘checked’ and then click ok)**

1.1 Name of Event	
1.2 Type of Event	
1.3 Date of Event	
1.4 Nature of Event	<input type="checkbox"/> Charitable event <input type="checkbox"/> Voluntary / Community Event <input type="checkbox"/> Commercial event <input type="checkbox"/> Private event
1.5 Description of Event Activity	(Please provide an overview of what will be happening)
1.6 Event Audience	Is the event open to: <input type="checkbox"/> Under 18's <input type="checkbox"/> Adults (18+) only <input type="checkbox"/> Families <input type="checkbox"/> Whole community (open to all ages)

	Please state expected numbers Spectators - Participants -
1.7 Event Start/Finish times	Set up start date/time - Start of event - Finish of event – Site cleared by (date/time) -
1.8 Is there a charge to the public to take part in the event	(If yes, please provide details)
1.9 Has the event been held before?	(If yes, please provide details)
1.10 If your event has been held before, do you plan to operate as per previous events or will there be any significant changes?	

2. EVENT ORGANISERS DETAILS

Please complete each section.

Name of Event Organiser/Manager	
Name of Organisation	
Address	
Email	
Tel No	
Fax No	
Has your organisation and/or the event manager ever been convicted or found negligent in the planning or staging of an event.	

3. EVENT LOCATION

Please complete the location details of your event. If your event is in more than one location or on a public highway please specify the details. If possible please include a site map.

Main Location of Event	Land Owner(s) (Including address)
Have you been granted permission to use the land by the land owner?	
If yes, please state the person(s) who granted permission and their contact details (Refer to Land Ownership Document)	

4. LICENSING DETAILS

Please complete each section. The information contained within this section will help determine if a licence is required.

4.1 Licensable Activity 1 - Will there be alcohol at the event?	<input type="checkbox"/> There will be no alcohol at the event <input type="checkbox"/> We are selling alcohol <input type="checkbox"/> We are serving alcohol (No sale) <input type="checkbox"/> Public can bring their own
4.2 Licensable Activity 2 - Will there be regulated entertainment? (If you have ticked yes to one or more of these, your event will need to be covered by a license)	<input type="checkbox"/> Live music <input type="checkbox"/> Performance of a Play(s) <input type="checkbox"/> An exhibition of a Film(s) <input type="checkbox"/> Playing of recorded music <input type="checkbox"/> Performance of dance <input type="checkbox"/> Provision for making music <input type="checkbox"/> Provision of facilities for dance <input type="checkbox"/> Boxing or wrestling entertainment

4.3 If you require a licence for your event have you spoken with the licensing authority?	<input type="checkbox"/> No licence required <input type="checkbox"/> The venue is already licensed <input type="checkbox"/> We are unsure if a license is required <input type="checkbox"/> We are in contact with the licensing authority <input type="checkbox"/> We have submitted an application for a TEN <input type="checkbox"/> A TEN has been approved
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5. EVENT HEALTH AND SAFETY DETAILS

Please complete each section.

5.1 Will food be served at your event? (If you are providing food/drink to the public you will be required to submit a list of catering suppliers)	<input type="checkbox"/> Food will not be provided <input type="checkbox"/> Food will be provided by professional caterers <input type="checkbox"/> Food will be provided by local restaurants <input type="checkbox"/> Participants will bring their own (for individual consumption only)
5.2 Will the event create any noise (spoken word/PA system, etc)?	<input type="checkbox"/> Recorded/live music will be played <input type="checkbox"/> Fireworks <input type="checkbox"/> Noise from the audience/spectators/participants <input type="checkbox"/> Other (please state)
5.3 Does your event have Public Liability Insurance? (Please state the level of cover i.e. £10m)	<input type="checkbox"/> Public Liability Insurance (£) <input type="checkbox"/> Employer Liability Insurance (£)
5.4 Will there be any electricity, gases be used at the event? (Please provide details of what and how it will be used) (Please note: you may be asked to provide safety inspection records)	Electricity <input type="checkbox"/> There will be electricity on site (please state) <input type="checkbox"/> There will be no electricity on site Gas <input type="checkbox"/> There will be gas on site (please state) <input type="checkbox"/> There will be no gas on site (please state)

<p>5.5 Will there be any unusual and /or high risk activities taking place at the event (Including set up and clear up)</p>	<p><input type="checkbox"/> Working at height <input type="checkbox"/> Pyrotechnics <input type="checkbox"/> Vehicle movement</p>
<p>5.6 Will any temporary structures be erected?</p>	<p><input type="checkbox"/> There will be no temporary structures <input type="checkbox"/> There will be marquees <input type="checkbox"/> There will be scaffolding <input type="checkbox"/> There will be fencing <input type="checkbox"/> There will be stage(s) <input type="checkbox"/> There will be bouncy Castles / Inflatables <input type="checkbox"/> There will be large banners/signage <input type="checkbox"/> There will be a fun Fair <input type="checkbox"/> Other (please state)</p>
<p>5.7 Who is providing first aid/medical cover? (Please provide details)</p>	
<p>5.8 Who will be responsible for the collection of waste at your event ? (Please provide details)</p> <p>NB The Council would require a copy of the duty of care notice from whoever removed the waste to ensure such waste was properly disposed of.</p>	
<p>5.9 Who will be responsible for litter collection during and after the event ? (Please give details)</p> <p>The Council will expect the site to be waste and litter free following your event</p> <p>Have you considered recycling ?</p>	

6. TRAFFIC MANAGEMENT

Please complete each section.

6.1 Does your event take place on a public highway?	<input type="checkbox"/> The event does not go onto a public highway <input type="checkbox"/> The event partly uses a public highway <input type="checkbox"/> The event is all on a public highway
6.2 Are you applying for road closures?	<input type="checkbox"/> We are applying for road closures <input type="checkbox"/> We are not applying for road closures <input type="checkbox"/> We are unsure if we need to apply for any closures
6.3 Will there be any parking requirements for your event? (please provide full details)	
6.4 Will you be using a Traffic Management company ? If so, please give full contact details	

7. SUPPORTING INFORMATION

The Safety Advisory Group recommends that as a minimum the following documents should be in place for your event.

- ☐ Public Liability Insurance
- ☐ Event Safety Plan
- ☐ Event Management Plan
- ☐ Event Risk Assessments
- ☐ Marketing / Promotional Material
- ☐ Event Site Plan

Please note: If booking an event on Public land you will be required to provide this information to the landowner to secure the site.

Please note: The Safety Advisory Group will request that all of the following documents are made accessible to SAG members for the purpose of checking measure for public safety, sharing information and contingency planning between key agencies.

The above documentation can be provided to the Safety Advisory Group at any

point but must arrive no later than 3 calendar months before the event to allow time for circulation to all SAG members and feedback to be provided to event organisers.

8. DECLARATION

I confirm that the information contained within this document is accurate and correct to the best of my knowledge.

I understand that North Yorkshire Safety Advisory Group (and its members) acts solely as an advisory body and cannot accept any responsibility for any aspect of my/our event.

I understand that the responsibility for safety at my/our event remains solely with the event organiser.

Print name:

Role within the Event:

Signed:

Date:

INFORMATION / SUBMISSION DETAILS

Please send completed notification form to:-

Robert Robinson
North Yorkshire Council
Environmental Health (Safety Advisory Group)
Ryedale House House
Old Malton Road
Malton
YO17 7HH

Alternatively forms can be sent via e-mail
environment.rye@northyorks.gov.uk

For more information please call 0300 1312131 Ext 43300 or use the above e-mail address.