

North Lincolnshire Council	North Lincolnshire Event Safety Advisory Group (ESAG) Event Notification Form	Document Ref. No.	ESAG/ENF
		Version	004
		Issue Date	July 2023
		Review Date	July 2024

The purpose of this form is to enable you, as the event organiser, to provide the ESAG with information about the event you are planning to hold in North Lincolnshire Council's area. Once the form has been completed, the ESAG can assess your event arrangements and, where necessary, offer advice and guidance.

The form is designed to cover a variety of event safety aspects, however, some of these may not be relevant to your event. Please complete all sections of the form that are relevant and/or marked with an asterisk (*).

Normally the form and any supplementary evidence such as an event and any third party risk assessments, fire risk assessments, plan of the event, insurance certificates etc. should be completed and submitted to the ESAG by the event organiser at least 6 months in advance of the event if you expect more than 500 people to attend your event and 3 months in advance of the event where 500 or less people are expected to attend.

*Name of Event						
*Event Location						
*Date(s) of Event						
*Public Start Time				*End Time		
*Has this event been held before?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	If yes, when?	

***Section 1 – Event and Organiser Details**

Name and address of the Organiser/Responsible Person (e.g. Community Group, Residents' Association, company or individual). If an organisation is named as the Organiser, please provide contact details of a lead/responsible person including contact telephone number/email.

Please use this space to provide a brief description of your event.

Have you or your organisation held this event before?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Is this event?	One off	<input type="checkbox"/>	Recurring	<input type="checkbox"/>	If recurring, how often?		

Please provide examples of any events you have had experience of organising in the last 3 years.

Will your event have 5 or more trading stalls or fairground rides?				Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If 'yes' you will be required to apply for a Market Consent by either emailing occasional.markets@northlincs.gov.uk or by telephoning 01724 298175

If your event will involve uniformed military personnel (including cadets) as organisers, attendees, participants or exhibitors please provide details.

*Section 2 – Location of Event, Land Use and Access

A scaled site layout or plan is required for this notification identifying the following areas (where applicable):

Stalls		Marquees		Arenas		Exhibition units	
Fairground rides		Inflatables		Car parking		First aid point	
Lost children point		Barriers/fencing		Waste disposal points		Toilets	
Pedestrian access/egress routes		Emergency access/egress routes				Assembly point	

In respect of walks, races and similar events, a detailed route plan, including the location of route marshals, is required.

Is the land owned by North Lincolnshire Council? **Yes** **No**

If yes, please provide evidence that the council has given written permission for you to use the land (a copy of a letter from the Council will be acceptable).

If no, who is the land owner?

Has permission been sought from the land owner? **Yes** **No**

Please provide date and time required to enter site for set up.

Please provide date and time required for site to be cleared and vacated.

If there is a possible alternative site please provide details.

If there is a possible alternative date, please provide details.

Anticipated numbers of attendees at any one time or during the event (consider previous event history if possible).

General Public		Staff/volunteers		Performers/traders	
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What do you expect the profile of attendees to be, for example, children and families/sports fans/teenagers etc?

*Section 3 – Event Activities

Do you intend to have any of the following at your event?

Carnival/procession		Balloon/lantern launch			
Motor vehicles static display		Motor vehicles moving			
Helicopter operations		Aviation sport or display			
Barriers/fencing		Portable generators			
External power supply		Portable toilet provision			
Water supplied by standpoints		Athletics on sports field or highway			
Market stalls		<i>See section 1</i>	Portable staging		<i>See section 4</i>
Gazebos/Marquees		<i>See section 4</i>	Food sales		<i>See section 6</i>
Live entertainment		<i>See section 9 & 13</i>	Live music		<i>See section 9 & 13</i>

Alcohol sales		See section 9	BBQ/naked flames		See section 11
Bonfire		See section 11	Fireworks		See section 11
Fairground or some rides		See section 15	Inflatables e.g. bouncy castle		See section 15
Live animals		See section 9. Please also give details in 'other' below			

Please note: the activities above are considered to have inherent risks which must be specifically addressed within your risk assessments, including those being supplied/delivered by third parties.

Other activities – please specify any unique activities for your event e.g. animals, parachute drop, bungee or zip lines etc.

*Section 4 – Temporary Demountable Structures (TDS) e.g. marquees, gazebos, gantries, staging etc.

Please describe in detail below the type of demountable structures that you are intending to use at your event, including the numbers and size/dimensions. If these are being supplied by a commercial third party, please provide details. *Please note: larger temporary structures such as lighting towers, gantries, grandstands and stages may require an independent engineer/competent contractor to validate/approve its safety.*

Marquees		How many?		Size(s)	
Details of supplier					
Gazebos		How many?		Size(s)	
Details of supplier					
Larger demountable structures		How many?		Size(s)	
Details of supplier					
Staging		How many?		Size(s)	
Details of supplier					

*Section 5 – Highway and Traffic Implications

Do you anticipate the need for any of the following?

Road closure		Traffic diversion		Footway closure		On-street parking restrictions	
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If you have said yes to any of the above, a Temporary Traffic Regulation Order (TTRO) will need completing 12 weeks prior to the event. This can be obtained from network.management@northlincs.gov.uk The event organiser is wholly responsible for appointing a NRSWA accredited Traffic/Pedestrian Management Company.

If you have ticked one of the above please provide full details of locations, dates and times.

Do you anticipate the need for the closure of a public car park?

Yes

No

If a car park closure is required, please contact parking.services@northlincs.gov.uk

Do you intend to use any of the following?

Highway directions signs		Banners or posters	
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Please note: the Highways Authority reserves the right to remove any unauthorised advertising and to recover the cost incurred from the event organiser.

Please provide details of the number, weight and size of any delivery vehicles or participating event vehicles.

Will vehicles be left onsite overnight?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Will there be overnight security onsite?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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Please provide details of the contractor providing the security service.

Is there a need to provide event parking for the general public, staff, performers etc?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, please provide details about anticipated numbers of vehicles and where the parking is be located (please also include these details in your site plan, if provided).

***Section 6 – Food Safety**

If you are supplying food to the general public for consumption please provide details below. If you are intending to provide professional catering please provide details for each caterer. Please continue overleaf if necessary.

Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold

Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold
Owner's Name	Business Address		Contact Details/Email
Trading Name	Local Authority Registration	Hygiene Rating Scheme Score	Nature of Food Sold

Do you intend to supply the public with water from the mains stand point?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	
Do you have hot and cold water for hand hygiene and cleaning purposes?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	

***Section 7 – Waste and Sanitary Management**

Please provide details how refuse and waste will be managed (how disposed of, how often etc.)

Please provide details of toilet provision. If toilets are to be hired, please state the number and type of units and the name of the hire company.

***Section 8 – Insurance**

Has event insurance been arranged in respect of Public Liability or Third Party risks?	Yes		No	
A minimum £5 million Public Liability Insurance is required if using NLC land – do you have this?	Yes		No	
Name of insurer				
Has a copy of your insurance certificate been provided with this notification form?	Yes		No	
Have you provided a copy of all third party public liability certificates?	Yes		No	

Please note: if your event involves vulnerable groups e.g. children, you should review your insurance cover with your insurance company as minimum cover may not be appropriate.

***Section 9 – Licensing**

If you are undertaking any of the following activities you may need to apply for a Temporary Event Notice (TEN), a Premises Licence or a Street Trading permit.

Live or recorded music outside (e.g. a concert)	Yes		No	
Numbers attending in excess of 499	Yes		No	
Alcohol sales where an existing premises licence is not in force	Yes		No	
Boxing or wrestling	Yes		No	
Any licensable activities not subject to a Premises Licence	Yes		No	

If you have ticked yes to any of the above please contact licensing@northlincs.gov.uk for more information and advice.

If you have a TEN or Premises Licence already in place please provide the reference number

If you are having Live Performing Animals at the event, the person must hold a licence. Please provide the following:

Licence holder name		Licence number	
Local Authority that issued the Licence		Expiry date	

***Section 10 – Health and Safety**

Have you completed a Risk Assessment for your event?	Yes		No	
If yes, is it attached (risk assessments must be supplied prior to the event)	Yes		No	
Have you provided/attached all third party risk assessments?	Yes		No	

Advice on completing risk assessments can be found attached and further guidance can be found on the Health and Safety Executive (HSE) website www.hse.gov.uk 5 Steps to Risk Assessment. Please note: risk assessments should be submitted using the form provided.

Please provide the name and contact details of your event Safety Officer – this should be a person

with the competence to meet the safety needs of your event. Please note: it is advised that the Organiser should not hold the dual role of Safety Officer on the day of the event.

Name		Address	
Telephone no.		Email address	

Please provide details on the location of the Event Safety Officer, Organiser or other personnel such as stewards or marshals in the event of an emergency. Please indicate the location(s) on your site plan along with the assembly point.

In the event of an emergency, how will you communicate with members of the general public, staff, volunteers, performers etc? What contingencies do you have if this means of communication fails?

How have your staff, stewards etc. been trained e.g. first aid, fire safety, lost children etc?

*Section 11 – Fire Safety

If your event takes place in or around any premises including temporary structures such as marquees or other temporary buildings, you must complete a Fire Risk Assessment to identify any fire hazards and the controls you need to put in place to mitigate these risks. Your fire risk assessment should include a plan of the building or structure being assessed. Please use the Fire Risk Assessment form provided or go to www.hse.gov.uk for more information on how to complete this.

Has a Fire Risk Assessment been completed?	Yes		No	
Is the Fire Risk Assessment attached to/provided with this notification form?	Yes		No	

*Section 12 – Medical Provision

Please provide details of your medical provision or provider for your event. Please note: the medical provider should plan and deliver a safe, effective and resilient medical service to the event. Provision must meet the needs of your event taking certain factors into account such as the number of attendees, type of activities taking place etc and the provider should prepare a medical risk assessment and method statement. Medical personnel should not hold any other roles such as responsibility for lost children. Medical personnel should also be suitably qualified to deliver first aid at a public event – a qualification in First Aid at Work or Emergency First Aid at Work is not an appropriate qualification for administering first aid at public events. Guidance on the number and qualification of first aid personnel required can be calculated using the medical section of the Event Safety Guide www.thepurpleguide.co.uk

Name of Medical provider	
Number of medical personnel onsite during the event	

*Section 13 – Noise and Public Nuisance

Please provide details of any amplified sound at the event e.g. live bands, music, tannoy announcements etc.

Please provide details on the times that any amplified sound will be played.

Describe the controls that will be in place to mitigate any noise nuisance e.g. informing residents, sound checks etc.

*Section 14 – Minors and Vulnerable Adults

It is reasonably foreseeable that at most public events minors and/or vulnerable adults may be present. As an Organiser you should demonstrate what provision you will have in place should any of your event staff be presented with a lost child or vulnerable adult. Please describe your arrangements for managing such circumstances. Please note: safeguarding personnel should not hold any other roles such as first aider or security.

Where non-professionals will be taking responsibility for managing lost children and/or vulnerable adults, please describe the safeguarding measures in place e.g. DBS certification checks, lone working procedures etc.

*Section 15 – Fairground Rides and Inflatables

If you are providing fairground rides or inflatables such as bouncy castles, we recommend you carry out some simple checks to ensure they meet safety standards. **Where rides and inflatables are supplied by a third party, risk assessments should be provided along with copies of test certificates for the equipment.**

Please go to www.adips.co.uk for information and guidance about rides and inflatables or www.pipa.org.uk for specific inflatables. Both schemes are endorsed by the HSE. Further information and guidance is available on the HSE website www.hse.gov.uk

Have you been provided with risk assessments and test certificates for any rides or inflatables being supplied for your event?

Yes

No

N/A

Have you provided/attached these with this notification form?

Yes

No

***Section 16 – Declaration**

<ul style="list-style-type: none">I agree that by submitting this notification form, I am requesting my notification is considered by the ESAG.	Agreed	
<ul style="list-style-type: none">I confirm the information contained within this notification is accurate to the best of my knowledge.	Confirmed	
<ul style="list-style-type: none">I acknowledge that, following consideration of this notification, the ESAG will either provide advice to the event Organiser or have no outstanding concerns with the proposed event.	Acknowledged	
<ul style="list-style-type: none">I confirm it is my responsibility to notify the ESAG of any changes to the event once this notification has been submitted.	Confirmed	
<ul style="list-style-type: none">I understand the ESAG decision will no longer apply to this event should I fail to notify them of any significant changes to the event.	Understood	
<ul style="list-style-type: none">I acknowledge the ESAG have no liability in terms of the management or organisation of this event.	Acknowledged	
Name of Organiser/Responsible Person		
Position		
Date		
Signature		

Please send the completed form, together with supporting documentation, to:

food.safety@northlincs.gov.uk

Alternatively, this form and supporting documents can be sent to:

Food & Safety Team
Environmental Health
Church Square House
PO Box 42
Scunthorpe
North Lincolnshire
DN15 6XQ