



COMPULSORY RISK ASSESSMENT FORM

THIS FORM MUST BE RETURNED WITH YOUR TRADE STAND APPLICATION

To comply with the statutory regulations of the Health and Safety at Work Act 1974, all exhibitors, displays and stand holders are required to complete a Risk Assessment form to be returned together with the Trade Stand Application. The Health and Safety Risk Advisors must know in advance of any **HAZARDS** being introduced to the Showground, aiming to pre-empt potential incidents and reduce the risks of accidents. Alternatively, you may send us details of your existing Health and Safety arrangements for attending Show grounds. Food Traders must be able to provide evidence of their Food Handling Training, Food Management System and HACCP on site in the case of an inspection. TENS licences must be available where alcohol is being offered for sale.

HAZARDS – PLEASE CONSIDER ALL POSSIBLE RISKS INCLUDING:

Slipping / Tripping e.g., Guy Ropes, pegs	Sharp instruments, blades and sharp edges	
Vehicles e.g., tractors, forklifts, cranes, trucks	Fumes / Fuel spillages	
Vans, cars, motorcycles and quad bikes	Gas, gas cylinders, LPG	
Electricity Generators	Water boilers / Ovens / Hobs	
Hot Fluids e.g., refreshments	Fire Risk e.g., rubbish & flammable substances	
Display boards, racks and cabinets	Moving parts on machinery	
Hazard	Persons at Risk	Controls to minimise risk

FIRE ASSESSMENT

A FIRE EXTINGUISHER MUST BE PROVIDED AND A FIRE RISK ASSESSMENT

Melplash Agricultural Society Limited. 23 South Street, Bridport, Dorset. DT6 3NT
 Telephone / Fax: 01308 423 337 office@melplashshow.co.uk www.melplashshow.co.uk
 Registered Charity No 1130201 Registered in England & Wales No 06616384



UNDERTAKEN BY ALL EXHIBITORS

Hazard	Persons at Risk	Controls to minimise risk
<p>Are you operating a generator?</p> <p>YES / NO</p> <p>Please note petrol generators are not permitted on site.</p>		
<p>Are you serving hot food or drinks?</p> <p>YES / NO</p>		
<p>LPG (Liquid Petroleum Gas) on site?</p> <p>All Gas connections MUST be crimped (no jubilee clips)</p> <p>YES / NO</p> <p>Cylinders xKG</p>		
<p>Are you selling alcohol?</p> <p>YES / NO</p>		
<p>Other fire risks?</p> <p>Please list e.g. hot surfaces</p>		

CONTACT DETAILS (Please complete in BLOCK CAPITALS)	
Name of Company or Responsible Individual:	
Address:	
Post Code:	
Name of Insurer:	Policy Number:
Signed:	Print Name: