Trade Stand Risk Assessment

Fire and general hazards and risks

Please complete in BLOCK CAPITALS

Responsible Person: …………………………………………………………. Date Assessment Undertaken: …………………………………….

Operational Activity (Please indicate which description most reflects the activities of your stand)

Retail Outlet Static Display Demonstrations Catering Outlet

Hazards associated with above activity:

Please tick one or more of the following, if the hazards will be represented on your stand during your occupation at

the show site.

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Sources ofignition/heat |  | Drycombustibles |  | Hot surfaces |  | Flammableliquids |  | LPG(Permit applied for) |  | Smoking(outdoors only) |  |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Largenumbers ofpeople |  | Electricalequipment |  | Foodpreparation |  | Work at height |  | Use of sharps |  |  |  |

Plant on Site? YES / NO If yes which days………………………………………………………………………… All operators must be in possession of a valid and appropriate certificate of competency for the plant being used on site. Checks will be made by our Health & Safety Officer.

Animals on stand? (Please circle) Yes / No … If YES, how many of which type(s)

………………………………………………………………………………………………………………………………

Please record on the risk assessment on the next page how you intend to control the risks from fire and all other hazards associated with your occupation of the stand. Note: fire controls for stands should be the same as for any retail outlet. You must consider who may be placed at risk during each stage of attendance on site, e.g. pre show, show day and post event activities, including contractors and members of the public and describe the steps you propose to take to minimise those risks. Whilst it is important that all significant hazards and risks are identified, keep the assessment simple - complication creates confusion. Feel free to copy the assessment page if more space is needed. Alternatively, you may send a copy of any similar format, provided you are satisfied as to its appropriateness to your stand at this event.

It is unlikely that the activities associated with a stand will not have some risk attached. Therefore, statements such as “NO RISK” may need to be qualified.

DECLARATION:

I have completed an exhibitor stand risk assessment and understand the requirement for ensuring that the
necessary controls for eliminating or minimising risk are put in place. On behalf of ................................................................................. I agree to comply with the rules and conditions of Central & West Fife Agricultural Society which I have read and understood.

Name (block capitals)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed: X Date: ……………………………………

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FOR EXHIBITORS HIRING SUB CONTRACTORS DURING BUILD UP, ON SHOW DAY AND TAKE DOWN

|  |  |
| --- | --- |
| Will contractors be engaged by you/your company - Y/N |  |
| If yes, please provide the following information: |  |
| Name of contract company (s) |  |
| Work engaged for |  |
| Plant/equipment to be usedTo include mobile plant, powered accessEquipment. If basic hand tools only (i.e. not powered) 'various hand tools' can be entered |  |
| Note: risk assessment(s) and method statement(s) is required for contractor activities |  |

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| --- |
| **RISK ASSESSMENT**  |
| **ACTIVITY** | **HAZARD** | **LEVEL OF RISK** | **THOSE AT RISK** | **CONTROL MEASURES** | **ACTION LIST** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Covid 19** |  |  |  |  |  |
| **Fire assessment hazard** |  |  |  |  |  |
| **Hazardous substances****e.g LPG gas** |  |  |  |  |  |

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