

# The Borough of Boston and The District of South Holland

## Safety Advisory Group

### Event Notification Form

Please complete this form with as much detail as possible, if a section is not applicable to your event mark N/A

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#### A) Event Organiser Details:

1. Name:

2. Email:

3. Contact No:

4. Are you organising as part of a Committee/Charity/Company

YES/NO

5. Please provide details:

#### LANDOWNER DETAILS:

6. Landowner Name:

7. Contact No:

8. Email:

9. Address:

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#### B) Event Details:

1. Event Name:

2. Type of Event:

3. Event Date:

4. Event Location (please provide What3Words ID):

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5. Start Time:
6. Finish Time:
7. Setting up time & take down time:
8. Anticipated Attendance Number:
9. Anticipated Attendance at anyone time during the event:
10. Anticipated audience type i.e. family, adult etc.:

**Description of the event and related activities, including a site plan and whether the event is either indoor/outdoor** (please use a separate sheet of paper if necessary):

11. Do you have an Event Safety Officer (if yes please provide details): YES/NO

12. Have you completed risk assessments for the event (if yes please attach) YES/NO

13. Do you have an Emergency Evacuation Plan: YES/NO

14. Will Fire Fighting Equipment be provided on site (if yes please provide details) YES/NO

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15. Please identify who is trained and expected to use the provided equipment:

16. Will Medical Provision be available? (Please provide the following information) YES/NO

17. Name of organisation(s) providing the medical cover:

18. Name of Lead provider:

19. Contact No:

20. Is the organisation registered with the Care Quality Commission? YES/NO

21. What level of cover is being provided (please state numbers/provide an outline etc.)

Defibrillator – please state nearest location to event if not provided by medical provider:

Medical Facilities:

First Aiders:

Ambulances:

First Responders in Emergency Care: Level 3 Level 4

Paramedics:

Emergency Care Practitioners:

Nurses:

Doctors:

22. Do you intend to use:

Professional/Paid Event Stewards/Security YES/NO

(if yes please provide details, including no's, contact name, contact number, training and qualifications etc.)

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Volunteer stewards/marshals

YES/NO

(if yes please provide details, including no's, lead contact name, contact number, training and qualifications etc.)

23. Will road closures or parking restrictions be required, have you discussed with Highways?  
YES/NO

(NB Highways require a minimum notice period of 3 months to implement)

24. How will Traffic Management be implemented?

(NB The Police DO NOT provide this service)

**LCC Highways require Event Organisers to register all public and private events which may impact upon the use of the highway. The link below takes you to relevant web page.**

<https://www.lincolnshire.gov.uk/transport-and-roads/traffic-management/events-affecting-the-highway/36947.article>

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### C) Licensable Activity:

Please mark if activity is taking place:

Activity	Indoor (please state times taking place)	Outdoor (please state times taking place)
Live music		
Recorded music		

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Dancing		
Performance of plays		
Films (Type)		
Bar/ Alcohol		
Late night refreshment (sale of hot food and drink between 11.00pm and 5.00am)		
Boxing or wrestling – medical provisional present		

1. If you plan on organising an event on South Holland District Council Land with a licensable activity do you intend to apply to use South Holland District Councils Premise Licence?

YES/NO

2. If not do you intend to apply for a Premise Licence (please allow a minimum 3-month period to complete the application process)

YES/NO

3. If not do you intend to apply for a Temporary Event Notice (please allow 10 clear working days' notice for a Standard TEN)

YES/NO

**Please refer to South Holland District Councils website for further information on Licensing and to obtain the relevant application forms,**

<http://www.sholland.gov.uk/article/3528/Alcohol-and-Entertainment>

### **ORGANISERS OF LARGE SCALE EVENTS WILL NEED TO COMPLY WITH SOUTH HOLLAND DISTRICT COUNCIL'S LICENCING POLICY**

#### **Large Scale Events**

Organisers of major festivals and carnivals should approach the Licensing Authority and Responsible Authorities at the earliest opportunity to discuss arrangements for the licensing of those activities falling within the provisions of the Licensing Act 2003.

In respect of some events, the organisers may seek a single premises licence to cover a wide range of activities at varied locations within the premises.

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Anyone wishing to hold such an event should notify the Licensing Authority no less than 6 months before the event is due to happen. This will allow time for the preparation of a substantial operating schedule, by the applicant, which may be required to ensure promotion of the licensing objectives.

### D) Street Trading

If an event is free for members of the public to attend and there are people selling goods for profit and not for charity you may require a Street Trading Event Consent depending on Council area.

1. Is the event free for attendees? YES/NO
2. Will there be stalls/caterers selling goods for profit? YES/NO
3. Have you applied for a Street Trading Event Consent? YES/NO

### E) Possible Hazards at Event:

Please review the list below and indicate (✓) the hazards that apply to the event. Provide details of the hazard and list the controls that are in place to minimise the related risk.

Section 1 -Event Hazard	✓	Details of Hazard and Controls
Marquee/Tent/Gazebo		
Stage (what type?)		
Stall(s) (approx. how many)		
Catering Facilities (provided by organiser or external caterer, are they Food Registered, food vehicles...)		
Propane Gas/ Compressed Air/Chemicals		
Decorations (Flowers, banners etc)		
Performers/Acts		
Caravans/Camping		
Car Parking – onsite/off site?		

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Traffic movements during the event		
Strobe/Flashing/Infrared or ultra violet lights		
Fireworks		
Fairground Rides (please state type and numbers)		
Inflatables (bouncy castle)		
Animals		
Procession / parade		
Other hazards not listed above (please state nature):		

### F) Attendees

	v	Number and Details	Supervision/Assistance	Adequate Yes/No
Children (under16) and/or Senior Citizens (65+)				
Disabled person or person requiring assistance				
Vulnerable Persons/ Group				

### G) Insurance

1. **Public Liability Insurance:**

Provider:

Expiry Date:

2. **Employers Liability Insurance: (applicable if your Event has volunteers or stewards and not covered in the Public Liability Insurance).**

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Provider:

Expiry Date:

3. Copies included with application

YES/NO

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### H) Details for the person completing the form on behalf of the event (please print):

1. Name:

2. Full Address:

3. Telephone No:

4. Email:

5. Name of Organisation representing:

6. Position within Organisation

7. Signed:

8. Date:

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#### PLEASE NOTE

This form is designed in order to give South Holland Districts Safety Advice Group an overview of your event.

- Template and Guidance for event plans and risk assessments can be found on the Lincolnshire Event Safety Partnership (LESP) website. [Lincolnshire Event Safety Partnership – Lincolnshire County Council](#) and on [The District of South Holland's Safety Advisory Group \(SAG\) - South Holland District Council \(sholland.gov.uk\)](#)

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#### Data Protection Statement

The information you provide on this form will be used only for the purposes outlined below and will not be used for additional purposes without your consent.

By submitting this form, you are agreeing to the details of your event and personal data provided to be shared with the statutory agencies for the purposes of their giving advice on safety at/around the event and to allow them to understand any impact on their core roles.



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The information will be used by the Authority to provide contact details should issues arise and form a register of businesses that attend.

In the case of where an accident or incident has happened it may be necessary for your information to be passed on to affected persons.

For further information please see the privacy notice outlined on the Authority's website.

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### Personal Liability

**As the named Event Organiser you are responsible for the Health and Safety of all volunteers/stewards/members of the public etc. that attend the Event. The paperwork required is to help protect you in case an accident/incident occurs as ultimately you are liable.**

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### What Happens Next?

Once the notification has been submitted, you will receive an acknowledgement of receipt. SAG members have two weeks to provide initial responses and ask questions, if you do not hear anything there is no further information required at this stage. You may be asked to attend a Safety Advisory Group meeting if there is information or guidance they consider is relevant with regard to safety at or around your event.

**Please complete and return this form to:**

**Events in South Holland:**

Food, Health & Safety Team, South Holland District Council, Council Offices, Priory Road, Spalding,  
Lincs. PE11 2XE  
or email to: [shdcsag@sholland.gov.uk](mailto:shdcsag@sholland.gov.uk)

**Events in Boston:**

Boston Borough Council, Municipal Buildings, West Street, Boston, Lincs. PE21 8QR  
or email to: [BostonBCSAG@boston.gov.uk](mailto:BostonBCSAG@boston.gov.uk)