AIR TATTONAL

HEALTH AND SAFETY, FIRE, FOOD AND ELECTRICAL SAFETY RISK ASSESSMENT FORM PART ONE

Everyone who has a pitch at RIAT must complete a risk assessment form. Your registration will not be accepted until your health and safety documentation is approved and you have read, understood and agree to comply fully with all RIAT Site Regulations.

The purpose of your risk assessment is to reduce the risk and likelihood of injury to any person who could be affected by what you do whilst at RIAT.

The types of risk you need to assess are those that could foreseeably be caused by your undertaking at RIAT.

You must inform the RIAT Functional Safety Manager of any changes to your risk assessment by emailing full details of all changes and controls to: **richard.spreadburg@rafcte.com** at any time up until, and during show days.

Please ensure you send copies of relevant supporting documentation, for example, Health and Safety Policy, Food Safety Certificates, Gas Safety certificates, etc.

If you are unsure about how to complete this form or have any questions on it, direct your queries to the RIAT Functional Safety Manager by email to: **richard.spreadbury@rafcte.com**

ABOUT YOU

Business Name		
Contact Name		
Correspondence Address		
Postcode	Telephone Number	
Email Address		

responsible for the Health and Safety of the Trade Stand on the day	Mobile Number		
Details of person who will be at RIAT and	Name		
Do you have a written Food Safety Policy?	Yes (Provide a copy)	No	N/A
Do you have a written Health and Safety Policy?	Yes (Provide a copy)	No	

Your Activities

To help us ensure that you have completed an effective risk assessment we need to know more about the activities you will be carrying out at RIAT, so please give FULL details below, including a description of the products you wish to sell.

NOTE: All goods sold at RIAT are to conform to current trading standards legislation and Site Regulations.

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FOOD SAFETY

If you are selling food of any description you must complete this section. If you are not annotate N/A.	Yes	No	N/A
Do you or any of your staff working at RIAT have a Food Safety qualification?			
Do you have suitable hand washing facilities?			
Do you have a First Aid Kit which includes blue waterproof plasters?			
Have you taken the necessary action to ensure that you comply with the relevant food safety and food standards relevant to the work you are undertaking?			
Do you have a written Food Safety Management System, such as 'Safer Food Better Business'?			
Name of Local Environmental Health Authority you are registered to?			

FIRE SAFETY

Will you be using a generator?			
If YES to above, state where spare fuel cans will be stored, and what equipment/measures you are tak to the environment.	ing to pre	vent fuel s	spills
Will you be using any LPG fuelled equipment?			
If YES to above, you MUST have a current equipment/installation certificate available for inspection of where and how any spare LPG cylinders will be stored.	ınd, state	below,	
Will there be any naked flames within your trade stand (eg. candles, matches, lighters, etc)?			
Do you have an adequate number of Fire Extinguishers and/or Fire Blankets ready for use in the event of a fire?			
Do you have artificial lighting within your trade stand that, if it failed, would lead to difficulty in identifying the fire escape route?			
Do your staff know how to raise the fire alarm and use the fire extinguishers provided?			
If you are using your own marquee/gazebo, is it made of flame retardant material?			
Have all electrical items been PAT tested? (Copies of certificates MUST be available for inspection at RIAT)			

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HEALTH AND SAFETY, FIRE, FOOD AND ELECTRICAL SAFETY RISK ASSESSMENT FORM PART THREE

RISK ASSESSMENT

The risk assessment helps you to evaluate the hazards and risks of your foreseeable activities and gets you to consider ways in which the risk can be reduced as low as reasonably practicable. Remember that RIAT is a family event, so make consideration for small children and the elderly when you are considering the likelihood of a hazard causing harm.

If you have a risk assessment document that covers your foreseeable activities at RIAT, please feel free to supply that for us to review in place of completing this form.

Consider all foreseeable hazards (Example: Manual Handling; Slip/Trip/Fall; Falling Objects; Weather Effects; etc.) and assess what risks there may be for:

- You and your staff when building/laying out/stocking and working your stand, and
- The general public visiting or purchasing from your stand.

Hazard Identified	Persons at Risk	Risk Level High/ Med/Low	Action required to reduce Risk	New Risk Level High/Med/Low
Example: Insecure stock falling and causing a striking hazard	Staff & Customers	Medium	Place stock on secure surface safely away from customers, with minimum stacking	Low

PLEASE NOTE

• Traders are to take all measures appropriate to ensure their own safety, and that of anybody else who might be affected by what they do at all times while they are on the RIAT site. Hi-vis vests and suitable footwear are to be worn at all times during site set up but are not required during public hours.

I certify that I have carried out a suitable and sufficient risk assessment of all foreseeable hazards and risks associated with my activities at RIAT and that the information I have provided is correct and complete.

Name	Signature	Date

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INSURANCE CONFIRMATION FORM

Please pass this form to your insurance company or insurance broker for completion. Alternatively you can provide us with a copy of your current insurance certificate showing the level of cover and expiry date. Please note that failure to provide valid insurance cover and documentation will preclude your participation at The Royal International Air Tattoo.

Policy Holder

We confirm that the above policy holder has in force a Public & Products Liability* and Employers Liability* insurance in respect of their attendance at RIAT at RAF Fairford and other agreed locations in accordance with the RIAT Site Regulations and that these insurances include an Indemnity to Principals clause.

* if applicable to the nature of the policy holder's business

Period of Insurance	
Full Name and Office of the Insurer	
Policy Number	

Minimum Limits of Indemnity	Public Liability	£10 million per incident
-	Products Liability*	£10 million per incident and in all
	Employers Liability*	£10 million per incident
	* if applicable to the natur	e of the policy holder's business

PLEASE NOTE

The above are minimum limits of cover required by the organiser and are not a limit of the exhibitors' and traders' liability

TO BE COMPLETED BY THE INSURER/BROKER

Company Name	
Company Address	
Name	
Position	
Signature	
Date	
Telephone Number	
Email Address	

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APPLICATION CHECKLIST

PLACE ✓ IN THE CORRECT BOX ON THE RIGHT

I have completed in full the Health, Safety, Fire, Food and Electrical Safety Risk Assessment Form Part One, Two and Three	
I have completed in full the Insurance Confirmation Form	
Insurance Certificate/s showing the level of cover and expiry date	
I have read and agreed to comply with the Site Regulations	

DECLARATION

To be completed by all RIAT participants and traders:

I the undersigned hereby confirm that I have read, understood and agree to comply fully with all RIAT Site Regulations.

Company Trading Name	
Contact Name	
Date	
Signature	

All forms must be completed in full and provided as part of the application process including insurance certificate/s. Without these your application may not be accepted.