

HEALTH & SAFETY FORMS

HIGH RISK EQUIPMENT AND SUBSTANCE APPROVALS



مركز دبي للمعارض
DUBAI EXHIBITION CENTRE

- Display Vehicle/Equipment Arrival Schedule
- Laser Schedule
- Smoke And Haze Schedule
- Compressed Gas Schedule
- Pyrotechnics Schedule
- Aquarium Schedule
- Candle/Flame Schedule
- Fountain And Water Screen Schedule
- Animal Schedule (Dubai Municipality approval required)
- Electrical Fat Fryer Schedule (for food related events only)
- Robot And Robotic Machinery Schedule

APPENDIX

- Risk Assessment Form
- Method Statement Form

DISPLAY VEHICLE/EQUIPMENT ARRIVAL SCHEDULE

- Please return the completed form to the Event Organiser or your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Brand Name/ Model/ Equipment | Registration Number | Colour | Arrival Date & Time | Dimension L x W x H | Location (Hall and Stand No.) | Weight | Contact Name & Number |
|----|------------------------------------|------------------------|--------|------------------------|------------------------|-------------------------------------|--------|-----------------------------|
| 01 | | | | | | | | |
| 02 | | | | | | | | |
| 03 | | | | | | | | |
| 04 | | | | | | | | |
| 05 | | | | | | | | |
| 06 | | | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- Fuels must be reduced to a quarter level
- Batteries should be disconnected
- All keys are to be handed over to DEC Health & Safety
- A no objection letter from the organiser is required to allow access during the build-up where damage could be done to either the vehicle or to other stands when entering the hall
- Vehicles without engine and battery must be mentioned separately on the form
- For heavy vehicles, the manufacturer's data sheet including weight and dimensions along with the completed vehicle form is required
- Please specify if the equipment is used for demonstration purposes or as display only
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

Deceleration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

LASER SCHEDULE

- Please return the completed form to the Event Organiser or your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Brand Name | Arrival Date & Time | Operating Date and Time | Location (Hall and Stand No.) | Grade of Laser | No. of Machines |
|----|------------|---------------------|-------------------------|-------------------------------|----------------|-----------------|
| 01 | | | | | | |
| 02 | | | | | | |
| 03 | | | | | | |
| 04 | | | | | | |
| 05 | | | | | | |
| 06 | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- The varying classes of laser, under BS EN 60825 are as follows:
 - Class 1: Safe under all viewing conditions
 - Class 2: Should be terminated at the end of its useful path, where practicable, and should not be aimed at people
- The laser beam projection height should not be less than 2.70 metres
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

SMOKE AND HAZE SCHEDULE

- Please return the completed form to the Event Organiser.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Brand Name | Arrival Date & Time | Operating Date and Time (including rehearsals) | Location (Hall and Stand No.) | Liquid Certificate (smoke and haze) | Material Safety Data Sheet | No. of Machines |
|----|------------|---------------------|--|-------------------------------|-------------------------------------|----------------------------|-----------------|
| 01 | | | | | | | |
| 02 | | | | | | | |
| 03 | | | | | | | |
| 04 | | | | | | | |
| 05 | | | | | | | |
| 06 | | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- A Liquid Certificate is required
- Please provide a copy of the Material Safety Data Sheet (MSDS) of the liquid for approval
- Please submit the schedule of the smoke/haze machines operating times including the duration and timings of rehearsals
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

COMPRESSED GAS SCHEDULE

- Please return the completed form to the Event Organiser.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Gas Description | Arrival Date & Time | Operating Date and Time | Cylinder Size | Location (Hall and Stand No.) | Quantity |
|----|-----------------|---------------------|-------------------------|---------------|-------------------------------|----------|
| 01 | | | | | | |
| 02 | | | | | | |
| 03 | | | | | | |
| 04 | | | | | | |
| 05 | | | | | | |
| 06 | | | | | | |

RULES AND REGULATIONS:

- This form applies for the following gas types: Nitrogen, Carbon Dioxide, Argon, Helium and Oxygen
- Permission must be requested at least 2 weeks prior to the start of the tenancy
- The gas cylinders must be new, free from defects, cuts or dents
- Gas cylinders must not be used in unventilated areas and must not tamper with safety devices
- Cylinders must be stored upright and secured from tipping
- Valve caps must be in place when not in use
- Color coding and labeling must clearly identify gas type and hazard
- The equipment should be kept away from electrical circuits and from operations that create sparks, heat or fire
- The location of gas cylinders must be coordinated and approved by DEC's Health and Safety team
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

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PYROTECHNICS SCHEDULE

- Please return the completed form to the Event Organiser.
- This form applies for any type of pyrotechnic (cold or hot)
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Brand Name / Specification | Arrival Date & Time | Operating Date and Time (including installation and rehearsals) | Material Safety Data Sheet | Location (Hall and Stand No.) |
|----|----------------------------|---------------------|--|----------------------------|----------------------------------|
| 01 | | | | | |
| 02 | | | | | |
| 03 | | | | | |
| 04 | | | | | |
| 05 | | | | | |
| 06 | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- For Hot Pyrotechnic: The following documents are required to obtain an NOC letter: Commercial License, Insurance Copy, Fireworks License - approved contractor details by Security Industry Regulatory Agency (Dubai Police)
- For Cold Pyrotechnic, The requester must submit No Objection Email from SIRA, Commercial License, and Insurance Copy
- Please submit a copy of the Material Safety Data Sheet (MSDS) of the proposed pyros at least 1 week prior to the event build-up
- DEC's Health and Safety team will coordinate for the smoke detector de-activation
- Please specify the operating timings of the pyros during the event and rehearsals
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team for both Hot or Cold Pyrotechnic

Deceleration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

AQUARIUM SCHEDULE

- Please return the completed form to the Event Organiser.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Aquarium Description | Arrival Date & Time | Operating Date and Time | Location (Hall and Stand No.) | Aquarium Capacity | Quantity |
|----|----------------------|---------------------|-------------------------|-------------------------------|-------------------|----------|
| 01 | | | | | | |
| 02 | | | | | | |
| 03 | | | | | | |
| 04 | | | | | | |
| 05 | | | | | | |
| 06 | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- Aquarium specifications must be sent to DEC's Health and Safety team for review and approval
- Details of structural support for the aquarium must be submitted to DEC's Health and Safety team for approval
- Details for water supply and return drainage system must be sent to and coordinated with DEC's Engineering team
- Aquarium glass should be empty on delivery. An inspection of the aquarium shall be carried out by a member of the DEC Health and Safety team prior to installation
- Power should be switched off when filling the aquarium with water
- The electric panel board must be put on a single power strip that can be unplugged or disconnected at any time if required
- The power supply or cord should be installed above the aquarium
- The contractor / exhibitor holds full responsibility for any incidents related to the aquarium display
- A Risk assessment, Method Statement and Contingency Plan are required and need to be attached to this form for approval by the DEC Health and Safety team

Declaration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

CANDLE/FLAME SCHEDULE

- Please return the completed form to the Event Organiser.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| Candle Specification | Arrival Date & Time | Operating Date and Time (including rehearsals) | Location (Hall and Stand No.) | Size and Weight | Quantity of Candles |
|----------------------|---------------------|--|-------------------------------|-----------------|---------------------|
| 01 | | | | | |
| 02 | | | | | |
| 03 | | | | | |
| 04 | | | | | |
| 05 | | | | | |
| 06 | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- A sample of the candle including details of its "burn time" should be submitted to the DEC's Health and Safety team for review
- The contractor / exhibitor holds full responsibility for any incidents related to the candle display
- Exact number of candles to be submitted
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

FOUNTAIN AND WATER SCREEN SCHEDULE

- Please return the completed form to the Event Organiser or your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| | Fountain / Water Screen Description | Arrival Date & Time | Operating Date and Time | Water Screen Dimension | Location (Hall and Stand No.) | Fountain Capacity | Quantity |
|----|-------------------------------------|---------------------|-------------------------|------------------------|-------------------------------|-------------------|----------|
| 01 | | | | | | | |
| 02 | | | | | | | |
| 03 | | | | | | | |
| 04 | | | | | | | |
| 05 | | | | | | | |
| 06 | | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- Exhibitors need to provide all fountain and water screen technical specifications for DEC's Health and Safety team to review
- Exhibitors need to submit details of structural support for the fountain and water screen for DEC's Health and Safety team approval
- Details for water supply and return drainage system must be sent to and coordinated with DEC's Engineering team
- Schematic diagram for electrical connection, if any, must be provided
- Power to be switched off when filling the fountain and water screen with water
- The type of water used – i.e. treated or desalinated - must be mentioned
- The electric panel board must be put on a single power strip that can be unplugged or disconnected at any time if required
- The contractor / exhibitor holds full responsibility for any incidents related to the fountain and water screen display
- Risk assessment, Method Statement and Contingency Plan are required and need to be attached to this form for approval by the DEC Health and Safety team

Declaration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

ANIMAL SCHEDULE

This form must be completed for display purposes of any types of animals including but not restricted to birds, camels, horses, etc

- Please return the completed form to the Event Organiser.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| Description of Animal(s) | Arrival Date & Time | Quantity | Location (Hall and Stand No.) | Dubai Municipality Clearance | Caged or with Handler? |
|--------------------------|---------------------|----------|-------------------------------|------------------------------|------------------------|
| 01 | | | | | |
| 02 | | | | | |
| 03 | | | | | |
| 04 | | | | | |
| 05 | | | | | |
| 06 | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- Where animals are present, it is required that they are in a controlled area to ensure they cannot escape and cause distress and danger to people or other animals and/or damage to the premises
- A Health Certificate from Dubai Municipality is required (refer to the Pet Animal Section in the Health and Safety Guidelines) to ensure the animal(s) is / are healthy for display purposes and are free of infections
- Animals without a cage or similar enclosure are not permitted to remain inside the hall overnight. They should be removed from the hall(s) at the end of every event day
- All animals that pose a potential risk of biting or causing harm to humans or other animals must be fitted with a secure muzzle prior to entering the venue
- Where the use of animals is seen as an essential part of an event, the Organiser must submit a Risk Assessment and Method Statement along with the necessary Dubai Municipality documents for DEC's Health and Safety approval
- The contractor / exhibitor holds full responsibility for any incidents arising from an animal display
- Approval from the Event Organiser must be secured by the exhibitor prior to any animals entering the venue
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

Declaration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

ELECTRICAL FAT FRYER FORM (FOR FOOD RELATED EVENTS ONLY)

- Please return the completed form to the Event Organiser or your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| Description of Electrical Fat Fryer(s) | Arrival Date & Time | Quantity | Arrival Date & Time | Location (Hall and Stand No.) | Technical Specifications: Wattage (W), Voltage (V), Dimensions (LxW) | Provision for fire blanket, as well as a K Class or Foam fire extinguisher in the stand (Y / N) |
|--|---------------------|----------|---------------------|-------------------------------|--|---|
| 01 | | | | | | |
| 02 | | | | | | |
| 03 | | | | | | |
| 04 | | | | | | |
| 05 | | | | | | |
| 06 | | | | | | |

RULES AND REGULATIONS:

- Permission must be requested at least 2 weeks prior to the start of the tenancy
- A fire blanket must be placed within easy reach of the cooking area in case of a fire
- A K class fire or foam extinguisher must be in place within the cooking area by requester
- The person operating the equipment must have the required experience and skills to avoid accidents. Caution must be given to the following: avoid reaching over hot areas and storing cold liquids or drinks nearby items that are operating with hot oil; avoid overfilling equipment with oil; only move the equipment when the oil has cooled down; don't strain oil whilst hot
- Protective equipment/clothing to be used at all times to avoid accidents
- Stove surfaces to remain clean to avoid grease flare-ups
- Floor areas to be kept clean to avoid slipping
- Children are not permitted near any hot cooking areas
- All equipment must be regularly maintained and kept in good working condition
- The Organiser is responsible for their exhibitors' usage of Electric Fat Fryers. DEC cannot be held accountable for any incidents, injuries or claims resulting from the use of Electric Fat Fryers within the premises
- Provision of appropriate ventilations shall be in place prior to cooking activities.
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team

Deceleration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

ROBOT AND ROBOTIC MACHINERY SCHEDULE

This form is intended for the following:

| | | | |
|----------------------|--------------------------|----------------------|-----------------------------------|
| 1. Large Scale Robot | 2. Social Humanoid Robot | 3. Robotic Machinery | 4. Industrial / Commercial Robots |
|----------------------|--------------------------|----------------------|-----------------------------------|

- Please return the completed form to the Event Organiser or your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Exhibitor/Organiser address _____

City and country _____ PO Box / Postcode _____

Authorised person _____ Designation _____

Telephone _____

Mobile _____ Email _____

| Robot Type (Static, moving, roving, etc.) & Name | Role / Function (Human Interaction, Information Point, Entertainment. etc.) | Specifications: L x H x W Weight, Colour | Velocity (Normal or; higher speed) | Power Supply Details | Location (Hall and Stand No.) | Arrival Date/ Time | Contact Name & Number |
|---|--|--|---|----------------------------|-------------------------------------|--------------------------|-----------------------------|
| 01 | | | | | | | |
| 02 | | | | | | | |
| 03 | | | | | | | |
| 04 | | | | | | | |

1. How the robot/robotic machine will be brought to and unloaded in the hall? Will you use an unloading machinery (i.e. forklift) or will this be done manually? Please enter the details below:

2. How will the robot or the robotic machine be powered up? Will any charging devices be used? Please enter the details below:

RULES AND REGULATIONS *(This is applicable to Display and/Or Demonstration):*

- Request for approval must be requested at least 2 weeks prior to the start of the tenancy
- It is the responsibility of the Organiser / Exhibitor to control and monitor the movements of any Robots and Robotic Machine when in operations
- A Risk Assessment and Method Statement are required and need to be attached to this form for approval by the DEC Health and Safety team
- Ensure all robot machines are installed and demonstrated within a designated safe zone, clearly demarcated with barriers to prevent crowd intrusion
- Have a clear route map, timing and duration of activation the Robot for demonstration
- Ensure to have detailed risk assessment covering movement, speed, and operational hazards of the machines. Ensure the robot demonstration must be supervised by trained personnel at all times during the event
- Provide emergency stop controls that are easily accessible to operators in case of malfunction.
- Maintain safe distance between moving robots and visitors; no direct interaction without approved safety measures
- Secure cables, wiring, and power sources to prevent tripping or electrical hazards.
- Implement fire safety measures in line with Venue rules and regulations (no overheating, flammable materials, or untested batteries)
- Display clear safety signage (warning, restricted area, do not touch, etc.) around the demo zone.
- Ensure emergency exit routes should be remain clear all the time, without any obstruction, and use of Robot in such areas are strictly prohibited
- Charging is not permitted without supervision.

Deceleration of Acceptance: I hereby accept the venue's terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.

APPENDICES

RISK ASSESSMENT FORM & METHOD STATEMENT FORM



مركز دبي للمعارض
DUBAI EXHIBITION CENTRE

RISK ASSESSMENT FORM

- Please return the completed form to the Event Organiser or to your Venue Planner.
- The deadline to return this form is 2 weeks prior to the start of build-up. Forms received after this date may not be processed.
- Please complete the Risk Assessment Form if you will be using any hazardous equipment/substance or building any structures other than standard exhibition stands.
- Please type when you complete this form (handwritten forms will not be accepted).

Event name _____ Event date(s) _____

Exhibitor / Organiser name _____ Hall(s) _____

Contractor name _____

Company address _____

City and country _____ PO Box / Postcode _____

Contact person _____ Designation _____

Telephone _____

Mobile _____ Email _____

Date of Risk Assessment Undertaken

Risk Assessment undertaken by _____

Date of assessment _____

Contact number _____

Signed _____

RISK ASSESSMENT DEFINITION

| Identify Hazards | What could result from the hazard? | Who might be harmed? | Risk | Is the risk adequately controlled? | What is the Residual Risk? |
|--|---|---|--|--|---|
| Identify hazards that could reasonably be expected to result in significant harm | <p>First aid injury – minor cuts sprains, bruises</p> <p>3 day injury – broken fingers, toes, sprained tendons or muscles, illness (tiredness, stress, gastric)</p> <p>Serious injury – head injury, loss of consciousness, broken bones, dislocations, respiratory problems. Usually an injury from which full recovery is likely Death or very serious Injury to one person - Loss of limb, paralysis or life changing injury from which full recovery is unlikely Death or very serious injury to more than one person</p> | <ul style="list-style-type: none"> • Organiser’s staff • Venue staff • Exhibitors • Contractors • Young/new inexperience staff • People of determination • Children • New and expectant mothers • Trespassers • Pedestrians and drivers around the venue • Local inhabitants | <p>result from</p> <p>P = Probability</p> <p>S = Severity</p> <p>R = Risk level</p> <p>$P \times S = R$</p> | <p>Consider hierarchy of controls</p> <ul style="list-style-type: none"> • Eliminate • Substitute • Reduce • Isolate • Control • PPE • Discipline <p>Do the controls: Comply with industry standards?</p> <p>Meet legal requirements?</p> <p>Represent best practice?</p> <p>Reduce risk as far as is reasonably practicable?</p> | <p>Action Level</p> <p>H = High, Immediate action required</p> <p>M = Medium, Justify and review each event day</p> <p>L = Low, no action required</p> <p>See table in footer</p> |

RISK ASSESSMENT EXAMPLE

| HAZARD | CONSEQUENCES | WHO IS AT RISK | P | S | R | CONTROLS | P | S | R | ACTION LEVEL |
|-----------------|---|---|---|---|---|--|---|---|---|--------------|
| Lighting | Insufficient Lighting, leading to accidents with machinery, slips, trips, falls and impact injuries with moving plant | Staff Exhibitors Contractors Venue staff Crew | 2 | 4 | 8 | Venue will operate on half lights during build up and break down and full lights during the open period. H/S will monitor during the build up/break down and will switch additional lights on if required. Request for lighting to be part of late working procedure during the open period. | 1 | 4 | 4 | Low |
| Manual Handling | Muscular/ Skeletal Injuries | Staff Exhibitors Contractors Venue staff Crew | 3 | 3 | 9 | Competent trained lifting contractor on site. Trolley Porter service available on build up and break down. All contractors advised to wear Safety Footwear. H/S officer to monitor and advise accordingly | 1 | 3 | 3 | Low |

| PROBABILITY (P) | SEVERITY (S) | CALCULATION OF RISK (R) | | | | | | | ACTION LEVEL |
|----------------------|--|-------------------------|----------|-----|------|------|------|------|---|
| 5. Almost inevitable | 5. Multi death or very serious injury | PROBABILITY | 5 | 5.M | 10.H | 15.H | 20.H | 25.H | LOW - no further controls required |
| 4. Very likely | 4. Single death or very serious injury | | 4 | 4.L | 8.H | 12.H | 16.H | 20.H | |
| 3. Likely | 3. Serious injury | | 3 | 3.L | 6.H | 9.H | 12.H | 15.H | MED - justify/review for each event day |
| 2. Unlikely | 2. RIDDOR 3 day | | 2 | 2.L | 4.H | 6.H | 8.H | 10.H | |
| 1. Very unlikely | 1. Minor/First Aid | | 1 | 1.L | 2.H | 3.H | 4.H | 5.H | HIGH - immediate action/ further controls needed. |
| | | | | 1 | 2 | 3 | 4 | 5 | |
| | | | SEVERITY | | | | | | |

METHOD STATEMENT FORM

WHAT IS A METHOD STATEMENT?

A work method statement, sometimes called a “safe system of work”, is a document that details the way a work task or process is to be completed. The method statement should outline the hazards involved and include a step by step guide on how to do the job safely. The method statement must also detail which control measures have been introduced to ensure the safety of anyone who is affected by the task or process.

Please type when you complete this form (handwritten forms will not be accepted)

| METHOD STATEMENT | |
|-----------------------------------|-----------------------------------|
| Event Name: | Event Name: |
| Company Name: | Company Address: |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Prepared By: | Position: |
| Signature: | Date: |
| Health and Safety Contact Person: | Health and Safety Contact Mobile: |
| Out of Hours Contact Person: | Out of Hours Contact Mobile: |

Deceleration of Acceptance: I hereby accept the venue’s terms and conditions. Any deviation from the above-mentioned rules and regulations may result in the revocation of the Health & Safety approval related to the activation.