



# FORM 2

# Compulsory Shell Scheme Construction & Health & Safety Declaration Form

### EDITABLE PDF

Simply Type In Details, 'Save As..' Into Your Files and Return Your Saved Copy

Please return this form alongside any required paperwork to:

[amanda.coomber@dimeevents.com](mailto:amanda.coomber@dimeevents.com)

**Deadline: 9th February 2024**

## Company Details

Company Name: \_\_\_\_\_

Stand Number: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Contractors Details

If you are using a contractor, please complete the details below:

Company Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

## Construction Type

**COMPULSORY - Please tick one of the following 2 boxes:**

### No amendments required

If none of the outlined activities below apply to your stand and you are using the shell scheme stand as provided, please tick the box and return the form only.

### Fascia Removal Request

If you would like remove the name board fascia.

Please note if your neighboring stand also requests the fascia to be removed you may be required to have a 1m support wall on each open side. Where this is the case you may be contacted by our Health and Safety team.

**Please tick one of the following if you are erecting a pop up within your shell scheme:**

### Erection of Pop-up stand

If you are planning on bringing a pop up stand please supply the following:

- Dimensions of pop-up
- Visual/ Picture
- Contact Details of the person erecting the pop-up

Other \_\_\_\_\_

**Please submit a Risk Assessment if you are carrying out any amendments to the standard shell scheme provided.**

# **Health and Safety Declaration** **The Health and Safety at Work Act 1974, incorporating CDM 2015**

It is a condition of entry into the conference that every exhibitor, contractor, sub-contractor, supplier and his / her agents comply with the Health & Safety at Work Act 1974 (HASAWA74) and all other legislation covering the venue. The exhibitor accepts that it is his / her legal and moral responsibility to ensure his/her own and others health and safety is not put at risk by their actions (or inactions) during the exhibition.

***To be completed and signed by a competent person as detailed in HASAWA 1974***

Exhibitor: \_\_\_\_\_ Stand Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone: \_\_\_\_\_

Planning Supervisor/Health & Safety Rep: \_\_\_\_\_

I will submit a copy of our Insurance Certificate, together with this completed Health & Safety Declaration form.

I will make available on site a copy of my company's Health & Safety Policy and can confirm that our stand staff will be sufficiently instructed and trained in matters relating to Health & Safety and their duty of care in order to carry out their tasks competently.

## **Site Induction**

By signing this declaration I am confirming that all staff employed by, or contracted to, this company who wish to access the site, have seen and understood the Venue Site Induction information and will comply with all requirements therein.