



# BISHOP WILTON

## SHOW AND CRAFT FAIR

121<sup>st</sup> Show: Saturday 20<sup>th</sup> July 2019

[www.bishopwiltonshow.com](http://www.bishopwiltonshow.com)



REGISTERED CHARITY NUMBER: 1178613

### CRAFT STALLS

## RISK ASSESSMENT FORM

- You must complete both of these forms
- Assess the risks as they stand - if in your opinion there is no risk please state NO RISK
- Fill in your name and address.
- Sign and return the form

Please complete using BLOCK CAPITALS – Copy this page if more space is required

Company Name: .....

Address: .....

Responsible Person: .....

Date of Assessment: .....

Signature of Assessor: .....

**HAZARD**

***Example:***

*LPG bottles for cooker*

**PERSON AT RISK**

*Staff & General Public*

**CONTROLS TO MINIMISE RISK**

*Gas bottles held in secure, locked container, changed by trained staff only*

FIRE ASSESSMENT – Please complete separate form

1. Read the attached notes before completing this form
2. Any electrical appliances used on the craft stalls must have a current 'Portable Appliance Test Certificate'
3. Attach a copy of your Public Liability Insurance if applicable



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## FIRE RISK ASSESSMENT FORM

Please complete using BLOCK CAPITALS

Organisation or Company: .....

Responsible Person: .....

**Operational Activity:** (Please indicate which description best reflects the activities on your stand):

Retail Outlet  Demonstration  Static Display

**Hazards associated with above activity:** (Please tick all of which apply, if the hazards are present on your stand during your occupation at the Bishop Wilton Show):

LPG  Highly Flammable Liquid  Dry Combustible

Machinery  Hot Surfaces  Heat & Ignition Sources

Use of Sharps  Electrical Equipment  Working at Height

Dangerous Overcrowding  Demonstration

Please indicate how you intend to control the fire and other represented hazards associated with your occupation of the stand. All exhibitors are reminded that the fire controls for the stand will be the same as for any high street retail outlet.

During the build period: .....

.....

During the open period: .....

.....

During the breakdown period: .....

.....

Signature of responsible person: ..... Date: .....