



## **North Norfolk Safety Advisory Group Event Application Form**

This application should be completed by the person who is responsible for Event Planning. It should be submitted 12 weeks in advance of your event.

Please complete all relevant areas (If there is insufficient space please use the additional information box provided on page 8 of this form)

Name of Event	
Event Location	
Date(s) of Event	

Is the event to be held on land owned or managed by North Norfolk District Council?  
(please tick one box only)

Yes

No

Unknown

### **Section One – Organiser Details**

Name of Organisation	
Event Organiser(s)	
Contact Address (including Postcode)	
Contact Telephone Number	

Mobile Telephone Number

E-Mail Address

## Section Two – Event Details

Event Description – Please tell us about your proposed event

Is this a (please tick one box only)

Charity Event

Fund Raising

Non-Commercial

Community Service  
Event

Commercial

For Charity Event

Name of charity

Charity registration number

Will all income go to the Charity concerned?

Yes

No

If No, please give details

### Location of Event

A site plan layout or plan of premises showing the position of stall, marquees, arena, exhibition units, first aid, lost children, toilets, car parking etc. and list of programme items is required. In respect of races etc., a detailed route plan which must also show location of

route marshal.

Site Plan attached? Yes  No

Who owns the land?

Has permission been obtained from the land owner? Yes  No

Date to enter site for preparation

Date	<input type="text"/>	Time	<input type="text"/>
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Site will be vacated after the event

Date	<input type="text"/>	Time	<input type="text"/>
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Is the Event free? Yes  No

If No, what is the admission price?

Will you be selling programmes? Yes  No

If Yes, what is the proposed price?

Number likely to attend

(1) At any one time

Public	<input type="text"/>
Staff	<input type="text"/>
Performers	<input type="text"/>

(2) During the event

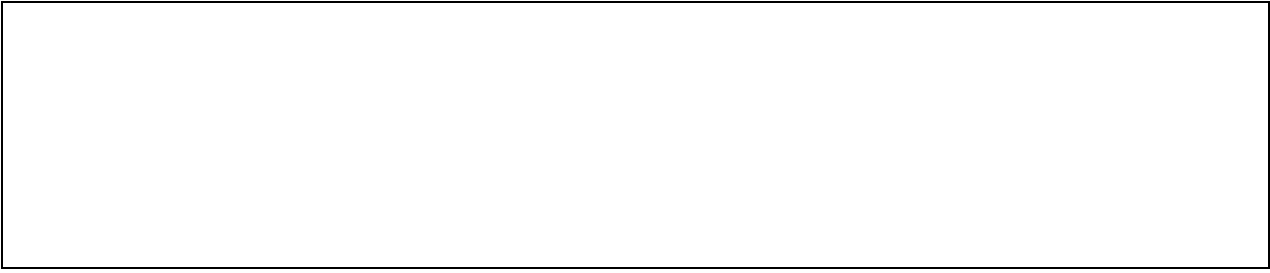
Public	<input type="text"/>
Staff	<input type="text"/>
Performers	<input type="text"/>

Age profile of audience (e.g. children/family)

Under 18's  18-35 years  36-64 years  Over 65 years

Have you held this Event before? Yes  No

If Yes, please give details \_\_\_\_\_



Is this Event

One off

Recurring

If Recurring, how often?

### Section Three – Alternative Arrangements

Is there a possible alternative site?

Yes

No

If Yes, where?

Is there a possible alternative date?

Yes

No

If Yes, when?

### Section Four – Event Activities

Do you intend to utilise or permit any of the following attractions at the event? If so, please tick the appropriate boxes (some of these may not be permitted at all sites).

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Fireworks/pyrotechnics           | <input type="checkbox"/> Power Supply           | <input type="checkbox"/> P A System      |
| <input type="checkbox"/> Live Entertainment               | <input type="checkbox"/> Live Music             | <input type="checkbox"/> Toilets         |
| <input type="checkbox"/> Food & Drink Concessions         | <input type="checkbox"/> Portable Generator     | <input type="checkbox"/> Alcohol         |
| <input type="checkbox"/> Carnival/Procession              | <input type="checkbox"/> Motorcycles            | <input type="checkbox"/> Market Stalls   |
| <input type="checkbox"/> Stewarding/Security              | <input type="checkbox"/> Lost Children Point    | <input type="checkbox"/> Coconut Shy     |
| <input type="checkbox"/> On Site Communications           | <input type="checkbox"/> Portable Staging       | <input type="checkbox"/> Marquees        |
| <input type="checkbox"/> Fairground Equipment             | <input type="checkbox"/> Water (site dependent) | <input type="checkbox"/> Barrier/Fencing |
| <input type="checkbox"/> Re-Enactment Groups              | <input type="checkbox"/> Foreshore Boat         | <input type="checkbox"/> Parachutists    |
| <input type="checkbox"/> Inflatables (e.g. Bouncy Castle) | <input type="checkbox"/> Hot Air Balloons       | <input type="checkbox"/> Balloon Launch  |
| <input type="checkbox"/> Horses/donkeys other animals     | <input type="checkbox"/> Other Motor Vehicles   | <input type="checkbox"/> Train Hire      |
| <input type="checkbox"/> Bonfire/Barbecue Permit          | <input type="checkbox"/> Berthing Facilities    | <input type="checkbox"/> Aircraft        |
| <input type="checkbox"/> Living History or Other          |   |  |

Other (please specify):

If you have indicated in your application you will be using 'portable staging' please provide specifications of the structure including details such as dimensions, stairs, handrails, etc.

## Section Five – Highway and Traffic Implications

If a formal Traffic Order is required, please allow 6 weeks' notice. For addition help contact Norfolk County Council Customer Service Centre on 0344 800 8020.

Do you anticipate the need for:

- |                              |                          |  |                   |                          |
|------------------------------|--------------------------|--|-------------------|--------------------------|
| Road closure diversion       | <input type="checkbox"/> |  | Traffic           | <input type="checkbox"/> |
| Car park closure restriction | <input type="checkbox"/> |  | On street parking | <input type="checkbox"/> |

If you have ticked any of the above, please provide full details or locations, dates and times.

Please provide details of the number, weight and size of delivery vehicles and/or participating vehicles.

Will vehicles be left on the site overnight? Yes  No

Will there be overnight security on site? Yes  No

You will be required to ensure the toilet facilities are adequate. Please submit details of your proposals to include method of disposal and if toilets are hired, the name and address of the hire company.

Please identify the method to be used in order to maintain the area free of litter and refuse.

Do you intend to use: Highway Directional Signs  Banners/Posters

Please provide full details:

Will you provide parking space for staff? Yes  No

And/or the General Public? Yes  No

If Yes, please indicate the approximate number of vehicles attending the event, indicate on your site plan your proposed car parking area and how you intend to manage the parking of those vehicles.

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## Section Six – Insurance

Has insurance been arranged in respect of Public Liability or Third Party risks? (including production liability where appropriate)

Yes  No

Name of insurer

What is the value of the cover?

**Please attach a copy of your Insurance Certificate**

## Section Seven – Licensing

With the implementation of the Licensing Act 2003 if your event includes: live/recorded music, dancing, plays films, indoor sporting events, boxing or wrestling entertainment or anything of a similar description, late night refreshment, or alcohol you will need to contact North Norfolk District Council's Licensing Team on 01263 516223 or email [licensing@north-norfolk.gov.uk](mailto:licensing@north-norfolk.gov.uk)

Have you applied for a Temporary Event Notice?

Yes  No

Have you applied for a Street Trading Licence?

Yes  No

## Section Eight – Health and Safety

Have you completed a risk assessment of your venue/location?

Yes  No

If Yes, please attach risk assessment to application

Attached?

Yes  No

Please supply the name of your First Aid Company

Number on site of:

First aiders

Ambulances

Paramedics



If using an independent ambulance provider we recommend that you use a Care Quality Commission registered provider.

Have you completed a Medical Plan?

Yes

No

If Yes, please attach medical plan to application.

Attached?

Yes

No

Name and address of nominated Events Safety Officer

Please indicate who you have made contact with regarding your event.

If you have any further comments or information in support of your event application please use the space below.

## Section Nine – Declaration

In the event that arrangements alter to those proposed, the Safety Advisory Group will be notified in order that it may review its advice. I acknowledge that the Safety Advisory Group will not maintain its support of this event in the absence of notification of any major change to arrangements.

### Checklist of Supporting Information

I have attached the following supporting documents:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Event Plan       | <input type="checkbox"/> Event Manual        | <input type="checkbox"/> Risk Assessments |
| <input type="checkbox"/> Fire Assessments | <input type="checkbox"/> Insurance Documents | <input type="checkbox"/> Medical Plan     |

Signed

Position

Date

Please note: Copies of this application will be forwarded to all members of North Norfolk's Safety Advisory Group including all of the Emergency Services and relevant Local Authority Services.

For Events held on land owned by North Norfolk District Council your application will be passed to the property services team to review and you will be required to sign and return NNDCs 'Events on North Norfolk District Council Land - Conditions of Use' available on request from [Property.services@north-norfolk.gov.uk](mailto:Property.services@north-norfolk.gov.uk)

### Please return your completed application form to:

By Post: North Norfolk Safety Advisory Group  
North Norfolk District Council  
Holt Road  
Cromer  
Norfolk  
NR27 9EN

By E-Mail: [SAG@north-norfolk.gov.uk](mailto:SAG@north-norfolk.gov.uk)