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| **Darlington Public Event Safety Advisory Group** | DBC logo |
| **EVENT NOTIFICATION FORM (F1)** | **Office Use**  **Reference:**  **Date Received:** |

This form will be circulated to members of Darlington Public Event Safety Advisory Group (PESAG) for the purpose of notifying all members of the group that an event is taking place.

This form acts as the initial brief to highlight to members of PESAG the nature and size of your event. It will enable key agencies to provide advice and guidance on specific aspects of your event (road closures, licensing requirements etc) helping to inform and assist you in the planning and delivery of a safe event and minimise the risk to public safety.

Whilst this is an initial notification of your event, it would assist the group in the assessment of the event proposals if you would please complete each section in as much detail as possible so that the relevant key agencies can provide the correct level of support and guidance.

Please read the Darlington Public Event Safety Advisory Group Safety Guidance for Organisers before submitting your notification and refer to the published guidance.

<https://www.darlington.gov.uk/your-council/events/safety-advisory-group/#guidance>

1. EVENT DETAILS

Please complete each section and provide as much detail as possible in relation to the type and nature of your event. **(Please tick as appropriate – double click on the box and select ‘checked’ and then click ok)**

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| **1.1 Name of Event** |  | |
| **1.2 Type of Event** |  | |
| **1.3 Date of Event** |  | |
| * 1. **Nature of Event**   (Please tick) | Charitable event  Voluntary / Community Event  Commercial event  Private event | |
| * 1. **Description of Event Activity** | (Please provide an overview of what will be happening) | |
| * 1. **Event Audience** | **(1) Please state expected numbers At any one time**  Spectators/Public:  Staff:  Performers: | **(2) Please state expected numbers During the whole event:**  Spectators/Public:  Staff:  Performers: |
| * 1. **Event Start/Finish times** | Date to enter site for preparation: | |
| Start time each day: | |
| Finish time each day: | |
| Date/time the site will be vacated after the event: | |
| * 1. **Is there a charge to the public to take part in the event?** | No  Yes (If yes, please state how much) | |
| * 1. **Has the event been held before?** | (If yes, please provide details) | |
| * 1. **If your event has been held before, do you plan to operate as per previous events or will there be any significant changes?** | (If yes, please provide details) | |

2. EVENT ORGANISERS DETAILS (Mandatory)

Please complete each section.

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| **Name of Event Organiser/Manager** |  | |
| **Name of Event Safety Officer** |  | |
| **Name of Organisation** |  | |
| **Address** |  | |
| **Email** |  | |
| **Tel No** | Mobile: | Landline: |

3. EVENT LOCATION

Please complete the location details of your event. If your event is in more than one location or on a public highway please specify the details. A site location plan should accompany this notification showing the event area, entrances/exits, the nearest access roads and car parking areas.

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| **Main Location of Event** | **Land Owner(s) (Including address)** |
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| **Have you been granted permission to use the land by the land owner?** | |
| If yes, please state the person(s) who granted permission and their contact details |  |

# 4. LICENSING DETAILS

Please complete each section. The information contained within this section will help determine if a license is required.

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| * 1. **Licensable Activity 1**   **Will there be alcohol at the event?** | There will be no alcohol at the event  We are selling alcohol  We are serving alcohol (No sale)  Public can bring their own |
| * 1. **Licensable Activity 2**   **Will there be regulated entertainment?**  (If you have ticked yes to one or more of these, your event will need to be covered by a license) | Live music  Performance of a Play(s)  An exhibition of a Film(s)  Playing of recorded music  Performance of dance  Provision for making music  Provision of facilities for dance  Boxing or wrestling entertainment  None of the above |
| * 1. **If you require a license for your event have you spoken with the licensing authority?**   (If you require a Temporary Event Notice the Licensing Authority require 10 working days’ notice.) | No license required  The venue is already licensed  We are unsure if a license is required  We are in contact with the licensing authority  We have submitted an application for a TEN  A TEN has been approved |

# 5. EVENT HEALTH AND SAFETY DETAILS

Please complete each section.

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| * 1. **Will food be served at your event?**   (If you are providing food/drink to the public you will be required to submit a list of catering suppliers) | Food will not be provided  Food will be provided by event organiser(s)  Food will be provided by professional caterers  Participants will bring their own (for individual consumption only)  **If food is provided please provide a full list of catering providers with your application.** |
| * 1. **Will the event create any noise (spoken word/PA system, etc)?** | Recorded/livemusic will be played  Fireworks  Noise from the audience/spectators/participants  Other (please state)  There will be no noise |
| * 1. **Does your event have Public Liability Insurance?**   (Please state the level of cover i.e. £10m) | Public Liability Insurance £  Employer Liability Insurance £ |
| * 1. **Will there be any electricity, gas be used at the event? (Please provide details of what and how it will be used)**   (Please note: you may be asked to provide safety inspection records) | **Electricity**  There will be no electricity on site  There will be electricity on site  (Please state how it will be generated/provided)    **Gas**  There will be no gas on site  There will be gas on site  (Please state how it will be provided) |
| * 1. **Will there be any unusual and /or high risk activities taking place at the event**   (Including set up and clear up) | Working at height  Pyrotechnics  Vehicle movement  There will be no high risk activity |
| **5.6 Will any temporary structures be erected?** | There will be no temporary structures  There will be marquees  There will be scaffolding  There will be fencing  There will be stage(s)  There will be bouncy Castles / Inflatables  There will be large banners/signage  There will be a fun Fair  Other (please state) |
| * 1. **Who is providing first aid/medical cover?**   **(Please provide details – Who and how many, include documentation of cover provided and/or qualifications where applicable)** |  |
| * 1. **Will stewards be deployed as part of the management of the event? If yes a copy of the stewarding plan should be submitted.** | There will be stewards  Stewarding plan enclosed  There will be no stewards |

# 6. TRAFFIC MANAGEMENT

Please complete each section.

If your event affects the highway or involves a road closure, please enclose a plan that clearly highlights the road or footpath affected.

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| **6.1 Does your event take place on a public highway?** | The event does not go onto a public highway  The event partly uses a public highway  The event is all on a public highway |
| * 1. **Are you applying for road closures?** | We are applying for road closures  We are not applying for road closures  We are unsure if we need to apply for any closures  *If you are applying for road closures, please provide us with a* ***copy*** *of your application* |
| * 1. **Will there be any parking requirements for your event?**   (please provide full details) |  |

# 7. SUPPORTING INFORMATION

In order to support the Public Event Safety Advisory Group (PESAG) to gain a further understanding of how you will manage your event, please supply, with return of this notification form, the following documentation:

Event Location Plan **(A location plan should accompany this notification - showing the event area, entrances/exits, the nearest access roads and car parking areas.)**

Event Site Plan **(A separate site plan showing the proposed positions of stalls, marquees, arena, exhibition units etc.)**

Event Management Plan <https://www.darlington.gov.uk/media/3466/a1_writing_an_event_plan_-rev_april_2016.pdf>

Event Risk Assessments <https://www.darlington.gov.uk/media/3479/a4_event_risk_assessment-3.pdf>

Public Liability Insurance

PESAG recommends that as a minimum the documents listed above should be in place for your event.

Further help and guidance can be found on the PESAG webpage

<https://www.darlington.gov.uk/your-council/events/safety-advisory-group/>

**Please note:**

These documents will be made accessible to the PESAG members for the purpose of checking measures for public safety, sharing information and contingency planning between key agencies. PESAG members will share their feedback with the event organiser identified on the above documentation and in the event planning processes.

# 8. INFORMATION / SUBMISSION DETAILS

Please email your form to:

[PESAG@darlington.gov.uk](mailto:PESAG@darlington.gov.uk)

Alternatively forms can be posted to:

Public Event Safety Advisory Group, Darlington Borough Council, Darlington, DL1 5QT

For more information please use the email address above or contact 01325 405802.

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| **9. WEBSITE INCLUSION** |

If you would like your event to be promoted on the Council Events webpage please submit your details at: <http://www.darlington.gov.uk/your-council/events/add-your-own-events/>

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| **10. PRIVACY NOTICE** |

Please consult Darlington Borough Council’s website for details:

<https://www.darlington.gov.uk/your-council/data-protection-and-freedom-of-information/privacy-notice/>

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| **11. DECLARATION** |

I confirm that the information contained within this document is accurate and correct to the best of my knowledge.

I understand that Darlington Borough Council and Darlington Public Events Safety Advisory Group (and its members) acts solely as an advisory body and cannot accept any responsibility for any aspect of my/our event.

I understand that the responsibility for safety at my/our event remains solely with the event organiser.

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| **Print name**: | |
| **Role within the Event**: | |
| **Signed**: | **Date:** |