SOUTH SUFFOLK AGRICULTURAL ASSOCIATION LTD



Founded 1888

(Incorporated 1998. Limited by Guarantee.

Registered in England No. 3685798)

Registered Office: Neville House, Seven Hills, Ingham, Bury St Edmunds, England

IP31 1PL



Secretary: Mrs S. Stennett, Neville House, Neville House Farm, Ingham, Bury St Edmunds, Suffolk IP31 1PL Tel. no. 01284 412606

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South Suffolk Show 2024 Sunday 12th May 2024

HEALTH & SAFETY CHECKLIST FOR EXHIBITORS

All exhibitors must complete the below checklist and all following sections relevant to them, and return with any required certificates / documents by 30th April, by email to <u>info@southsuffolkshow.co.uk</u> or post to SSAA Show Secretary, Neville House, Neville House Farm, Ingham, Bury St Edmunds, Suffolk IP31 1PL

Stand Name		
Stand Contact Name:		
Stand Contact Tel		
Stand Contact Email		
 All Exhibitors MUST confirm key information and evidence of adequate insurance All Exhibitors MUST complete a Fire Risk Assessment All Exhibitors MUST submit suitable and appropriate Risk Assessment(s) including appropriate Control Measures covering build-up, show days and breakdown 		CROSS TO CONFIRM ATTACHED
Complete and return THIS CH	ECKLIST	
Section A - Evidence of Adequ	ate Insurance	
Section B - Fire Risks & Asses	ssment	
Section C - General Risk Asse	ssment	
•	following please complete Section D: tality, preparation and/or live cookingdemonstrations	

SECTION A: EVIDENCE OF ADEQUATE INSURANCE

All exhibitors must ATTACH GOOD COPIES OF INSURANCE CERTIFICATE OR BROKER'S LETTER OF COVER CONFIRMATION

- · All exhibitors must provide evidence of adequate insurance cover during the event period
- Please read the insurance requirements section to make sure your stand is adequately covered by the insurance policy
- · If cover is due for renewal prior to the event, please send copies of new documents provided as soon as these become available

PUBLIC LIABILITY							
Name of insurer: Policy No:	Amount of cover:						
	nd one or more fire extinguishers, suitable for the fire risks preser						
What fire extinguisher/s will be provided on the stand - type/s: water, foam, dry powder, carbon dioxide, fire blanket, sizes and number/s							
FIRE RISK ASSESSMENT complete below or submit a su	nitable assessment in your own format:						
IDENTIFY Sources of ignition: (e.g. smoking, cooking/barbeques, electrical equipment, sources of fuel including gas and flammable liquids, demonstrations involving hot work, vehicles on the stand space, ammunition, etc.) Persons or equipment at risk: (e.g. visitors, children, exhibitors', contractors' & Organiser's personnel, vehicles, structures, etc.)							
from sources of ignition & suitable containers for fuel sour	& fuel sources, minimising fuel available, suitable storage away ces including gas & flammable liquids, supervision, checking on with other exhibitors regarding conjunction of sources of						

SECTION C: GENERAL RISK ASSESSMENT

All exhibitors must complete below or submit a suitable assessment in their own format that addresses all sections below, covering build-up, show days and breakdown

Activity	Hazard	Persons at Risk	Risk Ranking	Control Measures

- IDENTIFY ALL POTENTIAL HAZARDS (build up & show days & breakdown) (e.g. erecting & dismantling own structure, other work at height, slips & trips, electricity, food handling, contact with paints,thinners & other hazardous substances, lifting equipment & other machines, vehicles, horses & other animals)
- CONSIDER THE TYPES OF PERSONAL INJURIES OR EQUIPMENT DAMAGE as a result of the hazards (e.g. falls, trips, electric shock, burns, food poisoning, crushing & trapping, kicks & bites)
- CONSIDER THE CATEGORIES OF PERSON OR EQUIPMENT AT RISK (e.g. visitors, exhibitors', contractors' & Organiser's personnel, vehicles, structures, etc., etc.)
- CONSIDER THE PROBABLE SEVERITY OF INJURIES/ DAMAGE THAT COULD OCCUR High: fatal/major injury/significant damage Medium: injury/damage Low: First aid/lost time
- CONSIDER THE LIKELIHOOD THAT INJURIESOR DAMAGE COULD OCCUR High: Very LikelyMedium: Likely Low: Possible but unlikely
- CONTROL MEASURES (PRECAUTIONS) USED TO REDUCE RISKS TO AS LOW AS REASONABLY PRACTICAL (e.g. use of suitable access equipment, housekeeping measures, checking of equipment, avoidance of hazardous substances, washing facilities, temperature controls and monitoring)

SECTION D – FOOD AND DRINK

This section is relevant to Exhibitors who will sell food or drink and/or serve food or drink.

The Food Hygiene & Safety Team at West Suffolk Council, the local authority for The South Suffolk Show, requires that exhibitors who will be selling food or drink or serving it as hospitality must provide the following information about their food hygiene, alcohol licensing and safety arrangements. This Form will be used by the Council's Environmental Health Officers to make monitoring visits to those Exhibitors and caterers during the event.

Name of the local authority that your business is registered with as a food business:								
What type of food safety management systemdo you have in place?	НАССР		SFBB	Cook S	afe Other (state)			
(Cross the relevant box):								
Date of last Food Safety Review					•			
What is your food hygiene rating? (Cross the rating number) Please enclose a copy of your food hygiene rating	5	4	3	2	1	0		
certificate								
What was the date of your last food hygiene inspection?								
If you do not have a food hygiene rating, why is this?								
Cross to indicate what will be provided:			Food					
	Non-alcoholic drinks							
	Alcoholic drinks							
Description of the food &/or drink to be served - whether for sale or sampling • Is it lower risk e.g. crisps, nuts, sealed jars, pre-packed etc., OR higher risk e.g. pies, pasties, cooked or raw meat, etc.? • Is it intended for immediate consumption or to take home?								
What hand and utensil washing facilities will be available for use on your stand?								
Will LPG be used on your stand? Yes If Yes, how many cylinders connected and in use?								
Confirm that all handlers have Hygiene Awareness training and are Supervisedby a competent person								