

Event application

High impact/ over 100 attendees

APPLICANT DETAILS			
Name			
Phone number		Email	
Address			
Contact on the day			
Phone number		Email	
EVENT NAME			
Event location			
Date(s)			
Start time		End time	
Set up date		Set up start time	
Pack up date		Pack up finish time	
Contingency date(s)			
Is this a community event? (tick)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Description of event			
Number of staff/ volunteers involved			
Number of expected attendees			
EVENT REQUIREMENTS (please attach information)			(tick)
Site plan (marquees, fencing, generators, bins etc)			<input type="checkbox"/>
Access requirements (eg gates/ bollard unlocked)			<input type="checkbox"/>
Egress (vehicle movements for set up)			<input type="checkbox"/>
Parking plan			<input type="checkbox"/>
Noise management plan			<input type="checkbox"/>
Waste management plan			<input type="checkbox"/>
Health and safety plan			<input type="checkbox"/>
Alcohol, Smoking and Vaping plan/approvals			<input type="checkbox"/>
Public liability insurance (please attach)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Event safety plan template

High impact/ above 100 attendees

As an event organiser, you are responsible for planning and managing risk at your event. This template is provided to assist you to plan and deliver a safe, healthy and successful event.

This template has been developed to reflect expectations for the management of risk of events and should be populated in consultation with WorkSafe New Zealand event safety guidelines.

You are welcome to develop your own documentation should you choose not to use this template.

GENERAL INFORMATION			
Event name		Date	
Event location			
Organisation delivering event			
ENVIRONMENTAL/COMMUNITY IMPACTS			
Traffic – has the traffic management plan been approved by council transport team			
Parking – where will the public park to access the event			
Waste - how will you dispose of waste (including liquid waste)			
Noise - how will you manage noise levels that may apply to the event location or resource consent conditions			
Alcohol – is alcohol being allowed, sold or supplied? if so, who is supplying, when, who has approved this and under what terms	eg alcohol will be managed in accordance with the attached alcohol management plan which was approved by Southland District Council.		
Smoking/Vaping. – events held on council land will be promoted as smoke/vape free. Please confirm how you will promote/include this?	Please note: Council has a Smoke/Vape Free Policy 2023 under review. The current policy at the time of event application/event is applicable. It is not a ban on smoking and vaping in councils open spaces however this is part of an educational tool to promote healthy smoke and vape free lifestyle choices, particularly for our family and young people.		

EMERGENCY INFORMATION AND CORE PROVISIONS	
Emergency contact on the day (event manager)	
Phone number	
Emergency contact on the day, provider (ie – St Johns)	
How to identify and contact them?	
Location of first aid kit/s	
Location of deliberator/s	
Evacuation plan	
Location of other safety equipment such as fire extinguisher/ spill kit (if relevant)	
Toilets available	
Parking available	
Event security	
<p>IF THERE IS AN EMERGENCY, PLEASE SEEK MEDICAL TREATMENT IN THE FIRST INSTANCE. YOUR COUNCIL CONTACT AND WORKSAFE NEW ZEALAND MUST BE CONTACTED IF A NOTIFIABLE EVENT OCCURS AS A RESULT OF WORK BEING UNDERTAKEN.</p>	

HAZARDS AND CONTROLS

All hazards that may be onsite during the event must be identified and controlled. Examples of these can be found in the attached hazard register.
Please identify below the hazards that you have identified and the controls in place below or attach your own version to the event application.

HAZARDS	OVERALL RISK LEVEL	LEVEL OF CONTROL (eliminate, minimise etc)	CONTROLS (how will we prevent it)	PERSON RESPONSIBLE

HAZARDS AND CONTROLS				

VOLUNTEERS/ STAFF/ CONTRACTORS INVOLVED

All volunteers, contractors and staff must be present for a safety briefing prior to the event beginning, this should cover basic information required for them to do their role safely. A logn for volunteer sign in is also attached.

If the event application has a greater or alternative process for this, please simply attach it.

Who is primary contact during the event	<input type="checkbox"/>
What to do if there is an emergency	<input type="checkbox"/>
Location of first aid kit/medical services	<input type="checkbox"/>
Hazards and controls the volunteers/staff may encounter or create	<input type="checkbox"/>
Security and toilets	<input type="checkbox"/>
Rules for traffic	<input type="checkbox"/>
Location of fire extinguishers (if relevant)	<input type="checkbox"/>
How to report an incident	<input type="checkbox"/>
Schedule	<input type="checkbox"/>
Security	<input type="checkbox"/>

AN ATTENDANCE REGISTER OF VOLUNTEERS INVOLVED SHOULD BE CREATED AND KEPT IN CASE OF EMERGENCY AND TO ENSURE CONTACT TRACING IF REQUIRED (SEE BELOW FOR EXAMPLE).

NAME	DATE/TIME	CELLPHONE NUMBER	EMERGENCY CONTACT DETAILS



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