









Contact Details of Organiser

Name of organiser/organisation:
Name of person in overall control of event:
Contact address:
Postcode:
E-mail address:
Telephone number prior to event (landline):
Telephone number prior to event (mobile):
Telephone number during event (landline):
Telephone number during event (mobile):
Event Details
Name of event:
Event location address or starting point:
Postcode:
Is this a licensed premises? YES□ NO□
Nature of premises
Have you considered the need to restrict or control parking on the highway in the vicinity of your event?
Are any footpaths, bridleways or roads that are normally open to the public affected or used as part of the event?
Is the landowner of the event site different from the event organiser?
Is the event site on or beside open water (river/sea/lake)?:

Event Timings
Set up
Date from/to:
Number of days:
Times from/to:
Open to public
Date from/to:
Number of days:
Times from/to:
Take down
Date from/to:
Number of days:
Times from/to:
Nature of Event, and Capacity
Brief description of event proposed:
Is your event is part of a wider festival or series of events?
If there are other events being held or marketed in association with your event please provide detail:
Is it a ticketed event? YES \square NO \square
Are tickets available on the day? YES \square NO \square
Highway and Traffic Implications
Are you proposing to direct traffic by persons/signage on the highway? YES \square NO \square
If YES please provide CSAS (Community Safety Accreditation Scheme) accredited traffic management company details:

Have you applied for a Temporary Traffic Regulation Order? YES \square NO \square
Licensable activities Please tick the appropriate boxes to show the activities you intend to utilise or permit at the event? (Some of these may not be permitted at all sites).
Supply of alcohol:
Live music: □
Recorded music: □
Performance of dance: □
Plays: □
Films: □
Boxing or wrestling: □
Indoor sporting event: □
Late night refreshment (hot food or drink from 11pm-5am): \Box
Gambling (e.g. raffle, lottery, gaming machines, betting, bingo, poker): \Box
Adult entertainment (e.g. lap-dancing, nudity): □
Street collection:
Please contact a member of North Devon Council's Licensing Team for further advice on licensable activities as there are exemptions that apply (<u>licensing@northdevon.gov.uk</u>)
Food/Drink
Are you having any catering at your event? YES \square NO \square
Please list the organisations providing catering at your event (if needed please provide information on an additional sheet or covering email):
Have you supplied food and safety questionnaire checklists for the food traders that will be at your event to North Devon Council's Food Health and Safety Team (foodhygiene@northdevon.gov.uk)? YES \square NO \square

Insurance Has insurance been arranged in respect of public liability or third party risks (including employers and products liability where appropriate)? YES□ What is the name of the insurer?: What is the value of cover?: £ (Recommended that this should not be less than £5 million) Security/Drugs Capacity of the event: Are you planning to engage security personnel and stewards etc.? YES□ NO \square If YES please provide detail/give details of the Security Industry Authority (SIA) company employed: If YES please details of numbers of stewards and security personnel to be deployed: Are you planning to have a lost found children point: YES□ NO \square Will you have in place a drugs policy for the event?: YES□ NO \square Will you have in place a drug collection bin?: YES□ NO □ If YES company providing collection: **Activities** Please tick if any of the following are to be provided: Fireworks, pyrotechnics □ Bonfires □ Inflatables or bouncy castles: Animals/livestock: □ Temporary structures (e.g. marquee, stage): □ Overnight camping:

Traffic movement in crowd area: □

Helicopter/aircraft/hot air balloon/parachutists: □

Dangerous goods storage and use (including gas bottles for catering): \Box		
Portable generator/power supply: □		
Funfair rides: □		
If there are any other higher risk activities as part of the event or incidental to the r detail:	nain event	t please
Checklist		
Have you included with your application the following?:		
An Event Management Plan:	YES□	NO□
(Suggested to include noise management; counter terrorism measures; sanitation, recycling arrangements; medical arrangements; water supply and onward distributions.)		
Location map/site map:	YES□	NO□
Copy of public liability certificate (recommended £5million/check your exclusions)	YES□	NO□
Health and safety risk assessment:	YES□	NO□
Fire risk assessment:	YES□	NO□
Lost child/vulnerable persons policy	YES□	NO□
Drugs policy (where applicable)	YES□	NO□
Traffic management plan, including road closure documentation	YES□	NO□
Declaration		
I confirm that I have <u>notified</u> SWAST of my event	YES□	NO□
I confirm that the above details are correct and that I am over 18 years of age. I als any/all relevant licences/permissions have been and/or will be applied for prior to the second se		that
Signed:		
Position:		
Date:		