

Keyingham Parish Council

Application to hold an event or activity on land owned or managed by Keyingham PC or by the Trustees of the Boyes Lane Recreation Ground

GUIDANCE NOTE: BEFORE SUBMITTING YOUR APPLICATION FOR CONSIDERATION BY THE PARISH COUNCIL/ TRUSTEES PLEASE CONTACT ERYC LICENCING TEAM FOR ADVICE REGARDING THE REQUIREMENTS FOR LICENCES, NOTICES AND INSURANCE FOR YOUR EVENT.

BRIEF DESCRIPTION TO INCLUDE TYPE, DATE AND DURATION OF EVENT:

BOYES LANE / EASTFIELD ROAD/ SALTAUGH ROAD *Please delete as appropriate.

Name of Main Contact:

Email address:

Telephone:

- Who are the intended target audience and approximate number of participants?
- Is event ticketed / private or open to the public?
- Will there be a cost to enter?
- If the object of the event is to raise funds - how will they be used?
- If applicable please provide the Registered Charity Number:
- Will public liability insurance be applied for?
- How will you ensure the Health, Safety and Well-Being of participants and others who may be affected?

WILL THE EVENT REQUIRE CONSIDERATION OF THE FOLLOWING? (please tick all that apply)

- Alcohol Licence/temporary suspension of prohibition orders
- Fire Safety
- First Aid
- Food Hygiene
- Plant Hire – staging/ public address systems
- Safeguarding of children/vulnerable adults
- Toilets
- Traffic management/parking
- Waste management/disposal

FOR EACH OF THE CATEGORIES TICKED PLEASE PROVIDE A BRIEF EXPLANATION OF HOW THEY WILL BE MANAGED:

Please give the name and contact details of the person (s) responsible for carrying out Risk Assessments:

INSURANCE INFORMATION:

Company Name: _____

POLICY NO: _____

COVER AMMOUNT: _____

EXP. DATE: _____

(PLEASE PRINT)

Applicant Signature: _____

Date: _____

For PC/ Trustees Use only

Outcome of discussion & Feedback:

Request for further information:

APPROVED/ NOT APPROVED*

Signed on behalf of the PC/ Trustees of Boyes Lane Recreation Ground:

Date:

Applicant Notified: