

# Event Safety Checklist

## 1 - Event Details

Event date			
Event name			
Event location			
Event type			
Estimated Attendees			
Start time		Finish Time	

## 2 - General

I have read the event summary and all health and safety documents relating to the delivery of the event including the hazard analysis. Yes/No

I am aware of the Accident/Incident reporting process. Yes/No

I have advised the UniSafe Control Room (security) that the event is taking place. Yes/No

What is the telephone number of the UniSafe Control Room (security)? .....

## 3 - Service of Alcohol

Is alcohol being served or consumed (if NO go to section 4)? Yes/No

Is the service of alcohol operated under a liquor licence? Yes/No

Is the correct service of alcohol signage displayed? Yes/No

Who is responsible for the service of alcohol? .....

Name on licence:..... Date of license expiry: .....

Name of Duty Manager(s):.....

## 4 - Service of Food

Is food being served or present (if NO go to section 5)? Yes/No

Who is responsible for the service of food and food safety? .....

Name of caterer: .....

Where is the nearest sink for food handlers?.....

Where are the nearest toilets? .....

**5 - Fire, Evacuation and First Aid**

Are all exits signs visible? Yes/No

Name of nearest First Aider? .....

Where is the nearest first aid kit?.....

Where is the nearest defibrillator?.....

What is the alarm sound for an evacuation?.....

Who is responsible for announcing an evacuation? .....

Where is the nearest fire extinguisher or hose? .....

Where is the assembly point in case of evacuation?.....

Name(s) of designated fire warden(s)? .....

**6 - Slips, Trips, Falls and Hazards**

Have all visible fall hazards been mitigated? Yes/No

Have all visible trip hazards been mitigated? Yes/No

Are all fire exits and egress routes clear of obstruction? Yes/No

All those operating equipment are trained to do so. Yes/No

All other Health and Safety hazards not previously identified have been mitigated. Yes/No

**7 - Other**

People	Name	Contact number
Event Manager		
Event Owner		
Event Compliance Officer		

Notes/Comments:

**8 - Declaration**

I confirm that this event is safe to proceed and that all reasonable measures have been put in place to ensure the health, safety and wellbeing of any person present (in attendance, adjacent to and working at the event). I understand what to do in the event of an injury, fire, evacuation or other incident which may affect the health safety and wellbeing of any person during the event.

Name:..... Date:..... Time:.....

Signature: .....