

Event Risk Assessment Checklists

Event Management/Approval		
Issue	Action By	Complete
Detailed Event Management Plan issued (see below)	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Check for conflicting events which may impact on the event or the location	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ensure event activities comply with relevant Municipal By-Law(s)	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Special Conditions regarding activities on a road applied (Municipal by-laws)	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Road closure procedures followed where necessary (Municipal by-laws)	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where structures are to be erected on roads ensure requirements of Municipal by-laws are met	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where a Municipal Event Permit is required ensure all activities are adequately detailed in the Event Permit	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Check that event activities and structures etc. comply with all relevant legislation and regulations	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ensure all amusement rides are registered with authorities, check serial numbers.	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ensure any public consultation policies are complied with (where applicable)	Event Organizers/ Municipality	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cancellation-of-event procedures in place	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of appropriate insurances provided by contractors to event (e.g. amusement ride operators, infrastructure suppliers, stallholders). Make sure name of insured and names of contractor match.	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
All organizations or groups involved have an established legal status	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Services contacted, notified of proposal to hold event and preliminary arrangements made if required to provide attendance or assistance	Event Organizers	<input type="checkbox"/> Yes <input type="checkbox"/> No

Event Management Plan	
Detailed Event Management Plan includes all organizations involved in the event	<input type="checkbox"/> Yes <input type="checkbox"/> No
Key roles and responsibilities clearly stated	<input type="checkbox"/> Yes <input type="checkbox"/> No
Event Risk Assessment carried out	<input type="checkbox"/> Yes <input type="checkbox"/> No
Identify who is in control of event and deputy(ies)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bump-In Plan (Set-up of event during which Event Organizer has control of site)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bump-Out Plan (Post event until Event Organizer hands control back to Municipality/site is normal)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Identify who is in control of incidents	<input type="checkbox"/> Yes <input type="checkbox"/> No
Event Safety Officer – monitoring and review responsibilities established throughout the event	<input type="checkbox"/> Yes <input type="checkbox"/> No
Communication arrangements and protocols	<input type="checkbox"/> Yes <input type="checkbox"/> No
Incident Procedures	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Procedures	<input type="checkbox"/> Yes <input type="checkbox"/> No
Coordination between organizations established	<input type="checkbox"/> Yes <input type="checkbox"/> No
Procedures and arrangement for distributing Notices	<input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Services liaison established	<input type="checkbox"/> Yes <input type="checkbox"/> No
Structural Inspections/Occupational Health & Safety	<input type="checkbox"/> Yes <input type="checkbox"/> No
Asset Registers maintained	<input type="checkbox"/> Yes <input type="checkbox"/> No
Safety training needs satisfied	<input type="checkbox"/> Yes <input type="checkbox"/> No
Liaison with public and other organizations established	<input type="checkbox"/> Yes <input type="checkbox"/> No
Licensing	<input type="checkbox"/> Yes <input type="checkbox"/> No
Record of all amusement ride operators, infrastructure suppliers, stallholders held	<input type="checkbox"/> Yes <input type="checkbox"/> No

In Event Risk Management Checklist	
Risk assessment applied to all activities during the event	<input type="checkbox"/> Yes <input type="checkbox"/> No
All identified risks have been examined	<input type="checkbox"/> Yes <input type="checkbox"/> No
Arrangements for managing risk have been identified	<input type="checkbox"/> Yes <input type="checkbox"/> No
Consultation on overlapping areas of risk has occurred	<input type="checkbox"/> Yes <input type="checkbox"/> No
Event Safety reviews organized during the event as needed	<input type="checkbox"/> Yes <input type="checkbox"/> No
Post event de-brief organized	<input type="checkbox"/> Yes <input type="checkbox"/> No