

Contractor Assessment

Contractor	
Contact information	
Address	
Individual completing the form	

We fully understand and accept the requirement, as a condition of entry into

each exhibiting member or employee of the Company, any contractor/sub-contractor, supplier, or other party whose presence and/or activity is associated with our undertakings to comply with the Health & Safety at Work Act 1974 and all other current, relevant legislation, established guidance relating to safety at public events and Pony Club rules and procedures

We also recognise the duty at all times to ensure that the actions of any person undertaking work associated with the Company's stand(s) shall not endanger the health and safety of themselves or others at all times.

The Company has/has not a current health and safety policy - a copy can/cannot be provided upon request

Contractor

Please confirm you have seen and have a copy of the below (all must be seen for hiring purposes):

Insurance (Public Liability)			
Insurance Policy Number:		Expiry date and Insurer:	
Employers Liability Insurance			
Insurance Policy Number:		Expiry date and Insurer:	
Food Hygiene/ Environmental Health Certificate		Issuing Council:	
Risk Assessments		Health and Safety Policy (companies with 5 or more employees)	
Review date:		Review date:	

Contractors on site

Contractor Name	Disclosure check	Contact Number	When Working (date/ Hours)

Considerations

Item	Check	Comment
Example: electrical items are PAT tested	Yes	Stickers are on all items with annual dates
Do the Contractors hold a Disclosure check if working in proximity of children and the vulnerable		
Equipment being used, are the electrical items PAT Tested and in date		
<u>Safety Certificates (if applicable)</u> <ul style="list-style-type: none"> • Gas Safe Certificate • Electric? • Water? 		
<u>Competence Certificates</u> <ul style="list-style-type: none"> • Method statements for works being carried out • COSHH assessments for materials being used • Manual Handling assessments • Noise Assessments for machinery and works carried out 		
<u>Personal Protective Equipment</u> <ul style="list-style-type: none"> • Items identified • Items present and worn during works • Contractor trained staff on use of PPE 		

DECLARATION:

We have fully evaluated our exhibit as being compliant with The Pony Club's requirements and have carried out a risk assessment as attached.

We confirm that our stand staff and others have been given sufficient information, instruction and training to enable them to work in a competent and safe manner.

All staff, including contractors and sub-contractors have been informed of potential risks on site.

We agree to liaise with the Pony Club Organisers to ensure the health and safety of all parties who may be affected by our actions or inactions.

We accept that Pony Club may suspend any activity which they consider contravenes its rules and procedures for safety and agree to take any action required of us aimed at ensuring compliance

Name _____

Signature _____

Date _____

Position _____