**Risk Assessment**

**Applicant's Company / Stand Name -** ...............................................................................

Please fully complete and return this Own Risk Assessment with your Street Market Stand Application Form (You may use your own form if you already have one)

***Failure to do this will result in your application being invalid & Not Accepted***

| Hazard | Outcome | Person At Risk | Measures | Level of  Risk | Person Responsible |
| --- | --- | --- | --- | --- | --- |
| *For example*  *Guy Ropes* | *Trip Hazard* | *Public & Staff* | *Ensure awning is correctly, firmly secured and guy ropes away from walkways* | *High*  *Medium*  *Low* |  |
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This Risk Assessment has been completed by.

Name (Responsible Person- Block Capitals) .......................................................................................

Signed …..................................................................................... Date …...........................................