**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 ofRisk | 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* |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

This Risk Assessment has been completed by.

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

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