



HEALTH AND SAFETY AND INSURANCE DECLARATION

TO BE COMPLETED BY ALL EXHIBITORS

Company name _____ Stand no _____

The Health and Safety at Work Act, etc, 1974 (HASAWA74)

It is a condition of entry into the exhibition that every Exhibitor, Contractor, sub-Contractor, supplier and their agents comply with the HASAWA74 and all other legislation covering the venue. The Exhibitor accepts that it is their legal and moral responsibility to ensure that their own and others' health and safety is not put at risk by their actions (or inactions) throughout tenancy. The exhibitor confirms that its staff will be sufficiently instructed and trained in relevant matters in order to carry out their tasks competently:

a) WE ARE **SHELL SCHEME** AND ARE USING THE UKIO RECOMMENDED CONTRACTORS. We have trained and made our stand staff aware of the potential risks present onsite and we will copy them in with any additional safety information. **We will complete and return a risk assessment by 18 April 2019.** Any significant risks caused by our exhibits, demonstrations and work practises to either ourselves or others onsite are detailed on the form OR if our exhibits, demonstrations and work practises cause NO HAZARD to either ourselves or others onsite our risk assessment form will be marked clearly 'NO/ONLY LOW RISKS'

b) We are **SPACE ONLY**. My principal contractor(s) (named below) has undertaken a specific Risk Assessment and Method Statement for this event in accordance with the HASAWA74. They have trained and notified their staff and sub-contractors in all such areas identified as being of risk. **A copy will be forwarded to the Organisers by 18 April 2019.**

Stand contractor 1

Company _____ Contact name _____

Address _____

Tel _____ Email _____

Stand contractor 2

Company _____ Contact name _____

Address _____

Tel _____ Email _____

Insurance and public liability

I confirm that we have adequate public liability insurance in place to protect ourselves against any loss or damage to our stand, exhibits, property and personnel and for any legal liability incurred in respect of injury or damage to persons or property belonging to third parties.

Health and Safety Representative on the stand will be _____

Position _____ Mobile No _____

Declaration

Authorised by _____ Date _____

Print Name _____ Position _____

Please return to valerie.bassigny@profileproductions.co.uk or fax to +44(0)844 507 0578 by **18 April 2019**