|  |  |
| --- | --- |
| **Event Title** |  |
| **Event Date**  |  |
| **Event Times** |  |
| **Location**  |  |
| **Event Manager / organiser of the event**  |  |

 **Event Management Plan Template 2024**

1. **EVENT OVERVIEW** *Include overview of event*

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**2. SITE PLAN (Map of the site with overlay of event)**

*Please attach an image or document showing the location of the event and include a site plan outlining the layout of the event, so what is going where?*

**3. ROAD CLOSURE / PARKING SUSPENSIONS ( if applicable)**

*Road closure*

|  |  |  |  |
| --- | --- | --- | --- |
| **Start date / time** | **End date / time** | **Road(s) to be closed** | **Notes** |
|  |  |  |  |

*Parking suspensions*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Start date / time** | **End date / time** | **Street(s) to be suspended** | **How many bays required** | **Vehicle registration number (if unknown, please forward on nearer the time)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**4. SCHEDULE OF EVENTS**

*This must cover set up from entry to park/public highway including the event timings basic running order to the clear up and the time you leave the site; please record detail step-by-step until the event is clear and completed*

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| --- | --- | --- | --- | --- |
| **Time** | **Activity** | **Lead Person** | **Role** | **Notes** |
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**5. TRADERS / STALL HOLDERS**

*Please state what traders (if any) will be present*

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| --- | --- | --- | --- | --- |
| **Name** | **What are they selling?** | **Public liability certificate received?** | **Risk Assessment Received** | **Food hygiene certificate received (minimum level 2)** |
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**6. SUPPLIERS (STRUCTURES / EQUIPMENT)**

*List all structures on site and state who is providing what, e.g. company supplying marquees pa/stages/toilets/fencing.*

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| --- | --- | --- | --- | --- | --- |
| **Item** | **Quantity** | **Supplier** | **Risk Assessment Received?** | **Public Liability Insurance Received?** | **Notes** |
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**7. FIRST AID ARRANGEMENTS**

*All events must have a qualified first aiders and/or medical staff on site from set up to leaving the site.*

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**8. HEALTH AND SAFETY PLAN:** *Please outline your plans for:**Emergency evacuation Communication strategy, e.g. how will the event team communicate between each other.*

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*Lost children / vulnerable persons policy: Please outline how you will manage lost children/vulnerable persons? If you have an existing policy, you can upload it to your application.*

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*Welfare policy: What measures are in place to look after staff and members of the public, e.g. drinking water, rest area, disable toilets/baby change facilities etc. Please also ensure you have Covid Safety thinking in place*

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**9. WASTE MANAGEMENT PLAN:** *Please outline your plans to manage waste to return the site to its original state.*

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**10. STEWARDING PLAN:** *How many and what are their roles / responsibilities. Are they SIA licensed or volunteers?*

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**11. KEY CONTACTS**

*Please list all key persons working on the event on the day. Some roles are listed below but please list all applicable roles with contact numbers.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Supplier/ Role**  | **Name** | **Contact Number** | **Notes** |
| Event organiser |  |  |  |
| Event manager |  |  |  |
| Security/steward team leader |  |  |  |
| First aid lead |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Once completed please upload to your application on the portal apply4.com using your account login**

If you require guidance on completing your event plan and risk assessment, please contact the Camden events team:

events@camden.gov.uk 020 7974 5633

We are here to support your event