

SIMPLE RISK ASSESSMENT

RISK ASSESSMENT FOR SIMPLE EXHIBITION STANDS

Stand Name:	Name of person responsible for Health & Safety:	
Stand Number:	Work No:	
	Mobile No:	
	E-mail	
Exhibitor's Responsibilities		
A	as assumed by Haalth and Cafaty locialation. As the subilities it is very second	

An exhibition stand is a workplace covered by Health and Safety legislation. As the exhibitor it is your responsibility to ensure that a suitable and sufficient risk assessment is completed. Failure to do so could lead to delays or ultimately the closure of your stand.

The template is for a simple shell scheme exhibition stand which does not require any structural approval from the organiser or the venue. More complex stands will require a more detailed risk assessment and if you are in any doubt you should contact the organiser.

Does your stand include any of the following? If so you must complete the attached risk assessment for simple stands:

	Yes/No
Display of anything containing liquid fuel e.g a motor vehicle	
Display of sharp objects, weapons (even replica weapons)	
Demonstrations of any kind	
Working electrical appliances other than simple display lighting	
Food Service of any kind other than sweets, snacks and soft drinks	
Heat source of any kind including cookery demonstrations, naked flame or gel	
burners	
Pressurised gases	
Working machinery of any kind even if static	
Laser demonstration	
Any other hazard not identified above which could be a risk	

Note this is not an exhaustive list. You are responsible for identifying any aspect of your stand which could present a hazard.

If you have answered **NO** to all of the above please sign below. If you have answered YES to any of the above please complete the risk assessment attached.

I declare that to the best of my knowledge there are no significant risks relating to this stand

Signed:	Name:	Date:



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Stand Number:	Stand No:			
Risk:				
Who could be harmed?:				
who could be narmed:				
Control Measures in Place:				
control Measures III Flace.				
l To the best of my knowledge the i	nformation provided is correct. The	e control measures in place control		
To the best of my knowledge the information provided is correct. The control measures in place control risk to an acceptable degree.				
Signed:	Name:	Date:		
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