

Office Purposes Only	
Date Submitted	
Our Ref	

HEALTH AND SAFETY AT WORK ETC ACT 1974

Application for a Safety Certificate for a Highland League Football Ground

When completed, this form should be sent to:

Graham Robertson
Team Manager (Health and Safety)
Infrastructure Services
Towie House
Manse Terrace
Turriff
AB53 4AY

BACKGROUND NOTES

As part of the Football Licensing requirements for the Highland League, a safety certificate requires to be issued by the Local Authority with respect to each Football Clubs ground.

The primary objective of the safety certificate is to provide a maximum safe occupancy for each football ground. In calculating a safe capacity for the Football Ground, reference will be made by the Local Authority and relevant consultees to the Guide to Safety at Sports Grounds (The Green Guide).

The Safety Certificate will contain such terms and conditions as the Local Authority consider necessary or expedient to secure reasonable safety in the Football Ground when it is in use for viewing the specified activity or activities at the ground. The terms and conditions may be such as to involve alterations or additions to the ground.

In determining the terms and conditions to include on a Safety Certificate, the Local Authority will consult with the Chief Constable, the Chief Fire Officer and the Area Building Standards Manager.

The Local Authority will aim to process your application within two months from the date of receipt of your application.

N.B - A scaled plan of the sports ground should accompany the completed application.

THIS SECTION SHOULD BE COMPLETED IN ALL CASES

I hereby apply for a Safety Certificate in respect of the football ground described below:-

.....

The Safety Certificate is to be issued to:-

.....

*Delete as appropriate
+If applying on behalf of a sports club, company or some other person, insert status (e.g. secretary)

I make the application *(on behalf of) (as)

.....

Of

Date

Address

.....

.....

.....

Signed

Tel. No.

1. (a) Name and address of sports ground

.....
.....

(b) Name of the occupier

.....

Name and address of the owner
(if different from occupier)

.....
.....

(c) Names and address of any person other than the proposed holder of the certificate who to his knowledge will or may be concerned in ensuring compliance with the terms and conditions of the safety certificate for which this application is being made.

.....
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.....
.....

PART 1: GENERAL SAFETY CERTIFICATE

2. List activities for which the ground provides viewing accommodation and which are to be covered by the general safety certificate (i.e. football).
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-
-

3. Give the approximate date of the construction of the football ground, and details of any subsequent extension or major alteration or re-construction of it, together with relevant dates.
-
-
-

4. Please indicate if the football club has the following policies and documented records in place:-

- | | | |
|--|------------------------------|-----------------------------|
| (a) Health and Safety Policy Statement | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) General Risk Assessment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Fire Risk Assessment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Spectator Safety Policy | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Match day Contingency Plans | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (f) Ground Maintenance Records | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If answer "Yes", please provide copies of relevant documentation as part of Safety Certificate application.

5. Give particulars of any current statutory licenses granted in respect of the sports ground or parts of it:

- (a) Name of licensing authority
- (b) Name of licensee
- (c) Type of licence (liquour, gaming, etc)
- (d) Date of expiry
- (e) Description of the part or parts of the sports ground covered by the licence
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6. (a) State current maximum capacity of the accommodation in the ground for spectators to view activities at the sports ground:

(i) maximum no. of seated spectators

(ii) maximum no. of standing spectators

(b) State any restrictions on that capacity:

(i) seated spectators

(ii) standing spectators

7. Is the number of spectators admitted to each part of the ground controlled on entry ?

Yes

No

If the answer is yes, please provide details of what arrangements are in place:

8. Please provide confirmation of the number of toilets available to spectators within the football ground:-

	W.C. Units	Urinals	WHB
Male			
Female			
Disabled			

9. Do you have separate designated first-aid facilities for spectators?

Yes

No

If the answer is "No", please provide details of what arrangements are in place:-

10. Please provide details of your stewarding arrangements for match days, including the name of any company employed for this purpose:

Average Crowd Attendance

Please provide the following information for each of the last three seasons:–

- (a) the highest number of spectators admitted to the ground during each of the last three years, showing separately the number of seated and standing spectators if these figures are known; and
- (b) the total number of spectators admitted during each of the last three years and the number of occasions they were admitted.

Season	Activity	Total Attendance	Number of Occasions	Highest Attendance	
				(A) Seated	(B) Standing
2011/2012	Football				
2012/2013	Football				
2013/2014	Football				

Application Checklist

Please indicate which, if any, of the following documentation has been enclosed with the completed application form:-

	<u>Tick (✓)</u>
1. Scale Plan of the Football Ground *	<input type="checkbox"/>
2. Health and safety Policy Statement	<input type="checkbox"/>
3. General Risk Assessment	<input type="checkbox"/>
4. Spectator Safety Policy	<input type="checkbox"/>
5. Match day Contingency Plans	<input type="checkbox"/>
6. Ground Maintenance Records (electrical certificates, gas certificate, barrier testing etc)	<input type="checkbox"/>
7. Stewarding Plan	<input type="checkbox"/>
8. First Aid Plan	<input type="checkbox"/>