TRADER APPLICATION FORM

**Let’s Buy Local**

**Island Arts, Craft, Food and Drink**

**Open Air Market**

**Sunday 9th and 23rd August**

**and**

**6th September**

Dear Trader,

Thank you for your interest in the Let’s Buy Local Island Arts, Craft, Food and Drink Open Air Markets, to be held at the County Showground on the Sunday 9th August and Sunday 6th September and Ryde Esplanade on Sunday 23rd August between 10.00am and 2.00pm. This will be three separate events, but you can apply to attend all three days.

It is hoped the Open Markets will provide businesses with the opportunity to trade in a safe and secure environment and encourage members of the public to attend. The £10 per market cost of a pitch has been kept low deliberately to accommodate everyone but we would request a second payment of 10% of your takings after the event, to be handed or sent to the organisers.

Please send your initial payment with your application form and a receipted invoice will be issued with your Exhibitor’s Pack.

Please note when completing your application that no part of the stand or exhibit should extend beyond the front of the allocated area. If you wish to bring your own gazebo, you should apply for enough space to accommodate this.

Please ensure you include reference to COVID-19 in your risk assessment.

There will be free Wi-Fi available for use onsite to allow for electronic payments. The password for which will be issued as part of your Exhibitor’s Pack.

Please complete all sections of this form and return to:

Electronically: [riwas@naturalenterprise.co.uk](mailto:riwas@naturalenterprise.co.uk) with an electronic payment to:

Royal Isle of Wight Agricultural Society (RIWAS)

Account number: 05019192

Sort code: 54-10-34

Stating your trading name

**N.B Please ensure that you have stated your business name on your payment.**

**Applications must be received by the Thursday before each market.**

**Terms & Conditions for Traders and Exhibitors**

1. The Market organisers reserve the right to accept or decline applications for Trade or Exhibition space and also determine site position(s). RIWAS decision on all matters shall be final and binding. Bookings will not be accepted until full payment is received (no post-dated cheques please).
2. There can be no unauthorised raffles, collections, or games of chance. No flyers or advertising material to be distributed around showground or put on vehicles.
3. All Traders and Exhibitors are responsible for the security of their property at all times.
4. No part of the stand or exhibit should extend beyond the front of the allocated area. If you bring your own gazebo, you should apply for enough space to accommodate this. Please keep to the marked areas allocated to you.
5. Entry to the Showground/Esplanade and setting up may take place from **08:00 to 09:45 hrs on** **the day of the market.**
6. **There will be no vehicle movement allowed on site between 09:45 and 14:15 hrs on the day of the market.** Taking down may not begin before **14:15 hrs.**
7. Traders and Exhibitors must at all times have due regard for public safety. All thoroughfares must be kept clear of obstructions. ALL exhibitors must comply with the relevant Health & Safety requirements. Completed general and fire risk assessment forms should be submitted with the application.
8. Traders must adhere to all Covid-19 rules and regulations with particular focus on maintaining social distancing protocol.

Please visit <https://www.gov.uk/coronavirus> for up to date government guidance

1. Traders are not permitted to use their own generators. Electricity can be requested in advance at an additional charge.
2. Please note that there must be NO SMOKING on the showground. Your co-operation in this is appreciated.
3. All traders and exhibitors are required to have full third party and public liability insurance - please supply copy certificate with application.
4. Cancellations notified up to 7 days prior to the Market will be subject to a charge of 50% of the fee paid. There will be no refund for cancellations after this date. Should the Organisers cancel or curtail the Market, for reasons beyond their control, no refunds will be made.
5. Please remember that the officials are unpaid volunteers and also wish to enjoy the Market. The Committee will fully support the officials in carrying out their duties, and any person not complying with these conditions will be ordered to leave without compensation.
6. Traders must take any rubbish they create home with them after the market.

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| **LET’S BUY LOCAL**  **OPEN AIR MARKET**  **TRADE SPACE APPLICATION FORM** | | | |
| **Company name** | | | |
| **Nature of business** | | | |
| **Address** |  | | |
| **Postcode** |  | | |
| **Contact name** |  | | **Phone number** |
| **Contact email address** |  | | |
| **Lead name attending on the day** | |  | |
| **Mobile phone number for the day** | |  | |

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| **Item** | **Size** | **Rate** | **No. Required** | **Total** |
| **Sunday 9th August** | 3 metres by 3 metres  **Please specify if you require a larger space** | **£10 (+ 10% of takings\*)** |  |  |
| **Sunday 23rd August**  **(Ryde Esplanade)** | 3 metres by 3 metres  **Please specify if you require a larger space** | **£10 (+ 10% of takings\*)** |  |  |
| **Sunday 6th September** | 3 metres by 3 metres  **Please specify if you require a larger space** | **£10 (+ 10% of takings\*)** |  |  |
| **Wight Marque members do not pay the initial pitch fee.** | | | | |
| **\* to be calculated after the event/s.** | | **TOTAL AMOUNT PAYABLE** | |  |

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| Do you intend to dig/excavate or pin into the ground to such a depth that you may come into contact with underground services such as cables or pipework? If yes, please contact the Office for advice of procedures. | Yes | No |

All parts of this form must be fully completed by all exhibitors / traders and caterers and be returned to the Office. Where evidence is requested (i.e. Public Liability Insurance), this must be available for inspection at all times whilst on site.

We collect and hold your information in accordance to the General Data Protection Regulation (GDPR). Please see the Royal Isle of Wight Agricultural Society’ Privacy Policy – see [www.riwas.org.uk](http://www.riwas.org.uk). The policy clearly sets out how we collect and process your personal data, for what purposes we use it, the legal grounds of processing such data, how we keep it secure and your rights in relation to such data.

### **FOR OFFICE USE ONLY**

Received (date) ……………………… Invoice Number …..……………………… Electricity Required Yes / No

Size of stand ……….………… **STAND NUMBER**………………

Further information required? Yes/No Pack sent ………………………..

**It is your responsibility** to ensure that suitable and sufficient risk assessments are carried out to cover your operations and activities at our markets. You are also required to consider the risk of fire within your stand / structure. Failure to comply with a reasonable health and safety precautions, may result in you being removed from the site.

**All exhibitors are required to have full Third Party & Public Liability Insurance and must enclose copy of their current certificate. Completed risk assessments must also be submitted as indicated.**

**I / We agree to abide by the Terms and Conditions of the Market as set out on page 2.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **YOUR CHECKLIST** | |
| **Application form** |  |
| **Risk assessment** |  |
| **Fire risk assessment** |  |
| **Payment** |  |
| **Copy of insurance certificate**  (Please ensure it is valid for the date of the Show) |  |

For all booking enquiries please telephone 0845 226 9098 or email [**riwas@naturalenterprise.co.uk**](mailto:riwas@naturalenterprise.co.uk)

**Please return your competed form either to** [riwas@naturalenterprise.co.uk](mailto:riwas@naturalenterprise.co.uk)

For Terms and Conditions please see page 2.

General Risk Assessment

**Sunday 9th and 23rd August**

**and 6th September**

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| --- |
| Date: |
| Company Name: |
| Contact Name: |
| Mobile No: |

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| **A People/Persons at Risk – Numbers at Risk** | | | | | | | | | | | | | | | | | | | | |
| Employees/Staff | | |  | Contractors | | |  | | | Public | | |  | | | Market Staff | | |  | |
| **B HAZARDS** | | | | | | | | | | | | | | | | | | | | |
| Structure |  | Access/Egress | | |  | Vehicle movements | |  | Mechanical | |  | Manual handling | |  | Biological agents | |  | Lone Working | |  |
| Animals |  | Housekeeping | | |  | Electrical | |  | Lifting | |  | Noise | |  | Violence & Aggression | |  | Working at height | |  |
| OTHERS – SPECIFY | | | | | | | | | | | | | | | | | | | | |

**C**

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| **Task/Activity** | **Hazard** | | **Existing Control Measures** | **Initial Risk H/M/L** | **Adequately controlled** |
| List significant steps in job/task | Describe all hazards identified and their effects for each task | People at risk | Describe fully all controls applicable for each hazard. All controls must be valid in that they reduce severity, likelihood or both | Classify risk rating from matrix for each hazard | Yes/No |
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If you need extra space, please attach separate sheet.

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| **Risk assessment Circulation list (tick box)** | | | | | |
| **Employees** |  | **Management** |  | **Contractors** |  |
| **Other – Specify:** | | | | | |
| **Assessor:** |  | **Date Assessed:** |  | **Review Timescale:** |  |
| **Signature:** | | | | | |

Guidance on Completing General Risk Assessment

**Table A**

**Those affected**: Any person who may be affected by the work must be identified. Should there be categories of persons not listed, enter them in the boxes provided.

**Table B**

Hazards: Identify the hazards inherent to the activity being assessed, by putting crosses in the appropriate boxes. The list provided is not comprehensive. Should there be hazards that are not listed then enter them in the boxes provided.

Note: The definition of a **HAZARD** is: something with the potential to cause harm.

**Table C**

**Hazards**: List the hazards identified in Table B

**Existing Control Measures**: Outline the existing measures which will reduce the risk arising from each of the hazards listed. Check that they meet legal requirements, industry standards and represent good practice. Typical control measures include: safe design; preventing access to the hazard e.g. guarding; written procedures and instructions; training; provision of PPE etc.

**Risk**

Assess the risks arising from the hazards identified, using the criteria set out below. Consideration must be given to what is reasonably foreseeable in relation to the identified hazards and recognition of any existing control measures that reduce the risk. Enter the appropriate letter, L for low, M for medium or H for high. If the overall risk category is low, then the assessment is complete and the form circulated to those affected. However if the overall risk category is medium or high, then Additional Control Measures are required (see below).

**Note**: The definition of a **RISK** is: the likelihood that harm from a particular hazard will occur and the consequences.

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| **MATRIX** | **LIKELIHOOD** | | |
| **SEVERITY** | Certain or near certain to occur | Reasonably likely to occur | Unlikely to occur |
| Fatality; major injury or illness causing long term disability | HIGH | HIGH | MEDIUM |
| Injury or illness causing short term disability | HIGH | MEDIUM | LOW |
| Other injury or illness | MEDIUM | LOW | LOW |
| **RISK** | | | |

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| Fire Risk Assessment  **All Traders / Exhibitors must complete this section** |
| **Company/Trader Name:** |
| **Mobile number on site:** |
| **In order to comply with relevant fire safety legislation you MUST complete a Fire Risk Assessment of your stall or unit. The Risk Assessment needs to identify the fire hazards and persons at risk, you must endeavour to remove or reduce these risks and protect people from fire.** |
| **Failure to comply with this requirement will result in you being removed from the site.**  **You must be able to answer YES to the following questions.** |
| **This signed and completed form must be maintained available for inspection by the**  **Fire & Rescue Service / Market Organiser / Council Officers at all times.** |
| You must undertake a Fire Risk Assessment for your unit, which must be suitable for the circumstances. You do not need to use this form, and may use another method if you wish, however, this form is considered to be suitable for most standard market stalls and units |

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| 1 | Are adequate exits provided for the numbers of persons within the unit or stall and where necessary, are there sufficient directional signs indicating the appropriate escape route and do they comply with current regulations? | **Yes** | **No** | | **N/A** |
| 2 | Are the exits maintained available, unobstructed, and unlocked at all times the premises are in use. | **Yes** | **No** | | **N/A** |
| 3 | Do you have an adequate number of fire extinguishers/fire blankets available in prominent positions and easily available for use? | **Yes** | **No** | | **N/A** |
| 4 | Has the fire-fighting equipment been tested within the last 12 months?  *Note: a certificate of compliance will normally be required* | **Yes** | **No** | | **N/A** |
| 5 | Have your staff been instructed on how to operate the fire-fighting equipment provided? | **Yes** | **No** | | **N/A** |
| 6 | Have your staff been made aware of what to do should an incident occur, how to raise the alarm, evacuate the unit? | **Yes** | **No** | | **N/A** |
| 7 | Have you identified combustible materials that could promote fire spread beyond the point of ignition such as paper/cardboard, bottled LPG etc. and reduced the risk of them being involved in an incident? | **Yes** | **No** | | **N/A** |
| 8 | Have you identified all ignition sources and ensured that they are kept away from all flammable materials? | **Yes** | **No** | | **N/A** |
| 9 | Are the structure, roofing, walls and fittings of your stall or unit flame retardant?  *Note: certificates of compliance will normally be required* | **Yes** | **No** | | **N/A** |
| 10 | Are you aware that you must not stock or sell certain items, i.e. fireworks, garden flares, household candles, tea lights, etc.? | **Yes** | **No** | | **N/A** |
| 11 | Do you have sufficient bins for refuse? Is all refuse kept away from your unit? | **Yes** | **No** | | **N/A** |
| 12 | Have any portable appliances been PAT tested by a qualified person in the last 12 months? | **Yes** | **No** | | **N/A** |
| 13 | Are you aware that petrol generators are not permitted on site? | **Yes** | **No** | | **N/A** |
|  | **Do you plan on using LPG? (If not skip 14-22)** | **Yes** | | **No** | |
| 14 | Do you have an inspection / gas safety certificate for the appliances and pipework? *(Copy to be available for inspection)* | **Yes** | **No** | | **N/A** |
| 15 | Are all hose connections made with “crimped” fastenings? | **Yes** | **No** | | **N/A** |
| 16 | Are the cylinders kept outside, secured in the upright position and out of the reach of the general public? | **Yes** | **No** | | **N/A** |
| 17 | Are appliances fixed securely on a firm non-combustible heat insulating base and surrounded by shields of similar material on three sides? | **Yes** | **No** | | **N/A** |
| 18 | Are the cylinders located away from entrances, emergency exits and circulation areas? | **Yes** | **No** | | **N/A** |
| 19 | Are the gas cylinders readily accessible to enable easy isolation in case of an emergency? | **Yes** | **No** | | **N/A** |
| 20 | Do you ensure that all gas supplies are isolated at the cylinder, as well as the appliance when the apparatus is not in use? | **Yes** | **No** | | **N/A** |
| 21 | Do you ensure that only those cylinders in use are kept at your unit/stall? *(Spares should be kept to a minimum and in line with any specific conditions for the event)* | **Yes** | **No** | | **N/A** |
| 22 | Is a member of staff, appropriately trained in the safe use of LPG, present in the unit / stall at all times? | **Yes** | **No** | | **N/A** |

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| **If the answer to any of the above questions is “NO”, please detail the actions you have taken to remedy the situation. Continue on a separate sheet if necessary.** | | | | | |
|  |  | |  |  |  |
| **Stallholder / Responsible Person:** | | | | | |
| Signature | | Print Name | Date | | |
| **Designation:** | | | | | |
| **Company:** | | | | | |
| **Please note: this document does not preclude you from possible prosecution or removal from the site by the organisers, should a subsequent inspection reveal unsatisfactory standards.** | | | | | |