

Barrow upon Soar Christmas Street Market & Light Switch-On

Saturday 1st December 2018 2.30 – 5.30

BUSCA is very pleased to be working with Barrow upon Soar Parish Council to help organise this year's *Christmas Street Market & Light Switch-On*. It's a great event and we know it will be well supported again this year.

APPLICATIONS ARE NOW OPEN

We are looking for a brilliant mix of stallholders and entertainment for visitors to our "once a year" Christmas Street Market in Barrow upon Soar.

- local food/drink producers and retailers (including veggie and vegan)
- street food sellers
- handmade crafts, artwork, vintage/retro and collectables, recycled goods
- retailers of high quality goods (plants, clothing, tools, books, jewellery, gifts etc)
- local services and more....
- buskers/school groups/choirs/bands etc
- BuS community organisations (free) to promote and raise funds for their causes and have a bit of fun too.

Don't delay, contact us now & reserve your place.

Bookings:

Bookings are now open and an application pack is attached for completion. When completed please return with a copy of your Public Liability insurance by email to the address below.

Your payment will be by cash at the market.

NB. All applications should be received by Friday 2nd November 2018

Please note that only applications with completed paperwork will be accepted.

All applications will be acknowledged if an email is supplied.

Pitch prices for 2018

Standard 3m x 3m pitch (Non-catering food and general retail/services)	£15.00 per day
Standard 3m x 3m pitch (Catering/Serving alcohol)	£25.00 per day
Standard pitch 3m x 3m pitch (Handmade Crafts, artwork, vintage/retro etc)	£10.00 per day
Local charity/community organisation (Promo and fundraising)	FREE

Larger pitches are available. Please enquire about prices.

Notes

- Stallholders will need to provide their own power, lighting, equipment and water. No stalls are provided.
- Generators will only be allowed by arrangement with **Barrow Community Association**. Please consider using little multiple LED lights powered by a battery.
- Gazebos will not be allowed if windy conditions are forecast for the event.
- High Street and Church Street will probably be closed to traffic from 1.00 – 6.30. Once you have set up your stall there must be no traffic movement in High St or Church St between 1.00 and 6.30 and vehicles may not be parked in the closed area without specific agreement with the Market Manager. We recommend that you park in the Health Centre car park further through the Coop park or in the Station car park.

Any questions please do not hesitate to contact me.

Regards Nicola Noble

Email: barrowchristmasmarketstalls@gmail.com

Mobile: 07786 232766 (please leave a message)

Website: www.busca.org.uk

Barrow upon Soar Christmas Street Market – Sat 1st Dec 2018

Your name:

Business Address:

Postcode

Email

Website

Landline Telephone

Mobile:

PRODUCTS:

please list what you intend to sell or activity: please describe what you intend to do on your stall.

Will you be attending in person to run your stall Yes/No *

Will you be using any of the following:-

Generator Yes/No * Type of fuel LPG or Diesel (Petrol generators are not permitted)

LPG Cooking equipment Yes/No * **Electrical Cooking Equipment** Yes/No *

Caterers: Are you registered with NCASS? Yes/No * *Please circle as necessary

Size/Type of Pitch	Please tick pitch required		Price	Total Payable
STANDARD 3m x 3m (Non-catering food(including dog) and retail)			£15.00	£
STANDARD 3m x 3m CATERING/ALCOHOL SALES (TEN must be obtained for alcohol sales)			£25.00	£
STANDARD (3m x 3m) (Handmade crafts only)			£10.00	£
Local Community/Charity (Promotional and fundraising eg tombola)	gazebo	No gazebo	FREE	
Please enquire for prices for larger pitches				

Applicant Declaration

- I hereby apply for a pitch at BuS Christmas Street Market
- I have current Public Liability Insurance for the event and attach proof herewith

For food businesses

- I am registered withlocal authority as a Food Business
- I can confirm that all staff serving food have a basic food hygiene qualification or are suitably trained for the role
- If serving alcohol, I have a Temporary Event Notice.

I, the undersigned declare that the information provided on this form is correct

Signed

Date

Print Name

Position in Company

Enclosures

- Copy of Public Liability Insurance**
- A Risk Assessment** (This is not a requirement but good practice)
(If you do not have your own there is a blank template attached for your use)
- Food/Caterers Questionnaire (to be provided to Environmental Health if requested)**
- Gas Safety Certificate & PAT testing(Caterers)**

Your application will not be considered unless the relevant forms are completed and all necessary documents are enclosed/attached.

To try to limit paperwork please ensure that all documents are fully completed. We will then be able to keep your email address, other details and copy documents on file for reference for future markets and events.

If you do NOT want this to happen please tick here

Please return to:

Nicola Noble for BUSCA (Registered charity No 1156170)

Email:barrowchristmasmarketstalls@gmail.com

RISK/FIRE ASSESSMENT FOR EVENTS

NB All sections of this assessment must be completed.
Any sections which are not applicable should be marked N/A

Company	Name	Date of assessment	
Are any of the following hazards/risks present	Yes / No	What level of risk does the hazard create	What controls are in place to reduce the risk to low
Example Electrical Equipment	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input checked="" type="checkbox"/>	All electrical equipment is certificated and connected via an RCD. Copies of certificates are available for inspection. All cables and access to equipment is restricted
Electrical Equipment	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Anything likely to cause a slip, trip or fall	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Manual Handling	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Generators including refuelling	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
LPG	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Fire Risk Assessment	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
(please detail above the safety precautions you will take to reduce the risk of fire. Guidance can be found in the HM Government document "Fire safety risk assessment open air events and venues" which can be freely downloaded from www.communities.gov.uk/publications/fire/firesafetyassessment (Please attach separate sheet if required.)			
Fire: People at Risk Members of Public (including children) <input type="checkbox"/> Exhibitors <input type="checkbox"/> Event staff/volunteers <input type="checkbox"/> People with disabilities <input type="checkbox"/> Other _____		Sources of ignition (Please indicate quantity) Generator <input type="checkbox"/> Gas Cooker <input type="checkbox"/> BBQ/Oven <input type="checkbox"/> Open Fire <input type="checkbox"/> Electrical Appliance <input type="checkbox"/> Other (please specify _____)	Sources of Fuel Petrol <input type="checkbox"/> LPG <input type="checkbox"/> Diesel <input type="checkbox"/> Charcoal <input type="checkbox"/> Coal <input type="checkbox"/> Cooking Oil <input type="checkbox"/> Other (please specify _____)
COSHH Any substances that may cause harm or have ill health effects	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Setting up, use of, taking down of displays or equipment	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	

Access and egress to and from display and available space	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Weather (Especially wind, rain, etc)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Extremes of hot or cold	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Food Hygiene	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Food Service	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
General tidiness, cleaning up of area and disposal of rubbish	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
Please add any other hazards in the space below that are specific to your business and have not already been identified above.			
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	High <input type="checkbox"/> Medium <input type="checkbox"/> Low <input type="checkbox"/>	

If you have identified any high risk activities or hazards we may need you to complete a more detailed Risk Assessment in due course.

When looking at control measures to reduce the level of risk from the hazard it is worth using the following hierarchy

- Eliminate (get rid) of the hazard
- Replace the hazard with one that has a lower risk
- Limit access to the hazard (ie barriers)
- Limit exposure to the hazard

Signed _____ Name _____

Name of person who will be responsible at the event _____

Dated _____

Environmental Health Food Trader Registration

Name.....

Trading as.....

1. How many staff do you employ at any one time?

2. Will you and your staff at the event be food hygiene trained? Yes / No

3. Please list their names and the level of training they have received.

Person 1.....

Person 2.....

Person 3.....

Continue overleaf if necessary.

Note: All food handlers must now be trained, or supervised, to a level appropriate to the work they do.

4. What food activities do you undertake? (Circle as appropriate)

Sale of raw meat Reheating Cooking Cooling Selling Pre-packaged Food

Preparation/sale of ready to eat food Other.....

5. What type of written food safety management system do you use? (Circle as appropriate)

SFBB HACCP Assured Safe Catering SALSA Cook Safe Own System

Other.....

6. What hand washing facilities do you have?

.....
.....

Note: A separate hand washing facility must be provided and should have a supply of hot water. Hand sanitiser is NOT an acceptable alternative.

7. How will high risk food be kept chilled before and during the event?

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Note: Food should be stored at a temperature below 8°C. Food can only be kept out of refrigeration for a maximum of 4 hours.

8. How will high risk food be kept hot during the event, once it has been cooked?

.....
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Note: Food should be hot held at a temperature above 63°C. Food can be held below this temperature for a maximum of 2 hours.

Environmental Health Officers may attend on the day and wish to inspect the following:

-Food Safety Management

-Public and Employers Liability Insurance

-Current Services Certificates – Gas safety certificate, PA Test

Please ensure that you bring a copy of all documents required under your legal obligations to trade. We cannot be held liable for disruption of trade because of a trader's failure to provide documentation to the relevant officer.