

Your Organization Risk Management Plan

1. DETAILS OF APPLICANT

Group Name

Contact person

... MR ... MRS ... MS ... DR ... OTHER _____

First Name

Surname

House Number/Name

Street/Road

Town

State

Postcode

Telephone

Mobile – During Event

Email

2. DETAILS OF EVENT

Name of Event

Location and Description of Event

Brief History of Event if it has been held before

3. ROAD CLOSURES

Will you be using Council Roads for the event?

... Yes ... No (If no - please proceed to question 4)

Is your event ?

... Full road closure

... Sharing of the road where both general traffic and participants of your event share use of the road, eg fun runs, cycle races etc

Starting Time of Closure

Ending Time of Closure

Proposed Site Plan for Road Closure

Please include a clear route map siting location of marshals, barricades and any detours proposed, and the specific part of the road/s required for a road sharing/closing. Please note if a road needs to be closed a traffic management plan must be submitted to Council for consideration.

Or please attached a map.

Comments:

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4. REQUIRED COUNCIL PERMITS

Some activities may require formal Council approval under the Local Government Act or other relevant legislation.

Please detail if you are:

... Erecting roadside signage
(advertising)

... Using amplification equipment

... Selling alcohol or permitting the
consumption of alcohol (Security
may be required to meet licence
requirements)

... Selling food

... Providing amusement rides

... Erecting permanent or
temporary structures such as
stages, lighting rigs, marquees etc

... Fireworks display

5. ADDITIONAL SERVICES

Please detail any additional services you may require, other than those existing at the site? This may include access to power, additional rubbish bins, rubbish removal, additional cleaning of public toilets, barricades, witches hats etc.

6. RISK MANAGEMENT AND INSURANCE

A risk assessment must be completed for all events

Risk Assessment attached ...Yes ... No

Copy of Certificate of Currency Indicating Public Liability Coverage for this event
...Yes ... No ... NA – Council Event

Events organised by non Council groups must provide evidence of their Public Liability Insurance.

Risk Matrix and Corrective Action Table

Risk Matrix

	Consequences				
Likelihood	Insignificant	Minor	Moderate	Major	Catastrophic
Almost Certain	Medium 8	High 16	High 20	Extreme 23	Extreme 25
Likely	Medium 7	Medium 12	High 17	High 21	Extreme 24
Possible	Low 5	Medium 10	High 15	High 18	High 22
Unlikely	Low 2	Low 4	Medium 11	Medium 13	High 19
Rare	Low 1	Low 3	Medium 6	Medium 9	High 14

Proposed Corrective Action

Risk Level	Action Required
Extreme Risk 23 - 25	<ul style="list-style-type: none"> x This rating level is not acceptable x Report immediately to Senior Management; x Consider alternate activity unless appropriate controls are implemented x Develop specific Treatment/Action Plan for immediate implementation to address extreme risks x Allocate actions and budget for implementation within one month x Report to Senior Management on effectiveness of control
High Risk 14 - 22	<ul style="list-style-type: none"> x Develop and implement a specific Treatment/Action Plan for high risks x Consider alternate activity unless appropriate controls are implemented x Allocate actions and budget to minimise risk; monitor implementation x Report to Senior Management on effectiveness of control
Medium Risk 6 - 21	<ul style="list-style-type: none"> x Develop and implement a specific Treatment/Action Plan for medium risks x Allocate actions and budget to minimise risk where existing controls deemed inadequate; monitor implementation x Management to consider additional controls
Low Risk 1 - 5	<ul style="list-style-type: none"> x Accept and Monitor low-priority risks x Manage via routine procedures where possible; Monitor via normal internal reporting mechanisms

