



Lampeter Agricultural Society Show

RISK ASSESSMENT FORMS

Please complete in BLOCK CAPITALS

Company Name:

Address:

Postcode:

Telephone no:

Responsible Person:

Signature of Assessor:

Date signed:

HAZARD	PERSON AT RISK	CONTROL TO MINIMISE RISK
	<u>FIRE ASSESSMENT</u>	
<u>HAZARD</u>	<u>PERSON AT RISK</u>	<u>CONTROLS TO MINIMISE RISK</u>
DO YOU CARRY A FIRE EXTINGUISHER? YES or NO	Type: Size:	
*LIQUEFIED PETROLEUM GAS	CYLINDER SIZE Type: Size:	
(LPG) ON SITE: YES or NO	Type: Size:	

**THIS FORM MUST BE COMPLETED IN FULL.
"NO RISK / NONE/N/A" IS NOT ACCEPTABLE**

Hyrwyddwn a chefnogwn amaethyddiaeth leol / We support and encourage local agriculture