





# RISK ASSESSMENT 2 FORM 6

## Exhibitors/Contractors Risk Assessment For **EVENT DAYS**

Exhibitors Name:

Contractors Name (if applicable):

Assessors Name:

Stand Number:

Task/operation to be carried out during the event	Hazards identified that are assessed to be significant risks	Persons or equipment at risk	Control measures (precautions) that will be used to minimise risks and reduce to an acceptably low level
Signature of Risk Assessor:			Date of Assessment:



**15<sup>TH</sup> | 16<sup>TH</sup>  
MAY  
2019**

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