**Notice of Works**

If you are planning an organised/guided walk or tour in your park or open space, you only need to notify us about this. Email …. Or visit if you are planning a mid to large scale event, please contact the events team on 01803 208862, or visit [**www.torbay.gov.uk/leisure-sports-and-community/hold-an-event/**](http://www.torbay.gov.uk/leisure-sports-and-community/hold-an-event/)

For all other activities, please complete this Notice of Work form.

For cyclical or planned programs of work, one form can be completed, covering up to 12 months.

Once completed and returned to the office each form will be checked. Once approved a copy will be returned to you and should be kept by the individual/group and produced if asked. No activities should take place until your permit has been approved.

# We would like to take this opportunity to thank you for the work you/your group has volunteered to do and hope you find it an enjoyable experience.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Group/ Organiser |  | | | | | | | | | | | | | |
| Contact Details | Phone: | |  | | | | | Email: |  | | | | | |
| 2nd Contact |  | | | | | | | | | | | | | |
| Site/ Location |  | | | | | | | | | | | | | |
| Start/ finish dates &  times |  | | | | | | | | | | | | | |
| Description of works  Please if attaching |  | | | | | | | | | | | | | |
|  | Plans | | | |  | Drawings | | |  | Other Permits/Permissions | | | |
| Number of volunteers |  | | | | | | | Number of children (under 18) | | | | |  | |
| Equipment used |  | | | | | | | | | | | | | |
| **Please complete & provide details/copy:** | | | | | **Please indicate that you have correct**: | | | | | | | **Do you require:** | | |
| Risk Assessment | | | |  | First Aid Cover | | | | | |  | Traffic Control | |  |
| Insurance | | | |  | Personal Protective Equipment | | | | | |  |  | |  |
|  | | | |  | Site Security | | | | | |  |  | |  |
| Qualifications/tickets held by  individuals for use of equipment | | | |  | Welfare (organised toilet & wash  facilities) | | | | | |  |  | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Signed: |  | Name: |  | Date: |  |

**For office use:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Approved | | |  | Provisional Approval | |  | Declined | |
| Additional comments: | | |  | | | | | | |
| Signed: | |  | | Name: | |  | Date: | |  |