

### **Lamar University**

### **EHS & Risk Management**

## **CAMPUS EVENT SAFETY CHECKLIST**

Dept./Club/Organizati	Phone #:					
Address:	Gr		C.		- Gt	
						Zip Code
Name of Event:			_ Da	ate:		
Event Time: Start	End	Event Location:				
			Area	Bldg.	or	Room #'s
Provide Detailed Desci	ription of Acti	vities at the Event:				
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7-4		Admission	iees (ii an	y): \$		
Estimated Attendance						
Estimated Attendance						
					A	
Outside Organ		LU Club/Organizat				rsity Department
		LU Club/Organizat Faculty Advisor Name		E		rsity Department oordinator Name.
Outside Organ University Sponso	r Name:	Faculty Advisor Name	:		vent C	oordinator Name.
	r Name:		:	$\overline{T}$	vent C	

# SECTION A APPLICANT CHECKLIST

# Attach site plan/layout for event location

	SELECTION	Voc	Na	NI/A	Commonto
	Is the leastion selected empressists	Yes	No	N/A	Comments
	Is the location selected appropriate for this type of event?	O	О	О	
	Has the occupancy load/limit been determined for location to be used?	O	О	О	
	Is the seating arrangement appropriate for the event?	O	О	О	
	Are stages and platforms appropriately guarded and edges and steps highlighted for clear visibility?	O	О	О	
	Is the location adequately illuminated for the time and type of event?	O	О	О	
	Have special lighting arrangement been made for outdoor location?	O	О	O	
•	Does the location have at least two means of egress that are remote from each other?	О	О	О	
	Are all exits clearly visible and marked to identify them as such?	0	О	O	
•	Are exits so arranged and maintained as to provide free and unobstructed egress from all occupied areas?	O	0	О	
١.	Have stairs/stairwells and handrails been inspected to assure that they are in good condition?	O	О	О	
•	Will tents be used? Enclosed tents must comply with requirements of NFPA 101 & 102	0	0	0	
	Have walkways leading to and from the event site been inspected for potential slip & fall and trip & fall hazards?	O	О	О	
; .	Have grassy areas to be used or in close proximity been inspected for holes and other hazards?	O	o	О	

SITE	SITE SELECTION							
		Yes	No	N/A	Comments			
14.	Have you inspected areas in close proximity to event location for standing water or mosquito breeding areas, <u>during</u> the rainy season?	0	О	0				

FOO	FOOD & REFRESHMENTS						
		Yes	No	N/A	Comments		
1.	Is food preparation and service in accordance with LU Temporary Food Dealer's Permit Guidelines - Food & Food Preparations?	O	0	0			
2.	Have arrangements been made to keep perishable foods refrigerated until they are to be used?	O	O	0			
3.	Have arrangements been made to:  • maintain 'hot foods' at a minimum of 165°F.  • maintain cold foods at a maximum of 40°F.	O	О	О			
4.	Have arrangements been made for food handlers to wash their hands with soap and water?	O	o	O			
5.	Are facilities available for potable water?	О	O	О			
6.	Have arrangements been made for waste management and disposal? (During and after the event)	O	О	O			
7.	Has the health status of the individuals assigned for food preparation been established?	O	О	O			
8.	Will barbeque grill be setup at least 10 ft. from <u>any</u> building?	0	О	О			
9.	If alcohol is to be <b>served</b> , has applicant provided written authorization signed by University President?	0	O	0			
10.	Does individual serving alcoholic beverages have the appropriate TABC certification?	0	O	0			

JPE	RATIONS		T = .	I	
		Yes	No	N/A	Comments
1.	Has Risk Management reviewed the event safety plan and approved the site diagram?	O	0	О	If No, state why not:
2.	Is setup planned such that aisle ways and doorways are free of cords, protrusions and other obstructions that could cause tripping, struck-by injuries?	0	О	O	
3.	Have arrangements been made for emergency lighting? (Outdoor activities may meet this requirement with using portable light trees)	0	o	0	
4.	Have responsibilities for execution of emergency evacuation procedures been addressed?	O	О	О	
5.	Have appropriate accommodations been made for emergency evacuation for persons with disabilities? If Yes, describe in comment box	O	О	О	
6.	Is event setup planned such that access to alarm activation and warning devices are kept clear and accessible?	O	o	О	
7.	Have security arrangements  been confirmed with Lamar University Police Department?	O	o	О	Date Confirmation Received:
8.	In addition to 7 above, have procedures been established for effective crowd control?	O	o	О	
9.	Have arrangement been made to setup barricades to clearly delineate areas for pedestrian and vehicular traffic?	O	О	О	
10.	Have arrangement been made to maintain radio communication between the event organizers and event staff?	O	o	O	
11.	Will event staff be clearly identifiable so that guests may request help or information?  (How will they me made identifiable)	0	О	O	
12.	Are procedures in place to enforce the University "No Smoking" Policy?	O	О	О	

OPE	RATIONS				
		Yes	No	N/A	Comments
13.	Will any Special Equipment, High Risk Activity or Animals be involved in the event?	O	О	О	
	Have accommodations been made to assist persons with disabilities to fully participate in the event as planned?	О	О	О	
14.	θ Mobility Impairments				
,	θ Sight Impairments				
	θ Speech Impairments				
	θ Hearing Impairments				
	θ Other				

EVE	EVENTS INVOLVING FIRE, FLAME AND/OR HEAT						
		Yes	No	N/A	Comments		
1.	Have all combustible decorative materials that will be used in building been treated with flame retardant?	0	O	0			
2.	Will there be a firework display at the event?	0	O	0			
3.	Do you plan to have a bonfire at the event?	0	O	0			
4.	Do you plan to have a barbecue at the event?	0	О	0			
5.	Will post-event area inspection be conducted to ensure that no fire or other hazards are left on site?	0	О	0			
6.	Will any open flame devices such as candles, food warmers be used?	0	О	O			

INSU	INSURANCE & CONTRACTS							
		Yes	No	N/A	Comments			
1.	Have all contracts with performers, vendors, suppliers, donors, etc. been reviewed signed by approved University authority?	0	О	0				
2.	Have participants involved in high-risk activities been asked to complete a liability waiver?	0	O	0				

#### **PLEASE SIGN BELOW**

Failure to complete and sign this form will delay the review process

Name of Applicant (printed):						
Signature:	Date:					
Name of University Sponsor/Faculty Adviser/ Event Coordinator (printed):						
Signature:	Date:					

Don't Forget to Attach Site Diagram