



MACHINE/EQUIPMENT ABOVE 2 TONS PERMIT

Event Name			
Event Date			
Venue/Hall	Booth Name		
Name of PIC	Booth No		
Email	Mobile No		

Working Machines/Equipment Above 2 Tons

1	What type of machine/equipment is being used?	
2	What is the load capacity of the machine/ equipment being used on-site?	
3	Can the venue floor facility handle the machine/ equipment load on site?	
4	Will there be demo on-site?	Answer Yes, please complete risk assessment on page 2
5	Who is responsible for the machine/ equipment/ on-site?	

Please attach documents listed below together with this Permit.

■	Technical specifications of the moving machine/equipment.
■	Floor plan and the location (booth) of the machine/ equipment.
■	Floor calculation method and solutions if equipment/machine exceeds the venue floor facility.
■	For working machine, please provide risk assessments specific to equipment/ machine.
■	Provide live links of the demo machine/equipment (if applicable).

Permit Conditions :

■	Exhibitor must appoint the show's official freight forwarder for any unloading and delivery to stand which requires the use of on-site lifting equipment. (e.g. fork lift, crane, etc.)
■	Liaise with the show organiser regarding the move-in/out schedule of the machine/ equipment and gate pass issuance
■	Moving parts of the machinery and other working equipment must be efficiently guarded to protect both the public and the operator.
■	Exhibits must be positioned so that at no time do they protrude into gangways.
■	Only well-trained staff to undertaking any demo or working machine. Suitable PPE should be issued.

PERMIT AGREEMENT

If at any time, an activity or operation is considered non-compliant, unsafe or placing persons or the environment at risk, the Centre representatives have the right to immediately postpone or cancel the activity until the issue is rectified. Please note that at any stage before or after this permit is approved, the Centre may add or remove any restrictions to the use or application of this permit, in its sole and absolute opinion.

(To be completed by the person responsible for the work to be performed)

I hereby agree to meet the above mentioned requirements.	
Date	
Name	

RISK ASSESSMENT OR METHOD STATEMENT FORM

Event Name				
Task/Steps	Hazard	Who's at Risks (Name)	Risk Level : Medium, High, Low	Control Measures
Emergency response plan(s) on the potential hazard(s) arising from the activity				
<p style="text-align: right;">Use additional sheets where necessary</p>				
Supervisor/Manager Declaration				
I the undersigned agree that the exhibit/activity may go ahead with the controls identified and comply with the controls identify in this document (and in additional documents where indicated)				
Name of Exhibitor				
Date this RA undertaken				