



## Method Statement

If you are building your own stand, please complete this as the Contractor

## ALL SPACE ONLY EXHIBITORS MUST COMPLETE THIS FORM

THIS FORM **DOES NOT** NEED TO BE COMPLETED BY SHELL SCHEME EXHIBITORS

Contractor Contact Name:	Exhibiting No	ame:	Date:
Company Name:	Stand Number	er:	Signature:
Details of Stand Construction:		Please provide your response to <u>every</u> question below:	
RESPONSIBLE PERSON: Details of the person responsible for Health & Safety during build up and breakdown onsite. (Name, mobile, email)			
STAND DETAILS: Dimensions and location of your stand. Include a description of any unusual features of your stand.			
ACCESS: What are the details of the entry point into the halls and the route you will take to arrive at your stand?  Please note the date and time of your arrival onsite to begin construction of your stand build.			
<b>TIMETABLE</b> : What is the step-by-step sequence and schedule in which all of the stand elements will be built and completed.			

STABILITY: How do you ensure adequate support of elements that require cross bracing. For constructions deemed complex, structural calculations must be submitted with your plan drawings.	
<b>LIFTING:</b> Weight to be lifted, height it will be lifted to, equipment to be used (crane, fork lift, Hiab etc.) Describe manual handling techniques.	
<b>RIGGING</b> : Are you ordering any suspension points? For rigged elements deemed complex, structural calculations must be submitted with your plan drawings.	
WORKING AT HEIGHT: Please include details of temporary and mobile scaffolds, access towers and other work at height which you intend to carry out and tools to be used.	
<b>COSHH</b> : Will you be using any hazardous and/or toxic substances? If so, please list them and confirm what measures you are taking to protect workers? During Show Open days, please declare use of special lighting/haze equipment.	
<b>ENVIRONMENT</b> : Describe any abnormal noise or work that may create dust or fumes and the ventilation and other control measures in place?	
SERVICES: Describe services being ordered from official contractors.	
<b>SAFETY FEATURES, incl. PPE</b> : Describe equipment and precautions will you provide onsite, i.e. barriers, screens, warning signs, fire extinguishers, hard hats, dust masks, gloves, ear plugs etc.	
<b>EXHIBITS:</b> Please describe any special activities or machinery demonstrations that may present a risk to the public?	