**Appendix 1**

**Event Brief**

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| **1. Name of Organiser:** | |
| 1. **Address of Premises/Site:** | |
| 1. **Business Address** **of Event Organiser (if different from 2.):** | |
| 1. **Brief description of event and maximum numbers:** | |
| 1. **Event Date:** | |
| 1. **Start Time:** | **Finish Time:** |

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| 1. **Names, Duties and Contact Details of the Premises Licence Holder/Organiser(s).**   **- Ensure that the person responsible for the control of noise during the event is identified (\*).** | | |
| **Name** | **Duties** | **Tel Number and Email** |
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| 1. **8**. **Plan of the premises/site to a scale of 1:500 attached?: Yes/No**  * Plan to show the locations of all music areas/fairground rides and dimensions of marquees and other temporary structures to be used during the event |

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| 1. **Details of the Sound Engineer or Production Company to be Employed** |
| Name: |
| Address: |
| Telephone Number: |

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| 1. **Will Fairground Rides and Similar Attractions be Provided: Yes/No**  * If Yes Provide the Details of the Company Supplying the Attractions |
| Name: |
| Address: |
| Telephone Number: |

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| **Premises Licence holder**  **(as named in 7 above)** | **Organiser of Event**  **(as named 7 above)** |
| Signed: | Signed: |
| Print name: | Print Name: |
| Date: | Date: |

***Please return the completed Event Brief form (Appendix 1) to*** [***foodsafety@oxford.gov.uk***](mailto:foodsafety@oxford.gov.uk) ***Please make sure the premises/site map required in 8 is attached.***

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| **Environmental Health Contact Details**  Business Regulation Team  Environmental Health  Planning and Regulatory Services  Oxford City Council  St. Aldate’s Chambers  109 St. Aldate’s  OX1 1DS | Tel: 01865 252862  Email: [foodsafety@oxford.gov.uk](mailto:foodsafety@oxford.gov.uk)  Website: [www.oxford.gov.uk](http://www.oxford.gov.uk) |