



PRE AND POST EVENT OR ACTIVITY SITE INSPECTION FORM (APPLICANT)

This form **must be** completed **BEFORE** and **AFTER** you access site. Please inspect the condition of the site upon arrival to ensure any damages are reported before loading in.

Important: A copy of this form and any photographs you have taken must be submitted by email before the commencement of your hire period. If it is not, it cannot be used as evidence that the damage was pre-existing. If we are made aware of any damages which have not been reported, you may be liable for the costs of the reinstatement works.

It is in your interest to complete this form in detail, as it will protect you from being charged for reinstatement works for damages that were present before your arrival or after your departure from site.

CONTACTS / REPORT A FAULT

If you have any questions, please don't hesitate to contact Festival and Events Team on 020 8825 6640 or via the Council switchboard: 020 8825 5000

Out of hours' emergencies: 020 8825 5000

Report a fault: Issues in parks should be reported via the Council's webpage: [Problem in a park, cemetery or allotment](#)

Event:	
Site:	
Date of Inspection:	
Time of Inspection:	

Tick as appropriate: **Pre-Event Inspection** ☐

Post-Event Inspection ☐

Ground condition hired site: (Incl. conditions of the event space ground/grass, holes, burns, bald areas)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/>					
Access/egress routes, footpaths (This is an area that is most often damaged, please check vehicle access routes, vehicle entrance to site, foot entrance to site, barrier fencing, gates, etc.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/>					

Fencing & Furniture: (Incl. damage to fences, signage, benches and other park equipment e.g. dents, missing/damaged panels, vandalism, etc.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Notes: <div style="text-align: right;">Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/></div>					
Trees: (Incl. damaged trees, broken branches, low hanging branches, vandalism, etc.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Notes: <div style="text-align: right;">Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/></div>					
Litter/Rubbish (Incl. commercial waste, bin bags, food spillages etc.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Notes: <div style="text-align: right;">Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/></div>					
Vegetation (Incl. flower beds, shrubberies, bushes etc.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Notes: <div style="text-align: right;">Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/></div>					
Other (Any other concerns you have that do not apply to the above.)	Perfect condition <input type="checkbox"/>	General Use <input type="checkbox"/>	Minor Damage <input type="checkbox"/>	Heavy Damage <input type="checkbox"/>	Unusable/Dangerous <input type="checkbox"/>
Notes: <div style="text-align: right;">Photos Attached? Y <input type="checkbox"/> / N <input type="checkbox"/></div>					

I can confirm to the best of my knowledge that the information that I have provided on this form is correct.

Name:

Date:

Signature: