



Part A | General Event Information

Name of Event:

Event Description:

Primary Event Venue Name:

Street Address:

Event Date(s): Event Hours:

Set-up Date: Set-up Time:

Tear-down Date: Tear-down Time:

Event Organization Name (sponsor):

Address:

Email:

Organizer Contact Information:

Name: Position:

Phone: Cell:

Email:

Event On-site Emergency Contact: (if different than organizer contact info. above)

Name: Position:

Phone: Cell:

Email:

Disclaimer: The review of the Emergency Management Plan submitted by your organization, and any information provided respecting the plan, is meant to assist your organization to prepare a plan that will serve it well in carrying out the event. The Corporation of the City of Burlington, Halton Regional Police Service, The Regional Municipality of Halton Police Services Board, and The Regional Municipality of Halton (Emergency Medical Services) disclaim any responsibility for the review of the plan as to the quality, appropriateness or suitability of any aspect of the plan or its compliance with any laws and will not be liable for any damages whatsoever to your organization or any other person arising from or related to the use or implementation of the plan. In the event of an emergency, The Corporation of the City of Burlington, Halton Regional Police Service, The Regional Municipality of Halton Police Services Board, and The Regional Municipality of Halton (Emergency Medical Services) will respond to such emergency according to their respective procedures and will work in collaboration with your organization as deemed appropriate or necessary in the circumstance.



Part B | Event Details

Detailed Event Description (Overview of the event including entertainment lineup and programming)

Road Closure or Parade? YES NO If yes, please attach a copy of traffic control plan.

Parade Formation/Dispersal Location(s) for parade:

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Parade Formation/Dispersal Hours:

Have you been granted an exemption to the noise by-law? YES NO

Will alcohol be served? YES NO

Will you be using police services on-site? YES NO

Will you be using private security? YES NO

Will you be using First Aid services on-site? YES NO

Will you be using volunteer 'marshals'? YES NO

Expected Attendance

Total attendance expected per day: Peak time attendance:

Venue capacity:

Estimated peak time: Duration of estimated peak time:

Is the event free? YES NO

Is this a ticketed event? YES NO



Part B | Event Details

Event History

Has this event ever been held in Burlington before? YES NO

Is the proposed event expected to be the same as previous? YES NO

Do you know of any past emergency incidents, issues, or concerns? YES NO

If yes, please provide details:
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Was a debrief conducted following your past event to address and resolve past emergency incident, issues or concerns? YES NO

If yes, please provide details:
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Part C | Event Site Infrastructure

Attach map(s) with the following:	Included in map(s)?	Comments (If "No", please explain)
Location of organizer	YES	NO
Location of emergency command	YES	NO
Event structures (tents, stages, rides, fencing)	YES	NO
Hazards (including generators, propane, open flame, and fuel storage)	YES	NO
First aid station	YES	NO
Lost person/family reunification areas	YES	NO
Vendors	YES	NO
Designated areas serving alcohol (show access points)	YES	NO
Pyrotechnics (type, location, storage & fallout)	YES	NO



Part D | Event Access Map

Attach map(s) with the following:	Included in map(s)?	Comments (If "No", please explain)
Transit Routes	YES	NO
Event emergency access route	YES	NO
Designated Event Vehicle Parking Areas	YES	NO
Designated Public Parking Areas	YES	NO
Public Access Points and exits (including accessible and queuing locations)	YES	NO
Marshaling/staging area	YES	NO
Barricades	YES	NO
Flow of traffic	YES	NO
Security locations	YES	NO
First responder parking/access	YES	NO



Part E | Hazard Identification, Risk Assessment; Prevention Risk & Reduction

Identify risks and hazards associated with your event and prevention/risk reduction methods using the risk matrix below. Some common hazards include but are not limited to: severe weather, food preparation, fireworks, alcohol, traffic and crowd violence. When rating probability and impact, consider 1 to be low and 5 to be high.

Hazard/Risk	Potential Harm or Loss	Probability (Rate 1-5)	Impact (Rate 1-5)	Prevention/Risk Reduction Actions	Is Risk Managed? Next Steps
Example: Over-crowding	Responder and public safety jeopardized.	1	4	Fencing around event and counters to monitor capacity, drone to monitor pinch points.	Yes
Example: Severe Weather	Injury to participants, damages to tent and equipment	2	4	Joe is assigned to monitor weather on the day of the event and make the call to start event at 7am, ongoing	Yes – Joe has been trained and knows he is in charge of this safety item. Weather monitoring done through Environment Canada and Halton Region websites.
Example: Food Preparations	Cross contamination, allergies, food poisoning	2	2	Coordinator application has been completed by the event organizer and sent to Halton Public Health. HD has informed Mary that all vendors have been inspected and approved.	Yes – Mary to provide support to vendors throughout the events. Halton Region Public Health is included on our emergency contact list for the event along with EMS and the nearest hospital.



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Part F | Emergency Response Plan

Procedure/Plan:	Attached?		Comments
Security Plan	YES	NO
Safety Plan	YES	NO
Communications Plan	YES	NO
Event Continuity Plan	YES	NO

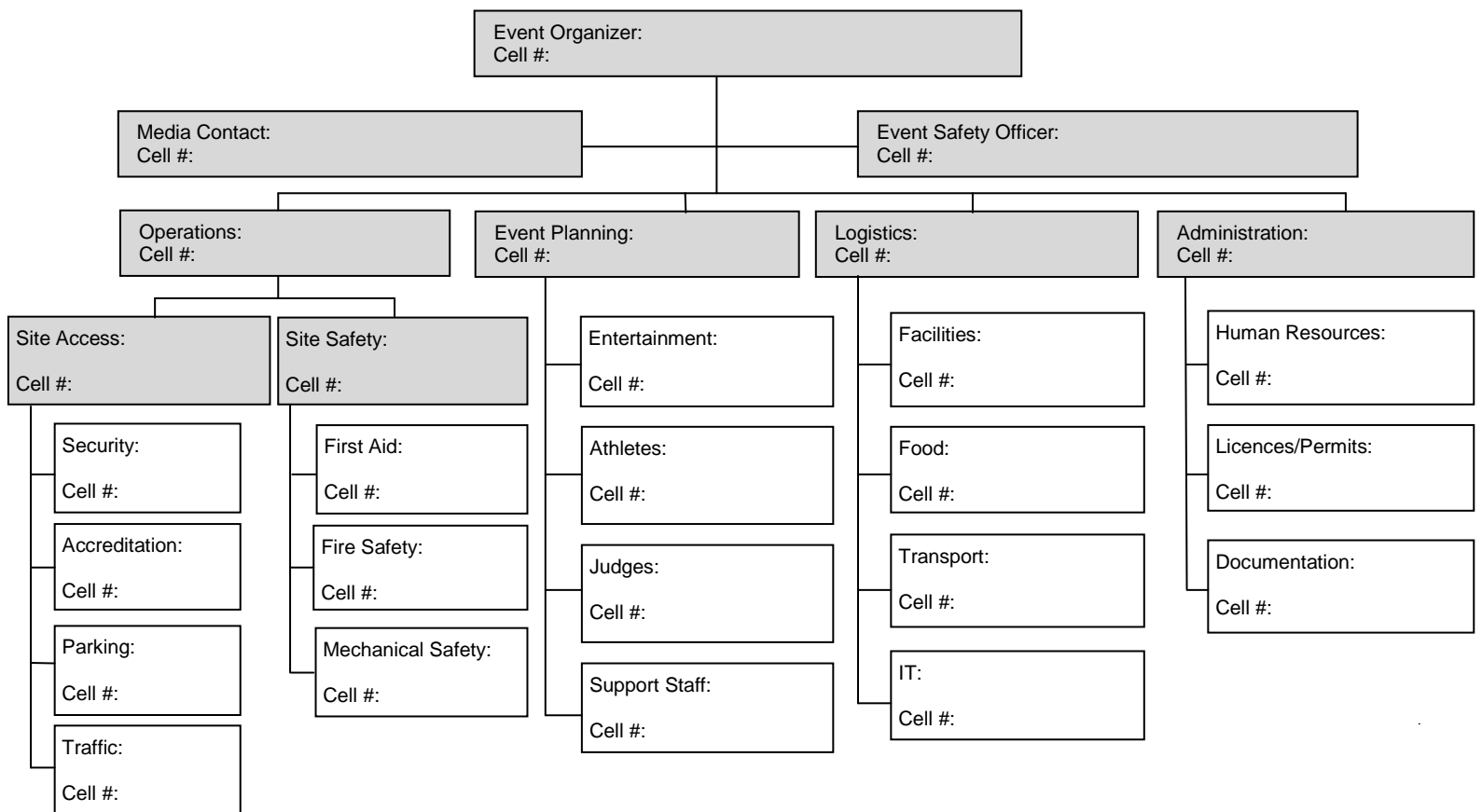
Note: Should you need examples of how to complete any of the above plans, please refer to the Emergency Management Planning Guidelines. These guidelines outline in detail what information is required within each plan and provides examples.



Part G | Event Command and Control

Each event organizer, in consultation with the City of Burlington, Halton Region Police Services, and Halton Region Emergency Medical Services, is responsible to ensure the provisions of this plan are understood and followed by all those involved.

Complete the emergency incident management system organizational chart below using the text boxes. Please ensure the name and contact phone number for the event day is noted within each box. By listing each person within this chart, the author of the EMP acknowledges that they have made each person aware of their role and responsibilities within the EMP.



Mandatory If a mandatory position is not filled, the position becomes the direct responsibility of the event organizer.

As Needed If a discretionary position is not filled, the position becomes the responsibility of a mandatory position or the event organizer.