Structural Certification Health (Miscellaneous Provisions) Act 1911 Health (Public Buildings) Regulations 1992



INSTALLER DETAILS	
Installer name:	
Company:	
Company address:	
Phone number:	Email:
STRUCTURE DETAILS	
STRUCTURE LOCATION	
Event name (if applicable):	
Address where structure is erected:	
Date constructed:	
CHECKLIST	
<ul> <li>Anchorages are adequate and holding fast</li> <li>Describe the soil type and identify ground holding parameters</li> <li>Wall and roof bracing is installed and adequately tensioned</li> <li>All ropes or tensioned straps are in good order and correctly fastened</li> <li>Fabric is tensioned and not prone to ponding</li> <li>Exits are correctly identified and not obstructed</li> <li>Exposed ropes are identified and will not be a hazard to the public</li> <li>All locking pins and bolts are in place and correctly tensioned</li> <li>All structural supports are sound</li> <li>Fabric has no <u>un</u>repaired tears</li> <li>Flooring is even and there are no tripping hazards</li> <li>Walls are adequately secured</li> <li>Rope and pole tent has its full compliment of side uprights, anchor stakes, pulley blocks and guy ropes</li> <li>Rope and pole tent hoists are secure and can only be released by an authroised person</li> </ul>	
DECLARATION	
I confirm that the structure identified above has been constructed/erected in accordance with the Manufacturer's or Structural Engineer's recommendations.	
Signature:	Date: