

SAFETY CLEARANCE CERTIFICATE FOR ALL RACE MEETINGS

SECTION A: - Event Organisers to complete and declare to Steward prior to meeting competition commencement

EVENT:

CLUB:

DATE: / /

1. SAFETY PLAN

The Safety Plan applicable to this Meeting or Event has been modified. *(please tick)* **YES** **NO**

If YES is ticked the Stewards will require a detailed briefing in relation to all the items that are at variance with the copy approved by MotorSport NZ to satisfy them that all Services required by Appendix Two Schedule H can be satisfactorily met. (Refer notes overleaf)

2. MARSHAL REQUIREMENTS (refer notes overleaf)

- (a) Flag Marshals: _____ flag points with a total of _____ flag/observer marshals.
- (b) Fire/ Rescue Vehicle(s): _____ crews with a total of _____ marshals.
- (c) Intervention Vehicle(s): _____ crews with a total of _____ personnel.
- (d) Person in charge of Public Safety and Security: _____

3. MEDICAL SERVICES (refer notes overleaf)

- (a) Person in Charge _____ Number of Assistants _____
- (b) Contact details of Stand By Paramedic/Doctor:
Name _____ Phone _____

4. DECLARATION - I, the undersigned Clerk of Course, declare the information stated above is an accurate reflection of the services to be provided at the meeting. I further declare that the venue has a current venue licence, and that the circuit is in conformity with the requirements of that licence,

Name _____ Licence Number _____
Signed _____ Date ___ / ___ / ___ (please print clearly)

SECTION B: – Meeting or Event Senior Steward to Complete

(please tick as appropriate)

(please tick as appropriate)

- Venue permits sighted
- Safety services to Schedule H requirements

Clearance issued for meeting to commence at _____ (time) on ___ / ___ / ___ (date)

by _____ (print name)

_____ (signed) Licence Number : _____

NOTE: Please append this form to your Steward's Report when completed

NOTES

These are to be read in conjunction with the relevant entries on the front of this form.

SECTION A

Reference item number 1 overleaf:

If YES is ticked the Stewards will require a detailed briefing in relation to all the items that are at variance with the copy approved by MotorSport NZ to satisfy themselves that all Services required by Appendix One Schedule H can be satisfactorily met in particular the following;

- | | |
|------------------|--|
| Medical Response | - Method use to transport Medics to accident
- Medical evacuation details (i.e. road, helicopter, etc.)
- Method of communication between Clerk of the Course and Medics |
| Fire / Rescue | - Procedures to be applied
- Equipment on site
- Back up services on stand by |
| Fire | - Procedures to be applied
- Equipment on site
- Back up services on stand by |

Reference item number 2(a) overleaf:

The circuit licence may have flag points marked within either;

A box surrounding the post number

6

Or a circle around the post number

6

Those flag points marked inside the round symbol may, at the event organisers discretion, be left unmanned for Events meeting the description specified in Appendix One, Schedule H, Chapter Two Article 3.3.

Reference item number 3(a) overleaf:

There is a requirement to provide the full name of the person in charge.

Reference item number 3(b) overleaf:

Appendix Two, Schedule H, Chapter Two Article 6.4(2)(a), there is a requirement to name the Doctor or Paramedic who is on stand-by if the person named in 3(a) overleaf is other than a Paramedic or Doctor (i.e. lesser-qualified person).