

University of Mary Washington Pre-Event Inspection Form

The *UMW Pre-Event Inspection Form* is filled out by the Principal Crowd Manager and approved by the Event Coordinator. The form must be completed before an event may take place.

SECTION 1 - EVENT INFORMATION

Event Coordinator Name <input style="width: 95%;" type="text"/>	Event Coordinator Phone Number / Email <input style="width: 95%;" type="text"/>
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Principal Crowd Manager Name <input style="width: 95%;" type="text"/>	Principal Crowd Manager Phone Number / Email <input style="width: 95%;" type="text"/>
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Name of Event <input style="width: 95%;" type="text"/>	Date of Event <input style="width: 95%;" type="text"/>	Time of Event <input style="width: 95%;" type="text"/>
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Name of Venue <input style="width: 95%;" type="text"/>	Maximum Occupancy Load <input style="width: 95%;" type="text"/>	Anticipated Occupancy Load <input style="width: 95%;" type="text"/>
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SECTION 2 - SAFETY INSPECTION INFORMATION

Inspection Items	Yes	No
1 Is one Crowd Manager assigned for every 250 occupants?	<input type="checkbox"/>	<input type="checkbox"/>
2 Have Crowd Managers received appropriate training?	<input type="checkbox"/>	<input type="checkbox"/>
3 Are all paths of egress unlocked, accessible, and unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>
4 Are all exit doors operable?	<input type="checkbox"/>	<input type="checkbox"/>
5 Are all emergency exit signs operable?	<input type="checkbox"/>	<input type="checkbox"/>
6 Are fire extinguisher inspections current?	<input type="checkbox"/>	<input type="checkbox"/>
7 Are exterior stairways and means of egress free of snow, ice, and debris?	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3 - RESPONSIBLE PERSONS

Person(s) Making the Emergency Exit Announcement <input style="width: 95%;" type="text"/>	Phone Number <input style="width: 95%;" type="text"/>
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Person(s) Ensuring that No One Enters in Excess of Occupancy Load <input style="width: 95%;" type="text"/>	Phone Number <input style="width: 95%;" type="text"/>
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Additional Crowd Managers (First Initial. Last Name)

1. _____	6. _____	11. _____
2. _____	7. _____	12. _____
3. _____	8. _____	13. _____
4. _____	9. _____	14. _____
5. _____	10. _____	15. _____

EM & Safety Approval: _____ **Date:** _____