

# SAFETY AT SPORTS AND RECREATIONAL EVENTS ACT 2/2010

## SECTION 6 (3) APPLICATION

**The National Commissioner  
SOUTH AFRICAN POLICE SERVICES**

c/o Colonel J Kruger  
Provincial Commander Operational Coordination  
**SOUTH AFRICAN POLICE SERVICE  
GAUTENG**

Per e-mail: [gauteng.events@saps.gov.za](mailto:gauteng.events@saps.gov.za) / [krugerjh@saps.gov.za](mailto:krugerjh@saps.gov.za)

**APPLICATION FOR EVENT RISK CATEGORIZATION I.T.O SECTION 6 (3) OF THE SAFETY AT SPORTS & RECREATIONAL EVENTS ACT, 2010 (ACT NO. 2 OF 2010):**

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### 1. SECTION 1 EVENT DETAILS

1.1	Name of event				
1.2	Nature/Type of event				
1.3	Day and Date of event				
1.4	Name of venue / stadium				
1.5	Detailed route (if applic.)				
1.6	Certified safe capacity of venue / stadium by Local Authority			Expected nr of attendees	
1.7	Venue Safety capacity certificate to be attached -- <b>(If NOT state reason why not and when it will be obtained).</b>	Y	N	Reason:	
1.8	Venue Grading certificate (as per Section 8 of the Act) <b>(If NOT state reason why not and when it will be obtained).</b>	High	Med	Low	Reason:
1.7	Scheduled commencement time of event				
1.8	Short description of event				
1.9	Duration of event (spectator access time <u>to</u> closure of venue)				
1.10	Popularity of the event				
1.11	Any VIP/VVIP/Ministers attending				
1.12	Historic record of safety, security & medical incidents at similar events.				
1.13	Information wrt the sale or consumption of liquor				

1.14	Will there be pre-event entertainment / marketing promotions as contemplated in Section 4(1) if yes provide details.			
1.15	Was the nearest police station notified in writing	Y	N	Name of nearest police station

**2. SECTION 2 (Section 4(1) of the Act)**

RESPONSIBLE PERSONS	Contact person	E-mail address	Mobile No.	Physical address
2.1 Event Organizer				
2.2 Stadium/Venue Owner				
2.3 Controlling Body				

**3. SECTION 3 CONFIRMATIONS**

I/We confirm that:

- 3.1 I/We have/ have not previously submitted an annual schedule of events as contemplated in Section 6 (1) of the Act. **(Delete where not applicable)**;
- 3.2 I/We have/ have not previously received a risk categorization in respect of our submitted annual schedule of events from the National Commissioner of the South African Police Service as contemplated in Section 6 (5) of the Act. **(Delete where not applicable)**;
- 3.3 I/We have just initiated plans for the event;
- 3.5 This application satisfies the short notice requirements of Section 6 (3) of the Act:

Furnish written reasons here as to why requirements i.t.o. Section 6(1) of the Act i.e. submission of an annual schedule of events could not be complied with in respect of this event:

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**4. SECTION 4 ADDITIONAL FACTORS FOR CONSIDERATION BY THE NATIONAL COMMISSIONER TO DETERMINE THE RISK CATEGORIZATION OF THE EVENT**

I/We respectfully submit that the following factors should also be considered by the National Commissioner in determining the risk categorization in respect of this event:

- 4.1 I/We have/ do not have historical experience in the holding of similar events of a similar size **(delete where not applicable)**;
- 4.2 I/We/ have not have appointed/ensured the appointment of an Event Safety Officer to oversee the safety & security planning requirements of Section 4 (9) & 23 of the Act are in place:

**Name of Event Safety Officer:** \_\_\_\_\_

Contact Details: (a) E-mail address: \_\_\_\_\_

(b) Contact No: \_\_\_\_\_

- 4.3 There will/will not (Delete where not applicable) be controlled liquor sales to the general public at the venue/ stadium i.t.o. existing protocols with the local SAPS;
- 4.4 PSIRA registered and Private Security Industry Regulation Act compliant security providers who have worked at the stadium/ venue previously will provide access control & general in-stadium/ venue security and safety stewarding services on the day;
- 4.5 Both provincial & private sector medical emergency services will be deployed at the event for the safety of event participants and the general public;

**5. SECTION 5 - EVENT RISK CATEGORIZATION RECOMMENDATION**

We respectfully submit, with reference to all of the information set-out above, that the event should be categorized as **LOW RISK, MEDIUM RISK, HIGH RISK** (Delete where applicable)

We await your event risk categorization of this event. (Delete where applicable)

An event briefing meeting has been scheduled for \_\_\_\_\_ (Date and time) at \_\_\_\_\_ (Venue)

\_\_\_\_\_

**Full Name of Event Organizer**

**For and on behalf & Duly Authorized By:** \_\_\_\_\_