FORM No. 9

PRELIMINARY RISK ASSESSMENT FORM FOR PROPOSED EVENT(S) UNDER SECTIONS 229 AND 230 OF THE ACT

Submit to: Dún Laoghaire Rathdown County Council

Date	Tuesday 5 th 2024
Applicant Name	Val Entertainment Agency Limited
Type of event(s)	One day concert
proposed ¹	- Biggest Disco
Location of event(s)	Leopardstown Racecourse
proposed ²	Leopardstown Nacecourse
Date(s) of event(s)	Saturday 15 th June 2024
proposed	Saturday 15 Julie 2024
	Start: 12:00
Commencement &	
Conclusion times of the	Finish: 23:00
proposed event	
Contact details	Val Kalkin
(including address,	7 Knowledge House, Down Business Park, 46 Belfast Road
email address,	Tel: 085 101 0706
telephone number etc)	val@biggestdisco.com
Where the organiser is	As above
not the	
owner or occupier of	
the proposed	
venue, please state the	
name of the	
owner / occupier of the	
venue	
State the anticipated	Expected numbers: 15,000 capacity
number of	
persons at the	
proposed event	
broken down into	
(a) Performers	100
(b) Audience	14,550
(c) Event staff	350
Ticketed or non-	Ticketed event
ticketed event	
Attach a short risk	 EMP with Risk Assessment attached
assessment of the	- Previously ran in Punchestown racecourse last year
event covering the	- Navan Racecourse
nature of the	- 3 Arena for the last five years
	- SSE Arena for the last four years

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anticipated crowd, the	- NEC Kilarney
nature of the	 Arena in London/Birmingham/Glasgow
event, proposals (if any)	
for the sale	The biggest disco is a one of a kind experience that brings
or distribution of	generations of music lovers together with a diverse lineup
alcohol, previous	featuring 90's classics and current acts.
history of this or similar	
event and	Crowd profile: Age 23 – 55 years old.
any other factor that	
might need to be	
considered ³	
State the names (if	
currently known) and	
contact details of the-	
Event controller &	Contact 1: Green Means Go – Nigel Cleary -
Deputy	nigel@greenmeansgo.ie
	Contact 2: Green Means
Event safety officer &	Contact 1: John Keogh - johnjosephkeogh@gmail.com
deputy	Contact 2:
Event medical co-	Contact 1: Event Medical – Willie Wade -
ordinator & deputy	willie@eventmedicalservices.ie
	Contact 2: TBC at the moment
Please provide details	
of your insurance	Event Insure
arrangements ⁴	

Declaration – By signing and dating this form you are confirming that the information provided is correct at the time of signing.

Signature:

Date: Monday 4th March 2024

DIRECTIONS FOR COMPLETIONG THIS FORM

- 1. An event as set out in sections 229 and 230 of the Planning and Development Act 2000 (as amended).
- 2. Provide a location map of sufficient size and containing details of related sites and features in the vicinity of the venue.

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- 3. This can be a summary of the Safety Statement but the Safety statement itself is not required at this preliminary stage.
- 4. If not yet arranged, indicate what is proposed.