

For local Street and Community Events (up to 5,000 attendance), complete Section 1 (pages 1 and 2)

For larger Events (with attendance over 5,000), complete all sections

Submit completed plans to: **OEMSpecialEvents@toronto.ca**.

Clicking 'submit via email', will open an email draft in your mail client.

FOR OFFICE USE ONLY

Total attendance

### Section 1 – General

#### A Name of Event

Event Name:

Description:

Primary Venue:

*Name of Venue*

*Street Address*

**ON**

*Address/location of main entrance*

*Prov.*

*Postal Code*

If multiple  
venues, describe:

#### B Activities & Attendance

Planned activities:

Anticipated activities:

#### C Date Time of Event

Start Date:

Set-up date:

Set-up Time:

End Date:

Take-down date:

Take-down time:

Event Hours:

### Event Organizer

#### D Event Organization

Event organisation/sponsor:

Address:

Phone:

Fax:

Email:

#### E Organizer Contact Information

Name:

Position:

Phone:

Cell:

Email:

#### F Event On site Emergency Contact

Name:

Position:

Phone:

Cell:

Email:

Alternate Name:

Cell:

Email:

**DISCLAIMER:** The review of the special event emergency plan submitted by your organization, and any advice or information provided respecting the plan, is meant to assist your organization to prepare a plan that will serve it well in carrying out the special event. However, the City of Toronto and the Toronto Police Service disclaim any responsibility for the use of the plan and will not be liable for any damages arising from its use and implementation.

# Emergency Action Plan

## Office of Emergency Management

### G –Event Details

Overview of the event and details of the activities

Event Route

Parade?	YES	NO	If yes, complete "Notification of Intent to Hold a Parade"
Formation/Dispersal Location(s)			
Formation/Dispersal Hours			
Noise Exemption?	YES	NO	If yes, complete "Noise Exemption Form"
Will Alcohol Be Served?	YES	NO	If yes, include map of fenced off area where alcohol will be served
Will You Be Using Volunteer "Marshalls"?	YES	NO	If yes, describe the number, how they will be identifiable, how they will be utilized?
Will You Be Using Private Security?	YES	NO	If yes: <b>Name of provider:</b> <b>Licence number:</b> Name, on-site coordinator: Contact information, on-site cell#: Number of on-site staff:
Will You Be Using a Private Medical Provider?	YES	NO	If yes: <b>Name of provider:</b> Name, on-site coordinator: Contact information, on-site cell#: Number of on-site staff:

### H - Expected Attendance

Venue Capacity:	Estimated Peak Time(s) (include duration):
Total Attendance Expected:	Peak Time Attendance:
Comments, if any:	
Is the event free?	YES NO Describing costing if applicable?
Is this a ticketed event?	YES NO
Is the event advertized on:	YES NO Account/s (eg twitter, instagram)
Social media?	YES NO
Website?	YES NO
Radio?	YES NO
Television?	YES NO
Print Media?	YES NO
Posters?	YES NO

e.g. cost to participate, cost to spectators

# Emergency Action Plan

## Office of Emergency Management

Local Street and Community Events (up to 5,000 attendance) should complete Section 1 Category B, C and D events (over 5,000 attendance) should complete all Sections

### Section 2 - Event History

#### A Event Previously in Toronto

Has this event been conducted in Toronto? YES NO

If yes, provide venue location(s):

If yes, provide past dates(s):

If yes, provide name of past event organizer(s):

#### B Event Not Previously in Toronto

If not previously in Toronto, has this event been conducted elsewhere? YES NO

If yes, provide previous dates:

If yes, provide details:

If yes, provide past venue location(s):

Name of past event organizer:

#### C Expectations

Is the proposed event expected to be the same as previous? YES NO  
(If no please explain the difference)

#### D Previous Emergency Incidents

Do you know of any past emergency incidents, issues or concerns? YES NO If yes, provide details:

Was a debrief conducted following the past event to address and resolve past emergency incident, issues or concerns? YES NO If yes, provide details:

### Section 3 – Venues and Area Maps

Attach a map noting the following locations, if something does not apply to your event or you do not have it on the map, please provide an explanation.

#### Attach map(s) with the following:

Event administration location(s)	YES	NO
Event emergency incident command location(s)	YES	NO
Event emergency incident response resource (people, equipment, facilities) locations	YES	NO
Critical systems control locations	YES	NO
Structures (tents, stages, fencing)	YES	NO
Designated public parking areas	YES	NO

# Emergency Action Plan

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### Section 3 – Venues and Area Maps

*Attach a map noting the following locations, if something does not apply to your event or you do not have it on the map, please provide an explanation.*

Attach map(s) with the following:	Included in map(s)?		Comments If "NO", please explain
Public transit stops	YES	NO	
Public access points and exits (include queuing locations)	YES	NO	
Designated event vehicle parking/standing areas	YES	NO	
Restricted access areas	YES	NO	
Hazardous areas	YES	NO	
Marshalling/staging areas	YES	NO	
First aid locations	YES	NO	
Information locations	YES	NO	
Lost persons/family reunification areas	YES	NO	
Fire hydrants	YES	NO	
Barricades	YES	NO	
Driveways	YES	NO	
Vendors	YES	NO	
Animal areas	YES	NO	
AGCO licensed areas (show access points)	YES	NO	
Emergency mustering locations	YES	NO	
Emergency exits	YES	NO	
Evacuation routes	YES	NO	
Electrical/Generators	YES	NO	
On-site cooking & fuel storage (indicate type)	YES	NO	
Pyrotechnics (type, location-firing & fallout)	YES	NO	
Other	YES	NO	
Other	YES	NO	
Other	YES	NO	

# Emergency Action Plan

## Office of Emergency Management

### Section 4 -Hazard Identification, Risk Assessment, Prevention and Risk Reduction

Attached ?	Comments
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Identify risks and hazards associated with the event and prevention/risk reduction methods using the risk matrix (below)

OR attach a separate table/diagram

YES      NO

Hazard/Risk	Potential Harm or Loss	Probability	Impact	Prevention/Risk Reduction Actions	Risk Manages? Next Steps
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### Section 5 - Emergency Response Procedures

Procedure / Plan	Comments
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Security Plan	YES      NO
Evacuation Plan / Crowd Management	YES      NO
Traffic Plan	YES      NO
Missing Person / Lost Child Plan	YES      NO
Bomb Threat / Suspicious Package	YES      NO
Severe Weather	YES      NO
Equipment Failure / Structural Collapse	YES      NO
Sign-off by Agency Leads	YES      NO
Critical Injuries	YES      NO
Event Cancellation	YES      NO
Other	YES      NO
Other	YES      NO
Other	YES      NO

Emergency Action Plan  
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Section 6 - Command and Control

Complete the Incident Management System organizational chart below using the text boxes	YES	NO
<b>OR</b> submit a separate diagram	YES	NO
Attach a contact list with name, organization, title, landline number, cell phone number and email addresses for everyone identified in the chart.	YES	NO

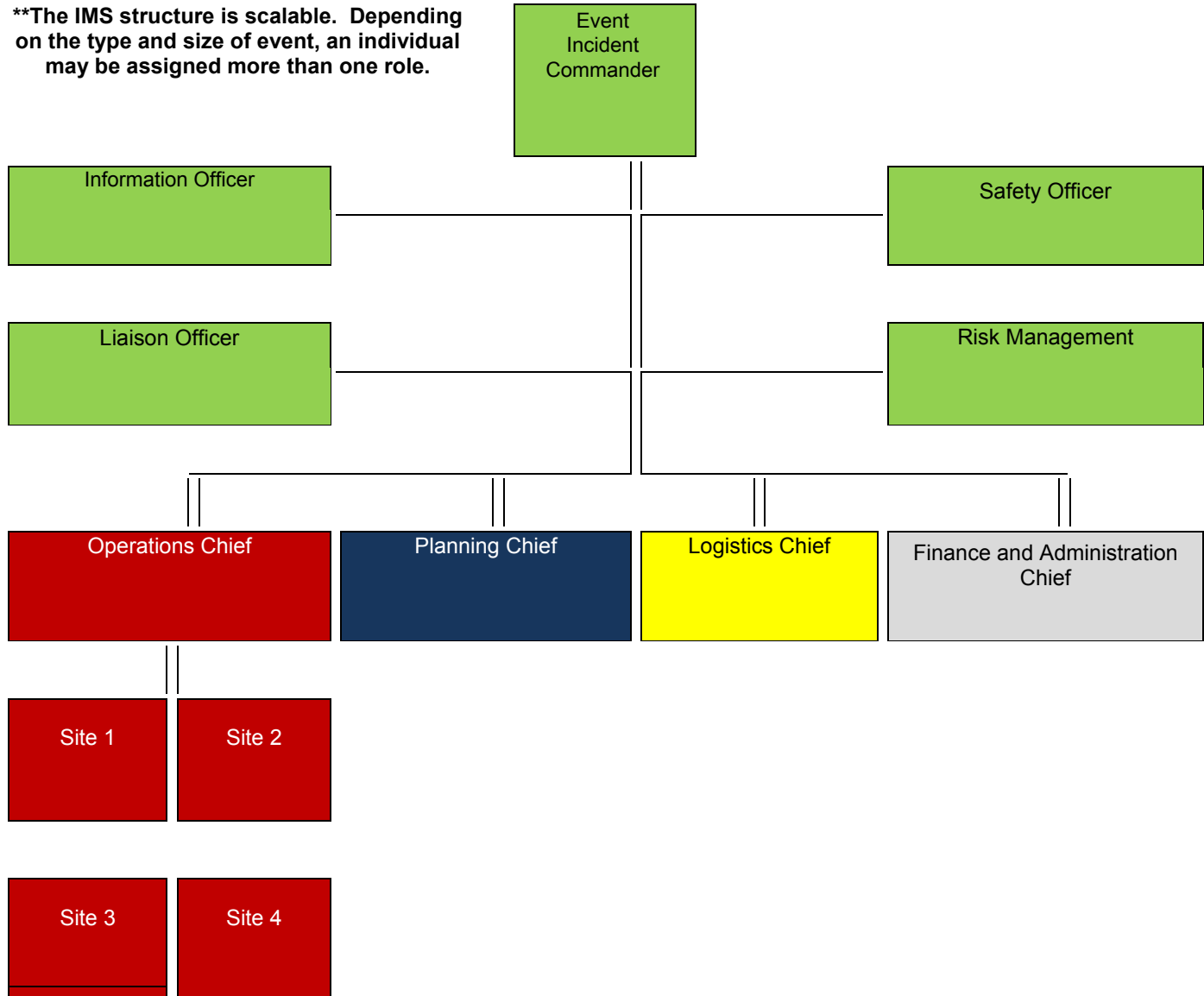
# Emergency Action Plan

## Office of Emergency Management

Please submit completed forms to: [OEMSpecialEvents@toronto.ca](mailto:OEMSpecialEvents@toronto.ca)  
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### Command and Control

**\*\*The IMS structure is scalable. Depending on the type and size of event, an individual may be assigned more than one role.**



### Signature

Completed by:

Signature:

Date:

The personal information on this form is collected under the legal authority of the City of Toronto Act, S.O. 2006, Chapter 11, Schedule A, s. 136 (c) and used within the purview of The Toronto Municipal Code Chapter 59, Emergency Management. The information is used to provide information to the City of Toronto Special Event Oversight Group, in order to inform emergency response efforts. Questions about this collection can be directed to the Office of Emergency Management at **416-392-4554** or to [OEMspecialevents@toronto.ca](mailto:OEMspecialevents@toronto.ca)