

Kentish Council

Reserve/ Sports Ground Pre Activity Inspection

Officials from all teams in consultation with game umpires or other officials **must** visually inspect the playing field no earlier than 30 minutes before the playing or training time, and sign in the place provided at the bottom of this form on completion of inspection.

Sports/Reserve Ground: _____ Activity: _____
Ground address: _____

Playing Surface Condition: - please tick the appropriate box in all sections below

Playing area:- Is there a minimum 4 metres in distance between the boundary and fence/obstruction - Yes No
Is the playing boundary suitable to carry out the activity described above - Yes No

Playing surface:- Is the playing area even and level – no loose turf etc - Yes No
Is the playing surface area suitable to carry out the activity described above - Yes No

Grassed area:- Is there sufficient grass coverage on the playing area - Yes No
Is the grass area suitable to carry out the activity described above - Yes No

Wicket area:- Is the wicket area level with the surrounding area - Yes No
Is the wicket area suitable to carry out the activity described above - Yes No

Playing surface:- Are there any worn areas, damaged areas, holes or cracks - Yes No
Is the playing surface area suitable to carry out the activity described above - Yes No

Playing surface:- Are all pop up and other sprinklers level with the playing surface - Yes No
Is the playing surface area suitable to carry out the activity described above - Yes No

Playing surface:- Is the playing surface assessed to be too dry and hard/wet & sloppy to play on - Yes No
Is the playing surface area suitable to carry out the activity described above - Yes No
(Answer should be the opposite of the above)

If a No box is ticked in the ***suitable to carry out the activity described above*** lines, corrective action must take place prior to the activity.

Please provide comments below on other conditions, hazards, signage or maintenance etc required.

| Inspected by: | Name: | Position: | Sign: | Date: |
|---------------|-------|-----------|-------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |