Complete one of these sheets for each place of worship in your Maintenance Co-operative.

Contact Details

| Place of worship name | |
|--|--|
| Address including postcode | |
| Can the site be found by Sat Nav? | Yes/No |
| Details of person responsible for liaising with the Maintenance Co-operative | Name: Address: Phone no: Mobile no: Email: |
| Details of spiritual leader responsible for the place of worship (if applicable) | Name: Phone no: Mobile no: Email: |
| Details of building's keyholder(s) | Name: Phone no: Mobile no: Address: Email: |

Emergency Procedure

| Procedure for reporting an accident | |
|---|--|
| | |
| Nearest pharmacy | |
| Nearest GP | |
| Nearest hospital with an A&E – name, address & phone no. | |
| Nearest hospital with a Minor Injuries Unit – name, address & phone no. | |
| Location of first aid kit | |
| Location of accident report book | |
| Location of nearest defibrillator (if applicable) | |



Facilities

Does the site have the following?

| | Yes | No |
|-------------------------------|-----|----|
| Toilets | | |
| Accessible toilets | | |
| Baby changing facilities | | |
| Kitchen | | |
| Mains electricity | | |
| Landline (please give number) | | |

If no to any of the above, where can the nearest facilities be found? Make a note here any other facilities available to Maintenance Co-operatives.

Maintenance Records

| Location of maintenance logbook | |
|---|--|
| Location of quinquennial inspection (QI) report | |

Equipment List

| Item | Location | Owner |
|------|----------|-------|
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