Dear Applicant,

Thank you for contacting us and for considering contributing to the safety of your immediate community with the installation of an AED.

Generally the Council supports the provision of AED’s at its sites. We have drawn up this checklist to help you to consider the implications of owning and providing an AED device and to make sure that both you and the Council are clear about the facts of the proposed installation before we grant an official licence agreement. The Council is not obliged to grant a licence in all circumstances.

Please fill in your details and answer each of the questions when you have considered the topics and complied with the requirements mentioned below.

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| --- |
| Building Information |
| Address of the property, where you wish to install an AED device: |  |
| Are you a leaseholder of the above property? | Yes/No |
| Do you have any previous agreements concerning TDC land/buildings? If so, please provide full details. | Yes/No |

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| --- |
| Applicant Information |
| Name(s): |  |
| Organisation: |  |
| Address(es): |  |
| Telephone: |  |
| Email: |  |

Please note that this will be the primary contact for the application and one of the parties to the licence agreement, if granted, therefore you should carefully consider who applies for this licence.

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| AED Information |
| Make:  |  |
| Model:  |  |
| Acquiring from: |  |
| Owner of the AED:  |  |

Local Ambulance Service

Guidance relating to AED’s suggests that the decision to install an AED should be made in partnership with the local ambulance service who can advise about their purchase, installation and other information the Council and the owner of the equipment may need to be aware of. Therefore if you are making this application, we require that you demonstrate that you have had sufficiently detailed and positive conversations with the local ambulance service about the installation.

* Was the decision to install an AED made in partnership with the local ambulance service?

Yes/No

* Was ambulance service advice received about the purchase, installation and ongoing care of the AED? Yes/No
* Where the answer to the above question is yes, please provide copies of correspondence with the ambulance service confirming this.

Benefit of installing AED

* In your opinion, what is the likelihood of someone experiencing a cardiac arrest while using the premises?

Low/Medium/High

* What are the reasons for your conclusions to the above question? For example, if the premises is used for high intensity sport activity?
* How many incidents of cardiac arrest happened in or near the premises in last two years?

0 /1 /2 /More than 2/unknown

Training

* Will there be training provision for staff /members of your group on how to use the AED?

Yes/No

* If the answer is yes, please supply details of your intended trainer.

Maintenance

* How do you intend to fund the initial costs of the defibrillator and associated installation costs?
* How do you intend to fund maintenance and ongoing costs of the defibrillator?
* Who will be responsible for ensuring routine maintenance tasks are performed?
* Is there someone designated to make sure the AED device and its software will be updated in accordance with the most recent UK guidelines? If so, who?
* How do you propose to store the AED?
* Will you ensure that the ambulance service is informed of the AED’s location and instructions of how to access the AED?

Planning Permission

* We require that you contract the Local Planning Authority to ask whether the installation of the AED on a wall, especially if it is a listed building or conservation area, requires any consents or permissions. Has this been done?

Yes/No

* If the answer to the above question is yes, please provide copies of their response.

Thank you for completing this application, we will consider your application and revert to you with a decision shortly. We want to ensure that AED’s fitted to the Council’s properties are set up and maintained to maximise the benefits to the community whilst also accepting there are risks associated with AED ownership.