

5. REPORT

Background

5.1 An application for a new Premises Licence, by Arzu Pesmen of Kurdish Community Centre in respect of Newroz 2012 on the 25th March 2012, Finsbury Park, London N4 under the Licensing Act 2003.

5.2 Details of the application being sought under a new Premises Licence APP1

Live Music

Sunday the 25th March 2011: 1300 to 1845 hours (as amended)

Recorded Music

Sunday the 25th March 2011: 1200 to 1845 hours (as amended)

Performances of Dance

Sunday the 25th March 2011: 1300 to 1845 hours (as amended)

Opening Hours:

Sunday the 25th March 2011: 1200 to 1845 hours (as amended)

General-all four licensing objectives

Employ 100 trained stewards to prevent crime and disorder.

Have a stage manager who will liaise with the sound engineers to keep the level of sound to an acceptable level.

A designated area for lost children.

The event manager will liaise with the police for public safety.

5.3 Crime and Disorder

Newroz is the Kurdish New Year.

It is a peaceful family and community gathering to celebrate and enjoy.

Previous experiences have shown that there has been no disorderly act or crime committed in similar celebrations.

5.4 Public Safety

We will have 100 stewards that will be stationed at critical areas to help and provide assistance.

We will have a good lighting system to cover all areas needed.

We will work closely with the Police and Fire Brigade.

We will have a risk assessment carried out by an independent body.

5.5 Public Nuisance

The stage manager will liaise with the sound manager to keep the level of sound to an acceptable level.

5.6 Child Protection

This is a family event; all children will be accompanied by their parents or an older guardian.

All stewards who will be doing "area patrolling" will be conscious about unaccompanied children.

We will have a lost children tent supervised by qualified persons.

6. RELEVANT REPRESENTATIONS (CONSULTATION)

Responsible authorities:

6.1 Comments of Metropolitan Police

Have made representations. APP 2

6.2 Comments of Enforcement Services:

Enforcement Response Team

Have no objections to this application.

Building Control

Have made representations. APP 3

Food Team

Have no objections to this application.

Health and Safety

Have no objections to this application

Trading Standards

Have no objections to this application

6.3 Fire Officer

Have made representations against the application, these are now withdrawn.
APP 4

6.4 Planning Officer

Have no objections to this application

6.5 Comments of Child Protection Agency or Nominee

Have no objections to this application

7.0 Interested Parties

No letters of representation have been received against this application.

8.0 Financial Comments

The fee which would be applicable for this application was **£100.00**

9.0 Licensing Officers Comments

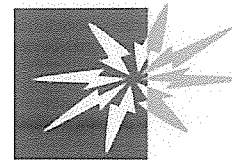
A statutory meeting has taken place to enable the organisers to explain their event and show that they are able to operate an event with regard to the licensing objectives. There a number of issues that have not been agreed upon including the crowd safety aspects and also the ability to ensure that this is not a political event in any capacity.

APPENDIX 1—APPLICATION

WK/208909

AR1027936

LICENSING ACT 2003
Section 17



Haringey Council

Application for a premises licence to be granted under the Licensing Act 2003

(1)

Reference number:

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form. If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary. You may wish to keep a copy of the completed form for your records

(2) I/We

apply for a premises licence under section 17 the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

Part 1 - Premises details

| | |
|---|----------|
| Postal address of premises or, if none, Ordnance Survey map reference or description FINSBURY PARK | |
| Post town LONDON | Postcode |

Telephone number at premises(if any)

Non-domestic rateable value of premises £

Part 2 - Applicant details

Please state whether you are applying for a premises licence as

Please tick yes

- a) an individual or individuals* please complete section (A)
- b) a person other than an individual*
 - i. as a limited company please complete section (B)
 - ii. as a partnership please complete section (B)
 - iii. as an unincorporated association; or please complete section (B)
 - iv. other (for example a statutory corporation) please complete section (B)

(1) Insert name and address of relevant licensing authority and its reference number (optional)
(2) Insert name(s) of applicant

- c) a recognised club please complete section (B)
- d) a charity please complete section (B)
- e) the proprietor of an educational establishment please complete section (B)
- f) a health service body please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital please complete section (B)
- h) the chief officer of police of a police force in England and Wales please complete section (B)

* If you are applying as a person described in (a) or (b) please confirm:

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or Please tick yes
- I am making the application pursuant to
 - a statutory function; or
 - a function discharged by virtue of Her Majesty's prerogative

(A) INDIVIDUAL APPLICANTS (fill in as applicable)

Mr Mrs Miss Ms Other title (for example, Rev)

Surname First names

I am 18 years old or over Please tick yes Date of birth

| Day | Month | Year |
|-----|-------|------|
| | | |

Current postal address if different from premises address

Post town Postcode

Daytime contact telephone number

E-mail address (optional)

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr Mrs Miss Ms Other title
(for example, Rev)

Surname First names

I am 18 years old or over Please tick yes
Date of birth Day Month Year

Current postal address if different from premises address

Post town Postcode

Daytime contact telephone number

E-mail address (optional)

(B) OTHER APPLICANTS

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

| | |
|--|---|
| Name | ARZU PESMEN |
| Address | KURDISH COMMUNITY CENTRE 11 PORTLAND GARDENS LONDON N4 1HU |
| Registered number (where applicable) | |
| Description of applicant (for example partnership, company, unincorporated association etc.) | REGISTERED CHARITY NO: 1083004 COMPANY NO: 4046072 |
| Telephone number (if any) | 020 8880 1804 (07861 800 823) |
| E-mail address (optional) | kurdscentre@gmail.com |

Part 3 - Operating Schedule

When do you want the premises licences to start?

| Day | Month | Year |
|-----|-------|------|
| 25 | 03 | 2012 |

If you wish the licence to be valid only for a limited period, when do you want it to end?

| Day | Month | Year |
|-----|-------|------|
| 25 | 03 | 2012 |

Please give a general description of the premises (please read guidance note 1)

FINSBURY PARK
BASKETBALL PLAYING GROUND
THE HARD GROUND AND
THE ATTACHED GRASS FIELD

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend

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What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedule 1 and 2 to the Licensing Act 2003)

Provision of regulated entertainment

Please tick yes

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

Provision of entertainment facilities for:

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

Provision of late night refreshment (if ticking yes, fill in box L)

Supply of alcohol (if ticking yes, fill in box M)

In all cases complete boxes N, O and P

A

| Plays | | | Will the performance of a play take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
|--------------|-------|--------|--|
| Day | Start | Finish | |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | State any seasonal variations for performing plays (please read guidance note 4) |
| | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for the performance of plays at different times from those listed in the column on the left, please list (please read guidance note 5) |
| | | | |
| Thur | | | |
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| Fri | | | |
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| Sat | | | |
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| Sun | | | |
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B

| Films | | | Will the exhibition of films take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
|--------------|-------|--------|--|
| Day | Start | Finish | |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | State any seasonal variations for the exhibition of films (please read guidance note 4) |
| | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for the exhibition of films at different times from those listed in the column on the left, please list (please read guidance note 5) |
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| Thur | | | |
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| Sat | | | |
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C

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|---|-------|--------|---|
| Indoor sporting events Standard days and timings (please read guidance note 6) | | | Please give further details here (please read guidance note 3) |
| Day | Start | Finish | |
| Mon | | | State any seasonal variations for indoor sporting events (please read guidance note 4) |
| Tue | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for indoor sporting events at different times from those listed in the column on the left, please list (please read guidance note 5) |
| Thur | | | |
| Fri | | | |
| Sat | | | |
| Sun | | | |
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D

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|---|-------|--------|---|--------------------------|--------------------------|--|
| Boxing or wrestling entertainments Standard days and timings (please read guidance note 6) | | | Will the boxing or wrestling entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) | | | |
| Day | Start | Finish | Indoors | Outdoors | Both | |
| Mon | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Please give further details here (please read guidance note 3) |
| Tue | | | | | | |
| Wed | | | State any seasonal variations for boxing or wrestling entertainment (please read guidance note 4) | | | Non-standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times from those listed in the column on the left, please list (please read guidance note 5) |
| Thur | | | | | | |
| Fri | | | | | | |
| Sat | | | | | | |
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E

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|--|-------|--------|--|
| Live music | | | Will the performance of live music take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Standard days and timings (please read guidance note 6) | | | |
| Day | Start | Finish | Please give further details here (please read guidance note 3) |
| Mon | | | |
| | | | State any seasonal variations for the performance of live music (please read guidance note 4) |
| Tue | | | |
| | | | Non-standard timings. Where you intend to use the premises for the performance of live music at different times from those listed in the column on the left, please list (please read guidance note 5) |
| Wed | | | |
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| Thur | | | |
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| Fri | | | |
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| Sat | | | |
| Sun | 13:00 | 19:00 | |
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F

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|--|-------|--------|--|
| Recorded music | | | Will the playing of recorded music take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Standard days and timings (please read guidance note 6) | | | |
| Day | Start | Finish | Please give further details here (please read guidance note 3) |
| Mon | | | |
| | | | State any seasonal variations for the playing of recorded music (please read guidance note 4) |
| Tue | | | |
| | | | Non-standard timings. Where you intend to use the premises for the playing of recorded music entertainment at different times from those listed in the column on the left, please list (please read guidance note 5) |
| Wed | | | |
| | | | |
| Thur | | | |
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| Fri | | | |
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| Sat | | | |
| Sun | 12:00 | 19:20 | |
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G

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|--|--------------|---------------|---|
| Performances of dance Standard days and timings (please read guidance note 6) | | | Will the performance of dance take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) |
| Day | Start | Finish | Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | |
| | | | |
| Wed | | | State any seasonal variations for the performance of dance (please read guidance note 4) |
| | | | |
| Thur | | | |
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| Fri | | | Non-standard timings. Where you intend to use the premises for the performance of dance entertainment at different times from those listed in the column on the left, please list (please read guidance note 5) |
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| Sat | | | |
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| Sun | 13:00 | 19:00 | |
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H

| | | | |
|---|--------------|---------------|---|
| Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6) | | | Please give a description of the type of entertainment you will be providing |
| Day | Start | Finish | Will this entertainment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) |
| Mon | | | Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| | | | Please give further details here (please read guidance note 3) |
| Tue | | | |
| | | | |
| Wed | | | |
| | | | State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g) (please read guidance note 4) |
| Thur | | | |
| | | | |
| Fri | | | |
| | | | Non-standard timings. Where you intend to use the premises for the entertainment of similar description to that falling within (e), (f) or (g) at different times from those listed in the column on the left, please list (please read guidance note 5) |
| Sat | | | |
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| Sun | | | |
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|--|--------------|---------------|---|
| Provision of facilities for making music | | | Please give a description of the facilities for making music you will be providing |
| Standard days and timings (please read guidance note 6) | | | Will the facilities for making music be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) |
| Day | Start | Finish | Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | State any seasonal variations for the provision of facilities for making music (please read guidance note 4) |
| | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for provision of facilities for making music at different times from those listed in the column on the left, please list (please read guidance note 5) |
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| Thur | | | |
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| Fri | | | |
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| Sat | | | |
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| Sun | | | |
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J

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|--|--------------|---------------|--|
| Provision of facilities for dancing | | | Please give a description of the facilities for dancing you will be providing |
| Standard days and timings (please read guidance note 6) | | | Will the facilities for dancing be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) |
| Day | Start | Finish | Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | State any seasonal variations for providing dancing facilities (please read guidance note 4) |
| | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times from those listed in the column of the left, please list (please read guidance note 5) |
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| Thur | | | |
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K

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|---|-------|--------|---|
| Provision of facilities for entertainment of a similar description to that falling within I or J | | | Please give a description of the type of entertainment facility you will be providing |
| Standard days and timings (please read guidance note 6) | | | Will the entertainment facility be indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) |
| Day | Start | Finish | Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Mon | | | Please give further details here (please read guidance note 3) |
| | | | |
| Tue | | | State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within I or J (please read guidance note 4) |
| | | | |
| Wed | | | Non-standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within I or J at different times from those listed in the column on the left, please list (please read guidance note 5) |
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| Thur | | | |
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|--|--------------|---------------|---|
| Late night refreshment | | | Will the provision of late night refreshment take place indoors or outdoors or both - please tick <input checked="" type="checkbox"/> (please read guidance note 2) Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Both <input type="checkbox"/> |
| Standard days and timings (please read guidance note 6) | | | |
| Day | Start | Finish | Please give further details here (please read guidance note 3) |
| Mon | | | |
| | | | |
| Tue | | | |
| | | | |
| Wed | | | State any seasonal variations for the provision of late night refreshment (please read guidance note 4) |
| Thur | | | |
| | | | |
| Fri | | | Non-standard timings. Where you intend to use the premises for the provision of late night refreshment at different times from those listed in the column on the left, please list (please read guidance note 5) |
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| Sat | | | |
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| Sun | | | |
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M

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|--|--------------|---------------|--|
| Supply of alcohol | | | Will the sale of alcohol be for consumption - please tick box <input checked="" type="checkbox"/> (please read guidance note 7) On the premises <input type="checkbox"/> Off the premises <input type="checkbox"/> Both <input type="checkbox"/> |
| Standard days and timings (please read guidance note 6) | | | |
| Day | Start | Finish | State any seasonal variations for the supply of alcohol (please read guidance note 4) |
| Mon | | | |
| | | | |
| Tue | | | |
| | | | |
| Wed | | | |
| | | | |
| Thur | | | Non-standard timings. Where you intend to use the premises for the supply of alcohol at different times from those listed in the column on the left, please list (please read guidance note 5) |
| | | | |
| Fri | | | |
| | | | |
| Sat | | | |
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| Sun | | | |
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State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Name **ARZU PESMEN**
 Address **11 PORTLAND GARDENS**
LONDON
 Postcode **N4 1AL**
 Personal Licence number (if known)
 Issuing licensing authority (if known)

N

Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)

O

Hours premises are open to the public
 Standard days and timings
 (please read guidance note 6)

| Day | Start | Finish |
|------|-------|--------|
| Mon | | |
| | | |
| Tue | | |
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| Wed | | |
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| Thur | | |
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| Sat | | |
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| Sun | | |
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State any seasonal variations (please read guidance note 4)

Non-standard timings. Where you intend to use the premises to be open to the public at different times from those listed in the column on the left, please list (please read guidance note 5)

P Describe the steps you intend to take to promote the four licensing objectives:

a) General - all four licensing objectives (b, c, d, e) (please read guidance note 9)

- Employ 100 trained stewards to prevent crime & disorder
- Have a stage manager who will liaise with the Sound Engineers to keep the level of sound to an acceptable level
- A designated area for lost children
- The Event Manager will liaise with the police for public safety

b) The prevention of crime and disorder

Newroz is the Kurdish New Year
It is a peaceful family and community gathering to celebrate and enjoy
Previous experiences have shown that there has been no disorderly act or crime committed in similar celebrations

c) Public safety

- We will have 100 stewards that will be stationed at critical areas to help and provide assistance
- We will have good lighting system to cover all areas needed
- We will work closely with the police and Fire Brigade
- We will have a risk assessment carried out by an independent body

d) The prevention of public nuisance

The stage manager will liaise with the Sound Engineers to keep the level of sound to an acceptable level

e) The protection of children from harm

- This is a family event, All children will be accompanied by their parents or an adult guardian.
- All stewards who will be doing "area patrolling" will be conscience about unaccompanied children.
- We will have a lost children tent supervised by qualified persons.

CHECKLIST:

Please tick ✓

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor, if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION

Part 4 - Signatures (please read guidance note 10)

Signature of applicant or applicant's solicitor or other duly authorised agent. (Please read guidance note 11)
If signing on behalf of the applicant please state in what capacity.

Signature *Andrew*

Date 04/01/2012

Capacity CHAIR

For joint applications signature of 2nd applicant, 2nd applicant's solicitor or other authorised agent.
(Please read guidance note 12)

If signing on behalf of the applicant please state in what capacity.

Signature _____

Date

Capacity

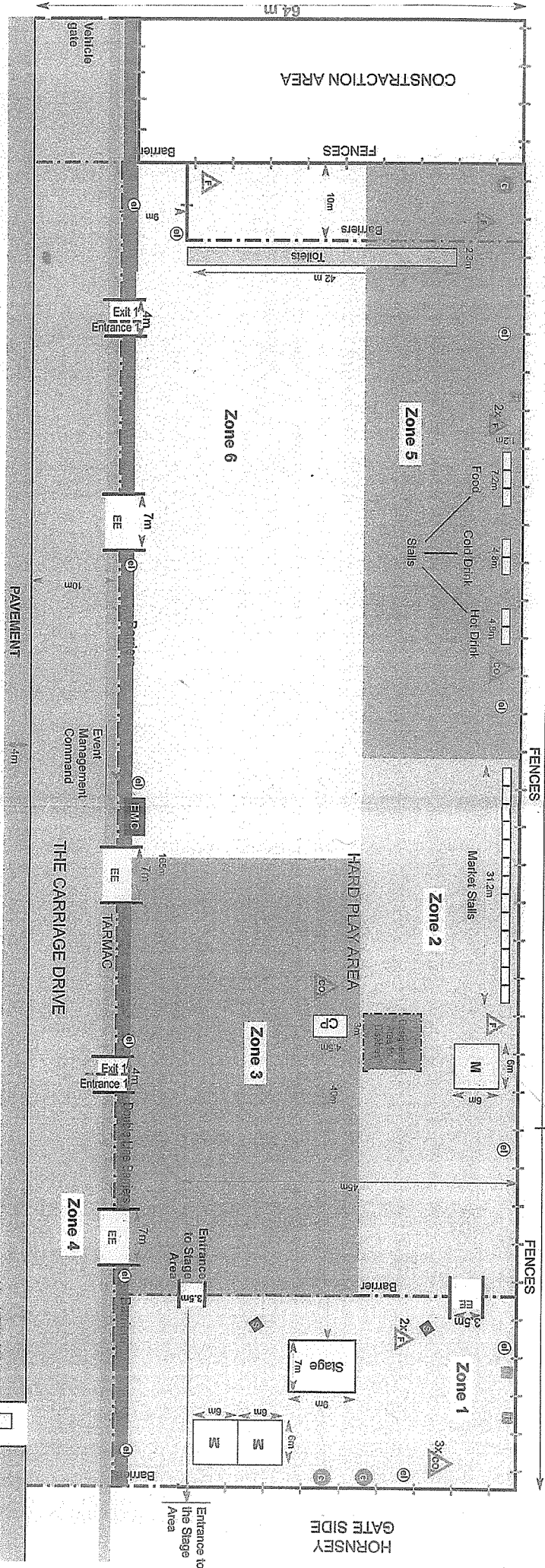
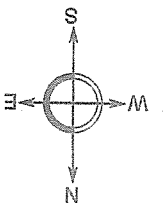
| | |
|---|----------|
| Contact name (where not previously given) and postal address for correspondence associated with this application (please read guidance note 13) | |
| | |
| Post town | Postcode |
| Telephone number (if any) | |
| If you would prefer us to correspond with you by e-mail your e-mail address (optional) | |

Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
 2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
 3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
 4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
 5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
 6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
 7. If you wish people to be able to consume alcohol on the premises please tick 'on the premises', if you wish people to be able to purchase alcohol to consume away from the premises please tick 'off the premises'. If you wish people to be able to do both please tick 'both'.
 8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
 9. Please list here steps you will take to promote all four licensing objectives together.
 10. The application form must be signed.
 11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
 12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
 13. This is the address which we shall use to correspond with you about this application.
 14. The information you have provided will be held by the Council on computerised and manual files. The data may also be disclosed to other departments within the Council or other organisations, but only in order to ensure compliance with relevant legislation or to detect and prevent fraud or a crime.
-

◆ All gaps at the back to railway will be secured by fences

RAILWAY



- A : Ambulance
- CP : Sound Control Point
- M : Marquee
- ◆ : Speakers
- Ⓢ : Emergency Lightning
- ⚡ : Fire Extinguishers
- ⊙ : Generator
- 🚻 : Single toilet
- EE : Emergency Exit

1: 500 (5 meters to 1cm)

- ZONES**
- Zone 1
 - Zone 1
 - Zone 1
 - Zone 1
 - Zone 1
 - Zone 1