5. REPORT

Background

5.1 An application for a new Premises Licence, by Icon Trading Ltd in respect of The Phoenix Lounge and Bar, 2 Queens Parade, Bounds Green N11 2DN under the Licensing Act 2003.

5.2 Details of the application being sought under the Premises Licence-APP 1

The Provision of Regulated Entertainment: Recorded Music

Monday to Sunday

0700 to 0300

Supply of Alcohol

Monday to Sunday

1200 to 0300

For consumption ON the premises.

Late Night Refreshment

Monday to Sunday

2300 to 0300

Hours open to the public

Monday to Sunday

0700 to 0300

General-all four licensing objectives

The premises will be professionally run with fully trained and competent staff. No loud disruptive music or noise, zero tolerance on drugs, binge drinking and violence, thorough ID checks and all certificate in place for general safety and compulsory requirements.

5.3 Crime and Disorder

Zero tolerance on drugs and binge drinking, the promotion of sensible drinking campaigns, CCTV, No drink served to anyone underage or without ID and a relationship with the local crime response and safety services.

5.4 Public Safety

Promotion of sensible drinking, zero tolerance towards public nuisance, gas safety and electrical safety checks along with fire and risk assessments.

5.5 Public Nuisance

Very low noise pollution to the surrounding public. The consumption of food and drink only allowed on the premises encouraging less litter and pollution outside.

5.6 Child Protection

Strictly no one under the age of 18 will be allowed to buy or consume alcohol on the premises. I.D checks will be in full force (challenge 21 & 25).

6. RELEVANT REPRESENTATIONS (CONSULTATION)

Responsible authorities:

6.1 Comments of Metropolitan Police

Representation has been made and are accepted by the applicant, the representation is now withdrawn. **Appendix 2**

6.2 Comments of Regulatory Services:

Environmental Health

Representation made regarding this application. The applicant has advised that he is able to accept the conditions recommended. **Appendix 3**

Trading Standards

Have made representation to this application, these are accepted and are now withdrawn. **Appendix 4**

6.3 London Fire and Civil Defence Authority

Have made no representation to this application

6.4 Planning Services

Have made no representation to this application

6.5 Comments of Child Protection Agency or Nominee

No representation made on this matter

7.0 Interested Parties – Appendix 5

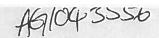
1 letter of representation has been received against this application.

8.0 Financial Comments

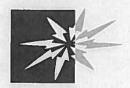
The fee which would be applicable for this application was £190.00.

APPENDIX 1

APPLICATION FORM SUBMITTED BY ICON TRADING LTD







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

Haringey

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.

I/We ICON TRADING LTD

(Insert name(s) of applicant)

apply for a premises licence under section 17 of 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

THE PHOENIX LOUNGE AND BAR

2 QUEENS PARADE

BROWNLOW ROAD

BOUNDS GREEN

Post town	LONDON	Post code	N11 2DN

Telephone number at premises (if any)	7852304598
Non-domestic rateable value of premises	£9400

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)
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 in Wales	please complete section (B)
ga)	a person who is registered under Chapter 2 of Part 1 of the Health and Social Care Act 2008 (within the meaning of that Part) in an independent hospital in England	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:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- /

- I am making the application pursuant to a
 - o statutory function or
 - o 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	Landa Kanini II
I am 18 ye	ears old or o	over		Please	e tick yes
Current p if differen premises		ss			Part 2 - 1009 Officery many
Post Tow	n		E Tyms I	Postcode	3 3
Daytime o	ontact tele	phone number			
E-mail ad (optional)				THE PROPERTY OF	

SECOND INDIVIDUAL APPLICANT (if applicable)

Mr	Mrs	Miss	Ms	Other Title (for example, Rev)	
Surnam	ie		Firs	t names	Transfer
l am 18	years old or	over		Please t	ick yes
if differ	postal addrent from es address	ess			
Post To	wn	A BUW - SPACE	GIAGO INN	Postcode	
Daytime	contact tel	ephone number			
E-mail a (option					

(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
ICON TRADING LTD
Address
17A ASHFIELD PARADE SOUTHGATE LONDON N14 5EH
Registered number (where applicable)
5775262
Description of applicant (for example, partnership, company, unincorporated association etc.)
COMPANY
Telephone number (if any) 07949271800
E-mail address (optional)

Part 3 Operating Schedule

When do you want the premises licence to start?

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

Please give a general description of the premises (please read guidance note1)

THE PREMISES IS LOCATED ON A MAIN ROAD WITH COMMERCIAL BUSINESSES EITHER SIDE.

THE MAIN ENTRANCE IS A SINGLE DOOR LEADING TO A RAISED 1ST FLOOR PREMISES.

THE LAYOUT COMPRISES OR A MAIN SEATING AREA WITH A SMALL BAR, A CORRIDOR TO THE LEFT LEADS TO A SMALL KITCHEN, 2 SEPARATE TOILETS AND THE REAR FIRE EXIT.

THE PREMISES WILL BE USED AS A BAR/LOUNGE/DINER OFFERING HOT FOOD, SOFT DRINK AND ALCOHOL TO THE PUBLIC.

What consideration have you given to the immediate locality with regards to the licensable activities you are applying for?

WE HAVE INFORMED ALL IMMEDIATE RESIDENTIAL AND COMMERCIAL PROPERTIES AND THEIR RESIDENTS THAT THE PREMISES IS UNDER NEW MANAGEMENT ALONG WITH A THOROUGH DESCRIPTION OF THE NATURE OF BUSINESS WE INTEND TO UNDERTAKE.

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

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

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 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:

- 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

	days and tim	nings (please	Will the performance of a play take place indoors or outdoors or both – please	Indoors Outdoors	
			tick (please read guidance note 2)	Outdoors	
Day	Start	Finish		Both	
Mon			Please give further details here (please read guidance note 3)		
Tue			nd Up me punka ta utymya g	Manage conduct.	
Wed			State any seasonal variations for performing plays (please read guidance note 4)		
Thur				ata Marian 17	
Fri	101		Non standard timings. Who premises for the performar times to those listed in the	nce of plays at different	
Sat			please list (please read guid	lance note 5)	
Sun	1 2		in the buncut	or delineations	

В

Films Standard days and timings (please read		read	Will the exhibition of films take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors
guidar	nce note (6)		Outdoors
Day	Start	Finish		Both
Mon			Please give further details here (please read gr	uidance note 3)
Tue				
Wed			State any seasonal variations for the exhibition of films (read guidance note 4)	
Thur				
Fri			Non standard timings. Where you intend to unifor the exhibition of films at different times to column on the left, please list (please read guid	those listed in the
Sat			(piedse read guid	Janice Hote 3)
Sun				

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

D

Boxing or wrestling entertainments Standard days and		s and	Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	
	timings (please read guidance note 6)			Outdoors	
Day	Start	Finish		Both	
Mon			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)		
Thur					
Fri			Non standard timings. Where you intend to for boxing or wrestling entertainment at diffulisted in the column on the left, please list (p	erent times to those	
Sat			note 5)	icase reau guiudiice	
Sun					

Live music Standard days and timings (please read			Will the performance of live music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors
	nce note 6		production of the state of the	Outdoors
Day	Start	Finish	THE PERSON NAMED IN COLUMN 1	Both
Mon	m y 102 25		Please give further details here (please read g	uidance note 3)
Tue		0.5:		
Tue				
Wed			State any seasonal variations for the performance of live m (please read guidance note 4)	
Thur				
Fri		71000	Non standard timings. Where you intend to unfor the performance of live music at different listed in the column on the left, please list (please list)	times to those
Sat			note 5)	
Sun				

Standa timing	Recorded music Standard days and timings (please read guidance note 6)		Will the playing of recorded music take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	/
guldar				Outdoors	
Day	Start	Finish		Both	
Mon	7:00AM	3:00AM	THE TIMES SPECIFIED WHICH WILL BE A LOV	G THROUGH	OUT
Tue	7:00AM	3:00AM	INTENED FOR QUITE BACKGROUND MUSIC		
Wed	7:00AM	3:00AM	State any seasonal variations for the playing (please read guidance note 4)	of recorded I	nusic
Thur	7:00AM	3:00AM			
Fri	7:00AM	3:00AM	Non standard timings. Where you intend to u for the playing of recorded music at different listed in the column on the left, please list (ple	times to thos	se
Sat	7:00AM	3:00AM	note 5)	ass read guit	adrice
Sun	7:00AM	3:00AM			3 - 1

		and	Will the performance of dance take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors Outdoors	
		6)			
Day	Start	Finish		Both	
Mon	Mon		Please give further details here (please read	guidance note 3)	
Tue					
Wed			State any seasonal variations for the perfor (please read guidance note 4)	mance of dance	
Thur			alsine a		
Fri			Non standard timings. Where you intend to for the performance of dance at different tin the column on the left, please list (please re-	nes to those listed in	
Sat			The salarity and the left brease hat (blease to	aa galaanoo noto oj	
Sun					

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 enterbe providing	tainment you will
Day	Start	Finish	Will this entertainment take place indoors or	Indoors
Mon			outdoors or both – please tick (please read guidance note 2)	Outdoors
		5-1341100 11010 2)		Both
Wed Thur Fri			State any seasonal variations for entertainme description to that falling within (e). (f) or (g) guidance note 4)	ent of a similar (please read
Sat			Non standard timings. Where you intend to use for the entertainment of a similar description within (e). (f) or (g) at different times to those column on the left. please list (please read guidents)	to that falling listed in the
Sun				

Provision of facilities for making music Standard days and timings (please read guidance note 6)		sic and read	Please give a description of the facilities for n will be providing	naking music you
			Will the facilities for making music be indoors	Indoors
			or outdoors or both – please tick (please read quidance note 2)	Outdoors
Day	Start	Finish		Both
Tue Wed			State any seasonal variations for the provisio making music (please read guidance note 4)	n of facilities for
Thur				
Fri	4		Non standard timings. Where you intend to unifor provision of facilities for making music at those listed in the column on the left, please i	different times to
Sat			guidance note 5)	(piedeo read

J

Provision of facilities for dancing Standard days and timings (please read guidance note 6)			Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)	Indoors Outdoors Both	
94144			Please give a description of the facilities for eproviding		
Day	Start	Finish			
Mon			Please give further details here (please read guidance note 3)		
Tue					
Wed			State any seasonal variations for providing d (please read guidance note 4)	ancing facilities	
Thur					
Fri			Non standard timings. Where you intend to unfor the provision of facilities for dancing entered times to the solitoted in the college.	rtainment at	
Sat			different times to those listed in the column of list (please read guidance note 5)	on the leπ. please	
Sun					

Provision of facilities for entertainment of a similar description to that falling within i or j Standard days and timings (please read guidance note 6)			Please give a description of the type of enter you will be providing	tainment facility
Day	Start	Finish	Will the entertainment facility be indoors or	Indoors
Mon			outdoors or both – please tick (please read quidance note 2)	Outdoors
				Both
Tue			Please give further details here (please read of	guidance note 3)
Wed Thur			State any seasonal variations for the provision entertainment of a similar description to that	
			(please read guidance note 4)	Tannig within 1 or j
Fri				
Sat	-		Non standard timings. Where you intend to for the provision of facilities for entertainmed description to that falling within i or j at different listed in the column on the left, please list (proof 5)	nt of a similar rent times to those
Sat	-		for the provision of facilities for entertainmed description to that falling within i or i at different listed in the column on the left, please list (please list)	nt of a similar rent times to those

L

Late night refreshment Standard days and timings (please read guidance note 6)			Will the provision of late night refreshment take place indoors or outdoors or both – please tick (please read guidance note 2)	Indoors	/
				Outdoors	
Day	Start	Finish		Both	
Mon	23:00	3:00AM	Please give further details here (please read of WE WILL OFFER HOT FOOD AND DRING TO BE CONSUMED IN THE PREMISES DURING	K TO THE PU	BLIC
Tue	23:00	3:00AM	NIGHT REFRESHMENT HOURS SPECIFIED	NG THE LATE	
Wed	23:00	3:00AM	State any seasonal variations for the provision refreshment (please read guidance note 4)	on of late nig	ht
Thur	23:00	3:00AM			
Fri	23:00	3:00AM	Non standard timings. Where you intend to a for the provision of late night refreshment at those listed in the column on the left, please	different time	es. to
Sat	23:00	3:00AM	guidance note 5)	nst (please re	au
Sun	23:00	3:00AM			

Supply of alcohol Standard days and timings (please read		and	Will the supply of alcohol be for consumption (Please tick box) (please read guidance note 7)	On the premises	/
guidance note 6)				Off the premises	
Day	Start	Finish	Altri d	Both	
Mon	12:00	3:00AM	State any seasonal variations for the supply cread guidance note 4)	of alcohol (p	lease
Tue	12:00	3:00AM	CHURCH THE CHARLES THE PARTY AND TO		
Wed	12:00	3:00AM			
Thur	12:00	3:00AM	Non standard timings. Where you intend to u	se the prem	ises
			for the supply of alcohol at different times to	hose listed	in the
Fri	12:00	3:00AM	column on the left, please list (please read gui	hose listed	in the
Fri Sat	12:00			hose listed	in the

State the name and details of the individual whom you wish to specify on the licence as premises supervisor

Address 23 TH WINCHMOI LONDON	E BIRCHES RE HILL		
LONDON			
Postcode	N21 1NJ		
	icence number LN/201	200500	

Please tick yes

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)

0

Hours premises are open to the public Standard days and timings (please read guidance note 6)			State any seasonal variations (please read guidance note 4)
Day	Start	Finish	
Mon	7:00AM	3:00AM	
Tue	7:00AM	3:00AM	
Wed	7:00AM	3:00AM	
E Je		10.	Non standard timings. Where you intend the premises to
Thur	7:00AM	3:00AM	open to the public at different times from those listed in th column on the left. please list (please read guidance note 5)
Fri	7:00AM	3:00AM	
Sat	7:00AM	3:00AM	most most number to hoterwoon will to
Sun	7:00AM	3:00AM	The agreement of the second se

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

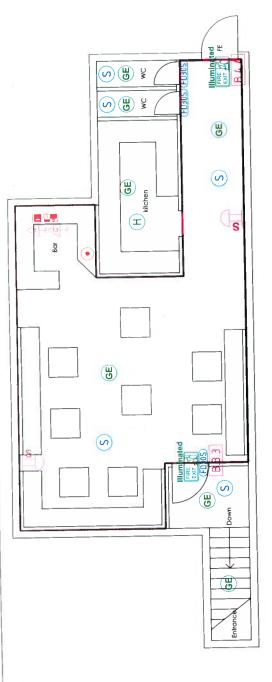
a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)

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 (See guidance note 11). If signing on behalf of the applicant please state in what capacity.
Signature Asignature
Date 13/11/2012
Capacity DPS
For joint applications signature of 2 nd applicant or 2 nd 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 (w associated with t	here not previousl his application (ple	y given) and postal address for correspondence ease read guidance note 13)
Post town		Post code
Telephone numb	er (if any)	

Notes for Guidance

- 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, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. 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.



1st Floor Plan Scale 1:50

REFERENCES. **KEY TO FIRE**

- FD30S) 30 MINUTE INTEGRITY/30 MINUTE INSULATION FIRE DOOR WITH SMOKE SEALS AND FITTED WITH A SELF CLOSING DEVICE.
- 60 MINUTE INTEGRITY/60 MINUTE INSULATION FIRE DOOR WITH SMOKE SEALS AND FITTED WITH A SELF CLOSING DEVICE. FD60S
 - FIRE EXIT WITH PUSH BAR OPENING DEVICE

E

- ENTRY/EXIT DOOR (m)
- 30-FRG 30 MIN FIRE RESISTANT GLAZED ELEMENT
- (LOCATION TO BE COVERED BY A SMOKE DETECTOR 60-FRG 1HR FIRE RESISTANT GLAZED ELEMENT
 - AREA TO BECOVERED BY A HEAT DETECTOR S \equiv
- KEY TO MANDATORY SIGN REFERENCES TO BS 5499; Part 1
- B33 'FIRE DOOR KEEP SHUT'
- B34 'FIRE DOOR KEEP LOCKED SHUT'
- B36 'AUTOMATIC FIRE DOORS KEEP CLEAR, CLOSE AT NIGHT'
- B 4 4 PUSH BAR TO OPEN

FIRE SIGNAGE KEY TO FIRE FIGHTING EQUIPMENT Equipment to be subject to anual



testing

Pitr Agueous FILM FORMING FOAM

EXTINGUISHER

w 9tr WATER EXTINGUISHER 2kg CO2 EXTINGUISHER

EXIT A O

NON-ILLUMINATED SIGN INDICATING DIRECTION OF FIRE EXIT ILLUMINATED SIGN INDICATING FIRE EXIT

SIGN TO BE LOCATED ON THE DOOR ABOVE THE PUSH BAR

Pur Bar Ta Open

SIGN TO BE LOCATED ON THE DOOR ABOVE THE PUSH BAR SIGN

SIGN LISTING PROCEDURE IN CASE OF FIRE

S FIRE ALARM SOUNDER MANUAL CALL POINT

FB FIRE BLANKET

AP FIRE ALARM PANEL

INTERNALLY ILLUMINATED HANGING SIGN INDICATING DIRECTION OF FIRE EXIT Illuminated

MAINTAINED EMERGENCY LIGHT

GE

Area to be used for the sale of alcohol, regulated entertainment and late night refreshment.

CCTV Camera Position

GENERAL EMERGENCY LIGHT



NO SMOKING



FIRE EXTINGUISHER IDENTIFICATION SIGNS INCORPORATING FIRE CLASSES A, B AND C FOR THE FOLLOWING EXTINGUISHER TYPES

NOTES:

conjunction with Consultants Fire Risk These drawings are to be read in Assessment

Fire doors to be half hour fire resisting and self closing. Doors to satisfy BS476 Part 22: 1987 and be FD3030 standard. Doors protecting means of secape should be fitted with intumescent strips and cold smoke seals MEANS OF ESCAPE

Roller shutter to ground floor staircase three to be linked to fire alarm and drop to soal in case of

FIRE ALARM

Building to be fitted with a fire alarm system conforming to part LS of BS 8539-1:2002. Fire detection and fire alarm systems for buildings. Alarm should be interphased with the entertainment system to silence music when in use. Symbols on plan indicate rooms to be covered, and actual location of detector heads are to be advised by a specialist fire alarm consultant.

FIRE FIGHTING EQUIPMENT

All fire fighting equipment to be set so that the carry handles are located 1.5m above floor level. EMERGENCY LIGHTING
Premises to be covered with emergency lighting
to standard set out in BS 5266; Part 1:2002 The
code of practice for the emergency lighting of
premises other then cinemas. All equipment to be subject to annual testing by

All exits to be indicated by the use of maintaine illuminated exit signs. All other areas to be illuminated by general emergency lighting

ALL OFF LOAD DRESSES ONE TO RESTED OFF COLUMN WITH THE STATE OFF THE STA Licensing Plan CHECKED 1:50 @ A2 Nov 2012 Rev. Date Description 1000-01 K BACT