

**LEON COUNTY
DEPARTMENT OF DEVELOPMENT SUPPORT
AND ENVIRONMENTAL MANAGEMENT**

D - 14



Renaissance Center

435 North Maccomb Street, 2nd Floor
Tallahassee, Florida 32301
(850) 606-1300

**Development Services, Fire Safety Office, Sheriff's
Office, Emergency Medical Services, Health Department &
Building Permit Application Requirements**

**TEMPORARY USES, CONSTRUCTION STAGING AREAS
OR SPECIAL EVENTS**

APPLICATION FEE: \$210

REVIEW OF TEMPORARY ALCOHOL SALES LICENSE: Additional \$90 fee

Leon County Development Support and Environmental Management (DSEM), in cooperation with the Tallahassee Fire Department, Emergency Medical Services, Sheriff's Office and the Florida Department of Health is committed to processing permit applications in the shortest time possible. In order to prevent delays in processing, applicants must complete *all* of the required documentation before processing of the permit application can begin. Staff is available to answer any questions regarding application requirements.

This handout provides a detailed explanation of permit application requirements for temporary construction staging areas, outdoor events and events in temporary structures intended to accommodate attendance of 250 or more persons. For your convenience, and to reduce permit review time, this application contains all of the requirements of the Development Services Division, Fire Safety Office, Emergency Medical Services, Sheriff's Office, and the Environmental Health Department. The entire package shall be submitted to the DSEM office at 435 North Maccomb Street, Tallahassee, Florida, 32301. Upon receipt of a completed application, it will be digitally forwarded to the agencies noted above for review. In most cases, a permit can be reviewed and issued within 48 hours, provided all applicable information is included. **NOTE:** Please submit application at least 10 business days prior to the proposed event to allow for sufficient review time.

Please note that activities held at County-owned parks and recreation facilities do not require completion of this application. For such activities, you must contact Public Works, Division of Parks and Recreation at (850) 606-1500.

TELEPHONE NUMBERS

SHERIFF'S OFFICE	(850) 922-3300
TALLAHASSEE FIRE SAFETY OFFICE	(850) 891-7196
DEVELOPMENT SERVICES DIVISION	(850) 606-1300
FDH/LEON COUNTY HEALTH DEPARTMENT	(850) 606-8350
EMERGENCY MEDICAL SERVICES	(850) 606-2100

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Please submit application at least 10 business days prior to proposed event to allow for sufficient review time.

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

Background Information

1. **Temporary Uses:** Temporary uses are activities that are not intended to be permanent and have short duration spans. The typical duration can range from two hours up to 15 consecutive days. Temporary uses may or may not include the construction of temporary structures. All temporary structures shall be subject to applicable building permitting requirements. Documentation shall be provided and approved by DSEM demonstrating that the temporary structures comply with the applicable building codes. This includes connection to electrical services for temporary lighting and equipment. Please see Section I of this application packet to submit for a temporary use permit.

Examples of Temporary Uses (list is not inclusive of all possible temporary uses):

Fireworks Stand	Fruit/Vegetable Stand	Fundraisers at Intersections/Side of Road
Seasonal Sales (Christmas trees, pumpkins, etc.)		Street Artisan/Craftsman

2. **Temporary Construction Staging Area:** Temporary off-site construction staging areas are intended to provide a temporary location for storing construction materials and equipment. The typical duration for a temporary construction staging area may be up to 24 months. These uses are typically utilized for infrastructure-related improvement projects, but may be utilized for other construction projects. Please refer to Section II of this application packet to submit for a temporary construction staging area permit.

Examples of Temporary Construction Staging Areas (list is not inclusive of all possible types):

Street/Highway Construction Projects	Sewer/Water Line Construction Projects
Other construction projects requiring equipment/material to be stored off-site, but within close proximity to the construction site.	

3. **Special Events:** Special events are temporary activities that draw large numbers of people. These types of activities can significantly impact traffic, the delivery of emergency services and may have other health and safety issues. Additionally, special events can create noise and lighting impacts for neighboring properties. The typical duration can range from two hours up to 15 consecutive days. Temporary events may or may not include the construction of temporary structures. Proposed special events expecting 250 or more persons at any one time shall require the completion and submittal of a temporary special event permit. Note that although events with less than 250 expected persons do not require a permit, staff recommends contacting DSEM to discuss the proposed temporary event to facilitate any necessary coordination with the appropriate authorities. Please refer to Section III of this application packet to submit for a special event permit.

Examples of Temporary Special Events (list is not inclusive of all possible special events):

Concerts/Musicals	Car Shows	Fairs	Large Parties
Tent Meetings (rallies, speeches, religious, etc.)	Flea Markets		

ZONING DISTRICTS AND OTHER REQUIREMENTS

1. Temporary uses or special events are not allowed in the following residential zoning districts: Residential Preservation (RP); Manufactured Home Park (MH); Residential Acre (RA); Single-Family Detached Residential (R-1 and R-2); Single and Two-Family Residential (R-3); Single, Two and Multi-Family Residential (R-4); or Manufactured Home and Single-Family Detached (R-5).
2. Temporary uses or special events are also not allowed in the following zoning districts when the districts are used entirely for residential purposes: Rural (R); Urban Fringe (UF); Rural Community (RC); Woodville Rural Community (WRC); Lake Talquin Recreation/Urban Fringe (LTRUF); Lake Protection (LP); and Office Residential (OR-1, OR-2 and OR-3).
3. Temporary off-site construction staging areas shall be permitted in all zoning districts. A temporary off-site construction staging area proposed within or adjacent to RP, R-1, R-2, R-3, R-4, R-5, LP or MH zoning districts shall provide an opaque buffer between the boundary of the proposed site and any adjacent residential uses.

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

4. Buildings for temporary uses and events must be set back from each residential property line a minimum distance of five hundred (500) feet, regardless of zoning district.
5. Under certain conditions, such as an outdoor special event adjacent to a different type of land use, buffers may be required. If you are required to install or preserve a buffer, staff will notify you prior to issuing the permit.

FOUR STEPS TO OBTAINING A PERMIT FOR TEMPORARY USE, CONSTRUCTION STAGING AREA OR SPECIAL EVENT

STEP 1: COLLECT AND PREPARE REQUIRED INFORMATION AND DOCUMENTS

- A. **Parcel Identification Number.** Must be the current ID number(s) for your parcel(s) of land and can be obtained from the Property Appraiser's Office or from your most recent ad valorem (property) tax notice.
- B. **Site Plan.** A site plan is a scaled drawing of your property. You do not need to provide a signed and sealed survey; however, the scaled drawing shall include the following information:
 - North directional arrow
 - All property boundary lines
 - Location of all existing permanent and proposed temporary structures and their distances from the property line and each other
 - Width and location of existing or proposed drive aisles, parking spaces and emergency access sufficient to provide access for fire, police and emergency service vehicles.
 - Proposed traffic and pedestrian circulation plans for the event
 - First aid/emergency response location
 - Location of public sanitary facilities
 - Location of staging, seating, tents, or other public assembly areas
 - Location of any proposed lighting
 - Location of all man-made or environmental features such as slopes, swales, waterbodies, or fill material
 - Limits of clearing activity*
 - Location of grading activity*
 - An arrow indicating the direction of any slopes*
 - Location of all natural or constructed water conveyance features, such as ravine, ditch, swale, culvert, canal, stream or springs/seeps*
 - Location of special development restrictions, such as easements, natural areas required undisturbed, or land use buffers*
- * Only required for off-site construction staging areas and shall be included with the data sheet found in Section II of this package.
- C. **Contact Information and Directions.** Complete directions to the site of the planned temporary use/construction staging area/special event and a primary contact person to call in the event of an emergency situation or for additional information.
- D. **Data Sheets.** All applications will require the completion of the applicable data sheets found in Sections I, II and III of this packet. Special events (Section III) require significantly more information to be provided. If you are unsure as to whether or not your application qualifies as a special event, please contact Development Services at (850) 606-1300.
- E. **Flame Proof Certificates.** All tents being used at the site of the planned temporary use, construction staging area or special event will require documentation that the fabric is flame proof.

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

- F. **Portable Toilet Contract.** A signed contract with a portable toilet company is required. The contract must include dates and times of event, number of restrooms being provided, the service frequency, and the removal date of the units.
- G. **Safety Plan.** A safety plan is required for special events, detailing proposed coordination and response to emergency situations. If a private firm is being hired to provide security, crowd control or parking services, then a signed contract will also be required.
- H. **Inspections.** A Building Inspector may be required to inspect the site if temporary electrical service is provided, and/or if temporary structures are constructed. **Note: It is the responsibility of the applicant to arrange inspections one day prior to the start of the temporary use, construction staging area or special event.**

STEP 2: APPLICATION SUBMITTAL

Submit completed packet and all applicable forms to the Department of Development Support and Environmental Management (DSEM). A Permit Technician will review the application for completeness and ensure that if the proposed event involves construction of temporary structures, a building permit application is included. The Permit Technician will then forward the application and all associated documents to Development Services staff for review and distribution for comments.

STEP 3: DEVELOPMENT SERVICES PERMIT REVIEW

Staff from the Development Services Division will review the application to ensure all required documents and certifications are included prior to digitally distributing to all reviewing agencies, including but not limited to the Fire Department, Sheriff's Office, Leon County Health Department and Emergency Medical Services. Development Services staff will coordinate all comments, if any, to the applicant. Once the application has been determined complete, the Permit Technician will inform the applicant that the permit is ready to be picked up.

STEP 4: INSPECTIONS

All temporary use permits shall require a structural, portable toilet accessibility and electrical "Fire/Life Safety Inspection" prior to the commencement of the event by phoning (850) 891-7040. Any building permit inspections shall be requested through Leon County's Interactive Voice Response System (IVRS) by calling (850) 606-1306.

STEP 5: CERTIFICATE OF COMPLETION

Once all inspections are completed and approved, the applicant must return to DSEM with the signed permit card to receive a Certificate of Completion prior to the proposed event's commencement.

Section I
Temporary Use Data Sheet

Note: If this temporary use includes the construction of any temporary structures (stage, building, etc.), this data sheet must be accompanied by a completed "Application for Building Permit and/or Single Family/Mobile Home/Environmental Management Permit," including construction drawings which may require a seal by a design professional.

TEMPORARY USE SITE INFORMATION AND CHECKLIST

Applicant

Number of Applications during Calendar Year*: 1st 2nd 3rd 4th **Application Fee: \$210**

Date Application Submitted: _____

Name of Applicant: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Primary On-site Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Name of Temporary Use Event: _____

Description of Temporary Use Event: (additional sheet may be attached if necessary): _____

Type of Use: Public Private

Temporary Use Location: _____

No. Street

Between: _____ and _____

Cross Street Cross Street

Parcel Number: _____

Zoning District: _____

Temporary Structure (check all that apply): Tent Canopy Stage None

Other: _____

License number(s) of any contractor(s): _____

* A request for a 15-day extension counts as an additional permit.

The following information must be included with application:

- Documentation addressing life/safety issues (flameproof certificates).
- Submittal of a scaled site drawing identifying the property boundaries (as shown on the Leon County Property Appraiser's website) and the location of the proposed temporary use. The scaled site drawing shall provide the location of parking areas, tents/canopies, driveway access, portable restrooms, stages, etc.
- Documentation of a signed contract with a portable toilet company identifying dates and times of the event, number of restrooms provided, service frequency, driveway access, and removal date of the units.
- Submittal of a Building Permit and/or Single Family/Mobile Home/Environmental Permit Application (B-1), if applicable.
- All contractors' license numbers, if applicable.

DURATION/HOURS OF OPERATION

Dates of Use/Event:

From _____ to _____ Hours of Operation: _____

Dates of Set-up/Deconstruction:

From _____ to _____ Hours of Operation: _____

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

The applicant/property owner for the stated temporary use and/or structure agrees to waive any and all claims against and holds Leon County, its officials, employees and agents harmless from any and all accidents or incidents arising out of the actions related to the issuance of this temporary permit.

Property Owner Signature

Site Contact Person Signature

Property Owner Printed Name

Site Contact Person Printed Name

Office Use Only:

Date received by Leon County Emergency Medical Services: _____

Comments by EMS: _____

Approval by Leon County EMS: _____ Date: _____

Date received by Leon County Sheriff's Office: _____

Contact made with event coordinator: Yes No If yes, Date/Time: _____

By Whom: _____

Comments by LCSO: _____

Approval by LCSO: _____ Date: _____

Date received by Tallahassee Fire Department: _____

Comments by TFD: _____

Approval by TFD: _____ Date: _____

Date received by Leon County Environmental Health: _____

Comments by LCEH: _____

Approval by LCEH: _____ Date: _____

Final approval by DSEM: _____ Date: _____

Section II

Temporary Construction Staging Area Data Sheet

Note: This data sheet must be accompanied by a completed “Application for Building Permit and/or Single Family/Mobile Home/Environmental Management Permit,” including construction drawings which may require a seal by a design professional.

TEMPORARY CONSTRUCTION STAGING AREA SITE INFORMATION AND CHECKLIST						
<u>Applicant</u>						
Number of Applications during Calendar Year*:	1 st	2 nd	3 rd	4 th	Application Fee: \$210	
Date Application Submitted: _____						
Name of Applicant: _____						
Address: _____		City: _____		State: _____		Zip: _____
Phone: _____			Fax: _____			
Email: _____						
Primary On-site Contact Person: _____						
Address: _____		City: _____		State: _____		Zip: _____
Phone: _____			Fax: _____			
Temporary Construction Staging Area Location: _____						
			No.	Street		
Between: _____		and _____				
Cross Street			Cross Street			
Parcel Number: _____						
Zoning District: _____						
Type of temporary structure(s) to be built (check all that apply): <input type="checkbox"/> None <input type="checkbox"/> Office <input type="checkbox"/> Shed						
<input type="checkbox"/> Other: _____						
Briefly describe the nature of construction associated with the proposed staging area: _____						

* A temporary construction staging permit shall be valid for a period not to exceed 24 months.						
The following information must be included with application:						
<ul style="list-style-type: none"> Documentation identifying the construction contract information. Documentation from the property owner granting permission to use land/facilities for the activity, if applicable. Submittal of a scaled site drawing identifying the property boundaries (as shown on the Leon County Property Appraiser’s website) and the location of the proposed temporary use. The scaled site drawing shall provide the location of parking areas, tents/canopies, driveway access, portable restrooms, stages, etc. Documentation of a signed contract with a portable toilet company identifying dates and times of the event, number of restrooms provided, service frequency, driveway access, and removal date of the units. Submittal of an Environmental Management Permit Application. Documentation regarding bond analysis. 						
DURATION/HOURS OF OPERATION						
Dates of Activity:						
From _____		to _____		Hours of Operation: _____		
Dates of Set-up/Deconstruction:						
From _____		to _____		Hours of Operation: _____		
Note: Prior to the expiration of the temporary permit, the applicant shall return the site to the pre-development condition.						

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

The applicant/property owner for the stated temporary use and/or structure agrees to waive any and all claims against and holds Leon County, its officials, employees and agents harmless from any and all accidents or incidents arising out of the actions related to the issuance of this temporary permit.

Property Owner Signature

Site Contact Person Signature

Property Owner Printed Name

Site Contact Person Printed Name

Office Use Only:

Date received by Leon County Emergency Medical Services: _____

Comments by EMS: _____

Approval by Leon County EMS: _____ Date: _____

Date received by Leon County Sheriff's Office: _____

Contact made with event coordinator: Yes No If yes, Date/Time: _____

By Whom: _____

Comments by LCSO: _____

Approval by LCSO: _____ Date: _____

Date received by Tallahassee Fire Department: _____

Comments by TFD: _____

Approval by TFD: _____ Date: _____

Date received by Leon County Environmental Health: _____

Comments by LCEH: _____

Approval by LCEH: _____ Date: _____

Final approval by DSEM: _____ Date: _____

Section III
Temporary Special Event Data Sheet

Note: If temporary structures are proposed, this data sheet must be accompanied by a completed "Application for Building Permit and/or Single Family/Mobile Home/Environmental Management Permit," including construction drawings which may require a seal by a design professional.

TEMPORARY SPECIAL EVENT SITE INFORMATION AND CHECKLIST					
<u>Applicant</u>					
Number of Applications during Calendar Year*:	1 st	2 nd	3 rd	4 th	Application Fee: \$210
Date Application Submitted: _____					
Name of Applicant: _____					
Address: _____		City: _____		State: _____	Zip: _____
Phone: _____			Fax: _____		
Email: _____					
Primary On-site Contact Person: _____					
Address: _____		City: _____		State: _____	Zip: _____
Phone: _____			Fax: _____		
Name of Temporary Use Event: _____					
Description of Temporary Use Event: (additional sheet may be attached if necessary): _____					
Type of Entertainment (ex: music, sales, festival, religious, etc.): _____					
Temporary Use Location: _____					
Between: _____		and _____			
<small>No.</small>		<small>Street</small>		<small>Cross Street</small>	<small>Cross Street</small>
Parcel Number: _____					
Zoning District: _____					
* A request for a 15-day extension counts as an additional permit.					
<u>Temporary Structures:</u>					
Temporary Structures (check all that apply and specify number of each): <input type="checkbox"/> Tent _____ <input type="checkbox"/> Canopy _____					
<input type="checkbox"/> Stage _____ <input type="checkbox"/> None <input type="checkbox"/> Other/Number: _____					
Fixed structures exist on the property suitable for shelter during inclement weather: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Camping will be allowed on the venue property: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Wind load capacity of temporary structures (must meet FL Building Code requirements): _____					
Wind loads were determined by (manufacturer, supplier): _____					
Method of anchoring stages to the ground: _____					
Method of anchoring tents to the ground: _____					
Method of anchoring audio equipment to the ground: _____					
Method of marking/protecting generators and/or electrical cords: _____					
<u>Temporary Alcohol Sales (requires permit from DBPR):</u>					
Alcohol will: <input type="checkbox"/> be served at the venue <input type="checkbox"/> be served outside of the venue (<1,000 ft) <input type="checkbox"/> not be served at the venue					
Process for monitoring alcohol sales: _____					
<u>Attendance and Advertising:</u>					
Method(s) of advertising event (billboards, mail, social media, etc.): _____					
Was event advertised as alcohol-free: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Advertising radius: <input type="checkbox"/> Local (<50 mi.) <input type="checkbox"/> Regional (1+ counties) <input type="checkbox"/> Statewide <input type="checkbox"/> Multi-state <input type="checkbox"/> Other: _____					
Target Audience: _____					
Estimated age composition of audience (in % of total audience): <12 yrs. _____% 13-18 yrs _____% 19-25 yrs. _____%					
26-40 yrs. _____% 41-55 yrs. _____% 56 yrs. and above _____%					

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

Average hourly attendance: _____ Planned maximum attendance: _____
Legal capacity of venue: _____ Determined by (manufacturer/supplier): _____
Food will be provided and/or sold: Yes No Event gated and/or fenced: Yes No

Emergency Services:

Type of back-up public announcement system available during power failure or primary system malfunction: _____

Method of on-site communication by workers/organizers: _____

Person/entity responsible for medical care of entertainer(s): _____

Person/entity responsible for security of entertainer(s): _____

Protocol for event cancellation: _____

Protocol for handling suspicious or unattended packages: _____

Weather hazard notification strategy for outdoor or combined events: _____

Food and bar area, toilets, and entertainment readily accessible to persons with disabilities: Yes No

Venue exits accessible for persons with disabilities during an emergency without impeding the movements of others:

Yes No

Ponds, lakes, pools or other water hazards exist on the venue premises: Yes No

Venue is accessible to vehicles in all weather conditions: Yes No

Composition of service roads (paved, dirt, gravel, grass, etc.): _____

Amplified music or sound will be part of the event: Yes No

Compressed gas will be discharged as part of the event: Yes No

Aerial activities will be part of the event (airplanes, hot air balloons, etc.): Yes No

Name of company in charge of aerial events: _____

Address: _____
Street City State Zip

Phone: _____ Emergency Contact Number: _____

Email: _____

License Number (if applicable): _____

Pyrotechnics will be part of the event: Yes No

Name of company in charge of pyrotechnics: _____

Address: _____
Street City State Zip

Phone: _____ Emergency Contact Number: _____

Email: _____

License Number (if applicable): _____

A private company will be hired to provide (check all that apply): Security Crowd Control Parking None

Company Name: _____

Contact Person: _____

Address: _____
Street City State Zip

Phone: _____ Email: _____

Off-duty law enforcement officers will be hired to provide: Security Crowd Control Parking None

Agency Name: _____

Contact Person: _____

Address: _____
Street City State Zip

Phone: _____ Email: _____

Will officers be armed? Yes No

Note: One deputy will be assigned per 75-100 people in attendance. Regular pay is \$35 per hour with a 3 hour minimum. A supervisor will be assigned for every 4 deputies. Additional fees will be incurred for holiday events.

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

Street Closures:

Event will be a moving route (race, walk, etc.) along streets or sidewalks: Yes No

Streets or sidewalks will require closure for the event: Yes No

Street/sidewalk closure times: From _____ am/pm To _____ am/pm

Traffic routine/control devices to be used (must be FDOT approved): _____

Traffic routine/control devices usage times: From _____ am/pm To _____ am/pm

Traffic will be directed by (person/entity): _____

The following information must be included with application:

- Documentation addressing life/safety issues (flameproof certificates) and safety plan.
- Submittal of a scaled site plan drawing identifying the property boundaries. Please refer to page 4 of this packet for a complete list of requirements for the site plan drawing.
- Documentation of a signed contract with a portable toilet company identifying dates and times of the event, number of restrooms provided, service frequency, driveway access, and removal date of the units.
- Submittal of a Building Permit and/or Single Family/Mobile Home/Environmental Permit Application (B-1), if applicable.
- Documentation of a signed contract with a private company providing security, crowd control, or parking assistance, if applicable.
- Documentation providing contact information and directions to the proposed temporary special event site.
- All contractors' license numbers, if applicable.

DURATION/HOURS OF OPERATION

Dates of Use/Event:

From _____ to _____ Hours of Operation: _____

Dates of Set-up/Deconstruction:

From _____ to _____ Hours of Operation: _____

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

The applicant/property owner for the stated temporary use and/or structure agrees to waive any and all claims against and holds Leon County, its officials, employees and agents harmless from any and all accidents or incidents arising out of the actions related to the issuance of this temporary permit.

Property Owner Signature

Site Contact Person Signature

Property Owner Printed Name

Site Contact Person Printed Name

Office Use Only:

Date received by Leon County Emergency Medical Services: _____

Comments by EMS: _____

Approval by Leon County EMS: _____ Date: _____

Date received by Leon County Sheriff's Office: _____

Contact made with event coordinator: Yes No If yes, Date/Time: _____

By Whom: _____

Comments by LCSO: _____

Approval by LCSO: _____ Date: _____

Date received by Tallahassee Fire Department: _____

Comments by TFD: _____

Approval by TFD: _____ Date: _____

Date received by Leon County Environmental Health: _____

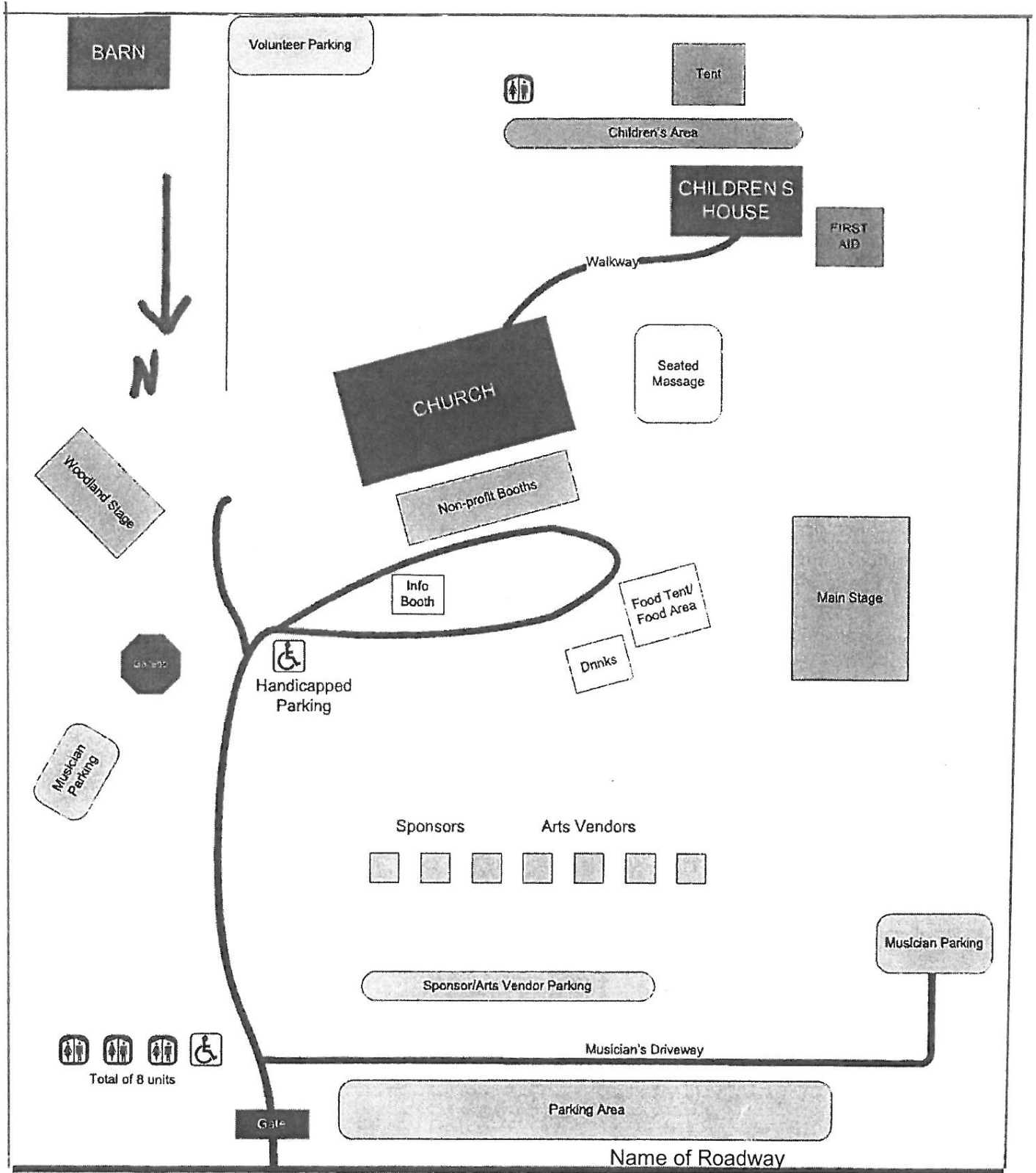
Comments by LCEH: _____

Approval by LCEH: _____ Date: _____

Final approval by DSEM: _____ Date: _____

TEMPORARY USES/CONSTRUCTION STAGING AREAS/SPECIAL EVENTS

SAMPLE SITE PLAN



ADDRESS

Name of Event

Map not drawn to scale