

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 091118

PERMIT ISSUED OCT 15 2009 CITY OF PORTLAND

This is to certify that City Of Portland/Taylor Rentals Party Plus has permission to Erect 20' x 30' canopy on October 17, 2009 @ 6:00am and break down on October 17, 2009 @ 3:00pm AT 0 Cutter St CB# 001 A003001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise enclosed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. CAPT. R. [Signature] Health Dept. Appeal Board Other Department Name

[Signature] 10/14/09 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-1118	Issue Date:	CBL: 001 A003001
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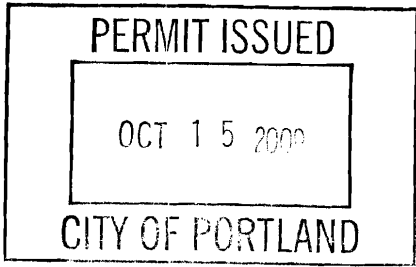
Location of Construction: 0 Cutter St	Owner Name: City Of Portland	Owner Address: 389 Congress St	Phone:
Business Name:	Contractor Name: Taylor Rentals/Party Plus	Contractor Address: 8 Commercial Street Biddeford	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	Zone: ROS

Past Use: Park / Eastern Promenade	Proposed Use: Park / Erect 20' x 30' canopy on October 17, 2009 @6:00am and breakdown on October 17, 2009 @ 3:00pm.	Permit Fee:	Cost of Work: \$0.00	CEO District: 1
		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>* See Condition</i>	INSPECTION: Use Group: <input checked="" type="checkbox"/> Type: <i>Tent</i> <i>Terry Strout</i>	

Proposed Project Description: Erect 20' x 30' canopy on October 17, 2009 @ 6:00am and breakdown on October 17, 2009 @3:00pm.	Signature: <i>KG</i>	Signature: <i>[Signature]</i>
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:		Date:

Permit Taken By: gg	Date Applied For: 10/07/2009	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>10/11/09</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date:	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date:
	Signature: <i>[Signature]</i>		



CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-1118	Date Applied For: 10/07/2009	CBL: 001 A003001
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Location of Construction: 0 Cutter St	Owner Name: City Of Portland	Owner Address: 389 Congress St	Phone:
Business Name:	Contractor Name: Taylor Rentals/Party Plus	Contractor Address: 8 Commercial Street Biddeford	Phone
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Proposed Use: Park / Erect 20' x 30' canopy on October 17, 2009 @6:00am and breakdown on October 17, 2009 @ 3:00pm.	Proposed Project Description: Erect 20' x 30' canopy on October 17, 2009 @ 6:00am and breakdown on October 17, 2009 @3:00pm.
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 10/07/2009

Note: **Ok to Issue:**

1) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved **Reviewer:** **Approval Date:**

Note: **Ok to Issue:**

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Capt Keith Gautreau **Approval Date:** 10/13/2009

Note: **Ok to Issue:**

1) Tents shall have an approved fire resistant rating, Maintain 10' between stake lines, No smoking or open flame within 10', Provide at least 1 2 A 10 BC extinguisher.



Tent/Canopy or Temporary Event Staging Permit Application

If you or the property owner owes real estate or personal property taxes or user charges on any property within the City, payment arrangements must be made before permits of any kind are accepted.

Location/Address/Park of Installation: <u>Eastern Promenade, Middle Lot, Cutter St.</u>		
Date of Set up/Event <u>Carib Bay Cycle Race 10/17 6:00 AM</u>	Date of Breakdown/ End of Event <u>10/17 3:00 PM</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>001 A 003</u>	Property Owner: <u>City of Portland</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Pat Hackleman 641-5749</u> <u>31 Allen St. Portland</u>	Fee: \$30.00 <u>check # 379</u>

RECEIVED

OCT 7 2009

The permit fee and the following items must be completed and submitted along with this application in order to receive a permit.

- Certificate of Flammability **Dept. of Building Inspections**
- Letter of approval from property **City of Portland Maine**
If the City is owner, attach a completed copy of Application to Use City Parks & Public Space from Parks & Recreation (756-8275).
- Company name of installer (contact info).
- Plot Plan showing the following:
Tent/Canopy or temporary event staging locations, including dimensions, exits and entrances of proposed and existing, parking and existing building locations. If this is temporary staging, you will need to include product information. (Applicant may call Parks & Recreation for maps of Portland's Parks @ 756-8275).
- If the City is the property owner, Certificate of Insurance listing the City as additional insured. Minimum amount of coverage is \$400,000.00

20' X 30'
Canopy with no walls

Who should we contact when permit is ready: Pat Hackleman
Address: 31 Allen St, Portland ME 04103 Telephone: 641-5749 *x - call*

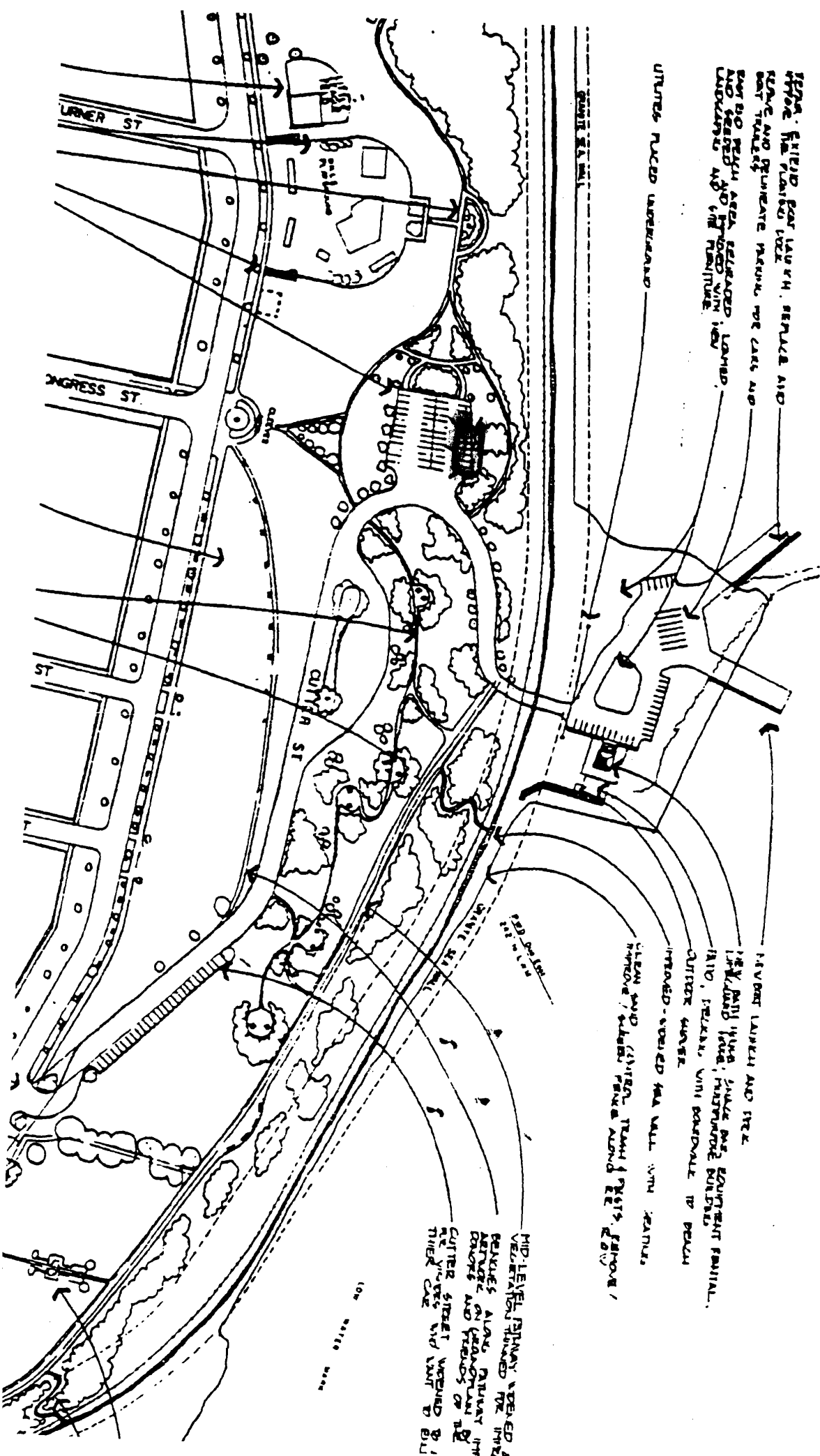
Please submit all of the information outlined in the Tent/Canopy and Event Staging Permit Application as one package. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8703.

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official's authorized representative shall have the authority to enter all areas covered by this permit at any reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant:	Date: <u>10/7/09</u>
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This is not a permit; you may not commence ANY work until the permit is issued.



IDEAS: FRIENDLY FOR LAUNCH, SERVICE AND
 FURNITURE AND PLANTING FOR
 BENT FORGET
 EAST END BEACH AREA RELAXED LAMBD
 AND SEATED AND FURNISHED WITH
 LANDSCAPING AND THE FURNITURE

UTURNED PLACED LANDSCAPING

HAVERTY LAUREN AND TREE
 THE WALL WITH PLANTS AND FURNITURE
 LANDSCAPING WITH PLANTS AND FURNITURE
 CURTAIN WALLS WITH BARRICADE TO BEACH
 IMPROVED - STONE WALL WITH PLANTS
 CLEAN AND SIMPLE - TRAMP'S FURNITURE /
 LANDSCAPING WITH PLANTS AND FURNITURE

MID LEVEL PARKWAY: WEAVED A
 VEGETATION THROUGH THE
 PARKING ALONG PARKWAY WITH
 PLANTS ON VEGETATION WITH
 CURTAIN WALLS AND FRIENDS OF THE
 CUTTER STREET WEAVED THE
 THE CUTTER STREET AND WALL TO BE

East End Beach Area / Cutler St. / Parking Lots

- 20x30-
- Freestanding without walls -
- Front secured by vehicles -
- Back secured by stakes -

IMPORTANT DOCUMENT

Certificate of Flame Resistance

REGISTERED
APPLICATION
NUMBER

F121.4



ISSUED BY



EVANSVILLE, INDIANA 47711

Date of Manufacture 4/12/99
Order Number 214875

MANUFACTURERS OF THE FINISHED
TENT PRODUCTS DESCRIBED HEREIN

This is to certify that the materials described have been flame-retardant treated (or are inherently nonflammable) and were supplied to:

FOUR SEASONS INC.
DBA: TAYLOR RENTAL CENTER
RTE 111 BUSINESS PARK
BIDDEFORD ME 04005

**Certification is hereby made that:
The articles described on this Certificate have been treated with a flame-retardant approved chemical and that the application of said chemical was done in conformance with California Fire Marshal Code, equal to exceeds NFPA 701, CPAI 84, ULC 109.
The method of the FR chemical application is:**

Serial #:	8115900	(0002)
Description of item certified:	A P CPY TOP 20W X 30 VL W W	

**Flame Retardant Process Used Will Not Be Removed By
Washing And Is Effective For The Life Of The Fabric**

JOHN BOYLE & CO
STATESVILLE, NC
Name of Applicator of Flame Resistant Finish

Signed: *James D. Howell*
TENT DEPARTMENT—ANCHOR INDUSTRIES INC.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
06/18/2009

PRODUCER
PHILADELPHIA INSURANCE COMPANIES
3939 BELT LINE ROAD SUITE 660
ADDISON, TEXAS 75001

Serial # 111122

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC#

INSURED
USA CYCLING, INC # 1925
CASCO BAY SPORTS
51 ALTON STREET
PORTLAND, ME 04103

INSURER A: PHILADELPHIA INSURANCE COMPANIES
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

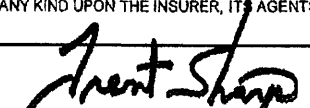
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	PHPK369255	12/31/08	12/31/09	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$
		GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY	\$ 1,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE	\$ 3,000,000
						PRODUCTS - COMP/OP AGG	\$ 1,000,000
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/> HIRED AUTOS					
		<input type="checkbox"/> NON-OWNED AUTOS					
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input type="checkbox"/> RETENTION \$					\$
		WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				EL EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				EL DISEASE - EA EMPLOYEE	\$
		OTHER				EL DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 CERTIFICATE HOLDER IS AN ADDITIONAL INSURED WITH RESPECTS TO EVENT ID # 2009-1925 CASCO BAY SPORTS PRESENTS CASCO BAY CYCLOCROSS IN PORTLAND, ME ON 10-17-09, BUT ONLY WITH RESPECTS TO THE LIABILITY ARISING OUT OF THE NAMED INSURED'S OPERATIONS.

CERTIFICATE HOLDER

 CITY OF PORTLAND
 134 CONGRESS ST
 PORTLAND, ME 04101

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE




CITY OF PORTLAND, RECREATION and FACILITIES MANAGEMENT
PUBLIC PARK & SPACE APPLICATION (3 pages)
 134 Congress St. ~ Suite 2 ~ Portland ~ ME ~ 04101
 207-756-8275 ~ Fax 207-756-8279
 tvn@portlandmaine.gov

**For uses of city property, there are typically: 1. fees charged for use of the area
 2. a security deposit required 3. insurance required
 (There may be fees due and applications required from other City Departments)**

TODAY'S DATE	4/2/2009	ORGANIZATION NAME	Casco Bay Sports				
ORGANIZATION ADDRESS	51 Alton St	CITY	Portland	STATE	ME	ZIP	04103
CONTACT NAME(S)	Pat Hackleman		TITLE Sports Director				
HOME #		WORK 221-0203	CELL 641-5749	FAX			
EMAIL	pat@cascobaysports.com		EMAIL				

PARK AREA OR PUBLIC SPACE REQUESTED	Eastern Promenade				
EVENT DAY & DATE(S)	October 17 th , 2009	RAIN DAY & DATE(S)	n/a		
EVENT START TIME (i.e. set-up start time)	8:00	EVENT END TIME (i.e. when event cleanup is complete)	3:00	ACTUAL START & END TIME OF EVENT	9:00-2:00

EVENT NAME		EXPECTED ATTENDANCE
1 st Annual Casco Bay Cyclocross Race		150 Participants
DESCRIPTION OF EVENT: Please be specific regarding area of public space/park and describe Event in detail. If submitting a request for a Road Race (other than around Back Cove and using Back Cove Pathway for the route), please include a detailed MAP of the COURSE (as this will need to be approved by City Departments and the Manager's Office). Map and Plan Attached		
IS THERE A REGISTRATION FEE?	Yes	
IF YES, HOW MUCH?	FEE	\$ 25 per cyclist
	STUDENT FEE	\$

WHAT WILL BE THE ANTICIPATED NEED FOR PARKING AND WHAT IS YOUR PARKING PLAN? See attached.

PLEASE CHECK OFF AND ANSWER:

PLEASE SEE ATTACHED FEE SCHEDULE / DEPT. INFORMATION IF YOU ANSWER YES

	X-YES	X-NO	X-NOT SURE
* Are you setting up a canopy(s) ? (canopy is 10x10 size) How many: Canopies in large areas (Monument Square, Deering Oaks, Payson Park, Lincoln Park, Preble Street Grass Area), do not need Recreation's review. For smaller parks and squares (such as Congress Square, Tommy's Park, Post Office Park) review and permission is needed from Recreation.		X	
* Do you wish to set up a tent(s) ? (a canopy or tent larger than 10x10 needs to be approved by Recreation and a Tent Permit issued from Inspections Division; please call Inspections for information on their application process / PLEASE give them at least a 2-week notice). Recreation will contact Inspections once the tent location is approved so that the Tent Permit Application may go forward. State size(s): Exact Location(s) of Tent Placement Requested: Middle Parking Lot Cutter St In order to drive tent stakes into the ground, DIG SAFE must be contacted: 888-344-7233.	X		