

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04103 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: **04 0581** Date: **05/21/04** Fee: **015 000.00**

Location of Construction: 100 Congress St	Owner Name: Fred J Roger	Owner Address: 33 Church St	Phone: 207 874 8703
Business Name:	Contractor Name:	Contractor Address:	Phone:
LES/CO/Buyer's Name:	Phone:	Permit Type: Outdoor Seating	Zone: B1

Part Use: RESTAURANT	Proposed Use: restaurant w/outdoor seat ng, 16 chairs, 4 tables	Permit Fee:	Cost of Work: \$0.00	PERM-0301: 1
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Proposed Project Description: outdoor seating 16 chairs, 4 tables	FIRE DEPT: <input checked="" type="checkbox"/> Inspected <input type="checkbox"/> Insured INSPECTOR USE: Use Class: 213 Signature: [Signature] Date: 5/21/04
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APPROPRIATE AGENCIES TO BE NOTIFIED BY APPLICANT

Action: Approved Approved w/Conditions Rejected

Signature: _____ Date: _____

Permit Taken By: Hobson	Date Applied For: 05/21/04	Zoning Approval
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1. This permit application does not preclude the Applicant(s) from making applicable State and Federal Rules. 2. Zoning permits do not include plumbing, septa or electrical work. 3. 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 District <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major Street: SEA Date: 5/21/04	Zoning Approval <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Encroachment <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Permit Requirements <input checked="" type="checkbox"/> No Additional Requirements <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Design <input type="checkbox"/> Agreement <input type="checkbox"/> Approval of Neighbors <input type="checkbox"/> Denial
	Signature: [Signature] Date: 5/21/04	Signature: [Signature] Date: 5/21/04	

CERTIFICATION

I hereby certify that I am the owner of (or all 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 a authorized agent and I agree to conform to all applicable laws of the 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 such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application and
Notes, if Any
Attached

CONSTRUCTION

PERMIT ISSUED
Permit Number: C40581
7/27/04
CITY OF PORTLAND



This is to certify that David J. Bejer
has permission to construct work on the premises
AT 100 Congress St Portland, Oregon

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 record must be filed and when permit is issued before the building is started, there must be a notice of recordation. **HEAVY 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. [Signature]
Health Dept. _____
Appeal Board _____
Other [Signature]

[Signature]
[Illegible text]

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

189 Congress Street, 04101 Tel: (207) 874-8706 Fax: (207) 874-8716

Permit No: 0-058-	Date Applied For: 05/11/2004	CEI: 216 D001251
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Location of Construction: 103 Congress St	Owner Name: Trent L. Jager	Owner Address: 55 Church St	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
License/Inspector Name:	Phone:	Permit Type: Outdoor Seating	

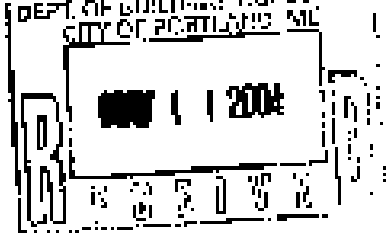
Proposed Use: restaurant w/outdoor seating: 16 chairs, 4 tables	Proposed Project Description: outdoor seating: 16 chairs, 4 tables
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Dept: Zoning Status: Approved with Conditions Reviewer: Marcus Schmalckal Approval Date: 05/10/2004
 Note: Ok to Issue:
 1) All outdoor seating is subject to adjustment and timing from the City's traffic engineer who ensures that the City sidewalk is open and cleared for pedestrian use.
 2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting the work.

Dept: Build up Status: Approved Reviewer: Mike Nugent Approval Date: 05/10/2004
 Note: Ok to Issue:

Dept: Fire Status: Open Reviewer: Lt. MacDougal Approval Date: 05/10/2004
 Note: Ok to Issue:

04-0581



Outdoor Seating 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 of Construction: 100 Congress Street

Total Square Footage of Proposed Structure _____ Square Footage of Lot .093 Acres

Tax Assessor's Chart, Block & Lot Number: Chart 16 Block D Lot 1
Owner: Roger Triettel
Telephone: 716 679 7416

Lessee/Buyer's Name (If Applicable): Ferenda Inc./100 Congress
Owner's/Purchaser/Lessee Address: 100 Congress St Portland
Cost of Work: \$ 0 Fee: \$25.00

Current use: 1 Sidewalk
If the location is currently vacant, what was prior use: _____
Approximately how long has it been vacant: _____
Proposed use: To add seasonal sidewalk dining
Project description: outside seating
How many chairs 16 How many tables 4

Contractor's Name, Address & Telephone: _____
Applicant's Name, Address & Telephone: Stephen Fernald 20 1-715-7772
Who should we contact when the permit is ready: above
Telephone: _____
If you would like the permit mailed, what mailing address should we use: _____

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED.
AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

Certification

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 continue to comply with the terms of my application. I warrant that payment for work described in the application is owed. I certify that the City's Official authorized representative certifies the subject to enter all areas covered by the permit of any reasonable hour to enforce the provisions of the codes applicable to the permit.

Signature of applicant: Stephen Fernald Date: 5/10/04

ok 4/5/04



C.B.N.: _____

CONDITIONS FOR SIDEWALK OCCUPANCY PERMIT

Written consent and agreement relating to occupancy of the City of Portland sidewalk on the front, side, and/or rear of the building at the stated location: 100 Congress Street in Portland, Maine, by the owner of the establishment being Tezeno Inc., doing business as 100 Congress, hereby, to the fullest extent permitted by law, shall defend, indemnify and hold harmless the City of Portland, its officers and employees, from and against all claims, damages, losses and expenses, just or unjust, including, but not limited to costs of defense and attorney's fees, arising out of the establishment's occupancy of the sidewalk, provided that any such claims, damage, loss or expense (1) is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of tangible property including the loss of use herefrom, and (2) is caused in whole or in part by any negligent act or omission of the establishment, anyone directly or indirectly employed by it, or anyone for whose act it may be liable.

Signed and acknowledged: Stephen M. Dornick
Establishment owner

Date: 5/10/04

1601

AGORD CERTIFICATE OF LIABILITY INSURANCE

DATE PAID/ISSUED
05/11/2004

PRODUCER (603)772-4761 FAX (603)772-3246
 Foy Insurance Group - Exeter
 64 Portsmouth Ave
 PO Box 1070
 Exeter, NH 03833
 insured Tezenda Inc.
 100 Congress
 100 Congress St.
 Portland, ME 04101

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	NAME #
NUMBER: One Season	
INSURER #	
PRODUCER #	
AGENT #	
BUSINESS #	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ADDED 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.

INSURANCE TYPE/CLASS	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (OR RENEWAL)	POLICY EXPIRES (OR RENEWAL DATE)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> COORD. GEN. & AUTOMOBILE LIABILITY <input type="checkbox"/> POLICY <input type="checkbox"/> AUTO <input type="checkbox"/> LIAB.	PA02911000063	07/04/2003	07/03/2004	EACH OCCURRENCE \$ 2,000,000 DAMAGE SUSTAINED (PER OCCURRENCE) \$ 500,000 ALL OTHER LIABILITY \$ 5,000 PERSONAL & AUTO INCL. \$ 2,000,000 COORDINATED AGGREGATE \$ 2,000,000 PRODUCTS - CONSUMER AGG. \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SUMMER/LEASER AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				
	BOAT LIABILITY <input type="checkbox"/> BOAT AUTO BOAT LIABILITY <input type="checkbox"/> CLAIMS <input type="checkbox"/> CLAIMS MADE BOAT LIABILITY <input type="checkbox"/> RESTRICTIONS:				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROFESSIONAL LIABILITY WITHOUT AN EMPLOYER/OWNER POLICY NUMBER (See attached state SPECIAL FORMS for details) OTHER:				ALL WORKERS COMPENSATION \$ ALL BUSINESS - BODILY INJURY \$ ALL DAMAGE - PROPERTY \$

RECORDS OF OPERATIONS / LOCATIONS / VEHICLES / ETC. ADDED BY INSURED OR BY SPECIAL PROVISION

City of Portland NE added as an additional insured with respects to the liability he insured is having 4 tables outside with a total of 16 seats.

CERTIFICATE HOLDER

1651

City of Portland NE
 ATT Jodina Adams
 Portland, ME

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE CANCELLATION NOTICE SHALL BE MAILED TO THE POLICY NUMBER WITHIN 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER SHALL BE THE BEST. NOTIFICATION TO MAIL SUCH NOTICE SHALL BECOME A CANCELLATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 Jeffrey Foy

AGORD 25 (004106) FAX: (207)874 3716

SAGORD CORPORATION 1998

Tezenda Inc. / 100 Congress
100 Congress St 775-7772

Drawing for sidewalk seating permit
5/11/04

