

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING DEPARTMENT

PERMIT

Permit Number: 030520

PERMIT ISSUED

This is to certify that K & L Llc (Michaela's Restaurant)

has permission to Outdoor seating for 24

MAY 23 2003

AT 18 Monument Sq

027 F005001

CITY OF PORTLAND

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 when permission is procured before this building project is started or closed-in. 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. **PERMIT ISSUED**

Health Dept. _____

Appeal Board _____

Other 3 2003
Department Name

[Signature]
Director - Building & Inspection Services

CITY OF PORTLAND

PENALTY FOR REMOVING THIS CARD

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 03-0520	Issue Date: MAY 23 2003	CBL: 027 F005001
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Location of Construction: 18 Monument Sq	Owner Name: K & L Llc (Michaela's Restaurant)	Owner Address: 970 Baxter Blvd CITY OF PORTLAND	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B3

Past Use: Michaela's Restaurant	Proposed Use: Michaela's Restaurant with outdoor seating	Permit Fee: \$75.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Outdoor seating for 24		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: U Type: outsid seating BOCA 99	
		Signature: _____		
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: kwd	Date Applied For: 05/15/2003	Zoning Approval		
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1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic 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 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"/>	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	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: OK 5/20/03	Date: _____	Date: _____

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: 03-0520	Date Applied For: 05/15/2003	CBL: 027 F005001
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Location of Construction: 18 Monument Sq	Owner Name: K & L Llc (Michaela's Restaurant)	Owner Address: 970 Baxter Blvd	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	

Proposed Use: Michaela's Restaurant with outdoor seating	Proposed Project Description: Outdoor seating for 24
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Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 05/20/2003
Note:	Ok to Issue: <input checked="" type="checkbox"/>		
1) All outdoor seating is subject to adjustment at any time from the City's traffic engineer who ensures that the City sidewalk is open and cleared for pedestrian use.			
Dept: Building	Status: Pending	Reviewer:	Approval Date:
Note:	Ok to Issue: <input type="checkbox"/>		

03-0520

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: 18 Monument Square

Total Square Footage of Proposed Structure: outside Seating 324 Sq feet
Square Footage of Lot: outside Seating 324 Sq feet

Tax Assessor's Chart, Block & Lot Number: Chart# 027 Block# F Lot# 005
Owner: K+L, LLC 18 Monument Sq Portland, ME 04101
Telephone#: 780 1818

Lessee/Buyer's Name (If Applicable): Devon Enterprises d/b/a Michael's
Owner's/Purchaser/Lessee Address: 18 Monument Sq Portland, ME
Cost Of Work: \$ Fee: \$75.00

Current use: restaurant
If the location is currently vacant, what was prior use: _____
Approximately how long has it been vacant: _____
Proposed use: _____
Project description: outside seating
How many chairs 24 How many tables 6
B3

Contractor's Name, Address & Telephone:
Applicants Name, Address & Telephone: Devon Enterprises, LLC 18 Monument Sq 780 1818
Who should we contact when the permit is ready: Chris Spann
Telephone: 780 1818 → call
If you would like the permit mailed, what mailing address should we use: We will pick-up when called.

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 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: 5/13/03



C/B/L: _____

CONDITIONS FOR SIDEWALK OCCUPANCY PERMIT

Written consent and agreement relating to occupancy of the City of Portland sidewalk in the front, side, and or rear of the building at the stated location: 18 Monument Square; in Portland, Maine, by the owner of the establishment being: Devon Enterprises, LLC, doing business as: Michigela's, 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 therefrom, 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.

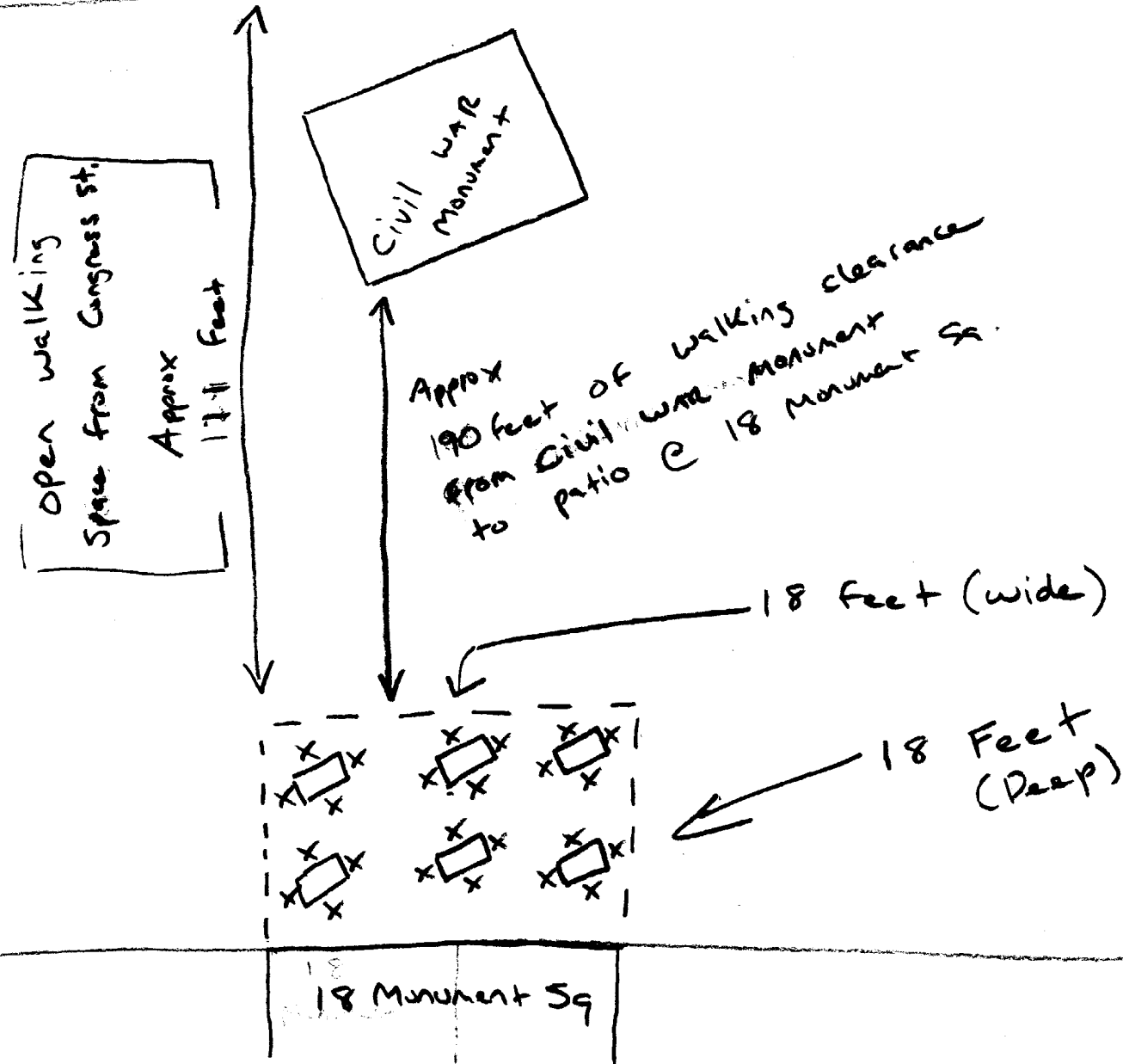
Signed and acknowledged: _____
Establishment owner

Date: 5/14/03

Drawing for Outside Patio
Michela's Restaurant
18 Monument Sq

Elm St

Congress Street





Details of outside patio for Michaela's
18 Monument Square
Portland

Patio dining to consist of 6 teak wood tables and 24 teak wood chairs. Each table would have a 6' folding umbrella attached to a 75lbs. cement base. All tables and chairs would be taken inside at the close of every evening. Entire patio space would be enclosed by stanchions and chains/ropes. Hours of operation would be 11:30 am until 11:00 pm Monday thru Saturday. Michaela's currently has a city of Portland class 1 FSE license.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
10/21/02

PRODUCER

Knapp, Schenck & Company
P.O. Box 1310
Boston MA 02205
(617) 742-3366

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.

INSURED

Devon Enterprises, LLC.
dba Michael's & Mile High
Cakes, 18 Monument Square
Portland, ME 04101

COMPANIES AFFORDING COVERAGE	
COMPANY	A First Specialty
COMPANY	B
COMPANY	C
COMPANY	D

COVERAGES
THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	CPP88566	8/18/02	6/18/03	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS-COMP/OP AGG \$ 1,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				WC STAT: OTH- IQR: LIMITS: ER EL EACH ACCIDENT \$ EL DISEASE-POLICY LIMIT \$ EL DISEASE-EA EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Portland Public Market
Portland, ME 04101

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



CITY OF PORTLAND, MAINE
 Department of Building Inspections

Nov 15 2003

Received from Devon Enterprises

Location of Work 15 Commercial St.

Cost of Construction \$ _____

Permit Fee \$ 1500

Building (TL) _____ Plumbing (15) _____ Electrical (12) _____ Site Plan (U2) _____

Other Trade Fees

CBL: 027 Fees

Check #: 9089 Total Collected \$ 1500

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy
 VEI 11 MW - Office Room

Sheryl