



Permitting and Inspections Department
Michael A. Russell, MS, Director

2017-00610

Outdoor Dining Permit Application

Please circle all that apply:

New Application? (Yes/No) (No)
 Renewal? (Yes) → If yes, are there any changes? (Yes/No)
 Private Property? (Yes)
 Historic District? (Yes)
 Liquor License Required? (Yes) Permitting and Inspections Director Signature _____
 OR Pending City Council Date _____ (D/M/Y)

Location Name: <u>Shays Grill Pub</u>	Chart	Block	Lot#
Address: <u>18 Monument Square</u> <u>04101</u>			

Owner Name: <u>Brian Braerman</u> Phone #: <u>207-233-4658</u> Email: <u>info@shaysgrillpub.com</u>	Total Square Footage of Outdoor Dining Area: ¹ Length: (<u>14</u> ") x Width (<u>15</u> ") = <u>210</u> sq ft
---	---

Applicant must be owner or lessee. Name: <u>Brian Braerman</u> Address: <u>18 Monument Square</u> City: <u>Portland</u> State & Zip: <u>ME 04101</u> E-Mail: <u>info@shaysgrillpub.com</u>	Please pay before the permit can be issued. \$125 (One-time Private Property fee) or \$80 (Annual Public Fee) + Total Sq. Ft.: <u>210</u> x (\$2) or (\$6 in public parks) = Total Fee of \$ <u>500</u>
---	---

Current use: Restaurant Business name: Shays Grill Pub
 How many chairs? 20 How many tables? 5
 Please circle one of the following: Alcohol is served = (Yes).

Who should we contact?
 Name: Brian Braerman
 Phone: 207-233-4658
 Address: 18 Monument Square E Mail: info@shaysgrillpub.com

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. For further information, please visit www.portlandmaine.gov, email permits@portlandmaine.gov, call 874-8703 or stop by Room 315, City Hall. Applications and renewals are reviewed annually and must be submitted by June 1.

Signature of Applicant: [Signature] Date: 4/27/17

¹ The total dining area square footage shall equal no more than 10% of park space without Parks, Recreation and Facilities waiver. Contact Sally DeLuca, Director, @ 207-808-5400 for waiver.



Permitting and Inspections Department
Michael A. Russell, MS, Director

- All outdoor dining components shall be removed before snowfall and while any snow or ice exists within four feet of the outdoor dining area. The City will not be responsible for damage to any property that is not removed prior to sidewalk maintenance.
- Outdoor dining areas must meet ADA regulations and accessible seating is required.
- Adjacent on-street parking requires Parking Office review and Building Authority approval.

W We fully understand that the City of Portland, its agents, officers and employees accept no responsibility and will not be liable for any injury, harm or damage to my/our person or property arising out of the establishment's occupancy of the sidewalk or park space. To the fullest extent permitted by law, I/We do hereby agree to assume all risk of injury, harm or damage to my/our person or property (including but not limited to all risk of injury, harm or damage to my/our property cause by the negligence of the City of Portland, its agents, officers or employees) arising out of the establishment's occupancy of the sidewalk or park space. I/We hereby agree, to the fullest extent permitted by law, to defend, indemnify and hold harmless the City of Portland, its agents, 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 or park space, 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 there from, 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: _____

Date: _____

Printed name: _____

Establishment: _____

Location: _____



Permitting and Inspections Department
Michael A. Russell, MS, Director


Electronic Signature and Fee Payment Confirmation


This is a legal document and your electronic signature is considered a legal signature per Maine state law. You will receive an e-mailed invoice from our office which signifies that your electronic permit application has been received and is ready for payment. Please pay by one of the following:

- Electronic check or credit card: portlandmaine.gov/payyourpermit
- Over the phone at (207) 874-8703.
- Drop off to Room 315, City Hall.
- Mail to:

City of Portland
Permitting and Inspections Department
389 Congress Street, Room 315
Portland, Maine 04101

By signing below, I understand the review process starts once my payment has been received. After all approvals have been completed, my permit will be issued via e-mail. Outdoor dining may not commence until permit is received.

Applicant Signature:  Date: 4/27/17

I have provided electronic copies and sent them on:  Date: 4/27/17

NOTE: All electronic paperwork must be delivered to permitting@portlandmaine.gov or on a thumb drive.