

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

## BUILDING INSPECTION

### PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 080369  
**PERMIT ISSUED**  
APR 25 2008  
CITY OF PORTLAND

This is to certify that MCCURTAIN BRADLEY  
has permission to Outside seating 10'x12' -4 tables - 12 chairs  
AT 16 MONUMENT SQ 027 F006001

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 procured before this building or part thereof is altered or closed-in.  
**48 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name

*Dennis Berube* 4/23/08  
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

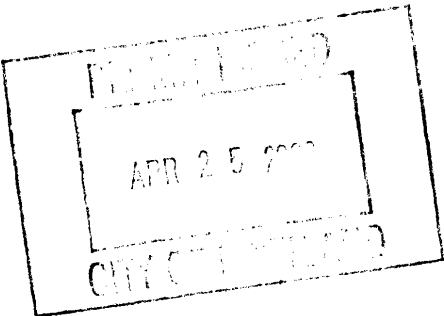
Permit No: 08-0369	Issue Date:	CBL: 027 F006001
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Location of Construction: 16 MONUMENT SQ	Owner Name: MCCURTAIN BRADLEY C	Owner Address: 15 MONUMENT SQ	Phone: 775-0800
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B-3

Past Use: Commercial - Restaurant/Henry VII.	Proposed Use: Commercial - Restaurant/Henry VII. - Outside seating 10'x12' -4 tables - 12 chairs	Permit Fee: \$320.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Outside seating 10'x12' -4 tables - 12 chairs		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: <i>Outdoor Dining</i>	
		Signature: <i>JMB 4/23/08</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: Imd	Date Applied For: 04/22/2008	<b>Zoning Approval</b>		
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p><b>Special Zone or Reviews</b></p> <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>with conditions 4/22/08</i>	<p><b>Zoning Appeal</b></p> <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: _____	<p><b>Historic Preservation</b></p> <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: _____
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**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

<b>Permit No:</b> 08-0369	<b>Date Applied For:</b> 04/22/2008	<b>CBL:</b> 027 F006001
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<b>Location of Construction:</b> 16 MONUMENT SQ	<b>Owner Name:</b> MCCURTAIN BRADLEY C	<b>Owner Address:</b> 15 MONUMENT SQ	<b>Phone:</b> ( ) 775-0800
<b>Business Name:</b>	<b>Contractor Name:</b>	<b>Contractor Address:</b>	<b>Phone:</b>
<b>Lessee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b> Outdoor Seating	

<b>Proposed Use:</b> Commercial - Restaurant/Henry VII. - Outside seating 10'x12' -4 tables - 12 chairs	<b>Proposed Project Description:</b> Outside seating 10'x12' -4 tables - 12 chairs
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 04/22/2008
<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		
<ol style="list-style-type: none"> <li>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.</li> <li>2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.</li> </ol>			
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 04/23/2008
<b>Note:</b>	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>		
<ol style="list-style-type: none"> <li>1) The outside dining permit is approved for the area delineated at the inspection and stated on the permit, and must be kept on site. THIS PERMIT MUST BE RENEWED ANNUALLY</li> <li>2) This permit approves outside seating only. Any food, alcohol or entertainment in this space requires licensing approvals from the City Clerk.</li> <li>3) The tables and chairs must not block any means of egress of any building.</li> </ol>			

<b>Comments:</b> 4/22/2008-mes: 4/22/08 given back to front staff as required under the new guidelines
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# Outdoor Dining 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 Outdoor Seating: <u>15 Monument Sq</u>		
Total Square Footage of Proposed Seating Area <sup>1</sup> <u>120sf</u>		Square Footage of Lot <u>Monument Square</u>
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Owner: <u>Brad McCorfain</u>	Telephone: <u>207-775-0800</u>
Lessee/Buyer's Name (If Applicable) <u>Alice Olcott</u> <u>Henry VIII's</u>	Applicant * <b>must be owner or Lessee</b> Name <u>Alice Olcott</u> <u>Henry VIII</u> Address <u>48 Pocatowas Rd</u> <u>Kittery Point, ME</u> City, State & Zip <u>03905</u>	Annual Fee: <u>\$80</u> Sq Ft Fee: <u>\$ 240.-</u> Total Fee: <u>\$ 320.-</u>
Current use: <u>Nothing</u>		
Business name: <u>Henry VIII</u>		
Seating area dimensions: <u>10 x 12 approx</u>		
How many chairs? <u>20</u> How many tables? <u>3 or 4</u>		
Alcohol to be served outside? circle one : YES <input type="radio"/> <b>NO</b> <input checked="" type="radio"/>		
Who should we contact for the pre-inspection: <u>Leon Sawson, Mgr.</u>		
Mailing address: <u>Henry VIII</u> <u>15 Monument Sq</u> Phone: <u>780-8889</u> <u>Portland 04101</u>		

Please submit all of the information outlined in the Outdoor Dining Application Checklist. 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](http://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.

A. Olcott  
Signature of Applicant

4/11/08  
Date

**This is not a permit; you may not commence ANY work until the permit is issued.**

<sup>1</sup> In no instance shall the total square footage of dining area equal more than 10% of park space, unless the applicant receives a waiver from the Director of Parks and Recreation or his or her designee.



# OUTDOOR DINING PERMIT CHECKLIST

Permits are required for expanding food service establishments to the outside on City Property. The annual fee is \$80.00 plus \$2.00 per square foot of dining area on streets, sidewalks or other public ways and \$80.00 plus \$6.00 per square foot of dining area in city parks. Outdoor dining is permitted year round under the permit; however, furniture must be removed in inclement weather to allow for sidewalk snow removal. **The permit must be renewed each year.**

All of the following information is required and must be submitted. You will also be required to fill out an Outdoor Dining Permit Application.

## **A plot plan is required and must include:**

- ? A drawing of the lot, where the building sits on the lot along with the lot and building dimensions
- ? The dimensional setback from the sidewalk to the building
- ? The location of the street, and if it's a corner lot, the intersecting streets
- ? The sidewalk along with its width and curbing location
- ? The location of the table and chair placement, including dimensions  
(NOTE: there must be a minimum of four feet of open sidewalk from the outer boundary of the seating area to the curb, and a minimum of five feet on corners, and egress from the building must be maintained free of obstruction per the building code and NFPA Life Safety Code).

## **Additional Requirements:**

- ? The permit holder is required to produce, at the time of submission, and maintain public liability insurance coverage in an amount of not less than four hundred thousand dollars (\$400,000) combined single limit for bodily injury, death and property damage, naming the City as an additional insured thereon.

## **All permits for outdoor dining are issued subject to the following conditions:**

- ? The tables and chairs must be placed within the permitted area on the sidewalk in such a manner as to allow the free and safe passage of pedestrian traffic. If the tables and chairs are moved and located outside of the permitted outdoor seating area, they must be relocated to within the permitted area. Failure to contain the tables and chairs to the permitted area may result in a reduced permitted area or a revocation of the permit.
- ? The permit holder is responsible for keeping the outdoor seating area clean. The sidewalk area where the tables and chairs are located must be kept neat and free from litter and debris.
- ? **NO** food shall be prepared outside.

- ? If alcohol is to be served, the permit holder must notify the City's Business Licensing Office in room 203 of City Hall or by telephone at 874-8557 and obtain approval for the service of alcohol outdoors. Additionally, State law requires that any outdoor area serving alcohol be segregated from the rest of the public.
- ? All tables and chairs shall be removed prior to a predicted snowfall and while any snow or ice exists within the designated outdoor seating area or within four feet from the boundaries thereof. The City will not be responsible for damage to any tables, chairs or other property that is not properly removed when the City is engaged in sidewalk maintenance activities.
- ? The permit holder shall comply with all applicable rules and regulations implemented by the city regarding outdoor dining.

**Failure to comply with any of the above conditions will result in revocation or non-renewal of the permit.**

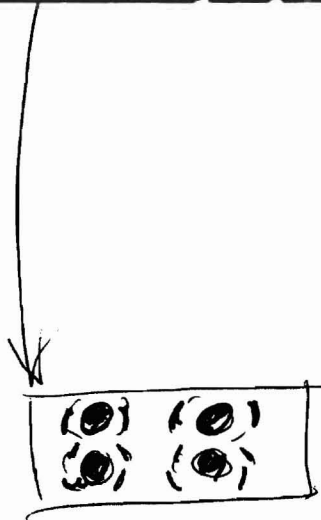
I/We fully understand that the City of Portland, its agents, officers and employees accept no responsibility and will not be liable for any injury, harm or damage to my/our person or property arising out of the establishment's occupancy of the sidewalk or park space. To the fullest extent permitted by 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: A. Olcott Date: 4/15/08  
 Printed name ALICE R. OLCOTT (bus. owner)  
 Establishment Henry VIII  
 Location 15 Monument Sq

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not to scale



<b>ACORD</b>		<b>CERTIFICATE OF LIABILITY INSURANCE</b>		CSR RC HENRY-3	DATE (MM/DD/YYYY) 04/11/08
PRODUCER  <b>Bragdon Insurance, Inc.</b> 286 York St PO Box 468 York ME 03909-0468 Phone: 207-363-3200 Fax: 207-363-1023		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  <b>Henryville, LLC DBA</b> 46A Pocahontas Road Kittery Point ME 03905		INSURERS AFFORDING COVERAGE		NAIC #	
		INSURER A <b>MiddleOak</b>			
		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



<b>ACORD CERTIFICATE OF LIABILITY INSURANCE</b>		CSR RC HENRY-3	DATE (MM/DD/YYYY) 04/11/08
PRODUCER  <b>Bragdon Insurance, Inc.</b> 286 York St PO Box 468 York ME 03909-0468 Phone: 207-363-3200 Fax: 207-363-1023	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  <b>Henryville, LLC DBA</b> 46A Pocahontas Road Kittery Point ME 03905	INSURERS AFFORDING COVERAGE INS. REF A <b>MiddleOak</b> INS. REF B INS. REF C INS. REF D INS. REF E	NAIC #	

**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.

INSUR ADD'L TR. INSR.	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  GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PER SUBJECT <input type="checkbox"/> LOC.	CB0100031299	10/31/07	10/31/08	EACH OCCURRENCE \$ 2000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP. (Any one person) \$ 5000 PERSONAL & ADJ. INURY \$ 2000000 GENERAL AGGREGATE \$ 4000000 PRODUCTS - COM/CP AGE \$ 4000000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTO <input type="checkbox"/> HIRED AUTO <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe cover SPECIAL PROVISIONS below				(MC STAT) (OR) (LIMITS) (OTHER) (EP) EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ACCORD BY ENDORSEMENT / SPECIAL PROVISIONS  
**Deli - Fast Food Restaurant**  
  
**City of Portland is listed as Additional Insured**

<b>CERTIFICATE HOLDER</b>  City of Portland City Hall  Portland ME 04101	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 <b>Roswitha Coughlin</b>
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## IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

## DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.