

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

Permit Number: 050494

DEPT. OF BUILDING INSPECTION
CITY OF PORTLAND
PERMIT ISSUED
MAY 2 3 2005
CITY OF PORTLAND

This is to certify that Rodway Peter E & /Applicant

has permission to tea & soak outdoor seating 3 tables 10 chairs

AT 30 City Ctr

027 F023001

provided that the person or persons, firm or corporation accepting this permit shall observe 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 occupied or closed-in. **HEAR 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

[Handwritten Signature]
5/11/05
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: 05-0494	Issue Date: PERMIT ISSUED
	027 F023001

Location of Construction: 30 City Ctr	Owner Name: Rodway Peter E &	Owner Address: 45 Brook Rd	Phone: MAY 23 2005
Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone: CITY OF PORTLAND
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B-3

Past Use: Commercial	Proposed Use: Commercial/ tea & soak outdoor seating 3 tables 10 chairs	Permit Fee: \$75.00	Cost of Work: \$75.00	CEO District: 1
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Proposed Project Description: tea & soak outdoor seating 3 tables 10 chairs	FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied Signature: <i>NA</i>	INSPECTION: Use Group: U Type: Seating IBC 2003 Signature: <i>[Signature]</i>
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PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____	
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Permit Taken By: Idobson	Date Applied For: 04/29/2005	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"/> A Date: <i>5/9/05</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: <i>5/9/05</i>	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: _____
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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

Permit No: 05-0494	Date Applied For: 04/29/2005	CBL: 027 F023001
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Location of Construction: 30 City Ctr	Owner Name: Rodway Peter E &	Owner Address: 45 Brook Rd	Phone:
Business Name:	Contractor Name: Applicant	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	

Proposed Use: Commercial/ tea & soak outdoor seating 3 tables 10 chairs	Proposed Project Description: tea & soak outdoor seating 3 tables 10 chairs
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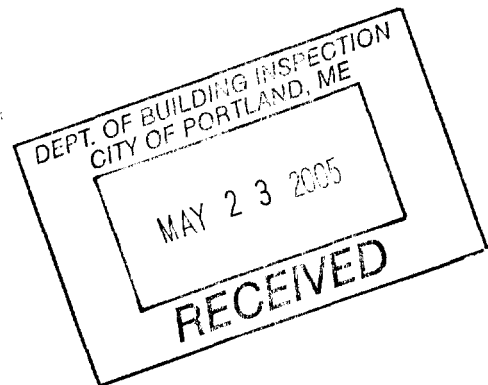
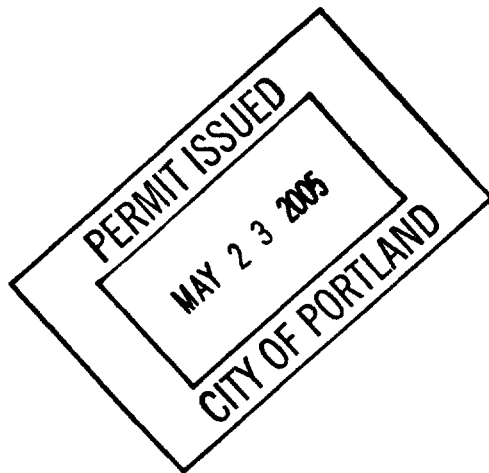
Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/09/2005

Note: **Ok to Issue:**

- 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.
- 2) 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:** Tammy Munson **Approval Date:** 05/11/2005

Note: **Ok to Issue:**





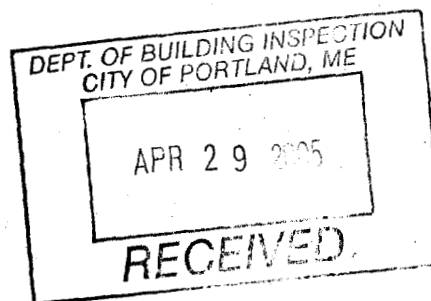
C/B/L: _____

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: 30 CITY CENTER; in Portland, Maine, by the owner of the establishment being: RAIN Management LLC, doing business as: SOAK Foot Sanctuary & Treatments, 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: Robert A. Mittersten
Establishment owner

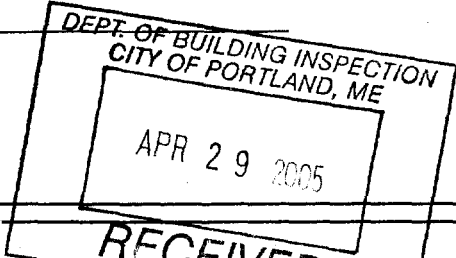
Date: 4-28-05



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: <u>30 City Ctr</u>	
Total Square Footage of Proposed Structure	Square Footage of Lot
Tax Assessor's Chart, Block & Lot Number Chart# <u>27</u> Block# <u>F</u> Lot# <u>23</u>	Owner: <u>Rodway & HORODYSKI</u> <u>30 City Center</u> <u>Portland, ME 04101</u> Telephone#: <u>207-723 8449</u>
Lessee/Buyer's Name (If Applicable) <u>Roberta Alexander</u> <u>RAIN Management LLC</u>	Owner's/Purchaser/Lessee Address: Cost Of Work: <u>\$ N/A</u> Fee: <u>\$75.00</u>
Current use: <u>Foot Sanctuary & Tea house</u> If the location is currently vacant, what was prior use: <u>N/A</u> Approximately how long has it been vacant: <u>N/A</u> Proposed use: Project description: <u>outside seating</u> How many chairs <u>0</u> How many tables <u>3</u>	
Contractor's Name, Address & Telephone: <u>N/A</u> Applicants Name, Address & Telephone: <u>Roberta Alexander</u> <u>RAIN Management, LLC</u> <u>102 Berkshire Rd.</u> <u>Portland, ME 04203</u> Who should we contact when the permit is ready: <u>Rob & Alexander</u> Telephone: <u>207-879-7625</u> If you would like the permit mailed, what mailing address should we use:	



Signature of applicant: <u>Robert Alexander</u>	Date: <u>4-28-05</u>
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LIQUORS

COMING SOON

COMING SOON

Highway & Broadway
Assessors
Michael A. ...
...

DRINKING OF
ALCOHOLIC
BEVERAGES

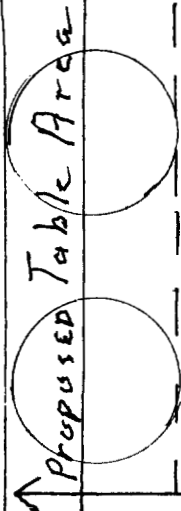
LAW OFFICES
Bcgaic & Ridge

26 City Center

SOAK Foot Sanctuary & Tea house

30 CITY CENTER

10'6"



Walkway Between Monument Square Area and Free Street

(No Curbing)

Free Street

Monument Square

No Setback from Sidewalk
To Building

ONE CITY CENTER BANK OF AMERICA

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/29/2004

ISSUER (207) 797-4900
Coastal Insurance Group
4 Newton Street
Portland, ME 04103

FAX (207) 797-3838

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 RAIN Management LLC
C/O Roberta Alexander
102 Berkshire Rd
Portland, ME 04103

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Peerless Insurance	
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.

INSURER	ADDITIONAL	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY <input 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"/> PROJECT <input type="checkbox"/> LOC	CBP9865075	07/07/2004	07/07/2005	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
		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 (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 DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC/STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ F.I. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

City of Portland as Additional insured
389 Congress Street
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 _____ 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 INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

R. Christopher Maloney 

ACORD 25 (2001/08)

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