

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

n # P 04

Please Read Application And Notes, If Any, Attached

PERMIT

PERMIT ISSUED
Permit Number: 051184
SEP 19 2005
CITY OF PORTLAND

I hereby certify that CITY OF PORTLAND

has permission to Tents for a LLBean event set up 9/28/2005 and bring down 9/29/2005

350 CONGRESS ST

028 B001001

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 placed or closed-in.
24 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. Capt. Greg Cass 8-22-05
Health Dept. _____
Appeal Board _____
Other _____

[Signature]
9/13/05
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: 05-1184	Issue Date: SEP 19 2005	CDL: 028 B001001
Owner Address: 389 CONGRESS ST		Phone:
Contractor Address: CITY OF PORTLAND		Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents
		Zone:

Past Use: Lincoln Park	Proposed Use: Lincoln Park/ Tents for a LLBean event set-up 9/28/2005 and break down 9/29/2005
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Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 1
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FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>w/ the conditions</i>	INSPECTION: Use Group: <i>U</i> Type: <i>Tent</i> IBC 2003
Signature: <i>Capt Cass</i>	Signature: <i>[Signature]</i>

Proposed Project Description:
Tents for a LLBean event set-up 9/28/2005 and break down 9/29/2005

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)

Action: Approved Approved w/Conditions Denied

Signature: _____ Date: _____

Permit Taken By: Idobson	Date Applied For: 08/19/2005
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Zoning Approval

- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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

Shoreland
 Wetland
 Flood Zone
 Subdivision
 Site Plan

Maj Minor MM

Date: *9/13/05*

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Date: _____

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review
 Approved
 Approved w/Conditions
 Denied

Date: *9/13/05*

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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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City of Portland, Maine - Building or Use Permit

389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 05-1184	Date Applied For: 08/19/2005	CBL: 028 B001001
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Location of Construction: 350 CONGRESS ST	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	

Proposed Use: Lincoln Park/ Tents for a LLBean event set-up 9/28/2005 and break down 9/29/2005	Proposed Project Description: Tents for a LLBean event set-up 9/28/2005 and break down 9/29/2005
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Dept: Zoning **Status:** Approved **Reviewer:** Tammy Munson **Approval Date:** 09/13/2005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 09/13/2005
Note: **Ok to Issue:**

1) This permit DOES NOT authorize any construction activities. The tent must be removed at the end of the event.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 08/22/2005
Note: **Ok to Issue:**

1) Maintain access and egress to all tents.
No smoking or open flame within 10 feet.
Fire extinguisher required at all tents.

Submit Application to Room 315, Portland City Hall, 389 Congress Street, Portland, ME 04101
 207-874-8703; fax 207-874-8716. Please allow 10 Business Days for processing.

Tent 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>Lincoln Park</u>		
Date of Tent setup: <u>September 28, 2005</u>	Date of Tent breakdown: <u>September 29, 2005</u>	
Tax Assessor's Chart, Block & Lot Chart# <u>28</u> Block# <u>B</u> Lot# <u>1</u>	Owner: <u>City of Portland</u>	Telephone:
Lessee/Buyer's Name (if Applicable)	Applicant name, address & telephone: <u>Catherine E. Woodward</u> <u>L.L. Bean, Inc.</u> <u>15 Casco St.</u> <u>Freeport ME 04033</u>	Fee: <u>\$ 30.00</u>
The following must be included as submissions: <u>(207) 552-2290</u>		
<ol style="list-style-type: none"> 1. Certificate of Flammability <input checked="" type="checkbox"/> 2. Letter of approval from property owner. If the City is the owner, please contact Ted Musgrave at Parks & Recreation @ 874-8793 3. Plot Plan showing the following: <ol style="list-style-type: none"> i. Property lines ii. Parking iii. Existing Building locations iv. Tent locations, including dimensions of all tents, exits and entrances in tent. 4. If the City is the property owner, Certificate of Insurance listing the City as Additional Insured. Minimum amount of coverage is \$400,000.00 		
<p>Whom should we contact when the permit is ready: <u>Catherine E. Woodward & Peter</u></p> <p>Mailing address: <u>L.L. Bean Inc.</u> <u>15 Casco St.</u> <u>Freeport ME 04033</u></p> <p>PHONE: <u>(207) 552-2290</u></p> <p><u>McFarland</u> <u>Merrill Auditorium</u></p>		
<p>We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER WILL BE ISSUED AND A \$100.00 FINE LEVIED IF ANY WORK STARTS BEFORE THE PERMIT IS PICKED UP.</p>		

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.

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: Catherine E. Woodward [Date: 7/1/2005]

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

Certificate of Flame Resistance

REGISTERED
FABRIC
NUMBER

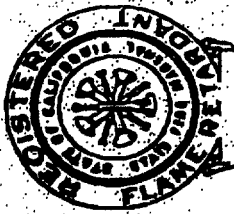
F53504

Issued by

TOPTEC, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured

02/04/02



This is to certify that the materials described are inherently flame retardant.

Name ONE STOP PARTY SHOP

Address 222 MAIN STREET

City S:PORTLAND

State ME

Zip 04106

Certification is hereby made that:

The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA701-96, CPAI84, UL-C109, MVSS302.

Method of Application: _____

Description of item certified: FUTURE END 30x30 WHITE

The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTEC, INC.

Name of Production Superintendent

MODEL TU303000E

SERIAL # 221214B

Certificate of Flame Resistance

REGISTERED
FABRIC
NUMBER

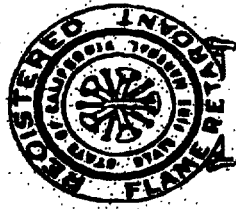
F53501

Issued by

TOPTec, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured

11/17/00



This is to certify that the materials described are inherently flame retardant.

Name ONE STOP PARTY SHOP

Address 262 MAIN STREET

City S. PORTLAND

State _____

ME

Zip _____

04106

Certification is hereby made that:

The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA701-96, CPA184, ULC109, MVSS302.

Method of Application: _____

Description of use certified: FUTURE MID WHITE 30x10

The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTec, INC.

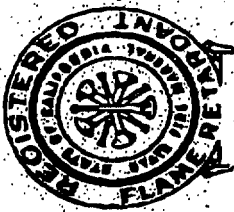
MODEL TUAB1000G

SERIAL # 208027B

Name of Production Superintendent

Certificate of Flame Resistance

REGISTERED
FABRIC
NUMBER



P1214

Issued by

TOPTEC, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured
10/18/01

This is to certify that the materials described are inherently flame retardant.

Name ONE-STOP PARTY SHOP

Address 262 MAIN ST

City S PORTLAND

State ME

Zip 04106

Certification is hereby made that:

The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA701-96, CPAI84, ULC109, MVSS302.

Method of Application: _____

Description of item certified: FRAME

20x40

WHITE

The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTEC, INC.

Nancy of Production Superintendent

MODEL TTE204000

SERIAL # 214756

Certificate of Flame Resistance

REGISTERED
FABRIC
NUMBER

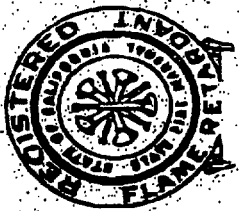
F59501

Issued by

TOPTec, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured

10/17/01



*This is to certify that the materials described
are inherently flame retardant.*

Name ONE-STOP PARTY SHOP

Address 262 MAIN STREET

City S PORTLAND

State ME

Zip 04106

Certification is hereby made that:

The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA 701-96, CPAI 84, ULC 109, MVSS 302.

Method of Application: _____

Description of item certified: FRAME

20x30

WHITE

The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTec, INC.

MODEL TFE203000

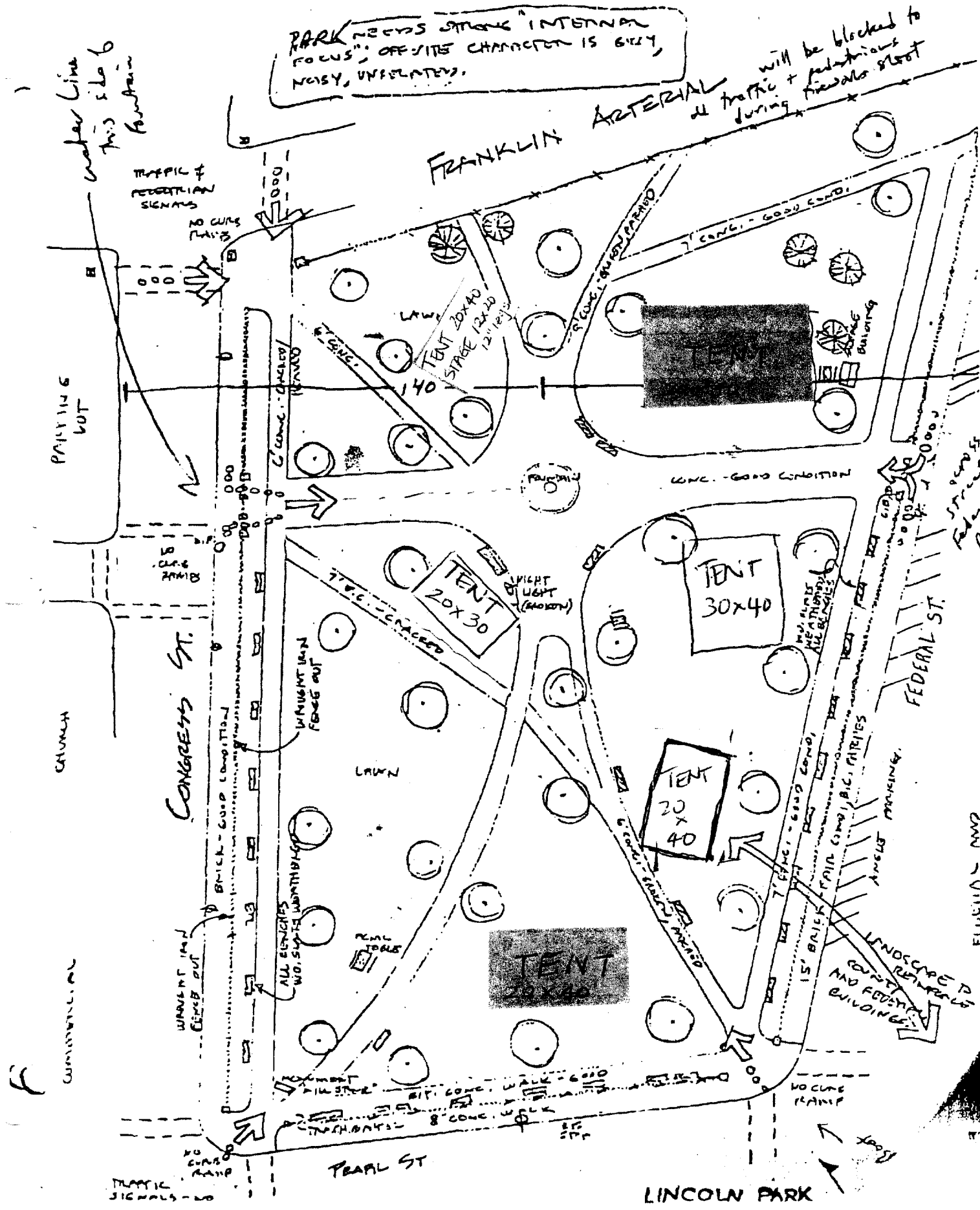
SERIAL # 214739B

A handwritten signature in black ink, appearing to read "Andy [unclear]".

Name of Production Superintendent

PARK NEEDS STRONG "INTERNAL FOCUS"; OFF-SITE CHARACTER IS BUSY, NOISY, UNRELATED.

will be blocked to traffic + pedestrians during festival



water line
this side to fountain

TRAFFIC & PEDESTRIAN SIGNALS

NO CURB TRAMP

PARKING LOT

TENT 20x40
STAGE 12x20
12" TRAMP

CONGRESS ST.

CHURCH

WARRANT SIGN
FENCE OUT

LAWN

TENT 20x30

TENT 30x40

TENT 20x40

TENT 20x40

FEDERAL ST.

ALL SIGNAGES
NO. SIGNAGE WORTHY

REAL TOOLS

15' BRICK PAIR COMP. BARS

LANDSCAPE TO
CONFORM
AND FEDERAL
BUILDINGS

PEARL ST

TRAFFIC SIGNALS - NO

LINCOLN PARK

FEDERAL ST

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID HJ
HANDY-8 DATE (MM/DD/YYYY) 08/05/05

PRODUCER
TD Banknorth Ins Agcy Inc (SP)
P.O. Box 406
Portland ME 04112-0406
Phone: 207-239-3500 Fax: 207-775-0339

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
Handyman Equipment Rental Co.
357 Riverside Street
Portland ME 04103

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A	St Paul Fire & Marine Ins Co	24767
INSURER B		
INSURER C		
INSURER D		
INSURER E		

OR

NSR ADD'L LTR	INSRD	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"/> PROJ-JECT <input type="checkbox"/> LOC	CK00218478	07/01/05	07/01/06	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 OTHER				<table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATUTORY LIMITS	OTHER													
E.L. EACH ACCIDENT	\$													
E.L. DISEASE - EA EMPLOYEE	\$													
E.L. DISEASE - POLICY LIMIT	\$													

DESCRIPTION OF OPERATIONS/LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
The City of Portland is an additional insured on the general liability with respects to the named insureds operations only if required by written contract. RE: Corporate Celebration - September 28-29, 2005 at Lincoln Park, Portland, ME.

CERTIFICATE HOLDER
LL Bean
Insurance Services
Casco Street
Freeport ME 04033

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF. THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO MAIL LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
TD Banknorth Ins. Agency, Inc.

8/13/2005

Lanni,

Thank you for your guidance and help in distributing the food service and concert permits to the correct departments.

I will be on vacation the week of 8/15, but please feel free to contact me at 552-2290 if there are any problems with the permit applications.

Sincerely,

Catherine Woodward
LL Bean, Inc.

15 CASCO ST

Freeport Maine 04033

phone 552-2290

fax 552-6852

email cwoodward@lbean.com