### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read Application And	TY OF PORTL	
Notes, I Any, Attached	PERMIT	Permit Number: 040799
This is to certify that Malone Joseph M &/O	wner	PERMITISSUED
has permission to Outdoor seating for res	stauran tables & chairs	JUN <b>2 4</b> 2004
AT _41 Middle St		028 P022001
provided that the person or persof the provisions of the Statutes the construction, maintenancea this department.	of Name and of the same	oting this permit shall comply with all ces of the City of Portland regulating tures, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	be e this to ding or the red la dor of the R 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. 411 M J		
Health Dept.		
Appeal Board		Can
Other Department Name		Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - B	uilding or Use Permit		Permit No:	Date Applied For:	CBL:		
389 Congress Street, 04101 Tel	l: (207) 874-8703, <b>Fax:</b> (20	7) 874-8716	04-0799	06/14/2004	028 P022001		
Location of Construction:	Owner Name:	0	wner Address:		Phone:		
41 Middle St	Malone Joseph M &	3	30 Highland St		( ) 772-2422		
Business Name:	Contractor Name:	C	ontractor Address:		Phone		
	Owner	3	30 Highland St Por	tland	(207) 772-2422		
Lessee/Buyer's Name	Phone:		ermit Type: Outdoor Seating		•		
Proposed Use:		Proposed	<b>Project Description:</b>				
outdoor seating		Outdoo	r seating for restau	rant-4 tables & 8 ch	airs		
Dept: Zoning Status: Note:	Approved with Conditions	Reviewer:	Marge Schmucka	Approval Da	nte: 06/17/2004 Ok to Issue: ✓		
All outdoor seating is subject to and cleared for pedestrian use.	adjustment at any time from	the City's traff	ic engineer who en	sures that the City s	idewalk is open		
2) This permit is being approved owork.	on the basis of plans submitted	l. Any deviati	ons shall require a	separate approval be	efore starting that		
Dept: Building Status: Note:  1) The outdoor seating MUST NO	Approved with Conditions		Tammy Munson	Approval Da	te: 06/23/2004 Ok to Issue: ✓		
1) The outdoor seating WOST NC	of block ally illeans of egless i	iroin any abbu	ung bunumgs.				
Dept: Fire Status: Note:	Approved	Reviewer:	Lt. MacDougal	Approval Da	nte: 06/17/2004 Ok to Issue: □		

City of Portland, M	laine - Building or Use Per	rmit	Permit No:	Date Applied For:	CBL:
389 Congress Street, 0	4101 Tel: (207) 874-8703, Fa	ax: (207) 874-8716	6 04-0799	06/14/2004	028 P022001
<b>Location of Construction:</b>	Owner Name:		Owner Address:		Phone:
41 Middle St	Malone Joseph M	1&	30 Highland St		( ) 772-2422
Business Name:	Contractor Name:		Contractor Address:		Phone
	Owner		30 Highland St F	ortland	(207) 772-2422
Lessee/Buyer's Name	Phone:		Permit Type:		
			Outdoor Seating	5	
Proposed Use:		Propose	d Project Description	:	
outdoor seating		Outdo	or seating for rest	aurant-4 tables & 8 c	hairs
Dept: Zoning	Status: Approved with Cond	litions Reviewer:	Marge Schmuc	kal <b>Approval D</b>	ate: 06/17/2004
Note:	**				Ok to Issue:
All outdoor seating and cleared for pede	is subject to adjustment at any tir estrian use.	me from the City's tr	affic engineer wh	o ensures that the Cit	y sidewalk is open
2) This permit is being that work.	approved on the basis of plans s	submitted. <b>Any</b> devi	ations shall requir	e a separate approval	before starting
Dept: Building	Status: Pending	Reviewer:		Approval D	ate:
Note:	-				Ok to Issue:

City of Portland, 389 Congress Street,			_				Issue Dat		<b>GBL</b> : 028 PC	22001	
Location of Construction:		_	Owner Name:	), Fax.		Owner Address:	JUI	2 4 2004	Pione:	722001	
41 Middle St		1	Malone Joseph M &			30 Highland St	CLIA C	E PORTI A	PORTLAN D772-2422		
Business Name: Contractor Name:				Contractor Addres			<del>- 8 -</del>				
		1	Owner			30 Highland St	Of Make Same 1		2077722	422	
Lessee/Buyer's Name			Phone:			Permit Type:	Tornana		2077722	Zonos	
						Outdoor Seating	10			Zone: 2	
Past Use:		-	Proposed Use:		1	Permit Fee:	Cost of Wor	rk: CF	O District:	<del>                                     </del>	
none.		ſ	outdoor seatir	ıσ	1	\$75.00		\$0.00	1		
Restamant w	ر و		outdoor south	5	<u> </u>	FIRE DEPT:	Approved	INSPECTI	ON:		
(0)	Port	12 5)						Use Group		Type: S, g 1990	
CKCA	) o CW(	<b>ゕ</b> クト					Denied			5.0	
								B	CA.	1999	
Outdoor seating for re-	staurant-	4 tables	& 8 chairs			Signature	4447	Signatur	2-6		
								ε:			
					Ĭ.	Action: App	roved Ap	proved w/Cor	nditions 🗀	Denied	
						~.			_		
) '(T)   D		<del>-</del>	-	1		Signature:		Da	te:		
Permit Taken By: jodinea		<b>Date Appl</b> 06/14/2				Zonin	ig Approva	al			
				Sne	cial Zone or Reviews	s   70	ning Appeal		Historic Pres	ervation	
1. This permit applic		-				l					
Applicant(s) from Federal Rules.	meeting	applicat	ble State and	∏ Sh	oreland	☐ Varia	nce		Not in Distri	ct or Landmar	
2. Building permits of septic or electrical		clude plu	umbing,	☐ We	etland	Misce	llaneous		Does Not Re	quire Review	
3. Building permits a within <b>six</b> (6) mon				☐ Flo	ood Zone	Condi	tional Use		Requires Rev	view	
False information permit and stop all	•	alidate a	building	☐ Su	bdivision	Interp	retation		Approved		
				☐ Sit	Na.	Appro	ved		Approved w/	Conditions	
				Maj [	wthlen Minor Minor	Denied	d		Denied		
				)ate:	4/17/01	Date:		Date:		$\leq$	
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				C		XT					
I hanabar agutifu that I an	o the even	man of ma	and of the ma		ERTIFICATION		أد ميناه مساحما	her the error		d and that	
I hereby certify that I an I have been authorized b											
urisdiction. In addition											
shall have the authority such permit.											
SIGNATURE OF APPLICAL	NT				ADDRESS		DATE		PHO	NE	

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE

# Outdoor Seafing 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.

Signature of applicant:

Date: 6-10-04



C/B/	т.		
( 7 K/	1.		

## CONDITIONS FOR SIDEWALK OCCUPANCY PERMIT

written consent and agreement relating to occupancy of the City of 1 ordand sidewark in the
front, side, and or rear of the building at the stated
location: 41 Middle Street, ; in Portland, Maine, by the owner of the
establishment being: JeMalory / Keve Durt, doing business as: Ribollita Restaurant, hereby, to the fullest extent permitted by law,
as: Ribollita Rotau and, 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'soccupancy 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
Signed and acknowledged:
Establishment owner
Date: 6-10-04

	OPID LW RIBOL-1				
'RODUCER  Furner Barker Insurance  One India Street	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 <b>POLICIES</b> BELOW.				
<pre>?ortland ME 04101 Phone: 207-773-8156 Fax: 207-773-6647</pre>	INSURERS AFFORDING COVERAGE	NAIC#			
NSURED	INSURER A: One Beacon Insurance	20621			
	INSURER B:				
Ribollita Inc Kevin Ouiet	INSURER C:				
Ribollita Inc Kevin Quiet 41 Middle Street Portland ME 04101	INSURER D:				
rortiand ME 04101	INSURER E:				

INCO AND		·	DOLLOV EEEECTÍVE	IDALICY EVOIDATION		
INSR ADD LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	DATE (MMIDDNY)	POLICY EXPIRATION DATE (MMIDDNY)	LIMIT	
	GENERAL LIABILITY				EACH OCCURRENCE DAMAGE TO RENTED	\$ 1000000
A	X COMMERCIAL GENERAL LIABILITY	YM1U03267	01/07/04	01/07/05	PREMISES (Ea occurence)	\$ 100000
	CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$ 5000
	X Liquor				PERSONAL & ADV INJURY	\$ 1000000
			1		GENERAL AGGREGATE	\$ 2000000
	GENL AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$200000
	POLICY PRO- JECT LOC		<del> </del>			
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	ANY AUTO				(24 400,401,1)	
	ALL OWNED AUTOS				BODILY INJURY (Per person)	\$
	SCHEDULED AUTOS				( or porcorry	
	HIREDAUTOS				BODILY INJURY (Per accident)	\$
	NON-OWNEDAUTOS				(r or doordorny	
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	ANY AUTO				OTHERTHAN EA ACC	\$
					AUTO ONLY: AGG	\$
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
	OCCUR CLAIMS MADE				AGGREGATE	\$
	-					\$
	DEDUCTIBLE					\$
	RETENTION \$					\$
	ORKERS COMPENSATIONAND				WC STATU- TORY LIMITS ER	
	PLOYERS LIABILITY  PROPRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$
	PROPRIETOR/PARTNER/EXECUTIVE FICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE	\$
SP	CIAL PROVISIONS below				E.L. DISEASE - POLICY LIMIT	\$
ОТІ	1ER					
	TION OF OPERATIONS/ LOCATIONS IVEHIC				ognost	
	nurant - Naming the Ci	iy or rornand as a	auuliional ll	usureu as r	especi	
gene	ral liability.					
CERTIF	FICATE HOLDER		CANCELLATI	ON		

CITYOFP

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE **EXPIRATION** DATE THEREOF, THE ISSUING INSURER WILL ENDEAVORTO MAIL 10 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

Lamie Willotto

City of Portland City Hall 389 Congress St Portland ME 04101

### **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 **B** 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.

SFREEL

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