

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

**CITY OF PORTLAND**

**BUILDING INSPECTION**

**PERMIT**

PERMIT ISSUED

Permit Number: 050643  
MAY 27 2005

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that Malone Joseph M &/Applica  
has permission to Outside Seating -4 tables 8 chairs  
AT 41 Middle St

028 P022001

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 written permission procured before this building or part thereof is laid out or enclosed-in. HEAVY 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 \_\_\_\_\_  
DepartmentName

*Jeannie Bourke 5/26/05*  
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

**City of Portland, Maine - Building or Use Permit**

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

<b>Permit No:</b> 05-0613	<b>Date Applied For:</b> 05/18/2005	<b>CBL:</b> 028 P022001
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<b>Location of Construction:</b> 41 Middle St	<b>Owner Name:</b> Malone Joseph M &	<b>Owner Address:</b> 30 Highland St	<b>Phone:</b>
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<b>Business Name:</b>	<b>Contractor Name:</b> Applicant	<b>Contractor Address:</b> Portland	<b>Phone:</b>
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<b>Tenant/Ressee/Buyer's Name</b>	<b>Phone:</b>	<b>Permit Type:</b>
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<b>Proposed Use:</b> Ribolitta - Outside Seating -4 tables 8 chairs	<b>Proposed Project Description:</b> Outside Seating -4 tables 8 chairs
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<b>Dept:</b> Zoning	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Marge Schmuckal	<b>Approval Date:</b> 05/24/2005	<b>Ok to Issue:</b> <input checked="" type="checkbox"/>
<b>Note:</b>				
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.				
<b>Dept:</b> Building	<b>Status:</b> Approved with Conditions	<b>Reviewer:</b> Jeanine Bourke	<b>Approval Date:</b> 05/26/2005	<b>Ok to Issue:</b> <input type="checkbox"/>
<b>Note:</b>				
1) The tables and chairs must not block any means to egress the building				

**City of Portland, Maine - Building or Use Permit Application**

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

Permit No: 05-0613	Issue Date: <b>PERMIT ISSUED</b> MAY 27 2005	CR#: P022001
Owner Address: 30 Highland St	Contractor Address: Portland	Phone:
Permit Type: Outdoor Seating	Zone: B2b	

Location of Construction: 41 Middle St	Owner Name: Malone Joseph M &
Business Name:	Contractor Name: Applicant
Lessee/Buyer's Name	Phone:

Past Use: Commercial Restaurant	Proposed Use: Ribolitta - Outside Seating -4 tables 8 chairs
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Proposed Project Description:  
Outside Seating -4 tables 8 chairs

Permit Fee:	Cost of Work:	CEO District:
FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>A-2 sea.</i>	
Signature:	Signature: <i>JM 25/26/05</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: Idobson	Date Applied For: 0511 812005	<b>Zoning Approval</b>	
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- 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..

<b>Special Zone or Reviews</b> <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>5/24/05</i>
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<b>Zoning Appeal</b> <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
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<b>Historic Preservation</b> <input checked="" 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

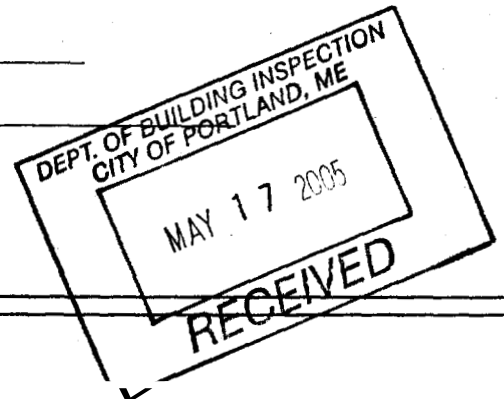
# Outdoor Seating Permit Application

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>41 Middle Street</u>		
Total Square Footage of Proposed Structure		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Number Chart# <u>28</u> Block# <u>P</u> Lot# <u>22</u>	Owner: <u>Joseph Mulone</u>	Telephone#: <u>774-2472</u>
Lessee/Buyer's Name (if Applicable)	Owner's/Purchaser/Lessee Address:	Cost Of Work: \$ Fee: <u>\$75.00</u>

Current use: Restaurant  
If the location is currently vacant, what was prior use: \_\_\_\_\_

Proposed use: \_\_\_\_\_  
Project description: outside seating  
How many chairs 8 How many tables 4



Contractor's Name, Address & Telephone:

Applicants Name, Address & Telephone:

Who should we contact when the permit is ready: Kevin Quist  
Telephone: 774-2472  
If you would like the permit mailed, what mailing address should we use:

**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.**

### Certification

*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: <u>[Signature]</u>	Date: <u>5-16-05</u>
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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: 41 Middle Street; in Portland, Maine, by the owner of the establishment being: Ribollita, doing business as: Ribollita, 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: \_\_\_\_\_

Establishment owner

Date: \_\_\_\_\_

5-16-05

PRODUCER	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS POLICY DOES NOT AMEND, ALTER, SUSPEND, EXTEND OR IN ANY MANNER CHANGE THE COVERAGE PROVIDED BY THE POLICIES BELOW.	
Phone: 207-773-8156 Fax: 207-773-6647	INSURERS AFFORDING COVERAGE	NAIC #
Insured  <b>Ribollita Inc</b> <b>Kevin Quiet</b> <b>41 Middle Street</b> <b>Portland ME 04101</b>	INSURER A: <b>Middlesex Mutual Assurance</b>	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS

SR ADD'L TR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A X	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>Liquor Liability</b> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CB0100020252	01/07/05	01/07/06	EACH OCCURRENCE TO RENTED \$ (Ea occurrence) <b>\$1,000,000</b> MED EXP (Any one person) <b>\$50,000</b> PERSONAL & ADV INJURY <b>\$1,000,000</b> GENERAL AGGREGATE <b>\$2,000,000</b> PRODUCTS - COMP/OP AGG <b>\$2,000,000</b>
	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 I
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE <b>I</b> AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS LOCATIONS VEHICLES EXCLUSIONS ADDED BY ENDORSEMENT SPECIAL PROVISIONS  
**Restaurants - Naming the City of Portland as additional insured as respects to General Liability.**

CERTIFICATE HOLDER  CITY OFFP  <b>City of Portland</b> <b>City Hall</b> <b>389 Congress St</b> <b>Portland ME 04101</b>	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <b>10</b> 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 <i>Maureen Labbe</i>

## **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.

NORM'S  
EAST END  
GRILL

DUCK T

RIBOLITTA  
41 MIDDLE  
STREET

FORT CITY  
GRASS  
PARKING LOT

MIDDLE STREET

INDIA STREET

JORDAN'S BEAT

MICHAEL'S



RIBOLITTA  
RESTAURANT

KIBOLITTA  
ENTRANCE  
NOY

RIBOLITTA  
RESTAURANT

9

47

17

TABLE  
2'x2'

TABLE  
2'x2'

TABLE  
2'x2'

TABLE  
2'x2'

GRASSY AREA

GRASSY AREA

4'0"

7'0"

MIDDLE STREET

