

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED
Permit Number: 040237
MAY 07 2004
CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that Witt-t Llc/n/a SELF
has permission to Coffee shop with outdoor seating: 5 tables ten chairs
AT 37 Silver St L 029 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 work on permit must be completed before this building or part thereof is opened or closed-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

[Signature] 5/15/04
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

8/16/04

done.

a. done

PERMIT ISSUED

Permit No:	Issue Date: MAY 07 2004	CBL: 029 B001001
------------	----------------------------	---------------------

Location of Construction: 37 Silver St	Owner Name: Witt-t Llc	Owner Address: 3 17 River Rd	Phone:
Business Name:	Contractor Name: n/a SELF	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B3

Past Use: Commercial/ Coffee Shop	Proposed Use: Coffee Shop/ Coffee shop with outdoor seating' 5 tables, ten chairs	Permit Fee: \$75.00	Cost of Work: \$75.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTOR Use Group: A Type: <i>Outdoor Seating</i> Signature: <i>[Handwritten Signature]</i>	

Permit Taken By: Idobson	Date Applied For: 03/12/2004	Zoning Approval	
-----------------------------	---------------------------------	------------------------	--

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in District or Landma
<input type="checkbox"/> Wetland	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does Not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input checked="" type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input checked="" type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>3/23/04</i>	Date:	Date: <i>5/5/04</i>

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: 04-0237	Date Applied For: 03/12/2004	CBL: 029 B001001
------------------------------	--	----------------------------

Location of Construction: 37 Silver St	Owner Name: Witt-t Llc	Owner Address: 317 River Rd	Phone:
Business Name:	Contractor Name: n/a SELF	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	

Proposed Use: Coffee Shop/ Coffee shop with outdoor seating: 5 tables, ten chairs	Proposed Project Description: Coffee shop with outdoor seating: 5 tables, ten chairs
---	--

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 03/23/2004
Note: **Ok to Issue:**

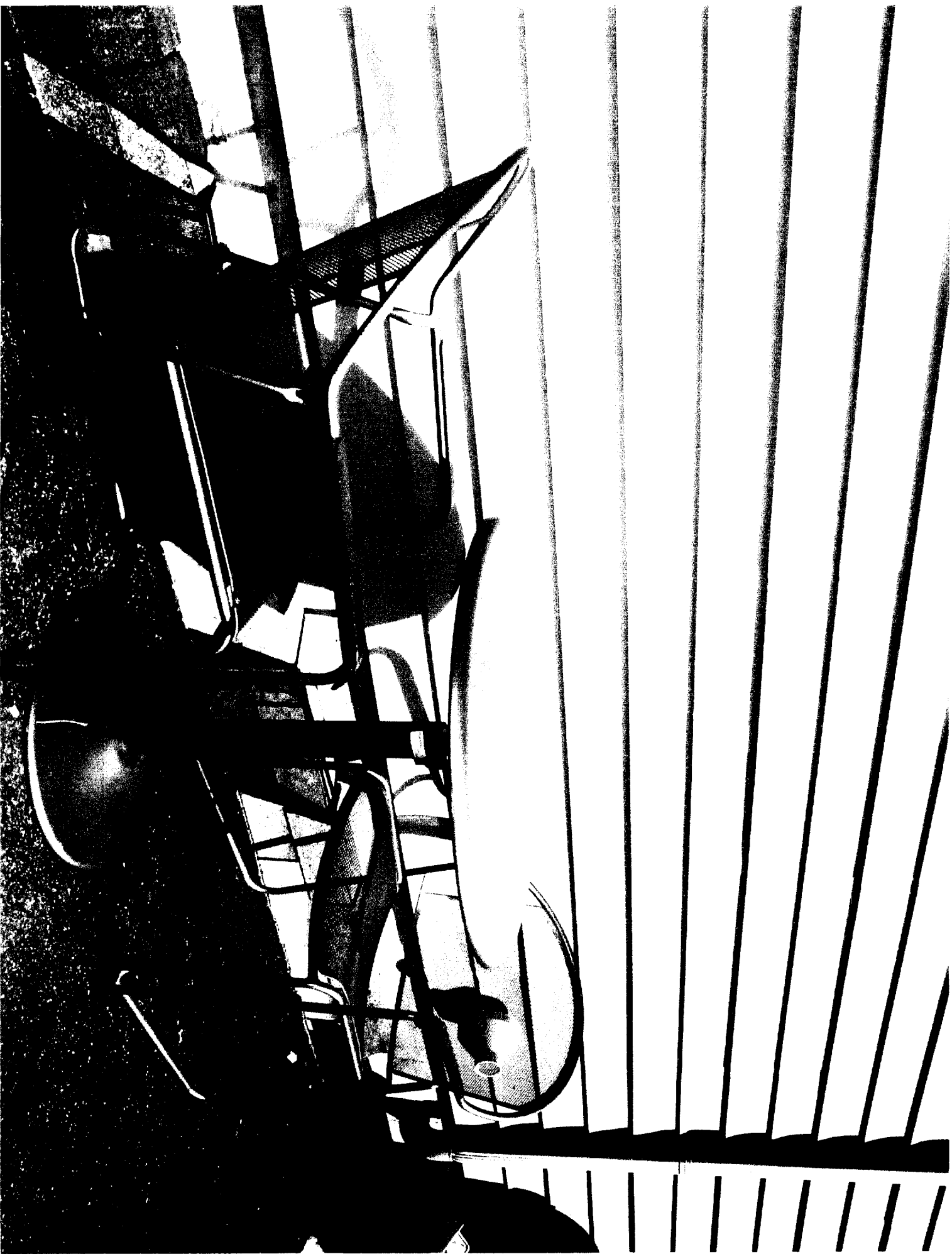
- 1) All outdoor seating is subject to adjustment at any time from the City's Traffic Engineer who ensures that the City sidewalk is open and cleared for pedestrian use.

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 05/05/2004
Note: **Ok to Issue:**

Comments:

3/24/2004-mjn: Checking to see if Historic needs to review, emailed D. Andrews

8 1011K Street - Silver Spring



From: Mike Nugent
To: DEB ANDREWS
Subject: 37 Silver

is proposing 5 outside tables for a coffee shop on the corner of Milk and Silver...do you care to review?

Gina -
need photos
of signs on
chairs - table -

029 B 001

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.

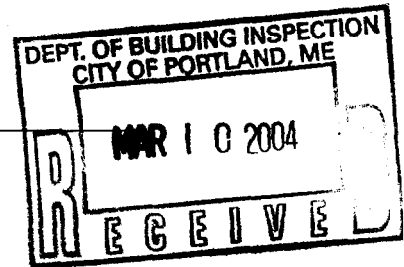
Location/Address of Construction: 8 Milk St. Portland Maine

Total Square Footage of Proposed Structure	Square Footage of Lot
--	-----------------------

Tax Assessor's Chart, Block & Lot Number Chart# <u>029</u> Block# <u>B</u> Lot# <u>001</u>	Owner: Tom Whit <u>Shea Egbert</u>	Telephone#: <u>207-772-8708</u>
---	--	---------------------------------

Lessee/Buyer's Name (If Applicable) <u>Shea Egbert</u>	Owner's/Purchaser/Lessee Address:	Cost Of Work: \$ Fee: \$ <u>75.00</u>
---	-----------------------------------	--

Current use: Coffee Shop
 If the location is currently vacant, what was prior use: same
 Approximately how long has it been vacant: _____
 Proposed use: _____
 Project description: outside seating
 How many chairs 10 How many tables 5



Contractor's Name, Address & Telephone:
 Applicants Name, Address & Telephone:
Shea Egbert - 8 Milk St. Portland Me. 207-772-8708
 Who should we contact when the permit is ready: Shea Egbert
 Telephone: 772-8708
 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

Signature of applicant: <u>Shea Egbert</u>	Date: <u>3/10/04</u>
--	----------------------



C/B/L: _____

1

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: 8 Milk St.; in Portland, Maine, by the owner of the establishment being: Shen Egbert, doing business as: The Crooked Mile, 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: _____

Shen Egbert
Establishment owner

Date: 5/10/04.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
06/02/03

PRODUCER

HOLDEN AGENCY
P O BOX 10610
PORTLAND MAINE 04104

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.

COMPANIES AFFORDING COVERAGE

COMPANY A ZURICH N.A. SMALL BUSINESS
COMPANY B 029 B001
COMPANY C
COMPANY D

INSURED

THE CROOKED MILE
SHEA EDBERT DBA
8 MILK STREET
PORTLAND ME 04101

COVERAGE

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	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 OWNER'S & CONTRACTOR'S PROT	PAS40606874	05/31/03	05/31/04	GENERAL AGGREGATE	\$3,000,000
					PRODUCTS - COMP/OP AGG	\$1,000,000
					PERSONAL & ADV INJURY	\$1,000,000
					EACH OCCURRENCE	\$1,000,000
					FIRE DAMAGE (Any one fire)	\$1,000,000
					MED EXP (Any one person)	\$ 10,000
	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	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	\$
					AGGREGATE	\$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	\$
					AGGREGATE	\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL <input type="checkbox"/> OTHER				WC STATE/TERRITORY LIMITS	OTH-ER
					EL EACH ACCIDENT	\$
					EL DISEASE-POLICY LIMIT	\$
					EL DISEASE-EA EMPLOYEE	\$

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL RIMS

PRSMISES LIABILITY

CERTIFICATE HOLDER

CITY OF PORTLAND, MAINE
ATT: KERAN DUNFEY
389 CONGRESS STREET
PORTLAND, MAINE 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 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 COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Eric Wright EW A

City of Portland, Maine - Building or Use Permit

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

Permit No: 03-0588	Date Applied For: 05/29/2003	CBL: 029 B001001
------------------------------	--	----------------------------

Location of Construction: 8 Milk St/37 Silver St.	Owner Name: Witt-t Llc	Owner Address: 317 River Rd	Phone: () 772-8708
Business Name:	Contractor Name: Shea Egbert	Contractor Address: 8 Milk St Portland	Phone: (207) 749-7387
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	

Proposed Use: Coffee shop with outdoor seating: 4 tables, eight chairs	Proposed Project Description: Outdoor seating for 2003
--	--

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 05/30/2003
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.

Dept: Building **Status:** Approved **Reviewer:** Mike Nugent **Approval Date:** 06/02/2003
Note: **Ok to Issue:**

Comments:
10/2/03-axr: closed out by Kevin carroll

Previous
YEARS
Approval