

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 060668
MAY 16 2006
CITY OF PORTLAND

This is to certify that Witt-t Llc/n/a has permission to Outside seating for 4 tables

AT 37 Silver St 029 B001001

provided that the person or persons who obtain or accept this permit shall comply with all of the provisions of the Statutes of the State 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 proceeds before this building or part thereof is started or closed-in 4 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.
Health Dept.
Appeal Board
Other Department Name

Jeanie Bonke 5/11/06
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: 06-0668	Issue Date: MAY 16 2006	CBL: 029 B001001
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Location of Construction: 37 Silver St	Owner Name: Witt-t Llc	Owner Address: 378 Lakeside Dr	Phone: 207-663-6940
Business Name: n/a	Contractor Name: n/a	Contractor Address: n/a Portland	Phone:
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Outdoor Seating	Zone: B-3

Fast Use: Cafe' 1The Crooked Mile	Proposed Use: Cafe' / Outside seating for 4 tables	Permit Fee: \$75.00	Cost of Work: \$0.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: <i>Outdoor Seating</i>	

Proposed Project Description: Outside seating for 4 tables	Signature:	Signature: <i>AMB 5/11/06</i>
PEDESTRIAN ACTIVITIES DISTRICT (P. J.)		
Action. <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature: _____ Date: _____		

Permit Taken By: GG	Date Applied For: 0510812006	<b>Zoning Approval</b>		
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<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>5/11/06</i>	<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 Date: _____	<b>Historic Preservation</b> <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: _____
	<i>ok with conditions</i> Date: <i>5/11/06</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

<b>Permit No:</b> 06-0668	<b>Date Applied For:</b> 0510812006	<b>CBL:</b> 029 B001001
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<b>Location of Construction:</b> 37 Silver St	<b>Owner Name:</b> Witt-t Llc	<b>Owner Address:</b> 378 Lakeside Dr	<b>Phone:</b> 207-663-6940
<b>Business Name:</b> nia	<b>Contractor Name:</b> n/a	<b>Contractor Address:</b> n/a Portland	<b>Phone:</b>
<b>Lessee/Buyer's Name:</b> n/a	<b>Phone:</b> n/a	<b>Permit Type:</b> Outdoor Seating	

<b>Proposed Use:</b> Cafe' / Outside seating for 4 tables	<b>Proposed Project Description:</b> Outside seating for 4 tables
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**Dept:** Zoning      **Status:** Approved with Conditions      **Reviewer:** Marge Schmuckal      **Approval Date:** 05/11/2006

**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 with Conditions      **Reviewer:** Jeanne Bourke      **Approval Date:** 05/11/2006

**Note:** **Ok to Issue:**

- 1) The tables and chairs must not block any means to egress the building
- 2) This permit approves outside seating only. Any food, alcohol or entertainment in this space requires licensing approvals from the City Clerk.



# 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.

35 Seater

Location/Address of Construction: <u>8 Milk St.</u>			<u>Portland, ME 04101</u>		
Total Square Footage of Proposed Structure <u>N/A</u>			Square Footage of Lot <u>N/A</u>		
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>009      B      001</u>		Owner: <u>Thomas Witt - building owner</u> <u>207-663-6940</u>		Telephone: <u>Shea McGonigal</u> <u>207-749-7387.</u>	
Lessee/Buyer's Name (If Applicable) <u>Shea McGonigal - tenant</u>		Owner's/Purchaser/Lessee Address <u>57 Mackworth St.</u> <u>Portland, ME</u>		cost Of Work: \$  Fee: <u>\$75.00</u>	
Current use: <u>cafe</u>			<div style="border: 1px solid black; padding: 5px; text-align: center;"> DEPT. OF BUILDING INSPECTION  CITY OF PORTLAND, ME  <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> MAY 8 2006 </div> RECEIVED </div>		
Business name: <u>The Crooked Mile</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: <u>outdoor seating</u>					
Project description: <u>Outside Seating</u>					
How many chairs? <u>8</u>			How many tables? <u>4</u>		
Please contact the City Clerk's Office @ 874-8557 before you commence any serving of food or alcohol outside.					
Contractor's name: <u>N/A</u>					
Address & telephone: _____					
Who should we contact when the permit is ready: <u>Shea McGonigal</u>					
Mailing address: _____ Phone: <u>207-749-7387.</u>					

Please submit all of the information outlined in the Outdoor Seating Application Checklist. Failure to do so will result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at [www.portlandmaine.gov](http://www.portlandmaine.gov), stop by the Building Inspections office, room 315 City Hall or call 874-8703.

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>Shea McGonigal</u>	Date: <u>5/4/06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

<b>ACORD</b>	<b>CERTIFICATE OF LIABILITY INSURANCE</b>	DATE (MM/DD/YYYY) 0510512006
PRODUCER Phons. (207)775-3763 Fax (207)775-3691 <b>HOLDEN AGENCY INSURANCE</b> PO BOX 10610 1085 BRIGHTON AVE PORTLAND ME 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.
INSURED  <b>EGBERT'S INC.</b> <b>DBA THE CROOKED MILE</b> <b>8 MILK ST</b> <b>PORTLAND ME 04101</b>		INSURERS AFFORDING COVERAGE  INSURER A: <b>Peerless Insurance Company</b> INSURER B: INSURER C: INSURER D: INSURER E:
		NAIC # 24198

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.

ISR/ADULT TR/INSUR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A YES	<input checked="" type="checkbox"/> <b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> INCT <input type="checkbox"/> LOC	BOP8611151	03/24/06	03/24/07	EACH OCCURRENCE \$ <b>2,000,000</b> DAMAGE TO RENTED MED. EXP (Any one person) PERSONAL & ADV INJURY <b>2,000,001</b> GENERAL AGGRFGATE <b>4,000,001</b> PRODUCTS-COMP/OP AGC. <b>4,000,001</b>	
	<input type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <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 (Per accident) \$ BODILY INJURY \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$
	<input type="checkbox"/> <b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO					AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$
	<input type="checkbox"/> <b>EXCESS / UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ RETENTION \$ RETENTION \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS W or W					<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER F L EACH ACCIDENT \$ E L DISEASE-EA EMPLOYEE \$ E 1 DISEASE-POLICY LIMIT \$
	<b>OTHER</b>					

City Of Portland 389 Congress Street Room 313 Portland ME 04101  Attention:	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 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   Thomas W. Holden
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### 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.



# Outdoor Seating/Dining On Private and/or City Property

Permits are required for expanding eating facilities (tables and chairs) to the outside whether it is on private and/or City Property. The fee is based on the cost of work (which in most cases would be less than \$1,000 or, a fee of **\$75.00**). The permit is good for one year and covers the time period April 15<sup>th</sup> thru September 30<sup>th</sup> of that same year. **The permit must be renewed each year prior to commencing the activity.**

All of the following information is required and must be submitted. You will also be required to fill out an Outdoor Seating Permit Application.

### A plot plan is required and must include:

- A drawing of the lot, where the building sits on the lot along with the lot and building dimensions
- The dimensional setback from the sidewalk to the building
- The location of the street, and if it's a corner lot, the intersecting streets
- The sidewalk along with its width and curbing location
- The location of the table and chair placement

### Additional requirements include:

- The tables and chairs need to be placed on the sidewalk in such a manner as to allow the free and safe passage of pedestrian traffic. If the placement of the tables and chairs creates a public safety hazard, the municipality may require them to be removed or relocated to a more suitable location.
- The sidewalk area where the tables and chairs are located must be kept neat and free from litter and debris
- You are required to produce and maintain public liability insurance coverage in an amount of not less than three hundred thousand (\$300,000) combine single limit for bodily injury, death and property damage. If the tables and chairs are on City property, the City will need to be named as additional insured.
- No food shall be prepared outside.
- If alcohol is to be served, you will need to notify the City's Business Licensing Office in room 203 of City Hall or call 874-8557. Additionally, State law requires that any outdoor area serving alcohol be segregated from the rest of the public.
- If the seating area is located on City Property, the owner of the establishment will need to sign the following indemnifying statement.

of  
see  
attached

## 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 - Portland, ME; in Portland, Maine, by the owner of the establishment being: Shea McGonigal, 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 there from, 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:

Shea McGonigal  
Establishment owner

Date:

5/4/06