



# CERTIFICATE OF LIABILITY INSURANCE



Reviewed for Code Compliance  
Inspections Division  
Approved with Conditions

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate holder in lieu of such endorsement(s).

Date: 10/21/14

**PRODUCER**  
 Cross Insurance-Portland  
 2331 Congress Street  
 Portland ME 04102

**INSURED**  
 A & W Foods, LLC  
 DBA Ebb & Flow Restaurant  
 c/o Nova Seafood  
 555 Commercial St.  
 Portland ME 04101

**CONTACT NAME:** Sunny Quintal  
**PHONE (A/C No. Ext):** (207) 780-1677 **FAX (A/C No.):** (207) 780-6377  
**E-MAIL ADDRESS:** squintal@crossagency.com

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Liberty Mutual	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	
INSURER F:	

**COVERAGES** CERTIFICATE NUMBER: CL1471614380 REVISION NUMBER:

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.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURER	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	X		BINDERPKG	6/20/2014	6/20/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY	<input type="checkbox"/> PROJECT	<input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 2,000,000
	<input type="checkbox"/> AUTOMOBILE LIABILITY						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR					PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					\$
	<input type="checkbox"/> DED	<input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						AGGREGATE \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	<input type="checkbox"/> Y/N	N/A				\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATUTORY LIMITS
							OTHER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Certificate holder is also an additional insured with respect to general liability. Refer to policy for exclusionary endorsements and special provisions.

### CERTIFICATE HOLDER

### CANCELLATION

City of Portland  
389 Congress St.  
Portland, ME 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Sunny Quintal/sq1

# Better Letter

HAND PAINTED SIGNS

Client:  
Ebb & Flow

Location:  
100 Commercial St.

Dimensions:  
30"x37.5"x0.75"

Material:  
Medium Density Overlay  
Elastrometric Sealant  
Enamel Paint  
and Powder Coated Steel

Install:  
going into pre existing  
holes in the building



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Soley Wharf LLC  
100 Commercial Street  
Portland, ME 04101

Date: 10/21/14

September 16, 2014

City of Portland  
Portland, ME

RE: A&W Foods, LLC 100 Commercial Street Portland, ME 04101

To Whom It May Concern:

This letter shall serve as permission from Soley Wharf, LLC (Landlord) to A&W Foods, LLC (Tenant) for the attached exterior sign from Better Letter Hand Painted Signs.

Yours truly,

Todd L. Dominski (Owners Authorized Representative)

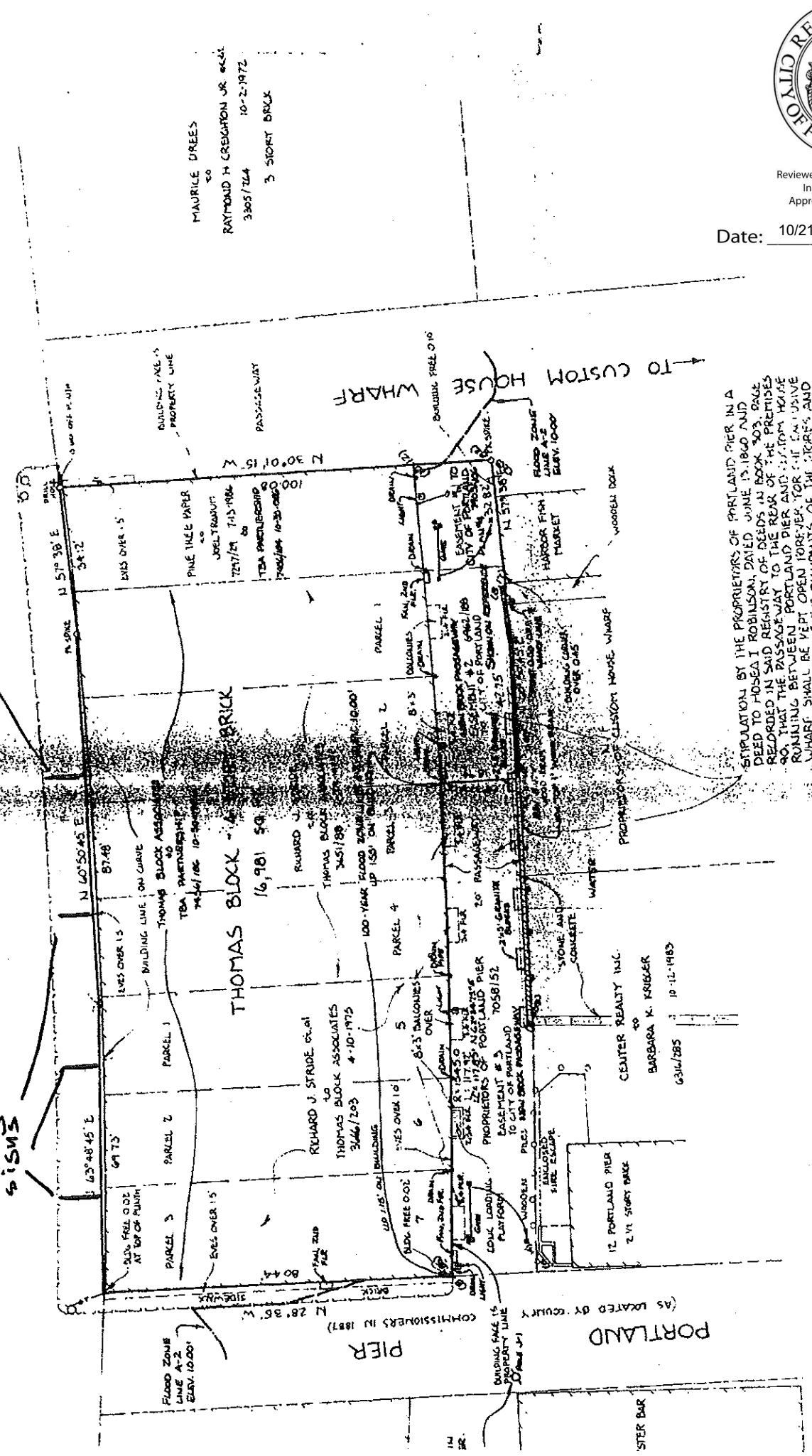
100 Commercial St.

Proposed Sign Location

Existing Signs

Street

Location



MAURILE DREES  
 TO  
 RAYMOND H CREIGHTON JR 6631  
 3305/264 10-2-1972  
 3 STORY BRICK

Date: 10/21/14



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STIPULATION BY THE PROPRIETORS OF PORTLAND PIER IN A DEED TO HOSEA I ROBINSON, DATED JUNE 13, 1860 AND RECORDED IN SAID REGISTRY OF DEEDS IN BOOK 303, PAGE 40, THAT THE PASSAGEWAY TO THE REAR OF THE PREMISES RUNNING BETWEEN PORTLAND PIER AND 100 COMMERCIAL WHARF SHALL BE KEPT OPEN FOREVER FOR THE EXCLUSIVE USE AND BENEFIT OF THE OCCUPANTS OF THE PIER'S AND WAREHOUSES ON THE SOUTHEASTERNLY SIDE OF COMMERCIAL STREET BETWEEN PORTLAND PIER AND CUSTOM WARE WHARF

STER BAR



# Signage / Awning Permit Application



If you or the property owner owes real estate or personal property taxes or any other charges on an payment arrangement MUST be made before permits are accepted.

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<b>Location/Address:</b> 100 Commercial Street		Date:	10/21/14
<b>Tax Assessor's Chart/Block/Lot (CBL)</b> Chart: 035 - C001 - 001	<b>OWNER Name/Address:</b> Name: Solely Mart, LLC Address: 100 Commercial St Portland, ME 04109	Telephone:	207-775-2252
<b>LEASEE/BUYER Info (if Applicable)</b> Name: A2 Woods, LLC Address: 100 Commercial St Portland, ME 04101 Phone: _____ E-Mail: wdaurway@gmail.com	<b>CONTRACTOR</b> Name: Will Sears Address: _____ Phone: 215-813-6852 E-Mail: willsears@gmail.com	E-Mail:	tdominiski@eastbrown.com
Awning Fee = Cost of Work: \$ _____ (\$25/first \$1000; \$11 each additional \$1000)		Total S.F. signage \$	15.62 (Sq Ft = 7.81 x \$2.00)
		SF + \$30 Fee:	\$ 30
		Historic (\$75):	\$ 75
		Awning Fee:	\$ _____
		<b>TOTAL FEE:</b>	\$ 120.62

Who should we contact when the permit is ready: Name: William D'Aurway  
Address: 100 Commercial St Portland, ME 04101  
Phone: 919.417.1798  
E-Mail: wdaurway@gmail.com

Tenant/allocated building space frontage (in feet): Length: 74 Height: \_\_\_\_\_  
Lot frontage (in feet): 74 Single Tenant or Multi-Tenant Lot: Multi

Current Specific Use: Full service restaurant  
If vacant, what was prior use: Full service restaurant  
Proposed Use: Full service restaurant

**Information on proposed sign(s)**  
Freestanding (e.g. pole) sign? YES  NO  Dimensions proposed: \_\_\_\_\_ (sf); Height from grade: \_\_\_\_\_ sf  
BLDG Wall Sign (attached to bldg.)? YES  NO  Dimensions proposed: 7.81 sf

**Proposed Awning:** YES  NO  If yes, is awning backlit? YES  NO   
Height of awning \_\_\_\_\_ Length of awning \_\_\_\_\_ Depth of awning \_\_\_\_\_  
Is there any communication, message, trademark or symbol on it? YES \_\_\_\_\_ NO \_\_\_\_\_  
If yes, total square footage of panels with communication, message, trademark or symbol on it: \_\_\_\_\_ sf

**Information on existing and previously permitted signage:**  
Freestanding (e.g. pole) sign? YES  NO  Dimensions proposed: \_\_\_\_\_ ft X \_\_\_\_\_ ft; Height from grade: \_\_\_\_\_  
BLDG Wall Sign (attached to bldg.)? YES  NO  Dimensions proposed: NA ft X NA ft  
Awning? YES  NO  total sq ft of panels with communication on it: \_\_\_\_\_ sf

A site sketch and building sketch showing exactly where existing and proposed signage is located MUST be provided.  
Sketches and/or pictures of proposed signage and existing building are also required.

Please submit all information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the 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 207-874-8703.

I hereby certify 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: Date: 9/17/2014