Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

LAI	I UIO	CARD	ON	PRINCIPAL	<b>LUCIA IN</b>	AE OF MO
	4			F DORT		PERMIT

Please Read Application And Notes, If Any, Attached

INCRECTION

PERMIT ISSUED

Fermit Number 0604162022

032 D004001

This is to certify that

**WELLIN & CO** 

has permission to

AT 85 EXCHANGE ST

Outside Seating- 8 Tables at 4 Chair

provided that the person or persons rm or persons the construction of the provisions of the Statutes of the and of the construction, maintenance and the construction, maintenance and the construction of the application on file in this department.

Apply to Public Works for street line and grade if nature of work requires such information.

en and ven perme on muse en perme on prode de perme on prode de perme on prode de perme on prode de perme on perme on perme osed-in 4 UR NO.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Department Name

PENALTY FOR REMOVING THIS CARD

Director - Building & inspection Services

City of Portland, Maine 389 Congress Street, 04101	_		1	od-0416 PERMIT'IS	SUED CBL: 032 p004001		
Location of Construction:	)wner Name:	207) 071 071		r Address:	Phone:		
85 EXCHANGE ST	WELLIN & C	O		BOX 533   APR 2 F			
Business Name:	Contractor Name			actor Address:	Phone		
				OUTV OF DOI	OTI ALID		
Lessee/Buyer's Name	'hone:	'hone:		it Type CITY UL FUL	Zone:		
			Out	door Seating	B3		
Past Use:	'roposed Use:		CEO District:				
Commercial/ O'Naturals	O'Naturals/ Ou	itside Seating- 8					
	Tables and 24	and 24 Chairs		DELI. Approved	Group Ordinance		
Proposed Project Description:				V//	- /a/		
Outside Seating- 8 Tables and	24 Chairs		Signat	ture ! Sig	gnature		
		Action: Approv		n: Approved Approve	ed w/Conditions Denied		
		Signature:		ature:	Date:		
Permit Taken By: Idobson	Date Applied For: 03/29/2006		Zoning Approval				
Idouson	03/27/2000	Special Zone or Revie	ws	Zoning Appeal	Historic Preservation		
		Shoreland		Variance	Not in District or Landmarl		
		Wetland	Wetland Mis		Does Not Require Review		
		Flood Zone		Conditional Use	Requires Review		
		Subdivision		Interpretation	Approved		
		Site Plan		Approved	Approved w/Conditions		
		Maj Minor MM		Denied	Denied  Denied		
		Oxuland there pate: 4/10/06	KI^	Date	Date: Cav. 25 assports		
					Any exterior work  Date: regions a superior  Tevicus & approvat  How Hispric  Preservation		
					Treservation		

#### **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
DEGRONGIDI E DEDGON IN CHARGE OF WORK THEE		DATE	DHONE



## **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: \$\mathcal{G}\$	Exche e St						
Total Square Footage of Proposed Structure	Square Footage of Lot						
Tax Assessor's Chart, Block & Lot	Owner:	Telephone:					
		329-8307					
Chart# Block# Lot#	Wellin + Co	327-8327					
,	· ·						
Lessee/Buyer's Name (If Applicable)	Owner's/Purchaser/Lessee Address	cost Of					
	83 Eachange 57 PHId, ME 04/01	Work:\$					
	P+121 MZ 04/01	Fee: \$75.00					
	1100	166. 475.00					
Current use: Pesturmt							
Business name: 2'Nancal's		<del></del>					
If the location is currently vacant, what was price	or like:	<del></del>					
Approximately how long has it been vacant							
Proposed use: _outsicuscaning							
Project description: Outside Seating							
How many chairs? 27 How many t	ables? <u>/</u>						
Diagram of the City Chalds Off of 8 97	4 05571 - f	-f 5 - 1 - n -1 - h -1 - n + i d -					
Please contact the City Clerk's Office @ 874	4-6557 before you commence any serving	of reaconoroutside.					
Contractor's name:							
Address & telephone: 47 Exelogo St Pt/d, mE 04/21							
Who should we contact when the permit is reach	Contractor's name: Address & telephone: $47$						
Mailing address:	Mailing address: Phor e: $329 - 8307$						

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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, 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:	Date:	3/22/06

This is not a permit; you may not co



Signed and acknowledged:

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

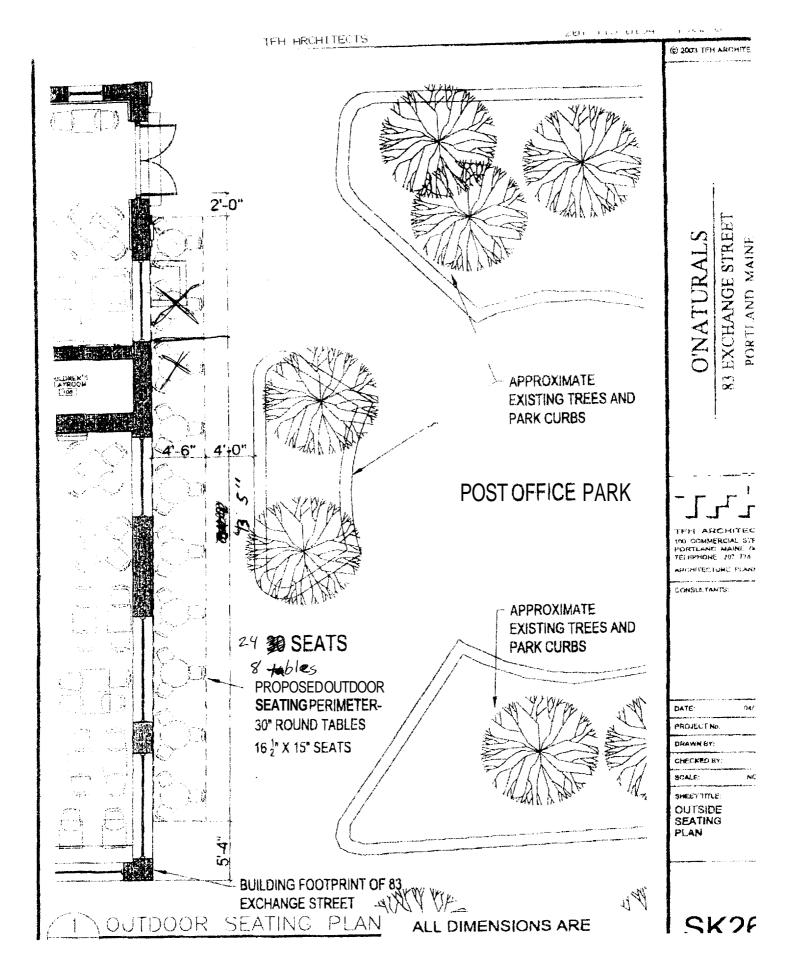
Permits are required for expanding eating facilities (tables and chairs) to the outside whether it is on private and/or City Property. The fee is based on the cost of work (which in most cases would be less that \$1,000 or, a fee of \$75.00). The permit is good for one year and covers the time period April 15th thru September 30th 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:
□ Th □ Th □ Th	drawing of the lot, where the building sits on the lot along with the lot and building dimensions e dimensional setback from the sidewalk to the building e location of the street, and if it's a corner lot, the intersecting streets e sidewalk along with its width and curbing location e location of the table and chair placement
Addit	ional requirements include:
pa m	he tables and chairs need to be placed on the sidewalk in such a manner as to allow the free and safe assage of pedestrian traffic. If the placement of the tables and chairs creates a public safety hazard, the unicipality may require <b>them</b> 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 liter and debris.
□ Youth	ou are required to produce and maintain public liability insurance coverage in an amount of not less at three hundred thousand (\$300,000) combine single limit for bodily injury, death and property image. If the tables and chairs are on City property, the City will need to be named as additional insured.
□ If C	o food shall be prepared outside. alcohol is to be served, you will need to notify the City's Business Licensing Office in room 203 of ity Hall or call 874-8557. Additionally, State law requires that any outdoor area serving alcohol be gregated 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 llowing indemnifying statement.
	Conditions for Sidewalk Occupancy Permit
or rear the own as: <u>2</u> indemn damage arising expense tangible	consent and agreement relating to occupancy of the City of Portland sidewalk in the front, side, and of the building at the stated location:  (3) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1

Establishment owner

Date: 3/22/06



4	AC	ORL	CERTIFIC	CATE OF LIABI	LITY INS	SURANC	E		TE (MM/DD/YYYY) 3/27/2006
PRODUCER (914) 761-9000 FAX (914)761-3749					THIS CER	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE			
SKCG Group, Inc.					HOLDER.	THIS CERTIFICA	RIGHTS UPON THE CE TE DOES NOT AMEND	:KIII ). EX	TENDOR
			., 14th Fl				FFORDED BY THE PO		
W	White Plains, NY 10601				INSURERS A	AFFORDING CO	VERAGE		NAIC#
INS	JRED	O'Natu	ral's Inc.		INSURER A: C	ontintental	Casualty		20443C
		c/o Ma	nc McCabe		INSURER B:				
		44 Exc	hange Street, Su	uite 305	INSURER C				
		Portla	nd, ME 04101		INSURER D				
					INSURER E				
30	VER	AGES							
T	HE PO	OLICIES O	F INSURANCE LISTED BE	LOW HAVE BEEN ISSUED TO THE I	NSURED NAMED A	BOVE FOR THE PO	DLICY PERIOD INDICATED	.NOT	WITHSTANDING
N	AY P	ERTAIN, T	HE INSURANCE AFFORD	N OF ANY CONTRACT OR OTHER DESCRIBED HEAVE BEEN REDUCED BY PAID	HEREIN IS SUBJECT				
INSR LTR	ADD'L		TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)			
			LIABILITY	C1098613699	11/21/2005	11/21/2006	EACHOCCURRENCE	\$	1,000,000
	İ	Х сом	MERCIAL GENERALLIABILITY				DAMAGE TO RENTED PREMISES (Ea occurence)	\$	200,000
	]		CLAIMS MADE OCCUR				MED EXP (Any one person)	\$	5,00(
Α							PERSONAL & ADV INJURY	\$	1,000,000
		<u> </u>					GENERAL AGGREGATE	\$	2,000,000
	İ		GREGATE LIMIT APPLIES PER:				PRODUCTS-COMP/OP AGG	\$	2,000,000
			AUTO PRO- CY JECT LOC						
		SAP!	DWNED AUTOS BILE LIABILITY EDULED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$	
		1 1	SWNED AUTOS EDWLEBAUTOS				BODILY INJURY (Per person)	\$	
		- I	-OWNEDAUTOS				BODILY INJURY (Per accident)	s	
		-					PROPERTY DAMAGE (Peraccident)	\$	
		GARAGE	LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
		ANY	AUTO				OTHERTHAN EA ACC	\$	
							AUTO ONLY: A C C		
		EXCESS/L	MBRELLA LIABILITY				EACHOCCURRENCE	\$	
		occ	UR CLAIMS MADE				AGGREGATE	\$	
		<u></u>						\$	
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			ENTION \$				WC STATU- OTH-	\$	
		RKERS COM LOYERS' LI	IPENSATIONAND ABILITY				I TORY LIMITS   ER_	_	
			DR/PARTNER/EXECUTIVE ER EXCLUDED?				E L EACHACCIDENT	\$	
	If yes	s. describe ur	nder				E L DISEASE - EA EMPLOYEE		
	OTH		SIONS below				E L DISEASE - POLICY LIMIT	\$	
c s		3 h	ol er is here y	LES/EXC USIONS AC BY EN ORS named as adc iona 7	WENT/SPECIAL PRI	isions espects to:	"Outdoor Seating	g".	
						-		_	
									· ·
					SHOULD ANY	OF THE ABOVE DESC	RIBED POLICIESBE CANCELL	EDRF	FORE THE
					I	EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL			
	City of Portland						E SHALL IMPOSE NO OBLIGAT		
			ngress Street			OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.			
	Portland, ME 04101								
					Thomas Kozera/DANI Thomas R. Kosua				

### **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 & 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 <code>insurer(s)</code>, 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.

City of Portland, M	aine - Building or Use Permi	it	Permit No:	Date Applied For:	CBL:
389 Congress Street, 0	4101 Tel: (207) 874-8703, Fax:	(207) 874-8716	06-0416	03/29/2006	032 D004001
Location of Construction:	Owner Name:	C	wner Address:		Phone:
85 EXCHANGE ST	WELLIN & CO	1	PO BOX 533		
Business Name:	Contractor Name:	C	Contractor Address:		Phone
(D	701				
Lessee/Buyer's Name	Phone:		ermit Type:		
		<u> </u>	Outdoor Seating		
Dept: Zoning Note:	Status: Approved with Condition	ns <b>Reviewer:</b>	Ann Machado	Approval Da	te: 0411012006 Ok to Issue: ☑
1) This permit is good f	For this year & covers the time period	from April 15th	September 30th		
2) ANY exterior work r	requires a separate review and appro-	val thru Historic P	reservation		
All outdoor seating is and cleared for pedes	s subject to adjustment at any time fi strian use.	rom the City's traff	ic engineer who en	nsures that the City si	dewalk is open
Dept: Building	Status: Approved with Condition	ns <b>Reviewer:</b>	Tammy Munson	Approval Da	te: 04/20/2006
Note:				•	Ok to Issue: 🗹
1) The table must NOT	block any means of egress from any	buildings.			