

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
 Application And
 Notes, If Any,
 Attached

BU **PERMIT** ION

This is to certify that Top Of Exchange Llc /Sonnys
 has permission to Outside seating for 16 chairs and 4 tables
 AT 85 Exchange St

Permit Number: 000872
PERMIT ISSUED
 SEP 16 2009
 052-D004001
 CITY OF PORTLAND

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 lath or other work closed-in. 24 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

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

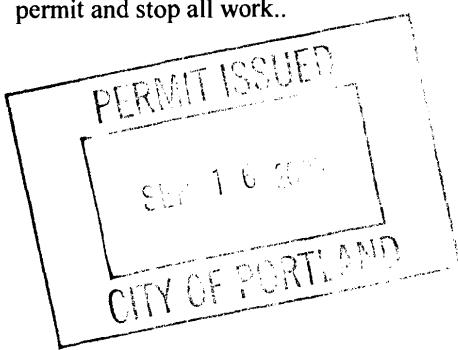
Permit No: 09-0872	Issue Date:	CBL: 032 D004001
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Location of Construction: 85 Exchange St	Owner Name: Top Of Exchange Llc	Owner Address: 42 Market St	Phone:
Business Name:	Contractor Name: Sonnys	Contractor Address: 85 Exchange St Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	Zone: B-3

Past Use: Restaurant / O'Naturals	Proposed Use: Restaurant / Sonny's; Outside seating for 16 chairs and 4 tables.	Permit Fee: \$368.00	Cost of Work: \$368.00	CEO District: 1
Proposed Project Description: Outside seating for 16 chairs and 4 tables.		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>U</i> Type: <i>outdoor seating</i>	
		Signature: _____		Signature: _____
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: gg	Date Applied For: 08/12/2009	Zoning Approval		
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<ol style="list-style-type: none"> 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.. 	Special Zone or Reviews <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>9/16/09 ABM</i>	Zoning Appeal <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: _____	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input checked="" 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>ABM</i>
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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

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-0872	Date Applied For: 08/12/2009	CBL: 032 D004001
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Location of Construction: 85 Exchange St	Owner Name: Top Of Exchange Llc	Owner Address: 42 Market St	Phone:
Business Name:	Contractor Name: Sonnys	Contractor Address: 85 Exchange St Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Outdoor Seating	

Proposed Use: Restaurant / Sonny's; Outside seating for 16 chairs and 4 tables.	Proposed Project Description: Outside seating for 16 chairs and 4 tables.
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Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Ann Machado **Approval Date:** 09/16/2009

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 with Conditions **Reviewer:** Tammy Munson **Approval Date:** 09/16/2009

Note: **Ok to Issue:**

- 1) This permit approves outside seating only. Any alcohol or entertainment in this space requires licensing approvals from the City Clerk.
- 2) The outside dining permit is approved for the area delineated at the inspection and stated on the permit, and must be kept on site. THIS PERMIT MUST BE RENEWED ANNUALLY
- 3) The tables and chairs must not block any means of egress of any building, even during storage.

Comments:

8/14/2009-gg: emailed PW to schedule for outdoor dining. /gg

8/26/2009-Ldobson: Waiting for City Council Approval before permit can be issued. Sq Ft has been verified

09 0872



Outdoor Dining 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.

<input checked="" type="checkbox"/> New Application for Outside Dining <input type="checkbox"/> Renewal Application for Outside Dining			City Clerk signature for liquor license approval: _____ or Pending Council Date <u>9-9-09</u>		
Location/Address of Outdoor Seating: _____					
Total Square Footage of Proposed Seating Area ¹ <u>282</u>		Square Footage of Lot <u>83 Exchange St.</u>			
Tax Assessor's Chart, Block & Lot Chart# <u>032</u> Block# <u>D</u> Lot# <u>004</u>	Phone#: <u>272 3004</u>	Owner: <u>TOP OF EXCHANGE LLC</u>			
Applicant * must be owner or Lessee Name: <u>JAY VILLANI</u> Address: <u>43 CLARK ST</u> City, State & Zip: <u>PORTLAND . ME . 04102</u>		Lessee/Buyer's Name: (If Applicable)	Annual Fee: \$80 Total Sq. Ft. <u>282</u> Sq. Ft. Fee: \$ Total Fee: \$		
Current use: <u>O'NATURALS RESTAURANT</u> Business name: <u>SONNY'S (TUFFY MCNUFF LLC)</u> Seating area dimensions: <u>282 SQ FT</u> How many chairs? <u>16</u> How many tables? <u>4</u> <input checked="" type="checkbox"/> Yes Alcohol is served. <input type="checkbox"/> No Alcohol being served.					
Who should we contact for the pre-inspection: <u>JAY VILLANI</u> Mailing address: <u>43 CLARK ST</u> Phone: <u>272 3004</u>					

02 DM

Please submit all of the information outlined in the Outdoor Dining 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, 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:

G. Bowcutt

Date:

8-12-09

¹ In no instance shall the total square footage of dining area equal more than 10% of park space, unless the applicant receives a waiver from the Director of Parks and Recreation or his or her designee. **This is not a permit; you may not commence ANY work until the permit is issued.**



OUTDOOR DINING PERMIT CHECKLIST

Permits are required for expanding food service establishments to the outside on City Property. The annual fee is \$80.00 plus \$2.00 per square foot of dining area on streets, sidewalks or other public ways and \$80.00 plus \$6.00 per square foot of dining area in city parks. For purposes of fee calculation, the area abutting the buildings which border Monument Square and extending ten (10) feet from the facade of said buildings shall be considered a sidewalk. The ten (10) foot area shall be measured from that portion of the facade that protrudes furthest into the sidewalk. The area beyond the ten (10) foot sidewalk shall be considered park space.

Outdoor dining is permitted year round under the permit; however, furniture must be removed in inclement weather to allow for sidewalk snow removal. **The permit must be renewed each year.**

All of the following information is required and must be submitted. You will also be required to fill out an Outdoor Dining 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, including dimensions
- (NOTE: there must be a minimum of four feet of open sidewalk from the outer boundary of the seating area to the curb, and a minimum of five feet on corners, and egress from the building must be maintained free of obstruction per the building code and NFPA Life Safety Code).

Additional Requirements:

- The permit holder is required to produce, at the time of submission, and maintain public liability insurance coverage in an amount of not less than four hundred thousand dollars (\$400,000) combined single limit for bodily injury, death and property damage, naming the City as an additional insured thereon.

All permits for outdoor dining are issued subject to the following conditions:

- The tables and chairs must be placed within the permitted area on the sidewalk in such a manner as to allow the free and safe passage of pedestrian traffic. If the tables and chairs are moved and located outside of the permitted outdoor seating area, they must be relocated to within the permitted area. Failure to contain the tables and chairs to the permitted area may result in a reduced permitted area or a revocation of the permit.

Administrative Regulation

OUTDOOR DINING PERMITS

I. **Purpose**

It is the purpose of this regulation to establish the policy of the City and the procedures to be used for the issuance of outdoor dining permits pursuant to City Code section 25-26 et seq.

II. **Policy**

It is the policy of the City to permit food service establishments to expand their businesses to the outdoors on city sidewalks, public ways and other public places, including parks. Such expansions onto city property shall be permitted on a case-by-case basis, upon application to the city and payment of a fee, in accordance with certain conditions.

It is the policy of the City that due to the high value of downtown park space, expansion of a private business into such areas shall require a higher fee than expansion into a sidewalk or other public way. Further, in no instance shall the total square footage of dining area equal more than 10% of park space, unless the applicant obtains a waiver from the Director of Parks and Recreation or his or her designee.

The following procedures are to be followed in the issuance of outdoor dining permits.

III. **Procedures**

A. **Application and Permit**

1. Upon a form provided by the City, a food service establishment shall apply to the Inspections Division for an outdoor dining permit.
2. The application shall contain a drawing of the dining area that the applicant intends to occupy that includes the location of the street, the sidewalk width and curbing location, and the location of chair and table placement.
3. Upon receipt of a new application, city staff will conduct a site visit to ensure that the measurements provided are correct and that there is sufficient open sidewalk area remaining in accordance with the Americans with Disabilities Act. The permit area will be permanently delineated to ensure compliance.

B. **Permit Conditions**

1. There must be a minimum of four feet of open sidewalk from the outer boundary of the seating area to the curb, and a minimum of five feet on a corner, per the Americans with Disabilities Act, and egress from the building must be maintained free of obstruction

Gayle Guertin - outside dining, 83 Exchange Street

From: Gayle Guertin
To: Marc Spiller; Thomas Higgins
Date: 8/14/2009 11:00 AM
Subject: outside dining, 83 Exchange Street
CC: Gayle Guertin; Tammy Munson

Public Works and the Inspections office needs to schedule for outdoor dining @ 83 Exchange Street (CBL: 032 D004).

What works for you??

Thank You Gayle



INSURANCE BINDER

DATE (MM/DD/YYYY)
8/11/2009

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON REVERSE SIDE OF THIS FORM

AGENCY Clark Associates 2385 Congress Street P O Box 3543 Portland ME 04104		COMPANY Travelers Insurance Co.	BINDER # B0981124326
PHONE (A/C, No, Ext): (207) 774-6257 FAX (A/C, No): (207) 774-2994		DATE EFFECTIVE TIME 8/11/2009 12:01	EXPIRATION DATE TIME 9/10/2009 12:01 AM
CODE:	SUB CODE:	THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY #: TBD	
AGENCY CUSTOMER ID: 00051839		DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY (Including Location)	
INSURED Tuffy McNutt, LLC, DBA: Sonny's 685 Congress Street Portland ME 04101		83 Exchange Street Portland, ME 04101	

COVERAGES**LIMITS**

TYPE OF INSURANCE	COVERAGE/FORMS	DEDUCTIBLE	COINS %	AMOUNT
PROPERTY CAUSES OF LOSS <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC	Business Personal Property	250	80	100,000
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	Liquor Liability - \$1,000,000 RETRO DATE FOR CLAIMS MADE:			EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES \$ 50,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
VEHICLE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ MEDICAL PAYMENTS \$ PERSONAL INJURY PROT \$ UNINSURED MOTORIST \$
VEHICLE PHYSICAL DAMAGE DED <input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES COLLISION: _____ OTHER THAN COL: _____				ACTUAL CASH VALUE \$ STATED AMOUNT \$
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	RETRO DATE FOR CLAIMS MADE:			EACH OCCURRENCE \$ AGGREGATE \$ SELF-INSURED RETENTION \$
WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY				WC STATUTORY LIMITS \$ E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
SPECIAL CONDITIONS/ OTHER COVERAGES				FEES \$ TAXES \$ ESTIMATED TOTAL PREMIUM \$

NAME & ADDRESS

	MORTGAGEE	ADDITIONAL INSURED
	LOSS PAYEE	
	LOAN #	
	AUTHORIZED REPRESENTATIVE Gregg Kitter/BSON	

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 8/11/2009
PRODUCER (207) 774-6257 FAX: (207) 774-2994 Clark Associates 2385 Congress Street P O Box 3543 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 Tuffy McNutt, LLC, DBA: Sonny's 685 Congress Street Portland ME 04101		INSURERS AFFORDING COVERAGE INSURER A: Travelers Insurance Co. NAIC # 39357 INSURER B: INSURER C: INSURER D: INSURER E:

COVERAGES

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.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	TBD	8/11/2009	8/11/2010	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
		GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COMP/OP AGG \$ 2,000,000
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input type="checkbox"/> HIRED AUTOS				
		<input type="checkbox"/> NON-OWNED AUTOS				
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
						AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
		<input type="checkbox"/> DEDUCTIBLE				\$
		<input type="checkbox"/> RETENTION \$				\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				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
 Certificate holder is named as additional insured, with regards to general liability arising out of the activities of the insured.

CERTIFICATE HOLDER

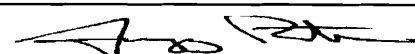
Top of Exchange, LLC
 42 Market Street
 Portland, ME 04101

CANCELLATION

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

Gregg Ritter/BSON



83 EXCHANGE STREET
PORTLAND, MAINE



TFH ARCHITECTS
100 COMMERCIAL STREET
PORTLAND MAINE 04101
TELEPHONE 207 716 6141
ARCHITECTURE PLANNING

CONSULTANTS:

DATE: 03/19/03

PROJECT No. 0224

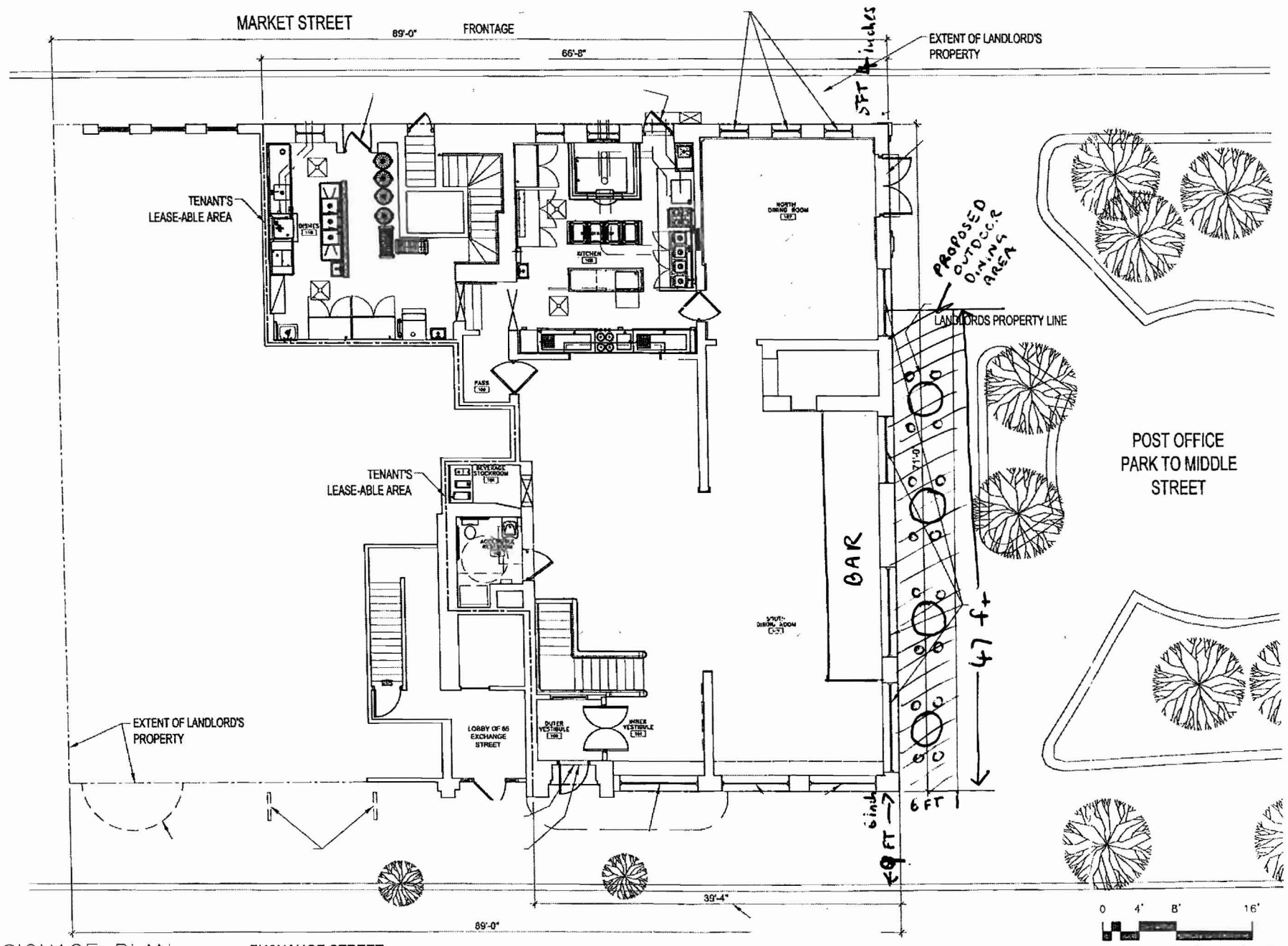
DRAWN BY: RJS

CHECKED BY:

SCALE: NOTED

SHEET TITLE:
SIGNAGE
PLAN

SK22



1 SIGNAGE PLAN
SK22 3/32" = 1'-0"

TABLE DIMENSION - 28 INCHES WIDE

