

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that CLUB, CUMBERLAND

Located ~~AT SPRING ST~~ 127 Spring

Job ID: 2011-04-870-OSD

CBL: 039 - - A - 032 - 001 - - - -

has permission to Provide outdoor dining for the 2011 season
provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

06/01/2011

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

EXPIRED

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

1. Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Penny St. Louis

Job ID: 2011-04-870-OSD

Located At: 3 SPRING

CBL: 039 - - A - 032 - 001 - - - -

Conditions of Approval:

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.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-04-870-OSD	Date Applied: 4/26/2011	CBL: 039 - - A - 032 - 001 - - - - -	
Location of Construction: 3 SPRING ST	Owner Name: CUMBERLAND CLUB	Owner Address: 116 HIGH ST PORTLAND, ME - MAINE 04101	Phone:
Business Name: Styxx - Marcus Verrill	Contractor Name:	Contractor Address:	Phone: 420-5253
Lessee/Buyer's Name:	Phone:	Permit Type: OUTDOOR - Outdoor Seating	Zone: B-3
Past Use: Restaurant/Bar	Proposed Use: Same: Restaurant/Bar - to provide outdoor dining for the 2011 season	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input checked="" type="checkbox"/> N/A	Inspection: Use Group: Type: <i>outside dining</i> Signature: <i>[Signature]</i>
Proposed Project Description: 3 Spring St "Styxxx" - outdoor dining		Pedestrian Activities District (P.A.D.)	
Permit Taken By: Lannie		Zoning Approval	

Special Zone or Reviews	Zoning Appeal	Historic Preservation
<input type="checkbox"/> Shoreland	<input type="checkbox"/> Variance	<input type="checkbox"/> Not in Dist or Landmark
<input type="checkbox"/> Wetlands	<input type="checkbox"/> Miscellaneous	<input type="checkbox"/> Does not Require Review
<input type="checkbox"/> Flood Zone	<input type="checkbox"/> Conditional Use	<input type="checkbox"/> Requires Review
<input type="checkbox"/> Subdivision	<input type="checkbox"/> Interpretation	<input type="checkbox"/> Approved
<input type="checkbox"/> Site Plan	<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/Conditions
<input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM	<input type="checkbox"/> Denied	<input type="checkbox"/> Denied
Date: <i>5/24/11</i>	Date:	Date:

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	PHON



Sch Wed 9/11/11

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 type="checkbox"/> New Application for Outside Dining <input checked="" type="checkbox"/> Renewal Application for Outside Dining		
City Clerk signature for liquor license approval: <u>Kathleen Jones</u> or Pending Council Date _____		
Location/Address of Outdoor Seating: <u>STYXX VC 3 Spring St. Portland, ME 04101</u>		
Total Square Footage of Proposed Seating Area ¹		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>32</u> Block# <u>P</u> Lot# <u>4</u>	Phone#:	Owner:
Applicant * must be owner or Lessee Name: <u>MARCUS VERRILL</u>	Lessee/Buyer's Name: (If Applicable)	Annual Fee: <u>\$80</u>
Address: <u>254 Spring St</u>		Total Sq. Ft. RECEIVED
City, State & Zip: <u>Portland, ME 04101</u>		Sq. Ft. Fee: \$
		Total Fee: \$
Dept. of Building Inspections City of Portland Maine		
Current use: <u>SIDE WALK</u>		
Business name: <u>STYXX</u>		
Seating area dimensions: _____		
How many chairs? <u>12</u> How many tables? <u>6</u>		
<input checked="" type="checkbox"/> Yes Alcohol is served. <input type="checkbox"/> No Alcohol being served.		
Contact 420-5253 Marcus		
Who should we contact for the pre-inspection: <u>Good copy MARCUS VERRILL</u>		
Mailing address: <u>254 Spring Street</u> Phone: <u>207-828-0822</u>		

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 online at www.portlandmaine.gov, stop by the Building Inspections office, room 315 City Hall or call 874-8700.

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:

Marcus Verrill

Date: 4/29/11

Dept. of Building Inspections
City of Portland Maine

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.**

- The permit holder is responsible for keeping the outdoor seating area clean. The sidewalk area where the tables and chairs are located must be kept neat and free from litter and debris.
- No food shall be prepared outside.
- If alcohol is to be served, the permit holder must notify the City's Business Licensing Office in room 203 of City Hall or by telephone at 874-8557 and obtain approval for the service of alcohol outdoors. Additionally, State law requires that any outdoor area serving alcohol be segregated from the rest of the public.
- All tables and chairs shall be removed prior to a predicted snowfall and while any snow or ice exists within the designated outdoor seating area or within four feet from the boundaries thereof. The City will not be responsible for damage to any tables, chairs or other property that is not properly removed when the City is engaged in sidewalk maintenance activities.
- The permit holder shall comply with all applicable rules and regulations implemented by the city regarding outdoor dining.

Failure to comply with any of the above conditions will result in revocation or non-renewal of the permit.

I/We fully understand that the City of Portland, its agents, officers and employees accept no responsibility and will not be liable for any injury, harm or damage to my/our person or property arising out of the establishment's occupancy of the sidewalk or park space. To the fullest extent permitted by law, I/We do hereby agree to assume all risk of injury, harm or damage to my/our person or property (including but not limited to all risk of injury, harm or damage to my/our property cause by the negligence of the City of Portland, its agents, officers or employees) arising out of the establishment's occupancy of the sidewalk or park space. I/We hereby agree, to the fullest extent permitted by law, to defend, indemnify and hold harmless the City of Portland, its agents, 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 or park space, 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: Marcus J. Verrill Date: 4/18/11
 Printed name MARCUS VERRILL
 Establishment STYXX
 Location 3 SPRING STREET



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/22/2011

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 AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER Seigney-Lyons Insurance Abenaki Professional Park PO Box 1249 Wells ME 04090-1249		CONTACT NAME: Carolyn Sanford PHONE (A/C, No, Ext): (207) 646-8388 FAX (A/C, No): (207) 646-6935 E-MAIL ADDRESS: carol@seigney-lyons.com PRODUCER CUSTOMER ID #: 00032390	
INSURED Styxx PO Box 502 Portland ME 04112		INSURER(S) AFFORDING COVERAGE INSURER A: Great American Custom INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 0009

COVERAGES **CERTIFICATE NUMBER:** City of Portland **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	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY						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	<input checked="" type="checkbox"/>		PAC 8782306-01	9/3/2010	9/3/2011	MED EXP (Any one person) \$ 1,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY						
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE						\$
	<input type="checkbox"/> RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)		<input type="checkbox"/> Y/N	N/A			WC STATUTORY LIMITS OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						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 Additional Insured:

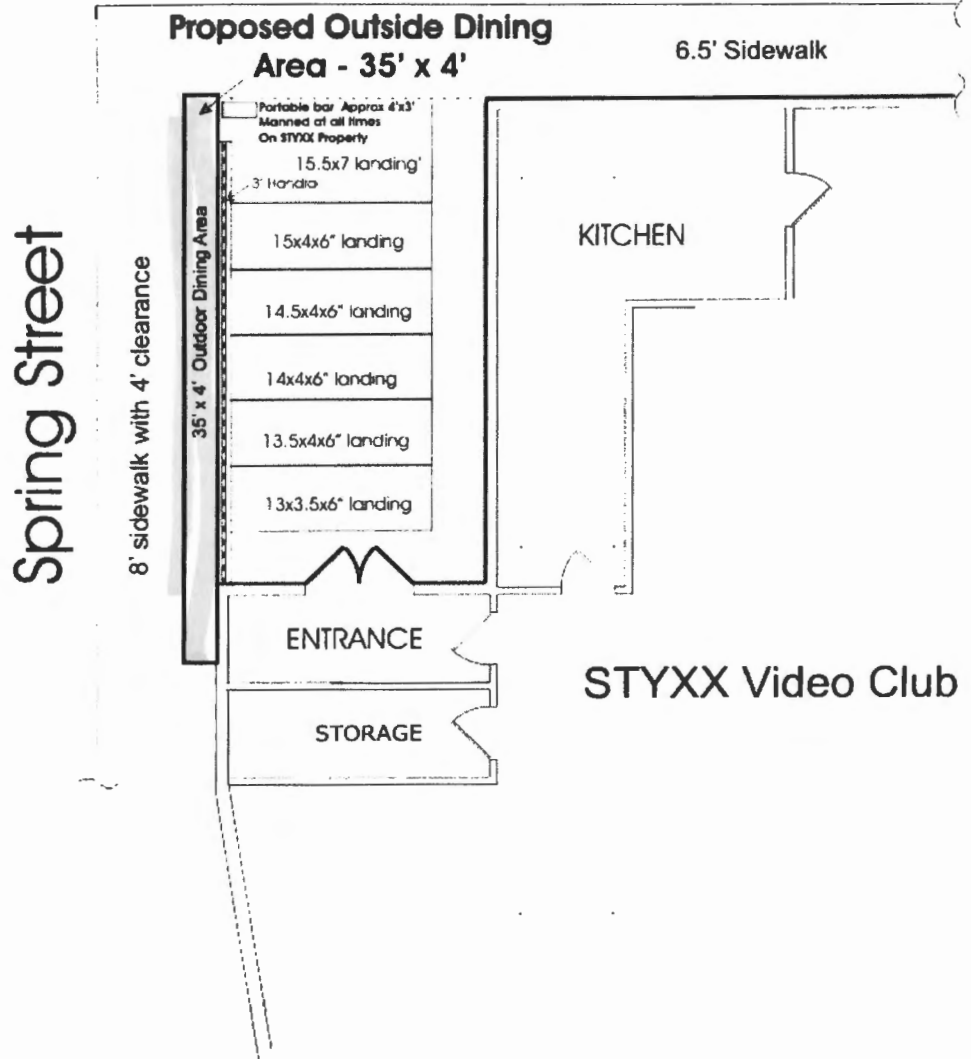
CERTIFICATE HOLDER City of Portland Attn City Clerk 389 Congress Street Portland, ME	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Jonathan Seigney/CVS <i>[Signature]</i>
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STYXX

3 SPRING STREET
PORTLAND, ME 04101

Cross Street

Proposed Outdoor Dining 8/2009
7 tables - 16 seats



Spring Street

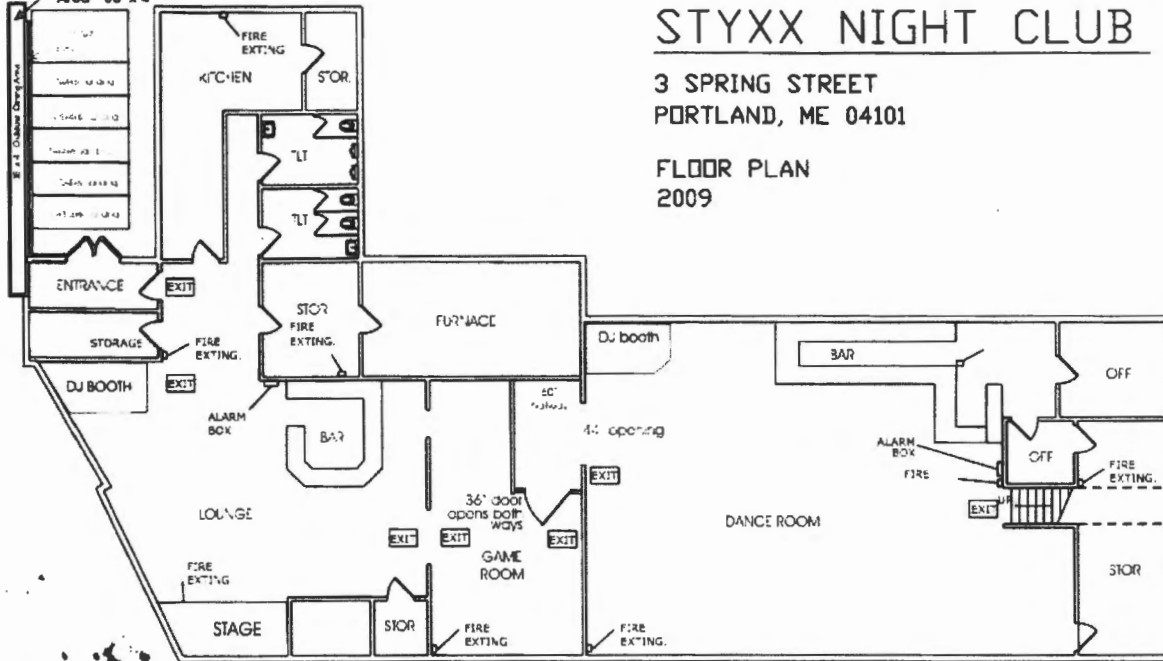
Cross Street

STYXX NIGHT CLUB

3 SPRING STREET
PORTLAND, ME 04101

FLOOR PLAN
2009

Proposed Outside Dining
Area - 35' x 4'



Cross Street

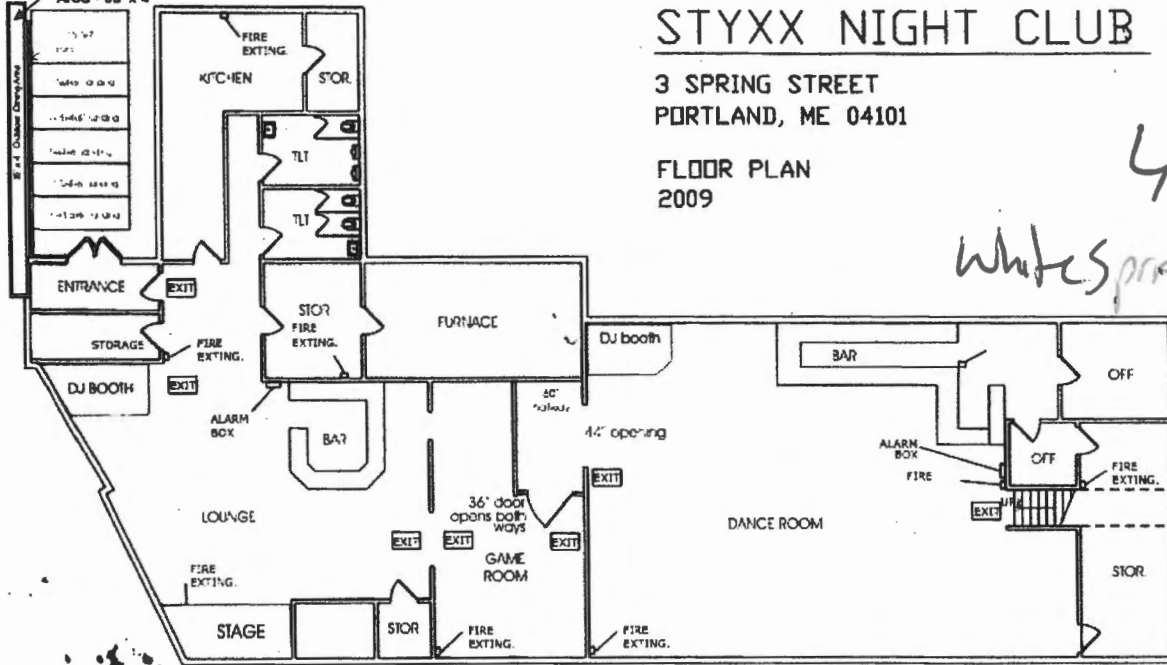
Proposed Outside Dining
Area - 35' x 4'

STYXX NIGHT CLUB

3 SPRING STREET
PORTLAND, ME 04101

FLOOR PLAN
2009

Spring Street



4' x 35'

1905984

White spray Painted

okay
N/A



COPY

CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT
389 Congress Street
Portland, Maine 04101

INVOICE FOR FEES

Owner: CUMBERLAND CLUB
Location: 127 SPRING ST
CBL: 039 A032001
Invoice Date: 07/14/2011

Fee Description	Fee Charge
06/01/2011 OUTSIDE DINING Styxxx	\$280.00
Total Billed:	\$280.00
Total Paid:	\$0.00
Amount Due:	\$280.00

SECOND NOTICE

Permit not issued until full payment received

Payments can be made at:

Portland City Hall

389 Congress Room 315

Portland, Maine 04101

Detach and remit with payment

Bill to: CUMBERLAND CLUB
116 HIGH ST
PORTLAND, ME 04101

CBL 039 A032001
Invoice Date: 07/14/2011
Invoice No: 1328
Total Amt Due: \$280.00
Payment Amount:

Make checks payable to the *City of Portland*, Inspections Division, Room 315, 389 Congress Street, Portland, ME 04101.