## REVOCABLE LICENSE FOR MAINTENANCE OF TWO GRANITE STAIRWAYS ON CITY RIGHT OF WAY RE: LEARNING WORKS 181 BRACKETT STREET

This revocable license is granted by the City of Portland "City" to Learning Works, Maine non-profit corporation with a mailing address of 181 Bracket Street, Portland, Maine hereinafter "Licensee," for the installation and maintenance of two granite, stairways over a portion of property owned by the City along 181 Bracket Street, Portland, Maine (the "Property"). The installation and maintenance of the stairways located over City property, shall be governed by the terms of this License Agreement.

- 1. Licensee is hereby permitted to install and maintain two granite stairways in substantially the same form as that depicted on Exhibits A and B, attached hereto over land owned by the City (i.e. on the building located at 181 Bracket Street) as governed and specified by the terms of this License Agreement.
- 2. The stairways to be installed and maintained pursuant to this License Agreement shall be in accordance with the location and dimensions described on Exhibits A and B attached hereto.
- 3. Licensee shall be responsible for the proper maintenance of the stairways. In the event of damage to the same, Licensee shall contact the City and receive approval and then shall promptly repair/restore the stairways.
- 4. Licensee shall procure and maintain liability insurance in an amount of not less than Four Hundred Thousand Dollars (\$400,000) combined single limit (or the amount stated in the Maine Tort Claims Act as the same may be amended from time to time), covering claims for bodily injury, death and property damage and shall name the City as an additional insured with respect to such coverage.
- 5. Licensee, by execution of this License Agreement, hereby agrees to assume responsibility for any and all claims and/or damage to persons or property arising out of or in any way related to Licensee's entry upon City property located at or near 181 Bracket Street or Licensee's installation of a stairway over City property located at or near 181 Bracket Street and does hereby forever waive, release, relinquish, remise and discharge the City, its agents, employees, successors and assigns from any and all losses, costs or expenses (including reasonable attorneys' fees), damages, demands, liabilities, claims, actions, causes of action, suits, or judgments (collectively, "Claims") whatsoever of every name and nature, in law and in equity, including without limitation those related in any manner to any accident or injury to, or death of, any person, or any damage to property occurring on, in or in the vicinity of the area covered by this License Agreement, arising out of the presence in and use by the Licensee of the area covered by this License Agreement.
- 6. This License may be revoked upon one (1) month written notice from the City to the Licensee and shall automatically terminate in the event that the building located on the Licensee's property is destroyed, removed or otherwise ceases to exist on the site.

## CITY OF PORTLAND

Date _	5	16	Je?
			By: Ion P Io

By: Jon P. Jennings Its City Manager

\* PPROVEDAS TO FORM:

EATION COUNSEL'S OFFICE

LICENSEE

Sterna Bellows

By: Interim Executive Diecopor

Its Shenna Bellows

STATE OF MAINE CUMBERLAND, ss.

Dated 5/19/16

Personally appeared the above-named Jon P. Jennings and gave oath that the foregoing statements made by him are true to the best of his knowledge, information and belief, and where based upon information and belief, he believes the same to be true.

Before me.

JUDITH H. ROSEN Notary Public, Maine My Commission Expires June 17, 2018

Nolary Public/Attorney at Law

STATE OF MAINE CUMBERLAND, ss.

Personally appeared the above-named <u>Shenna Bellows</u> and gave oath that the foregoing statements made by him/her are true to the best of his/her knowledge, information and belief, and where based upon information and belief, he/she believes the same to be true.

Before me

Notary Public/Attorney at Law

Maine Bar



## CERTIFICATE OF LIABILITY INSURANCE

LEARNIN-01 DLITTLEFIELD

> DATE (MM/DD/YYYY) 5/6/2016

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

	ne terms and conditions of the policy ertificate holder in lieu of such endors				ndorse	ement. A sta	tement on th	is certificate does not c	onfer	rights to the	
	DUCER		(-)		CONTACT Diane K. Littlefield, CIC, CPIW						
Hol	den Agency Insurance				PHONE (A/C, No, Ext): 2432 FAX (A/C, No):  E-MAIL ADDRESS: dlittlefield@holdenagency.com						
	5 Brighton Ave tland, ME 04102										
	, <u>-</u>				INSURER(S) AFFORDING COVERAGE NAIC #						
					INSURER A: Philadelphia Insurance Company					23850	
INSI	JRED			INSURER B : Maine Employers Mutual Insurance					11149		
	LearningWorks 181 Brackett St				INSURER C:						
	Portland, ME 04102				INSURER D:						
					INSURER E:					-	
	VERAGES CER	TIEL	CATE	NUMBER:	INSURER F:						
		-			REVISION NUMBER: HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD						
11	NDICATED. NOTWITHSTANDING ANY RI	EQUI	REME	ENT, TERM OR CONDITION	N OF A	ANY CONTRA	CT OR OTHER	R DOCUMENT WITH RESPE	CT TO	WHICH THIS	
	ERTIFICATE MAY BE ISSUED OR MAY							ED HEREIN IS SUBJECT T	O ALL	THE TERMS,	
	XCLUSIONS AND CONDITIONS OF SUCH I		CIES.		BEEN I						
INSR	TYPE OF INSURANCE		WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S		
Α	X COMMERCIAL GENERAL LIABILITY	X						EACH OCCURRENCE DAMAGE TO RENTED	\$	1,000,000	
	CLAIMS-MADE X OCCUR		PHPK1357173			07/01/2015	07/01/2016	PREMISES (Ea occurrence)	\$	100,000	
								MED EXP (Any one person)	\$	5,000	
								PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	3,000,000	
	POLICY PRO- JECT X LOC							PRODUCTS - COMP/OP AGG	\$	3,000,000	
	OTHER:								\$		
A	AUTOMOBILE LIABILITY			PHPK1357173				COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000	
	X ANY AUTO					07/01/2015	07/01/2016	BODILY INJURY (Per person)	\$		
	ALL OWNED SCHEDULED AUTOS AUTOS							BODILY INJURY (Per accident)	\$	\	
	HIRED AUTOS NON-OWNED AUTOS					22		PROPERTY DAMAGE (Per accident)	\$		
								\$			
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$		
	DED RETENTION \$								\$		
	WORKERS COMPENSATION	N/A		1810097132			07/01/2016	X PER OTH- STATUTE ER			
В	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE					07/01/2015		E.L. EACH ACCIDENT	\$	100,000	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. DISEASE - EA EMPLOYEE	S	100,000	
	If yes, describe under DESCRIPTION OF OPERATIONS below								\$	500,000	
	DESCRIPTION OF OF ERATIONS BEIOW							E.E. DIOCHOL TOLIOT LIMIT	<u> </u>		
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	.ES (/	ACORD	) 101, Additional Remarks Schedu	le, may b	e attached if mor	e space is requir	ed)			
As r	equired for operations.										
City	of Portland is named as an additional in	sure	ad as	required by license agreer	ment fo	r the installat	ion and main	tenance of granite stairs	over c	ity property at	
181	Brackett St., Portland, ME.	Juic	,u u5	required by nocinoe agreer	none ro	i ino motanat	ion and main	tonance or grante otalic	0 0 0 0	ity property at	
	DIFFOATE HOLDED				CANO	CLIATION!					
CE	RTIFICATE HOLDER				CANCELLATION						
				SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE							
	City of Portland				THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.						
	389 Congress Street										
Portland, ME 04101						AUTUODITED DEDDECENTATIVE					
					AUTHORIZED REPRESENTATIVE						
					Diane Littlefield						