

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BU **INSPECTION**

PERMIT

Permit Number: 090597

Please Read Application And Notes, If Any, Attached

This is to certify that FACTORS FINANCIAL FRC /n/a
has permission to Restaurant "Local 188" - outside seating 4 tables and chairs a of 336 sq. ft.
AT 685 CONGRESS ST CB 047 C034001

PERMITTED
AUG 21 2008

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 otherwise closed-in. 24 HOURS 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

[Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

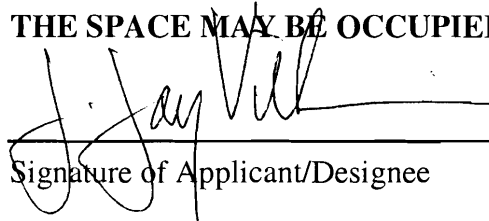
A Pre-construction Meeting will take place upon receipt of your building permit.

 X **The outdoor seating may NOT be used until the permit is issued and posted on site.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

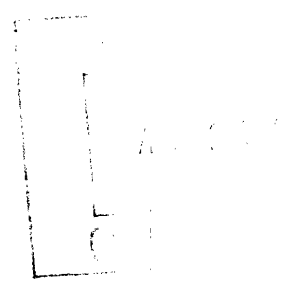


Signature of Applicant/Designee

 8/26/09
Date

Signature of Inspections Official

Date




City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

| | | |
|-----------------------|-------------|---------------------|
| Permit No: 09-0597 | Issue Date: | CBL: 047 C034001 |
|-----------------------|-------------|---------------------|

| | | | |
|--|--|---------------------------------|--------------|
| Location of Construction: 685 CONGRESS ST | Owner Name: FACTORS FINANCIAL FRC INC | Owner Address: PO BOX 7002 | Phone: |
| Business Name: Local 188 | Contractor Name: n/a | Contractor Address: Portland | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Outdoor Seating | Zone: B-3 |

| | | | | |
|--|---|---|--|-------------------------------|
| Past Use: Commercial Restaurant "Local 188" | Proposed Use: Restaurant "Local 188" - outside seating 4 tables and 16 chairs a total of 336 sq. ft. | Permit Fee: \$752.00 | Cost of Work: \$80.00 | CEO District: 2 |
| Proposed Project Description: Restaurant "Local 188" - outside seating 4 tables and 16 chairs a total of 336 sq. ft. | | FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i> | INSPECTION: Use Group: <i>Outdoor Seating</i> Type: | |
| | | Signature: <i>[Signature]</i> | | Signature: <i>[Signature]</i> |
| 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: Ldobson | Date Applied For: 06/10/2009 | Zoning Approval |
|-----------------------------|---------------------------------|------------------------|

| | | | |
|--|--|---|---|
| 1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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>8/21/09</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>8/21/09</i> |
|--|--|---|---|

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: 09-0597 | Date Applied For: 06/10/2009 | CBL: 047 C034001 |
|------------------------------|--|----------------------------|

| | | | |
|---|---|--|---------------|
| Location of Construction: 685 CONGRESS ST | Owner Name: FACTORS FINANCIAL FRC INC | Owner Address: PO BOX 7002 | Phone: |
| Business Name: Local 188 | Contractor Name: n/ a | Contractor Address: Portland | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Outdoor Seating | |

| | |
|--|--|
| Proposed Use: Restaurant "Local 188" - outside seating 4 tables and 16 chairs a total of 336 sq. ft. | Proposed Project Description: Restaurant "Local 188" - outside seating 4 tables and 16 chairs a total of 336 sq. ft. |
|--|--|

| | | | | | |
|--|---|-------------------------------|----------------------------------|--------------|---|
| Dept: Zoning | Status: Approved | Reviewer: Tammy Munson | Approval Date: 08/21/2009 | Note: | Ok to Issue: <input checked="" type="checkbox"/> |
| Dept: Building | Status: Approved with Conditions | Reviewer: Tammy Munson | Approval Date: 08/21/2009 | Note: | Ok to Issue: <input checked="" type="checkbox"/> |
| 1) 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 2) This permit approves outside seating only. Any alcohol or entertainment in this space requires licensing approvals from the City Clerk. | | | | | |

Comments:
 6/24/2009-gg: received plot plan from Suzanne on 6/23/09. Suzanne is waiting for Tammy to okay the plot plan. Permit back in Tammy's mail box. /gg

**CITY OF PORTLAND
DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**

389 Congress Street
Portland, Maine 04101

INVOICE FOR PERMIT FEES

| | |
|--|---|
| Application No: 9-0597 | Applicant: FACTORS FINANCIAL FRC INC |
| Project Name: Restaurant "Local 188" - outside se | Location: 685 CONGRESS ST |
| CBL: 047 C034001 | Development Type: |
| Invoice Date: 06/11/2009 | |

| | | | | | | | | | |
|-------------------------|---|-------------------------|---|---------------------|---|------------------------|---|------------------|-------------------------|
| Previous Balance | - | Payment Received | + | Current Fees | - | Current Payment | = | Total Due | Payment Due Date |
| \$0.00 | | \$0.00 | | \$752.00 | | \$80.00 | | \$672.00 | On Receipt |

Third Billing

| | |
|-------------------------|---------------|
| Previous Balance | \$0.00 |
|-------------------------|---------------|

| Fee Description | Qty | Fee/Deposit Charge |
|--------------------------|------------|---------------------------|
| Outside Seating Sidewalk | 336 | \$672.00 |
| Outside Seating | 1 | \$80.00 |
| | | <u>\$752.00</u> |

Total Current Fees: + \$752.00

Total Current Payments: - \$80.00

Amount Due Now: \$672.00

Detach and remit with payment

Bill to: FACTORS FINANCIAL FRC INC
PO BOX 7002
PORTLAND, ME 04112

CBL 047 C034001
Application No: 9-0597
Invoice Date: 06/11/2009
Invoice No: 34785
Total Amt Due: \$672.00
Payment Amount:

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.



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.

47-C-34
090597
Sch
6/16/09

| | | |
|--|---|--|
| <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>DM 6.10.09</u> or Pending Council Date _____ Location/Address of Outdoor Seating: _____ | | |
| Total Square Footage of Proposed Seating Area ¹ <u>192 SF</u> | | Square Footage of Lot <u>192 SF</u> |
| Tax Assessor's Chart, Block & Lot Chart# <u>47</u> Block# <u>C</u> Lot# <u>34</u> | Phone#: <u>207 761 7909</u> | Owner: <u>FACTORS FINANCIAL FRC INC</u> |
| Applicant * must be owner or Lessee Name: <u>LOCAL 188</u> Address: <u>685 CONGRESS ST</u> City, State & Zip: <u>PORTLAND, ME, 04102</u> | Lessee/Buyer's Name: (If Applicable) | Annual Fee: <u>\$80</u> Total Sq. Ft. Sq. Ft. Fee: <u>\$</u> Total Fee: <u>\$</u> |
| Current use: <u>RESTAURANT</u> Business name: <u>LOCAL 188</u> Seating area dimensions: _____ How many chairs? <u>16</u> How many tables? <u>4</u> <input checked="" type="checkbox"/> Yes Alcohol is served. JUN 10 2009 <input type="checkbox"/> No Alcohol being served. | | |
| Who should we contact for the pre-inspection: <u>JAY VILLANI</u> Mailing address: <u>685 CONGRESS ST. PORTLAND</u> Phone: <u>207 761 7909</u> <u>04102</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 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:

Date:

6-9-09

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.**

Local 2800

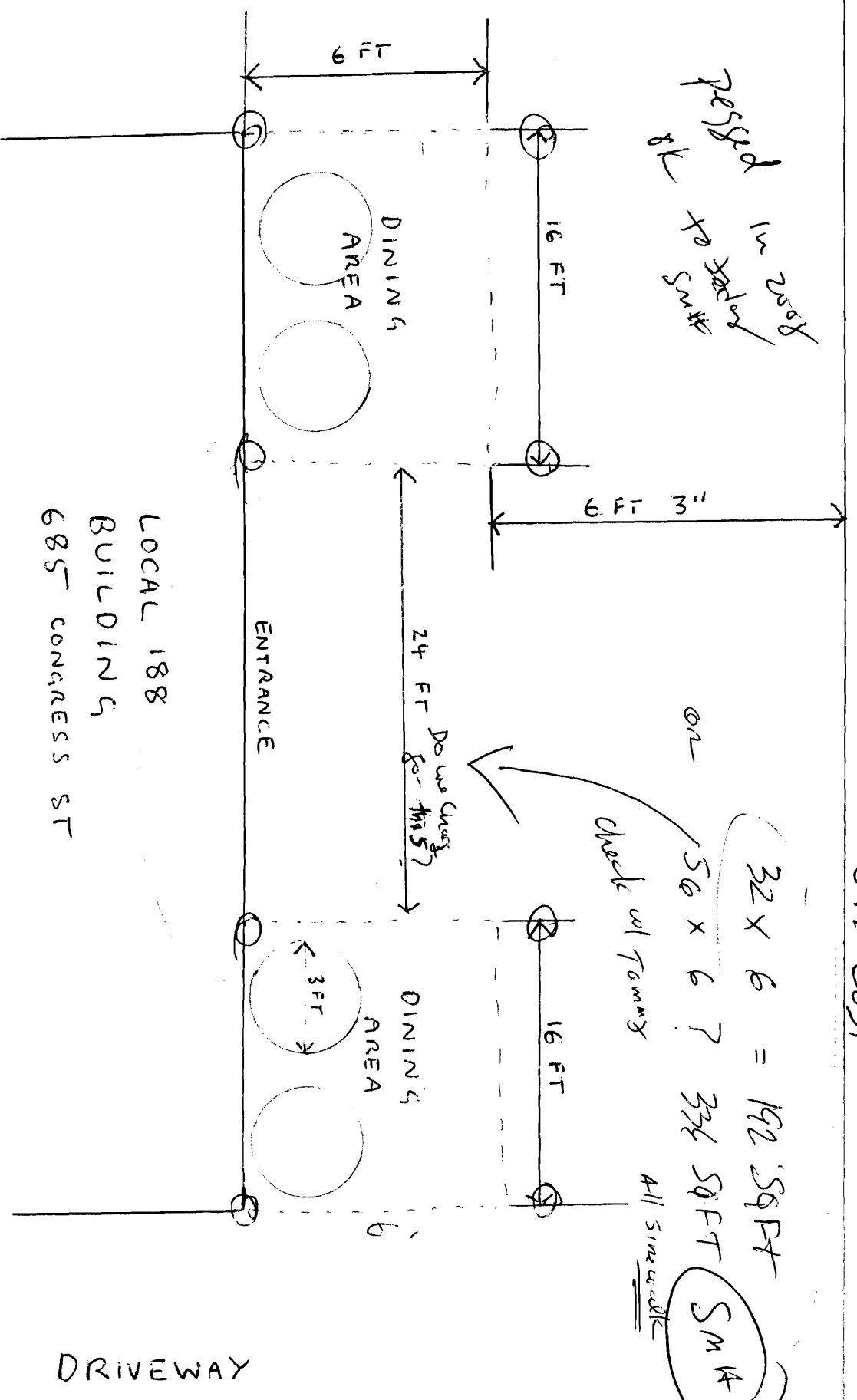
CONGRESS ST

685 Congress
047 C034

0475102 Drive
0423/05 SMIT

Resist in 2008
to section
SMIT

32 x 6 = 192 SQ FT
56 x 6 = 336 SQ FT
SMIT
All inward
Check w/ family

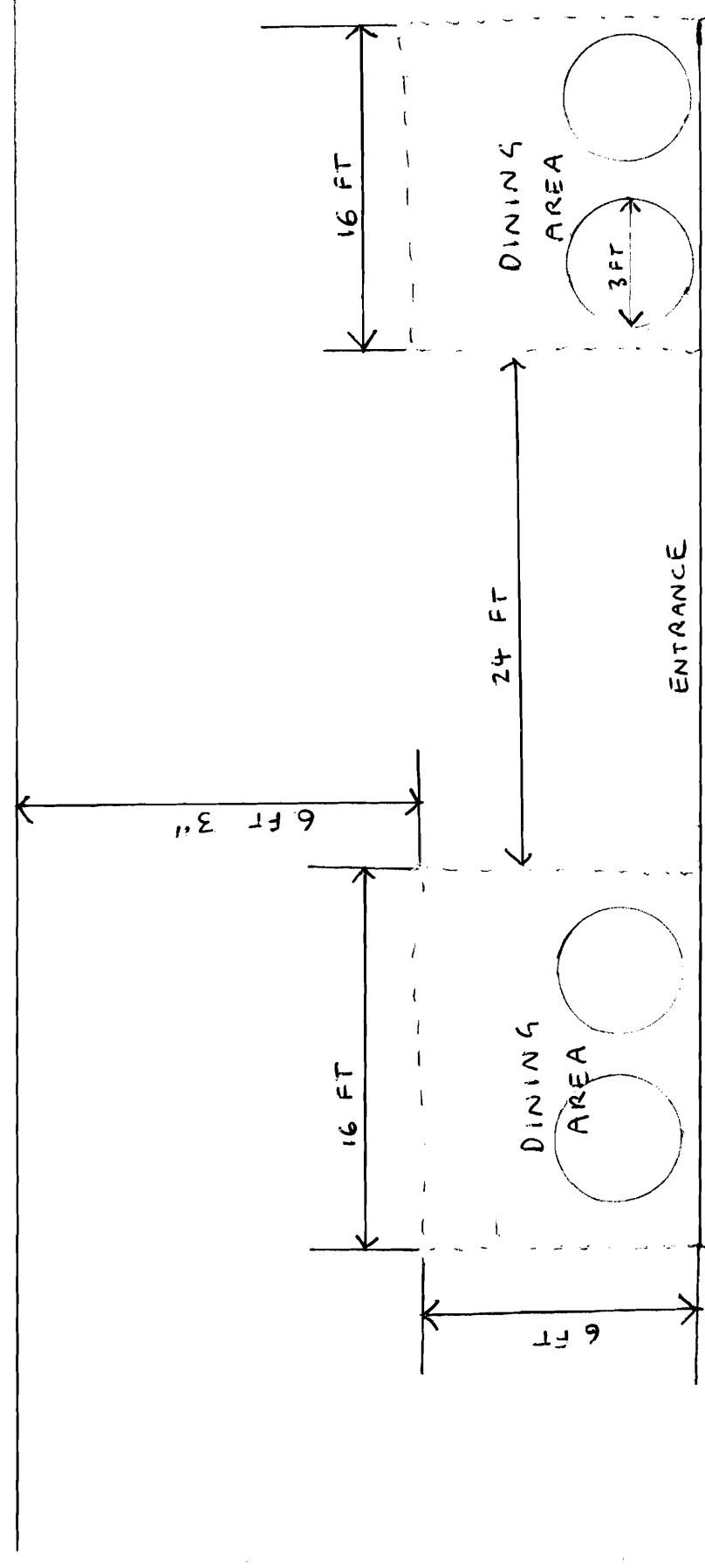


DRIVEWAY

LOCAL 188
BUILDING
685 CONGRESS ST

DRIVEWAY

LOCAL 188
BUILDING
685 CONGRESS ST



CONGRESS ST



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.

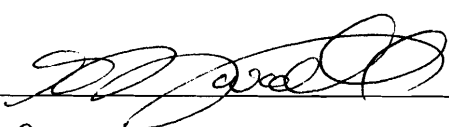
All permits for outdoor dining are issued subject to the following conditions:

- 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.

- 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 liter 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:  Date: 6/9/07
 Printed name GARRY BOWCOTT
 Establishment LOCAL 188
 Location PORTLAND MAINE

ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY)
6/10/2009

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
 Alison Arnold & Jay Villani
 DBA Local 188
 685 Congress Street
 Portland ME 04101

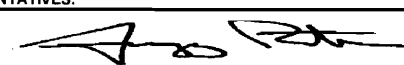
| INSURERS AFFORDING COVERAGE | | NAIC # |
|-----------------------------|--------------------|--------|
| INSURER A: | Peerless Insurance | 24198 |
| INSURER B: | | |
| INSURER C: | | |
| INSURER D: | | |
| INSURER E: | | |

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 ADD'L LTR | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|----------------|-------|---|---------------|----------------------------------|-----------------------------------|--|
| A | | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | CBP9312320 | 5/1/2009 | 5/1/2010 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| | | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$ |
| | | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$ | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ |
| | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below | | | | WC STATUTORY LIMITS OTH-ER 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
 City of Portland is and additional insured by contract with reference to general liability arising out of the operations of the insured.

CERTIFICATE HOLDER
 City of Portland
 389 Congress 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/BMEL 

ACORD™ CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY)
6/10/2009

PRODUCER (207) 774-6257 FAX: (207) 774-2994
 Clark Associates
 2385 Congress Street
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INSURED
 Alison Arnold & Jay Villani
 DBA Local 188
 685 Congress Street
 Portland ME 04101

| INSURERS AFFORDING COVERAGE | NAIC # |
|-------------------------------|--------|
| INSURER A: Peerless Insurance | 24198 |
| INSURER B: | |
| INSURER C: | |
| INSURER D: | |
| INSURER E: | |

COVERAGES
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|---------------------|---|---------------|----------------------------------|-----------------------------------|---|
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| | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 |
| | | | | | MED EXP (Any one person) \$ 5,000 |
| | | | | | PERSONAL & ADV INJURY \$ 1,000,000 |
| | | | | | GENERAL AGGREGATE \$ 2,000,000 |
| | | | | | PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| | | | | | GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC |
| | AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | | COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| | GARAGE LIABILITY <input type="checkbox"/> ANY AUTO | | | | AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$ |
| | EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ | | | | EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below | | | | WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$ |
| | OTHER | | | | |

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 AUTHORIZED REPRESENTATIVE
 Gregg Ritter/BMEL 