

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

PERMIT SECTION

PERMIT

Permit Number: 031286

 This is to certify that City Of Portland/City of Portland

 has permission to Erect Tents for Camp Sunshine Pumpkin Festival 9-24-03 to 10/26/03

 AT 165 Park Ave

049 A001001

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 when permission procured before this building or part thereof is altered or closed-in. **48 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

[Signature] 10/24/03
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: 03-1286	Issue Date: 10/24/2003	CEI: 049 A001001
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Location of Construction: 165 Park Ave	Owner Name: City Of Portland	Owner Address: 389 Congress St	Phone: 756-8275
Business Name:	Contractor Name: City of Portland	Contractor Address: 389 Congress Street Portland	Phone: 2078748300
Lessor/Buyer's Name:	Phone:	Permit Type: Tents	Zone: ROS

Past Use: Decring Oaks/Open Space	Proposed Use: Decring Oaks/Open Space	Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 3
Proposed Project Description: Erect Tents for Camp Sunshine's Pumpkin Festival/10-24-03 thru 10/26/03		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied INSPECTION: Use Group: Type:		
		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: gad	Date Applied For: 10/20/2003	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:	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 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:

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

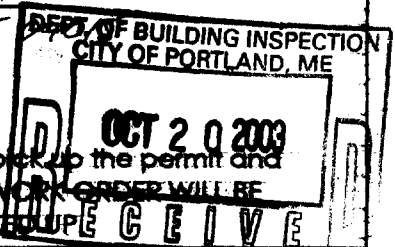
03-1286

Submit Application to Room 315, Portland City Hall, 389 Congress Street, Portland, ME 04101
207-874-8703; fax 207-874-8716. Please allow 10 Business Days for processing.

Tent 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: <i>Deering Oaks Park - Portland, ME</i>		
Date of Tent setup: <i>October 24, 2003</i>		Date of Tent breakdown: <i>October 26, 2003</i>
Tax Assessor's Chart, Block & Lot Chart# <i>049</i> Block# <i>A</i> Lot# <i>001</i>	Owner: <i>City of Portland</i>	Telephone:
Lessee/Buyer's Name (If Applicable) <i>Camp Sunshine</i>	Applicant name, address & telephone: <i>Matt Hoidal Camp Sunshine 35 Acadia Road Casco, ME 04015</i>	Fee: \$ 30.00
<p>The following must be included in submissions:</p> <ol style="list-style-type: none"> 1. Certificate of Flammability 2. Letter of approval from property owner. If the City is the owner, please contact Ted Musgrave at Parks & Recreation @ 874-8793 3. Plot Plan showing the following: <ol style="list-style-type: none"> i. Property lines ii. Parking iii. Existing Building locations iv. Tent locations, including dimensions of all tents, exits and entrances in tent 4. If the City is the property owner, Certificate of Insurance listing the City as Additional Insured. Minimum amount of coverage is \$400,000.00 		
<p>Whom should we contact when the permit is ready: <i>Matt Hoidal</i></p> <p>Mailing address: <i>c/o Camp Sunshine, 35 Acadia Rd., Casco, ME</i></p> <p>PHONE: <i>207-655-3800</i></p> <p>We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER WILL BE ISSUED AND A \$100.00 FINE LEVIED IF ANY WORK STARTS BEFORE THE PERMIT IS PICKED UP.</p>		



IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: <i>Matt Hoidal</i>	Date:
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This is NOT a permit; you may not commence ANY work until the permit is issued.

Certificate of Flame Resistance

REGISTERED
FABRIC
NUMBER

F-140.01

ISSUED BY
JOHNSON OUTDOORS INC.
BINGHAMTON, NEW YORK 13902
*Manufacturers of the Finest
Tent Products Described Herein*

Date of Manufacture

FEB 2002

This is to certify that the products herein have been manufactured from material inherently flame retardant as here after specified by the material supplier.

NAME: ATLANTIC TENT CO

CITY: FREEPORT

STATE: ME

Certification is hereby made that:

The articles described on this certificate have been manufactured with an approved flame retardant chemical in compliance with California State Fire Marshal Code, NFPA-701*, Underwriters Laboratory of Canada, and have been tested in accordance with the Federal Test Method Specifications and meet or exceed the Military Flame Specifications of MIL-C-43000.

Type, color and weight of material 14OZ vinyl WHITE BLOCKOUT

Description of item certified: 20X20 VISTA

**Flame Retardant Process Used Will Not Be Removed By Washing And
is Effective For The Life Of The Fabric**

Snyder Manufacturing, Inc.

Manufacturer of Flame Retardant Vinyl Laminates

TENT DEPARTMENT, JOHNSON OUTDOORS INC.

*Large Scale

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE ISSUED/YY/YY
PHONE (207) 647-3111 FAX (207) 647-3003 Chalmers Insurance Agency, Inc. 30 Main Street P.O. Box 189 Bridgton, ME 04009-0189 Maine Point 50000 Camp Sunshine at Sebago Lake, Inc. 261 Point Sebago Road Casco, ME 04015		10/21/2003
THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND DOES NOT ALTER THE COVERAGE AFFORDED BY THE POLICY OR POLICIES DESCRIBED HEREIN. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY OR POLICIES DESCRIBED HEREIN.		
INSURERS AFFORDING COVERAGE		NAIC #
INSURER A: CNA Insurance		20021
INSURER B:		
INSURER C:		
INSURER D:		

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.

TYPE OF INSURANCE	POLICY NUMBER	POLICY PERIOD	COVERAGE	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PER <input type="checkbox"/> LOC	Y00015482	01/01/2003	01/01/2004	EACH OCCURRENCE \$ 1,000,000 MEDICAL EXP. (Per Occurrence) \$ 100,000 MED EXP. (Per Occurrence) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - CONSUMPTIVE \$ 1,000,000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> RENTED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COLLISION SINGLE LIMIT \$ BODILY INJURY (Per Person) \$ BODILY INJURY (Per Occurrence) \$ PROPERTY DAMAGE (Per Occurrence) \$
Garage Liability <input type="checkbox"/> ANY AUTO				AUTO ONLY - IN ACCIDENT \$ OTHER THAN AUTO ONLY \$ AGG \$
RECREATIONAL LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY EMPLOYED PERSONNEL EMPLOYERS LIABILITY EMPLOYERS LIABILITY OTHER				B.L. OVER ACCIDENT \$ B.L. DISEASE - EMPLOYEE \$ B.L. DISEASE - POLICY LIMIT \$

EXCLUSIONS: 1. CONTRACTORS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Pumps in Post 10/21/03

City of Portland is named as additional insured.

CERTIFICATE HOLDER

City of Portland

CANCELLATION

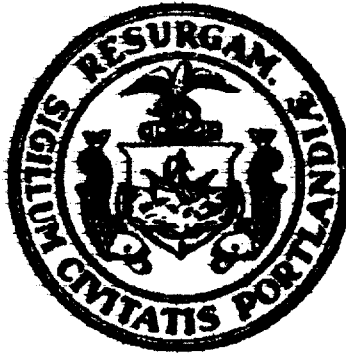
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER SHALL MAIL, THEREAFTER TO MAIL, 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO CANCELLATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED SIGNATURE

John Lawrence

ACORD 28 (2001/08)

SECOND CORPORATION 1988



**CITY OF PORTLAND
PARKS AND RECREATION DEPARTMENT
276 CANCO ROAD
PORTLAND, MAINE 04103**

October 15, 2003

To Whom It May Concern:

This letter is to convey approval for the putting up of tents in Deering Oaks Park on Friday, October 24, 2003 and the taking down of said tents on Sunday, October 26, 2003 for the benefit of Camp Sunshine's *"Life is Good" Pumpkin Festival*.

If you have any questions or concerns do not hesitate to contact me at: 756-8275.

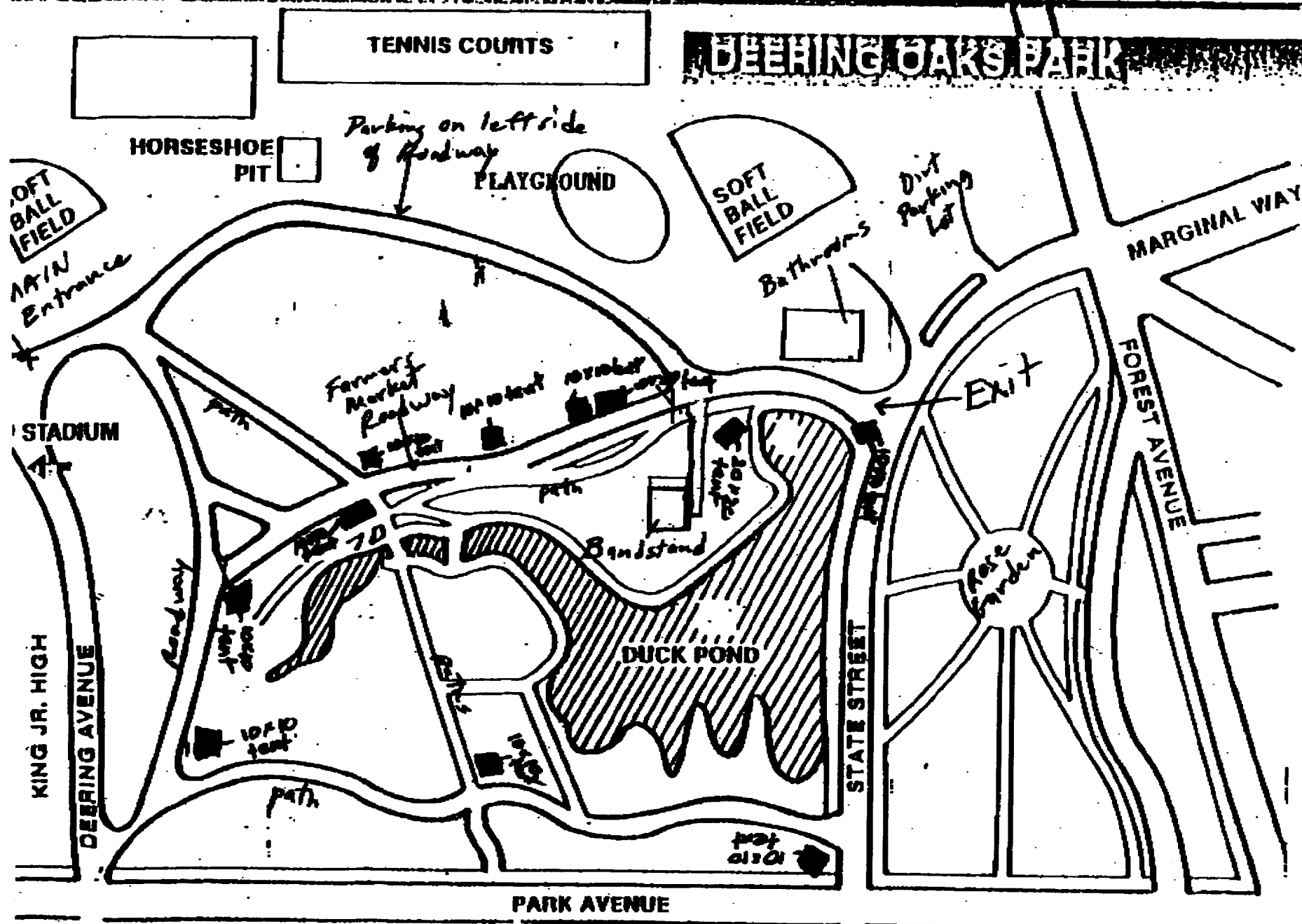
Sincerely,

**Karen A. Seymour
Recreation Supervisor**

**Tents – Pumpkin festival
Exits and Entrances**

**All tents will be completely open, except for the 20' x 20' tent closest to the bandstand.
This tent will have three sides, with 2 exits in the rear, and the front will be left open.**

I-295
Entrance + Exit Ramps: 6A + 6B



test (see beside each test for size)