

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

PERMIT ISSUED

Permit Number 10507915 2005

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that City Of Portland/Owner

has permission to setup tent August 11; remove August 15

AT 271 Park Ave

049 A001001

provided that the person or persons, firm or corporation accepting this permit shall comply with a of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulatin the construction, maintenance and use of buildings and structures, and of the application on file i 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. 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. Capt. Greg Cross 6-20-05

Health Dept.

Appeal Board

Other Department Name

Handwritten signature and date 6/29/05

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: 05-0791	Issue Date: PERMIT ISSUED JUL - 5 2005	CITY: A001001
Owner Address: 389 Congress St	Phone: 207-4-9300	
Contractor Address: Portland	Phone:	
Permit Type: Tents	Zone: H205	

Location of Construction: 271 Park Ave	Owner Name: City Of Portland
Business Name:	Contractor Name: Owner
Lessee/Buyer's Name	Phone:

Past Use: Hadlock Field parking lot	Proposed Use: setup tent August 11; remove August 15
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Proposed Project Description: setup tent August 11; remove August 15

Permit Fee: \$30.00	Cost of Work: \$0.00	CEO District: 1
FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <i>with conditions</i>	INSPECTION: Use Group: <i>V</i> Type: <i>Tent</i> IBC 2003	
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: jharris	Date Applied For: 0611612005	Zoning Approval		
<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>OK 6/17/05</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 checked="" 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: <i>[Signature]</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: 05-0791	Date Applied For: 06/16/2005	CBL: 049 A001001
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Location of Construction: 271 Park Ave	Owner Name: City Of Portland	Owner Address: 389 Congress St	Phone: () 874-9300
Business Name:	Contractor Name: Owner	Contractor Address: Portland	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	
Proposed Use: setup tent August 11; remove August 15		Proposed Project Description: setup tent August 11; remove August 15	

Dept: Zoning **Status:** Pending **Reviewer:** Marge Schmuckal **Approval Date:** 0611712005
Note: **Ok to Issue:**

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 0612912005
Note: **Ok to Issue:**

1) This permit DOES NOT authorize any construction activities. The tent must be removed at the end of the event.

Dept: Fire **Status:** Approved with Conditions **Reviewer:** Cptn Greg Cass **Approval Date:** 06/20/2005
Note: **Ok to Issue:**

1) Set up to comply with NFPA 101 Chapter 11

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: <u>271 Park Ave</u>		
Date of Tent setup: <u>August 11th, 2005</u>	Date of Tent breakdown: <u>15 August 15th, 2005</u>	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	Telephone: <u>874-9300</u>
Lessee/Buyer's Name (If Applicable) <u>Portland Seadogs</u>	Applicant name, address & telephone:	Fee: \$ <u>30.00</u>

The following must be included as submissions:

1. Certificate of Flammability
2. Letter of approval from property owner. If the City is the owner, please contact Ted Musgrave from the Parks & Recreation @ 874-8793
3. Plot Plan showing the following:
 - i. Property lines
 - ii. Parking
 - iii. Building locations
4. Tent location, including dimensions of tent, exits and entrances in tent.
5. If the City is the property owner, Certificate of Insurance listing the City as additional insured. Minimum amount of coverage is \$400,000.00

Whom should we contact when the permit is ready: Geoff Jaccusa

Mailing address:

PHONE: 874-9300

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.

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: <u>[Signature]</u>	Date: <u>6/9/05</u>
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This is NOT a permit; you may not commence ANY work until the permit is issued.

Geoffrey lacuessa

From: "Arthur Stephenson" <ARTHUR@portlandmaine.gov>
To: <TVM@portlandmaine.gov>; <geoff@portlandseadogs.com>
CC: <mjn@ci.portland.me.us>; <Andy@portlandmaine.gov>; <ARL@portlandmaine.gov>;
 <DMARTIN@portlandmaine.gov>; <GG@portlandmaine.gov>; <LARRYL@portlandmaine.gov>;
 <LDobson@portlandmaine.gov>; <MES@portlandmaine.gov>; <Peter@portlandmaine.gov>;
 <SLD@portlandmaine.gov>
Sent: Wednesday, June 08, 2005 1:06 PM
Subject: Re: large tents in hadlock stadium parking lot

If the Sea Dogs comply with all city policies **as** to tents, including calling dig safe prior to set up, we have no issues with use of a tent in the requested lot (Hadlock Field Lot A) on these dates. **Thank** you.

>>> **Ted** Musgrave 6/7/2005 3:30:24 PM >>>

hi geoff.....

i have referred you over to the PAF staff.... **as** they oversee the lots for sea dogs events, etc.

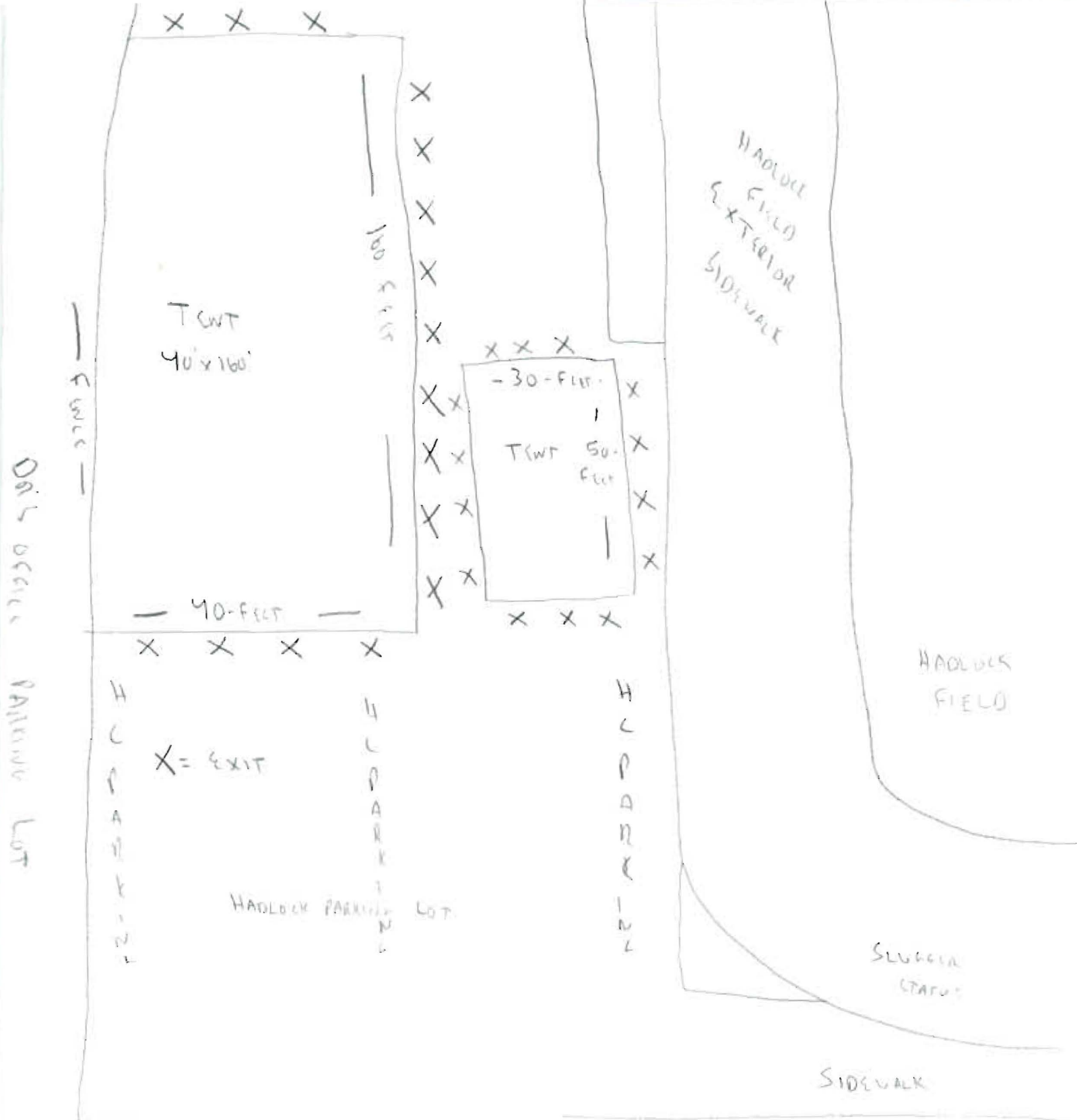
arthur - the sea dogs want to erect a LARGE tent (@ 40 x 160') in the parking lot during some days of their games (july 11 -15; aug. 10 -15; aug. 24 - 28). the tent would be used for business picnic outings prior to games..

these tents would be similar to the one tent they had up there last summer.

the tent permit applications that geoff is completing at the inspections office call for city **staff** to sign off on the forms, giving permission for the group to install the tent on city property.

would u pls e-mail back inspections staff (mike nugent, marge smuckal, donna martin, gayle guertin, and last but not least - lannie dobson) to let them know that you've ok'ed the large sea dog tents in the lot.

thanks. i've cc'ed all those folks....



PARK AVENUE

AUGUST 10 - AUGUST 15
 SETUP



Certificate of Flame Resistance

Date manufactured

09/10/02

REGISTERED FABRIC NUMBER

140.01

ISSUED BY

SNYDER MANUFACTURING INC
3001 PROGRESS STREET
DOVEN, OHIO 44622

This is to certify that the materials described below are flame-retardant and inherently nonflammable.

FOR CHARNECKE TENTS INC ADDRESS 5245 SHANNYTOWN DR
CITY ROEHOLT STATE WI 54473-9151

The articles described below are made from a flame-retardant fabric or material registered and approved by the State Fire Marshal for such use.

The Flame Retardant Process Used Will NOT Be Removed By Washing

* FABRIC MEETS THE REQUIREMENTS OF THE SPECIFICATIONS LISTED BELOW INDICATED BY

NFPA-701 (Large Scale) MIL-C-43008 FMVSS-302
 CANULC-S109-M87 OPAI-6

SNYDER MANUFACTURING INC. By *Michael J. Goff* Title _____ Supervisor, Quality Control

STYLE PIV 15108 DARK BLUE 61" H1-BL088

CONTROL NO. 16376 CUSTOMER ORDER NO. VBL KEN

SNYDER S-ORDER NO. 162308 DATE PROCESSED 09/10/02

YARDS OR QUANTITY 5007 DATE CERTIFIED 09/12/02

4.10 4 365 RD



Certificate of Flame Resistance

Date manufactured

08/28/02

REGISTERED FABRIC NUMBER

140.01

ISSUED BY

SNYDER MANUFACTURING, INC
3001 PROGRESS STREET
DOVEN, OHIO 44622

This is to certify that the materials described below are flame-retardant and inherently nonflammable.

FOR CHARNECKE TENTS INC ADDRESS 5245 SHANNYTOWN DR
CITY ROEHOLT STATE WI 54473-9151

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NFPA-701 (Large Scale) MIL-C-43008 FMVSS-302
 CANULC-S109-M87 OPAI-6

SNYDER MANUFACTURING INC. By *Michael J. Goff* Title _____ Supervisor, Quality Control

STYLE PIV 13108 DARK BLUE 61" H1-BL088

CONTROL NO. 16261 CUSTOMER ORDER NO. VBL KEN

SNYDER S-ORDER NO. 162308 DATE PROCESSED 08/28/02

YARDS OR QUANTITY 325 DATE CERTIFIED 09/12/02

4.10-4-367 NU

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID HJ
FORME-1

DATE (MM/DD/YYYY)
06/15/05

PRODUCER TD Banknorth Ins Agcy Inc (SP) P.O. Box 406 Portland ME 04112-0406 Phone: 207-775-6000 Fax: 207-775-0339	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Portland Maine Baseball, Inc Mr. Charles Eshbach P.O. Box 636 Portland ME 04104	INSURER A	Transportation Insurance Co 20494
	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 TR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Liq Liab \$1 M GEN'L AGGREGATE LIMIT APPLIES PER <input 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	TCP1043487368	04/08/05	04/08/06	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 3,000,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS- COMP/OP AGG \$ 2,000,000 Emp Ben. 1,000,000
		GARAGE LIABILITY 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				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? if yes describe under SPECIAL PROVISIONS below OTHER				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E L EACH ACCIDENT \$ E L DISEASE - EA EMPLOYEE \$ E L DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

The City of Portland is an additional insured on the General Liability with respect to the named insureds operations only if required by written contract. RE: 7/11/05-7/15/05; 8/10/05-8/15/05; 8/25/05-8/29/05

City of Portland Attn: Ted Musgrave 389 Congress Street Portland ME 04101	PORTCIT	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 TD Banknorth Ins. Agency, Inc.	

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.