

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED
Permit Number: 061086
JUL 28 2006
CITY OF PORTLAND

This is to certify that CITY OF PORTLAND
has permission to 3 Tents set-up August 10, 2006 - Break down August 14, 2006
AT 165 PARK AVE
CITY OF PORTLAND 049 A001001

provided that the person or persons who apply for or accept this permit shall comply with all of the provisions of the Statutes of the State 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 procedure before this building or part thereof is occupied or services closed-in. 24 HOUR NOTICE REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS
Fire Dept. Jay Kelley P.F.D. 7/26/06
Health Dept.
Appeal Board
Other
Department Name

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: 06-1086	Issue Date: 7/25/06	CBL: 049 A001001
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Location of Construction: 165 PARK AVE	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name:	Phone:	Permit Type: Tents	Zone: R05

Past Use: Hadlock Field Proposed Use: Hadlock Field - Tent Use 3 Tents set-up August 10,2006 - Break down August 14,2006	Permit Fee: Cost of Work: CEO District:	FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied Signature: <i>Jay Kelley P.F.D. 7/26/06</i>	INSPECTION: Use Group: <i>TEMP TENT</i> Type: Signature: <i>[Signature]</i>
Proposed Project Description: 3 Tents set-up August 10,2006 - Break down August 14.2006	Signature: _____ Date: _____		

Permit Taken By: Idobson	Date Applied For: 07/25/2006	Zoning Approval	
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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>7/25/06</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: _____
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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.

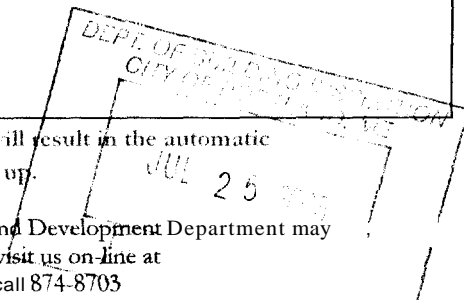
SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE



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.

Date of tent setup: AUGUST 10, 2006		Date of tent breakdown: AUGUST 14, 2006	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# 49 A 1		Property Owner: CITY	
Telephone:		Telephone:	
Lessee/Buyer's Name (If Applicable) PORTLAND SEA DOGS		Applicant name, address & telephone: SEA DOGS ARIN G. COFF 271 PARK AVE 874-9300 PORTLAND ME 04106	
Fee: \$30.00			
Who should we contact when the permit is ready: <u>Geoff Iaculis</u> Mailing address: _____ Phone: <u>874-9300</u>			



Please submit all of the information outlined in this application. Failure to do so will result in the automatic denial of your permit. Staff will notify you when your permit is ready to be picked up.

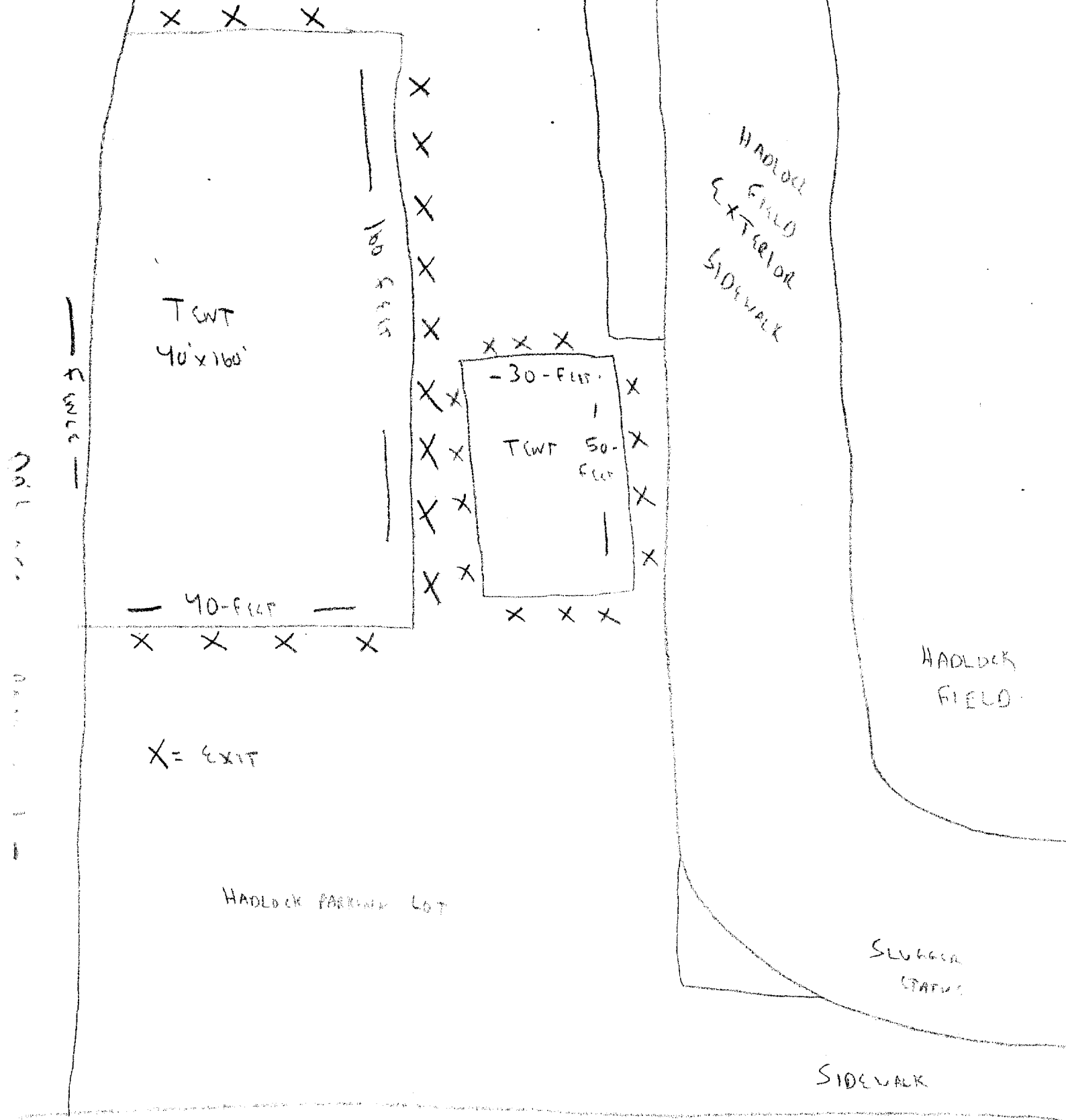
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 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 **officials** 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: _____

This is not a permit; you may not commence ANY work until the permit is issued.



X = EXIT

HADLOCK PARKING LOT

HADLOCK
FIELD
EXTERIOR
SIDEWALK

HADLOCK
FIELD

SLUGGER
STADIUM

SIDEWALK

PARK AVENUE

R

PRODUCER TD Banknorth Ins Agcy Inc (SP) P.O. BOX 406 Portland ME 04112-0406 Phone: 207-239-3500 Fax: 207-775-0339	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 Portland, Maine Baseball, Inc Mr. Charles Eshbach P.O. Box 636 Portland ME 04104	<table border="1"> <tr> <th colspan="2">INSURERS AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A</td> <td>Transportation Insurance Co</td> <td>20494</td> </tr> <tr> <td>INSURER B</td> <td></td> <td></td> </tr> <tr> <td>INSURER C</td> <td></td> <td></td> </tr> <tr> <td>INSURER D</td> <td></td> <td></td> </tr> <tr> <td>INSURER E</td> <td></td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE		NAIC #	INSURER A	Transportation Insurance Co	20494	INSURER B			INSURER C			INSURER D			INSURER E		
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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

SR ADD'L TR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	RENL OF C1043487368	04/08/06	04/08/07	EACH OCCURRENCE	01,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 3,000,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MEDEXP (Any one person)	\$ 15,000
		<input checked="" type="checkbox"/> Liq Liab \$1 M				PERSONAL & ADV INJURY	\$ 1,000,000
		GENL AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$ 2,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$ 2,000,000
		AUTOMOBILE LIABILITY				Emp Ben.	1,000,000
		<input type="checkbox"/> ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				PROP (Per sbtd) INJURY	\$
		<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> HIRED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/> NON-OWNED AUTOS				AUTO ONLY - EA ACCIDENT	\$
		EXCESS/UMBRELLA LIABILITY				OTHER THAN EA ACC	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AUTO ONLY AGG	\$
						EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
						WC STATUTORY LIMITS	
						OTHER	
						E L EACH ACCIDENT	\$
						E L DISEASE - EA EMPLOYEE	\$
						E L DISEASE - POLICY LIMIT	\$
		if yes, describe under SPECIAL PROVISIONS below					
		OTHER					

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. / REPRINTED - Original printed 4/6/06.

CERTIFICATE HOLDER City of Portland Attn: Ted Musgrave 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 <u>10</u> 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.
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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 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

City of Portland, Maine - Building or Use Permit

389 Congress Street, 04 101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 06-1086	Date Applied For: 07/25/2006	CBL: 049 AOOIOOI
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Location of Construction: 165 PARK AVE	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	

Proposed Use: Hadlock Field - Tent Use 3 Tents set-up August 10, 2006 - Break down August 14, 2006	Proposed Project Description: 3 Tents set-up August 10, 2006 - Break down August 14, 2006
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Dept: Building	Status: Approved	Reviewer: Mike Nugent	Approval Date: 07/26/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>

Dept: Fire	Status: Approved	Reviewer: Cptn Greg Cass	Approval Date: 07/26/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>



Certificate of Flame Resistance

Date manufactured

09/10/02

REGISTERED FABRIC NUMBER

149.01

ISSUED BY

SNYDER MANUFACTURING INC
3001 PROGRESS STREET
DOVER, OHIO 44622

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

FOR SHARNECKE TENTS INC

ADDRESS 5245 SHANTYTOWN DR

CITY ROBHOLT

STATE WI 54475-9191



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

CPAI-84

SNYDER MANUFACTURING INC.

By *Michael O'Connell*

Title

Supervisor, Quality Control

STYLE PNV 16108 DARK BLUE 61" H: GLOSS

CONTROL NO. 16376

CUSTOMER ORDER NO. VBL KEN

SNYDER S-ORDER NO. 162588

DATE PROCESSED 09/10/02

YARDS OR QUANTITY 3007

DATE CERTIFIED 09/12/02

4.10-4-88F-RO



Certificate of Flame Resistance

Date manufactured

08/28/02

REGISTERED FABRIC NUMBER

149.01

ISSUED BY

SNYDER MANUFACTURING, INC
3001 PROGRESS STREET
DOVER, OHIO 44622

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SNYDER MANUFACTURING INC.

By *Michael O'Connell*

Title

Supervisor, Quality Control

STYLE PNV 13108 DARK BLUE 61" H: GLOSS

CONTROL NO. 16261

CUSTOMER ORDER NO. VBL KEN

SNYDER S-ORDER NO. 162588

DATE PROCESSED 08/28/02

YARDS OR QUANTITY 325

DATE CERTIFIED 09/12/02

4.10-4-88F-RU