

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

Location of Construction: Spring Oaks Park 04101		Owner: City of Portland		Phone:		Permit No: 991366	
Owner Address:		Lessee/Buyer's Name: Mansions of Maine		Phone: 774-4417		Business Name:	
Contractor Name: Maine Bay Canvas		Address:		Phone:		Permit Issued: PERMIT ISSUED DEC 13 1999	
Past Use: Park		Proposed Use: Same		COST OF WORK: \$ 500.00		PERMIT FEE: \$ 35.00/Waiver Request	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Text Use Group: U Type: Signature: [Signature]	
Proposed Project Description: Erect 1 30x60 and 1 30x30 Tents Temporarily for Twilight in The Park.				PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		Zone: CBL: PORTLAND Zoning Approval: [Signature]	
Permit Taken By: GD		Date Applied For: GD		December 13, 1999		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"/>	

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..

Please Call Terence for Pickup
774-4417

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 provisions of the code(s) applicable to such permit

Zoning Appeal

Variance
 Miscellaneous
 Conditional Use
 Interpretation
 Approved
 Denied

Historic Preservation

Not in District or Landmark
 Does Not Require Review
 Requires Review

Action: [Signature]

Approved
 Approved with Conditions
 Denied

Date: 12/13/99

SIGNATURE OF APPLICANT ADDRESS: DATE: PHONE:

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

CEO DISTRICT [Box]

THIS IS NOT A PERMIT/CONSTRUCTION CANNOT COMMENCE UNTIL THE PERMIT IS ISSUED

**Building or Use Permit Pre-Application
Attached Single Family Dwellings/Two-Family Dwelling
Multi-Family or Commercial Structures and Additions Thereto**

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

NOTEIf 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 (include Portion of Building): <i>Deering Oaks - December 19, 1999</i>	
Total Square Footage of Proposed Structure	Square Footage of Lot <i>Snowdate - 20th</i>
Tax Assessor's Chart, Block & Lot Number Chart# <i>649</i> Block# <i>A</i> Lot# <i>001</i>	Owner: <i>Hospice of Maine (City of Portland)</i> Telephone#: <i>774-4417</i>
Owner's Address: <i>Hospice of ME. 693 Congress St. - Rear 04102</i>	Lessee/Buyer's Name (If Applicable)
	Cost Of Work: <i>Waiver</i> Fee: <i>\$</i> <i>request has been made</i>
Proposed Project Description: (Please be as specific as possible) <i>Twilight in the park</i>	<i>Erect 1 30 x 60 tent - temp. 1 30 x 30 tent - temp</i>
Contractor's Name, Address & Telephone <i>ME. Bay Comics</i>	Rec'd By <i>GD</i>
Current Use: <i>Park</i>	Proposed Use: <i>same</i>

Separate permits are required for Internal & External Plumbing, HVAC and Electrical installation.

- All construction must be conducted in compliance with the 1996 B.O.C.A. Building Code as amended by Section 6-Art II.
- All plumbing must be conducted in compliance with the State of Maine Plumbing Code.
- All Electrical Installation must comply with the 1996 National Electrical Code as amended by Section 6-Art III.
- HVAC (Heating, Ventilation and Air Conditioning) installation must comply with the 1993 BOCA Mechanical Code.

You must include the following with you application:

- 1) A Copy of Your Deed or Purchase and Sale Agreement
- 2) A Copy of your Construction Contract, if available
- 3) A Plot Plan/Site Plan

** Please call *
Terence Cronin*

Minor or Major site plan review will be required for the above proposed projects. The attached checklist outlines the minimum standards for a site plan.

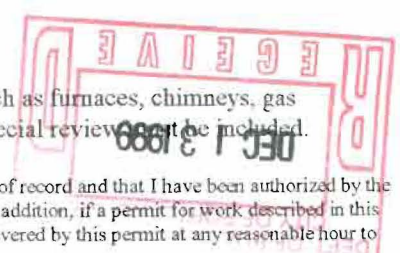
4) Building Plans

774-4417

Unless exempted by State Law, construction documents must be designed by a registered design professional.

A complete set of construction drawings showing all of the following elements of construction:

- Cross Sections w/Framing details (including porches, decks w/ railings, and accessory structures)
- Floor Plans & Elevations
- Window and door schedules
- Foundation plans with required drainage and dampproofing
- Electrical and plumbing layout. Mechanical drawings for any specialized equipment such as furnaces, chimneys, gas equipment, HVAC equipment (air handling) or other types of work that may require special review must be included.



Certification

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Signature of applicant: <i>[Signature]</i>	Date: <i>12/13/99</i>
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Building Permit Fee: \$30.00 for the 1st \$1000. cost plus \$6.00 per \$1,000.00 construction cost thereafter.
Additional Site review and related fees are attached on a separate addendum

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
12/01/99

PRODUCER
TURNER BARKER INSURANCE

ONE INDIA ST
PORTLAND ME 04101

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
HOSPICE OF MAINE

693 CONGRESS STREET REAR
PORTLAND ME 04102

COMPANIES AFFORDING COVERAGE	
COMPANY A	MAINE MUTUAL FIRE
COMPANY B	MAINE EMPLOYERS MUTUAL
COMPANY C	
COMPANY D	

COVERAGES
THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY	BP0415754	03/11/99	03/11/00	GENERAL AGGREGATE	\$ 600,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 300,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY	\$ 300,000	
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	\$ 300,000	
					FIRE DAMAGE (Any one fire)	\$ 50,000	
					MED EXP (Any one person)	\$ 5,000	
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	\$	
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$	
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE	\$	
	<input type="checkbox"/> HIRED AUTOS						
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:		
					EACH ACCIDENT	\$	
	EXCESS LIABILITY				AGGREGATE	\$	
	<input type="checkbox"/> UMBRELLA FORM				EACH OCCURRENCE	\$	
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE	\$	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	1810007843	5/17/99	5/17/00	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTHER	
	<input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				<input type="checkbox"/> INCL	EL EACH ACCIDENT	\$ 100,000
	<input type="checkbox"/> EXCL				EL DISEASE-POLICY LIMIT	\$ 500,000	
					EL DISEASE-EA EMPLOYEE	\$ 100,000	
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
NAMING THE CITY OF PORTLAND AS ADDITIONAL INSUREDS AS RESPECTS THE LUMINARY EVENT, DECEMBER 19, 1999, WITH BACKUP DATE OF DECEMBER 20, 1999 AT DEERING OAKS PARK, PORTLAND, MAINE

CERTIFICATE HOLDER

ATTN: TED MUSGRAVES
CITY OF PORTLAND PARK & REC
17 ARBOR STREET
PORTLAND ME 04103

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

AUTHORIZED REPRESENTATIVE
Laurie J. Willette LW A

Certificate of Flame Resistance



REGISTERED
FABRIC
NUMBER

140.01/31.

Issued by

TOPTec, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured

6/10/96

*This is to certify that the materials described
are inherently flame retardant.*

Name MAINE BAY CANVAS

Address 53 INDUSTRIAL WAY

City PORTLAND

State

ME

Zip

04103

Certification is hereby made that:

The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA701-96, CPAI84, ULC109, MVSS302.

Method of Application: _____

Description of item certified: EXPO END 30x30 WHITE AND 30 x 60 TOP




The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTec, INC.

Name of Production Superintendent

MODEL TTE3030210

SERIAL # 961704DL

-  - Twilight Celebration Tent
-  - Ice Sculpture Garden
-  - Luminaria Displays

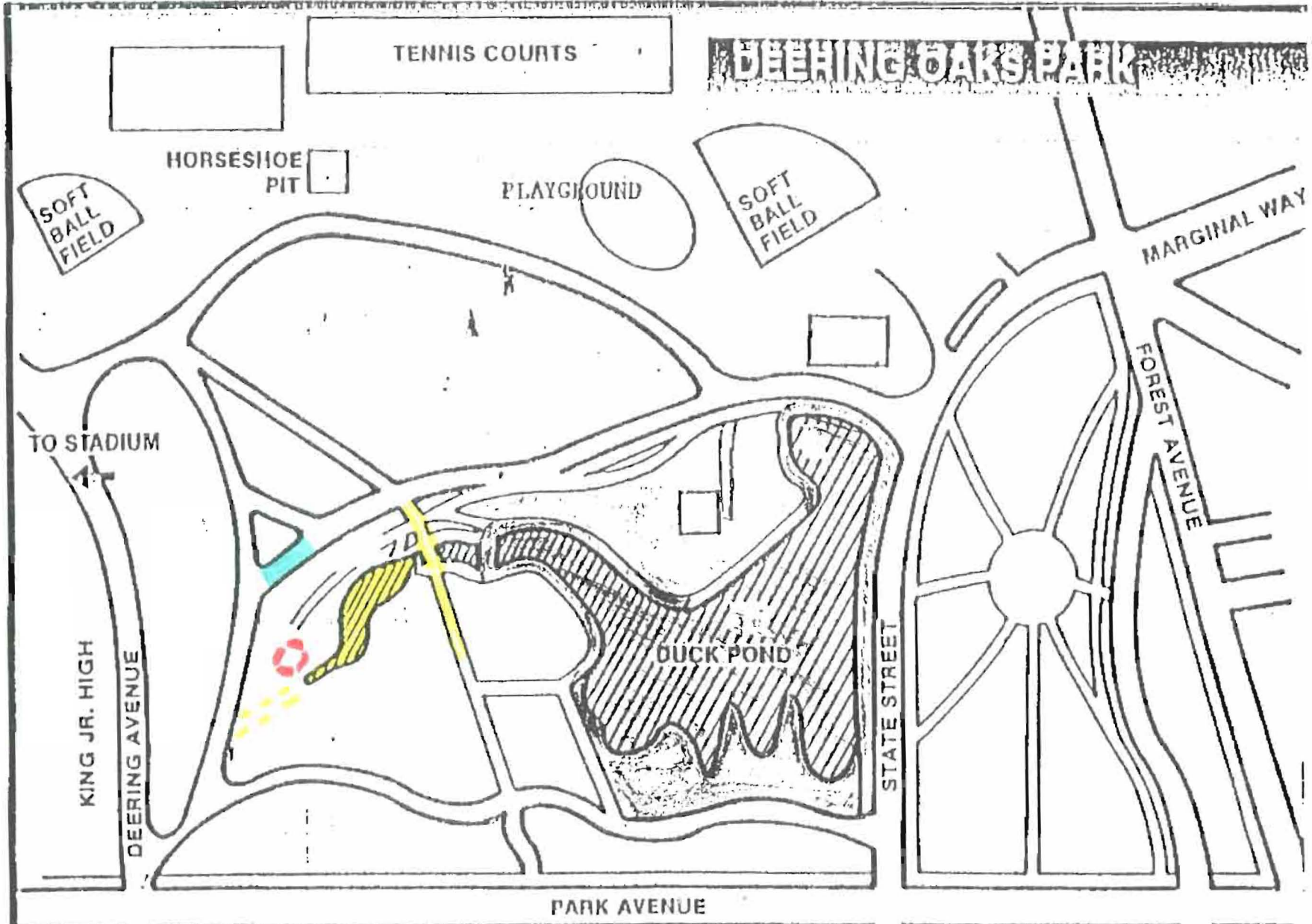
Hospice of Maine's

Twilight In The Park



Dec. 19th, 1999

70 -
M. G. G. G.

07/26/1999 15:13 2077568398 PORTLAND PARKS & REC PAGE 01



Tom + Kathy

 If frozen,  Dessert Tent  Luminaria  Potentially to be

Hospice of Maine
 Twilight in the Park
 December 19, 1999

Scale: 1/2 in. = 10 ft.

