# City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

ob No: 2011-05-1117-OSD	Date Applied: 5/11/2011		CBL: 055 E - 037 - 001 -				
Location of Construction:	Owner Name: HUCKSTER'S ROW PROB	PERTIES	Owner Address: 192 STATE ST APT 2 PORTLAND, ME - M	05 AINE 04101		Phone:	
Business Name: Petite Jacqueline – Liz Kayo	Contractor Name:		Contractor Addres	s:		Phone: 553-7044	
Lessee/Buyer's Name:	Phone:		Permit Type: OUTDOOR - Outdoo	or Seating		Zone: B-3	
Past Use:	Proposed Use:		Cost of Work:			CEO District:	
Restaurant – Café Uffa  Same: Restaurant – F  Jacqueline – to add o  dining				Approved Denied N/A		Inspection: Use Group: Type:	
			Signature:			Signature:	
Proposed Project Description 190 State Petite Jaqueline - OSI			Pedestrian Activi	ties District (P.A	D.)		
Permit Taken By: Lannie				Zoning Appr			
		Special	Zone or Reviews	Zoning Appea	Historic 1	Preservation when	
<ol> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building Permits do not include plumbing, septic or electrial work.</li> <li>Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work.</li> </ol>		Flood Zone Subdivision Site Plan MajMin MM		Variance	Does no	Dist or Landmark	
				Miscellaneous	Jse Require	es Review	
				Interpretation	1	Approved Approved w/Conditions Denied	
				Denied	Denied		
		Date: CERTIFICATION		Date:	Date:		
hereby certify that I am the owner he owner to make this application he appication is issued, I certify th	r of record of the named property as his authorized agent and I agro at the code official's authorized r	, or that the p	proposed work is authorize	ed by the owner of re this jurisdiction. In a o enter all areas cove	ecord and that I have be addition, if a permit for cred by such permit at a	en authorized by work described in ny reasonable hour	

**ADDRESS** 

SIGNATURE OF APPLICANT

DATE

**PHONE** 

# Job Summary Report Job ID: 2011-05-1117-OSD

Report generated on Jun 14, 2011 10:13:13 AM

Page 1

Job Type:		Outside Dining/Seating		Job Description:	190 Stat	190 State Petite Jaqueline	Job Year:	2011	
<b>Building Job Status Code:</b>	ıs Code:	Initiate Plan Review		Pin Value:	1508		Tenant Name:	Petite J	Petite Jaqueline
Job Application Date:	ate:		Publ	Public Building Flag:	z		Tenant Number:		
Estimated Value:			Squa	Square Footage:					
Related Parties:			ROM	ROW PROPERTIES HUCKSTER'S	CKSTER'S		Property Owner	ıer	
				Job Charges	ges				
Fee Code Code Description	Charge Amount	Permit Charge Adjustment	Net Charge Amount	Payment Rec Date Nur	Receipt Number	Payment Payme Amount	Payment Adjustment Net Amount A	Net Payment Amount	Outstanding Balance
Outside Dining Fees	\$80.00		\$80.00	5/19/11	3655	\$80.00		\$80.00	\$0.00
Location ID: 8676	50								
				Location Details	etails				
Alternate Id Parc	Parcel Number	Census Tract GIS X	GIS Y GIS Z	GIS Reference Lor	Longitude L	Latitude			
H00009 055 E	E 037 001	n		-70	-70.267341 43.652935	.652935			$\alpha$
			Location Type		Subdivision	Subdivision Code Subdivision Sub Code Related Persons	Persons Address(es)	(es)	
			1				190 STATE STREET WEST	RET WEST	
Location Use Code	Variance Code	ce Use Zone Code	Fire Zone Code	Inside Outside Code	District Code	General Location Code	n Inspection Area Code		Jurisdiction Code
MULTI-USE COMMERCIAL		NOT APPLICABLE			Historic District		DISTRICT 3	CENTRAL BUSINESS DISTRICT	INESS

190 STATE STREET WEST

User Defined Property Value

Structure Type Code Structure Status Type Square Footage Estimated Value

Structure: Loc id 000008675 Alt id 003746

Occupancy Type Code:

5140,08

9

Outside Dining Area

Longitude Latitude GIS X GIS Y GIS Z GIS Reference

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0

0

Structure Details

Permit #: 20113667

Permit Data

# Job Summary Report Job ID: 2011-05-1117-OSD

Report generated on Jun 14, 2011 10:13:13 AM

Location Id	Location Id Structure Description Permit Status	Permit Status	Permit Description	Issa	e Date Reissue	Issue Date Reissue Date Expiration Date	Date	
9298	Outside Dining	Initialized	Outside Dining 12 Chairs & 6 tables 105 sq ft	s 105 sq ft				
			Inspe	Inspection Details				
Inspection I	Inspection Id Inspection Type Inspection Result Status In	nspection Result 5	Status Inspection Status Date	Scheduled Sta	art Timestamp	Result Status Dat	spection Status Date Scheduled Start Timestamp Result Status Date Final Inspection Flag	
			Fee	Fees Details				
Fee Code		Permit Charge	Permit Charge Adj	Payment	Receipt	Payment Pa	Payment Adjustment	Payment Adj
Description		Adjustment	Remark	Date	Number	Amount	Amount	Comment





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.

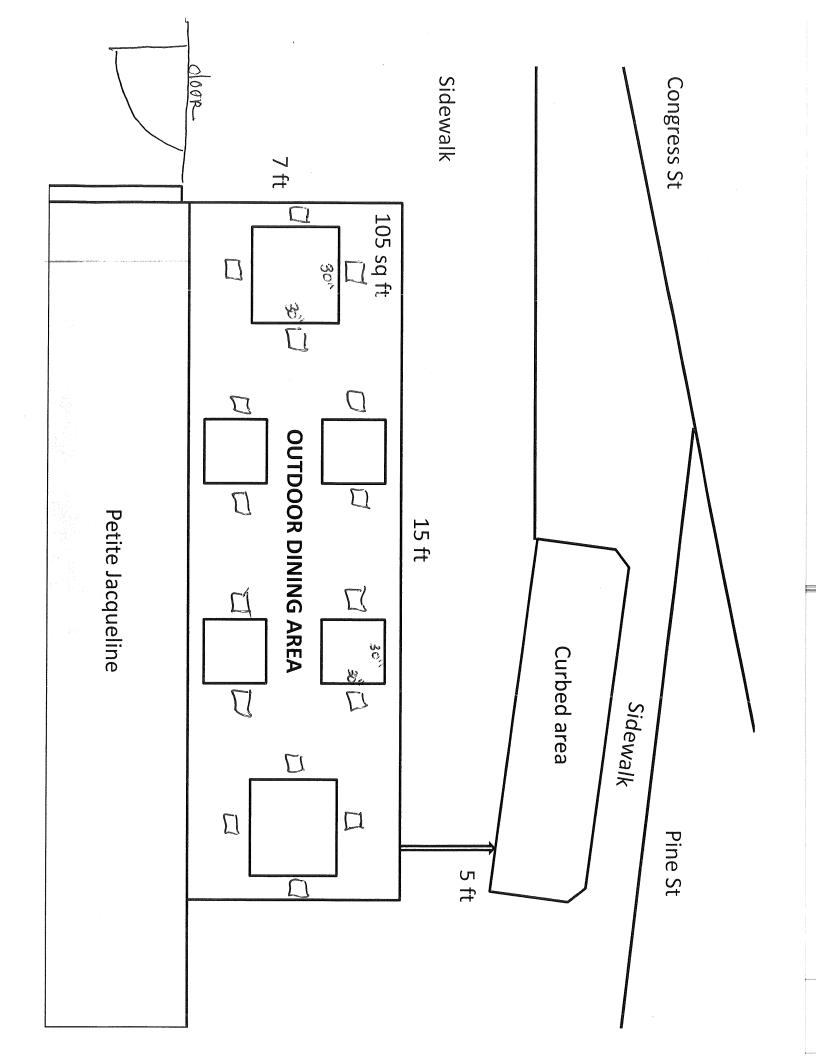
			Minus Land Land						
New Application for Outside Dining  Renewal Application for Outside Dining  Passed © Concerns									
Renewal Application for C	Renewal Application for Outside Dining								
City Clerk signature for liquor license approval: MCGBKN/ckns/rk-or Pending Council Date 125/11									
Location/Address of Outdoor Seating:									
Total Square Footage of Proposed Seatin	ng Area¹	Square Foo	tage of Lot						
7×10 105 sq++									
Tax Assessor's Chart, Block & Lot	Phone#:	. 4	Owner:						
Chart# Block# Lot# 2075537044 Will Williams									
Applicant *must be owner or Lessee   Lessee/Buyer's Name:   Annual Fee: (\$80)									
Name: LIZ KUUO (If Applicable) Total Sq. Ft.									
Address: 190 State St Sq. Ft. Fee: \$									
City, State & Zip: POYHUM(1, MF 0410) Total Fee: \$									
Current use:  Business name:  Telled Jaque Inc.  Seating area dimensions:  TX ID SQFT  How many chairs?  Yes Alcohol is served.  No Alcohol being served.  Who should we contact for the pre-inspection: U2 KUO									
Mailing address: 190 State St			one: 207,653 toylane						
Please submit all of the information outle	ined in the Or	tdoor Dining	g Application Checklist Failure to						
Please submit all of the information outli do so will result in	1 the automat	ic denial of y	our permit.O' ", PO'"						

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 <a href="https://www.portlandmaine.gov">www.portlandmaine.gov</a>, 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.

ignature of Applicant: Date: 3 30 11

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.





## **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:

$\Box$ 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.
	lure to comply with any of the above conditions will result in revocation or n-renewal of the permit.
according according to a but negotial the the of Floss atto space bod projany	We fully understand that the City of Portland, its agents, officers and employees ept no responsibility and will not be liable for any injury, harm or damage to our person or property arising out of the establishment's occupancy of the exalk or park space. To the fullest extent permitted by law, I/We do hereby agree assume all risk of injury, harm or damage to my/our person or property (including not limited to all risk of injury, harm or damage to my/our property cause by the ligence of the City of Portland, its agents, officers or employees) arising out of establishment's occupancy of the sidewalk or park space. I/We hereby agree, to fullest extent permitted by law, to defend, indemnify and hold harmless the City Portland, its agents, officers and employees, from and against all claims, damages, es and expenses, just or unjust, including, but not limited to costs of defense and arney's fees, arising out of the establishment's occupancy of the sidewalk or park to provided that any such claims, damage, loss or expense (1) is attributable to ily injury, sickness, disease, or death, or to injury to or destruction of tangible perty including the loss of use there from, and (2) is caused in whole or in part by negligent act or omission of the establishment, anyone directly or indirectly ployed by it, or anyone for whose act it may be liable.
Prin Est	ated and acknowledged: Churs Date: 5/11/11  Ited name E KOPNIASDERG  Tablishment Petite Jacqueline
Τ	ration 190 State St Prittana ME 14101

## City of Portland, Maine

Office of the City Clerk

Re-Issue Date 04/26/11

Amended License: Added Outdoor Dining

License No. 4416

Issue Date 3/3/2011

To all Whom These Presents May Concern:

This is to certify that the Municipal Officers have granted a license to DERASSE, LLC

Doing business as PETITE JACQUELINE

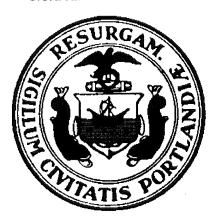
at 190 STATE ST

for CLASS I FSE

and at that place only on the following conditions:

OUTDOOR DINING 6 TABLES WITH 2 CHAIRS AT EACH FOR A TOTAL OF 12 SEATS

This license is granted subject to strict observance of all laws, ordinances and regulations enacted for the protection of the City of Portland so far as they may apply and is to continue in force until 3/3/2012 unless sooner revoked.



City Clerk

#### ACORD

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/11/2011

TM TM					03/11/2011
The Rowley Agency, Inc. 139 Loudon Road	3.224.8012	ONLY AND	CONFERS NO R	ED AS A MATTER OF IN IGHTS UPON THE CER' E DOES NOT AMEND, E FORDED BY THE POLIC	TIFICATE EXTEND OR
P.O. Box 511 Concord, NH 03302-0511			FFORDING COVI		NAIC #
INSURED Five Fifty Five, Inc.				Insurance Compa	ny
Petite Jacqueline				's Mutual Ins Co	
c/o Michelle Corry		INSURER C:			
555 Congress Street		INSURER D:			
Pontland, ME 04101		INSURER E:			
COVERAGES					
THE POLICIES OF INSURANCE LISTED BELOW HAV ANY REQUIREMENT, TERM OR CONDITION OF ANY MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE	CONTRACT OR OTHER DEPOSITION OF THE CONTRACT OR OTHER DE	OCUMENT WITH R EREIN IS SUBJECT	ESPECT TO WHICH	THIS CERTIFICATE MAY E	SE ISSUED OR
INSR ADD'L LTR INSRD TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	3
GENERAL LIABILITY	S30MZX80930240	04/24/2011	04/24/2012	EACH OCCURRENCE	\$ 1,000,000
X COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
CLAIMS MADE X OCCUR				MED EXP (Any one person)	\$ 5,000
A				PERSONAL & ADV INJURY	\$ 1,000,000
				GENERAL AGGREGATE	\$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	\$ 2,000,000
POLICY PRO- JECT LOC	C20HTV00020240	04/24/2013	04/24/2012		
AUTOMOBILE LIABILITY  ANY AUTO	S30MZX80930240	04/24/2011	04/24/2012	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	\$
A HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	\$
				PROPERTY DAMAGE (Per accident)	\$
GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
ANY AUTO				OTHER THAN EA ACC	\$
				AUTO ONLY: AGG	\$
EXCESS / UMBRELLA LIABILITY	XAU00048413447	04/24/2011	04/24/2012	EACH OCCURRENCE	\$ 1,000,000
X OCCUR CLAIMS MADE				AGGREGATE	\$ 1,000,000
A					\$
DEDUCTIBLE					\$
X RETENTION \$ 0	1010001000	04/24/2011	04/24/2012	X WC STATU- OTH- TORY LIMITS ER	\$
AND EMPLOYERS' LIABILITY Y/N	3A STATE: ME	04/24/2011	07/24/2012	X TORY LIMITS ER	\$ 500,000
B ANY PROPRIETOR/PARTNER/EXECUTIVE	CLUDED OFFICERS:			E.L. DISEASE - EA EMPLOYEE	700 000
(mandatory in terry	& STEPHEN CORRY			E.L. DISEASE - POLICY LIMIT	\$ 500,000
SPECIAL PROVISIONS below MICHELLE OTHER	& STEFFIEN CORKT			L.E. DIOLAGE - FOLIOT LIMIT	300,000
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXC COVERING RESTAURANT OPERATIONS OF	LUSIONS ADDED BY ENDORS	MENT/SPECIAL PRO	ovisions	nd. ME	
Certificate holder is included as	additional insu	red when red	guired by wr	itten contract.	
			-		
*except 10 days for nonpayment of	premium.	041/05/1	rion.		
CERTIFICATE HOLDER		CANCELLAT			DEFORE THE EVOIDATION
				BED POLICIES BE CANCELLED ER WILL ENDEAVOR TO MAIL	
		1		R NAMED TO THE LEFT, BUT FA	
City of Portland		1		Y OF ANY KIND UPON THE INSU	NEK, 113 AGENTS OK
386 Congress Street		REPRESENTAT AUTHORIZED RE		1000	)
Portland, ME 04101		Kellev Ma		Princip Hassier	_

#### **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**

This Certificate of Insurance 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.

Strengthening a Remarkable City, Building a Community for Life PORTLAND Inspections Division

389 Congress Street, RM 315 Portland, Maine 04101-3509

Petite Jaqueline 190 State Portland, ME 04101 Liz Kayo

Outside Dining \$210 Owed RE: Petite Jaqueline

June 14, 2011