

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND

BUILDING PERMIT

This is to certify that "LFK 188 STATE ST

Located At 188 A STATE ST

Job ID: 2012-06-4293-OSD

CBL: 055- E-039-001

has permission to OSD; 3 tables; 6 Chairs. LFK 188A State St.

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

**THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD**

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Director of Planning and Urban Development
Jeff Levine

Job ID: 2012-06-4293-OSD

Located At: 188 A STATE ST

CBL: 055- E-039-001

Conditions of Approval:

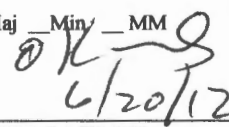
1. This permit approves outside seating only. Any alcohol or entertainment in this space requires licensing approvals from the City Clerk.
2. The outside dining permit is approved for the area delineated at the inspection and stated on the permit, and must be kept on site.
3. **THIS PERMIT MUST BE RENEWED ANNUALLY.** The tables and chairs must not block any means of egress of any building, even during storage.
4. The outdoor seating may NOT be used until the permit is issued and posted on site.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-06-4293-OSD	Date Applied: 6/19/2012	CBL: 055- E-039-001	
Location of Construction: 188 A STATE ST	Owner Name: 188 STATE STREET LLC	Owner Address: 56 ST LAWRENCE ST PORTLAND, ME 04101	Phone:
Business Name: "LFK"	Contractor Name: lessee: Johnny Lomba	Contractor Address: 188A State Street, Portland, ME 04101	Phone: 712-0310
Lessee/Buyer's Name:	Phone:	Permit Type: OUTDOOR DINING	Zone: B-3
Past Use: 1 st Floor restaurant	Proposed Use: Same: 1 st floor restaurant – to have outdoor dining for the 2012 season	Cost of Work:	CEO District:
		Fire Dept: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type:
		Signature:	 Signature:
Proposed Project Description: OSD; 3 tables; 6 Chairs		Pedestrian Activities District (P.A.D.)	

Permit Taken By: Brad	Zoning Approval
-----------------------	------------------------

<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building Permits do not include plumbing, septic or electrical work.</p> <p>3. 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.</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetlands</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>___ Maj ___ Min ___ MM</p> <p>Date:  6/20/12</p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>	<p>Historic Preservation</p> <p><input type="checkbox"/> Not in Dist or Landmark</p> <p><input type="checkbox"/> Does not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date:</p>
	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 appication 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



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.

<input checked="" type="checkbox"/> New Application for Outside Dining <input type="checkbox"/> Renewal Application for Outside Dining		
City Clerk signature for liquor license approval: <u>[Signature]</u> or Pending Council Date <u>7/2/12</u> Location/Address of Outdoor Seating:		
Total Square Footage of Proposed Seating Area ¹ <u>104 S.F.</u>		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart# <u>055</u> Block# <u>E039001</u> Lot#	Phone#: <u>899.3277</u>	Owner: <u>188 STATE ST. LLC</u>
Applicant * must be owner or Lessee Name: <u>LFK</u>	Lessee/Buyer's Name: (If Applicable) <u>SQUARED, LLC</u>	Annual Fee: <u>\$80</u> Total Sq. Ft.
Address: <u>188 a STATE ST.</u> City, State & Zip: <u>PORTLAND MAINE 04101</u>		Sq. Ft. Fee: \$ Total Fee: \$
Current use: <u>CLASS I FSE RESTAURANTS / BAR</u> Business name: <u>LFK</u> Seating area dimensions: <u>8'x13' (104 S.F.)</u> How many chairs? <u>6</u> How many tables? <u>3</u> <input checked="" type="checkbox"/> Yes Alcohol is served. <input type="checkbox"/> No Alcohol being served.		
Who should we contact for the pre-inspection: <u>JOHNNY LOMBA</u> Mailing address: <u>188A STATE ST. PORTLAND MAINE</u> Phone: <u>207.712.0310</u>		

Please submit all of the information outlined in the Outdoor Dining Application Checklist. Failure to do so will result in the automatic denial of your permit.

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 874-87031

I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the applicant to make this application as his/her authorized agent. I agree to enforce 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: [Signature]

Date: 6.18.12

¹ 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.**

Brad

RECEIVED
JUN 19 2012
Dept. of Building Inspections
City of Portland Maine



PORTLAND MAINE

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Receipts Details:

Tender Information: Check , Check Number: 1535

Tender Amount: 80.00

Receipt Header:

Cashier Id: bsaucier

Receipt Date: 6/20/2012

Receipt Number: 45164

Receipt Details:

Referance ID:	6959	Fee Type:	BP-OD
Receipt Number:	0	Payment Date:	
Transaction Amount:	80.00	Charge Amount:	80.00
Job ID: Job ID: 2012-06-4293-OSD - OSD; 3 tables; 6 Chairs			
Additional Comments: OSD 188A State St.			

Thank You for your Payment!



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:

- 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:

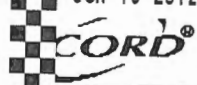
- The tables and chairs must be placed within the permitted area on the sidewalk in such a manner as to allow the free and safe passage of pedestrian traffic. If the tables and chairs are moved and located outside of the permitted outdoor seating area, they must be relocated to within the permitted area. 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.

Failure to comply with any of the above conditions will result in revocation or non-renewal of the permit.

I/We fully understand that the City of Portland, its agents, officers and employees accept no responsibility and will not be liable for any injury, harm or damage to my/our person or property arising out of the establishment's occupancy of the sidewalk or park space. To the fullest extent permitted by law, I/We do hereby agree to assume all risk of injury, harm or damage to my/our person or property (including but not limited to all risk of injury, harm or damage to my/our property cause by the negligence of the City of Portland, its agents, officers or employees) arising out of the establishment's occupancy of the sidewalk or park space. I/We hereby agree, to the fullest extent permitted by law, to defend, indemnify and hold harmless the City of Portland, its agents, officers and employees, from and against all claims, damages, losses and expenses, just or unjust, including, but not limited to costs of defense and attorney's fees, arising out of the establishment's occupancy of the sidewalk or park space, provided that any such claims, damage, loss or expense (1) is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of tangible property including the loss of use there from, and (2) is caused in whole or in part by any negligent act or omission of the establishment, anyone directly or indirectly employed by it, or anyone for whose act it may be liable.

Signed and acknowledged:  Date: 6.18.12
 Printed name JOHNNY LOMBA
 Establishment LFK
 Location 188 A STATE STREET, PORTLAND



CERTIFICATE OF LIABILITY INSURANCE

6/19/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER Cross Insurance-Bath 5 Chandler Drive PO Box 769 Bath ME 04530	CONTACT NAME: Claudette Turcotte PHONE (A/C No. Ext.): (207) 443-3336 FAX (A/C No.): (207) 443-2521 E-MAIL ADDRESS: cturcotte@crossagency.com														
INSURED JSquared LLC, DBA: dba LFK 188 A State St Portland ME 04101	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A: Atlantic Casualty Insurance</td> <td></td> </tr> <tr> <td>INSURER B: Maine Employers Mutual Ins Co</td> <td style="text-align: center;">11149</td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Atlantic Casualty Insurance		INSURER B: Maine Employers Mutual Ins Co	11149	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES **CERTIFICATE NUMBER: CL1261967849** **REVISION NUMBER:**

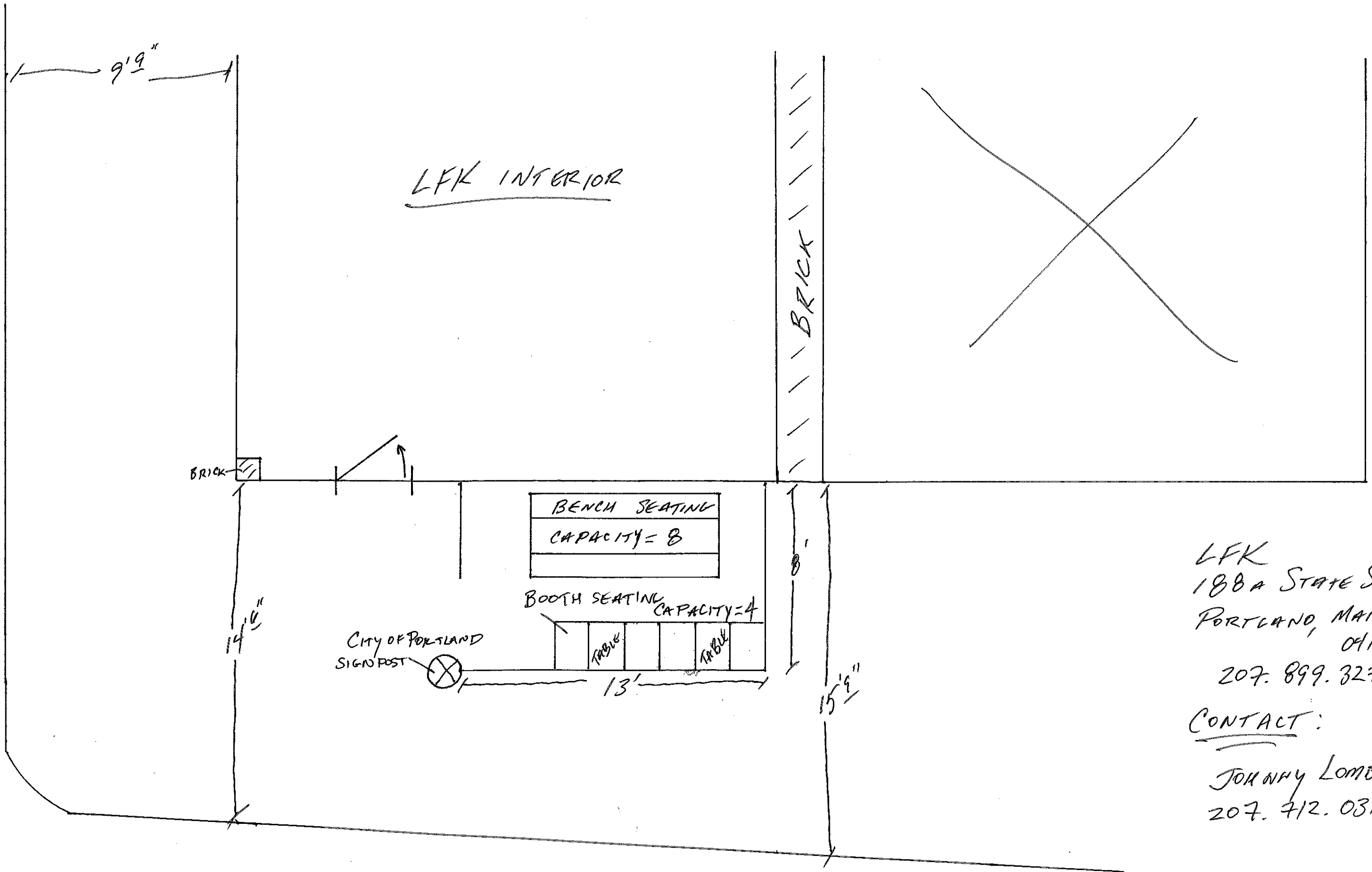
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS								
A	GENERAL LIABILITY			ML18000054	12/28/2011	12/28/2012	EACH OCCURRENCE \$ 1,000,000								
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000								
GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC															
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS						<input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS								
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB						<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$								
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	1810098306	12/20/2011	12/20/2012	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WC STATUTORY LIMITS</td> <td style="width: 50%;">OTH-ER</td> </tr> <tr> <td>E.I. EACH ACCIDENT</td> <td>\$ 500,000</td> </tr> <tr> <td>E.I. DISEASE - EA EMPLOYEE</td> <td>\$ 500,000</td> </tr> <tr> <td>E.I. DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	WC STATUTORY LIMITS	OTH-ER	E.I. EACH ACCIDENT	\$ 500,000	E.I. DISEASE - EA EMPLOYEE	\$ 500,000	E.I. DISEASE - POLICY LIMIT	\$ 500,000
WC STATUTORY LIMITS	OTH-ER														
E.I. EACH ACCIDENT	\$ 500,000														
E.I. DISEASE - EA EMPLOYEE	\$ 500,000														
E.I. DISEASE - POLICY LIMIT	\$ 500,000														

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 Refer to policy for exclusionary endorsements and special provisions. City of Portland is also listed as additional insured with regards to the above noted General Liability coverage.

CERTIFICATE HOLDER (207) 874-8716 City of Portland Attn: Brad 389 Congress Street Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE C Turcotte/CNT <i>Claudette Turcotte</i>
--	--

PINE STREET



STATE STREET

LFK
 188 A STATE STREET
 PORTLAND, MAINE
 04101

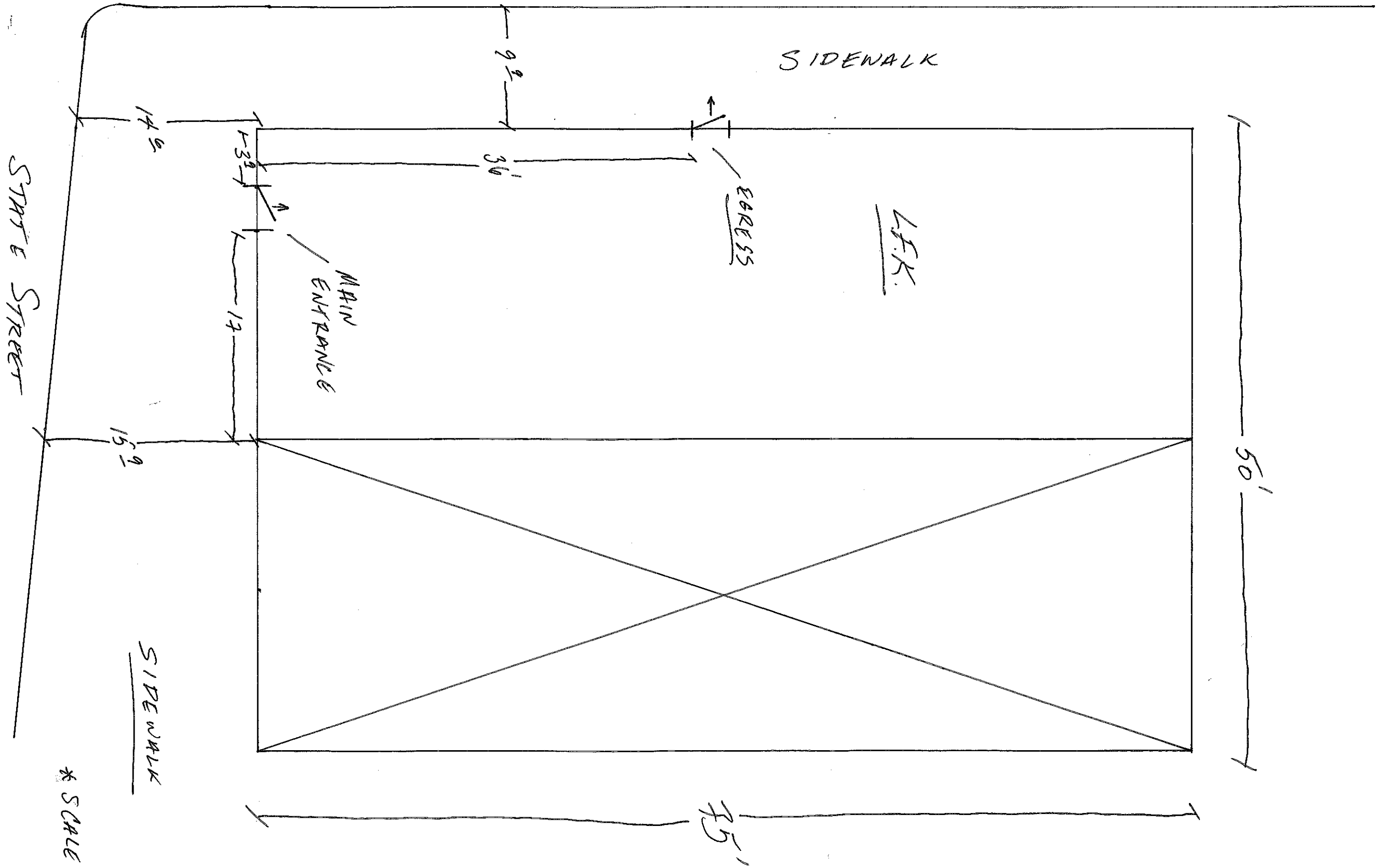
207. 899. 3277

CONTACT:

JOHNNY LOMBA
 207. 712. 0310

* SCALE: 1/4" = 1 FOOT

PINK STREET



STATE STREET

SIDENWALK

RECESS

L.F.K.

MAIN ENTRANCE

50'

75'

15'9"

17'

36'

9'

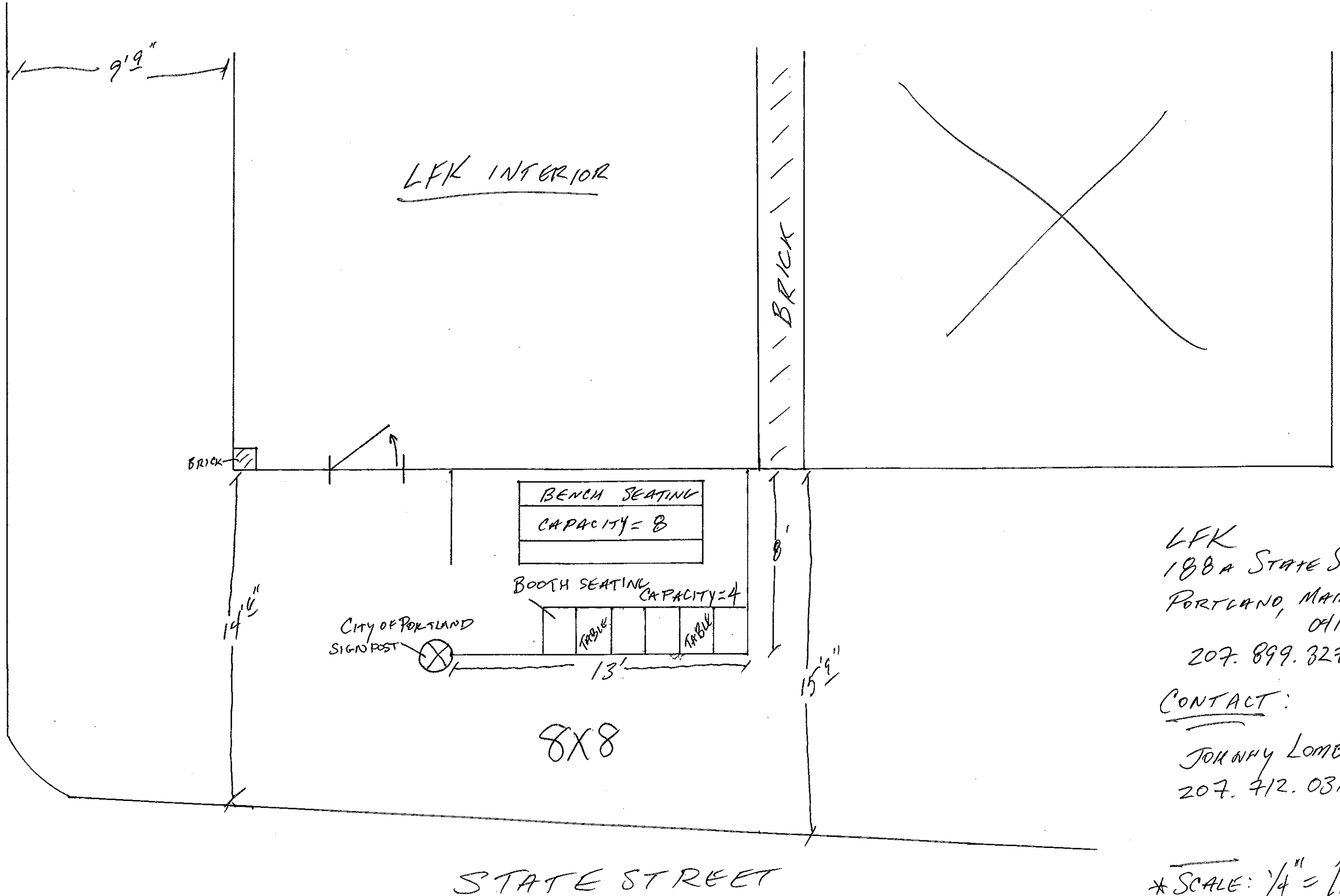
14'

13'

SIDENWALK

* SCALE: 1/8" = 1 foot

PINE STREET



LFK
 188A STATE STREET
 PORTLAND, MAINE
 04101
 207. 899. 3277
 CONTACT:
 JOHNNY LOMBA
 207. 712. 0310

* SCALE: 1/4" = 1 FOOT



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.

<input checked="" type="checkbox"/> New Application for Outside Dining		
<input type="checkbox"/> Renewal Application for Outside Dining		
City Clerk signature for liquor license approval: <u>Quinn Lyons</u> or Pending Council Date: <u>7/2/12</u>		
Location/Address of Outdoor Seating:		
Total Square Footage of Proposed Seating Area ¹ <u>104 S.F.</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>055</u> Block# <u>E039001</u> Lot#	Phone#: <u>899.3277</u>	Owner: <u>188 STATE ST., LLC</u>
Applicant *must be owner or Lessee Name: <u>LFK</u>	Lessee/Buyer's Name: (If Applicable) <u>5 SQUARED, LLC</u>	Annual Fee: \$80 Total Sq. Ft.
Address: <u>188 A STATE ST.</u> City, State & Zip: <u>PORTLAND MAINE 04101</u>		Sq. Ft. Fee: \$ Total Fee: \$
Current use: <u>CLASS I FSE RESTAURANT / BAR</u>		
Business name: <u>LFK</u>		
Seating area dimensions: <u>8' X 13' (104 S.F.)</u> <u>8 X 8 = 64 Sq Ft.</u>		
How many chairs? <u>6</u> How many tables? <u>3</u>		
<input checked="" type="checkbox"/> Yes Alcohol is served. <input type="checkbox"/> No Alcohol being served.		
Who should we contact for the pre-inspection: <u>JOHNNY LOMBA</u>		
Mailing address: <u>188A STATE ST. PORT. 04101</u> Phone: <u>207. 712. 0310</u>		

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RECEIVED
JUN 19 2012

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Signature of Applicant: [Signature]

Date: 6.18.12

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