

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

BUILDING INSPECTION PERMIT

Permit Number: 040240

This is to certify that City Of Portland/Applicant
has permission to Erect a 20' x 30 Free standing tent to be placed on grass area, May 15, 04 through May 15, 04
AT 30 Baxter Blvd CBL 112 C001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 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. [Signature]
Health Dept. _____
Appeal Board _____
Other _____
Department Name

[Signature]
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit

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

Permit No:	04-0240
Date Applied For:	03/12/2004
CBL:	112 C001001

Location of Construction:	Owner Name:	30 Baxter Blvd City Of Portland
Business Name:	Contractor Name:	Contractor Address: 389 Congress St Portland Phone:
Lessee/Buyer's Name	Applicant	Permit Type: Tents
	Phone:	

Proposed Use:	Proposed Project Description:
Payson Park / Erect a 20' x 30 Free standing tent to be placed on grass area, May 15, 04 through May 15, 04	Erect a 20' x 30 Free standing tent to be placed on grass area, May 15, 04 through May 15, 04

Dept: Zoning Status: Approved Reviewer: Marge Schmuckal Approval Date: 03/16/2004 Note: Ok to Issue:

Dept: Building Status: Approved Reviewer: Tammy Munson Approval Date: 03/17/2004 Note: Ok to Issue:

Dept: Fire Status: Approved Reviewer: Lt. MacDougal Approval Date: 03/17/2004 Note: Ok to Issue:

Submit Application to Room 315, Portland City Hall, 389 Congress Street, Portland ME 04101
 207-874-8703; fax 207-874-8716. Please allow 10 Business Days for processing.

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: **Poyson Park 30-6a Boxter Blvd.**

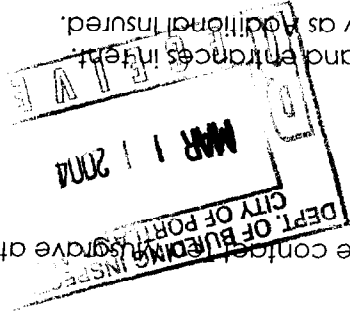
Date of Tent setup: **Sat May 15, 2004**
 Date of Tent breakdown: **Some Day**

Tax Assessor's Chart, Block & Lot: **Chart # 112 Block # C Lot # 001**
 Owner: **City of Portland**
 Telephone: **Ted Musgrave 874-8793**

Lessee/Buyer's Name (if Applicable):
 Applicant name, address & telephone: **CF Foundation 114 Penmett Rd. Units G&H Nashua, NH 03063 (802) 757-0303**
 Fee: \$ 30.00

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 the City of Portland, Insurance at **DEPT. OF BUILDING INSPECTION**
3. Plot Plan showing the following:
 - i. Property lines
 - ii. Parking
 - iii. Existing Building locations
 - iv. Tent locations, including dimensions of all tents, exits and entrances in flight.
4. If the City is the property owner, Certificate of Insurance listing the City as an additional insured. Minimum amount of coverage is \$400,000.00



Whom should we contact when the permit is ready: **David Reese**
 Mailing address: **Cystic Fibrosis Foundation 114 Penmett Rd. Units G&H Nashua, NH 03063**
 PHONE: **(802) 757-0303**

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: *[Signature]*
 Date: **2/19/04**

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

CK # 895637

From: Ted Musgrave
To: Karen Dunfey
Date: 3/12/2004 11:29:23 AM
Subject: Re: Permission for Cystic Fibrosis on May 15th

wow..... they're really ahead of the game.
I have not received their "official" request yet.... but I do have an e-mail from them, and a permit fee for use of the park, and a cert. of ins. covering their walk..... and I've penciled them in my book.
so, if their tent is going in the same location as last year (middle of triangle grass area at payson park)... then they are good to go.
thanks for checking karen !

>>> Karen Dunfey 3/12/2004 10:27:39 AM >>>

Hi Ted,
Does Cystic Fibrosis have permission to use Payson Park for their event on May 15th this year? They've submitted their tent permit application, and that's the only piece missing. Thanks!!

Karen Dunfey
Inspection Services & Zoning
874-8701

117 C1

CITY OF PORTLAND, ME

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 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: *[Signature]*

CANCELLATION		ADDITIONAL INSURED; INSURER LETTER:		CERTIFICATE HOLDER	
<p>DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS</p> <p>The certificate holder is named as Additional Insured, ATIMA, as respects to the location of the fund raising event being held May 15, 2004, "Great Strides". (No. New England Chapter)</p> <p>MAR 1 2004</p>					
<p>INSURANCE TYPE</p> <p><input checked="" type="checkbox"/> A COMMERCIAL GENERAL LIABILITY</p> <p><input type="checkbox"/> B EXCESS LIABILITY</p> <p><input type="checkbox"/> GARAGE LIABILITY</p> <p><input type="checkbox"/> AUTOMOBILE LIABILITY</p>		<p>POLICY NUMBER</p> <p>C157198720</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>GENERAL LIABILITY</p> <p><input checked="" type="checkbox"/> OCCUR</p> <p><input type="checkbox"/> CLAIMS MADE</p>		<p>AGGREGATE LIMIT APPLIES PER</p> <p><input type="checkbox"/> POLICY</p> <p><input type="checkbox"/> PRO-JECT</p> <p><input type="checkbox"/> LOC</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>ALL OWNED AUTOS</p> <p><input checked="" type="checkbox"/> SCHEDULED AUTOS</p> <p><input checked="" type="checkbox"/> HIRED AUTOS</p> <p><input checked="" type="checkbox"/> NON-OWNED AUTOS</p> <p><input checked="" type="checkbox"/> COLL. \$500 Ded.</p> <p><input checked="" type="checkbox"/> COLL. \$500 Ded.</p>		<p>COMBINED SINGLE LIMIT (Ea accident)</p> <p>\$ 1,000,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/05</p>	
<p>BODILY INJURY (Per person)</p> <p>\$</p> <p>BODILY INJURY (Per accident)</p> <p>\$</p> <p>PROPERTY DAMAGE (Per accident)</p> <p>\$</p>		<p>EACH OCCURRENCE</p> <p>\$ 1,000,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>ANY AUTO</p> <p><input type="checkbox"/> ALL OWNED AUTOS</p> <p><input checked="" type="checkbox"/> SCHEDULED AUTOS</p> <p><input checked="" type="checkbox"/> HIRED AUTOS</p> <p><input checked="" type="checkbox"/> NON-OWNED AUTOS</p>		<p>AGGREGATE</p> <p>\$ 5,000,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>EXCESS LIABILITY</p> <p><input type="checkbox"/> CLAIMS MADE</p> <p><input type="checkbox"/> OCCUR</p>		<p>AGGREGATE</p> <p>\$ 5,000,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/05</p>	
<p>EMPLOYERS LIABILITY</p> <p><input checked="" type="checkbox"/> RETENTION \$ 10,000</p>		<p>AGGREGATE</p> <p>\$ 5,000,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>WORKERS COMPENSATION AND</p> <p>EMPLOYERS LIABILITY</p> <p>164080922*</p>		<p>AGGREGATE</p> <p>\$ 500,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	
<p>OTHER</p>		<p>AGGREGATE</p> <p>\$ 500,000</p>		<p>DATE (MM/DD/YY)</p> <p>01/01/04</p>	

ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER: MacIntyre Fay & Thayer Ins Agy
77 Accord Park Drive Unit B-1
Norwell MA 02061
Phone: 781-261-2000 Fax: 781-261-2099

INSURERS AFFORDING COVERAGE

INSURER A: CNA Insurance Co.
INSURER B: American Zurich Insurance Co.
INSURER C:
INSURER D:
INSURER E:

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.

DATE (MM/DD/YY) 01/19/04

CSR KR CYSSTI-1

INSURERS AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

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.

117 C 1

REVIEW

MAR 1 2004

OVERFLOW PARKING WILL BE ARRANGED WITH
TED MUSGRAVE.

LOCATION: PAYSON PARK, 30-62 BARBER BLVD.

BREAKDOWN: STATE DAY

DATE OF SET-UP: MAY 15, 2004

EVENT: GREAT STRIDES WALK FOR CF

20 X 30 CANOPY

THE PARTICULARS:

Hello! Following please find
ATTACHMENTS TO ACCOMPANY THE TENT
PERMIT APPLICATION MADE BY THE
CF FOUNDATION.

SUBMITTED BY CYSTIC FIBROSIS FOUNDATION

TENT PERMIT APPLICATION

MARCH 11, 2004

SUSAN POLLS, TEL 829-3161

TO: INSPECTION SERVICES

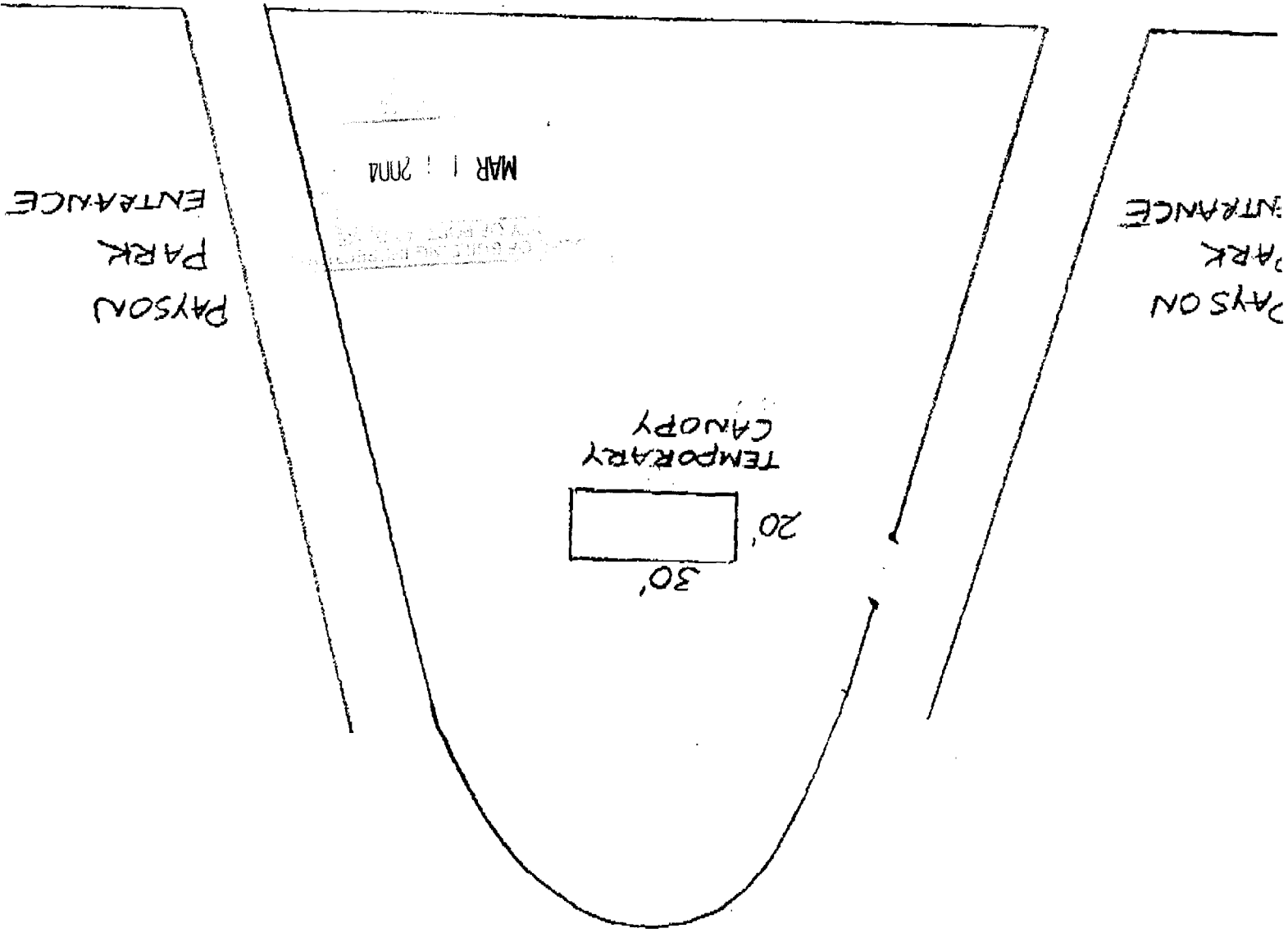
FROM:

DATE:

RE:

P. 1 of 3

BAXTER BLVD 112 C 001



RE: CYSTIC FIBROSIS FOUNDATION/
 GREAT STRIDES WALK
 MAY 15, 2004

IMPORTANT DOCUMENT

Certificate of Flame Resistance

REGISTERED
APPLICATION
NUMBER

F121.4



ISSUED BY



EVANSVILLE, INDIANA 47711

MANUFACTURERS OF THE FINISHED
TENT PRODUCTS DESCRIBED HEREIN

Date of Manufacture
3/12/99

Order Number
215958

This is to certify that the materials described have been flame-retardant treated (or are inherently nonflammable) and were supplied to:

HANDYMAN EQUIPMENT RENTAL
#13616-1
357 RIVERSIDE ST.
PORTLAND ME 04103

Certification is hereby made that:
The articles described on this Certificate have been treated with a flame-retardant approved chemical and that the application of said chemical was done in conformance with California Fire Marshal Code, equal to exceeds NFPA 701, CPAI 84, ULC 109.
The method of the FR chemical application is:

Serial #:	8115930	(0001)
Description of item certified:	A P CPY TOP 20W X 30 VL B W	

Flame Retardant Process Used Will Not Be Removed By Washing And Is Effective For The Life Of The Fabric

JOHN BOYLE & CO
STATESVILLE, NC
Name of Applicator of Flame Resistant Finish

Signed:

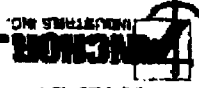
James D. Brunell

TENT DEPARTMENT - ANCHOR INDUSTRIES INC.

MAR 11 2004
119 C001

IMPORTANT DOCUMENT

Certificate of Flame Resistance

ISSUED BY

 ANCHOR INDUSTRIES INC.
 EVANSVILLE, INDIANA 47714

MANUFACTURERS OF THE FINISHED
 TENT PRODUCTS DESCRIBED HEREIN

REGISTERED APPLICATION NUMBER
 F1214

PORTLAND ME 04103
 357 RIVERSIDE ST.
 #13616-1
 HANDYMAN EQUIPMENT RENTAL

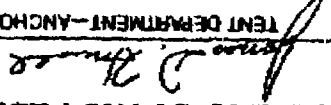
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Signed: 
 TENT DEPARTMENT-ANCHOR INDUSTRIES INC.

Date of Manufacture
 3/12/99

Order Number
 215958

MAR 11 2004
 BUILDING MATERIALS DIVISION
 ANCHOR INDUSTRIES INC.

10-4

112 C001