Form # P 04

# DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## **CITY OF PORTLAND**

Please Read Application And Notes, If Any,

BUILDING INCRECTION

PERIMIT	P	ermit Number	MPP TSSUED	
ty Rental				
Memori ervie Linda M	field	AU	G 6 2008	
	134_A001	1001		
	ty Rental	ty Rental  Memori ervie Linda Meffield	ty Rental	Memori ervic Linda M sfield AUG 6 2008

provided that the person or persons, and or the person of the provisions of the Statutes of Line and or the Company with all the construction, maintenance and use of buildings and rectures, 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.

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

OTHER REQUIRED APPROVALS

Fire Dept. \_\_\_\_\_\_

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

Director / Building & Inspection Service

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine	- Building or Use	Permit Applicatio	n Permit No:	Issue Date:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	8, Fax: (207) 874-87	16 08-0943		134 A0	01001
Location of Construction:	Owner Name:		Owner Address:		Phone:	
0 EVERGREEN CEMETAR	Y CITY OF POI	RTLAND	389 CONGRESS	ST		
Business Name:	Contractor Name		Contractor Address:	:	Phone	
	A+ Party Rent	tal	Portland	_		
Lessee/Buyer's Name	Phone:		Permit Type:			Zone:
			Tents	-		_ <u> </u>
Past Use:	Proposed Use:		Permit Fee:	Cost of Work:	CEO District:	
Evergreen Cemetery		metery - Tent Set up 17/08 Memorial	\$30.00	\$0.0		
	Service for Li		FIRE DEPT:	Approved INS	SPECTION: se Group: U	Type: TIM
			) [	Denied	c Gloup.	Type. 70
				4	Timo	Streke
Proposed Project Description:			<i>∃                                    </i>	•	SPECTION: se Group:  Temp	1
Tent Set up 08/06/08-08/07/0	8 Memorial Service for	Linda Mansfield	Signature:	Sig	gnature:	
Ī			PEDESTRIAN ACT			$\overline{}$
			Action: Appro	wed Annrove	ed w/Conditions	Denie
			Tretion	//cu //ppio/c	w w conditions	
			Signature:		Date:	
Permit Taken By:	Date Applied For:		Zoning	g Approval		
lmd	08/01/2008	Special Zone or Revi	aws Zoni	ing Appeal	Historic Pres	servation
1. This permit application d		l _ '			l _	
Applicant(s) from meetin Federal Rules.	ig applicable State and	Shoreland	Variand	ce	☐ Not in District or Landman ☐ Does Not Require Review ☐ Requires Review	
2. Building permits do not i septic or electrical work.	nclude plumbing,	☐ Wetland	Miscell	laneous		
3. Building permits are voic within six (6) months of the second		☐ Flood Zone	Condit	ional Use		
False information may in permit and stop all work.		Subdivision	_ Interpre	☐ Interpretation		
		Site Plan	Approv	/ed	Approved w/	Conditions (
PERMIT	ISSUED	Maj Minor MM	1 Denied		Denied	
		Date: \$15108 AR	20		'	
AUG	6 2008	Date: \$15 08 AV	Date:		Date:	
0177/05	DODTI AND					
CITY OF	PORTLAND					
		CERTIFICAT	ION			
I hereby certify that I am the o						
I have been authorized by the jurisdiction. In addition, if a p						
shall have the authority to ente						
such permit.	,			•	\	-
SIGNATURE OF APPLICANT		ADDRES	SS	DATE	PHC	ONE
RESPONSIBLE PERSON IN CHAR	GE OF WORK TITLE			DATE	PHC	
TEDI OTIDIDEL I FICIONI IN CHAN	OL OL WORK, IIILE			DAIL	1110	/ - · •

City of Portland, Mai	ne - Building or Us	se Permit	Permit No:	Date Applied For:	CBL:		
389 Congress Street, 041	01 Tel: (207) 874-87	03, Fax: (207) 874-871	6 08-0943	08/01/2008	134 A001001		
Location of Construction:	Owner Name:	-	Owner Address:		Phone:		
0 EVERGREEN CEMETA	ARY CITY OF P	ORTLAND	389 CONGRESS	ST			
Business Name:	Contractor Na	Contractor Name: Cor			Phone		
	A+ Party Re	A+ Party Rental					
Lessee/Buyer's Name	Phone:		Permit Type:				
		Te		Tents			
Proposed Use: Evergreen Cemetery - Ten Service for Linda Mansfiel	-	/08 Memorial Tent	sed Project Description: Set up 08/06/08-08/ sfield	07/08 Memorial Serv	ice for Linda		
Dept: Zoning Note:	Status: Approved	Reviewe	r: Ann Machado	Approval Da	ate: 08/05/2008 Ok to Issue: ✓		
Dept: Building Note:	Status: Approved with	n Conditions Reviewer	r: Tammy Munson		nte: 08/06/2008 Ok to Issue: ✓		
1) This permit DOES NO	T authorize any constru	ction activities. The tent/s	tage must be remove	ed at the end of the ev	ent.		

#### Comments:

8/1/2008-lmd: Tents fee waied per Joe Gray will attach e-mail

8/4/2008-lmd: Received fax from Party Rental with certificate of flame resistance. I left a voice-mail requesting dimensions.

8/4/2008-amachado: Gave permit back to Lisa. Need a plot plan and certificate of liability. She said that she would call Party Rental back and ask for these things.

8/5/2008-lmd: Some confusion regarding insurance and plot plan. Lannie spoke with people involve and explained the process. We are waiting for a call back for Ted M.



# Tent/Canopy or Temporary Event Staging 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/Park of Installation: Exercise Con Cember 4  Date of Set up/Event 2 / 6 / 2 Date of Breakdown/ End of Event						
01000   817/08						
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#  Property Owner: City of Portland  Telephone:						
Lessee/Buyer's Name (If Applicable)  Applicant name, address & telephone:  Fee: \$30.00  At 1214 AirCal  Jayl Gucham 671 7435  The Stock of the Stock						
TELLY REAGLE *  The permit fee and the following items must be completed and submitted along with this application in to receive a permit.	ı order					
<ol> <li>Certificate of Flammability</li> <li>Letter of approval from property owner.         If the City is owner, attach a completed copy of Application to Use City Parks &amp; Public Space fr Parks &amp; Recreation (756-8275).     </li> <li>Company name of installer (contact info).</li> <li>Plot Plan showing the following:</li> </ol>	onı					
Tent/Canopy or temporary event staging locations, including dimensions, exits and entrances of proposed and existing, parking and existing building locations. If this is temporary staging, you will need to include product information. (Applicant may call Parks & Recreation for maps of Portland's Parks @ 756-8275).						
5. If the City is the property owner, Certificate of Insurance listing the City as additional insured. Minimum of coverage is \$400,000.00  Who should we contact when permit is ready:  Address: 34 North St. Portland  Telephone: 671 7431	i amount					
Please submit all of the information outlined in the Tent/Canopy and Event Staging Permit Application as one package. Failure to do so will result in the automatic denial of your permit	it.					
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 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:	ays Dorhe		Date:	8	11/08	
771 * * .	 1 "V	A TATE 7	. 11 .1			

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



To Keller Williams to Fire dept Reld For Linda Mansheld From Mark Evergreen Countary

Certificate of s	lame Resistanc	Unto manufactured 01/21/03
F 140	ISSUED BY IR MANUFACTURING, ING I PROGRESS STREET XXVER, OHIO 44622	
I his is to curtify that the materials described below are flame CHARNECKE TENTS INC. FOR ROSHOLT CITY	e-retardant and inherently monflamm 5245 Stu ADDRESS WI 544	ANTYTOWN DR
The enticles described below are made from Fire Marshal for such use.		
* FABRIC MEETS THE REQUIREMENTS OF THE	•	
NFPA-701 (Large Scale)	☐ MIL-C-43006	FMVSS-302
☐ CAN/ULC-S109-M87 47	CPAI-84	□ A-A-55308
SNYDER MANUFACTURING INC. By PRV 18180 8.0. WHITE 61" HI GLOSS	Title_	Supurvisor Quality Control
CONTROL NO. 19015	CUSTOMEN ORDER NO	VBC JENNY
SNYDLH S-ORDER NO	DATE PROCESSED 667	(09/88
YARDS OR OLIANTITY		

4.10 4-36F-R1



### CITY OF PORTLAND, PARKS & RECREATION **PUBLIC SPACE PERMIT**

134 Congress St. ~ Suite 2 ~Portland ~ ME ~ 04101 207-756-8275 ~ Fax 207-756-8279

vla@portlandmaine.gov							
TODAY'S DATE 8/1/08	BUSINESS / ORGANIZA	TION NAME M	ansfield Family				
ORGANIZATION ADDRESS	34 North St.		FAX				
CITY Portland		04101 <b>EMAIL</b>	Realvalue92@	gmail.com			
HOME # 774-0768	WORK#		CELL#				
CONTACT NAME Jaye Gorh	am	TITLE					
PARK AREA OR PUBLIC SPAC	E REQUESTING: Everg	reen Cemetery		-			
EVENT DAY & DATE(S):	8/7/08	EVENT RAIN DA		n/a			
EVENT START TIME: 9 am. Include set-up time	EVENT END TIME: Include breakdown time	2 p.m. ACTU. OF EV	AL START & ENI 'ENT:	D TIME 11 a.m.	•		
	EVEN	IT NAME:					
Celebration of Linda Mansfield's I	_ife		- wheeler -				
DESCRIPTION OF EVENT:	TAB			ATED # OF	200		
Please be specific regarding area	of public space or park you	are requesting.		ATTENDING:			
Memorial Service to celebrate the life of Linda Mansfield. Erect 40' x 60' tent. Dig Safe on Monday, tent erected on Wednesday the 6 <sup>th</sup> . Food is being brought in by family/friends. Private event does not require Food Service permit per Jeanne Bourke. Electricity will be provided to the Chapel by Cemetery crew. Be sure to cover all extension cords with protective covers. Tent company will provide chairs and tables.							
City of Portland Parks & Recreation on grass, \$10 will be deducted from	WHAT WILL BE YOUR ANTICIPATED NEED FOR PARKING? WHAT IS YOUR PARKING PLAN?  City of Portland Parks & Recreation has a strict policy that prohibits vehicles from parking on grass areas. For each vehicle parked on grass, \$10 will be deducted from your security deposit.  Steven's Ave parking, some on pavement in cemetery.						
IF BATHROOM FACILITIES ARE	REQUIRED. HOW WILL YOU	J MEET THAT NEED	? (See attached t	fee schedule.)			
Bathrooms used at Wilde Chapel	,						
LIST ANY MATERIALS (TABLE,	CHAIRS, EQUIPMENT, VEHIC	CLES, ETC.) TO BE	PLACED ON CIT	Y PROPERTY.			
Tent 40' x 60' in front of Chapel, chairs							
LIST ANY SPECIAL NEEDS OR REQUIREMENTS YOU MAY HAVE. Example: Electricity (See attached fee schedule.)							
Electricity from Wilde Chapel. Cemetery crew will assist.							
POLICE ASSISTANCE CO If you need Police Assistance, p		SGT. 0	SARY HUTCHEN	SON ~ 874-8554			
N/A but please call Sgt. Gary Hutchis							
FIRE / EMS ASSSITANCE C	ONTACT INFORMATION	CHIEF	FRED LAMONTA	GNE ~ 874-8400			
If you need Fire/ EMS, plea	se describe in this area:		CASS - FIRE IN		u datam san		
N/A		<u> </u>					

## \*ELECTRICITY POLICY

All cords in public way must be covered by rugs or surrounded with orange cones to avoid public hazard. If weather is not permitting (drizzle, rain, snow, etc.) we require that you not use electricity.

\*BANDSTAND Electricity is only accessible with key. Breaker box is located in storage room behind the bandstand. If weather has been damp, outlets 3 & 5 may need to be tripped (re-set). . If weather is not permitting (drizzle, rain, snow, etc.) we require that you not use electricity. Bandstand door must be kept locked at all times.

#### **GAS GRILL POLICY**

Only gas grills are allowed in any parks/public spaces. Grills must be set up away from all children's activities. Grills are not allowed on any grass areas. We require that you have a fire extinguisher with you.

### TRASH POLICY

All groups/organizations must abide by our Carry In/ Carry Out Policy. Please bring extra trash bags and/or trash receptacles and remove any of your trash from area once event is over. You will need to haul all of your trash out of park/public space area or forfeit any security deposit. Thank you in advance!

#### **TOBACCO FREE ZONES POLICY**

Portland Parks & Recreation parks, athletic facilities, playgrounds, and all public space areas are designated as tobacco-free zones. Please pass this information along to your participants. Thank you for your voluntary compliance.

#### NOTIFICATION POLICY

Please keep a copy of permit on site at all times.

#### **REVOCABLE PERMIT POLICY**

- The City reserves the unconditional right to control or cancel events to protect and/or prohibit damage to public property.
- The City reserves the unconditional right to revoke or revise an issued permit.

# I HAVE READ AND UNDERSTAND ALL OF THE ABOVE POLICIES.

PLEASE INITIAL

	* PLEASE SEE ATTACHED FEE SCHEDULE IF YOU ANSWER YES:	X-YES	X-NO	X-NOT SURE
*	Will your event require a tent permit?	x		
*	Will your event require a canopy?		Х	
*	Will your event require a Food Vendor License?		X	
*	Will your event require a Vendor License? (T-shirts, C.D.'s, Crafts, etc.)		Х	
*	Will your event require electricity?	x		
*	Will your event require a key for access?		X	
*	Will your event require safety vests, barricades and/or cones?		X	
*	Will your event require street closures?		Х	
*	Will your event require Police assistance?		Х	
*	Will your event require Fire/EMS assistance?		Х	
**	Will your event require liability Insurance? (** Please see below)		X	
*	Will your event require tables and/or chairs?	х	-	
*	Will your event require a concert license?		X	
*	Will your event have more than 25 people attending? 200	x		
*	Will your event have more than?			
*	Will your event require porta-potties or need porta-potties cleaned??		Х	
*	Will your event require a banner permit?		X	

#### \*\*INSURANCE CERTIFICATES INFORMATION

Fax or e-mail at least 30 days in adavance to: 207-756-8279 or vla@portlandmaine.gov

Please have "City of Portland, Maine" listed as additional insurance for a minimum of \$400,000.00.

#### **ASSUMPTION OF RISK & LIABILITY**

User of park/public space area accepts the grounds in an "as is" condition and shall be responsible for all risk and liability in using the park/public space area for the said event. By returning this form, (should permission be granted to use city property), the above parties agree to indemnify and hold harmless the City of Portland, its employees and agents, from and against all claims arising out of activities during said event.

I have read the Assumption of Risk & Liability

PLEASE INITIAL:

TODAY'S DATE:

8/1/00

Visa or MasterCard Number

**CREDIT CARD INFORMATION** 

Exp Date (Mon/Yr)

CREDIT CARD WILL ONLY BE CHARGED FOR SECURITY DEPOSIT(S) AS NEEDED.

#### PLEASE MAKE CHECKS PAYABLE TO "CITY OF PORTLAND"

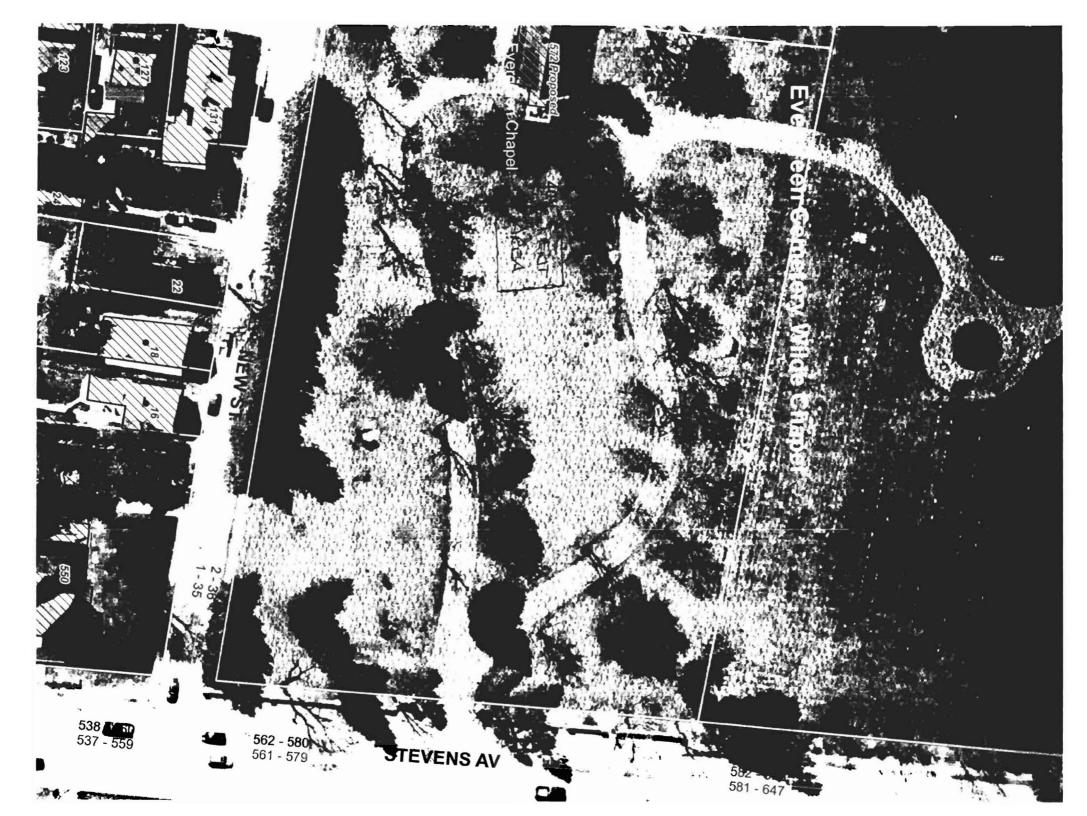
• Please make out any and all security deposit checks separately.

#### PLEASE RETURN FORM AT LEAST 30 DAYS IN ADVANCE TO:

Parks & Recreation ~ 134 Congress Street ~ Suite 2 ~ Portland ~ ME ~ 04101 or email to: vla@portlandmaine.gov

YOU MUST INITIAL, DATE AND/OR ANSWER ANY HIGH-LIGHTED YELLOW BOXES.

		_			
FOR OFFICE USE ONLY					
DATE REC'D APPLICATION	DATE REC'D INSURANCE		AMT REC'D	\$	



	A(	C	ORD CERTIFIC	CATE OF LIA	BILI	TY INS	URANCE		DATE (MM/DD/YY	YY)	
M	arsh	er Ag	ency ton Avenue			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.					
Po	rtla	nd J	ME 04102			INSURERS	AFFORDING COV	/FRAGE	A1410 m		
INS	URED		Mansfield, Estate of Line	da			ambridge Mutu		NAIC#		
			499 Ocean Ave			INSURER B:			****		
			Portland ME 04103			INSURER C:		·			
			FOIDEND ME 04103			INSURER D:	<del></del>				
CC	VER	AGI	=8			INSURER E					
N P	OLICI	ES. A	CIES OF INSURANCE LISTED BEL JIREMENT, TERM OR CONDITION AIN, THE INSURANCE AFFORDE AGGREGATE LIMITS SHOWN MAY	O BY THE POLICIES DESCRIPT	FD MED	URED NAMED A DOUMENT WITH EIN IS SUBJECT	ABOVE FOR THE P H RESPECT TO W T TO ALL THE TER	OLICY PERIOD INDICATED HICH THIS CERTIFICATE MS, EXCLUSIONS AND CO	NOTWITHSTANDII MAY BE ISSUED ( ONDITIONS OF SU	NG OR CH	
LTR	ADD	<u> </u>	TYPE OF INSURANCE	POLICY NUMBER	PO D	LICY EFFECTIVE	POLICY EXPIRATION DATE (MM/DD/YY)	Liner			
A	x	GE	COMMERCIAL GENERAL LIABILITY	HP2193062		/02/2008	07/02/2009	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (En occurence)	3 300,000		
		X	Personal Liability	•				MED EXP (Any one person)	3		
			Tersonal Liability					PERSONAL & ADV INJURY	\$		
		GE	N'L AGGREGATE LIMIT APPLIES PER:				i	GENERAL AGGREGATE	\$		
	_	A41	POLICY PRO- LOC					PRODUCTS - COMP/OP AGG	\$		
			TOMOBILE LIABILITY ANY AUTO					COMBINED SINGLE LIMIT (Ea accident)	3		
			ALL OWNED AUTOS SCHEDULED AUTOS				1	BODILY INJURY (Per person)	\$		
			HIRED AUTOS NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$		
_		_						PROPERTY DAMAGE (Per accident)	\$		
		ĢAI	RAGE LIABILITY	- AMERICA STATE OF THE STATE OF				AUTO ONLY - EA ACCIDENT	3		
			ANY AUTO					OTHER THAN EA ACC	5		
		EXC	ESS/UMBRELLA LIABILITY	- NATIONAL STATE OF THE STATE O			-	EACH OCCURRENCE	\$		
			OCCUR CLAIMS MADE				[	AGGREGATE	\$		
									\$		
			DEDUCTIBLE				)		<b>5</b>	_	
			RETENTION \$		_			WC STATU- OTH-	\$	괵	
			S COMPENSATION AND RS' LIABILITY					TORY LIMITS   FR		{	
	ANY OFF	PROF	PRIETOR/PARTNER/EXECUTIVE MEMBER EXCLUDED?				-	E.L. EACH ACCIDENT	<u>*                                      </u>	$\dashv$	
	If yes	. desc	cribe under PROVISIONS below					E.L. DISEASE - EA EMPLOYEE  E.L. DISEASE - POLICY LIMIT			
	ÓТН		, to the color					EL DISEASE - POLICY LIMIT			
										[	
đei	nori	al S	FOPERATIONS / LOCATIONS / VEHICI SETVICE at Evergreen Ceme until 08/08/2008.					Insured Fax 874-871	6		
	TIE	CAT	TE HOLDER			CANCELLATI	ON				
<del></del>	<u>STIF!</u>	wn!	City of Portland			SHOULD ANY OF DATE THEREOF, NOTICE TO THE	THE ABOVE DESCRIBI THE ISSUING INSURE CERTIFICATE HOLDER IGATION OR LIABILITY (ES.	ED POLICIES BE CANCELLED B R WILL ENDEAVOR TO MAIL NAMED TO THE LEFT, BUT FA Y OF ANY KIND UPON THE INS	30 DAYS WRITT	EN LL	
			2001/08)				[2][fil	41	DDODATION 10	لب	