Form # P 04	DISPLAY THIS CA	RD ON PRINCIP	AL FRONTAGE	OF WORK
Please Read		TY OF POI	RTLAND	
Application And Notes, If Any, Attached			Deser	uit Number: 050529
This is to certify t	that City Of Portland			
has permission to	Tent for Grieving Childre	en Event		
AT 656 Baxter	Blvd		CBL 158 A024001	L

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 build- ing or part thereof is occupied.
OTHER REQUIRED APPROVALS Fire Dept. Jay Kelley. P.F.D. 5/10/05 Health Dept. Appeal Board		and
Other Department Name	_	prector - Building & Inspection Services
Pi	ENALTY FOR REMOVING THIS CAP	RD

City of Portland, Ma	ine - Building or Use	Permit Application	on Pern	nit No:	Issue Date:		CBL:	
	389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874			05-0529			158 AC	24001
Location of Construction:	Owner Name:	Owner Name:		Owner Address:			Phone:	
656 Baxter Blvd	City Of Portla	Portland		389 Congress St				
Business Name: Contractor Name:			Contractor Address: Phone				ROC	
Lessee/Buyer's Name	s Name Phone:		Permit Type: Tents					Roberty.
Past Use: Proposed Use:			Permit	Fee:	Cost of Work:	CE	O District:	Loni
ROS ROS Tent for Griev Event		Grieving Children		\$30.00	\$30	.00	4	
			FIRE		Abbuoned 1	NSPECTI Use Group 7	. 1	Type:
Proposed Project Description: Tent for Grieving Childre			Signature: UK. PF. S. 1005 Signature: Signature: PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action. Approved Approved w/Conditions D			Denied		
			Signatu	re:		Da	ite:	
Permit Taken By: dmartin			Zoning Approval					
1. This permit application	on does not preclude the	Special Zone or Reviews		Zoni	ng Appeal		Historic Pres	servation
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		🗌 Varianc	e	E	Not in District or Landm	
 Building permits do not include plumbing, septic or electrical work. 		Wetland		Miscell	aneous	Does Not Require Revie		quire Review
 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 		Flood Zone		Condition	onal Use		Requires Re	view
				Interpre	tation		Approved	
		Site Plan		Approv	ed		Approved w	Conditions
		Maj Minor M	M	Denied			Denied	
		Date: 5 1005		Date:		Date		

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 provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT	ADDRESS	DATE	PHONE
	IDBB580	D.L.	DUONE

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.

Date of Tent setup: May 14, 2	005	Date of Tent breakdown	May 14, 2005
Tax Assessor's Chart, Block & LotChart#Block#Lot#158A024	P	itlantic Tent Cor O Box 937 Dam ariscotta, r	531-59M
Essee/Buyer's Name (If Applicable) The Center for Grieving children	telephone	nome, address & 2 775-5216 2 1/K Street 1000, MC 04101	Fee: \$ 30.00
 Letter of approval from property of Parks & Recreation @ 874-8793 Plot Plan showing the following: Property lines Porking Existing Building logity Tent locations, ind If the City is the property owner, C Minimum amount of coverage is \$ 	ocations cluding dime ertificate of	ensions of all tents, exits and	d entrançes in tent
Whom should we contact when the perm	nit is ready:	Kristen Fitts	And an and a strengthe
Mailing address: P.O. Box 1438 PHONE: <u>775-521C</u> We will contact you by phone when the preview the requirements before starting a	o H (O permit is rea ny work, wit	Ц dy. You must come in and h a Plan Reviewer. A STOP	WORK ORDER WILL BE
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CERTIFICATE HOLDER CANCELLATION	

CERTIFICATE HOLDER	CANCELLATION
(207) 756-8279	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE
PORTLAND PARKS & RECREATION ATTN: TED MUSGRAVE 134 CONGRESS STREET PORTLAND, ME 04101	EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 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 INSUBER, ITS AGENTS OR REPRESENTATIVES. AUCONIZED REPRESENTATIVE
ACORD 25 (2001/08)	© ACORD CORPORATION 1988

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).

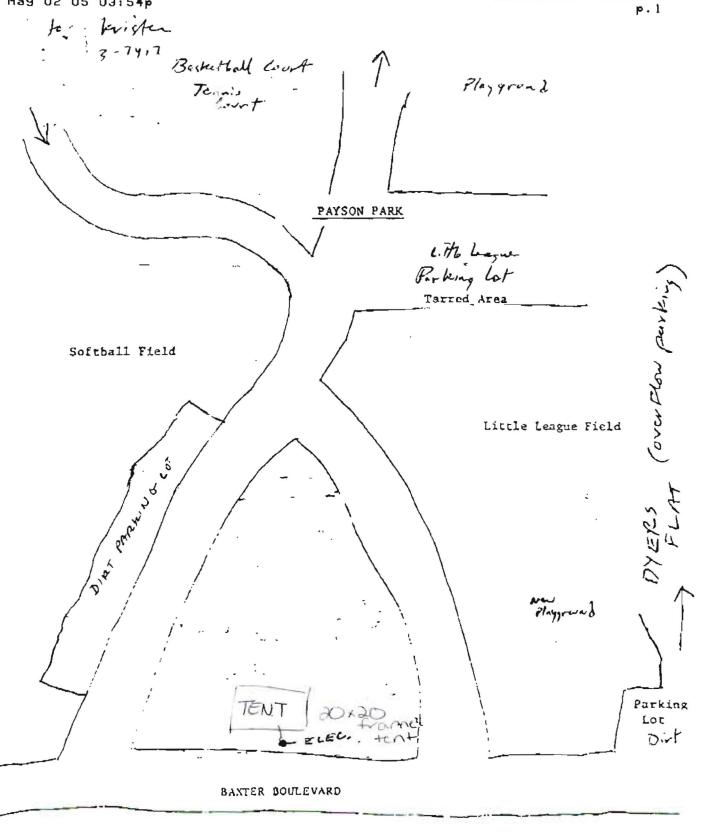
If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form 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.

FABRIC NUMBER F-140 01	BINGH	ISSUED BY NSON OUTDOORS IN AMTON, NEW YORK 1 Pruducts Described Here	3902	Date of Manufacture FEB 2002
This is to certify that the printers after specified by the r NAME: ATLANTIC TEN	naterial supplier.	been manufactured fr	rom material inh	erently fiame retardant as
		STATE:	ME	
The articles described on this c California State Fire Marshal Co Federal Test Mothod Specificatio Type, color and weight of mate	de, NFPA-701*, Unden ons and meet or exceed	vriters Laboratory of Cen the Military Flame Specific	eda, and have bee	in tested in accordance with t
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Description of item certified:	20X20 VISTA			





BACK COVE

Tent is more of a Canapage All sides are open



CITY OF PORTLAND, MAINE Department of Building Inspections

20 05
Received from
Location of Work
Cost of Construction \$
Permit Fee \$
Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)
Other
CBL: 158 A 024
Check #: Total Collected s

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy

PETTH