

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Permit Number: 090531

Please Read Application And Notes, If Any, Attached

This is to certify that CITY OF PORTLAND /Easter Seals of Maine... has permission to Easter Seals of Maine event... AT 427 OCEAN AVE

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... HOUSING 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. CAPT. R. Lanthorn
Health Dept.
Appeal Board
Other

Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

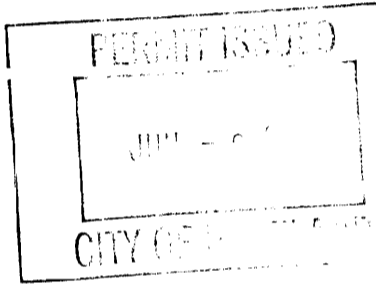
City of Portland, Maine - Building or Use Permit Application
 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0531	Issue Date: 6/5/09	CBL: 159 G001001
-----------------------	-----------------------	---------------------

Location of Construction: 427 OCEAN AVE	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST	Phone:
Business Name:	Contractor Name: Easter Seals of Maine / Dennis Brow	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	Zone: ROS

Past Use: ROS Payson Park	Proposed Use: ROS Payson Park -Easter Seals of Maine event Install a 20' x 20' Tent set up & break down same day 6/11/2009	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 4
Proposed Project Description: Easter Seals of Maine event Install a 20' x 20' Tent set up & break down same day 6/11/2009		FIRE DEPT: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>RNT</i> Type: <i>IBC-2007</i>	
		Signature: <i>KG</i>	Signature: <i>CE</i>	
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____				

Permit Taken By: Ldobson	Date Applied For: 06/01/2009	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 3. 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..	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	
	Date: <i>6/1/09</i>	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
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-0531	Date Applied For: 06/01/2009	CBL: 159 G001001
------------------------------	--	----------------------------

Location of Construction: 427 OCEAN AVE	Owner Name: CITY OF PORTLAND	Owner Address: 389 CONGRESS ST	Phone:
Business Name:	Contractor Name: Easter Seals of Maine / Dennis Brow	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	

Proposed Use: ROS Payson Park -Easter Seals of Maine event Install a 20' x 20' Tent set up & break down same day 6/11/2009	Proposed Project Description: Easter Seals of Maine event Install a 20' x 20' Tent set up & break down same day 6/11/2009
--	---

Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 06/01/2009	Note:	Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Chris Hanson	Approval Date: 06/05/2009	Note:	Ok to Issue: <input checked="" type="checkbox"/>
1) This permit DOES NOT authorize any construction activities. The tent/stage must be removed at the end of the event.					
Dept: Fire	Status: Approved	Reviewer: Capt Keith Gautreau	Approval Date: 06/03/2009	Note:	Ok to Issue: <input checked="" type="checkbox"/>



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: <i>Payson Park</i>		
Date of Set up/Event <i>6/11/09</i>		Date of Breakdown/ End of Event <i>6/11/09</i>
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <i>159 6 1</i>	Property Owner: <i>City of Portland</i>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <i>Easter Seals Maine</i>	Fee: \$30.00
<p>The permit fee and the following items must be completed and submitted along with this application in order to receive a permit.</p> <ol style="list-style-type: none"> 1. Certificate of Flammability 2. Letter of approval from property owner. If the City is owner, attach a completed copy of Application to Use City Parks & Public Space from Parks & Recreation (756-8275). 3. Company name of installer (contact info). 4. Plot Plan showing the following: 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 amount of coverage is \$400,000.00 <p>Who should we contact when permit is ready: <i>Dennis Brown</i> Address: <i>39 Pondville, Westbrook, ME</i> Telephone: <i>207-894-5727</i></p>		
<p>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.</p>		

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: <i>Dennis A Brown</i>	Date: <i>5/29/09</i>
---	----------------------

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

002

Certificate of Flame Resistance



REGISTERED
FABRIC
NUMBER

31.02

Issued by

TOPTec, INC.
1905 N.E. Main Street
Simpsonville, SC 29681

Date Manufactured

12/13/89

*This is to certify that the materials described
are inherently flame retardant.*

Name ON STOP PARTY SHOP

Address 282 MAIN ST

City S PORTLAND

State E

Zip 04106

Certification is hereby made that:


The articles described are flame-retardant, approved and registered by the State Fire Marshal and that the fabric is in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal. Fabric has been tested and passes NFPA701-96, CPA184, ULC109, MVSS302.

Method of Application: _____

Description of item certified: FRAME 20x20 WHITE

The Flame Retardant Process Used WILL NOT Be Removed By Washing.

TOPTec, INC.


Name of Production Superintendent

MODEL TTF202000

SERIAL # 984122D

02/22/2016 00:13 FAX

Message:

Fax Number: 207-767-5966

Number of Pages: 2

Date: 5/29/09

From: Tammy

Fax Number: 828-5355
Phone Number: 828-5355

Company: Easter Seals

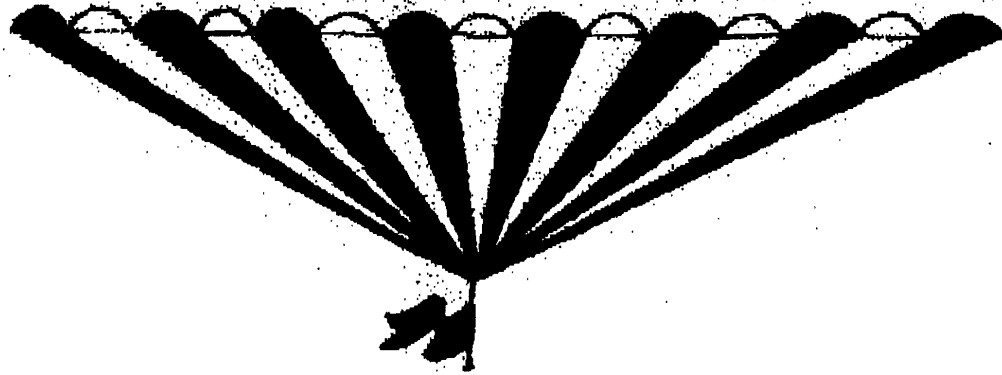
To: Catherine

Fax Transmitted From

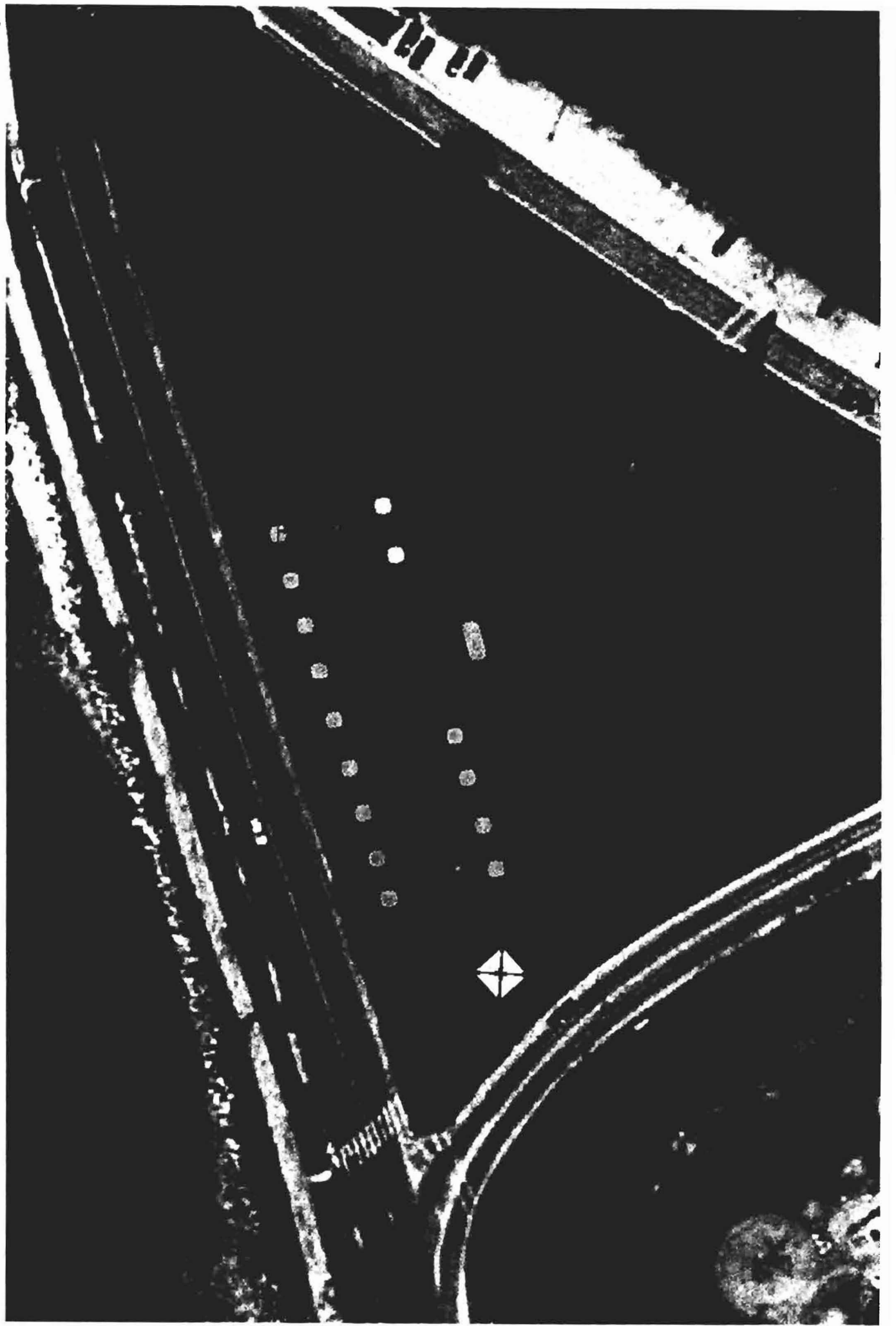
(207) 767-5966

262 Main Street South Portland, ME 04106

One Stop Party Shoppe



Small, illegible text at the bottom of the page, possibly a footer or disclaimer.




ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YYYY) 05/29/09
PRODUCER USI Insurance Svcs of NE, Inc. 5 Bedford Farms Drive P.O. Box 6360 Bedford, NH 03110	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.	
INSURED Easter Seals NH, Inc. 555 Auburn St. Manchester, NH 03103	INSURERS AFFORDING COVERAGE INSURER A: Philadelphia Insurance Company INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 23850

COVERAGES

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

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Prof. Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	PHPK341710	09/01/08	09/01/09	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS GARAGE LIABILITY <input type="checkbox"/> ANY AUTO	PHPK341710	09/01/08	09/01/09	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	PHUB249128	09/01/08	09/01/09	EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
**** Supplemental Name ****
Easter Seals NH, Inc.
Easter Seals NY, Inc.
Easter Seals ME, Inc.
 (See Attached Descriptions)

CERTIFICATE HOLDER City of Portland 134 Congress Street, Suite 2 Portland, ME 04101	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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 
---	---

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.

DESCRIPTIONS (Continued from Page 1)

STS, Inc.
Agency Realty, Inc.
Easter Seals Rhode Island, Inc.
The Harbor Schools, Inc.

Event: Walk With Me Maine

Site: City of Portland, sidewalks/back cove pathway - 125 Presumscot
Street, Portland, ME

Date: June 11th, 2009.

City of Portland, 134 Congress Street, Suite 2, Portland, ME 04101 is
named as Additional Insured with respects to CGL.