

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



# CITY OF PORTLAND

# BUILDING PERMIT

This is to certify that Lianna Doane-Carrie Logan (City of Portland)

Located At 427 OCEAN AVE (PAYSON PARK)

Job ID: 2011-09-2207-SE

CBL: 159 - - G - 001 - 001 - - - -

has permission to assemble (for the Childrens Cancer Walk), Two (2) Tents.

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

09/16/2011

\_\_\_\_\_  
**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



# PORTLAND MAINE

*Strengthening a Remarkable City. Building a Community for Life* • [www.portlandmaine.gov](http://www.portlandmaine.gov)

Director of Planning and Urban Development  
Penny St. Louis

Job ID: 2011-09-2207-SE

Located At: 427 OCEAN

CBL: 159 - - G - 001 - 001 - - - -

## **Conditions of Approval:**

### **Fire**

1. Tents shall have an approved fire resistant rating and maintain 10' between stake lines.
2. No smoking or open flame allowed within 10'.
3. Provide at least one 2A:10 BC fire extinguisher.

### **Building**

1. Separate permits are required for any electrical, plumbing, sprinkler, fire alarm, HVAC systems, heating appliances, including pellet/wood stoves, commercial hood exhaust systems and fuel tanks. Separate plans may need to be submitted for approval as a part of this process.
2. This permit DOES NOT authorize any construction activities. The tent must be removed at the end of the event.

**City of Portland, Maine - Building or Use Permit Application**

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

Job No: 2011-09-2207-SE	Date Applied: 9/09/2011	CBL: 159 - - G - 001 - 001 - - - - -	
Location of Construction: 427 OCEAN AVE - Payson Oark	Owner Name: City of Portland	Owner Address: 389 CONGRESS ST PORTLAND, 04101 ME - MAINE	Phone:
Business Name: Maine Children's Cancer Program	Contractor Name: Lianna Doane - Carrie M. Logan	Contractor Address: 22 Bramhall Street, Portland, ME 04102	Phone: 791-3214
Lessee/Buyer's Name:	Phone:	Permit Type: <b>Tents</b>	Zone: <b>ROS</b>
Past Use: City Park	Proposed Use: Same: City Park - to erect 2 tents on Friday 9/16/ 2011 thru Sat. 9/17/2011	Cost of Work: \$1,000.00	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved w/ conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: Type: <i>Temp.</i> <i>Tent</i>
		Signature: <i>[Signature]</i>	Signature: <i>[Signature]</i>
Proposed Project Description: two canopies 40' x 40' and 20' x 20'		Pedestrian Activities District (P.A.D.)	

Permit Taken By: Gayle	<b>Zoning Approval</b>
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<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</p>	<p><b>Special Zone or Reviews</b></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><input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM</p>	<p><b>Zoning Appeal</b></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><b>Historic Preservation</b></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>
	Date: <i>9/13/11</i>	Date:	Date:

791-3214  
Carrie Logan

Must Have  
Call to P/u  
event on Saturday -

**CERTIFICATION**

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this permit application, the representative shall have the authority to enter all areas covered by such permit at any reasonable hour.

ADDRESS	DATE	PHONE
TITLE	DATE	PHONE

\*Please mail to : Development office  
 Attn: Lianna Doane  
 22 Bramhall St.  
 Portland, Maine 04102



## Tent/Canopy or Temporary Event Staging Permit Application 2011 09 22 09

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: <u>Paysan Park</u> <u>427 Ocean</u>		
Date of Set up/Event <u>Friday, 9/16/11</u>	Date of Breakdown/ End of Event <u>Saturday, 9/17/11</u>	
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot# <u>159</u> <u>G</u> <u>1</u>	Property Owner: <u>City of Portland</u>	Telephone: <u>756-8275</u>
Lessee/Buyer's Name (If Applicable) <u>N/A</u>	Applicant name, address & telephone: <u>Major Children's Cancer Program</u> <u>22 Bramhall Street</u> <u>Portland, ME 04102</u> <u>Attn: Lianna Doane</u>	Fee: \$30.00 + \$30.00 <u>(two tents)</u>
<p>The permit fee and the following items must be completed and submitted along with this application in order to receive a permit.</p> <p style="text-align: right;">RECEIVED SEP - 9 2011 Dept. of Building Inspections City of Portland, Maine</p>		
<ol style="list-style-type: none"> <li>1. Certificate of Flammability</li> <li>2. Letter of approval from property owner. If the City is owner, attach a completed copy of Application to Use City Parks &amp; Public Space from Parks &amp; Recreation (756-8275).</li> <li>3. Company name of installer (contact info). <u>Tents for Kent (Don Richards) 770-3847</u></li> <li>4. Plot Plan showing the following: <u>719 Farmington Falls Road, New Sharon, ME 04955</u> 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 &amp; Recreation for maps of Portland's Parks @ 756-8275).</li> <li>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</li> </ol>		
Who should we contact when permit is ready: <u>Carrie M. Logan</u> Address: <u>Park Flakely, PO Box 946</u> Telephone: <u>(207) 791-3214</u> <u>Portland, ME 04112-0946</u>		
<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](http://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: Susan Dolan Date: 8/31/2011

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

# SCANNED

CARRIE M. LOGAN  
clogan@preti.com

August 8, 2011

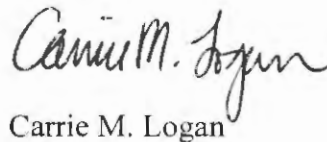
City of Portland Building Inspection Office  
Portland City Hall  
ATTN: Lannie Dobson  
389 Congress Street, Room 315  
Portland, ME 04101

**RE: Tent/Canopy Permit Application/Maine Children's Cancer Program**

Dear Lannie:

Enclosed please find a Tent/Canopy Permit Application on behalf of Maine Children's Cancer Program and a check in the amount of \$60.00 representing the fee for same. Thank you.

Sincerely,



Carrie M. Logan

Enclosures

# MCCCP Walk Map Payson Park

updated

CHEVERUS  
HIGH  
SADDLE

PARKING

tent stakes will be min 10 feet from roads.

VOLUNTEER PARKING  
Road CLOSED

Porta-Potty

45' x 40' TENT  
FOOD TABLE  
canopy  
8 tables

SOAK  
14 tables  
TENT  
REGISTRATION  
30 x 20  
canopy

PAYSON PARK

931 Coast Van on street not grass

SOUND  
W/MGX MAN

POWER BOX

Classroom

POLICE

POLICE

BAXTER BOULEVARD

← WALK BEGINS

WALK PATH

WALK BEGINS →

Cleanings are \$45.

**TRASH**

All groups must abide by our Carry In/ Carry Out Policy. Please bring extra trash bags and/or trash receptacles and remove all trash. You will need to haul all of your trash out of the park/public space or forfeit the security deposit(s). The area will be checked following your event and if the park is clean and conditions for use adhered to, your security deposit will be returned to you. Thank you in advance!

**PARKING ON GRASS AREAS**

Portland Recreation has a strict policy that prohibits vehicles from parking on grass areas. \$10 will be deducted from your security deposit for each vehicle parked on grass. **Any tire ruts/damage to the grass areas would mean a forfeit of your security deposits.**

**TOBACCO FREE ZONES**

By city ordinance, smoking is prohibited at and within 20 feet of the following outdoor recreation and event areas: downtown squares and plazas, trails, parks, playgrounds, beaches, and athletic facilities. Please make sure you pass this information along to participants / spectators at the event.

**NOTIFICATION**

**REVOCABLE PERMIT**

- 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.

<b>I HAVE READ AND UNDERSTAND ALL OF THE ABOVE POLICIES</b>	<b>TYPE INITIALS</b>	<b>SD</b>	<b>DATE</b>	<b>OCT 13, 2010</b>
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**ASSUMPTION OF RISK & LIABILITY**

Users of the area agree to accept 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.

<b>I have read the Assumption of Risk &amp; Liability Agreement</b>	<b>TYPE INITIALS</b>	<b>SD</b>	<b>DATE</b>	<b>OCTOBER 13, 2010</b>
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**CREDIT CARD INFORMATION**

Visa or MasterCard Number		Exp Date (Mon/Yr)	
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**CREDIT CARD WILL ONLY BE CHARGED FOR SECURITY DEPOSIT(S) AS NEEDED**

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

- Please make out security deposit checks separate from permit fees.

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

- Portland Recreation ~ 134 Congress Street ~ Suite 2 ~ Portland ~ ME ~ 04101 or email to: [tvm@portlandmaine.gov](mailto:tvm@portlandmaine.gov)

<b>TOTAL AMOUNT(S) DUE TO RECREATION</b> (Please make all security deposit checks out separately)			
Permit Fee for use of area: \$40 first hr. plus \$35 each additional hr. (i.e. a 3 hour event totals \$110) If your event is rained out / cancelled, the bulk of the fee is returned (however \$40 is non-refundable) Number of Hours of Use:	<b>\$ 180</b>	Vest, Barricade, Cone Deposit: \$10 per/item	<b>\$</b>
Electricity: \$5per/hr	<b>\$25</b>	Public Space / Park Security Deposit: \$100	<b>\$500</b>
Key Deposit: \$50 per key	<b>\$50</b>	Other (Porta-Restroom User Fee, etc.)	<b>\$25</b>

**PLEASE BE SURE AND INITIAL, DATE AND/OR ANSWER ANY HIGH-LIGHTED YELLOW BOXES.**

<b>FOR OFFICE USE ONLY</b>									
DATE REC'D APPLICATION		DATE REC'D INSURANCE		PERMIT FEE AMT REC'D	\$	SECURITY DEPOSIT	\$		
<b>PAYMENT TYPE</b>									
VISA	\$	MC	\$	CK #		CK AMOUNT	\$	CASH AMT	\$

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
04/12/2011

**PRODUCER**  
MEDICAL MUTUAL INS. CO. OF MAINE  
ONE CITY CENTER, PO BOX 15275  
PORTLAND, ME 04112-5275

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**  
MAINEHEALTH  
110 FREE STREET  
PORTLAND, ME 04101

INSURERS AFFORDING COVERAGE	NAIC#
INSURER A: MEDICAL MUTUAL INS. CO. OF MAINE	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

**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 POLICES 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 NSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	ME CHL 000363	10/01/2010	10/01/2011	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 4,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		<b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
		<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**  
 IT IS HEREBY AGREED AND UNDERSTOOD THAT THE CITY OF PORTLAND, ME IS AN ADDITIONAL INSURED ON THE ABOVE DESCRIBED POLICY IN CONNECTION WITH MMC'S MAINE CHILDREN'S CANCER PROGRAM FOR ITS ANNUAL MAINE CHILDREN'S HEALTH WALK BEING HELD ON 9/17/2011.

**CERTIFICATE HOLDER** 10001  
  
 CITY OF PORTLAND  
 399 CONGRESS STREET  
 PORTLAND, MAINE 04101

**CANCELLATION**  
 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**  
*Terrence J. Sheehan, M.D.*, PRESIDENT



# Certificate of Flame Resistance

REGISTERED  
FABRIC  
NUMBER

F-140.01

ISSUED BY  
JOHNSON OUTDOORS INC.  
BINGHAMTON, NEW YORK 13902  
*Manufacturers of the Finest  
Tent Products Described Herein*

Date of Manufacture

June 1997

This is to certify that the products herein have been manufactured from material inherently flame retardant as here after specified by the material supplier.

NAME: TENTS FOR RENT

CITY: NEW SHARON

STATE: ME

Certification is hereby made that:

The articles described on this certificate have been manufactured with an approved flame retardant chemical in compliance with California State Fire Marshal Code, NFPA-701\*, Underwriters Laboratory of Canada, and have been tested in accordance with the Federal Test Method Specifications and meet or exceed the Military Flame Specifications of MIL-C-43006G.

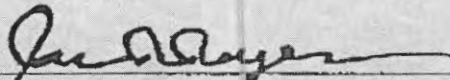
Type, color and weight of material: 14 oz Vinyl White

Description of item certified: 20 x 30 Traditional Tent

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

Snyder Manufacturing, Inc.

Manufacturer of Flame Retardant Vinyl Laminates

  
TENT DEPARTMENT, JOHNSON OUTDOORS INC.

\*Large Scale

The Tent will be set up on the 26th  
AND TAKEN DOWN the 27th

THANK YOU

TENTS FOR RENT

DON RICHARD

719 FARMINGTON FALLS RD

NEW SHARON, ME 04955

TEL 798-3847

CELL 576-6371

# Certificate of Flame Resistance

REGISTERED  
FABRIC  
NUMBER

F-140.01

ISSUED BY  
JOHNSON OUTDOORS INC.  
BINGHAMTON, NEW YORK 13902  
*Manufacturers of the Finest  
Tent Products Described Herein*

Date of Manufacture

FEB 2002

This is to certify that the products herein have been manufactured from material inherently flame retardant as here after specified by the material supplier.

NAME: MIKE'S TENT

CITY: FARMINGTON STATE: ME

Certification is hereby made that:

The articles described on this certificate have been manufactured with an approved flame retardant chemical in compliance with California State Fire Marshal Code, NFPA-701\*, Underwriters Laboratory of Canada, and have been tested in accordance with the Federal Test Method Specifications and meet or exceed the Military Flame Specifications of MIL-C-43006G.

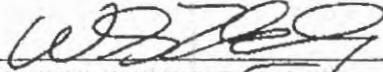
Type, color and weight of material 12 OZ. Vinyl WHITE

Description of Item certified: 20X30 PARTY CANOPY

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

Snyder Manufacturing, Inc.

Manufacturer of Flame Retardant Vinyl Laminates

  
TENT DEPARTMENT, JOHNSON OUTDOORS INC.

\*Large Scale