DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that $\underline{CITY\ OF\ PORTLAND}$ Job ID: $\underline{2011\text{-}085\text{-}}$ SE

Located At 427 OCEAN

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

has permission to 2 tents Easter Seal Event Set up 6/9/11 to 6/10/11

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

Fire Prevention Officer

Code Enforcement Officer/Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY.
PENALTY FOR REMOVING THIS CAR

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Director of Planning and Urban Development Penny St. Louis

Job ID: 2011-04-853-SE Located At: 427 OCEAN CBL: 159 - - G - 001 - 001 - - - -

Conditions of Approval:

Fire

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

Capt. Gautreau

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2011-04-853-SE	Date Applied: 4/19/2011		CBL: 159 G - 001 - 001			
Location of Construction: 427 OCEAN AVE – Payson Park	CITY OF PORTLAND		Owner Address: 389 Congress ST PORTLAND, ME -	Phone:		
Business Name: Easter Seal Event	Contractor Name: Dennis Brown		Contractor Address 39 Pond Villa, V	Phone: 894-5427		
Lessee/Buyer's Name:	Phone:		Permit Type: TENTS - Tents	Zone:		
Past Use: City Park – Payson Park	Proposed Use: City Park –Payson Park –To erect stage and tent for 6/9/11 to 6/10/11		Cost of Work: 1000.00			CEO District:
City I alk — I aysoli I alk			Fire Dept: Signature:	Approved W Denied N/A	Conditions	Inspection: Use Group: Type: Signature:
Proposed Project Description: ROS Payson Park Easter Seals - te			Pedestrian Activi	ties District (P.A.	.D.)	Vi
Permit Taken By: Lannie				Zoning Appr	oval	
 This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building Permits do not include plumbing, septic or electrial work. Building permits are void if work is not started within six (6) months of the date of issuance. False informatin may invalidate a building permit and stop all work. 		Shorelan Wetlands Flood Zo Subdivisi Site Plan Maj Date: CERTIF	one ion Min _MM A/24/ ICATION	Zoning Appeal Variance Miscellaneous Conditional Us Interpretation Approved Denied Date:	Not in E Does no e	ed w/Conditions
hereby certify that I am the owner of re-						

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

DATE

Report generated on Apr 21, 2011 2:44:57 PM

Page 1

Job Type:

Special Event

Job Description:

ROS Payson Park Easter Seals

Job Year:

2011

Building Job Status Code:

Initiate Plan Review

Pin Value:

1197 Tenant Name:

Job Application Date:

Public Building Flag: N

Tenant Number:

Estimated Value:

1,000

Square Footage:

Related Parties:

OF CITY

Property Owner

Job Charges									
Fee Code	Charge	Permit Charge	Net Charge	Payment	Receipt	Payment	Payment Adjustment	Net Payment	Outstanding
Description	Amount	Adjustment	Amount	Date	Number	Amount	Amount	Amount	Balance

Location ID: 22450

Alternate Id

						Location	n Details	
	Parcel Number	Census Tract	GIS X	GIS Y	GIS Z	GIS Reference	Longitude	L

926640 159 G 001 001

atitude -70.271266 43.683162

Location Type Subdivision Code Subdivision Sub Code Related Persons

Address(es) 427 OCEAN AVENUE NORTH

Location Use	Variance	Use Zone Code	Fire Zone	Inside Outside	District	General Location	Inspection Area	Jurisdiction
Code	Code		Code	Code	Code	Code	Code	Code
GOVERNMENTAL		RECREATION OPEN					DISTRICT 5	WOODFORDS

Structure Details

Structure: ROS

Occupancy Type Code:

Structure Type Code Structure Status Type Square Footage Estimated Value

Address

Other Non-Housekeeping 0

427 OCEAN AVENUE NORTH

Longitude Latitude GIS X GIS Y GIS Z GIS Reference

User Defined Property Value

Permit #: 20112906

			Permit Data				
Location Id	Structure Description	Permit Status	Permit Description	Issue Date	Reissue Date	Expiration Date	
22450	ROS	Initialized	2 tents Easter Seal Event Set up 6/9/11 to 6/10/11				

Job Summary Report Job ID: 2011-04-853-SE

Report generated on Apr 21, 2011 2:44:57 PM

Page 2

			Inspec	tion Detai	ls			_
Inspection Id	Inspection Type	Inspection Result Status	Inspection Status Date	Scheduled :	Start Timestamp	Result Statu	Date Final Inspection Flag	
	Fees Details							
Fee Code Description	Charge Amount	Permit Charge Adjustment	Permit Charge Adj Remark	Payment Date	Receipt Number	Payment Amount	Payment Adjustment Amount	Payment Ad Comment
Tent and Event Fees	\$60.00							



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.

within the City, payment arrangeme	ents must be made before permits of ar	ny kind are accepted.			
Location/Address/Park of Installation:	Tayson Park				
Date of Set.up/Event	Date of Breakdown/ End				
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Property Owner: City of Partland	Telephone:			
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: Faster Seals Maine 125 Pressupscot St	Fee: \$30.00 X2			
The permit fee and the following stems mu to receive a permit.					
 Certificate of Flammability 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) Company name of installer (contact info).					
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.					
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 prior to the issuance of a permit. For further information prior to the issuance of a permit. For further information prior to line additional information prior to the Building Inspections office, room 315 Cht Hall or call 67418703. Suppose the proposed work and that I have been authorized by 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:		A/15/11			
This is not a permit; you may r	not commence ANY work until the	permit is issued.			



Client#: 497072

EASTESEA7

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/14/2011

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER USI Insurance Svcs of NE, Inc. PO Box 6360 Manchester, NH 03108-6360 603 625-1100	CONTACT NAME: PHONE [A/C, No, Ext): 603 625-1100 E-Mail ADDRESS: PRODUCER CUSTOMER ID #:				
003 025-1100	INSURER(S) AFFORDING COVERAGE				
INSURED	INSURER A: Philadelphia Insurance Company				
Easter Seals NH, Inc.	INSURER B : Liberty Mutual Insurance Compan	23043			
Easter Seals NY, Inc.	INSURER C:				
555 Auburn Street	INSURER D:				
Manchester, NH 03103	INSURER E :				
	INSURER F :				

COVERAGES	CERTIFICATE NUMBER:	REVISION NUMBER

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s
Α	X COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	Х		PHPK613467	09/01/2010	09/01/2011	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person)	\$1,000,000 \$100,000 \$5,000
	X Prof Liability						PERSONAL & ADV INJURY	s1,000,000
							GENERAL AGGREGATE	\$3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	\$3,000,000
	POLICY PRO- JECT LOC							\$
Α	AUTOMOBILE LIABILITY			PHPK613467	09/01/2010	09/01/2011	COMBINED SINGLE LIMIT (Ea accident)	^{\$} 1,000,000
	X ANY AUTO						BODILY INJURY (Per person)	s
	ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	X HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$
	X NON-OWNED AUTOS							S
								S
Α	X UMBRELLA LIAB X OCCUR			PHUB318756	09/01/2010	09/01/2011	EACH OCCURRENCE	s15,000,000
	EXCESS LIAB CLAIMS-MADE			The space of the state of the s			AGGREGATE	\$15,000,000
	DEDUCTIBLE							\$
	X RETENTION \$ \$10,000							\$
В	WORKERS COMPENSATION			WC7611258839011	01/01/2011	01/01/2012	X WC STATU- TORY LIMITS OTH- ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	NA					E.L. DISEASE - EA EMPLOYEE	\$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	s1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)

** Supplemental Names ** Cancellation Notice is 30 Days EXCEPT for NON-PAYMENT which is 10 Days.

Easter Seals NH, Inc., Easter Seals NY, Inc., Easter Seals ME, Inc., STS, Inc., Agency Realty, Inc., Easter (See Attached Descriptions)

CERTIFICATE HOLDER	CANCELLATION 10 Days for Non-Payment
City of Portland 134 Congress St., Suite 2	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
Portland, ME 04101	AUTHORIZED REPRESENTATIVE
	E 1 1111

@ 1988-2009 ACORD CORPORATION. All rights reserved.

DESCRIPTIONS (Continued from Page 4)
DESCRIPTIONS (Continued from Page 1)
Seals RI, Inc., The Harbor Schools, Inc., Manchester Alcohol Rehabilitation Center, Inc., dba The Farnum Center, Easter Seals VT, Inc., Easter Seals CT, Inc.
RE: Walk with ME Maine to be held on June 9, 2011. The City of Portland is named as Additional Insured with respect to the General Liability.

Certificate of Flame Resistance



REGISTERED FABRIC NUMBER

F53501

Issued by

TOPTEC, INC. 1905 N.E. Main Street

Simpsonville, SC 29681

Date Manufactured

11/21/05

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

Address 262 MAIN ST		145	2.4400	
City S PORTLAND	State	ME	04106 Zip	
The articles described are flame-retarda he fabric is in conformance with the law State Fire Marshal. Fabric has been test	s of the State of Californ	nia and the Ru	iles and Regulations o	
	eu anu passes ivi i A70	or or arou,	OLO 109, WV 33302.	
Method of Application: The Flame Retarde. Description of item certified: FRAME		erent and Perr		
lethod of Application: The Flame Retarde	ency of this Fabric is Inhe 20x30 BLACKOUT SS Used WILL NO	erent and Perr WHITE T Be Remo	manent.	3.

Certificate of Flame Resistance



REGISTERED FABRIC NUMBER

F53501

Issued by

TOPTEC, INC.

1905 N.E. Main Street Simpsonville, SC 29681 **Date Manufactured**

01/06/05

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

Address ^{262 MAIN ST}				
City S PORTLAND	State	ME	04106 Zip	
Certification is hereby made that:				
he articles described are flame-retard	dant, approved and regis	stered by the S	tate Fire Marshal a	nd tha
ne fabric is in conformance with the law		,		
tate Fire Marshal. Fabric has been tes	sted and nasses NEPA7	11-96 CPAIRA	111 C109 MVSS302	
	sted and passes in init	1 00, 01/1104,	OLO 103, 111 V 00002	
	ned and passes in Trire	77 30, 0771104,	020703. WW 00302	
ethod of Application: The Flame Retard		nerent and Perr		
ethod of Application: The Flame Retard	lency of this Fabric is Inl	nerent and Perr		
ethod of Application: <i>The Flame Retard</i> escription of item certified: FRAME	lency of this Fabric is Inl 20x20 BLACKOU	erent and Perr	manent.	
ethod of Application: The Flame Retard	lency of this Fabric is Inl 20x20 BLACKOU	erent and Perr	manent.	
ethod of Application: <i>The Flame Retard</i> escription of item certified: FRAME	lency of this Fabric is Inl 20x20 BLACKOU	WHITE T Be Remo	oved By Washi	
lethod of Application: The Flame Retard escription of item certified: FRAME The Flame Retardant Proce	lency of this Fabric is Inl 20x20 BLACKOU	WHITE T Be Remo	manent.	