

PERMIT ISSUED

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 01-1472	Issue Date: NOV 30 2001	CBL: 170 F001001
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Location of Construction: 901 Washington Ave	Owner Name: Brown J B & Sons	Owner Address: Po Box 20	Phone: 774-5908
Business Name: xmas tree sales	Contractor Name: no contractor/self	Contractor Address: n/a n/a	Phone:
Lessee/Buyer's Name: David Rodway	Phone:	Permit Type: Signs - Permanent	Zone: B-2

Past Use: andover college	Proposed Use: college	Permit Fee:	Cost of Work: \$0.00	CEO District: 2
Proposed Project Description: temporary xmas tree sales, TEMOPRARY 8' X 3' SIGN FOR 3 WEEKS		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied N/A	INSPECTION: Use Group: U Type: BOLD 1999 Signature: J Morrison	

PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)	
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied	Signature: N/A Date:

Permit Taken By: gg	Date Applied For: 11/30/2001	<b>Zoning Approval</b>	
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<ol style="list-style-type: none"> <li>This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</li> <li>Building permits do not include plumbing, septic or electrical work.</li> <li>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..</li> </ol>	<b>Special Zone or Reviews</b> <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"/> Date: 11/30/01 OK = NO FLASH LIGHTS	<b>Zoning Appeal</b> <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 Date:	<b>Historic Preservation</b> <input checked="" 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:
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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
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RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE	DATE	PHONE
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THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

# SIGNAGE APPLICATION

THIS IS NOT A PERMIT  
CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

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.

01-1472

Location/Address of Construction: 901 Washington Ave

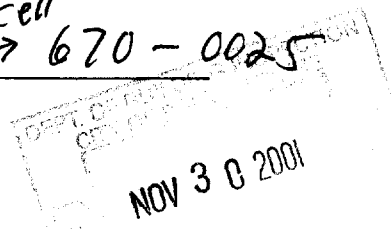
Total Square Footage of Proposed Structure N/A Square Footage of Lot

Tax Assessor's Chart, Block & Lot Number  
Chart# 170 Block# F Lot# 001  
Owner: J. B Brown + Sons  
PO Box 207  
Portland, Me 04112  
Telephone #: 774-5908

Lessee/Buyer's Name (If Applicable) David Rodway  
Owner's/Purchaser/Lessee Address: J. B Brown  
PO Box 207  
Portland, Me 04912  
Total s.f of signs 24 x .20 \$ 480, plus \$30.00  
TOTAL\$ 3480

Current use: Anderson College Proposed use: Christmas TREE Business  
Sandwich board sign  
Project description: selling x-mas trees for 4 weeks (litc-up)  
temp.

Applicants Name, Address & Telephone: David J. Rodway  
PO 1261  
Rangely, Me 04970  
Contractor's Name, Address & Telephone: N/A  
Who shall we contact when the permit is ready: David Rodway <sup>cell</sup> 670-0025  
Telephone:  
If you would like it mailed, what mailing address should we use:  
PO 1261  
Rangely, Me 04970  
Rec'd By:



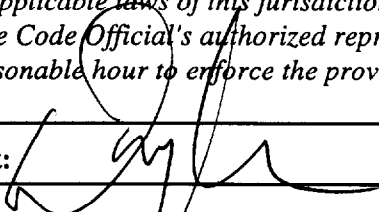
please mail

**THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED**

If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

**Certification**

*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: 	Date: 11/29/01
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**Sign Permit Fee: \$30.00 plus \$0.20 per square foot.**

***A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00***

**BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR**

**IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE**

Application ID Number: 1-1472

Department: Zoning

Status: Approved with Conditions

Requester: Marge Schmuckal

Comments: 901 Washinton Ave

Approval Date: 11/30/2001

When On Line: 11/30/2001

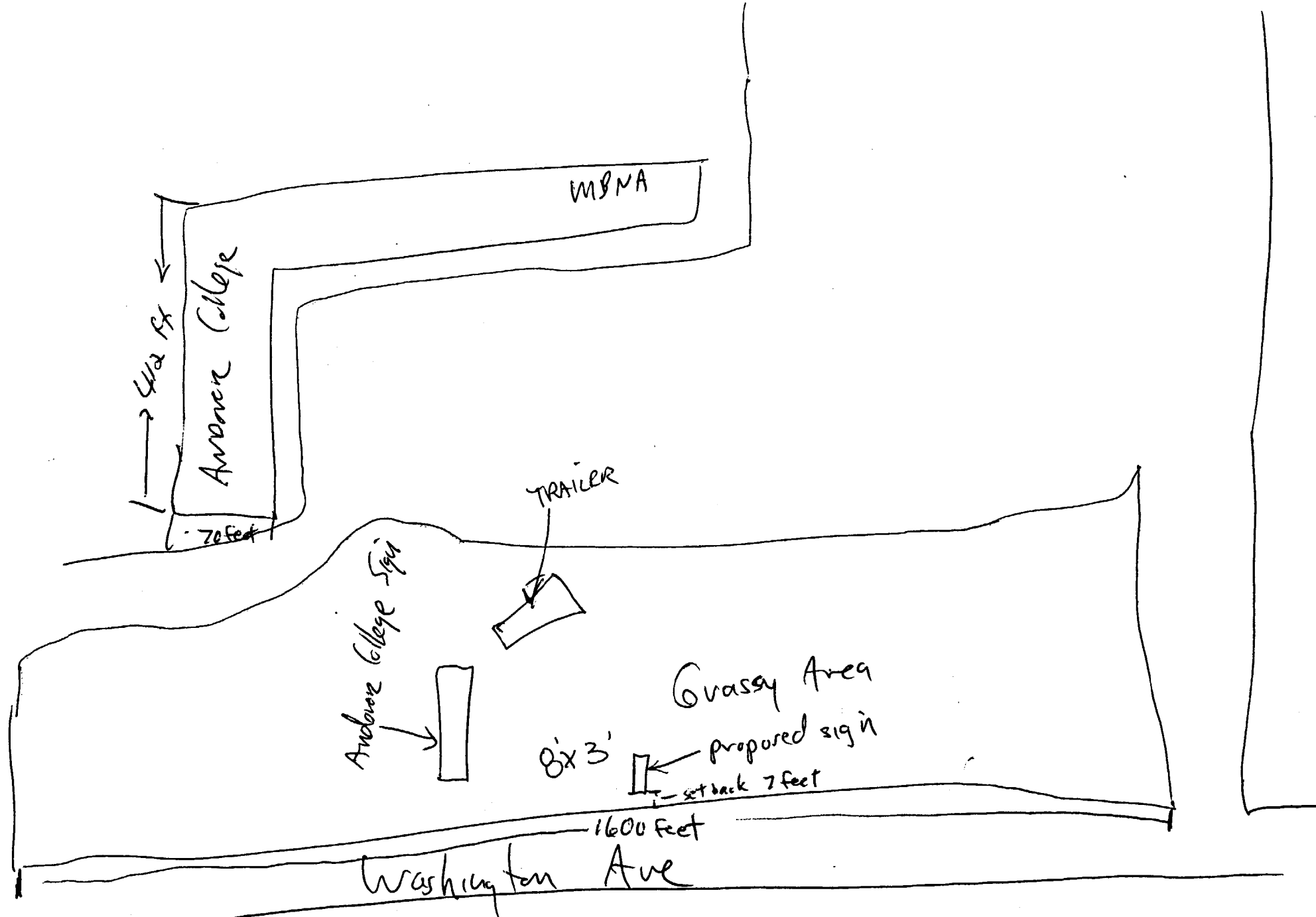
OK to Issue Permit Name: Marge Schmuckal Date: 11/30/2001 Box 1:

Conditions Section:

There shall be no flashing or scrolling lights attached to or shining on this signage.

Create Date: 11/30/2001 By: gg

Update Date: 11/30/2001 By: mes



Sandwich board sign

Location of Construction: <b>901 WASHINGTON AVE</b>		Owner: <b>ANDOVER COLLEGE</b>	Phone:	Permit No: <b>001363</b>
Owner Address:		Lessee/Buyer's Name: <b>*** DAVID RODWAY 838-9809***</b>	Phone:	Business Name:
Contractor Name:	Address:		Phone:	Permit Issued: <b>NOV 30 2000</b>
Past Use: <b>COLLEGE</b>	Proposed Use: <b>SAME</b>	COST OF WORK: <b>\$ 0</b>	PERMIT FEE: <b>\$ 34.80</b>	Zone: <b>B-2</b> CBL: <b>170-F-001</b> Zoning Approval: <b>ok - No further Special Zone or Reviews</b>
Proposed Project Description: <b>TEMP LIT SIGN FOR SALE OF XMAS TREES IN PARKING LOT up to NOV 30 For 4 weeks</b>		FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: Type: <b>PICCA 94111</b> Signature: <i>[Signature]</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		<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"/>
Permit Taken By: <b>K</b>		Date Applied For: <b>NOV 28 2000</b>		Signature: _____ Date: _____

Form # P 04

**DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK  
CITY OF PORTLAND**

Please Read Application And Notes, If Any, Attached

This is to certify that **DAVID RODWAY**  
has permission to **TEMP SIGN FOR SALE OF XMAS TREES**  
AT **901 WASHINGTON AVE**

001303

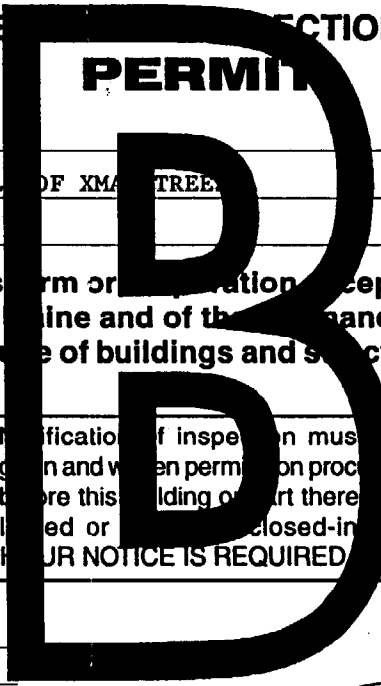
provided that the person or persons forming or operating in accepting this permit shall comply with all of the provisions of the Statutes of Maine and of the ordinances of the City of Portland regulating the construction, maintenance and use of buildings and structures, and of the application on file 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 when permission proceeds before this building or part thereof is occupied or enclosed-in-4  
**YOUR 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. \_\_\_\_\_  
Health Dept. \_\_\_\_\_  
Appeal Board \_\_\_\_\_  
Other \_\_\_\_\_  
Department Name \_\_\_\_\_



**PERMIT ISSUED WITH REQUIREMENTS**  
*[Signature]*  
Director - Building & Inspection Services

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

**Action:**  
 Approved  
 Approved with Conditions  
 Denied  
Date: *[Signature]*

**PERMIT ISSUED WITH REQUIREMENTS**  
CEO DISTRICT **2**

**J. B. BROWN & SONS**

482 CONGRESS STREET  
P.O. BOX 207  
PORTLAND, MAINE 04112  
PHONE 207-774-5908  
FAX 207-774-0898

Mr. David Rodway  
12 Russell Cove Rd  
P. O. Box 1261  
Rangeley, ME 04970

November 15, 2001

Account: Rodway

Re: 901 Washington Ave

Dear David,

This letter when seen and agreed to shall constitute a lease for the use of the front lawn area of 901 Washington Avenue in Portland, Maine. The leased area shall be more specifically described as the area to the east of the large pylon sign and to be more definitively located so as not to conflict with the construction in progress on-site. The lease shall be between J. B. Brown & Sons, Landlord, and David J. Rodway, Tenant.

The term of the lease shall be from November 27, 2001 through December 25, 2001. The rent due and payable at lease signing shall be \$1,500.00.

The Tenant shall be able to utilize this area for the specific purpose of Christmas Tree sales. The Tenant shall be allowed to park a trailer on site and utilize the power outlet located on the lawn.

Furthermore, Tenant shall be allowed to decorate the trees in the immediate area and can post appropriate signage along Washington Ave for the specific purposes of advertising Christmas Tree Sales. Customer parking shall be along Washington Ave and Rainbow Mall Road. All parking shall be managed in a manner not to interfere with the other tenants or construction activities in the complex.

Furthermore, Tenant shall have all light, signs, tree racks and the trailer removed, leaving the site raked clean as it was prior to lease commencement.

Furthermore, Tenant shall provide to landlord proof of liability insurance in the amount of \$1,000,000 and indemnify and hold Landlord harmless of all actions and claims relating to Tenant's activities.

David, please indicate your acceptance of these terms and conditions by signing in the space provided below.

Sincerely,

  
Steven Reynolds  
Vice President

Seen and Agreed to; \_\_\_\_\_  
David J. Rodway                      Date:





**ACORD COMMERCIAL INSURANCE APPLICATION** DATE 11/20/2001  
**APPLICANT INFORMATION SECTION**

<b>PRODUCER</b> PHONE (A/C, No, Ext): (207)774-6257 FAX (207)774-2994  Clark Associates 2331 Congress Street P O Box 3543 Portland, ME 04104  CODE: 8210564      SUB CODE: AGENCY CUSTOMER ID 00024555	<b>CARRIER</b> NAIC CODE: <b>UNDERWRITER</b> Peerless Ins Co      Kathy Battle <b>POLICIES OR PROGRAM REQUESTED</b> Monoline General Liability  <b>INDICATE SECTIONS ATTACHED</b> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">                     PROPERTY                      GLASS AND SIGN                      ACCOUNTS RECEIVABLE/                      VALUABLE PAPERS                      CRIME/MISCELLANEOUS CRIME                      TRANSPORTATION/                      MOTOR TRUCK CARGO                 </td> <td style="width: 33%; border: none;">                     EQUIPMENT FLOATER                      INSTALLATION/BUILDERS RISK                      ELECTRONIC DATA PROC                      COMMERCIAL                      GENERAL LIABILITY      X                      BUSINESS AUTO                      TRUCKERS/MOTOR CARRIER                 </td> <td style="width: 33%; border: none;">                     GARAGE AND DEALERS                      VEHICLE SCHEDULE                      BOILER &amp; MACHINERY                      WORKERS COMPENSATION                      UMBRELLA                 </td> </tr> </table>	PROPERTY GLASS AND SIGN ACCOUNTS RECEIVABLE/ VALUABLE PAPERS CRIME/MISCELLANEOUS CRIME TRANSPORTATION/ MOTOR TRUCK CARGO	EQUIPMENT FLOATER INSTALLATION/BUILDERS RISK ELECTRONIC DATA PROC COMMERCIAL GENERAL LIABILITY      X BUSINESS AUTO TRUCKERS/MOTOR CARRIER	GARAGE AND DEALERS VEHICLE SCHEDULE BOILER & MACHINERY WORKERS COMPENSATION UMBRELLA
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<b>STATUS OF SUBMISSION</b>	<b>PACKAGE POLICY INFORMATION</b>
<input checked="" type="checkbox"/> QUOTE <input type="checkbox"/> ISSUE POLICY BOUND (Give Date and/or Attach Copy) DATE      TIME      AM      PM	ENTER THIS INFORMATION WHEN COMMON DATES AND TERMS APPLY TO SEVERAL LINES, OR FOR MONOLINE POLICIES PROPOSED EFF DATE      PROPOSED EXP DATE      BILLING PLAN      PAYMENT PLAN      AUDIT DIRECT BILL      AGENCY BILL

**APPLICANT INFORMATION**

NAME (First Named Insured & Other Named Insureds) David Rodway	FED OR SOC SEC # (of First Named Insured): PHONE (A/C, No, Ext):	MAILING ADDRESS INCL ZIP-4 (of First Named Insured) PO Box 1261 Rangely, ME 04970
<input checked="" type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION <input type="checkbox"/> SUBCHAPTER S CORPORATION <input type="checkbox"/> NOT FOR PROFIT ORG <input type="checkbox"/> CR BUREAU NAME      ID NUMBER      YEAR BUS STARTED		
INSPECTION CONTACT David Rodway	PHONE (A/C, No, Ext): (207)864-3900	ACCOUNTING RECORDS CONTACT      PHONE (A/C, No, Ext): same

**PREMISES INFORMATION**

LOC #	BLD #	STREET, CITY, COUNTY, STATE, ZIP-4	CITY LIMITS	INTEREST	YR BUILT	PART OCCUPIED
00001	00001	901 Washington Ave Portland	Cumberland ME 04103	<input checked="" type="checkbox"/> INSIDE      OWNER <input checked="" type="checkbox"/> OUTSIDE      TENANT		X-mas Tree Sales
			<input type="checkbox"/> INSIDE      OWNER <input type="checkbox"/> OUTSIDE      TENANT			
			<input type="checkbox"/> INSIDE      OWNER <input type="checkbox"/> OUTSIDE      TENANT			

**NATURE OF BUSINESS/DESCRIPTION OF OPERATIONS BY PREMISE(S)**  
 Insured will be selling Christmas trees in the Andover College area of Washington Ave during the month of December. Ok'd by Kathy Battle for annual policy 11/20/01.

**GENERAL INFORMATION**

EXPLAIN ALL "YES" RESPONSES	YES	NO	EXPLAIN ALL "YES" RESPONSES	YES	NO
1. IS THE APPLICANT A SUBSIDIARY OF ANOTHER ENTITY OR DOES THE APPLICANT HAVE ANY SUBSIDIARIES?	X		7. ANY PAST LOSSES OR CLAIMS RELATING TO SEXUAL ABUSE OR MOLESTATION ALLEGATIONS, DISCRIMINATION OR NEGLIGENT HIRING?		X
2. IS A FORMAL SAFETY PROGRAM IN OPERATION?	X		8. DURING THE LAST TEN YEARS, HAS ANY APPLICANT BEEN CONVICTED OF ANY DEGREE OF THE CRIME OF ARSON? (In RI, this question must be answered by any applicant for property insurance. Failure to disclose the existence of an arson conviction is a misdemeanor punishable by a sentence of up to one year of imprisonment.)		X
3. ANY EXPOSURE TO FLAMMABLES, EXPLOSIVES, CHEMICALS?	X		9. ANY UNCORRECTED FIRE CODE VIOLATIONS?		X
4. ANY CATASTROPHE EXPOSURE?	X		10. ANY BANKRUPTCIES, TAX OR CREDIT LIENS AGAINST THE APPLICANT IN THE PAST 5 YEARS?		X
5. ANY OTHER INSURANCE WITH THIS COMPANY OR BEING SUBMITTED?					
6. ANY POLICY OR COVERAGE DECLINED, CANCELLED OR NON-RENEWED DURING THE PRIOR 3 YEARS? NOT APPLICABLE IN MO.	X				

REMARKS

**ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS THE PERSON TO CRIMINAL AND (NY: SUBSTANTIAL) CIVIL PENALTIES. (NOT APPLICABLE IN CO, HI, NE, OH, OK, OR; IN ME AND VA, INSURANCE BENEFITS MAY ALSO BE DENIED)**

APPLICANT'S SIGNATURE	PRODUCER'S SIGNATURE
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**PRIOR CARRIER INFORMATION**

LINE	CATEGORY											
COMMERCIAL LIABILITY	CARRIER											
	POLICY NUMBER											
	POLICY TYPE											
	RETRO DATE											
	EFF-EXP DATE											
	GENERAL AGGREGATE											
	PRODUCTS COMP OF AGGREGATE											
	PERSONAL & ADV INJ											
	EACH OCCURRENCE											
	FIRE DAMAGE											
	MEDICAL EXPENSE											
	BODILY INJURY	OCCURRENCE										
		AGGREGATE										
	PROPERTY DAMAGE	OCCURRENCE										
		AGGREGATE										
COMBINED SINGLE LIMIT												
MODIFICATION FACTOR												
TOTAL PREMIUM												
AUTOMOBILE LIABILITY	CARRIER											
	POLICY NUMBER											
	POLICY TYPE											
	EFF-EXP DATE											
	COMBINED SINGLE LIMIT											
	BODILY INJURY	EA PERSON										
		EA ACCIDENT										
	PROPERTY DAMAGE											
	MODIFICATION FACTOR											
	TOTAL PREMIUM											
PROPERTY	CARRIER											
	POLICY NUMBER											
	POLICY TYPE											
	EFF-EXP DATE											
	BUILDING	AMT										
	PERS PROP	AMT										
MODIFICATION FACTOR												
TOTAL PREMIUM												

**LOSS HISTORY**

ENTER ALL CLAIMS OR LOSSES (REGARDLESS OF FAULT AND WHETHER OR NOT INSURED) OR OCCURRENCES THAT MAY GIVE RISE TO CLAIMS FOR THE PRIOR 5 Y.						CHK HERE IF NONE	SEE ATTACHED LOSS	CLAIM STATUS
DATE OF OCCURRENCE	LINE	TYPE/DESCRIPTION OF OCCURRENCE OR CLAIM	DATE OF CLAIM	AMOUNT PAID	AMOUNT RESERVED			
								OPEN
								CLOSED
								PENY
								CURSED
REMARKS NOTE: FIDELITY REQUIRES A FIVE YEAR LOSS HISTORY								

**NOTICE OF INSURANCE INFORMATION PRACTICES**  
 PERSONAL INFORMATION ABOUT YOU, INCLUDING INFORMATION FROM A CREDIT REPORT, MAY BE COLLECTED FROM PERSONS OTHER THAN YOU. SUCH INFORMATION AS WELL AS OTHER PERSONAL AND PRIVILEGED INFORMATION COLLECTED BY US OR OUR AGENTS MAY IN CERTAIN CIRCUMSTANCES BE DISCLOSED TO THIRD PARTIES. YOU HAVE THE RIGHT TO REVIEW YOUR PERSONAL INFORMATION IN OUR FILES AND CAN REQUEST CORRECTION OF ANY INACCURACIES. A MORE DETAILED DESCRIPTION OF YOUR RIGHTS AND OUR PRACTICES REGARDING SUCH INFORMATION IS AVAILABLE UPON REQUEST. CONTACT YOUR AGENT OR BROKER FOR INSTRUCTION ON HOW TO SUBMIT A REQUEST TO US.

<b>ACORD® ADDITIONAL INTEREST</b>		DATE (MM/DD/YY) 11/20/2001
PRODUCER PHONE (A/C, No, Ext): (207)774-6257 FAX (207)774-2994  Clark Associates 2331 Congress Street P O Box 3543 Portland, ME 04104	APPLICANT (First Named Insured) David Rodway	PHONE (A/C, No, Ext):
CODE: 8210564      SUB CODE:	EFFECTIVE DATE:      EXPIRATION DATE:      COI/PLAN:	Commercial General Liability
AGENCY CUSTOMER ID 00024555	POLICY NUMBER: 2001	ACCOUNT NUMBER:

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
X	ADDITIONAL INSURED	J.B. Brown & Sons 482 Congress Street Portland, ME 04101			LOCATION: 00001      BUILDING: 00001 VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
	ADDITIONAL INSURED				LOCATION:      BUILDING: VEHICLE:      BOAT: SCHEDULED ITEM NUMBER: OTHER:
	LOSS PAYEE				
	MORTGAGEE				
	LIENHOLDER				
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

**CONTRACTORS**

EXPLAIN ALL "YES" RESPONSES (For past or present operations)		YES	NO	EXPLAIN ALL "YES" RESPONSES (For past or present operations)		YES	NO
1. DOES APPLICANT DRAW PLANS, DESIGNS, OR SPECIFICATIONS FOR OTHERS?				4. DO YOUR SUBCONTRACTORS CARRY COVERAGES OR LIMITS LESS THAN YOURS?			
2. DO ANY OPERATIONS INCLUDE BLASTING OR UTILIZE OR STORE EXPLOSIVE MATERIAL?				5. ARE SUBCONTRACTORS ALLOWED TO WORK WITHOUT PROVIDING YOU WITH A CERTIFICATE OF INSURANCE?			
3. DO ANY OPERATIONS INCLUDE EXCAVATION, TUNNELING, UNDERGROUND WORK OR EARTH MOVING?				6. DOES APPLICANT LEASE EQUIPMENT TO OTHERS WITH OR WITHOUT OPERATORS?			
REMARKS/DESCRIBE THE TYPE OF WORK SUBCONTRACTED		\$ PAID TO SUB-CONTRACTORS:		% OF WORK SUBCONTRACTED:		# FULL-TIME STAFF:	

**PRODUCTS/COMPLETED OPERATIONS**

PRODUCTS	ANNUAL GROSS SALES	# OF UNITS	TIME IN MARKET	EXPECTED LIFE	INTENDED USE	PRINCIPAL COMPONENTS	
EXPLAIN ALL "YES" RESPONSES (For any past or present product or operation)		YES	NO	EXPLAIN ALL "YES" RESPONSES (For any past or present product or operation)		YES	NO
1. DOES APPLICANT INSTALL, SERVICE OR DEMONSTRATE PRODUCTS?		X		6. PRODUCTS RECALLED, DISCONTINUED, CHANGED?			X
2. FOREIGN PRODUCTS SOLD, DISTRIBUTED, USED AS COMPONENTS?		X		7. PRODUCTS OF OTHERS SOLD OR RE-PACKAGED UNDER APPLICANT LABEL?			X
3. RESEARCH AND DEVELOPMENT CONDUCTED OR NEW PRODUCTS PLANNED?		X		8. PRODUCTS UNDER LABEL OF OTHERS?			X
4. GUARANTEES, WARRANTIES, HOLD HARMLESS AGREEMENTS?		X		9. VENDORS COVERAGE REQUIRED?			X
5. PRODUCTS RELATED TO AIRCRAFT/SPACE INDUSTRY?		X		10. DOES ANY NAMED INSURED SELL TO OTHER NAMED INSUREDS?			X
PLEASE ATTACH LITERATURE, BROCHURES, LABELS, WARNINGS, ETC							

**ADDITIONAL INTEREST/CERTIFICATE RECIPIENT**

ACORD 45 attached for additional names

INTEREST	RANK:	NAME AND ADDRESS	REFERENCE #:	CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER
X	ADDITIONAL INSURED	City of Portland			LOCATION: BUILDING:
	LOSS PAYEE	389 Congress Street			VEHICLE: BOAT:
	MORTGAGEE	Portland, ME 04104			SCHEDULED ITEM NUMBER:
	LIENHOLDER				OTHER
	EMPLOYEE AS LESSOR				
ITEM DESCRIPTION:					

**GENERAL INFORMATION**

EXPLAIN ALL "YES" RESPONSES (For all past or present operations)		YES	NO	EXPLAIN ALL "YES" RESPONSES (For all past or present operations)		YES	NO
1. ANY MEDICAL FACILITIES PROVIDED OR MEDICAL PROFESSIONALS EMPLOYED OR CONTRACTED?		X		12. ANY STRUCTURAL ALTERATIONS CONTEMPLATED?			X
2. ANY EXPOSURE TO RADIOACTIVE/NUCLEAR MATERIALS?		X		13. ANY DEMOLITION EXPOSURE CONTEMPLATED?			X
3. DO/HAVE PAST, PRESENT OR DISCONTINUED OPERATIONS INVOLVE(D) STORING, TREATING, DISCHARGING, APPLYING, DISPOSING, OR TRANSPORTING OF HAZARDOUS MATERIAL? (e.g. landfills, wastes, fuel tanks, etc)		X		14. HAS APPLICANT BEEN ACTIVE IN OR IS CURRENTLY ACTIVE IN JOINT VENTURES?			X
4. ANY OPERATIONS SOLD, ACQUIRED, OR DISCONTINUED IN LAST 5 YEARS?		X		15. DO YOU LEASE EMPLOYEES TO OR FROM OTHER EMPLOYERS?			X
5. MACHINERY OR EQUIPMENT LOANED OR RENTED TO OTHERS?		X		16. IS THERE A LABOR INTERCHANGE WITH ANY OTHER BUSINESS OR SUBSIDIARIES?			X
6. ANY WATERCRAFT, DOCKS, FLOATS OWNED, HIRED OR LEASED?		X		17. ARE DAY CARE FACILITIES OPERATED OR CONTROLLED?			X
7. ANY PARKING FACILITIES OWNED/RENTED?		X		18. HAVE ANY CRIMES OCCURRED OR BEEN ATTEMPTED ON YOUR PREMISES WITHIN THE LAST THREE YEARS?			X
8. IS A FEE CHARGED FOR PARKING?		X		19. IS THERE A FORMAL, WRITTEN SAFETY AND SECURITY POLICY IN EFFECT?			X
9. RECREATION FACILITIES PROVIDED?		X		20. DOES THE BUSINESSES' PROMOTIONAL LITERATURE MAKE ANY REPRESENTATIONS ABOUT THE SAFETY OR SECURITY OF THE PREMISES?			X
10. IS THERE A SWIMMING POOL ON THE PREMISES?		X					
11. SPORTING OR SOCIAL EVENTS SPONSORED?		X					
REMARKS							