

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED JUN 14 2007 CITY OF PORTLAND

Permit Number: 070517

This is to certify that STURBRIDGE YANKEE WORKSHOP INC

has permission to Tent Sale- Tent set-up 06/15/07 to 06/20/07

AT 2 BLUEBERRY RD 238 A018001

provided that the person or persons firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of the State 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 is procured before this building or part thereof is leased or otherwise closed-in. 4 HOUR NOTIFICATION 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

6/13/07 [Signature] 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: 07-0517	Issue Date:	CBL: 238 A018001
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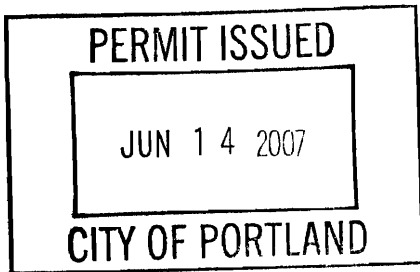
Location of Construction: 2 BLUEBERRY RD	Owner Name: STURBRIDGE YANKEE WORKS	Owner Address: 90 BLUEBERRY RD	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Tents	Zone: J-M

Past Use: Commercial - Retail	Proposed Use: Sturbridge Yankee Workshop - Tent Sale- Tent set-up 06/15/2007 to 06/16/2007	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 3
Proposed Project Description: Tent Sale- Tent set-up 06/15/2007 to 06/16/2007		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: Tent City ORD. Signature: 6/13/07 CLM	
		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: 05/09/2007	<b>Zoning Approval</b>
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- This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.
- Building permits do not include plumbing, septic or electrical work.
- 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	Zoning Appeal	Historic Preservation
<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 checked="" type="checkbox"/> MM	<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	<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: 5/21/07	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

6-15-06 - 6-16-06

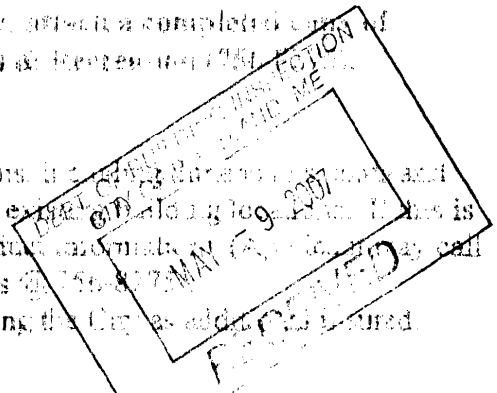
# Tent/Canopy or Temporary Event Staging Permit Application

If you or the property owner owes real estate or personal property taxes or other charges on any property within the City, payment arrangements must be made before permits of any kind are issued.

Location/Address/ Park of Installation: <u>2 Blueberry</u>			
Tax Assessor's Chart# <u>238</u>	Block# <u>A</u>	Lot# <u>18</u>	Property Owner: <u>Sturbridge Yankee Workshop</u>
Lessee/Buyer's Name (If Applicant): <u>—</u>			Telephone: <u>774-9045</u>
Applicant name, address & telephone: <u>John Roy</u> <u>Sturbridge Yankee Workshop</u> <u>90 Blueberry Rd. P.O. ME 04102</u>			Fee: \$ <u>150.00</u>

The permit fee, and the following items, must be completed and submitted to the Inspection Division to receive a permit.

1. Certificate of Homeability
2. Letter of approval from property owner. **If the City is owner, attach a completed copy of Application to Use City Parks & Public Space for a Permit (Form 204).**
3. Company name of installer (if not in 1).
4.  Plan showing the following:
  - a. Location of temporary event staging locations, including dimensions, utility lines, and entrances of proposed and existing, parking and existing.
  - b. If this is temporary staging, you will need to include product and materials.
  - c. If this is permanent staging, you will need to include product and materials.
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



Who should we contact when permit is ready: John Roy 774-9045  
 Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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.

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. I am an authorized agent. I agree to comply to all applicable laws of this jurisdiction. In addition, I understand that work described in this application is to be done in accordance with the Code Official's authority, and I understand that I have the authority to enter all areas covered by this permit at my reasonable hour to enforce the provisions of the codes applicable to this permit.

Signature of applicant: <u>John Roy</u>	Date: <u>5/9/07</u>
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This is NOT a permit; you may not commence ANY work until this permit is issued.

# Certificate of Flame Retardancy

REGISTERED  
FABRIC  
NUMBER  
F-140 01

ISSUED BY  
SUBCOMMITTEE ON FIRE RESISTANCE ASSOCIATION, INC.  
BINGHAMTON, NEW YORK 13902  
Manufacturers of the Finest  
Furn Products Described Herein

Date of Manufacture  
January 2003

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: ATLANTIC TENT CO.

CITY: BRIDGEVILLE

STATE: \_\_\_\_\_  
ZIP: \_\_\_\_\_

### 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-43000C.

Type, color and weight of material: Navy Vinyl      Yellow A White

Manufacturer of fabric and finish: \_\_\_\_\_

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

Signature of Manufacturer  
Manufacturer of Flame Retardant Vinyl Laminates

*[Signature]*  
1001 DEPARTMENT, JOHNSON WORLDWIDE ASSOCIATES, INC.

AUG-16 2005 12:42 PM ATL. TENT & ROTARY  
**RENTAL**

**ATLANTIC TENT COMPANY**  
P.O. BOX 937  
DAMARISCOTTA, ME 04543  
(207) 563-5800  
FAX 563-5799  
TOLL FREE (877) 865-9500



# CITY OF PORTLAND, MAINE

## Department of Building Inspections

20

Received from \_\_\_\_\_

Location of Work \_\_\_\_\_

Cost of Construction \$ \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

Building (IL) \_\_\_ Plumbing (I5) \_\_\_ Electrical (I2) \_\_\_ Site Plan (U2) \_\_\_

Other \_\_\_\_\_

CBL: \_\_\_\_\_

Check #: \_\_\_\_\_ Total Collected \$ \_\_\_\_\_

### 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.

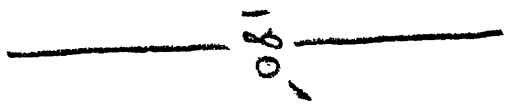
WHITE - Applicant's Copy  
YELLOW - Office Copy  
PINK - Permit Copy

Blueberry Rd

Driveway

Driveway

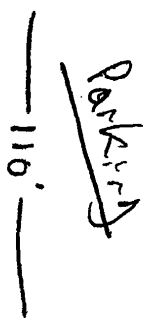
- 460' -



180'

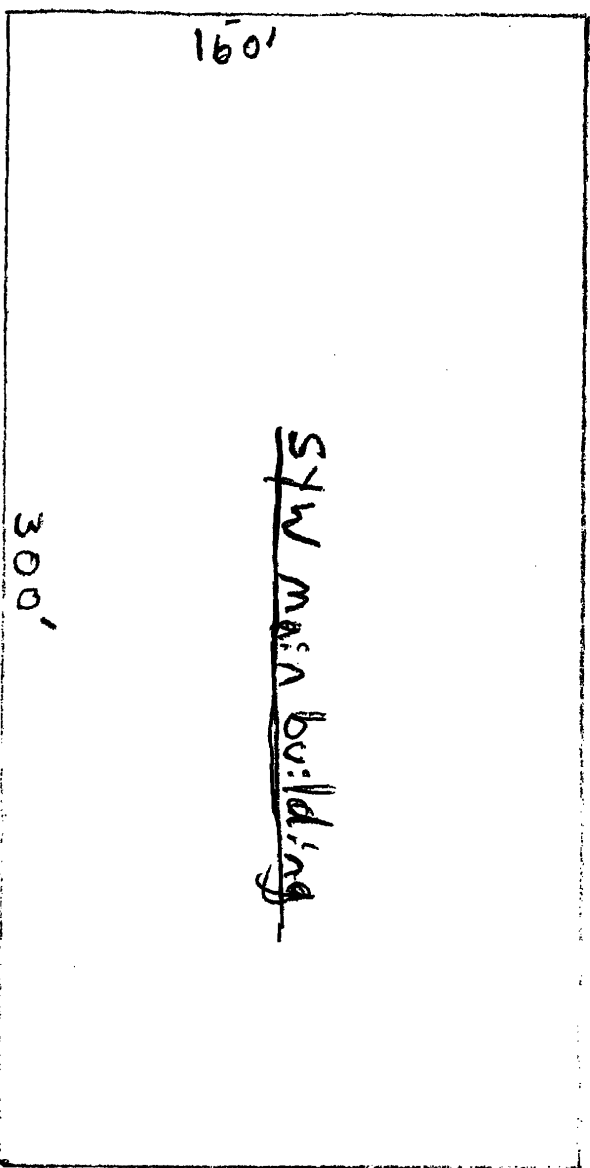
- 371' -

Front lot



110'

SW main building



1091

300'

30'

- 617' -

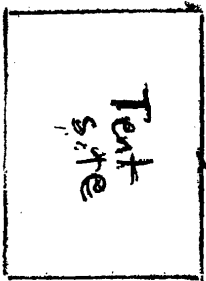
- 47' -

- 351' -

Parking

Back lot

distance  
to  
exit



Tent site

- 80' -

40'