

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

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

Permit No: 2013-00283	Issue Date:	CBL: 267 B001001
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Location of Construction: 155 RIVERSIDE ST (139 Riverside)	Owner Name: H J ASSOCIATES LTD	Owner Address: 155 RIVERSIDE ST PORTLAND, ME 04103	Phone:
Business Name: The Egg & I	Contractor Name: lessee	Contractor Address: Portland ME	Phone
Lessee/Buyer's Name Martin M. Mason	Phone: (207) 274-0981	Permit Type: Outdoor Seating	Zone: B4
Past Use: Restaurant; Friendly's	Proposed Use: Restaurant; The Egg & I	Permit Fee: \$80.00	Cost of Work: \$0.00
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	INSPECTION: Use Group: Type:
		Signature:	

**Proposed Project Description:**  
Private property Outside Dining for 7 (18' x 22')

*Ready for your sign off*

ACTIVITIES DISTRICT (P.A.D.)  
 Approved  Approved w/Conditions  Denied  
 Date:

Permit Taken By: bjs	Date App: 02/12/13
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- This permit application does not preclude the Applicant(s) from meeting applicable Federal Rules.
- Building permits do not include plumbing or electrical work.
- Building permits are void if work is not completed within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.

<input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Major <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM Date: <i>ok 2/12/13</i>	<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
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE		DATE	PHONE

3/13  
Per inspection, approved as submitted. CF



# Outdoor Dining 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.

<input checked="" type="checkbox"/> New Application for Outside Dining <input type="checkbox"/> Renewal Application for Outside Dining City Clerk signature for liquor license approval: _____ or Pending Council Date _____ Location/Address of Outdoor Seating: <u>155 Riverside</u>		
Total Square Footage of Proposed Seating Area <sup>1</sup> 396 Square Feet		Square Footage of Lot
Tax Assessor's Chart, Block & Lot Chart#      Block#      Lot#	Phone#: 207-274-0981	Owner: Martin M. Mason
Applicant * <b>must be owner or Lessee</b> Name: The EGG 102, LLC Address: 139 Riverside Street City, State & Zip: Portland, Maine 04103	Lessee/Buyer's Name: (If Applicable) Martin M. Mason Lessee	Annual Fee: \$80 Total Sq. Ft. 396  Sq. Ft. Fee: \$  Total Fee: \$
Current use: <u>Outdoor Dining</u> Business name: <u>The EGG and I Restaurants</u> Seating area dimensions: <u>18x22</u> How many chairs? <u>16</u> How many tables? <u>4</u> <input type="checkbox"/> Yes Alcohol is served. <input checked="" type="checkbox"/> No Alcohol being served.		
Who should we contact for the pre-inspection: <u>Martin M. Mason</u> Mailing address: <u>201 US Route One #146, Scarborough ME 04074</u> Phone: <u>207-274-0981</u>		

**RECEIVED**  
**FEB 12 2013**  
Dept. of Building Inspections  
City of Portland Maine

Please submit all of the information outlined in the Outdoor Dining Application Checklist. 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 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:

Date: 02/05/2013

Martin M. Mason

<sup>1</sup> In no instance shall the total square footage of dining area equal more than 10% of park space, unless the applicant receives a waiver from the Director of Parks and Recreation or his or her designee. **This is not a permit; you may not commence ANY work until the permit is issued.**

*Strengthening  
Building & Community for Life*  
**PORTLAND  
MAINE**  
Inspections Division  
389 Congress Street, RM. 315  
Portland, Maine 04101-3509

**THE EGG 102 LLC  
RE: 155 RIVERSIDE ST OSD PERMIT  
201 US ROUTE 1 #146  
SCARBOROUGH ME 04074**

**CITY OF PORTLAND**  
**DEPARTMENT OF PLANNING & URBAN DEVELOPMENT**

389 Congress Street  
Portland, Maine 04101

**RECEIPT OF FEES**

<b>Application No:</b> 201300283	<b>Applicant:</b> H J ASSOCIATES LTD
<b>Project Name:</b>	<b>Location:</b> 155 RIVERSIDE ST
<b>CBL:</b> 267 B001001	<b>Permit Type:</b>
<b>Invoice Date:</b> 02/12/2013	

<b>Previous Balance</b>	-	<b>Payment Received</b>	+	<b>Current Fees</b>	-	<b>Current Payment</b>	=	<b>Total Due</b>	<b>Payment Due Date</b>
\$0.00		\$0.00		\$80.00		\$80.00		\$0.00	On Receipt

**Previous Balance** **\$0.00**

Fee Description	Qty	Fee/Deposit Charge
Outside Seating Private Property	1	\$80.00
		\$80.00
<b>Total Current Fees:</b>	+	<b>\$80.00</b>
<b>Total Current Payments:</b>	-	<b>\$80.00</b>
<b>Amount Due Now:</b>		<b>\$0.00</b>

**CBL** 267 B001001  
**Bill to:** H J ASSOCIATES LTD  
155 RIVERSIDE ST  
PORTLAND, ME 04103

**Application No:** 201300283  
**Invoice Date:** 02/12/2013  
**Invoice No:** 40098  
**Total Amt Due:** \$0.00  
**Payment Amount:** \$80.00

Make checks payable to the *City of Portland*, ATTN: Inspections, 3rd Floor, 389 Congress Street, Portland, ME 04101.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/7/2013

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).

<b>PRODUCER</b> Chalmers Insurance Agency 100 Main Street PO Box 189 Bridgton ME 04009	<b>CONTACT NAME:</b> Lorna Richardson <b>PHONE (A/C, No, Ext):</b> (207) 647-3311 <b>FAX (A/C, No):</b> (207) 647-3003 <b>E-MAIL ADDRESS:</b> lrichardson@ChalmersInsuranceGroup.com																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A</td> <td>MMG Insurance Company</td> <td>15997</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A	MMG Insurance Company	15997	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:	
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INSURER D:																					
INSURER E:																					
INSURER F:																					
<b>INSURED</b> The Egg 102 LLC 155 Riverside Drive Portland ME 04103																					

**COVERAGES**      **CERTIFICATE NUMBER: CL132710116**      **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 WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b>			CF0705817	1/3/2013	1/3/2014	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b>						PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
	<b>UMBRELLA LIAB</b>						EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR						AGGREGATE \$
	<b>EXCESS LIAB</b>						\$
	<input type="checkbox"/> CLAIMS-MADE						\$
	DED						\$
	RETENTION \$						\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>						WC STATU-TORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 GL presently if for the renovations project - as soon as complete we will be insuring the actual restaurant exposure with general liability limit of \$2,000,000 aggregate \$1,000,000 occurrence

<b>CERTIFICATE HOLDER</b>  City of Portland Portland, ME	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE  L Richardson/LORNA <i>Lorna Richardson</i>



# OUTDOOR DINING PERMIT CHECKLIST

Permits are required for expanding food service establishments to the outside on City Property. The annual fee is \$80.00 plus \$2.00 per square foot of dining area on streets, sidewalks or other public ways and \$80.00 plus \$6.00 per square foot of dining area in city parks. For purposes of fee calculation, the area abutting the buildings which border Monument Square and extending ten (10) feet from the facade of said buildings shall be considered a sidewalk. The ten (10) foot area shall be measured from that portion of the facade that protrudes furthest into the sidewalk. The area beyond the ten (10) foot sidewalk shall be considered park space.

Outdoor dining is permitted year round under the permit; however, furniture must be removed in inclement weather to allow for sidewalk snow removal. **The permit must be renewed each year.**

All of the following information is required and must be submitted. You will also be required to fill out an Outdoor Dining Permit Application.

## A plot plan is required and must include:

- A drawing of the lot, where the building sits on the lot along with the lot and building dimensions
- The dimensional setback from the sidewalk to the building
- The location of the street, and if it's a corner lot, the intersecting streets
- The sidewalk along with its width and curbing location
- The location of the table and chair placement, including dimensions

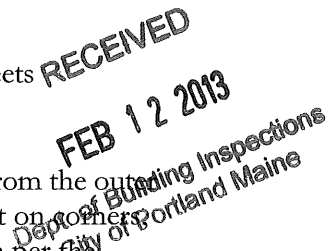
(NOTE: there must be a minimum of four feet of open sidewalk from the outer boundary of the seating area to the curb, and a minimum of five feet on the other side and egress from the building must be maintained free of obstruction per the building code and NFPA Life Safety Code).

## Additional Requirements:

- The permit holder is required to produce, at the time of submission, and maintain public liability insurance coverage in an amount of not less than four hundred thousand dollars (\$400,000) combined single limit for bodily injury, death and property damage, naming the City as an additional insured thereon.

## All permits for outdoor dining are issued subject to the following conditions:

- The tables and chairs must be placed within the permitted area on the sidewalk in such a manner as to allow the free and safe passage of pedestrian traffic. If the tables and chairs are moved and located outside of the permitted outdoor seating area, they must be relocated to within the permitted area. Failure to contain the tables and chairs to the permitted area may result in a reduced permitted area or a revocation of the permit.



NO ALCOHOL

- The permit holder is responsible for keeping the outdoor seating area clean. The sidewalk area where the tables and chairs are located must be kept neat and free from liter and debris.
- No food shall be prepared outside.
- If alcohol is to be served, the permit holder must notify the City's Business Licensing Office in room 203 of City Hall or by telephone at 874-8557 and obtain approval for the service of alcohol outdoors. Additionally, State law requires that any outdoor area serving alcohol be segregated from the rest of the public.
- All tables and chairs shall be removed prior to a predicted snowfall and while any snow or ice exists within the designated outdoor seating area or within four feet from the boundaries thereof. The City will not be responsible for damage to any tables, chairs or other property that is not properly removed when the City is engaged in sidewalk maintenance activities.
- The permit holder shall comply with all applicable rules and regulations implemented by the city regarding outdoor dining.

**Failure to comply with any of the above conditions will result in revocation or non-renewal of the permit.**

I/We fully understand that the City of Portland, its agents, officers and employees accept no responsibility and will not be liable for any injury, harm or damage to my/our person or property arising out of the establishment's occupancy of the sidewalk or park space. To the fullest extent permitted by law, I/We do hereby agree to assume all risk of injury, harm or damage to my/our person or property (including but not limited to all risk of injury, harm or damage to my/our property cause by the negligence of the City of Portland, its agents, officers or employees) arising out of the establishment's occupancy of the sidewalk or park space. I/We hereby agree, to the fullest extent permitted by law, to defend, indemnify and hold harmless the City of Portland, its agents, officers and employees, from and against all claims, damages, losses and expenses, just or unjust, including, but not limited to costs of defense and attorney's fees, arising out of the establishment's occupancy of the sidewalk or park space, provided that any such claims, damage, loss or expense (1) is attributable to bodily injury, sickness, disease, or death, or to injury to or destruction of tangible property including the loss of use there from, and (2) is caused in whole or in part by any negligent act or omission of the establishment, anyone directly or indirectly employed by it, or anyone for whose act it may be liable.

Signed and acknowledged: [Signature] Date: 02/09/13  
 Printed name MARY M. MASON  
 Establishment THE FERR & J RESTAURANTS  
 Location 139 RIVERSIDE STREET, PORTLAND ME. 04103



Buloina Inspections@portlandmaine.gov

Att. Bras