Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read Application And

Notes, If Any, Attached	PERMIT	PERMITMISSIGED
This is to certify that	ner	
has permission toOutside Dining = 10 Chairs &	bles on vate pr 12 Cha	3 Tables on City Prop 123 sq ft city propert
AT _140 MARGINAL WAY		40 - 400001
provided that the person or persons, to the provisions of the Statutes of M the construction, maintenance and us this department.	age and of the grant ces	of the City of Portland regulating
Apply to Public Works for street line give and grade if nature of work requires such information.	re nd writt permissi procure fo this but a or proper hereof i the or oth sed-in. 2	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		<u> </u>
Fire Dept.		
Health Dept.		(/\ \ \
Appeal Board		THA
Other Department Name		Director - Building & Inspection Services
	TY FOR REMOVING THIS CA	RD

Business Name: Contractor Name: Contractor Address: Phone	City of Portland, Maine - B	uilding or Use	Permit Application	n Permit No:	Issue Date:	CBL:		
Business Name: Contractor Name: Contractor Address: Phone	389 Congress Street, 04101 Te	l: (207) 874-8703	, Fax: (207) 874-871	6 10-0639		442 A0060	001	
Part Dec Contractor Name	Location of Construction:	Owner Name:		Owner Address:		Phone:		
Miss Portland Diner Part Use:	140 MARGINAL WAY	TOMAKS LL	С	116 ARMOUR R	D			
Past Use: Commercial: "Miss Portland Diner" & 3 Tables on private prop - 12 Chairs & 3 Tables on City Prop 123 sql ft city property Proposed Project Description: Outside Dining: - 10 Chairs & 3 Tables on private prop - 12 Chairs & 3 Tables on City Prop 123 sq ft city property Proposed Project Description: Outside Dining: - 10 Chairs & 3 Tables on private prop - 12 Chairs & 3 Tables on City Prop 123 sq ft city property Proposed Project Description: Outside Dining: - 10 Chairs & 3 Tables on private prop - 12 Chairs & 3 Signature: Date: Proposed Project Description: Outside Dining: - 10 Chairs & 3 Signature: S	Business Name:	Contractor Name	:	Contractor Address:		Phone		
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Tables on City Prop 123 sq ft city property PRESTRIAN ACTIVITIES DISTRICT (P.A.) Action: Approved Approved w/Conditions Denied Signature: Date: Date: Date: Applied For: Date: Date: Date: Applied For: Date: Date: Date: Date: Date: Date: Date: Date: Special Zone or Reviews Zoning Appreval Conditional Usc Preservation Not in District or Landrice 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. Flood Zone Conditional Usc Requires Review State Plan Approved Approved Subdivision Interpretation Approved Approved w/Conditions PERMIT ISSUED Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date:	• •	shlee on nrivete nro	n . 12 Chairs & 2		c:	A		
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Signature: Date D	on any a top the seq is only	E-ARALA		EDECIMAN ACT				
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Permit Taken By:				Signature:		Date [.]		
Interpretation Denied De	Permit Taken Rv. Dat	e Applied For						
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. Size Plan				Zoning	g Approvat			
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Site Plan				☐ Variana		Not in District or	- Landen	
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	F							
	SIGNATURE OF APPLICANT		ADDRES	S	DATE	PHONE		
AND								
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE DATE PHONE	RESPONSIBLE PERSON IN CHARGE (DE WORK TITLE			DATE	PHONE		



CITY OF PORTLAND, MAINE Department of Building Inspections

Original Receipt

	_		6.7	20 10
Received from	Jon	iaks		
Location of Work		10 m	usioal t	ms Brt Dine
Cost of Construction	\$		Building Fee	• •
Permit Fee	. \$		_ Site Fee:	14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
	Certif	ficate of O	ccupancy Fee:	· · · · · · · · · · · · · · · · · · ·
			Total:	230
Building (II) Plun	nibing (IS)	_ Electric		
Other		·		1 (- ST
CBL: 142-1-	6		. ,	
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No work is Please kee			• • • • • • • • • • • • • • • • • • •	ilt issued. ur records.
Taken by:	1	,	,	
WHITE - Applicant's Co			•	
YELLOW - Office Copy PINK - Permit Copy	! : :			a. (

City of Portland, Maine - Bui 389 Congress Street, 04101 Tel:	_	874-8716	Permit No: 10-0639	Date Applied For: 06/07/2010	CBL: 442 A006001
ocation of Construction:	Owner Name:		wner Address:		Phone:
140 MARGINAL WAY	TOMAKS LLC		116 ARMOUR RE)	
Business Name:	Contractor Name: Miss Portland Diner		ontractor Address:		Phone
essee/Buyer's Name	Phone:	1	ermit Type: Outdoor Seating		-
Proposed Use:		Proposed	Project Description:		
Commercial " Miss Portland Diner" 3 Tables on private prop - 12 Chairs sq ft city property	_			rs & 3 Tables on pr 123 sq ft city prope	ivate prop - 12 Chairs rty
Dept: Zoning Status: . Note:	Approved	Reviewer:	Marge Schmucka	l Approval I	Oate: 07/01/2010 Ok to Issue: ✓
Dept: Building Status: . Note:	Approved with Conditions	Reviewer:	Tammy Munson	Approval I	Oate: 07/06/2010 Ok to Issue: ✓
1) The outside dining permit is app THIS PERMIT MUST BE REN		nt the inspec	tion and stated on	the permit, and mus	st be kept on site.
2) The tables and chairs must not b	lock any means of egress of ar	ny building,	even during storag	ge.	
 This permit approves outside sea Clerk. 	ating only. Any alcohol or ent	ertainment i	n this space requir	es licensing approv	als from the City

Co	m	me	n	ts:	
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7/1/2010-mes: gave back to Lannie

PERMIT ISSUED

JUL - 6 2010

City of Portland

CITY GLERK



Outdoor Dining Permit Application 21

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.

☐ New Application for Out	side Dining						
City Clerk signature for liquor license	approval: Ok 101 5 · 2	8.10 or Pending Council Date					
Location/Address of Outdoor Seating:							
Total Square Footage of Proposed Seating							
(9 m x 14 m= 126 sq pr) CHY A		00 se pt					
Tax Assessor's Chart, Block & Lot	Phone#:	Owner:					
Chart# Block# Lot#	917 951 4109	Owner: TOM MANNING					
Applicant *must be owner of Lessee	Lessee/Buyer's Name:	Annual Fee: \$80					
Name: TOM MAUNING	(If Applicable)	Total Sq. Ft.					
Address 111 DEMOUL RU	ļ	{					
N.W. HAWHAM	1	Sq. Ft. Fee: \$					
City, State & Zip: MAHWAH, N.T		Total Fee: \$					
	NC ONLY IN SPI						
Business name: TOMAKSLIC	08A: MISS PO	ATLIBUD DINER					
Seating area dimensions: ON CITY PROPERTY 9 M X 14 ET = 176 52 FT How many chair? 16 How many tables?							
How many chairs? How many tables?							
Yes Alcohol is served.	-						
☐ No Alcohol being served.							
Who should we contact for the pre-insp	ection: Tom Mi	שונשעו ב					
Mailing address: 16 ALNOW MANWIN N. T Phone: 917 951 410 9							
Mailing address:	TANAMAN N. A Pho	ne: 11 101 710					

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.

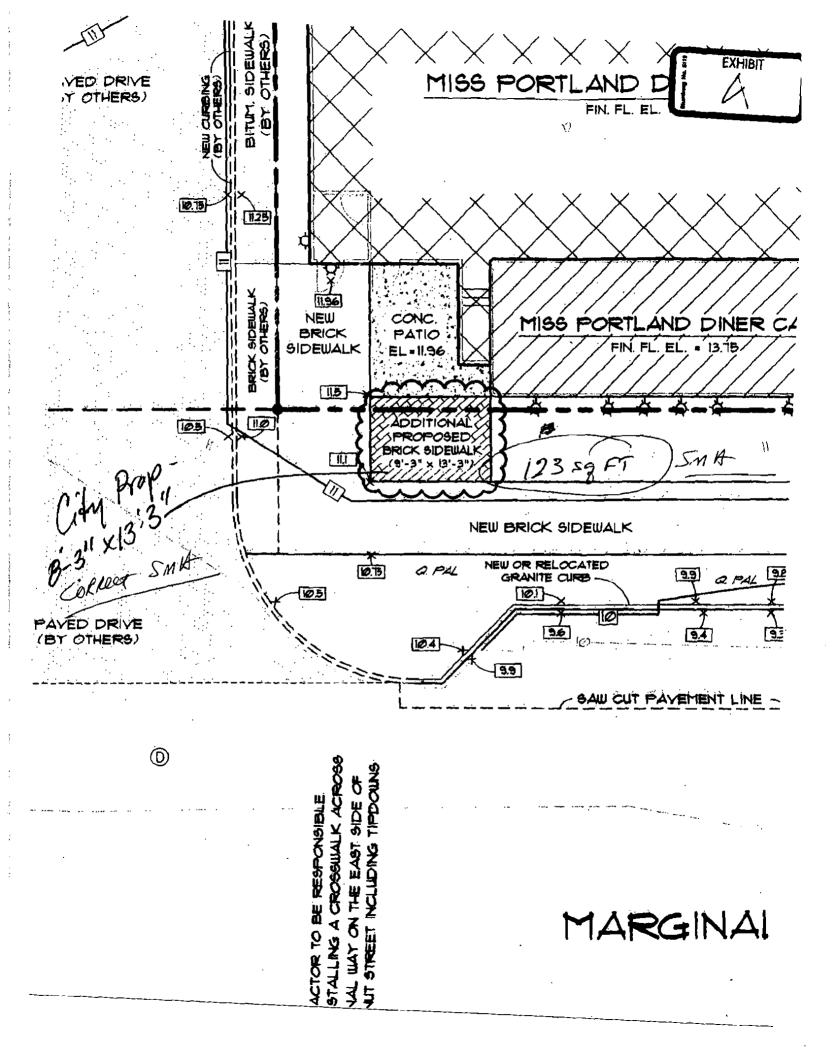
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 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 Applicate: Date: 5/06/2010

¹ 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.

142-A-6 14635





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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:

DRAWINGS ON FILE WITH CITY

- ☐ 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 corners, and egress from the building must be maintained free of obstruction per the building code and NFPA Life Safety Code).

Additional Requirements:

Mounded

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.

- 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.
- I' 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: Menny	Date: 5/25/9010
Printed name 75M MANNING	_
Establishment MISS POLTUBIND DINER	
Location 140 MARCHURL WAY	
postumen, ME ourse	

ACORD CERTIFIC	ATE OF L	ABILITY	INSURA	NCE	DATE (MM/DD/YYYY) 05/08/2009	
PRODUCER (207)797-4900 FAX (207)874-4069 Constal Insurance Group LLC 558 Brighton Avenue		HOLDER.	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.			
Portland, MR 04102						
R. Christopher Maloney			VFFORDING COV		NAIC # 25615	
INSURED TOMAKS, LLC DRA MISS PORTLAND		INSURER A: CI	INSURER A: Charter Oak Fire Ins Co			
C/O THOMAS MANNING						
116 AMOUR ROAD		INSURER C:		····		
MAHWAB, NJ 07430		INSURER D:				
COVERAGES		INSURER E:				
THE POLICIES OF INSURANCE LISTED BELOW HAVE IS ANY REQUIREMENT, TERM OR CONDITION OF ANY COMMAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BE	ONTRACT OR OTHER D OLICIES DESCRIBED HI	OCUMENT WITH R EREIN IS SUBJECT CLAIMS.	RESPECT TO WHICH TO ALL THE TERM	THIS CERTIFICATE MAY! IS, EXCLUSIONS AND CON	BE ISSUED OR	
INSR ADD'U TYPE OF INSURANCE P	OLICY NUMBER		POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMIT	8	
GENERAL LIABILITY	6807103M016	19/15/2909	10/15/2010	EACH OCCURRENCE	1,000,000	
COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR			}	PREMISES (Ea occurrence)	\$ 300,000	
CLAIMS MADE X OCCUR			}	MED EXP (Any one person)	5 5,000 5 1,000,000	
\ ^ \ ^	į		Ì	PERSONAL & ADV INJURY GENERAL AGGREGATE	s 1,000,000 s 2,000,000	
GEN'L AGGREGATE LIMIT APPLIES PER:			ļ	PRODUCTS - COMP/OP AGG	3 2,000,000	
POLICY PRO- JECT LOC	•		ļ	THOUSE COMMISSION	2,000,000	
AUTOMOBILE LIABILITY ANY AUTO				COMBINED SINGLE LIMIT (Ea accident)	5	
ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	s	
HIRED AUTOS NON-OWNED AUTOS			}	BODILY INJURY (Per accident)	\$	
				PROPERTY DAMAGE (Per accident)	s	
GARAGE LIABILITY	Ì			AUTO ONLY - EA ACCIDENT	<u> </u>	
ANYAUTO			{	OTHER THAN EA ACC	<u>s</u>	
		 		AGG	\$	
EXCESS / UMBRELLA LIABILITY			}	EACH OCCURRENCE	\$	
OCCUR CLAIMS MADE			}	AGGREGATE	<u> </u>	
DEDUCTIBLE	ļ		(s	
RETENTION \$	ļ		{		• • • • • • • • • • • • • • • • • • •	
WORKERS COMPENSATION				WC STATU- TORY LIMITS ER	·	
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE	j		}	E.L. EACH ACCIDENT	s -	
OFFICER/MEMBER EXCLUDED?	Ì		l	E.L. DISEASE - EA EMPLOYEE	\$	
If yes, describe under SPECIAL PROVISIONS below			<u> </u>	E.L. DISEASE - POLICY LIMIT	\$	
OTHER						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLU-	SIONS ADDED BY ENDORSE					
CENTIFICATE TOLDER		CANCELLAT		SER DALLOUS DE CAUSE :	DECORE THE CYPIC (TO)	
		ſ		SED POLICIES DE CANCELLED IR WILL ENDEAVOR TO MAIL		
				R WALL ENDEAVOR TO MAIL R NAMED TO THE LEFT, BUT FA		

City of Portland as additional insured 389 Congress Street Portland, NE 04101 ACORD 25 (2009/01) IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR

REPRESENTATIVES.
AUTHORIZED REPRESENTATIVE

