				PERMIT IS	SSUED
City of Portland, Main	•	• •		it No. Issue Date:	CIL:
389 Congress Street, 0410	<u></u>	, Fax: (207) 874-871			2005 443 A001001
Location of Construction: 1000 Preble St	Owner Name:	nd	Owner A	1 1	Phone:
Business Name:	Contractor Name	City Of Portland		tor Address: TY OF POR	A Phone
Dusiness Ivanie.	Contractor Name	•	Contract	tor Audresast 1 Or 1 Cit	VILA: Rome
Lessee/Buyer's Name	Phone:		Permit T		Zone:
			<u> </u>	al Events	FO
Past Use: Proposed Use:		1 NT (' 177')	Permit I		CEO District:
Park	Foundation Ev	the National Kidney	FIRE D	\$30.00 \$30.00	D 1 1 EPECTION:
	_		FIRE D.	Approved	e Group: U Type: Ten
	1 to octob	~ 30, 2005		Denied	-
		•			IBC 2003
Proposed Project Description:			1		
Tent for the National Kidne	y Foundation Event		Signatur		nature:
			PEDEST	TRIAN ACTIVITIES DISTRIC	T (P.A.D.)
			Action:	Approved Approve	d w/Conditions Denied
			Signatur	e:	Date:
Permit Taken By:	Date Applied For:	Zoning Approval			
dmartin	02/27/2005	Special Zone or Revi	ews	Zoning Appeal	Historic Preservation
 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. 		Shoreland	☐ Variance		Not in District or Landma
		☐ Wetland ☐ Miscellaneous		Miscellaneous	Does Not Require Review
3. 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		Flood Zone	Zone Conditional Use		Requires Review
		Subdivision Interpretation		Interpretation	Approved
		Site Plan		Approved	Approved w/Conditions
		Maj Minor MM		Denied	Denied Denied
		Date: 23/0		Date:	Date:
		7111	•		
I hereby certify that I am the I have been authorized by the jurisdiction. In addition, if a shall have the authority to en such permit.	e owner to make this appli permit for work described	cation as his authorized in the application is i	he propos d agent a ssued, I c	and I agree to conform to alcertify that the code official	Il applicable laws of this l's authorized representative
SIGNATURE OF APPLICANT		ADDRES	S	DATE	PHONE
RESPONSIBLE PERSON IN CHA	ARGE OF WORK, TITLE			DATE	PHONE

pplied For: CBL:	
9/2005 443 A00	1001
Phone:	
Phone	
Approval Date: 09/30 Ok to Issue:)/2005 ✓
* *	D/2005 ✓
	Ok to Issue:

Submit Application to Room 315, Portland City Hall, 389 Congress Street, Portland, ME 04101 207-874-8703; fax 207-874-8716. Please allow 10 Business Days for processing.

Tent 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.

Date of Tent setup: Oct. 30, 2005 20X30 Canopy	Date of 1	ent breakdown: Oc	1.30, 2005	
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# ムイラ A 〇〇I	Property Owner: City of portland		Telephone:	
Lessee/Buyer's Name (If Applicable)	Applicant name, add See below	dress & telephone:	Fee: \$ 30.00	
 Certificate of Flammability Letter of approval from propert Musgrave at Parks & Recreation Plot Plan showing the following: Property lines Parking Existing Building Tent locations, in If the City is the property owner Insured. Minimum amount of contractions. 	n @ 874-8793 : locations ncluding dimensions , Certificate of Insura	of all tents, exits an	d entrances in tent.	
Whom should we contact when the pe Mailing address: National Kidney Foun	dation of Maine, PO B	•	aine 04104	
PHONE: _772-7270	ne permit is ready. Yo before starting any v	ou must corne of a	WEDDIG INSPECTION WE PERMIT	

Form Later well of 30, trust bid Ney 2005 re Subgra riaation, ^{II}

1-25-2005 P. Navge

From:

Ted Musgrave Tammy Atwood

To: Subject:

Re: Fw: Kidney Walk - October 30, 2005

hi tammy.....

yes i got your applications... (use of city prop..... & tent permit ap).

i made changes to both (changes in parenthasis)..... pls review... and get back to me with answers (like - what time does walk start?), etc.

i have cc'ed the inspection dept. so that they may print off the tent permit application... and know that i have you folks penciled in for the location (and have the ok for a tent there) on October 30.

i will also (today) put a map in the mail to you (and interoffice a copy) to inspections (c/o marge schmuckal) so that they have a map of the area designated for the tent. the tent (i presume) is going up that morning... and coming down that later

if u are serving refreshments, then you'll need to complete & return the attached temp food service license ap to city clerk's office (i've cced brandi & amanda on this e-mail as well). thanks.

>>> "Tammy Atwood" <tammy@kidneyme.org> 1/25/2005 1:36:33 PM >>> Ted - did you get the permits I sent?

Tammy M. Atwood Executive Director National Kidney Foundation of Maine 630 Congress Street/PO Box 1134 Portland, Maine 04104 207-772-7270 Fax 207-772-4202 www.kidneyme.org

---- Original Message ----

From: "Ted Musgrave" <TVM@portlandmaine.gov>

To: <tammy@kidneyme.org>

Sent: Monday, January 24, 2005 12:39 PM

Subject: Re: Fw: Kidney Walk - Change Location and Time

hi tam.....

yes, you can make the change(s).... to preble street grass area (aka back cove park) and 12-4.
what time would walkers get on the walkway.....?

pls c attached application and return. (just in case u don't have it from

my last e-mail)

thanks.

>>> "Tammy Atwood" < tammy@kidneyme.org> 1/24/2005 8:37:36 AM >>>

Ted - this came back to me so I am resending.

---- Original Message ----

From: Tammy Atwood To: Ted Musgrave

Sent: Tuesday, January 18, 2005 3:30 PM

Subject: Kidney Walk - Change Location and Time

Ted - we currently have Payson Park reserved for Oct. 30, 2005, can we change that to Back Cove, same date? Also, can we change to the time to 12 - 4? Thank you.

(or are inherently noninflammable) and were supplied to:

MPORTAN Tertificate Flame T DOCUMENTED Resistance

REGISTRATION APPLICATION NUMBER

F121.4

ISSUED BY

HANUFACTURERS OF THE FINISHED EVANSVILLE, INDIANA 47725

> Date of Manufacture Order Number 02/25/03

This is to certify that the materials described have been flame-retardant treated TENT PRODUCTS DESCRIBED HEREIN

HANDYMAN EQUIPMENT RENTAL #136 357 RIVERSIDE ST COMPANY INC PORTLAND NE 041031038

Certification is hereby made that:

chemical and that the application of said chemical was done in conformance with California The articles described on this Certificate have been treated with a flame-retardant approved Fire Marshal Code, equal to exceeds NFPA 701, CPAI 84, ULC 109 The method of the FR chemical application is:

Social w

(1) O165 110

Description of item certified:

AP CPY TOP 20W X 30 W. Y W

JOHN BOYLE STATESYILLE NO Washing And Is Effective For The Life Of The Fabric

Name of Applicator of Flame Resistant Finish

Signed

Flame Retardant Process Used Will Not Be Removed By

TENT DEPARTMENT - ANCHOR WIDUSTRIES INC

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PAGE. 2

1/25/05 sent to To I email to forward

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Tent Permit Application

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Location/Address of Construction: Back	Cove - Portland			
Date of Tent setup: Oct. 30, 2005 20X30 Canopy	Date of Tent break	Date of Tent breakdown: Oct.30, 2005		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Property Owner:	Telephone:		
Lessee/Buyer's Name (If Applicable)	Applicant name, address & tel	ephone: Fee: \$ 30.00		
The following must be included as sure: 1. Certificate of Fiammability 2. Letter of approval from proper Musgrave at Parks & Recreation 3. Plot Plan showing the following i. Property lines II. Parking iii. Existing Bullding Iv. Tent locations, ii. 4. If the City is the property awner Minimum amount of coverage	rty owner. If the City is the own on @ 874-8793 g: g locations ncluding dimensions of all tent or, Certificate of Insurance listing	s, exits and entrances In tent.		
Whom should we contact when the p Matting address: National Kidney Four PHONE: _772-7270_ We will contact you by phone when t and review the requirements with stat ISSUED AND A \$100.00 FINE LEVIED IF	ndation of Maine, PO Box 1134, Po the permit is ready. You must c	ortland, Maine 04104 come in and pick up the permit		

AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN

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.

i i			
Signature of applicant: Tammy Alwood Da	rte: 01/	25/05	

This is NOT a permit; you may not commence ANY work until the permit is issued.

need cheek for \$30. " Mil did de request