

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

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

|                       |                         |                     |
|-----------------------|-------------------------|---------------------|
| Permit No:<br>04-0939 | Issue Date:<br>07/20/04 | CBL:<br>443 A001001 |
|-----------------------|-------------------------|---------------------|

|  |                                  |                                   |                     |
|--|----------------------------------|-----------------------------------|---------------------|
| Location of Construction:<br><b>1000 Preble St</b> | Owner Name:<br>City Of Portland  | Owner Address:<br>389 Congress St | Phone:<br>874-8793  |
| Business Name:                                     | National Kidney Foundation Maine | PO Box 1134 Portland              | Phone<br>2077727270 |
| Lessee/Buyer's Name                                |                                  | Permit Type:<br>Tents             | Zone:<br>R05        |

|  |   |   |   |                    |
|--|---|---|---|--------------------|
| Past Use:<br>Back Cove park  | Proposed Use:<br>Back Cove park w/20'x30' canopy to be set up 10/24/04 removed 10/24/04 | Permit Fee:<br>\$30.00  | Cost of Work:<br>\$0.00   | CEO District:<br>1 |
| Proposed Project Description:<br>20'x30' canopy to be set up 10/24/04 removed 10/24/04 |   | FIRE DEPT:<br><input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Denied   | INSPECTION:<br>Use Group: Tents<br>Signature: [Signature] 7/20/04 |                    |
|  |   | PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)<br>Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied<br>Signature: _____ Date: _____ |   |                    |

|                             |                                 |                        |  |  |
|-----------------------------|---------------------------------|------------------------|--|--|
| Permit Taken By:<br>jodinea | Date Applied For:<br>07/08/2004 | <b>Zoning Approval</b> |  |  |
|-----------------------------|---------------------------------|------------------------|--|--|

|    | Special Zone or Reviews   | Zoning Appeal                            | Historic Preservation                                |
|----|---|--|--|
| 1. | <input type="checkbox"/> Shoreland  | <input type="checkbox"/> Variance        | <input type="checkbox"/> Not in District or Landmark |
| 2. | <input type="checkbox"/> Wetland  | <input type="checkbox"/> Miscellaneous   | <input type="checkbox"/> Does Not Require Review     |
| 3. | <input type="checkbox"/> Flood Zone   | <input type="checkbox"/> Conditional Use | <input type="checkbox"/> Requires Review             |
|    | <input type="checkbox"/> Subdivision  | <input type="checkbox"/> Interpretation  | <input type="checkbox"/> Approved                    |
|    | <input type="checkbox"/> Site Plan  | <input type="checkbox"/> Approved        | <input type="checkbox"/> Approved w/Conditions       |
|    | Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> | <input type="checkbox"/> Denied          | <input type="checkbox"/> Denied                      |
|    | Date: [Signature] 7/9/04  | 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

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

Please Read  
Application And  
Notes, If Any,  
Attached

BUILDING DEPARTMENT

## PERMIT

Permit Number: 040939

PERMIT ISSUED  
JUL 27 2004  
CITY OF PORTLAND

This is to certify that City Of Portland / National Key Foundation

has permission to 20'x30' canopy to be set up 10/27/04 removed 10/27/04

AT 1000 Preble St

443 A001001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of this 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 work on permit must be completed before this building or part thereof is occupied or closed-in. 24 HOUR 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. [Signature]

Health Dept. \_\_\_\_\_

Appeal Board \_\_\_\_\_

Other \_\_\_\_\_

Department Name

[Signature]  
Director, Building & Inspection Services

**PENALTY FOR REMOVING THIS CARD**

NATIONAL KIDNEY FOUNDATION OF MAINE

Fax Transmittal Form

TO: Name: *City of Portland*  
 Organization Name/Dept: CC:  
 Phone number: *874-8714*  
 Fax number: *874-8714*

FROM: Tammy Arwood  
 Phone: (207) 772-7270  
 Fax: (207) 772-4202  
 Email: *tmankfm@maine.nkf.com TAMMY@KIDNEYME.ORG*

Urgent  
 For Review  
 Please Comment  
 Please Reply

Date sent: *7/22/04*  
 Time sent: *11:15AM*  
 Number of pages including cover page: *2*

Message: *RE: TENT PERMIT FOR 10/24/04 - BACK COVE, PM  
 KIDNEY WALK*

*Following is Flame Resistance Certificate.*



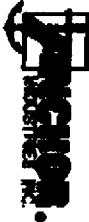
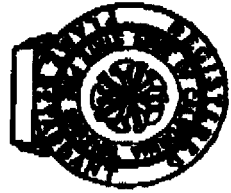
630 Congress Street  
 Portland, Maine 04101

Phone: (207) 772-7270  
 Fax: (207) 772-4202  
 Email: *tmankfm@maine.nkf.com*

# IMPORTANT DOCUMENT Certificate of Flame Resistance

REGISTRATION  
APPLICATION  
NUMBER

FI214



ISSUED BY

EVANSVILLE, INDIANA 47725  
MANUFACTURERS OF THE FINISHED  
TENT PRODUCTS DESCRIBED HEREIN

Date of Manufacture

02/25/03

Order Number

365161

This is to certify that the materials described have been flame-retardant treated (or are inherently nonflammable) and were supplied to:

424800  
HANDYMAN EQUIPMENT RENTAL #136  
COMPANY INC  
357 RIVERSIDE ST  
PORTLAND ME 041031038

Certification is hereby made that:

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

|                                |                             |
|--------------------------------|-----------------------------|
| Serial #                       | 8115910 (1)                 |
| Description of item certified: | A P OPY TOP 20W X 30 VL Y W |

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

JOHN BOYLE STATESVILLE NC  
Name of Applicator of Flame Retardant Finish

Signed:

*James D. Thueser*

TENT DEPARTMENT - ANCHOR INDUSTRIES INC.

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

|   |                                      |  |
|---|--------------------------------------|--|
| Location/Address of Construction: Back Cove - Portland                                |                                      |  |
| Date of Tent setup: Oct. <b>24, 2004</b>  |                                      | Date of Tent breakdown: Oct. <b>24, 2004</b> |
| <u>20X30 Canopy</u>   |                                      |  |
| Tax Assessor's Chart, Block & Lot<br>Chart# <u>443</u> Block# <u>A</u> Lot# <u>01</u> | Property Owner:                      | Telephone:                                   |
| Lessee/Buyer's Name (If Applicable)   | Applicant name, address & telephone: | Fee: \$ 30.00                                |

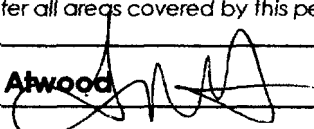
**The following must be included as submissions:**

1. Certificate of Flammability
2. Letter of approval from property owner. If the City is the owner, please contact Ted Musgrave at Parks & Recreation @ 874-8793
3. Plot Plan showing the following:
  - i. Property lines
  - ii. Parking
  - iii. Existing Building locations
  - iv. Tent locations, *including dimensions of all tents*, exits and entrances in tent.
4. If the City is the property owner, Certificate of Insurance listing the City as Additional Insured. Minimum amount of coverage is \$400,000.00

\_\_\_\_\_

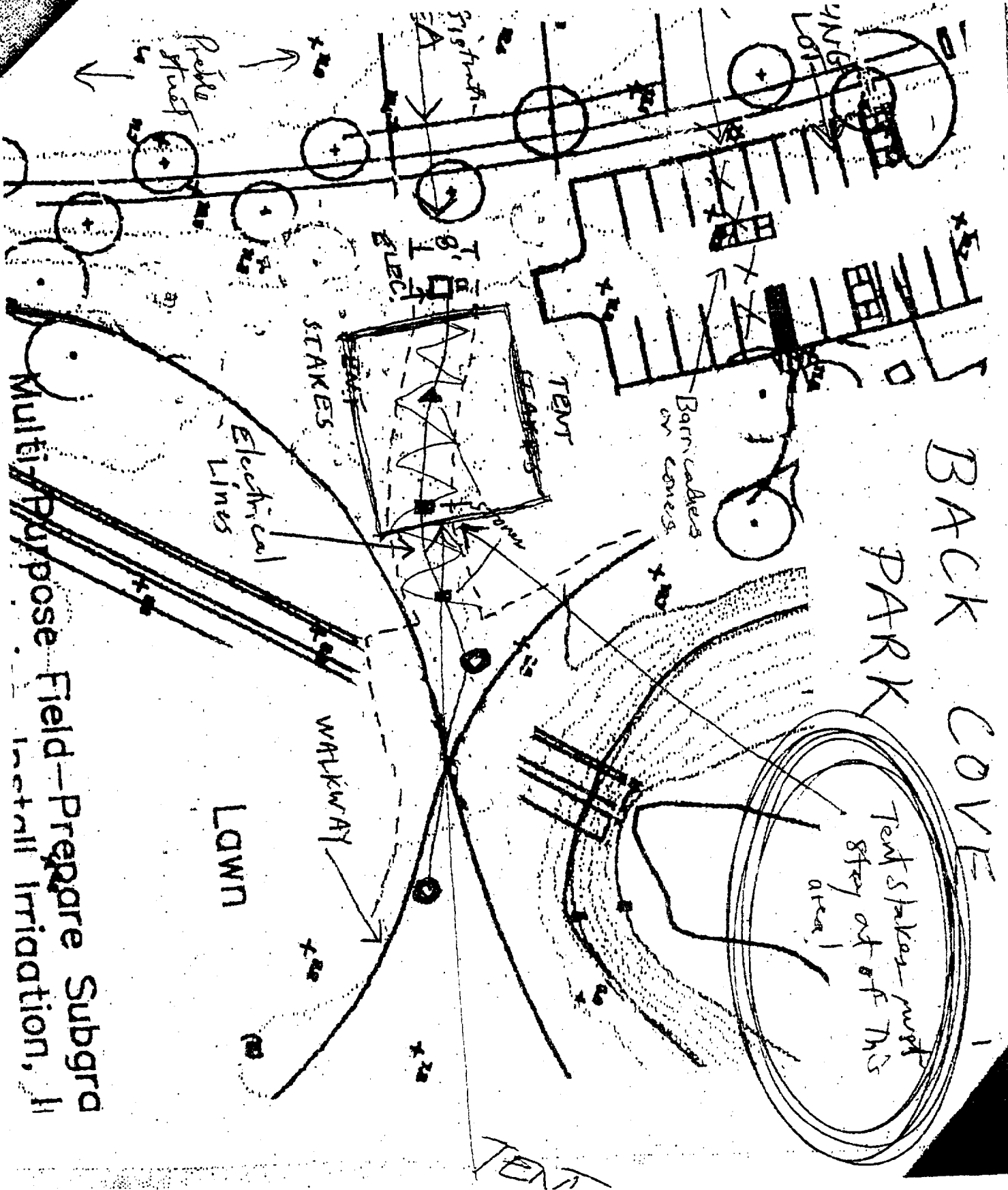
We will contact you by phone when the permit is ready. **You must come in and pick up the permit and review the requirements with staff before starting any work. A STOP WORK ORDER WILL BE ISSUED AND A \$100.00 FINE LEVIED IF ANY WORK STARTS BEFORE THE PERMIT IS PICKED UP.**

for all areas covered by this pe

|   |                       |
|---|-----------------------|
| Signature of applicant: <b>Tammy Atwood</b>  | Date: <b>04/15/04</b> |
|---|-----------------------|

TB - TAMMY  
2-4202

1 page map



Multiz-Purpose Field-Prepare Subgra  
Install Irrigation, II

BACK COVER  
PARK