

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING DEPARTMENT

PERMIT

Please Read Application And Notes, If Any, Attached

PERMIT ISSUED

Permit Number: 090255
APR 10 2009

CITY OF PORTLAND

This is to certify that ALI ABDUL & HABIBO ADAMS, DBA: JTS

has permission to install a sign on the front of the building

AT 44 WASHINGTON AVE City of Portland ID: 013-E012001

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statutes of Maine 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 written permission procured before this building or part thereof is lath or other work is used-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. _____

Health Dept. _____

Appeal Board _____

Other _____

Department Name

James Frank 4/10/09
Director of Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

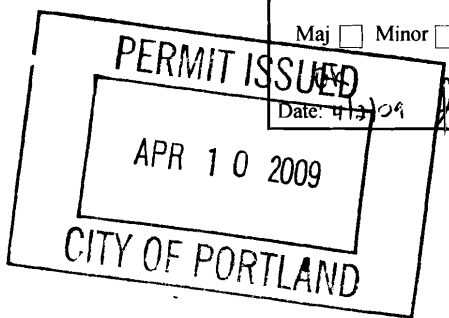
389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716

Permit No: 09-0255	Issue Date:	CBL: 013 E012001
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Location of Construction: 44 WASHINGTON AVE	Owner Name: ALI ABDUL & HABIBO ADAM J	Owner Address: 46 WASHINGTON AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-2b

Past Use: Commercial Grocery Store	Proposed Use: Commercial Grocery Store - install a sign on the front of the building	Permit Fee: \$58.00	Cost of Work: \$58.00	CEO District: 1
Proposed Project Description: install a sign on the front of the building <i>legal use of building - grocery store - 1 div</i>		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>M/A</i>	INSPECTION: Use Group: <i>M</i> Type: <i>Sign</i> <i>DBC-2003</i> Signature: <i>AMB 4/10/09</i>	
		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: 03/31/2009	Zoning Approval		
1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. 2. Building permits do not include plumbing, septic or electrical work. 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..	Special Zone or Reviews <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 type="checkbox"/> MM <input type="checkbox"/>	Zoning Appeal <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	Historic Preservation <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: <i>4/10/09</i> <i>AMB</i>
	Date: _____	Date: _____	Date: _____	Date: <i>4/10/09</i> <i>AMB</i>



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

City of Portland, Maine - Building or Use Permit

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

Permit No: 09-0255	Date Applied For: 03/31/2009	CBL: 013 E012001
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Location of Construction: 44 WASHINGTON AVE	Owner Name: ALI ABDUL & HABIBO ADAM J	Owner Address: 46 WASHINGTON AVE	Phone:
Business Name:	Contractor Name:	Contractor Address:	Phone:
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Retail Grocery Store - Same, install a sign on the front of the building - "Washington Avenue Discount Halal Market"	Proposed Project Description: install a sign on the front of the building
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Dept: Zoning	Status: Approved	Reviewer: Ann Machado	Approval Date: 04/02/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 04/10/2009
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.			

Comments:
4/2/2009-amachado: Need certificate of liability. Jeanie is going to the site today and will talk to the owner about it.
4/7/2009-jmb: Need to get the insurance liability.....all the phone # given do not connect. Stopped by the store on 4/7 and Adul was not there, will stop by on 4/9
4/9/2009-jmb: Received the liability insurance, ok to issue

Signage/Awning 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: <u>46 WASHINGTON Ave PORTLAND ME 04101</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>3</u> Block# <u>E</u> Lot# <u>12</u>	Owner: <u>ABDUL ALI</u> <u>46 WASHINGTON Ave PORTLAND ME 04101</u>	Telephone: <u>899 5818</u>
Lessee/Buyer's Name (If Applicable)	Contractor name, address & telephone: <u>ME 04101</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ _____
Who should we contact when the permit is ready: <u>ABDUL ALI</u> phone: <u>899 5818</u> 899 5818		
Tenant/allocated building space frontage (feet): Length: <u>35'</u> Height: <u>35'</u> Lot Frontage (feet) <u>45'</u> Single Tenant or Multi Tenant Lot <u>MULTI TENANT LOT</u> Current Specific use: <u>GROCERY STORE & dwelling</u> <u>2nd FL.</u> If vacant, what was prior use: _____ Proposed Use: _____		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: _____ Height from grade: <u>8'</u> Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions proposed: <u>8' x 42" 14 sq FT</u>		
Proposed awning? Yes ___ No ___ Is awning backlit? Yes ___ No ___ Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes ___ No ___ If yes, total s.f. of panels w/communications, message, trademark or symbol: _____ s.f.		
Information on existing and previously permitted sign(s): Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No ___ Dimensions: _____ Awning? Yes ___ No ___ Sq. ft. area of awning w/communication: _____		
A site sketch and building sketch showing exactly where existing and new signage is located must be provided. Sketches and/or pictures of proposed signage and existing building are also required.		

\$ 50
 2 x 14 + 30 = 50

Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so may 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.

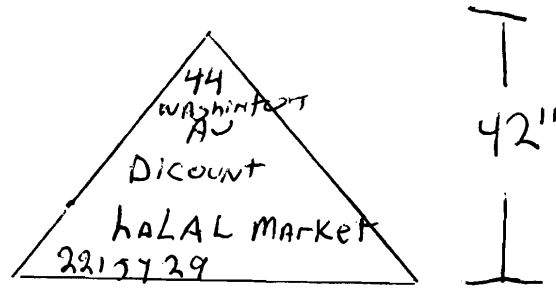
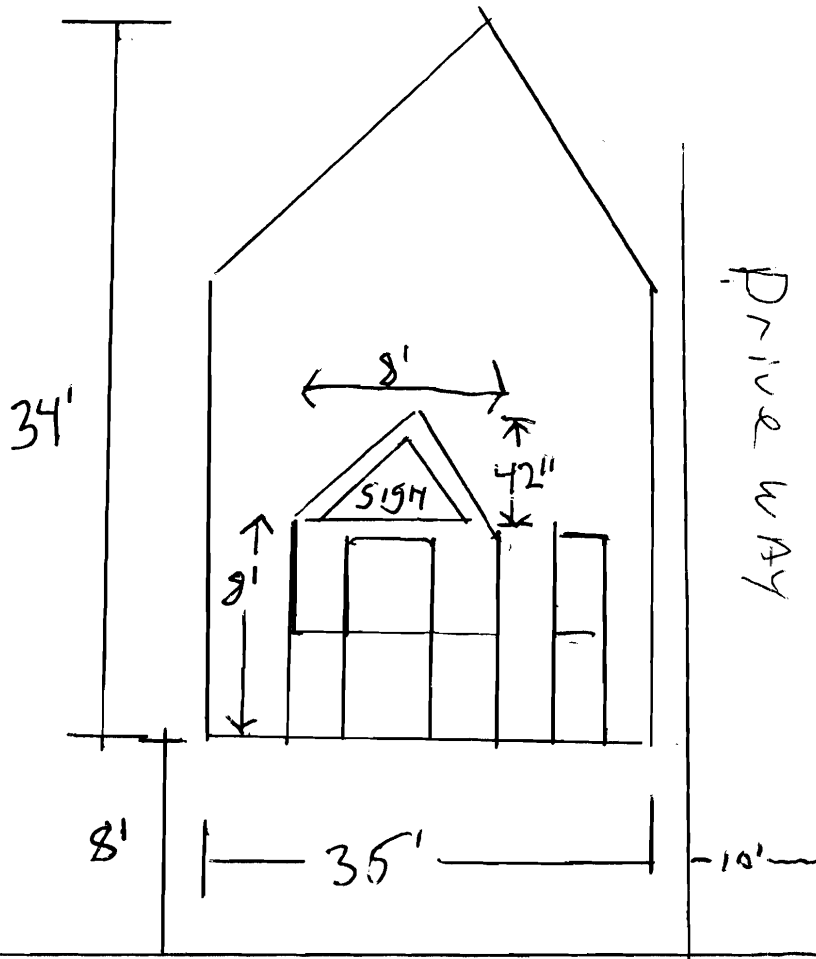
Signature of applicant:	Date: <u>030309</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

B-2b-multivent
 $1.5 \times 35 = 52.5 \text{ ft}$

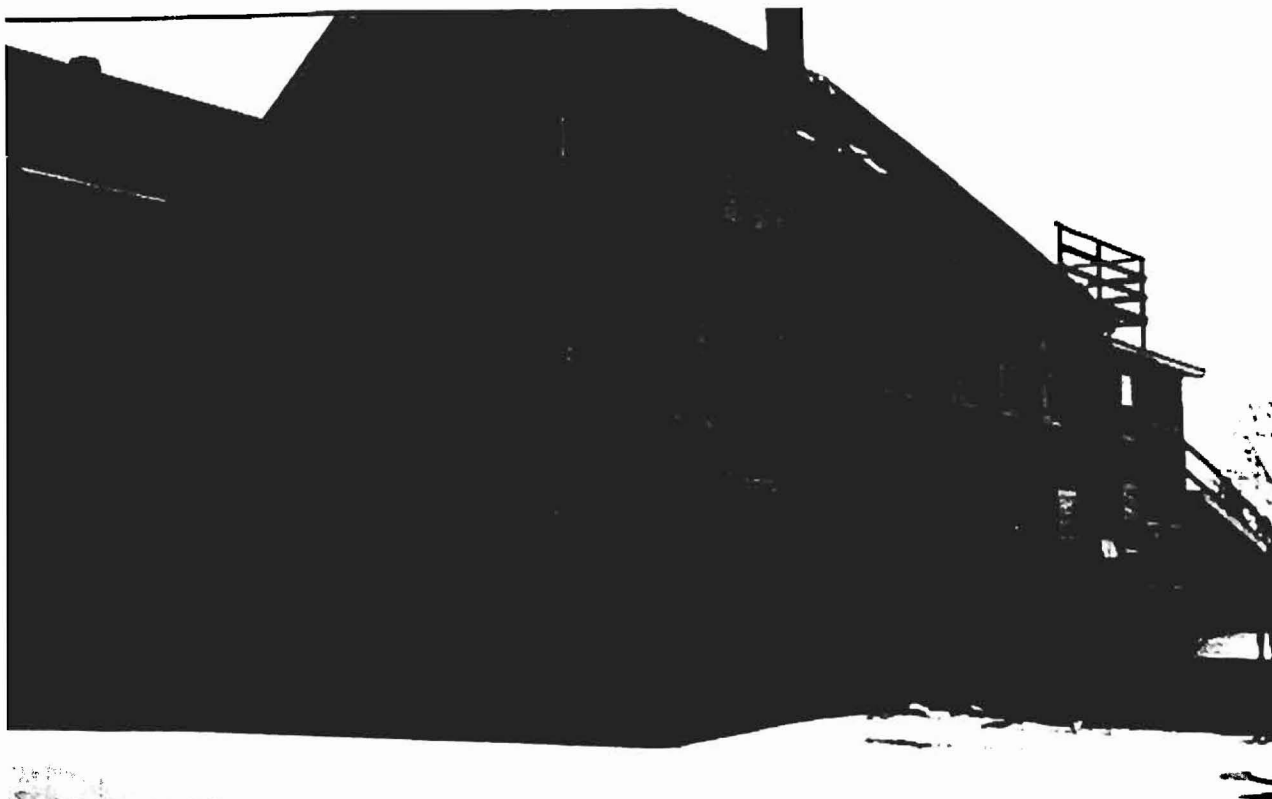
$\frac{1}{2} (48" \times 42") = 1008 \text{ in}^2 \times 2 = 2016 = 14 \text{ ft}^2$

OK



8' 96"

Sign will be Lag Bolted
into plywood & studs



ACORD <small>TM</small> CERTIFICATE OF LIABILITY INSURANCE	DATE (MM/DD/YY) 03/31/2009												
PRODUCER Phone 207-866-4500 Fax 207-866-0024 ANDERSON WATKINS ASSOCIATES, INC 31 CENTRAL STREET WESTBROOK ME 04092	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.												
INSURED DISCOUNT HALAL STORE C/O ABDUL ALI 44 WASHINGTON AVENUE PORTLAND ME 04101	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:80%;">INSURERS AFFORDING COVERAGE</th> <th style="width:20%;">NAIC #</th> </tr> <tr> <td>INSURER A: E A KELLEY</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: E A KELLEY		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
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POLICY NUMBER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	CP558003	04/08/08	04/08/09	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO PERIODIC PREMISES (EXCEPT MEDICAL EXPENSE) \$ 50,000 MEDICAL EXPENSE (EXCEPT PERSONAL & ACCIDENT) \$ 1,000 PERSONAL & ACCIDENT \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS/COMMODITIES \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				
	GENERAL AGGREGATE LIMIT APPLIES PER POLICY				
	<input type="checkbox"/> AUTOMOBILE LIABILITY				
	<input type="checkbox"/> GARAGE LIABILITY				
	<input type="checkbox"/> EXCESS/UMBRELLA LIABILITY				
<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					(NO STATE) OTHER EL EACH ACCIDENT \$ EL DISINFECTANT EMPLOYEE \$ EL DISEASE POLICY LIMIT \$
<input type="checkbox"/> OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS
 CERTIFICATE HOLDER IS AN ADDITIONAL INSURED

CERTIFICATE HOLDER CITY OF PORTLAND 383 CONGRESS ST PORTLAND, ME 04101 Attention: ACORD 25 (2001/08)	CANCELLATION SHOULD ALL OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT BUT FAILURE TO DO SO SHALL MAKE NO CANCELLATION OF LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Daniel Donatelli © ACORD CORPORATION 1988
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APR - 9 2009
 Certificate # 12741
 APR - 9 2009