DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that CORNER ENTERPRISES LIMITED LIABILITY COMPANY/3 BUOYS SEAFOOD

Job ID: 2012-11-5403-SIGN

Located At 111 CUMBERLAND AVE

CBL: 013- F-004-001

has permission to replace panel in pylon sign & install three wall signs

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this
 office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

Final Inspection

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

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Director of Planning and Urban Development Jeff Levine

Job ID: 2012-11-5403-SIGN

Located At: 111 CUMBERLAND

CBL: 013- F-004-001

AVE

Conditions of Approval:

Building

1. Signage and Awning Installation to comply with Chapters 16 (Structural Loads), 31 (Materials) & 32 (ROW Height & Encroachments) of the IBC 2009 building code.

City of Portland, Maine - Building or Use Permit Application

Date Applied:

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

Job No:

2012-11-5403-SIGN	11/15/2012		013- F-004-001			
Location of Construction: 109-111 CUMBERLAND AVE	Owner Name: CORNER ENTERPRIS	SES, LLC	Owner Address: PO BOX 6007 FALMOUTH, M			Phone: 207-329-5330
Business Name: 3 Buoys Seafood, LLC	Contractor Name: Sign, Concepts		Contractor Addr 75 Bishop St., F	ess: Portland, ME 041	1.03	Phone: 207-699-2920
Lessee/Buyer's Name: William Holler	Phone: 603-686-1312		Permit Type: Signage - Perm	anent		Zone: B-2b
Past Use:	Proposed Use:	atall throa	Cost of Work:			CEO District:
Restaurant	Same – restaurant – ir wall signs – two at 3' at 2'x 4'8" & replace free standing sign – 5	x 7' & one panel in	Fire Dept:	Approved Denied N/A		Inspection: Use Group: Type:
Proposed Project Description	:		Pedestrian Activ	ities District (P.A.	D.)	Signature:
replace face in pylon sign 8	& install 3 wall signs	ī				499111
Permit Taken By: Gayle				Zoning Appro	oval	
 This permit application d Applicant(s) from meetin Federal Rules. Building Permits do not in 	g applicable State and	Shorelan Wetlands Flood Zo Subdivis Site Plan	one ion	Zoning Appeal Variance Miscellaneous Conditional Us Interpretation Approved	✓ Not in Dis Does not I Requires I Approved Approved	st or Landmark Require Review Review
septic or electrial work. 3. Building permits are voic within six (6) months of a False informatin may investigate permit and stop all work.	the date of issuance.		_Min _MM 11/19/12-	Denied Date:	Denied Date: 98N	(
3. Building permits are voic within six (6) months of False informatin may inv	the date of issuance.	Date: 0				
3. Building permits are voic within six (6) months of False informatin may inv	the date of issuance. ralidate a building ecord of the named property, s authorized agent and I agree e code official's authorized re	CERTIFIE or that the prope to conform to	ICATION Osed work is authorize all applicable laws of t	Date: d by the owner of reco	Date: Date: rd and that I have been a lition, if a permit for wo	uthorized by rk described in
3. Building permits are voic within six (6) months of the False informatin may inverse permit and stop all work. Thereby certify that I am the owner of the owner to make this application as his he application is issued, I certify that the	the date of issuance. Talidate a building ecord of the named property, s authorized agent and I agree e code official's authorized re	CERTIFIE or that the prope to conform to	ICATION Osed work is authorize all applicable laws of t	Date: d by the owner of reco	rd and that I have been a dition, if a permit for word by such permit at any r	uthorized by rk described in

CBL:



2012-11 5403 gay4.

Signage / Awning Permit Application

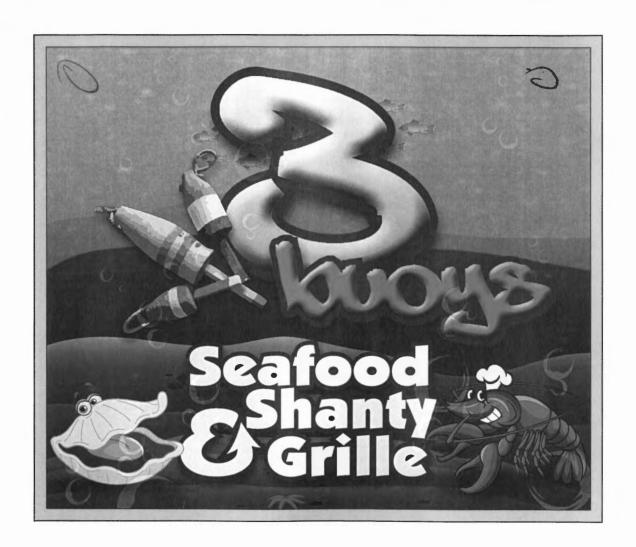
If you or the property owner owes real estate or personal property taxes or any other charges on any property within the City, payment arrangement MUST be made before permits are accepted.

(109-111)
Location/Address: III Cumberland Color
Tax Assessor's Chart/Block/Lot (CBL) OWNER Name/Address:
Chart: Block: Lot: William Holler 603-686-1313
013 F 004 HT GVER Rd. Eliot, ME 03903
LEASEE/BUYER Name (if Applicable) CONTRACTOR name, address/phone Total S.F. signage \$
31)-0 310-0 32-00
NOV 15 2012 75 DISTAND ST. SF + \$30 Fee: \$30 Historic (\$75): \$
Awning Fee: \$
of Portland Manyoing Fee = Cost of Work: \$(\$30/first \$1000; \$10 every other \$1000) TOTAL FEE: \$
Who should we contact when the permit is ready: Name: Ron Nover Sim Comp Phone: 611-2920 Address 75 Brown St. Allien We 04103
Tenant/allocated building space frontage (in feet): Length: 4 Height: 15
Current Specific Use: If vacant, what was prior use: Proposed Use: Single Tenant or Multi-Tenant Lot: Single, * * * * * * * * * * * * *
Current Specific Use: * 21 aldre G
If vacant, what was prior use: Chicken Buffold Wilyr les town
Proposed Use: Serford, Brygna of.
Freestanding (e.g. pole) sign? YES NO Dimensions proposed: 30 (sf); Height from grade: sf /0
BLDG Wall Sign (attached to bldg.)? YES NO Dimensions proposed:si 2/30.7 [,
Proposed Awning: YES NO X If yes, is awning backlit? YES NO 1 C SQ 1 Ft.
Heigth of awning Length of awning Depth of awning
Is there any communication, message, trademark or symbol on it? YES NO
If yes, total square footage of panels with communication, message, trademark or symbol on it:sf
Information on existing and previously permitted signage:
Freestanding (e.g. pole) sign? YES NO Dimensions proposed: 5 ft x 6 ft; Height from grade: 15
BLDG Wall Sign (attached to bldg.)? YES X NO Dimensions proposed: 7 ft X 2 ft
Awning? YES NO X total sq ft of panels with communication on it: sf
A site sketch and building sketch showing exactly where existing and proposed signage is located MUST be provided.
Sketches and/or pictures of proposed signage and existing building are also required.
Please submit all information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the 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 <u>WWW.PORTLANDMAINE.GOV</u> , stop by the Building Inspections Office, room 315 City Hall, or call 207-874-8703.
I hereby certify 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: // 9 12

pylansign. - B-2 single hearts

Street frontye -- 128.95. 420'- max 65\$ - 30\$ proposed 600

Leight 18'-





 Date: 10/16/12
 Scale: 1" = 1'

 Drawing #: 1
 Sales Rep: RN

 Rev #: xx
 Rev Date: 00/00/12

 Apprv'd by:

3 Buoys Seafood Shanty

- 1 5' x 6' d/f face replacement for existing internally illuminated pylon sign
 - · white polycarbonate substrate
 - digitally printed translucent vinyl graphics

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2'x 21' = 420 Mourd - 9,530 (04).





Haddock Fried Clams Roast Beef Steak Tips Oysters Pier Fries Onion Rings Fried Dough

24" × 56"2 9.32\$



Date: 10/16/12 | Scale

Scale: 1" = 1'

Drawing #: 3

Sales Rep: RN

Rev#: xx

Rev Date: 00/00/12

Apprv'd by:

3 Buoys Seafood Shanty

- 1 2' x 4'-8" s/f wall-mount sign
 - 3mm Alupanel substrate
 - · digitally printed vinyl graphics

9 \$

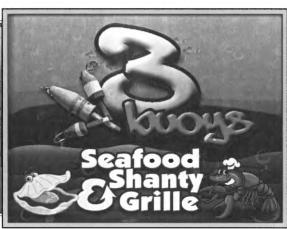
24

JH'

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47×7= 844 - 2,4 propsed (B)





Haddock Fried Clams **Roast Beef** Steak Tips ... Oysters Pier Fries Onion Rings Fried Dough ACTUATINA



Date: 10/16/12

Scale: 3/4" = 11

Drawing #: 2

Sales Rep: RN

Rev #: xx

Rev Date: 00/00/12

Apprv'd by:

3 Buoys Seafood Shanty

- 2 -)3' x 7' s/f wall-mount signs
 - 3mm Alupanel substrate
 - · digitally printed vinyl graphics

21 J each

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Corner Enterprises ,L.L.C. P.O. Box 6007 Falmouth , Maine 04105 329-5330 or 420-3761

POSTE ON

November 9, 2012

City Of Portland Building Inspections 389 Congress Street Portland, Maine 04101

Re: 3 Buoys Seafood, L.L.C.

Dear Sir and or Madam;

Please be advised that 3 Buoys Seafood L.L.C. has our permission to install signs on the building

They currently Lease(and sign pole) located at 111 Cumberland Ave., Portland, Maine. Please call me at

The above numbers if you need further information. Thank you for your attention to this matter.

With Best Regards;

Martie DiBiase Managing Agent



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/31/2012

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).

	ertificate floider in fled of such efficien	361116	III(S)	•	CONTA	CT				
	DUCER NE INCLIDANCE				NAME:	CHAD	A HANCO			
	NE INSURANCE				(A/C, No	, Ext): 603-43			lo): 603-	-433-0007
	2 STATE STREET				E-MAIL ADDRE	ss: CHA	D@KANEI	NS.COM		
PO	RTSMOUTH, NH 03801					INS	URER(S) AFFOR	DING COVERAGE		NAIC #
					INSURE	RA: TRAVE	LERS			
	IRED				INSURE	RB:				
3 E	BUO⊡S SEAFOOD, LLC				INSURE	RC:				
3 E	SUO S SEADOOD SHANT & GR	ILL			INSURE					
2 1	IS RTE 1				INSURE					
	RK, ME 03909									
		TIEIC	ATE	NUMBER:	INSURE	RF:		REVISION NUMBER		
_	HIS IS TO CERTIFY THAT THE POLICIES				/F BEE	N ISSUED TO				OLICY PERIOD
	IDICATED. NOTWITHSTANDING ANY RI									
	ERTIFICATE MAY BE ISSUED OR MAY							HEREIN IS SUBJECT	TO ALI	THE TERMS,
	XCLUSIONS AND CONDITIONS OF SUCH	ADDL			BEEN F					
INSR LTR	TYPE OF INSURANCE	INSR	WVD	POLICY NUMBER		(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	L	IMITS	
A	GENERAL LIABILITY							EACH OCCURRENCE	\$2,0	000,000
	X COMMERCIAL GENERAL LIABILITY			680-7A026148		10/1/2012	10/1/2013	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$30	0,000
	CLAIMS-MADE X OCCUR							MED EXP (Any one person)	\$5,0	000
								PERSONAL & ADV INJURY	\$2.0	000,000
								GENERAL AGGREGATE		000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							PRODUCTS - COMP/OP AG		000,000
	DPO DPO							PRODUCTS*COMPTOP AC	\$	700,000
	X POLICY JECT LOC				_			COMBINED SINGLE LIMIT (Ea accident)		200 000
Α										000,000
	ANY AUTO ALL OWNED SCHEDULED			680-7A026148		10/1/2012	10/1/2013	BODILY INJURY (Per person	-	
	AUTOS AUTOS							PROPERTY DAMAGE		
	X HIRED AUTOS X NON-OWNED AUTOS							(Per accident)	\$	
									-\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$								s	
	WORKERS COMPENSATION							WC STATU- TORY LIMITS E	TH-	
	AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	
	OFFICER/MEMBER EXCLUDED?	N/A						E.L. DISEASE - EA EMPLOY	1	
	(Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below									
	DESCRIPTION OF OPERATIONS below	-						E.L. DISEASE - POLICY LIN	111 2	
	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC				Schedule	, if more space is	required)			
	SEAFOOD RESTAURANT WITH C									
***	SECOND LOCATION IS INSURED	AS \	WEL	L, 111 CUMBERLAND	AVE, F	PORTLAND	ME 04101*	**		
***	INSURED IS COVERED FOR OUT	DOO	R SI	GN ****						
***	CITE OF PORTLAND, MAINE IS L	STF	D AS	ADDITIONALL INSU	RED *	**				
	erro or i orribation intaline to be		_ /							
0=	DTIFICATE HOLDED				CANC	ELL ATION				
CE	RTIFICATE HOLDER				CANC	ELLATION				
					SHO	ULD ANY OF	THE ABOVE D	ESCRIBED POLICIES BE	ECANCE	LLED BEFORE
	□ OF PORTLAND, MAINE							REOF, NOTICE WILL		
389	CONGRESS ST							Y PROVISIONS.		
PO	RTLAND, ME 04101									

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PORTLAND MAINE

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Receipts Details:

Tender Information: Check , BusinessName: Sign Concepts, Check Number: 6107\$192.00

Tender Amount: 192.00

Receipt Header:

Cashier Id: gguertin

Receipt Date: 11/15/2012 Receipt Number: 50257

Receipt Details:

Referance ID:	8744	Fee Type:	BP-Signs
Receipt Number:	0	Payment	
		Date:	
Transaction	192.00	Charge	192.00
Amount:		Amount:	
Job ID: Job ID: 2012	-11-5403-SIGN - four signs, total of 81 sq ft		
Additional Comme	ents: 111 Cumberland Ave.		

Thank You for your Payment!