

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 02-0275	Issue Date: APR 16 2002	GBL: 013 G018001
Owner Address: PO Box 641	Phone: 207-865-6678	
Contractor Address: Portland	Phone:	
Permit Type: Signs - Permanent	Zone: B26	

Location of Construction: 229 Congress	Owner Name: William P. Simpson	Owner Address: PO Box 641	Phone: 207-865-6678
Business Name: n/a	Contractor Name: n/a	Contractor Address: Portland	Phone:
Lessee/Buyer's Name n/a	Phone:	Permit Type: Signs - Permanent	Zone: B26
Past Use: Commercial / Vacant; Prior Use Insurance Company.	Proposed Use: Commercial / Antique & Salvage Shop; Erect 20 sq. ft. Attached Sign.	Permit Fee: \$0.00	CEO District: 1
Proposed Project Description: Erect 20 sq. ft. Sign		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: N/A Type: 4/16/02 Signature: [Signature]
		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: gg	Date Applied For: 03/28/2002	Zoning Approval		
<ol style="list-style-type: none">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..		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"/> Date: [Signature]	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 Date: [Signature]	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: [Signature]

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 INSPECTION

PERMIT

PERMIT ISSUED

APR 16 2002

CITY OF PORTLAND

This is to certify that William P. Simpson/n/a

has permission to Erect 20 sq. ft. Sign

AT 229 Congress

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 altered or closed-in. **HEAR 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

PENALTY FOR REMOVING THIS CARD

[Signature] 4/16/02
Director - Building & Inspection Services

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE
PERMIT IS ISSUED

Signage 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>229 Congress St.</u>		
Total Square Footage of Proposed Structure <u>20 sq. ft.</u>		Square Footage of Lot <u>14,600 square feet</u>
Tax Assessor's Chart, Block & Lot Chart# <u>013</u> Block# <u>G</u> Lot# <u>018</u>	Owner: <u>William P. Simpson</u>	Telephone:
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone: <u>Amelia Kutch</u> <u>232 High St. #1 Portland</u> <u>Me, 04101 (207) 828-0321</u>	Total s.f. of signage <u>20</u> x 1.00 per s.f. \$ <u>20</u> , plus \$30.00 base fee Fee: \$ <u>50.00</u>
Current use: <u>N/A</u>		
If the location is currently vacant, what was prior use: <u>Insurance Co.</u>		
Approximately how long has it been vacant: <u>8 months</u>		
Proposed use: <u>Antique & Salvage Shop</u>		
Project description:		
Contractor's name, address & telephone: <u>N/A</u>		
Who should we contact when the permit is ready: <u>Amelia Kutch</u>		
Mailing address: <u>232 High St. #1</u> <u>XX Call</u> <u>Portland, Me 04101</u> <u>(207) 828-0321</u>		
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A stop work order will be issued and a \$50.00 fee if any work starts before the permit is picked up. Phone: <u>(207) 828-0321</u>		

IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT, WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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: <u>A. Kutch</u>	Date: <u>3/27/02</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.
If you are in a Historic District you may be subject to additional permitting and fees with the
Planning Department on the 4th floor of City Hall

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 229 Congress St. Portland ZONE: B2b

OWNER: William P. Simpson

APPLICANT: Amelia Kutch

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES ☒ NO ☐ MULTI-TENANT LOT? ☒ YES ☐ NO ☐
FREESTANDING SIGN? (ex. Pole Sign) YES ☒ NO ☐ DIMENSIONS _____ HEIGHT _____
MORE THAN ONE SIGN? YES ☒ NO ☐ DIMENSIONS _____ HEIGHT _____
SIGN ATTACHED TO BLDG.? ☒ YES ☐ NO DIMENSIONS 18" x 1' + 2 extra sq. ft.
MORE THAN ONE SIGN? YES ☒ NO ☐ DIMENSIONS _____
AWNING: YES ☐ NO ☐ IS AWNING BACKLIT? YES ☐ NO ☐ HEIGHT OFF SIDEWALK _____
IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? 18
20 ft

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

1 sign attached to building reading: LOST CITY SALVAGE
with dimensions 1' x 18" + embellishment totaling 2 sq. ft.

*** TENANT BLDG. FRONTAGE (IN FEET): 36.5 sq ft x 1.5 = 54.75 ft
*** REQUIRED INFORMATION

AREA FOR COMPUTATION

YOU SHALL PROVIDE:

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE
EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES
AND/OR PICTURES OF PROPOSED ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: A Kutch DATE: _____

3-27-02

Planning Department
City Hall
Portland, Maine 04101

To Whom It Concerns,

Permission is hereby granted to
Aniela Kutch & 1/6/a Last Copy Salvage
c 229 Congress Street, Portland, to
apply signage at the aforementioned address.

If you have any questions please
contact me at 865-6678 or 458-0378 or
at the following address. Thanks -

Munjoy Hill Properties, LLC.

William R. Simpson

P.O. Box 641

Freeport, ME. 04032

MONTGOMERY ST.

100'

229 CONGRESS
 $100 \times 36.5 \times (4 \text{ FLOORS}) =$
14,600 sq. ft.

1095#

30'

for retail
for business
use

NO PARKING
Required
for less than
2,000#

12'
18" ↑ LOST CITY SALVAGE ↓ 3'

ledge

36½'

CONGRESS ST.

4/4/02
Lift message w/ht
15 size of business
30 x 36.5 = 1095#

ACORD CERTIFICATE OF LIABILITY INSURANCEDATE (MM/DD/YY)
03/28/2002

PRODUCER (207)774-6257 FAX (207)774-2994
 Clark Associates
 2331 Congress Street
 P O Box 3543
 Portland, ME 04104

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.

INSURERS AFFORDING COVERAGE

INSURED Lost City Salvage
 232 High Street
 Portland, ME 04101

INSURER A: Peerless Ins Co
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	TBD	04/01/2002	04/01/2003	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$
					AGG	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CERTIFICATE HOLDER

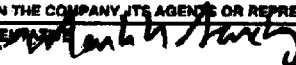
ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

City of Portland
 390 Congress Street
 Portland, ME 04101

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



ACORD 25-S (7/97)

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