Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Please Read	CITY OF PORT	LAND
Application And Notes, If Any, Attached	PERMIT	TION Permit Number: 041328
This is to certify that Bartlett Is	land Llc /The Sign	FIT 2 = 7004
has permission to Coffee By	design / Install a l q ft Sign	
AT 43 Washington Ave		L 013 I020001
provided that the perso	n or persons. If m or marketion	epting this permit shall comply with a

of the provisions of the Statutes of the construction, maintenance and up of buildings and statutes, 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.

fication of inspect on must be an and with permit on procubing or an arthur of the adding or arthur of the adding of the adding

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

10/13/04 done, More

City of Portland, N		_				Permit 140.	Issue Date	:	CBL: 013 IO)20001		
•	89 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8 cation of Construction: Dwner Name:				_=	Owner Address:			Phone:			
43 Washington Ave		Bartlett Island	Llc			67 India St			T Hone.			
Business Name: Contractor N The Signer			e:		C	ontractor Address:			Phone			
					2	99 Forest Avenu	e Portland		2078797	7700		
Lessee/Buyer's Name Phone:									•	Zone:		
Past Use:		Proposed Use:										
Commercial Barkery		Commercial Bakery / Coffee By				\$66.00 \$66.00 FIRE DEPT: Approved Denied Use Ground			1			
		design / Instal	ll a 18 sq ft Sign		F				1	Type: Nh		
Proposed Project Description	on•				┥				9/-	2/609		
Coffee By design / Inst		ign			Si	Signature: Signature:			enature:			
·	1					PEDESTRIAN AC'TIVITIESDISTRIC			-			
						ction: Approv	proved w/Co	nditions [Denied			
					Si	ignature:		D	ate:			
'ermit Taken By:	_	oplied For:				Zoning Approval						
ldobson	09/01	1/2004	Special Zone or Revie		owe	ews Zoning Appeal			Historic Preservation			
			l		icws				1 . /			
			Shoreland			Variance			ot in District or Landmar			
			Wetland			Miscellaneous			Does Not Require Review			
		Flood Zone			Conditional Use			Requires Review				
							Interpretation			Approved		
		Site Plan				Approved			Approved w/Conditions			
		Maj Minor M			Denied			_ Denied				
			Date: 9797			Of Date:			Date:			
I hereby certify that I an I have been authorized b jurisdiction. In addition shall have the authority such permit.	by the owner to a, if a permit fo	make this appli r work describe	med pro ication a d in the	as his authorize application is	the p d ag	proposed work is gent and I agree ted, I certify that t	o conform he code off	to all appl icial's autl	icable laws horized rep	s of this presentative		
SIGNATURE OF APPLICANT			ADDRESS			DATE			PHONE			
RESPONSIBLE PERSON IN	N CHARGE OF W	ORK, TITLE					DATE		PHO	ONE		

Signage/Awning Permit Application ST - 1004

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.

	'					
	Ave.,	Partland, ME				
Tax Assessor's Chart, Block & Lot Chart# /3 Block# 1 Lot#	20 Bantlett Island 110	Telephone: 207/879 - 2233				
Lessee/Buyer's Name (If Applicable)	Applicant name, address & telephone:	Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D signage = Total				
	Boffeln Bra Design Inc Portland. ME 04/01	Awning Fee = Cost Of Work: \$				
	Portland. ME 04101	Total Fee: \$ (do ^{OC)}				
Current use: former Vito's Bake	ery - under construction	,				
If the location is currently vacant, what	was prior use: <u>under constr</u>	uction				
Approximately how long has it been va						
Proposed use: Cottee retail , ragsting & 16'ca						
Proposed use: Cottee retail, roasting affice. Project description: This location will be used for 4 coffee retail and.						
roasting operation as well as our company headquarters						
Contractor's name, address & telephone: The , Signery 299 Forest Ave.,						
Whom should we contact when the permit is ready: ALAN, (CASA)						
Mailing address: (0)-122 69 00	et	877-2233				
Mailing address: (0) = EE By DESIGN 67 India Street 180 rf land ME 04/0) 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 \$100.00 fee if any work starts before the permit is picked up. PHONE: \$79.2233						
F 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 APROVE 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 CodeOfficial'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						

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

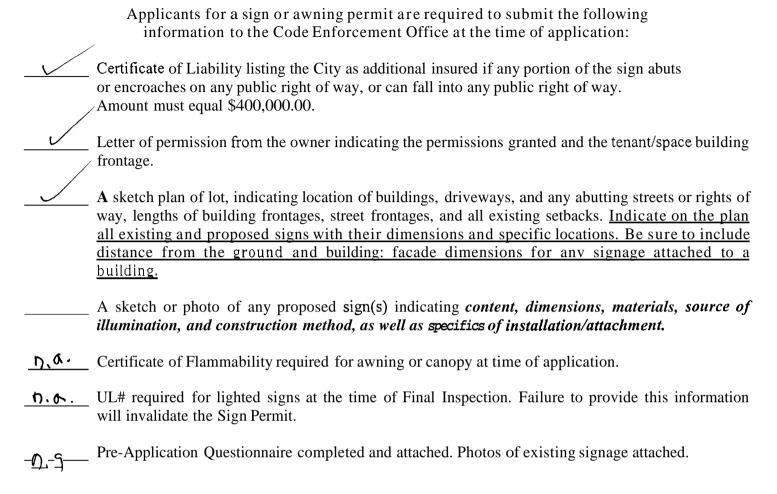
Signature of applicant:

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 41-43 Washington Aye. Zone: B-4 CBL: 013, Io20001
SINGLE TENANT LOT? YES NOX MULTI TENANT LOT? YESX NO MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES NOX
TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET): Length: 47'- Height: 5'-7"
INFORMATION ON PROPOSED SIGN(S): FREESTANDING (e.g., pole) SIGN? YES NO DIMENSIONS PROPOSED: BLDG. WALL SIGN? (attached to bldg) YES NO DIMENSIONS PROPOSED: Dracket . Approx
INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S): FREESTANDING (e.g., pole) SIGN? YES NO DIMENSIONS: BLDG. WALL SIGN(attached to bldg)? YES NO DIMENSIONS: AWNING? YES NO DIMENSIONS: LOT FRONTAGE (FEET): 47
AWNING YES NO X IS AWNING BACKLIT? YES NO 3, 9. HEIGHT OF AWNING: 7, 9 LENGTH OF AWNING: 7, 9 DEPTH: 7, 9. IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES NO 7, 9. IF YES, TOTAL S.F. OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? s.f. 7, 0
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 ARE ALSO REQUIRED. DATE: 20/01/20/10/20/20/20/20/20/20/20/20/20/20/20/20/20
B-4 Smyla tennit "FOR OFFICE USE ONLY **** Length of family 17 x 2 9 4 th

CHECKLIST FOR SIGN/AWNING APPLICATION

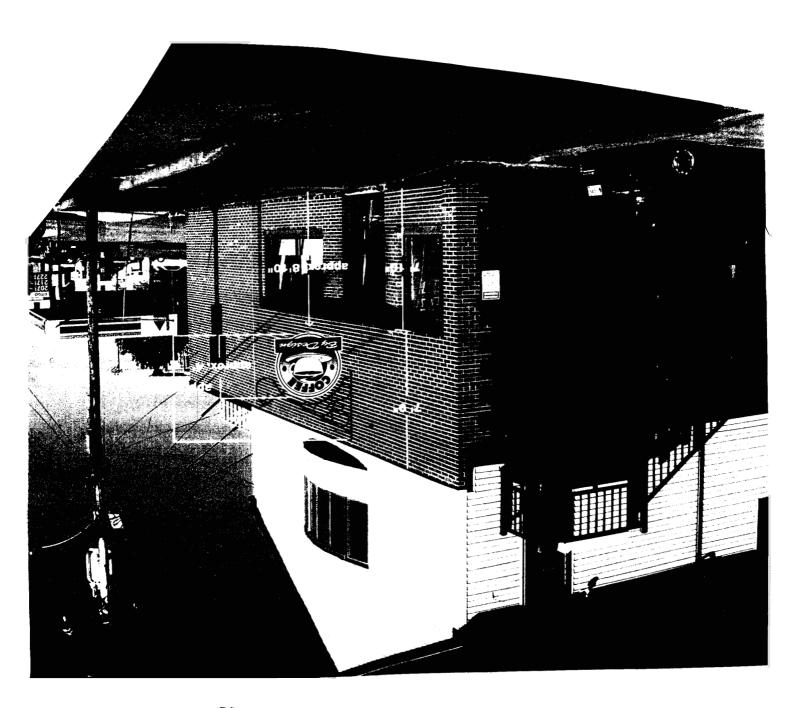


Permit Fee for signage or awning-with-signage: \$30.00 plus \$2.00 per square foot of sign.

Permit Fee for awning-without-signage is based on cost of work: \$30.00 for the first \$1,000.00, plus \$9.00 for each additional \$1,000.00.

Base Application Fee for any Historic District signage is \$65.00 instead of \$30.00

Cofee P Cexay and roayer, How how how for



Bartlett Island, LLC

67 India Street
Portland, Maine 04101
2071879-2233 • PH
2071879-2283 • FAX

City of Portland Permitting Department Congress Street Portland, Maine 04101

Subject: Sign

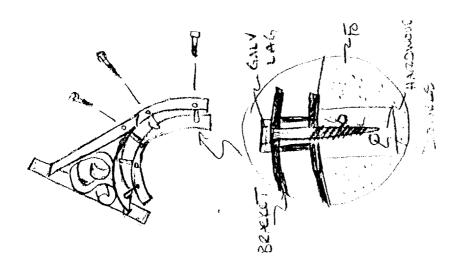
41-43 Washington Ave. Letter of Permission

To whom it may concern,

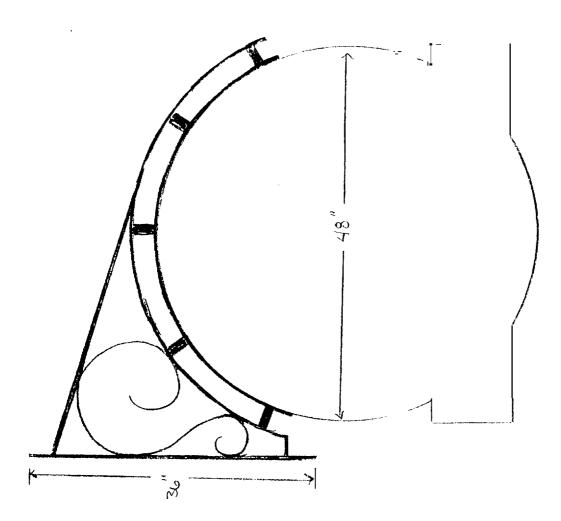
This letter gives Coffee By Design permission to install a sign to indicate their location at 41-4. Washington Avenue in Portland.

Best regards,

Alan Spear Owner







							08/20/2004			
	PRODUCER (207)729-0102 FAX (207)729-4071 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION									
No	Norton Insurance Agency, Inc.				ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE					
181 Perk Row					ALTERTH	HOLDER.THIS CERTHEATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
•	PO Box 655 Brunswick, ME 04011			INSURERS	INSURERS AFFORDING COVERAGE					
INBU			fee by Design, Inc.		INSURER A TI	INSURERA The Travelers Insurance				
	(67	India Street		INSURER B Ma	ine Employer	s Mutual Ins.			
	į	Por	rtland, RE 04101-4209	1	INSURER C					
					INSURER D					
					INSURER F					
TI 41	COVERAGES. THE POLICIES OF INBURANCE LISTED BELOW HAVE BEEN ISSUED TO THE ISURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED INCTWITHSTANDING AND CONDITION OF ANY CONTRACT OR OTHER ISSUED OR MAY PERTAIN THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED. TREIN'S SUBJECT TO ALL THE TERMS, EXCLUSIONS ON CONDITIONS OF SUCH POLICIES AGGREGATEL IN ITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.									
		-5 /			POLICY EFFECTIVE	POLICY EXPIRATION	I INT			
INSR LIR	MRR C	GF	TYPE OF INBURANCE IERAL LIABILITY	POLICY NUMBER 6801433B783		03/08/2005	EACH OCCURRENCE	\$ 1,000,000		
		X	COMMERCIAL GENERAL LIABILITY	0001+332,03	03/05/2004	03,00,2003	DAMAGE TO RENTED	\$ 300,000		
		-	CLAIMS MADE X OCCUR				PREMISES (Ea accurance) MED EXP (Any one person)	\$ 5,000		
A	1	-					PERSONAL & ADV INJURY	\$ 1,000,000		
'							GENERAL AGGREGATE	\$ 2,000,000		
		GEN	I'L AGGREGATE L'IMIT APPLIES PER				PRODUCTS - COMP/OP AGG	\$ 2,000,000		
			POLICY PRO: LOC							
		AUT	OMOBILE LIABILITY ANYALITO	810143 3B92 A	03/08/2004	03/08/2005	COMBINED SINGLE LINIT (Es accident)	s 1,000,000		
		X	ALLOWNED AUTOS 9CHEQULED AUTOS				BODILY INJURY (Per person)	\$		
^		X	HIRED AUTOS			<u> </u>	BODILY INJURY (Per accident)	\$		
							PROPERTY DAMAGE (Per accident)	s		
\vdash		GAF	RAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
			ANY AUTO				OTHER THAN EA ACC	\$		
							AUTO CNLY AGG	5		
		EXC	ESBJUMBRELLA LIAB LITY	-			EACHOCCURRENCE	\$		
			OCCUR CLAIMS MADE				AGGREGATE	5		
		L						\$		
		Щ	DEDUCTIBLE					8		
			RETENTION \$				Y WC STATU- OTH-	\$		
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			1810068290	04/11/2004	04/11/2005	A TORY LIMITS! FR	F00 000			
В	ANY	PROF	PRIETORIPARTNER/EXECUTIVE				E L EACH ACCIDENT	s 500,000		
	17 V96	desc	MEMBER EXCLUDED?	:			EL DISEASE EA EMPLOYEE	·		
	OTHE		PROVISIONS below		 		EL DISEASE POLICYLIMIT	\$ 500,000		
DE8	RI PT	ON O	F OPERATIONS/LOCATIONS/YEHICL	ES EXCLUSIONS ADDED BY ENDORSON	IENT / SPECIAL PROVI	BIONS	<u> </u>			
Cit	0	P	ortland is listed as	ES EXCLUSIONS ADDED BY ENDORSEN additional insured wit	th regards t	o the above-	noted general lia	bility		
cοv	eraç	јe								
l										
l										
CE	CERTIFICATE HOLDER CANCELLATION									
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE									
City of Portland 389 Congress St			EXPIRATION DATE THEREOF, THE ISSUIND INSURER WILL ENDEAVOR TO WAIL. 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,							
								BUT FALURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY		
			OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.							
			Portland, NE 04101			AUTHORIZED REPRESENTATIVE				
				<u> Claudette</u>	Claudette Turcotte CPIW, AAI, AU					
400	ORD 25 (2001/08) FAX: (207)879-2283 GACORD CORPORATION 1988									

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SFP

IMPORTANT If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). If SUBROGATIONIS 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). **DISCLAIMER** The Certificate of Insurance on the reverse side of this form does not constitute a contract between the sau nginsurer(s), authorized representative or producer, end the certificate holder, nor does it affirmatively or negativelyamend, extend or alter the coverage afforded by the policies listed thereon.

ACORD 25 (2001/08)

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City of Portland, M 389 Congress Street, 0		_		07) 874-871	Permit No: 04-1328	Date Applied For: 09/01/2004	CBL: 013 I020001		
Location of Construction:	Owner Name:	Owner Address:	Phone:						
43 Washington Ave		Bartlett Island L	lc		67 India St				
Business Name:		Contractor Name:			Contractor Address:		Phone		
		The Signery			299 Forest Avenue	Portland	(207) 879-7700		
Lessee/Buyer's Name		Phone:			Permit Type:				
					Signs - Permanen				
				_	ed Project Description: e By design/Install				
Dept: Zoning Note:	Status:	Approved		Reviewer	: Marge Schmucka	Approval D	Ok to Issue:		
Dept: Building Note:	Status:	_ Approved		Reviewer	: Residential Plan	Revie Approval D	Ok to Issue:		