

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING INSPECTION

PERMIT

Permit Number: 061359

Please Read
Application And
Notes, If Any,
Attached

This is to certify that 247 CONGRESS STREET / The Signery

has permission to Install a 20 sf sign to bldg

AT 247 CONGRESS ST 021 F009001

provided that the person or persons who obtain or accept 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.

Verification of inspection must be shown and when permission procedure before this building or part thereof is closed or services closed-in. 4
OUR NOTICE 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 _____
DepartmentName

[Handwritten Signature]
9/29/04
Director - 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: 06-1359	Issue Date:	CBL: 021 F009001
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Location of Construction: 247 CONGRESS ST	Owner Name: 247 CONGRESS STREET LLC	Owner Address: PO BOX 7225	Phone:
Business Name:	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone: 2078797700
Lessee/Buyer's Name: <i>Paul Thompson</i>	Phone: <i>233-3290</i>	Permit Type: Signs - Permanent	Zone: <i>B2b</i>

Past Use: Commercial / Bridal Shop <i>hair SALON</i> <i>under permit #</i> <i>06-1356</i>	Proposed Use: <i>15 # per appl.</i> Commercial install a 20 <i>20</i> sf sign to bldg	Permit Fee: \$70.00	Cost of Work: \$70.00	CEO District: 1
FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i> Signature:		INSPECTION: Use Group: <i>U</i> Type: <i>Sign</i> <i>IBC 2003</i> Signature:		

Proposed Project Description: Install a 20 <i>20</i> sf sign to bldg <i>15 # per appl.</i>	PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: _____ Date: _____
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Permit Taken By: dmartin	Date Applied For: 09/11/2006	Zoning Approval
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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.. <i>Closed 3/4/12</i>	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"/> <i>OK</i> Date: <i>9/21/06</i>	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: _____	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: _____
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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: 06-1359	Date Applied For: 09/11/2006	CBL: 021 F009001
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Location of Construction: 247 CONGRESS ST	Owner Name: 247 CONGRESS STREET LLC	Owner Address: PO BOX 7225	Phone:
Business Name:	Contractor Name: The Signery	Contractor Address: 299 Forest Avenue Portland	Phone (207) 879-7700
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial install a 15 sf sign to bldg	Proposed Project Description: Install a 15 sf sign to bldg
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Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 09/21/2006	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 09/29/2006	Ok to Issue: <input checked="" type="checkbox"/>
Note: 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.				

Comments: 9/20/2006-mes: left voice mail for Paul T. - now tenant frontage given to determine compliance - also waiting on permit #06-1356 for the use (no dimensions shown on the submittals) 9/21/2006-mes: received voice mail from Paul T 3/14/2012-AMACHADO: Davanti hair salon is gone. New tenat is J. Kelley Salon. New sign #2012-02-3241.



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.

2			Owner:		Telephone:
Tax Assessor's Chart, Block & Lot	H.H. Sawyer Realty		772-6579		
Chart# 21	Block# F	Lot# 9			
Lessee/Buyer's Paul H Davar		The Signery 84 Cove St. Portland ME 879-7700			

Who should we contact when the permit is ready: Paul Thompson phone: 233-3290 20' x 2 + 30' 70' w

Tenant/allocated building space frontage (feet): Length: 11.33' Height: 1.5' = 16.99' 66 ft x 40 ft.

Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____

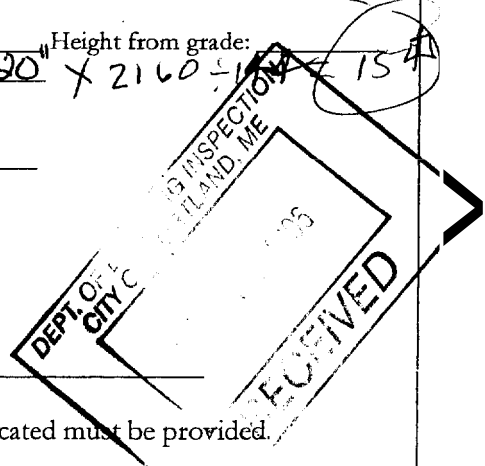
Current Specific use: _____
If vacant, what was prior use: Bridal store
Proposed Use: Hair Salon

Information on proposed sign(s):
 Freestanding (e.g., pole) sign? Yes ___ No ___ Dimensions proposed: 11 Height from grade: 15'
 Bldg. wall sign? (attached to bldg) Yes No ___ Dimensions proposed: 18 x 120 x 2160

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 ___ 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.



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.

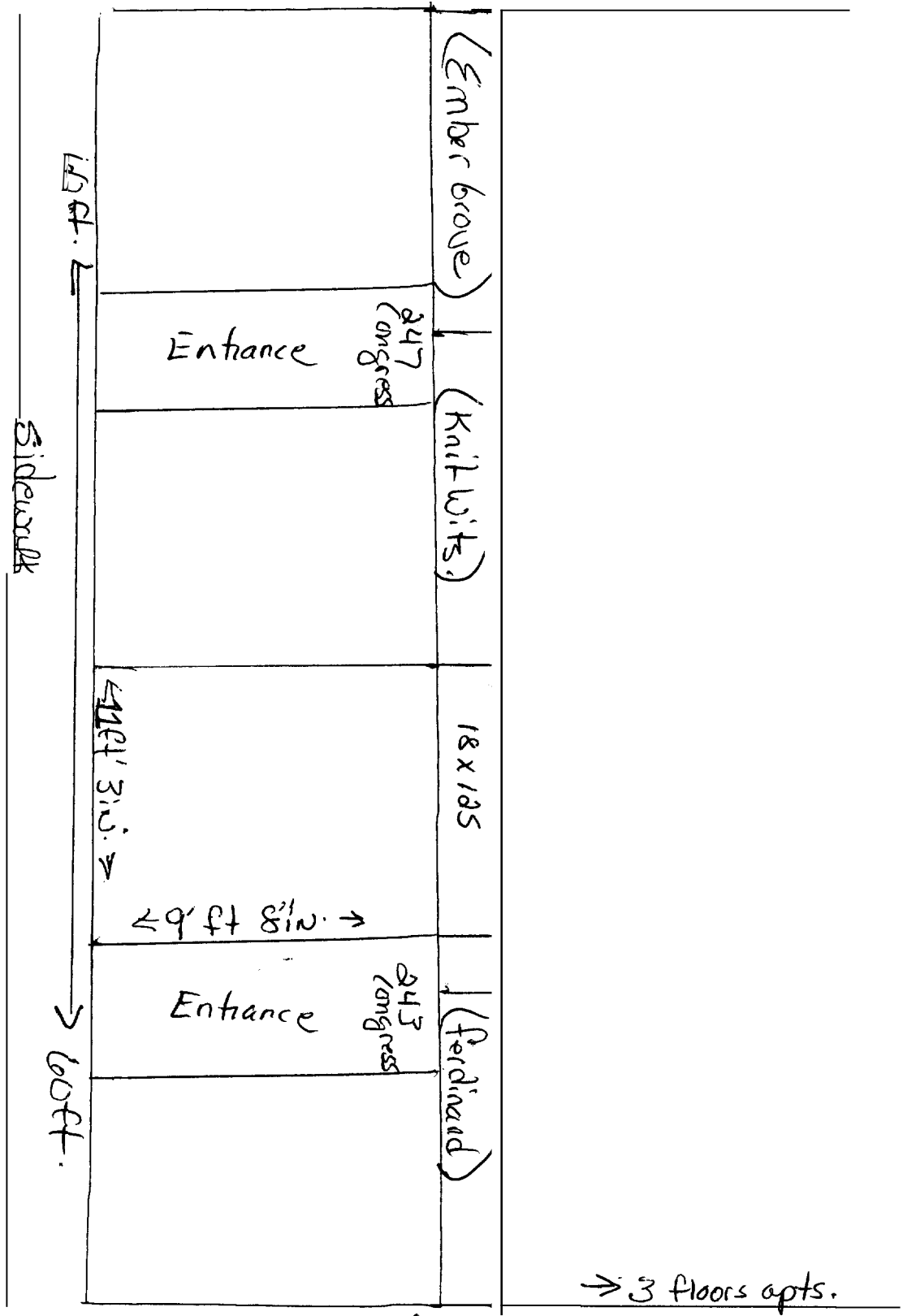
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 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: <u>Paul H. Thompson</u>	Date: <u>9-11-06</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

Parking in back.



Congress St.

Please call 874-8703 or 874-8693 to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice, Notice **must be called** in 48-72 hours in advance in order to schedule an inspection.

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

- Footing/Building Location Inspection;** Prior to pouring concrete
- Re-Bar Schedule Inspection:** Prior to pouring concrete
- Foundation Inspect** Prior to placing ANY backfill
- Framing/Rough Plumbing/Electrical:** Prior to any insulating or drywalling
- Final Certificate of Occupancy:** Prior to any occupancy of the structure or use. NOTE: There is a \$75.00 fee per inspection at this point.

Certificate of Occupancy is not required for certain projects, **Your** inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspection phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES, do not occur, the project cannot go on to the next phase.

CERTIFICATE OF OCCUPANCIES MUST BE ISSUED AND PAID FOR BEFORE THE SPACE MAY BE OCCUPIED

Signature of Applicant/Designee

Date

Donna Martin Admin

10 4 09

Signature of Inspections Official

Date

CBL: 21 F 009

Building Permit #: 061359

PRODUCER Phone 207-855-5500 Fax 207-856-0004
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.

INSURERS AFFORDING COVERAGE

NAIC #

INSURED
DAVANTI INC
 C/O PAUL THOMPSON
 32 DELL CLIFFE LN
 LEWISTON ME 04240

INSURER A	PEERLESS INSURANCE CO	24198
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

ISR TR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	BOP9314811	05/10/06	05/11/07	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EX? (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS-COMP/OP AGG \$ 2,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				/AUTO ONLY - EA ACCIDENT \$ OTHER THAN EAACC \$ AUTO ONLY AGG \$
		EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS <input type="checkbox"/> E L EACH ACCIDENT \$ E L DISEASE-EA EMPLOYEE \$ E L DISEASE-POLICY LIMIT \$

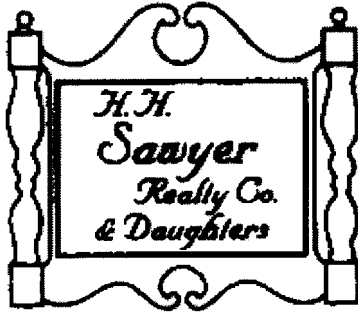
CITY OF PORTLAND
 243B CONGRESS ST
 PORTLAND, ME 04101

SHOULD ANY 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 IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES

AUTHORIZED REPRESENTATIVE

Theresa L. Maietta
 Theresa L. Maietta

Attention:



395 Fore Street
P.O. Box 7225
Portland, ME 04112
Tel: (207) 772-6579
Fax: (207) 773-0680

September 11, 2006

Paul Thompson
Davanti, Inc.
243 Congress Street Store A
Portland, ME 04101

Dear Paul,

We give you permission to have signage for your business located at **243** Congress Street, Portland, Maine. The sign must be located above your store and/or a sidewalk sign that stands on the sidewalk and can be taken inside during non-business hours.

Please contact the office if you have any questions or concerns regarding this matter.

Sincerely,

A handwritten signature in cursive script that reads "Stacy Moore". The signature is fluid and matches the printed name below it.

Stacy Moore
H.H. Sawyer Realty Company & Daughters