

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

Form # P 04

CITY OF PORTLAND

PERMIT

Permit Number: 031362

Please Read Application And Notes, If Any, Attached

This is to certify that Marginal Way Properties Incorporated

has permission to install signs: 21' x 87" &

at 211 Marginal Way

024 C001001

provided that the person or persons responsible for the construction, maintenance and repair of buildings and structures, and of the application on file in the construction department, of the provisions of the Statutes of the City of Portland regulating the construction, maintenance and repair 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 inspection must be made and when in progress of work, a sign must be placed on the building or structure. A sign must be placed on the building or structure. A sign must be placed on the building or structure.

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

Director - Building & Inspection Services

12/5/23

Location of Construction: 211 Marginal Way	Owner Name: Marginal Way Properties Inc	Owner Address: 87 Sea Meadows Ln	Phone:
Business Name: Barlo Signs	Contractor Name: Barlo Signs	Contractor Address: 155 Maine Mall Road South Portland	Phone: 2078429002
Lessee/Buyer's Name:	Phone:	Permit Type: Signs - Permanent	Zone: BS

Past Use: Commercial/mailling services	Proposed Use: Commercial/mailling services/UPS	Proposed Project Description: 2 wall signs install signs: 21' x 87" &
Fire Dept: INSPECTION: Type: NA	Permit Fee: \$0.00	Cost of Work: \$0.00
CEO District: 1	Permit Fee:	Cost of Work:

Proposed Project Description: 2 wall signs install signs: 21' x 87" &	Signature: Date:	Signature: Date:
Commercial/mailling services	Signature: Date:	Signature: Date:

Permit Taken By:	Date Applied For:
	10/30/2003

<input type="checkbox"/> 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	<input type="checkbox"/> 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
<input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan	<input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> MM	<input type="checkbox"/> Special Zone or Reviews <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	<input type="checkbox"/> Special Zone or Reviews <input type="checkbox"/> Major <input type="checkbox"/> Minor <input type="checkbox"/> MM

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.

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	



Sign Permit Application

03-1362

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>211 Marjorie Way</u>		Total square footage of proposed structure: _____	
Zone: <u>B-5</u>		Square footage of lot: _____	Tenant footage: _____
Tax Assessor's Chart, Block & Lot: <u>Chart # 247 Block # 2 Lot # 1</u>		Owner: <u>Marjorie Way Property</u> <u>807 See middle of page</u> <u>Guarantee, Inc</u>	
Lessee/buyer's name (if applicable): <u>MPS</u>		Applicant name, address & telephone: <u>Barb Smith Great</u> <u>158 Greely Street</u> <u>PH 03021</u> <u>Hudson, 800-227-6744 X352</u>	
Current use: <u>Commercial</u>		Proposed use: <u>same</u>	
If vacant, prior use: _____		How long has it been vacant? _____	
Project description: _____		Number of tenants in lot? _____	
Total s.f. of signage: <u>\$1.00 per s.f. \$65.00 plus</u> <u>\$30.00 base fee</u> <u>Fee: \$ 95.00</u>		Awing-without signage: <u>\$30.00 for first \$1,000</u> <u>plus \$7.00 each addic.</u> <u>Fee: \$ 1,000</u>	
Standing sign: <u>Yes X No</u>		Sign attached to building? <u>X Yes No</u>	
Dimensions: _____		Dimensions: _____	
Height: _____		Height: _____	
Awing: <u>Yes No</u>		Is awning backlit? <u>Yes No</u>	
Awing Height: _____		Length: _____	
Awing Depth: _____		Height off sidewalk: _____	
Is there any message, trademark or symbol on it? <u>X Yes No</u>		If Yes, total s.f. of panels/graphics: _____	
Please describe: <u>Install wall sign @ 775' and the</u> <u>and 15 375 SF - design attached</u>		List ALL existing signage and their dimensions: _____	
Contractor's name, address & telephone: <u>Barb Smith 800-227-6744 X352</u> <u>158 Greely Street Hudson, NH 03021</u>		Who should we contact when the permit is ready: <u>Barb Smith 800-227-6744 X352</u> <u>158 Greely Street Hudson, NH 03021</u>	
Mailing address: <u>158 Greely Street Hudson, NH 03021</u> <u>Phone: 800-227-6744 X352</u>		Once your permit is approved, we will notify you to come in and pick up your permit and review the requirements with our plan reviewer. Beginning work prior to receiving your permit will result in a violation fee of \$50.00.	

Please submit all of the information outlined in the Signage Application Checklist including a building sketch showing exactly where existing is and proposed signage will be located. Please include sketches/pictures of proposed signage. Failure to do so will result in the automatic denial of your permit.

At the discretion of the Planning and Development Department, additional information may be required prior to permit approval. For further information 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: Marjorie Way Date: 10-11-03

This is not a Permit; you may not commence any work until the Permit is issued.

MAGGIE

TAKE CARE

HI GAYLE, JUST ANOTHER SIGN FROM YOUR OLE STOMPIN
GROUNDS...HOPE ALL IS WELL, ARE YOU COMING DOWN THIS WAY
FOR THANKSGIVING?

TO:	CITY OF PORTLAND	FROM:	<i>Maggie Smith</i>
ATTN:	GAYLE GUERTEN	SUBJECT:	UPS PERMITS
FAX#:		DATE:	October 21, 2003 1:40 PM
CC:		Page 1 of:	

BARLO SIGNS
 SIGN ADVERTISING

FAX: (603) 882-7680 • Phone: (800) 227-5674 Ext. 352
 158 Greeley Street
 Hudson, NH, 03051
 margaret.smith@barlosigns.com

SCREEN PRINTING ELECTRONIC MESSAGE CENTERS


Date: October 16 2003

Attention: Portland, ME
Street: 211 Marginal Way
City/State/Zip: Portland, ME

**- Landlord Authorization Form -
FORM MUST BE SIGNED BY OWNER OF PROPERTY**


As owner of 211 Marginal Way Portland, ME

I hereby authorize Jennifer Robichaud / Margaret Smith / Kns Louhlin / Carol Bugbee or Hazel Hopkins, representative of Barto Signs of Hudson, NH, to APPLY FOR SIGN PERMITS for this site.

Owner's Signature: 
Owner's Printed Name: SUEL MANN PRESIA
Owner's Address: MARITIME WAY PERMITS LLC
555 WASHINGTON ST (A)
LEICESTER MA 02422

As owner of 211 Marginal Way Portland, ME

I hereby authorize Jenn Robichaud, Margaret Smith or Authorized Representative of Barto Signs of Hudson, NH, to APPEAR BEFORE THE PLANNING BOARD and/or SIGN REVIEW BOARD and/or the ZBA for this site.

Owner's Signature: 
Owner's Printed Name: SUEL MANN PRES
Owner's Address: MARITIME WAY PERMITS
555 WASHINGTON ST (A)
LEICESTER MA 02422

Reference JOB NAME: UPS Store # 279

Reference Job No. _____

PLEASE FAX BACK to Attn. Manna Benson

AND MAIL ORIGINAL

THANK YOU!

To: Barto Signs, 158 Crealey Street, Hudson, NH 03051 Fax # 603-882-7680

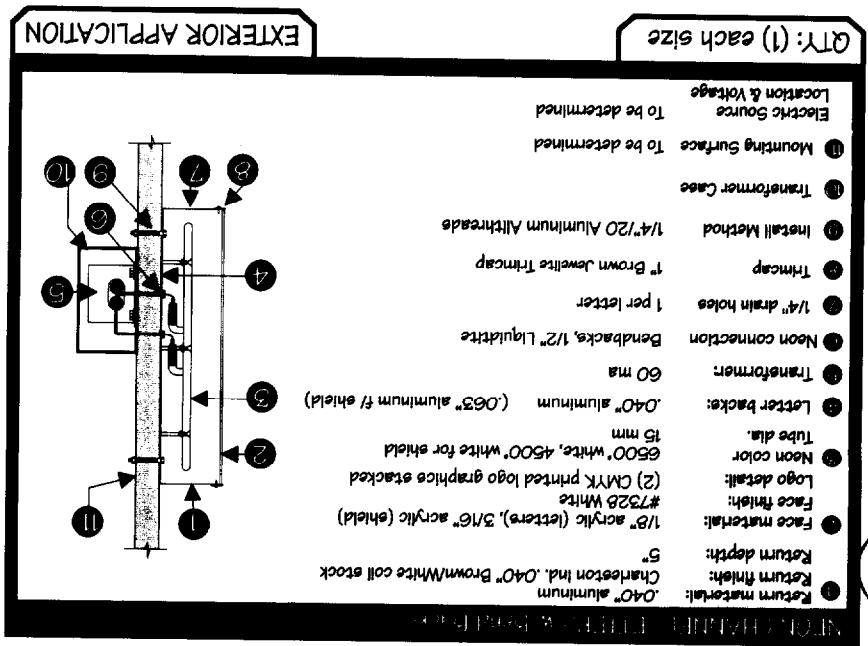
If you have any questions, please call me at 1-800-227-5674 ext 347

CERTIFICATE HOLDER
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING NUMBER WILL ENDEAVOR TO MAIL 30 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 ISSUER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE: *Edward Van Dyke*

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY EMPLOYMENT / SPECIAL PROVISIONS		POLICY NUMBER		POLICY EFFECTIVE DATE / EXPIRATION DATE	
B. WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROVISIONS EXCLUSIVE OF PROVISIONS UNDER SPECIAL PROVISIONS ONLY OTHER:		101198740		01/01/03	01/01/04
A. AUTOMOBILE LIABILITY ALL OWNED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS HIREN AUTOS ANY AUTO		1014994509		01/01/03	01/01/04
GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR		1014984493		01/01/03	01/01/04
EACH OCCURRENCE AGGREGATE AUTO ONLY - EM ACCIDENT OTHER THAN AUTO ONLY AUTO ONLY - EM ACCIDENT (for accident) BODY INJURY (for person) BODY INJURY (for person) BODY INJURY (for person) COMBINED SINGLE LIMIT (for accident)					
DAMAGE TO RENTED PREMISES (for accident) MED EXP (any and general) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPOR ASSO					
LIMITS EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (for accident) \$100,000 MED EXP (any and general) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPOR ASSO \$2,000,000					

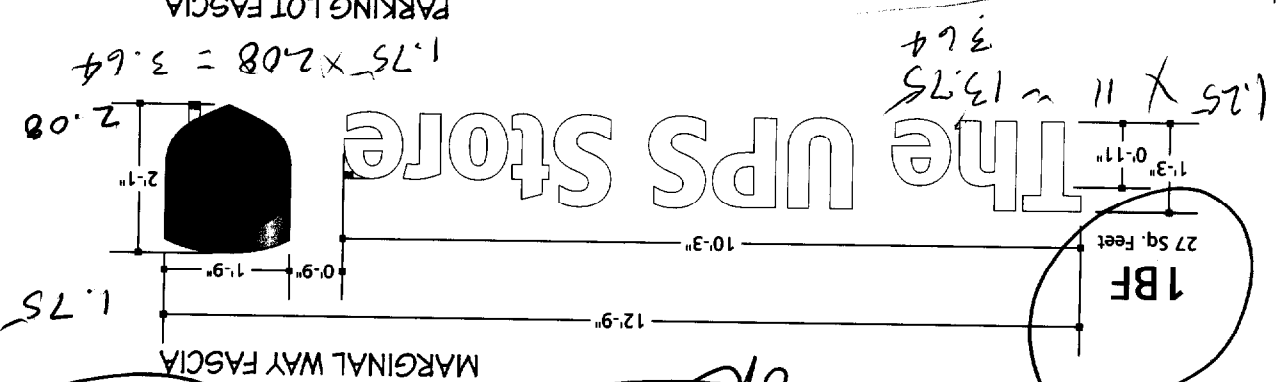
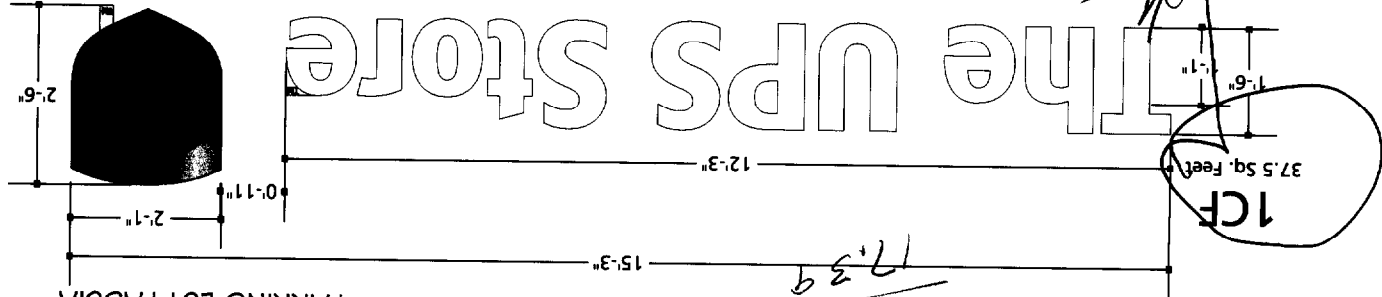
TYPE OF INSURANCE
 THIS POLICY IS ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING THE ABOVE, THIS POLICY IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICY CONTRACT OR OTHER DOCUMENT WITH WHICH THIS CERTIFICATE MAY BE ISSUED OR WHICH MAY BE REFERRED TO BY THIS CERTIFICATE.
 POLICY NUMBER: 1014984493
 POLICY EFFECTIVE DATE: 01/01/03
 POLICY EXPIRATION DATE: 01/01/04

GABLE SIGNS



29.5' x 2' 59" max

section
The under length of 29.5' x 2' 59" max
1.5 x 13.7 = 20.55
5.20
2.08 x 2.5 = 5.2



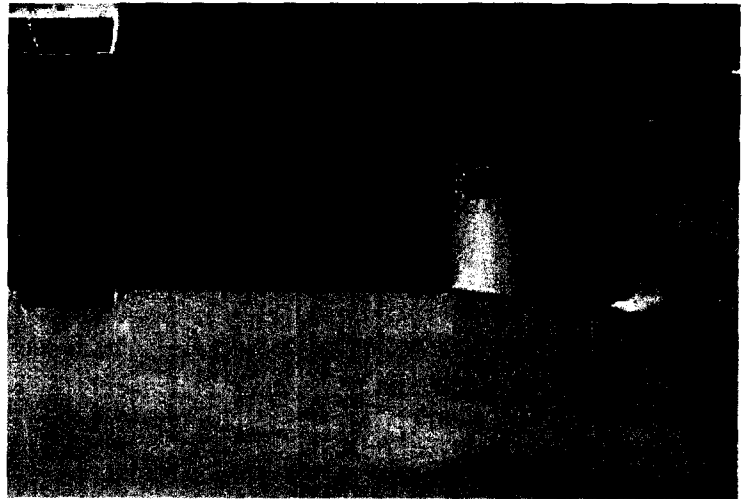
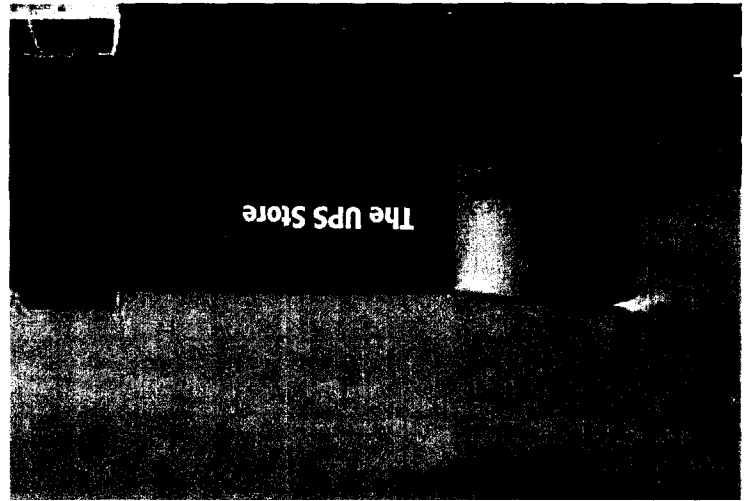
1.25 x 11 = 13.75
3.64
17.39
1.75 x 2.08 = 3.64
 MARGINAL WAY FASCIA
 PARKING LOT FASCIA

SCALE: 3/8" = 1"

Portland, ME
 CITY STATE
 279 STORE #

The UPS Store Elevation & Section

GABLESIGNS



The UPS Store

PHOTOS

Portland, ME

279

CITY, STATE

STORE#

EXISTING

SIGN TYPE NO EXISTING SIGNAGE

HEIGHT N/A

LENGTH N/A

OVERALL ABOVE GRADE

- Pylon/Monument
- Illuminated
- Directional
- Channel Letters
- Single Face
- Double Face
- Other
- Acrylic Face Replacement
- Sign Cabinet

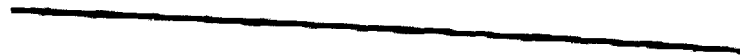
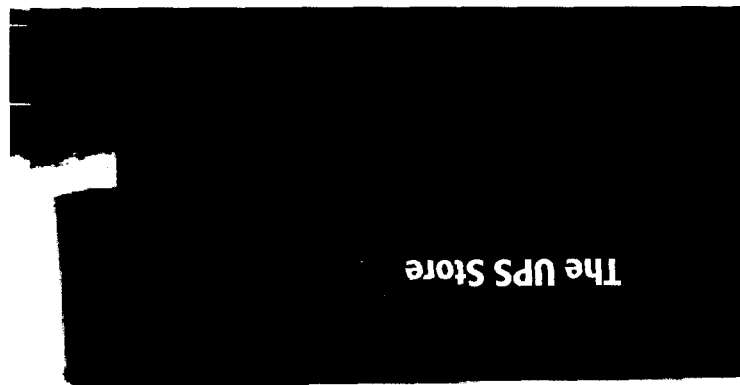
REPLACEMENT

SIGN TYPE (1) SET NEON CHANNEL LETTERS

NOTES SIGN BAND DIMENSIONS: 8'-7 1/2" x 21'-0"

8.625 x 21

2



The UPS Store

PHOTOS

Portland, ME

CITY, STATE

279

STORE#

EXISTING

SIGN TYPE NO EXISTING SIGNAGE

HEIGHT N/A

LENGTH N/A

OVERALL ABOVE GRADE

- Pylon/Monument
- Illuminated
- Directional
- Channel Letters
- Single Face
- Double Face
- Other
- Acrylic Face Replacement
- Sign Cabinet
- Vinyl
- Neon Channel Letters

NOTES

REPLACEMENT

SIGN TYPE (1) SET NEON CHANNEL LETTERS

NOTES SIGN BAND DIMENSIONS: 8'-7 1/2" x 16'-6"



The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

DISCLAIMER

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).
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).

IMPORTANT