Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

	HY OF PURI	LAND
Please Read Application And Notes, If Any, Attached	PERMIT	Permit Number: 050305
this is to certify that <u>Marginal Way Propert</u> as permission to <u>Install 1 illuminated 48</u>		
T 211 Marginal Way		024 C001001
provided that the person or person the provisions of the Statutes he construction, maintenance a his department.	s of Name and of the	epting this permit shall comply with a sences of the City of Portland regulating tures, and of the application on file in the sence of
Apply to Public Works for street line and grade if nature of work requires such information.	N ication inspect noming and with a permission problem to the ding or of the land or company of the land or company of the R NOTICE IS REQUIRED.	procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		
ire Dept		
lealth Dept.		
Appeal Board		
)ther		

PENALTY FOR REMOVING THIS CARD

Director-Building & Inspection Services

Phone: Phone 2077829654 Zone: 5-5 Ork: CEO District: 126.00 1 INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
Phone 2077829654 Zone: 5
Zone: Zone: Some: Some: Some: Some: Some: Some: Some: Signature: STRICT (P.A.D.) Signature: Strict (P.A.D.) Some: Some:
CEO District: 126.00 1 INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
Ork: CEO District: 126.00 1 INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
Ork: CEO District: 126.00 1 INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
126.00 1 INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
INSPECTION: Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
Use Group: Type: Signature: STRICT (P.A.D.) Approved w/Conditions Denied Date:
Signature: STRICT (P.A.D.) Approved w/Conditions
STRICT (P.A.D.) Approved w/Conditions
STRICT (P.A.D.) Approved w/Conditions
STRICT (P.A.D.) Approved w/Conditions
STRICT (P.A.D.) Approved w/Conditions
Approved w/Conditions Denied Date:
Date:
10-00-17/19/19
val
Historic Preservation
Not in District or Landmark
Does Not Require Review
Requires Review
Approved
Approved w/Conditions
Denied)
Date:
Batt.
e

DATE

PHONE

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life . www.portlandmaine.gov

Lee Urban- Director of Planning and Development Marge Schmuckal, Zoning Administrator

March 29, 2005

Shane Moffett Neokraft Signs, Inc. 686 Main Street Lewiston, ME 04024

RE: 211 Marginal Way – 024-C-001 – B-5 Zone – Application #05-0305

Dear Shane,

I am in receipt of your sign application to add a third building sign for the UPS Store business located at the above location. Your permit is being denied because it is not meeting the B-5 Zone sign requirements. Table 2.8 of the sign ordinance allows only one sign per tenant unless that individual tenant fronts on more than one street. The UPS Store tenancy fronts on only one street, Marginal Way. This office has allowed their frontage signage to be split in order to have signage over the main side entry. The rear of their tenancy does not abut a street and is therefore not entitled to have signage on the rear of their building.

Presently there is also a panel sign for the UPS Store on the common free standing sign located on the corner of Marginal Way and Franklin Arterial.

If you have any questions regarding this matter, please do not hesitate to call. It is possible to get a refund of your fee. The City usually holds back 10%. It will be necessary to bring in your original receipt to the front inspections desk to request a refund.

Very truly yours,

Marge Schmuckal Zoning Administrator

Cc: Deb Andrews, Planning

File

SIGNAGE APPLICATION

THIS IS NOT A PERMIT

CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below Building or Use Permit.

If you or the property owner owes real estate or personal property taxes or user charg on any property within the City, payment arrangements must be made before permits any kind are accepted.

Location/Address of Construction: 2/1 Marginal Way
Total Square Footage of Proposed Structure Square Footage of Lot 48 Sq. Feet 39,897.895.4. See plot plan
Tax Assessor's Chart, Block & Lot Number Chart# 24 Block# C Lot#(0) Wellesley, MA 02482-5948 Telephone #: 781-237-367
Lessee/Buyer's Name (If Applicable) Owner's Purchaser/Lessee Address: Total s.f of signs 48 x 335 Bear Hill Rd., Swite 302,00 \$96.0, plus \$30.00 Waltham, MA 0245/ Gerard Vaillan court 781-890-6245 TOTAL 100,00
Current use: retail Proposed use: retail Project description: Install (1) 3-16' single-faced internally illuminated aluminum wall sign.
Applicants Name, Address & Telephone: Neokraft Signs, Inc. 207-782-9654 Lewiston, ME 04340
Contractor's Name, Address & Telephone: Weokraft Signs, Inc. 307-782-9654 686 Main St. Lewiston, ME 04240 Who shall we contact when the permit is ready: Shane Moffett - Neokraft Signs, Inc. Telephone: 307-782-9654
If you would like it mighted what mailing address should we use 686 Main St. Lewiston, ME 04240

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

If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating t design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

Certification .

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 applicat 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: Jan / Watth Date: 3-15-05

Sign Permit Fee: \$30.00 plus \$2.00 per square foot.

A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 are \$6.00 for each additional \$1,000.00

BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR

IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE

Side Walk Signs Design/Location/Construction Standards

Quantity

One sign per establishment for each street frontage having a public entrance provided that all dimension and location standards are met. When standards would not otherwise permit a sign, a sign may consist of multiple listings.

Sign Dimensions

Single listing: Maximum width – 24 inches or such lesser width sufficient to retain 4 ½ feet of unobstructed sidewalk width perpendicular to major flow. Maximum height – 40 inches to top of sign in place. Minimum height 30 inches to top of sign in place.

Multiple: Maximum width - 30 inches or such lesser width sufficient to retain 4 ½ feet of unobstructed sidewalk width perpendicular to major flow. Maximum height - 4- inches to top of sign in place. Minimum height 30 inches to top of sign in place.

Location

Minimum distance between signs – 20 feet. Maximu m distance of sign from public entrance of advertiser 20 feet. The City may vary these distances for exceptional physical circumstances where public safety and streetscape aesthetics will be maintained. However, under no circumstances shall signs obstruct vehicular stops, benches, fire hydrants, or other street visual amenities. Signs shall be located near the curb rather than the building face.

Materials and Graphics

All signs shall be of an A-Frame type design, shall be constructed of durable, weather-resistant materials and finish, shall have no moving parts, and shall be non-electrified. All signs shall be maintained in a clean and original appearance. Sign materials, graphics, and finish shall be of a unified design and shall be compatible with the local streetscape. All signs shall have horizontal braces spanning each side of the sign to assure rigid support. Lettering shall be legible and consistent.

Sign Removal

All signs shall be removed when the business is closed or while any snow or ice exists on the walk within eight feet of the sign in any direction.

Insurance

No permit shall be issued unless the applicant has posted in advance with the City a suitable public liability insurance certificate in an amount adequate to protect the City.

Enforcement

A sign may be removed after notice to the owner and the permit, if issued, may be revoked if the sign does not conform to the standards herein.

For permit come to City Hall 389 Congress Street room 315 with:

1/2/2/

Certificate of liability insurance Drawing of sign showing dimensions Payment of .20 per sq. ft. plus \$30.00

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 21/ Marginal Way	ZONE:	6-5
OWNER: Tranum & Company, 555 Washir	ston St., Wellesley, MA	03482-5948
_ / _ /	in St., Lawiston, ME O	
ASSESSOR NO		
PLEASE CIRCLE APPROPRIATE SINGLE TENANT LOT? YES NO	TE ANSWER PAYER MULTI-TENANT LOT? WE	Car Skudi
	_	GHT
MORE THAN ONE SIGN? YES NO	DIMENSIONS HEI	GHT ·
MORE THAN ONE SIGN? (YES NO IS AWNING: YES NO IS AWNING BACKLYT? YES IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL OF		ALK DEAD
LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:	3 × 16 = 48	‡ 1
*** TENANT BLDG. FRONTAGE (IN FEET): 5-ea plo	t plan and drawing	
	· · · · · · · · · · · · · · · · · · ·	1

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 APPLICANTE SIGNATURE SIGNATURE OF APPLICANTE SIGNATURE SIGN

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

Please check off the following indicating that you have included the below items to expedite the process of this sign application:

"Certification of Liability" listing the City additionally insured if any portion of the sign abuts or encroaches on the public right of way, or can fall into the public right of way
abuts or encroaches on the public right of way, or can fall into the public right of way Letter of permission from the owner
A sketch plan indicating the following:
Drawing of the property showing all dimensions of the lot Location of all buildings and property setbacks from all buildings
Location of all buildings and property setbacks from all buildings
Driveways and abutting streets showing street frontage and any right of ways
Indicate on drawing the dimensions of all buildings on the lot
Define in footage the frontage of your business front
Indicate on drawing of existing signage and dimensions of each sign
Indicate on drawing all proposed signage and dimension of each sign
Sign area height and setback of each existing and proposed freestanding sign
☐ Certification of flammability required for awning/canopy at time of application
UL # required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
$oldsymbol{arphi}$

The Provisions of Section 3102.0 of the City's Building Code "The BOCA National Building Code 1999 edition" shall govern the construction, alteration, repair and maintenance of outdoor signs together with the associated appurtenant an auxiliary devices in respect to structural and fire safety. In accordance to section 3102.4.4 of BOCA construction documents and owners consent is all follows; "Before any permit is issued for the erection of a sign, Construction Documents shall be filed with the code official showing the dimensions, materials and required details of construction, including loads, stresses and anchorage. The applications shall be accompanied by the written contract of the owner or lessees of the premises upon which the sign is to erected. NO PERMIT CAN OR WILL BE ISSUED UNLESS THIS INFORMATION IS SBUMITTED AND APPROVED BY THE INSPECTIONS OFFICE.

ELECTRICAL SIGNAGE PERMITS/RESPONSIBLITIES

All sign companies or any persons engaged in the installation, interchange or maintenance of signage in the City of Portland must have the Electrician or Electrical Contractor who provided power to the sign(s) or associated equipment apply for an electrical permit in the Inspections Office.

It is the responsibility of your company to contact your sub-contractor or he owner to inform them of this policy. Whether your company does the final connections, which requires a valid Maine Electricians License or your sub-contractor provides this service; permits and inspections shall be required.

Failure to comply with this procedure may result in the denial of sign permits by this office for your company or its representation to install or interchange any future signage in the City of Portland.

INFORMATION REQUIREMENTS FOR SIGN PERMIT APPLICATION

Applicants for a sign permit will be asked to submit the following information to the Code Enforcement Office:

- 1. Proof of insurance
 - 2. Letter of permission from the owner
- A sketch plan of lot, indicating location of buildings, driveways and any abutting streets or right of ways. Lengths of building frontages and street frontages should be noted. (see attached)
- 1. Indicate on the plan all existing and proposed signs
- Computation of the following:
 - √ A) Sign area of each existing and proposed building sign
 - B) Sign area height and setback of each existing and proposed freestanding sign.
- A sketch of any proposed sign(s), indicating dimensions, materials, source of illumination and construction method (see attached).
 - 7. Certificate of flammability required for awning/canopy at time of application.
 - 8. UL # required for lighted signs at the time of application.
 - 9. You must have complete structural details (i.e. showing all connections to buildings and footing details) Specifics required or your permit may be held up

Fee for permit - \$30.00 plus \$\mathbb{J}_{00} \text{Oper square foot} \text{Fee for awning based on cost of work - \$30.00 for the first \$1,000.00, \$6.00 for each additional \$1,000.000.

NOTE: Once a sketch plan has been filed for a property, the code enforcement office will keep a record of the plan so that a new sketch plan will not be required for later changes to signage on the property. In such an instance, applicants will only be required to submit information applicable to the new sign.

Table 2.8 Sign Regulations by Zone

Nowntown Business (B-3), Urban Commercial (B-5), Waterfront Central (WC) and Waterfront Special Use (WSU) Zones

- * Signs located on individual landmark properties or within historic districts, P.A.D. overlay districts or P.A.D. encouragement areas shall, in addition to the provisions herein, be subject to article IX of this Code or the downtown urban design guidelines, as applicable. Where the design guidelines are more restrictive than these regulations, the design guidelines shall supercede the otherwise applicable dimensional standards.
- * Freestanding signs shall be allowed only if the front facade of the building (or individual tenant's/tenant's frontage in the case of a multi-tenant building) is set back a distance of at least 20 feet from either of the front facades of the abutting buildings (or other tenants' frontage in the same multi-tenant building).

Freestanding Signs * See (est	Single & Multi-tenant Buildings
Area	16 sq. ft.
Height	6 ft.
Minimuiti Setback	5 ft.
# Freestanding signs per lot	1 per abutting street

Building Signs

	Single Tenant Buildings	Multi-Tenant Buildings		
		Bldg. ID Sign and/or	Ind. Ground Floor	
		Upper Floor Tenant Signs	Tenant Signs	
Maximum cumulative permitted area of all building signs	na	na	па	
Sq. ft. per linear ft. of bldg. facade on which sign will be placed	2 sq. ft.	na	2 sq. ft. per ft. of tenant's building frontage	
Maximum % of wall area on which sign(s) is(are) to be placed	na	5%	na	
# bldg. signs permitted per lot	1 per facade + 1	1 per facade + 1 per tenant	1 per tenant (a)	

(a) If individual tenant fronts on more than one street, one additional building sign is permitted for each additional frontage.

TRANUM & COMPANY

In Boston 555 Washington Street Wellesley, MA 02482-5948 Telephone 781.237.3677 Figsamile 781.237.7657

In St. Thomas
Post Office Box 6001)7
St. Thomas, USVI 00801-6137
Telephone 340,777,5259
Facsimile 340,777,5759

Jtranum@aol.com

City of Portland 389 Congress Street Portland, ME 04101

March 1, 2005

To Whom It May Concern:

I, Joel Tranum, am the landlord of the property known as Bayside East, located at the intersection of Marginal Way and Franklin Street, using the address of 211 Marginal Way, Portland, 04101. I am aware of the desire of one of the tenants located in my property, The UPS Store, to erect an exterior 'cabinet sign' on the above referenced building. I write to inform the City of Portland that I would permit The UPS Store to erect such a sign providing only that it complies with the applicable ordinances of the City of Portland.

Respectfully yours,

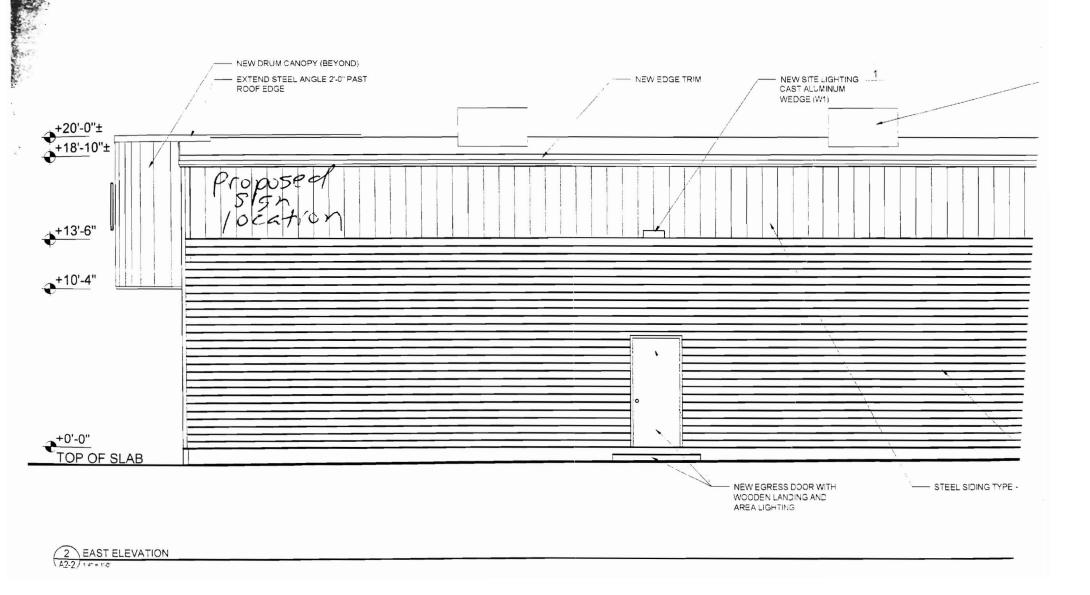
Joel Tranum, President Marginal Way Properties, Inc

cc:

J. Vaillancourt

P. Plumb

DOUCER Ck and Ship SMAXGreen Insurance Concepts O B. Devon Ave. Suite 154 Asca IL 60143-1251 Acno: 630-467-2620 Fax: 630-467- URED LSV III, LLC. dba The UPS Store #0279 235 Bear Hill Rd. Ste.30: Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUL MY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT: ANY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES D CICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUC TYPE OF INSURANCE POL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR X BUSINESS OWNERS GENT AGGREGATE LIMIT APPLIES PER: POLICY PRO POLICY PRO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO DEDUCTIBLE	2 4137 2 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	THIS CERT ONLY AND HOLDER, 1 ALTER THI INSURER A: INSURER B: INSURER C: INSURER C: INSURER C: INSURER E: INSURER TO: INSURER	CNA CLICY PERIOD INDICATE MS, EXCLUSIONS AND C	ED AS A MATTER OF IGHTS UPON THE CE E DOES NOT AMEND FORDED BY THE POLAFFORDING COVER A AFFORDING COVER A AFFORDING COVER A AFFORDING COVER A CONDITIONS OF SUCH EACH OCCURRENCE FIRE DAMAGE (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	RTIFICATE , EXTEND OR .ICIES BELOW.
CLAIMS MADE GENT AGGREGATE LIMIT APPLIES PER: POLICY JECT COMMERCIAL GENERAL LIABILITY ANY AUTO CARAGE LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO EXCESS LIABILITY CARAGE SHALL AND	2 4137 2 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	THIS CERT ONLY AND HOLDER, 1 ALTER THI INSURER A: INSURER B: INSURER C: INSURER C: INSURER C: INSURER E: INSU	CNA CITY PERIOD INDICATE HTHIS CERTIFICATE INSURERS CNA CLICY PERIOD INDICATE HTHIS CERTIFICATE MAS, EXCLUSIONS AND O DATE (MM/DD/YY) 10/16/05	ED AS A MATTER OF IGHTS UPON THE CE E DOES NOT AMEND FORDED BY THE POLAFFORDING COVER A AFFORDING COVER A AFFORDING COVER A AFFORDING COVER A CONDITIONS OF SUCH EACH OCCURRENCE FIRE DAMAGE (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	INFORMATION RTIFICATE EXTEND OR ICIES BELOW. ICIES BELOW
MAXGREEN INSURANCE CONCEPTS O. R. Devon Ava. Suite 154 ASCA IL 60143-1251 LONE: 630-467-2620 Fax: 630-467- URED LSV III, LLC. dba The UPS Store #0279 235 Bear Hill Rd. Ste.30: Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE NY REQUIREMENT. THE INSURANCE AFFORDED BY THE POLICIES OF COLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUC TYPE OF INSURANCE POLICIES OF GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE CLAIMS MADE 207227194 207455818	\$ 4137 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	INSURER A: INSURER A: INSURER B: INSURER C:	CONFERS NO R THIS CERTIFICAT E COVERAGE AF INSURERS CNA CLICY PERIOD INDICATI H THIS CERTIFICATE M AS, EXCLUSIONS AND O DATE (MM/DDYY) 10/16/05	ED. NOTWITHSTANDING AFFORDING COVER A AFFORDING COVER A AFFORDING COVER A ED. NOTWITHSTANDING AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	### \$100000 \$100000 \$100000 \$100000 \$200000
O R. Devon Ava. Suite 154 ABCA IL 60143-1251 LONG: 630-467-2620 Fax: 630-467- URED LSV III, LLC.	\$ 4137 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	INSURER A: INSURER B: INSURER C: INSURER C: INSURER C: INSURER C: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	E COVERAGE AF INSURERS CNA CLICY PERIOD INDICATI HITHIS CERTIFICATE M MS, EXCLUSIONS AND O POLICY EXPIRATION DATE (MM/DD/YY) 10/16/05	ED. NOTWITHSTANDING AY BE ISSUED OR CONDITIONS OF SUCH EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	ITS \$ 100000 \$ 30000 \$ 100000 \$ 200000
LSV III, LLC. dba The UPS Store #0279 235 Baar Hill Rd. Ste.30: Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUINT REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT: AY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS 8HOWN MAY HAVE BEEN REDUCTION OF ANY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY ANY AUT	\$ 4137 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	INSURER A: INSURER B: INSURER C: INSURER C: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	INSURERS CNA CLICY PERIOD INDICATI H THIS CERTIFICATE M AS, EXCLUSIONS AND O DATE (MM/DD/YY) 10/16/05	ED. NOTWITHSTANDING AY BE ISSUED OR CONDITIONS OF SUCH EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 10000 \$ 200000
LSV III, LLC. dba The UPS Store #0279 235 Bear Hill Rd. Ste.30. Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT: ANY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DELICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN TYPE OF INSURANCE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN TYPE OF INSURANCE POLICIES. GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY X ANY AUTO ALL OWNED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	\$ 4137 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	INSURER B: INSURER C: INSURER C: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM//DD/YY) 10/16/04	CNA DLICY PERIOD INDICATI H THIS CERTIFICATE M AS, EXCLUSIONS AND O DATE (MM/DD/YY) 10/16/05	ED. NOTWITHSTANDING AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 1000000 \$ 300000 \$ 10000 \$ 100000 \$ 2000000
LSV III, LLC. dba The UPS Store #0279 235 Bear Hill Rd. Ste.30. Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT: ANY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DELICIES. AGGREGATE LIMITS 8HOWN MAY HAVE BEEN REDUCTION. TYPE OF INSURANCE POLICIES DECRETAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	\$ 4137 DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJICED BY PAID CLAIMS. LICY NUMBER	INSURER B: INSURER C: INSURER C: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM//DD/YY) 10/16/04	CNA DLICY PERIOD INDICATI H THIS CERTIFICATE M AS, EXCLUSIONS AND O DATE (MM/DD/YY) 10/16/05	ED. NOTWITHSTANDING AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 1000000 \$ 300000 \$ 10000 \$ 100000 \$ 2000000
LSV III, LLC. dba The UPS Store #0279 235 Bear Hill Rd. Ste.30: Waltham MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUE ANY REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT: ANY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DELICIES. AGGREGATE LIMITS 8HOWN MAY HAVE BEEN REDUCTION. TYPE OF INSURANCE POLICIES OF OCCUR X BUSINGS OWNERS GENTA AGGREGATE LIMIT APPLIES PER POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	INSURER B: INSURER C: INSURER C: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM//DD/YY) 10/16/04	PLICY PERIOD INDICATE H THIS CERTIFICATE M MS, EXCLUSIONS AND O POLICY EXPIRATION DATE (MM/DD/YY) 10/16/05	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
DESTRUCTIONS ANY AUTO ANY AUTO ANY AUTO GARAGE LIABILITY X OCCUR ANY AUTO CLAIMS MADE CAMED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO CAMED AUTOS GARAGE LIABILITY COCUR CLAIMS MADE CLAIMS MADE CLAIMS MADE CLAIMS MADE CAMED AUTOS	DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	INSURER C: INSURER D: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
DESTRUCTIONS ANY AUTO ANY AUTO ANY AUTO GARAGE LIABILITY X OCCUR ANY AUTO CLAIMS MADE CAMED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY ANY AUTO CAMED AUTOS GARAGE LIABILITY COCUR CLAIMS MADE CLAIMS MADE CLAIMS MADE CLAIMS MADE CAMED AUTOS	DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	INSURER C: INSURER D: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
WAICHAM, MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUINT REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT. AY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCTIVE. TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROPERTOR AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	INSURER D: INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
WAICHAM, MA 02451 VERAGES HE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUINT REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT. AY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCTIVE. TYPE OF INSURANCE GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PROPERTOR AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	DED TO THE INSURED NAME OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	INSURER E: ED ABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM//DD/YY) 10/16/04	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
HE POLICIES OF INSURANCE LISTED BELOW MAVE BEEN ISSUENT REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT AY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN TYPE OF INSURANCE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN THE POLICIES DOCUMENCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY DOCUMENT OF PROPERTY OF THE PROPERTY OF THE POLICY PROPERTY OF THE POLICIES O	OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	DABOVE FOR THE PO TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DD/YY) 10/16/04	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
HE POLICIES OF INSURANCE LISTED BELOW MAVE BEEN ISSUENT REQUIREMENT. TERM OR CONDITION OF ANY CONTRACT AY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN TYPE OF INSURANCE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN THE POLICIES DOCUMENCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY DOCUMENT OF PROPERTY OF THE PROPERTY OF THE POLICY PROPERTY OF THE POLICIES O	OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DDYY)	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
NY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT ON PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DOLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED IN TYPE OF INSURANCE POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED COMMERCIAL GENERAL LIABILITY COCCUR DECT LOC AUTOMOBILE LIABILITY X ANY AUTO 207227194 ANY AUTO 207227194 LOC AUTOMOBILE LIABILITY 207227194 ANY AUTO 207227194 EXCESS LIABILITY ANY AUTO 207455818	OR OTHER DOCUMENT WIT DESCRIBED HEREIN IS SUBJ CED BY PAID CLAIMS. LICY NUMBER	TH RESPECT TO WHICH JECT TO ALL THE TERM POLICY EFFECTIVE DATE (MM/DDYY)	H THIS CERTIFICATE MAS, EXCLUSIONS AND OF THE CONTROL OF THE CONTR	AY BE ISSUED OR CONDITIONS OF SUCH LI EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR X BUSINGS OWNERS GENT AGGREGATE LIMIT APPLIES PER: POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	86	10/16/04	10/16/05	EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR X BUSINGS OWNERS GENT AGGREGATE LIMIT APPLIES PER: POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	86	10/16/04	10/16/05	EACH OCCURRENCE FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 100000 \$ 30000 \$ 10000 \$ 100000 \$ 200000
COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR X BUSINESS OWNERS GENT AGGREGATE LIMIT APPLIES PER: POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818				FIRE DAMAGE (Any one fire MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$300000 \$10000 \$1000000 \$2000000
CLAIMS MADE OCCUR X BUSINESS OWNERS GENT AGGREGATE LIMIT APPLIES PER: POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO 207227194 ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818				MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 10000 \$ 1000000 \$ 2000000
EXCESS LIABILITY X OCCUR RENT AGGREGATE LIMIT APPLIES PER: PPOLICY PROPERTY LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	49			PERSONAL & ADVINJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 1000000 \$ 2000000
GENT AGGREGATE LIMIT APPLIES PER: POLICY PRO- POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCERS LIABILITY X OCCUR CLAIMS MADE 207455818	49			GENERAL AGGREGATE PRODUCTS - COMP/OP AG	\$ 2000000
POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	49	10/16/04	10/16/05	PRODUCTS - COMP/OP AG	
POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	49	10/16/04	10/16/05		\$ 2000000
POLICY JECT LOC AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	49	10/16/04	10/16/05		
AUTOMOBILE LIABILITY X ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818	49	10/16/04	10/16/05		= 1
ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCERS LIABILITY X OCCUR CLAIMS MADE 207455818				COMBINED SINGLE LIMIT (Ea accident)	\$1000000
HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY ANY AUTO EXCERS LIABILITY X OCCUR CLAIMS MADE 207455818				BODILY INJURY (Per person)	\$
GARAGE LIABILITY ANY AUTO EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818		1		BODILY INJURY (Per accident)	\$
EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818				PROPERTY DAMAGE (Per accident)	:
EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818				AUTO ONLY - EA ACCIDENT	5
EXCESS LIABILITY X OCCUR CLAIMS MADE 207455818			1	OTHER THAN EA ACC	c s
X OCCUR CLAIMS MADE 207455818		}	ĺ	OTHER THAN AUTO ONLY: AGE	
X OCCUR CLAIMS MADE 207455818		 		EACH OCCURRENCE	\$1000000
		70/75/04	70/17/05		
DEDUCTIBLE	36	10/16/04	10/16/05	AGGREGATE	ļ:
DEDUCTIBLE			}		
, ,		ļ į	{		\$
X RETENTION \$10,000					\$
WORKERS COMPENSATION AND				TORY LIMITS EF	7
EMPLOYERS' LIABILITY 207455820	0.5	10/16/04	10/16/05	EL EACH ACCIDENT	\$ 1000000
40/433020		20/20/03	10/10/05	E.L. DISEASE . EA EMPLOYE	
	•	1		~	
OTHER		 		E.L. DISEASE . POLICY LIMI	T \$ 1000000
Business Owners 207227194	19	10/16/04	10/16/05	LOC 1	113568
				LoC 2	108160
RIPTION OF OPERATIONS/LOCATIONS/VENICLES/EXCLUSION ditional Insured Where Required rtificate Holder				Of	
RTIFICATE HOLDER Y ADDITIONAL INSURED;	INSURER LETTER:	CANCELLATI	ON		
	CITYOF	D SHOULD ANY OF	F THE ABOVE DESCRIE	ED POLICIES BE CANCELLE	D EFORE THE EXPIR
	CTITOF	- ;		R WILL ENDRAVOR TO MAIL	L _
		1			
City of Portland	City of Dorbland			NAMED TO THE LEFT, BUT	
389 Congress Street		1		OF ANY KIND UPON THE IN	BULER, ITS AGENTS (
Portland ME 04101		IMPOSE NO OBL	IGATION OR LIABILITY		1
		IMPOSE NO OSL REPRESENTATIV	LIGATION OR LIABILITY VES.		
		REPRESENTATION	IGATION OR LIABILITY	7	



INFORMATION FOR SIGN PERMIT IN PORTLAND MAINE

Address of Store: 211 Marginal Way, Portland, ME 04101

Tel: (207) 761-0173 Fax: (207) 761-2406

Size of Structure: 6,900 square feet, see attached plot plan.

Three tenants. The UPS store uses 2,100 of it.

Size of Total parcel: 29,897.89 square feet, see attached plot plan

Owner: Joel Tranum

Tranum & Company, Inc. 555 Washington Street Wellesley, MA 02482 Tel: (781) 237-3677 Fax: (781) 237-7657

E-mail: JTRANUM@aol.com

Leesee: LSV III, LLC (franchisee)

Contact Person: Gerard Vaillancourt

dba: The UPS Store # 0279

Offices at: 235 Bear Hill Road, Suite 302

Waltham, MA 02451 Tel: (781) 890-6245 Fax: (781) 890-4203

E-mail: ME164@theupsstore.com

Certificate of Insurance for "The City of Portland": Attached

Drawing of the sign: Attached (3 feet x 16 feet)

Existing cabinet is 7 inches deep

Questions: Do you need elevation drawings? Photographs of existing side? Do they need to know what we have for signs now? Photographs of them?

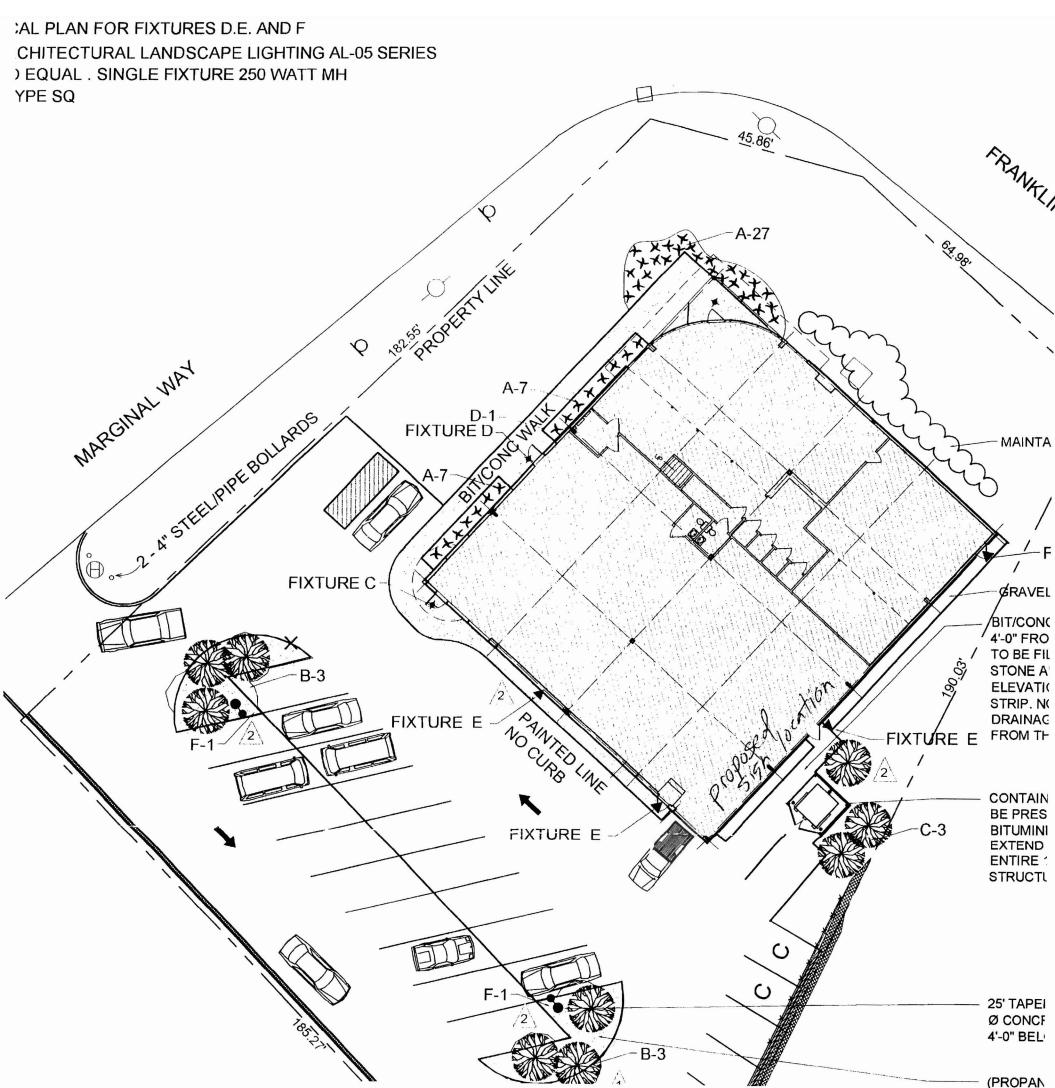


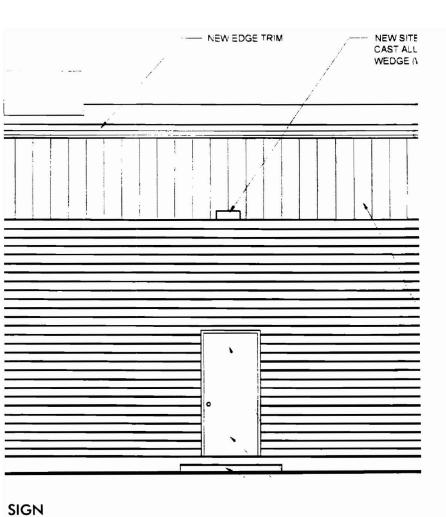
Neokraft Signs Inc. 686 Main Street Lewiston, Maine 04240 Telephone: 207.782.9654 Facsimile: 207.782.0009 1.800.339.2258 http://www.neokraft.com

Transmittal to	CITY OF PORTLAND		Date	03.18.2005	
	INSPECTIONS		Job No	o. 3484	
	389 CONGRESS STREET	-	Re.	UPS STORE	
	PORTLAND, ME 04101			MAIL	
Item	⊠ Attached	☐ Hand Delivered	☐ Under separate cover		
	☑ Shop Drawings	□ Prints	□ Samples	☐ Specifications	
	☑ Copy of letter	☐ Change Order	☐ Other		
	Copies Date	No.	Description		
	1 set 03.17.2005	3484	(1) COMPLETED SIGN	AND ELECTRICAL PERMIT	
			APPLICATIONS WITH I	NSURANCE CERTIFICATE, PLOT	
		PLAN, ENGINEERED DRAWING, AND LANDLORD C			
			LETTER FOR THE UPS	STORE LOCATED ON 211 MARGINAL	
			WAY.		
	1	7587	CHECK NUMBER 7587	IN THE AMOUNT OF \$171.00; \$126.0	
			FOR SIGN PERMIT; \$45.00 FOR AN ELECTRICAL PERMIT.		
Purpose	⊠ For approval	☐ No exception taken		□ Rejected	
	☑ For your use	☐ Make corrections noted		☐ Review and comment	
	☐ As requested	☐ Revise and resubmit		☐ Other	
Remarks	Please review the enclosed sign and electrical permit applications and if approved please go ahead and mail them to				
	my attention. If you have any questions feel free to call me anytime.				

If enclosures are not as noted kindly notify us at once.

OFFICE:\CLERICAL\TEMPLATES\TRANSMITTAL FORM.DOT





ALUMINUM CABINET

WHITE TRANSLUCENT LEXAN FACE WITH TRANSLUCENT GRAPHICS



Neokraft Signs Inc. 686 Main Street Lewiston, Maine 04240 Telephone: 207.782.9654 Facsimile: 207.782.0009 1.800.339.2258 http://www.neokraft.com

Custom Sign Fabrication

Except for designs supplied by the client, all ideas, plans or arrangements indicated on this drawing are copyrighted and owned by Neokraft Signs Inc. and shall not be reproduced, used by or disclosed to any person, firm or corporation without written permission of Neokraft Signs Inc.

UPS Store 3484

Location: 211 Marginal Way
Portland, ME

Drawing No.: 1 of 1

Drawn by: DS

Date: 03.17.2005

Gen Ref.:

LUSH TO METAL FASCIA

OOD SPANNERS BEHIND SHEETROCK/6" STEEL STUD WALL

INC-PLATED STEEL THREADED ROUGH-BOLTED CONNECTION C-PLATED STEEL NUTS AND

1/16" STEEL ANGLES AS NG SHOES, TOP & BOTTOM OF

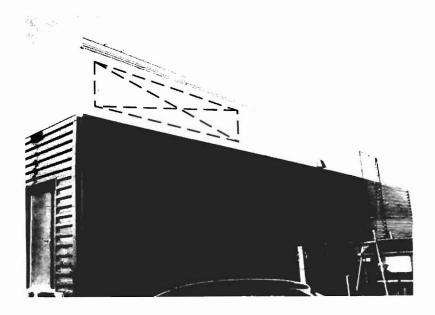


PHOTO-COMPOSITE NOT TO SCALE