JOB#:

CITY OF PORTLAND, MAINE — RESURGAM

Reviewed for Code Compliance
Inspections Division
Approved with Conditions

Date: _____

Barlo Storage

ITEM: A☐ B☐ C☐ D☐ E☐

☐ 2 Months Free

☐ Storage Charges Initiated:_____

Inspection/Police	Yes	No	N/A	Hours Requested FROM	TO
Base Insp Req:	☐	☐	☐		
Elec Insp Req:	☐	☐	☐		
Sign Insp Req:	☐	☐	☐		
Police Detail Req:	☐	☐	☐		

Special Note:

PERMIT REQUIRED	Yes	No	N/A	Hours Requested FROM	TO
ESD Required:	☐	☐	☐		
Sidewalk Permit Req:	☐	☐	☐		
Special Parking Req:	☐	☐	☐		

Special Note:

SITE CLEARANCE/CREW DETAILS ☐Interior ☐Exterior	Yes	No	N/A	Hours Requested FROM	TO
☐ Mall ☐Store Center ☐Private Lot					
Working Hours Prov.:	☐	☐	☐		
Sign Loc.Plan Prov.:	☐	☐	☐		
Site Utility Plan Prov.:	☐	☐	☐		
Client Req. on Site:	☐	☐	☐		
Mall has Barricades:	☐	☐	☐		
Parking Block off:	☐	☐	☐		
Vehicles moved:	☐	☐	☐		
Digsafe Complete:					
Called and Cleared:	☐	☐	☐		
Date Site Called:					
Contact:					

DANGER HIGH VOLTAGE

High Voltage:	☐	☐	☐		
Power Lines covered:	☐	☐	☐	Pole #:	

Special Note:

Sign Disposition

ITEM: A☐ B☐ C☐ D☐ E☐

☐Remove ☐Dispose ☐Leave At Site ☐By Others ☐Store at Barlo

☐ Neon CL's ☐ LED CL's ☐ Wall Sign ☐ Pylon ☐ Monument

Size of Existing Signage: L: 30" W: 36" D:_____

Size of Existing CL's: Letter Size:_____ Length:_____

INSTALLATION NOTES

ITEM: A☐ B☐ C☐ D☐ E☐

Complete Truck Access to Sign: ☐ Yes ☐ No

Explain any access problems:

Crane Height Required:

Basket Loc. Req.: ☐ Under Boom ☐ On Top of Boom

# of Crews/Trucks:

Special State License: ☐ Yes ☐ No

INSTALLATION CREW GENERAL NOTES

Barlo Electrician Req.: ☐ Yes ☐ No

Site Electrician Req.: ☐ Yes ☐ No

Equip. Rental Type: ☐ Yes ☐ No

Special Vehicle Type: ☐ Yes ☐ No

Overnight Req: ☐ Yes ☐ No #:

Special Note:

INSTALLATION CREW CHECKLIST

Barlo Compliance Stickers	Barlo MFG:	☐ Yes ☐ No
	Load Sticker	☐ Yes ☐ No
	U.L. Sticker	☐ Yes ☐ No
Primary Power Connected:		☐ Yes ☐ No
If No was Sign Generator Tested:		☐ Yes ☐ No
Site Clean upon Completion:		☐ Yes ☐ No
Completion Photo's Taken:		☐ Yes ☐ No
Lockout/Tagout Procedure Complete:		☐ Yes ☐ No
Technician:		
Wall Access Adequate:		☐ Yes ☐ No
Barlo Safety Procedures Complete:		☐ Yes ☐ No
Install/Crew:_____	Date:_____	

SURVEY COMPLET

Date:_____

☐ Other:_____

Digsafe GPS Location:

High VoltageLines: ☐ Yes ☐ No

Building/Sign Drop Lines: ☐ Yes ☐ No

Lines to be covered: ☐ Yes ☐ No

Pole #:

INSTALL DAY NOTES FROM P.M./CREW MGR. NOT ON PRINTS:

CREW FEEDBACK : SHOP CONCERNS/PROBLEMS/Q.C. (I.E. PATTERS, MFG, MTG, ETC.)

RETURN TRIP REQUIRED (IF YES EXPLAIN):

CREW FEEDBACK : SITE CONDITIONS/ SURVEY ISSUES/ ETC.

Job Name: CONVENIENT MD PORTLAND

Location: 191B MARGINAL WAY, PORTLAND, ME 04101

Design Specifications Accepted By:

Client:

Landlord:

Drawn By: MGB / JN
Sales Rep: KELL
PM: HL
Date: 03/07/16

BARLO SIGNS
158 Greeley St., Hudson, NH 03051
(603) 882-2638 Fax (603) 882-7680
For Service: 800-227-5674

PROJECT APPROVAL	
Design:	Date:
Engineering:	Date:
Estimating:	Date:
Sales:	Date:
Production:	Date:
Installation:	Date:

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