DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT



This is to certify that BAYSIDE

Located At 185 LANCASTER

Job ID: 2011-03-522-SIGN

CBL: 025 - - F - 001 - 001 - - - -

City of Portland

has permission to 74 sf sign

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY.
PENALTY FOR REMOVING THIS CAR



BUILDING PERMIT INSPECTION PROCEDURES

Please call 874-8703 or 874-8693 (ONLY)

or email: buildinginspections@portlandmaine.gov

City of Portland

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.
- Permits expire in 6 months. If the project is not started or ceases for 6 months.
- If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.

1.

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUOPIED.



PORTLAND MAINE

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

PERMIT ISSUED

Director of Planning and Urban Development

Penny St. Louis

Job ID: 2011-03-522-SIGN Located At: 185 LANCASTER

CBL: <u>025 - - F - 001 - 001 - - - - -</u>

City of Portland

Conditions of Approval:

Zoning

The Free-standing signs shall be setback 5' from the property lines as required by Ordinance.

Building

Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

City of Portland, Maine - Building or Use Permit Application

389 Congress Street, 04101 Tel: (207) 874-8703, FAX: (207) 8716

Tob No: Date Applied: 2/28/2011			CBL: 025 F - 001 - 001	PERI	MIT ISS	UED	
Location of Construction: 165 LANCASTER	Owner Name: BAYSIDE		Owner Address: ONE CANAL PLA PORTLAND, ME -	ty of Portland	Phone:		
Business Name:	Contractor Name: Moffett, Shane		Contractor Addresses Main LEWIST		Phone: 782-9654		
Lessee/Buyer's Name:	Phone:		Permit Type: SIGN PERMIT	1	Zone: B-7		
Past Use: Professional Offices	Proposed Use: SAME: Professional		Cost of Work:	1/50	-	CEO District:	
(Career Counseling Center)	Center) – d	Fire Dept:	Approved Dented N/A		Inspection: Use Group: Type; Signature:		
Proposed Project Description 165 Lancaster St. / Signs			Pedestrian Activities District (P.A.D.)				
Permit Taken By: Gayle			Zoning Approval				
1. This permit application d Applicant(s) from meeting Federal Rules. 2. Building Permits do not it septic or electrial work. 3. Building permits are voice within six (6) months of the False informatin may investigate and stop all work.	include plumbing, d if work is not started the date of issuance. validate a building	Shoreland Wetland Flood Zo Subdivis Site Plan	ion Property	Zoning Appeal Variance Miscellaneous Conditional Use Interpretation Approved Denied Date:	Not in Dist of Does not Rec Requires Rec Approved Approved was Denied Date:	or Landmark quire Review view	

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 O	DE WORK TITLE	DATE	PHON

Report generated on Mar 4, 2011 10:06:51 AM Page 1 Job Type: Signs **Job Description:** 165 Lancaster St. / Sign Job Year: 2011 **Building Job Status Code:** Pin Value: 786 Initiate Plan Review Tenant Name: **Job Application Date:** Public Building Flag: N **Tenant Number: Estimated Value: Square Footage:** 74 Related Parties: BAYSIDE Property Owner NeoKraft - Shane Moffett GENERAL CONTRACTOR **Job Charges** Fee Code Charge **Permit Charge Net Charge** Payment Receipt **Payment Payment Adjustment Net Payment** Outstanding Adjustment Amount Date Number Description Amount Amount **Amount** Amount Balance Location ID: 3470 **Location Details** Census Tract GIS X GIS Y GIS Z GIS Reference Longitude Latitude Alternate Id Parcel Number 003902 025 F 001 001 -70.26131 43.661105 Location Type Subdivision Code Subdivision Sub Code Related Persons Address(es) 1 185 LANCASTER STREET WEST **Location Use Code** Variance **Use Zone Code** Fire Zone **Inside Outside** District **General Location** Inspection Area Jurisdiction Code Code Code Code Code Code Code **OFFICE & BUSINESS URBAN** DISTRCIT 4 CENTRAL BUSINESS COMMERCIAL SERVICE DISTRICT Structure Details Structure: Electric for permit#101176 Occupancy Type Code: Structure Status Type Square Footage Estimated Value Address **Structure Type Code** 185 LANCASTER STREET WEST Office & Professional Buildings 0

Longitude Latitude GIS X GIS Y GIS Z GIS Reference

User Defined Property Value

0

1

Alarms Commercial

Alarms Commercial

Structure: freestanding & wall sign

Occupancy Type Code:



Job Summary Report Job ID: 2011-03-522-SIGN

Report generated on Mar 4, 2011 10:06:51 AM

Page 2

Structure Type Code	Structure Status Type S	Square Footage Est	timated Value	Address		
Hospitals & Institutional Building	gs 0			185 LANCASTER STREE	T WEST	
Longitudo Latitudo GIS Y	GIS Y GIS Z GIS Refere	nce			User Defined Property	Value
Longitude Latitude GIS X	010 . 010 1 010					
Longitude Latitude 013 X					Alarms Commercial	0

Permit #: 20111645

Permit Data								
Location Id	Structure Description	n Permit Status Permi	t Description Issue Date	Reissue Date	Expiration Da	te		
3470	freestanding & wall sign	n Initialized						
			Inspec	tion Details				
Inspection I	Inspection Type	Inspection Result Status	Inspection Status Date	Scheduled Sta	rt Timestamp	Result Status Date	Final Inspection Flag	-
			Fee	s Details				
Fee Code Description		Permit Charge Adjustment	Permit Charge Adj Remark		Receipt Number	Payment Pay Amount	ment Adjustment Amount	Payment Adj Comment
Signs	\$178.00							

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.

		
Location/Address of Construction: 165	LANCASTER STREET	57-189 Lancater
Tax Assessor's Chart, Block & Lot Chart#35 Block# F Lot#	Owner: BAYSIDE II LLC Of BOULDS I CANAL PLAZA PORTLAND, ME OYI	Telephone: 207-871-1290
Lessee/Buyer's Name (If Applicable) MAINE MENTAL HEALTH PARTNERS COMMUNITY COUNSELING CENTER 78 ATLANTIC PLACE SOUTH PORTLAND, ME 04106	Contractor name, address & telephone: NEOKRAFT SIGN Co. 686 MAIN STREET LEWISTON, ME 04240 207-782-9654	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$
: Who should we contact when the permit is ready:	PETER M. 274 (NEDKAGE)	787-96 EV BLOG. FRONT. CHESTAN
Tenant/allocated building space frontage (fee Lot Frontage (feet) 460 ± Current Specific use: 0 FFICE If vacant, what was prior use:	1	BLAG. FRONT. LANGAS
Proposed Use: OFFICE		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes in the sign? Yes in the sign? Yes in the sign? Yes No Is awning. Yes No Is awning. Is there any communication, message, trademark If yes, total s.f. of panels w/communications, message.	ng backlit? Yes No ming: Depth: to or symbol on it? Yes No	
Information on existing and previously permitt Freestanding (e.g., pole) sign? Yes N Bldg. wall sign? (attached to bldg) Yes N Awning? Yes No Sq. ft. area or	Dimensions: J-6"Y/0"-1"	(2-0NBLOG); 4×3-6"
A site sketch and building sketch showing exact sketches and/or pictures of proposed signage a		cated must be provided.
Please submit all of the information out Failure to do so may result in the autom		ation Checklist.
n order to be sure the City fully understands the ful dditional information prior to the issuance of a per- uilding Inspections office, room 315 City Hall or c	mit. For further information visit us on-line	velopment Department may request at www.portlandmaine.gov, stop by the
hereby certify that I am the Owner of record of the name athorized by the owner to make this application as his/he permit for work described in this application is issued, I eas covered by this permit at any reasonable hour to enfo	er authorized agent. I agree to conform to all ap- certify that the Code Official's authorized repres-	plicable laws of this jurisdiction. In addition, if entative shall have the authority to enter all
Signature of applicant:	- NEOKIAFT Date:	2-23-11
This is not a permit; you	may not commence ANY work until the p	ermit is issued.



Signage/Awning Permit Application Checklist

All of the following information is required and must be submitted. Checking off each item as you prepare your application package will ensure your package is complete and will help to expedite the permitting process.

Ø	Certificate of Liability listing the City as additional insured if any portion of the sign abuts or encroaches on any public right of way, or can fall into any public right of way.
Ø	Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
V	A sketch plan of lot indicating location of buildings, driveways and any abutting streets or rights of way, lengths of building frontages, street frontages and all existing setbacks. Please indicate on the plan all existing and proposed signs with their dimensions and specific locations. Be sure to include distance from the ground and building façade dimensions for any signage attached to the building.
ϕ	A sketch or photo of any proposed sign(s) indicating content, dimensions, materials, source of illumination, construction method as well as specifics of installation/attachment.
)/(Certificate of flammability required for awning or canopy.
	A UL# is required for lighted signs at the time of final inspection.
	Pre-application questionnaire completed and attached.

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

Details for sign fastening, attachment or mounting in the ground.

'ermit fee for awning-without-signage is based on cost of work: 30.00 for the first \$1,000.00, \$9.00 per additional \$1,000.00 of cost.

Photos of existing signage

lase application fee for any Historic District signage is \$65.00.



CERTIFICATE OF LIABILITY INSURANCE

OP ID: FF

DATE (MM/DD/YYYY)
02/08/11

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

Certifica	ate noticel in fled of such el	idorsement(s).					
PRODUCER 207-239-3500		207-239-3500	CONTACT NAME: Lonnie Fowle				
TD Insurance, Inc. (ME) 207-775-0339 PO Box 406 Portland, ME 04112-0406 TD Insurance, Inc.		207-775-0339	PHONE (A/C, No. Ext): 207-239-3668 FAX (A/C, No): 2		-775-0339		
			ADDRESS: lonnie.fowle@tdinsure.com				
			PRODUCER CUSTOMER ID # COMMU28				
TD IIIGUI	b insurance, inc.		INSURER(S) AFFORDING COVERAG	E	NAIC #		
INSURED	Community Counsel		INSURER A : Philadelphia Indemnity Ins Co	>	18058		
	c/o Maine Mental Hea	aith Prtnrs	INSURER B .				
	78 Atlantic Place South Portland, ME (24106	INSURER C .				
	South Fortiand, ME	4106	INSURER D :				
			INSURER E :				
			INSURER F :				

COVERAGES

CERTIFICATE NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	TYPE OF INSURANCE	ADDL S		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	s	
	GENERAL LIABILITY						EACH OCCURRENCE	\$	1,000,000
Α	X COMMERCIAL GENERAL LIABILITY			PHPK604312	08/24/10	08/24/11	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	100,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	\$	5,000
							PERSONAL & ADV INJURY	\$	1,000,000
			1				GENERAL AGGREGATE	\$	3,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER.						PRODUCTS - COMP/OP AGG	\$	3,000,000
	POLICY PRO- JECT LOC							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO						BODILY INJURY (Per person)	\$	
1	ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$	
	SCHEDULED AUTOS HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$	
	NON-OWNED AUTOS		1					\$	
								\$	
	UMBRELLA LIAB OCCUR		1				EACH OCCURRENCE	\$	
	EXCESS LIAB CLAIMS-MADE		1		3		AGGREGATE	\$	
	DEDUCTIBLE							\$	
	RETENTION \$							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- TORY LIMITS ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A			1		E.L. EACH ACCIDENT	\$	
	(Mandatory in NH)						E.L DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (Att	tach A	ACORD 101, Additional Remarks Sche	dule, if more space is	required)			

CERTIFICATE HOLDER	CANCELLATION			
City of Portland 389 Congress St	CITYP01	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.		
Portland, ME 04101		AUTHORIZED REPRESENTATIVE TD Insurance, Inc.		
T T				



MMTA WORKERS' COMPENSATION TRUST

142 WHITTEN ROAD P.O. BOX 5198 AUGUSTA, MAINE 04332-5198 PH. (207) 623-1807 FAX (207) 622-6804

CERTIFICATE OF PARTICIPATION

Member Name: NEOKRAFT SIGNS, INC.

Member #: NE0008B

Coverage Period: January 1, 2011 through December 31, 2011

COVERAGE LIMITS PER OCCURRENCE

WORKERS' COMPENSATION - STATUTORY LIMITS (Excluding discrimination as set forth in MRSA Title 39-A, Sections 218 and 353)

EMPLOYERS LIABILITY -

\$1,000,000

This Certificate of Participation is issued pursuant to Rule Chapter 250 §III (O)(3)(a). It is the responsibility of the certificate holder to verify that group self-insured coverage for the above referenced member is still in force.

Brian/D/Parke, Trust Administrator

Peter Murphy

Date sent:

Tue, 15 Feb 2011 15:58:22 -0500

From:

"Susan McFarland" <mcfars1@memhp.org>

To:

<peter@neokraft.com>

Subject:

Fwd: Re: 165 Lancaster St.

Do you need more than this?

Sue

LAMPLOND APPROVAL

Sue McFarland - PMP
Project Manager
Maine Mental Health Partners
78 Atlantic Place
So. Portland, ME 04106
207-842-6507
MCFARS1@memhp.org

>>> "Ureneck, Paul" <<u>Pureneck@Boulos.com</u>> 2/15/2011 12:46 PM >>> Owner liked it. Approved.

Paul Ureneck Vice President Project Management CBRE Boulos

This message was sent from my I phone. Please excuse spelling and/or grammatical errors.

On Feb 14, 2011, at 4:25 PM, "Susan McFarland" < mcfars1@memhp.org> wrote:

- > Paul here is our proposal for the external signage for CCC. I believe we need owner approval on these! Once we receive, we will then go to the city for permitting.
- > Please let me know if you need anything else.
- > Thanks
- > Sue
- >
- > Sue McFarland PMP
- > Project Manager
- > Maine Mental Health Partners
- > 78 Atlantic Place

```
> So. Portland, ME 04106
> 207-842-6507
> MCFARS1@memhp.org
>>> "Peter Murphy" <peter@neokraft.com> 2/14/2011 4:22 PM >>>
> Sue, attached are the revised drawings for signs at 165 Lancaster
Street. We've added a
> drawing showing the location of the signs. Sign Type A, the primary
ground sign, is still
> shown as non-lit; if lit, the size will remain the same. Peter Murphy
> Neokraft Signs Inc.
> 686 Main Street
> Lewiston, ME USA 04240
> 207-782-9654
> http://www.neokraft.com
> CONFIDENTIALITY NOTICE: This email message, including any attachments,
is for the use of the intended recipient(s) only and may contain
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> CONFIDENTIALITY NOTICE: This email message, including any attachments, is for the use of the intended recipient(s) only and may contain information that is privileged, confidential, and prohibited from unauthorized disclosure under applicable law. If you are not the intender recipient of this message, any dissemination, distribution, or copying of this message is strictly prohibited. If you received this message in error, please notify the sender by reply email and destroy all copies of the original message and attachments.

- > <Part.001>
- > <FL014995 MAIMEN COMM.Couns.MAIN ID SIGN 20110214.PDF>

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343 Forest Avenue Portland, ME 04101 tel 207.874.1030 tty 207.874.1043 tel 207.874.1044 email info@commcc.org www.commcc.org

February 15, 2011

City of Portland 389 Congress Street Portland, ME 04101

To Whom It May Concern:

Please find enclosed applications for external sign permits at Community Counseling Center's new location of 165 Lancaster Street in Portland's Bayside neighborhood. After several years of searching for a new home, we are thrilled to be relocating to this renovated space on Friday, April 22nd, 2011. Community Counseling Center is a leading provider of quality mental health and family services, working with over 10,000 individuals and families each year throughout the Greater Portland area.

On behalf of our Board of Directors, I am writing to request the City of Portland's permission in erecting directional signage at the Chestnut Street entrance to our client parking lot. The main entrance of our new building faces Lancaster Street, and we feel that these "Enter" and "Exit" signs will enhance the ability for clients and visitors to find our new location when traveling on Chestnut Street.

We are currently located at 343 Forest Avenue, a very high traffic area. We will be losing much of that public visibility on Lancaster Street, and feel that these directional signs will guide those visiting our new home. Additionally, the nature of our clientele requires us to be as clear and concise as we can.

Since previous reviews of our building plans with the City of Portland, we have adjusted the traffic flow in our main parking lot to accommodate the City's requests. In the spirit of working together within the Zoning Board guidelines, we hope that you will allow us to utilize this directional signage and increase the ease of access to our new facility.

If you have any questions, please do not hesitate to contact Susan McFarland, Project Manager, at (207) 842-6507 or mcfars1@memhp.org.

Sincerely,

Mary Jane Krebs

Interim President & CEO

May Jan Kuly



Neokraft Signs Inc. 686 Main Street Lewiston, Maine 04240

Telephone: 207.782,9654
Facsinile: 207.782,0009

Dept. of Building Inspection Main http://www.neokraft.com

Transmittal to	CITY	of portland		Date	02.23.2011			
	BUILDI	ng inspection	NS	Job No	o. 13238			
	389 C	ongress stre	ΕT	Re.	SIGN PERMIT			
	PORTL	AND, ME 04101	1					
ltem	Attack Attack	ched	☐ Hand Delivered	☐ Under separate cover				
	☐ Shop Drawings		☐ Prints	☐ Samples	□ Specifications			
	□ Сору	y of letter	☐ Change Order	○ Other				
	Copies Date		No.	Description				
	1	02.23.2011	13238	electrical and sig	n permit applications with			
				supporting docum	MENTS			
Purpose	□ For approval		☐ No exception taken		☐ Rejected			
	☐ For y	our use	☐ Make corrections noted		■ Review and comment			
	☐ As re	equested	☐ Revise and resubmit		○ Other			
Remarks	The attached materials are being submitted for electrical and sign permits for work being done at							
	Comm	unity Counseling	Genter on 165 Lancast	er Street. I've included	a letter from Community			
	Counseling Center Interim President and CEO, Mary Jane Krebs, which explains the rationale for the							
	signs shown in the attached drawings. These materials will be sent electronically to Lannie Dobson.							
	As always, please don't hesitate to contact me if you should have any questions or if you should							
	require any additional information.							
	Copy t	in FILE			From PETER MURPHY			

Table 2.8 Sign Regulations by Zone

Towntown 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).

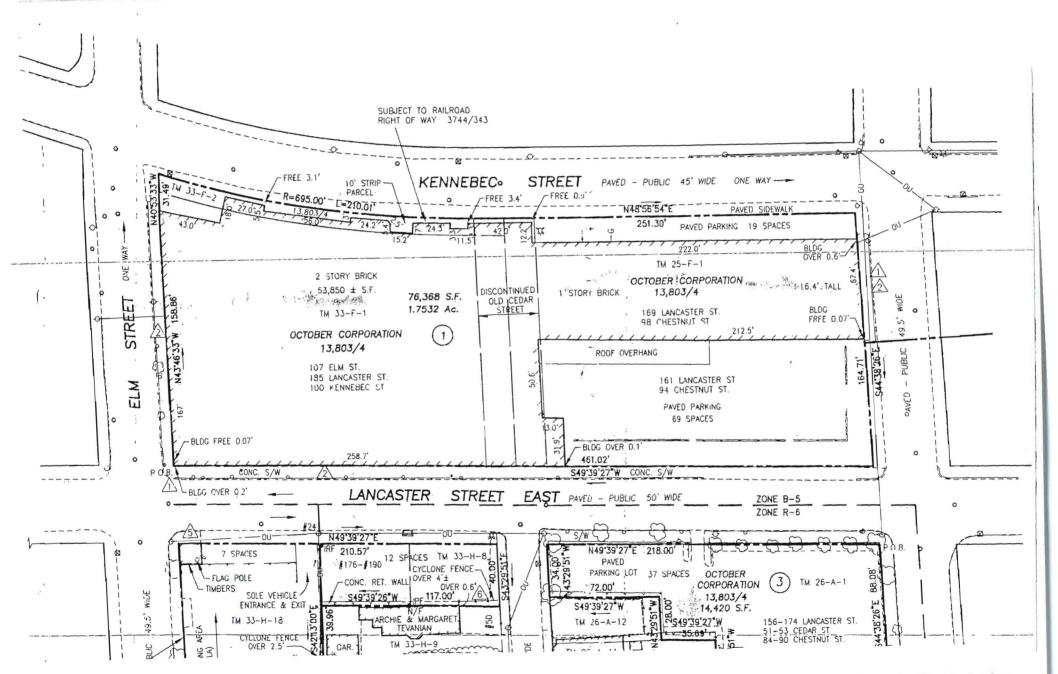
Freestanding Signs * See (est	Single & Multi-tenant Buildings
Area	16 sq. ft.
Height	6 ft.
Minimum Setback	5 ft.
# Freestanding signs per lot	1 per abutting street

Building Signs

	Single Tenant Buildings	Multi-Tenant Buildings		
		Bldg. ID Sign and/or Ind. Ground		
		Upper Floor Tenant Signs	Tenant Signs	
Maximum cumulative permitted area of all building signs	na	na	na	
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.

SITE PLAN





¥.-%

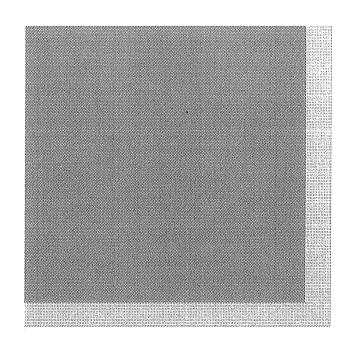
Peter Murphy peter@neokraft.com cell: 207.650.7632

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

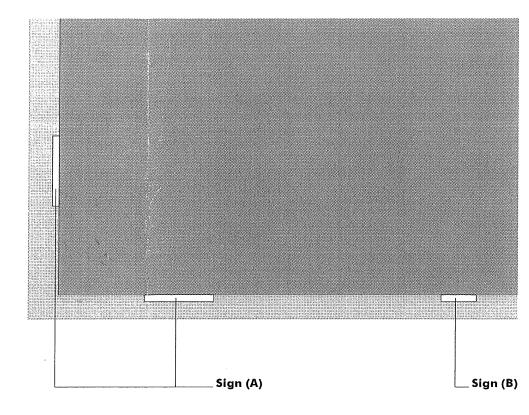
Custom Sign Fabrication

file: Disabled
Col: Default screen

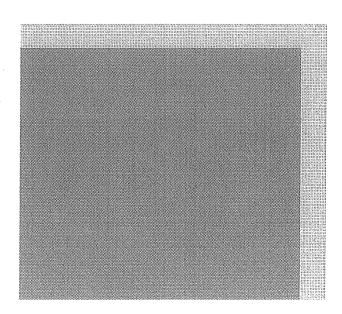
EXISTING SIGN SITE PLAN



ELM ST

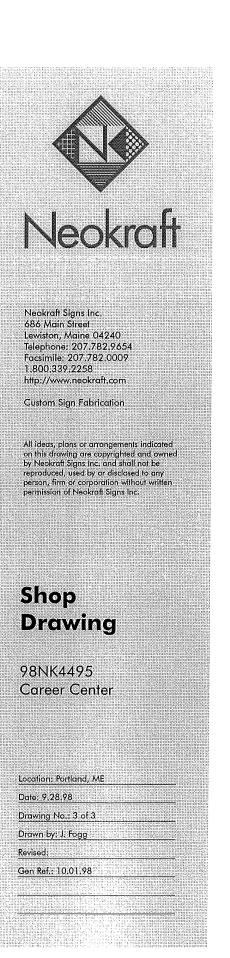


LANCASTER ST.

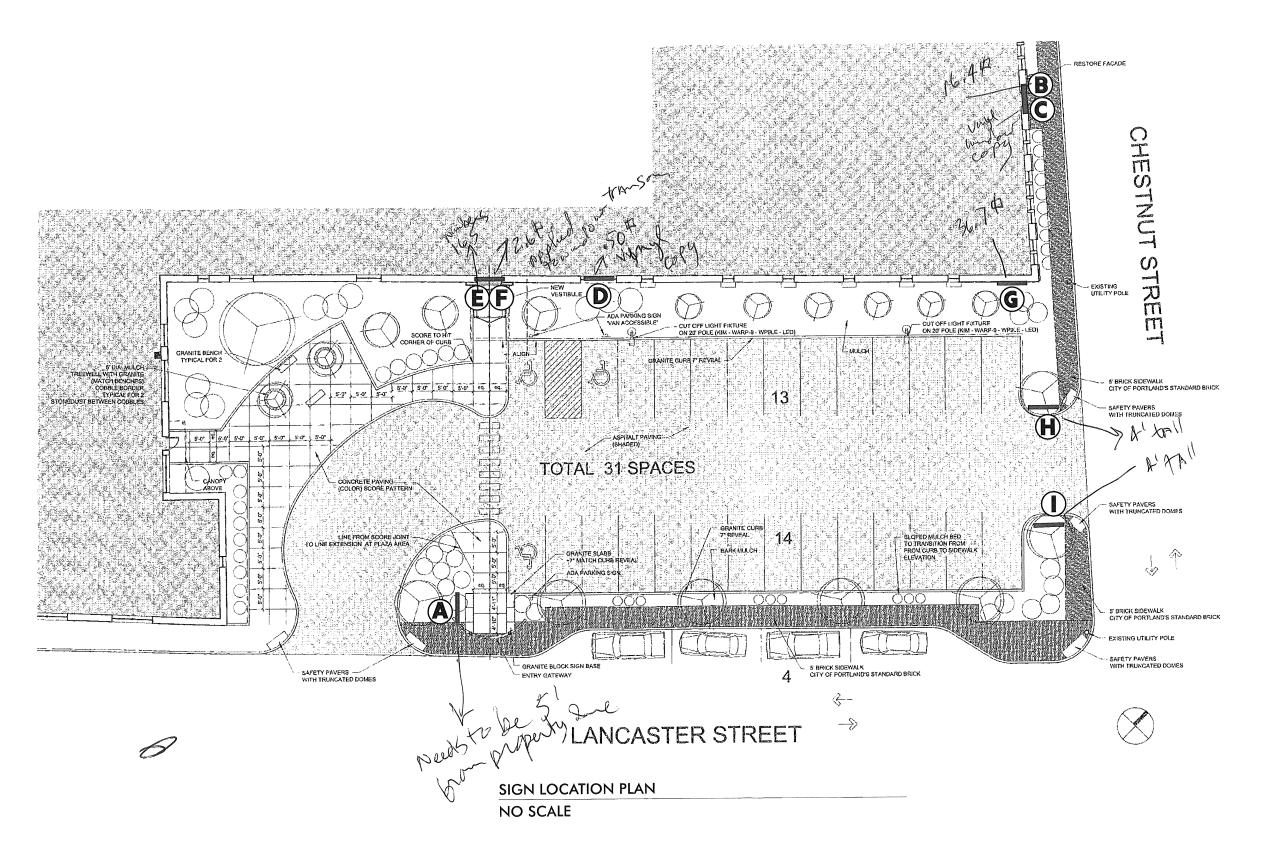


Plan View

NTS



G:\DESIGN2\4495shp.cdr Thursday, October 01, 1998 12:06:32 PM





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

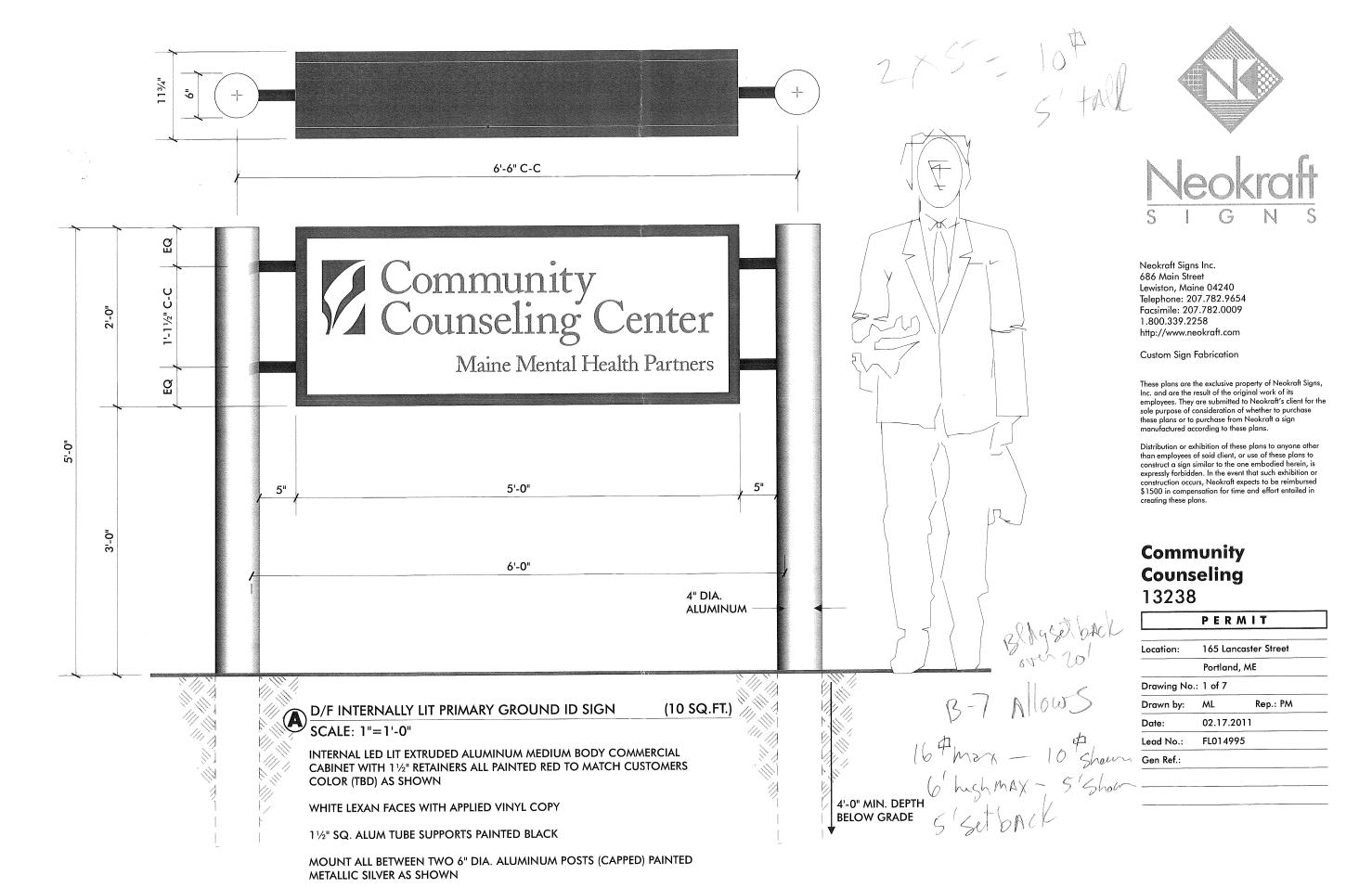
Custom Sign Fabrication

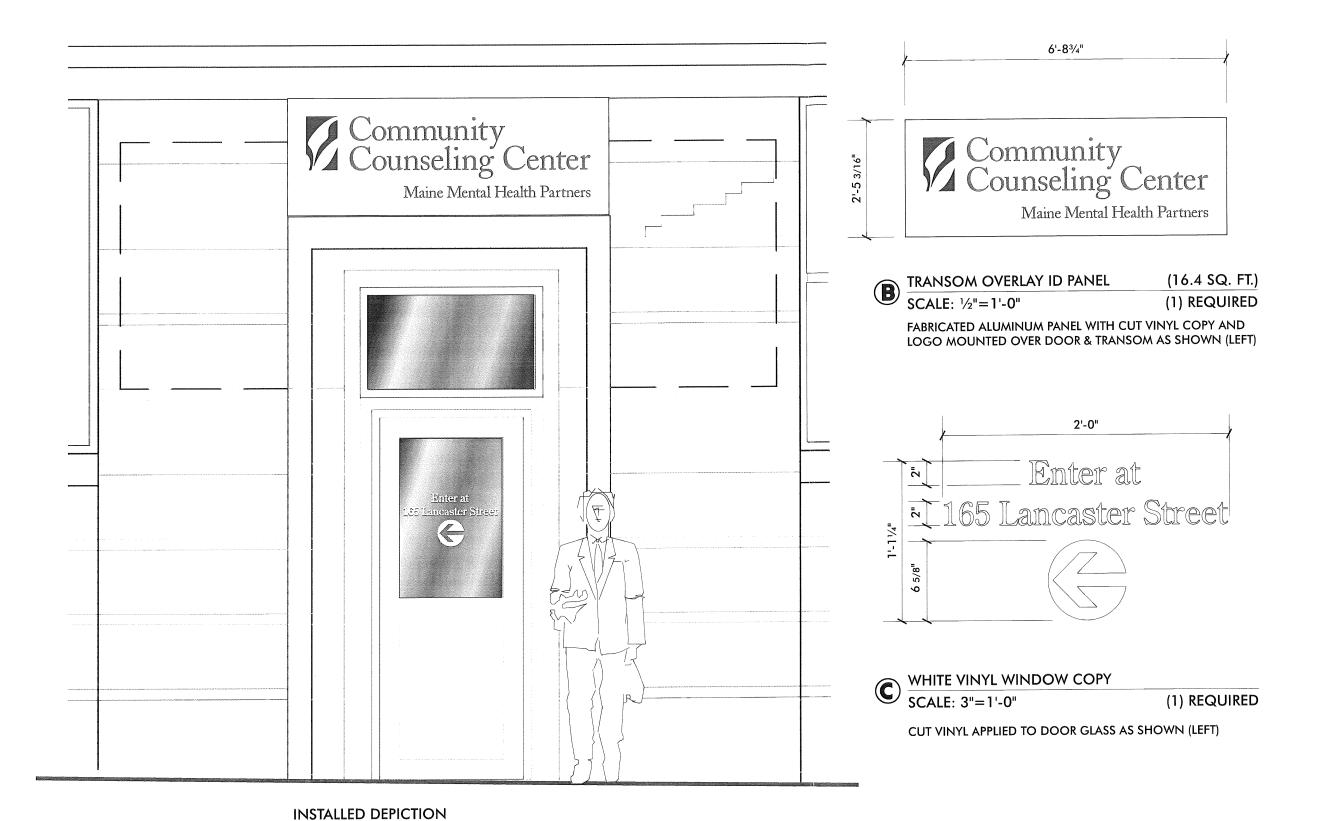
These plans are the exclusive property of Neokraft Signs, Inc. and are the result of the original work of its employees. They are submitted to Neokraft's client for the sole purpose of consideration of whether to purchase these plans or to purchase from Neokraft a sign manufactured according to these plans.

Distribution or exhibition of these plans to anyone other than employees of said client, or use of these plans to construct a sign similar to the one embodied herein, is expressly forbidden. In the event that such exhibition or construction occurs, Neokraft expects to be reimbursed \$1500 in compensation for time and effort entailed in creating these plans.

Community Counseling 13238

Location:	165 Lancaster Street		
	Portland	d, ME	
Drawing No	.: 7 of 7		
Drawn by:	ML	Rep.: PM	
Date:	02.17.2	011	
Lead No.:	FL0149	95	
Gen Ref.:			







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Custom Sign Fabrication

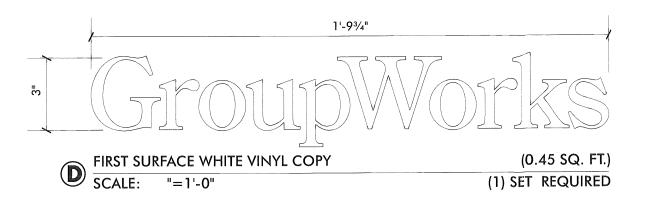
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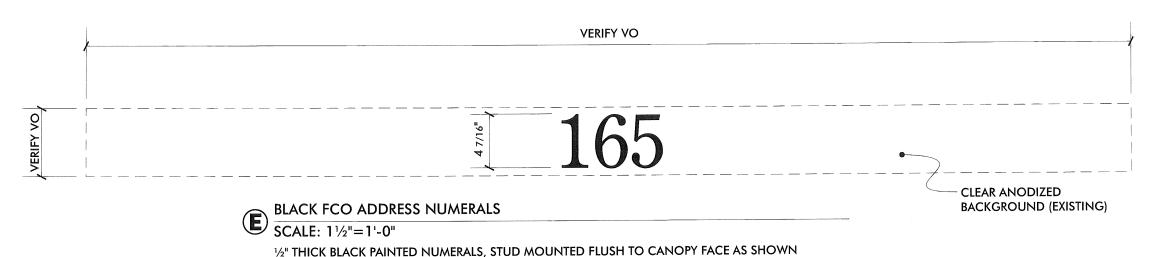
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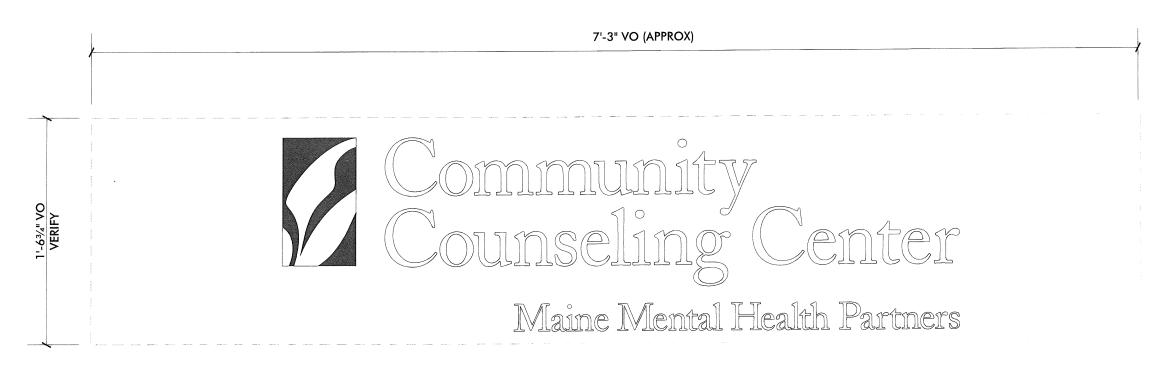
Community Counseling 13238

Location:	165 Lancaster Street		
	Portland	d, ME	
Drawing No	.: 2 of 7		
Drawn by:	ML	Rep.: PM	
Date:	02.17.2011		
Lead No.:	FL014995		
Gen Ref.:			

SCALE: 1/2"=1'-0"







(2.6 SQ. FT.)

Neokraf

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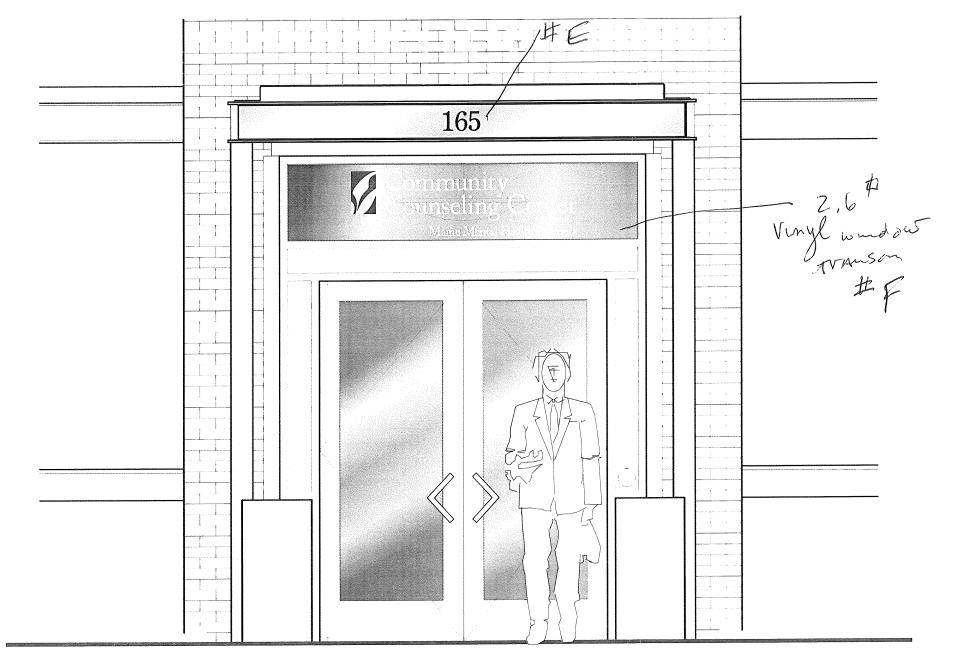
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Community Counseling 13238

Location:	165 Lar	caster Street
	Portland	d, ME
Drawing No	.: 3 of 7	
Drawn by:	ML	Rep.: PM
Date:	02.17.2011	
Lead No.:	FL014995	
Gen Ref.:		

SCALE: 1½"=1'-0"

CUT WHITE VINYL COPY AND LOGO WITH RED VINYL LOGO ELEMENTS APPLIED TO TRANSOM WINDOW AS SHOWN



ENTRANCE ELEVATION - INSTALLED SIGNAGE

SCALE: 1/2"=1'-0"



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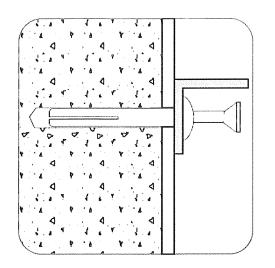
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Community Counseling 13238

Location:	165 Lancaster Street		
	Portlan	d, ME	
Drawing No	.: 4 of 7		
Drawn by:	ML	Rep.: PM	
Date:	02.17.2	2011	
Lead No.:	FL0149	95	
Gen Ref.:			



DRIVE-ANCHOR MOUNTING DETAIL

NOT TO SCALE

ZAMAC HAMMER SCREW™ DRIVE ANCHORS AS MFG BY POWERS FASTENERS, NEW ROCHELLE, NY OR EQUAL:

ZAMAC ALLOY WITH CARBON OR STAINLESS STEEL, ONE-STEP DRIVE ANCHOR FEATURING A PHILLIPS TYPE HEAD AND A SCREW THREAD FOR USE IN CONCRETE, BLOCK, BRICK OR STONE

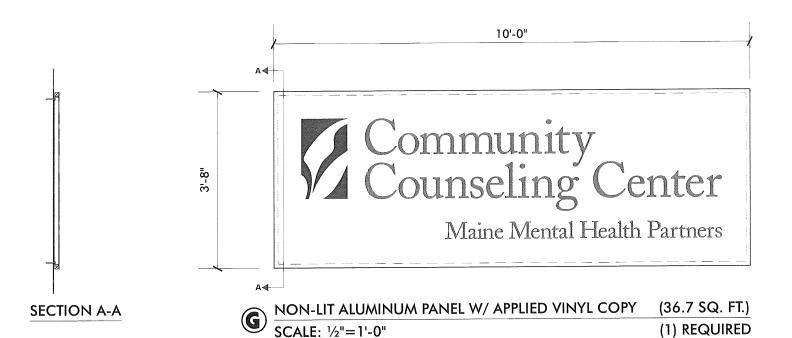
SIZE RANGE: 1/4" DIA. x 3/4" TO 3" LONG

				144 mph	
Letter	Letter	Face		wind Face	Wind Side
Depth	Height	Агеа	Side Area	Load Force	Load Force
(in.)	(in.)	(sq.in.)	(sq.in.)	(lbs.)	(lbs.)
0.25	36	777.6	9	447	6
0.25	22	290.4	5.5	167	4
0.25	18	194.4	4.5	112	3
0.25	15	135	3.75	78	3

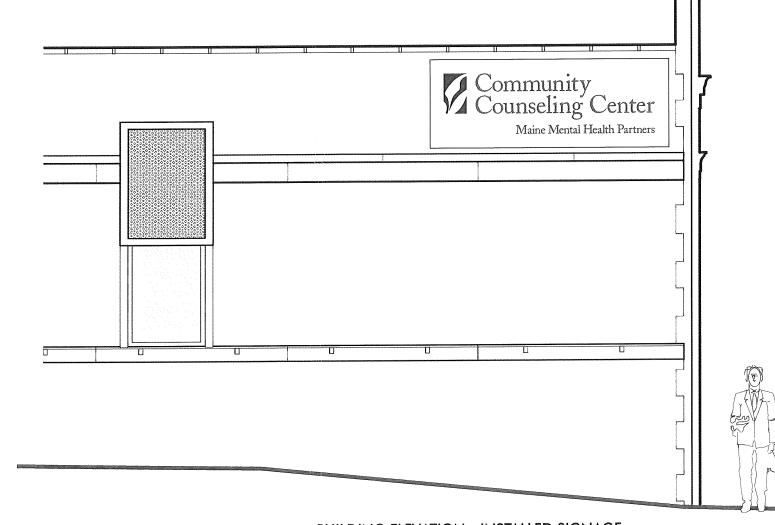
Screw				
minor			Total screws	
thread	Screw	Minimum	cross-	Total Screws
diameter	Area	No. of	sectional	Shear
(in.)	(psi/each)	Screws	area (sq. in.)	Strength lbs.
0.25	0.049	3	0.147	2356

Assumptions and Facts

The point of failure will be the screws in shear at the minor thread diameter. Tensile trength at break for Stainless Steel exceeds 16,000 psi. 144 mph wind speed is equal to 82.7 lbs./sq. ft. (0.574 lbs./sq.in.). Average face area of a sign letter is 0.6 x height squared.



FABRICATED WHITE ALUMINUM PANEL ON ALUM. TUBE FRAME WITH APPLIED VINYL COPY MOUNTED TO BUILDING WALL IN POSITION SHOWN USING NAIL-IN MASONRY FASTENERS AND ANGLE BRACKETS (SEE FASTENER DETAIL)



BUILDING ELEVATION - INSTALLED SIGNAGE

SCALE: 1/4"=1'-0"



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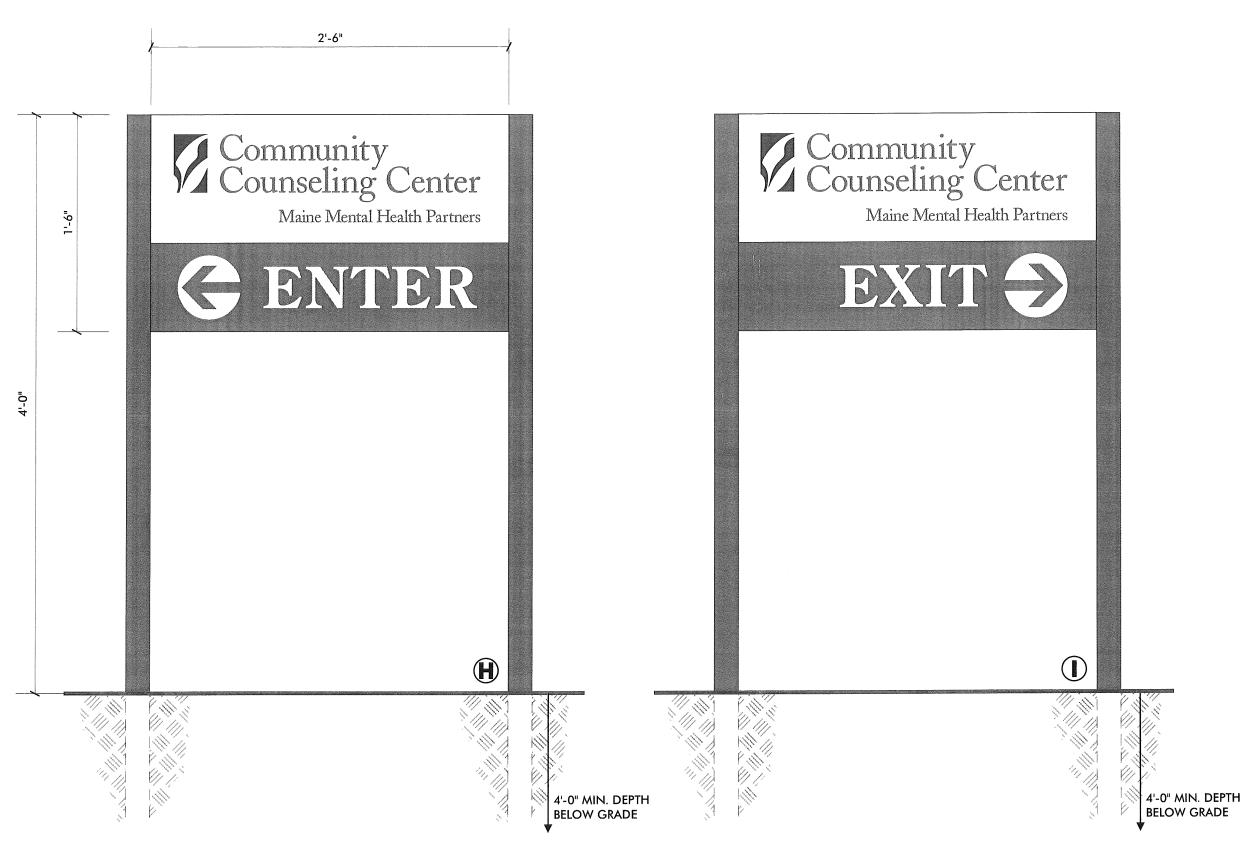
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Community Counseling 13238

Location:	165 Lancaster Street		
	Portland	d, ME	
Drawing No	.: 5 of 7		
Drawn by:	ML	Rep.: PM	
Date:	02.17.2011		
Lead No.:	FL014995		
Gen Ref.:			





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Community Counseling 13238

	PER	MIT	
Location:	165 Lancaster Street		
	Portland, ME		
Drawing No	.: 6 of 7		
Drawn by:	ML	Rep.: PM	
Date:	02.17.2011		
Lead No.:	FL014995		
Gen Ref.:			

NON-LIT D/F DIRECTIONAL SIGNS

(3.75 SQ. FT. / EACH)

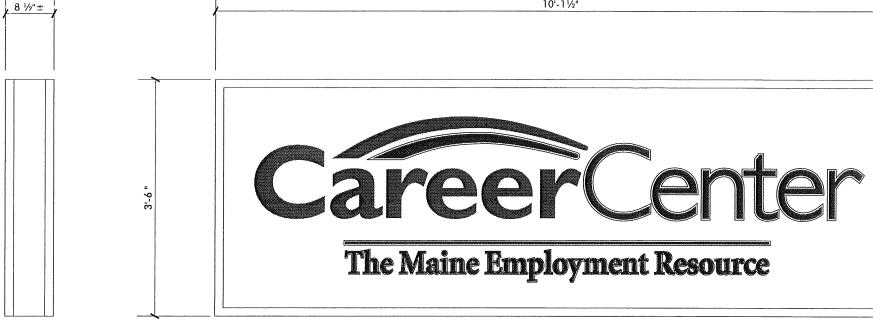
SCALE: 11/2"=1'-0"

(2) REQUIRED

WHITE ALUMINUM SIGN PANELS WITH APPLIED VINYL GRAPHICS MOUNTED BETWEEN PAINTED TWIN ALUMINUM POSTS (DIRECT BURIAL)

Color profile: Disabled Composite Default screen EXISTING SIGNS FOR OTHER TENANT

10'-11/2"



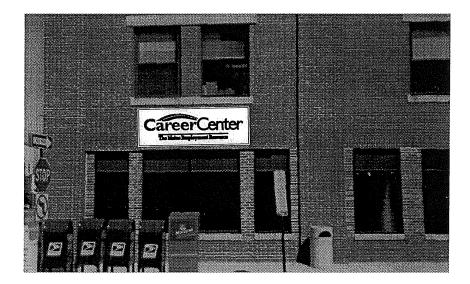
End View

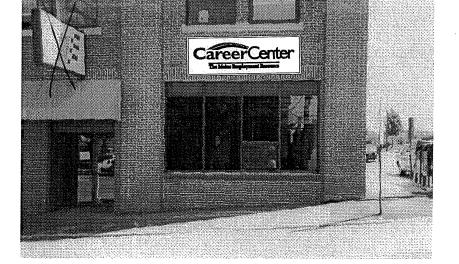
(Sign A) S/F Lighted Wall Sign $\frac{3}{4}$ " = 1'-0" (2) required

ABC Type II cabinet with 11/2 flat retainers painted white

White Lexan face (transl.)

White opaque background GSP Scarlet Red transl. vinyl graphics as shown GSP Duranodic vinyl graphics as shown with white transl. outline





Pictorial View (Lancaster Street) 1/8" = 1'-0"

Pictorial View (Elm Street) 1/8" = 1'-0"

G:\DESIGN2\4495shp.cdr Thursday, October 01, 1998 12:06:30 PM



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Shop Drawing

98NK4495 Career Center

Location: Portland, ME

Date: 9,28.98

Drawing No.: 1 of 3

Drawn by: J. Fogg

Revised:

Gen Ref.: 10.01.98



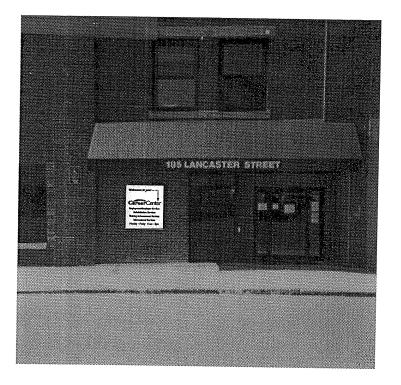
SignComp Series 2 slide cabinet painted white

Clear 1/8" Lexan face - Second surface graphics

GSP Scarlet Red transl. vinyl graphics as shown GSP Duranodic transl. vinyl graphics as shown Black vinyl subcopy as shown

End View

(Sign B) Non-Lighted I.D Sign $\frac{3}{4}$ " = 1'-0" (1) required



Pictorial View (Lancaster Street)
1/8" = 1'-0"



Neokraft

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Shop Drawing

98NK4495 Career Center

Location: Portland, ME

Date: 9,28,98

Drawing No.: 2 of 3

Drawn by: J. Fogg

Revised:

Gen Ref.: 10,01,98