DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK





This is to certify that

APOSTOLIC FAITH ASSEMBLY /Sign Concepts LLC / Ron Nevers

PERMIT ID: 2013-00212

Located at

243 CUMBERLAND AVE

CBL: 026 L017001

has permission to Replace existing building sign with 3' x 5' perpendicular sign with electronic message center

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 clsoed-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 procured prior to occupancy.

Fire Prevention Officer

Challe 2/11/3

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY THERE IS A PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES Please call 874-8703 (ONLY) or email: buildinginspections@portlandmaine.gov

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.

REQUIRED INSPECTIONS:

Final Inspection

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 OCCUPIED.

City of Portland, Maine - Bu	Permit No: Date Applied For:		CBL:					
389 Congress Street, 04101 Tel	: (207) 874-8703, Fax: (207) 87	2013-00212	02/01/2013	026 L017001				
Location of Construction:	Owner Address:	Phone:						
243 CUMBERLAND AVE	APOSTOLIC FAITH ASSEM	BLY	331 CONGRESS S	T				
Business Name: Contractor Name:			Contractor Address:	Phone				
	Sign Concepts LLC / Ron Nevers			75 Bishop Street Portland				
Lessee/Buyer's Name	Phone:		Permit Type:					
			Signs - Permanent					
Proposed Use:		Propose	d Project Description:					
First Assembly of God Church Replace existing building sign with 3' x 5' perpendicular sign with electronic message center								
Dept: Zoning Status: Note:	Approved w/Conditions Re	viewer:	Ann Machado	Approval D	ate: 02/11/2013 Ok to Issue: 🗹			
 Any LED display SHALL NOT continuously flash, nor continuously blink, and SHALL NOT scroll. Electronic message board signs SHALL NOT change messages more than once every twenty (20) minutes. This City and State regulation SHALL BE strictly enforced. 								
Dept: Building Status:	Approved w/Conditions Re	viewer:	Ann Machado	Approval D	ate: 02/11/2013			
Note:					Ok to Issue:			
1) Signage and Awning Installatio Encroachments) of the IBC 200		uctural	Loads), 31 (Materia	ls) & 32 (ROW Hei	ght &			

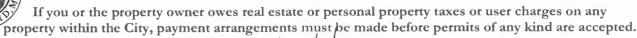
City of Portland, Maine -	Building or Use	Permit Applicat	ion	Permit No:	Issue Date	:	CBL:		
389 Congress Street, 04101		2013-00212	2/11/13	5	026 L017001				
Location of Construction: Owner Name:			Owne	er Address:		Phone:			
243 CUMBERLAND AVE				CONGRESS S	T PORTLA	ND, ME			
	ASSEMBLY			01					
Business Name:	Contractor Name			actor Address:			Phone		
	Sign Concepts	LLC / Ron Nevers	75 E	Bishop Street Po	(207) 699-2920				
Lessee/Buyer's Name	Phone:		Perm	it Type:			Zone:		
			Sig	ns - Permanent			B2		
Past Use:	Proposed Use:		Permit Fee: Cost of Work:				CEO District:		
First Assembly of God Church	First Assembly	y of God Church		\$66.00	\$	1,000.00			
			FIRE DEPT:		Approved	INSPECTI			
					Denied	Use Group			
				[N/A		Sig-		
Proposed Project Description:		····	1				4		
Replace existing building sign	with 3' x 5' perpendicu	laf sign with	Signature: Sig		Signature:	nature: MEU 2/11/13			
electronic message center			PEDESTRIAN ACTIVITIES DISTRICT		CT (P.A.D.)	(P.A.D.)			
			Action: Approved Approved			proved w/Cor	w/Conditions Denied		
			Signature:			Da	ite:		
Permit Taken By:	Date Applied For:			Zoning	g Approva	al			
LDOBSON	02/01/2013								
1. This permit application do		Special Zone or Re	eviews	Zon	Zoning Appeal		Historic Preservation		
Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		Varian			Not in District or Landmark		
2. Building permits do not in septic or electrical work.	Wetland		Miscel	Miscellaneous		Does Not Require Review			
3. Building permits are void within six (6) months of th	Flood Zone Subdivision		Conditional Use			Requires Review			
False information may invalidate a building permit and stop all work						Approved			
		Site Plan		Approved			Approved w/Conditions		
		Maj Minor MM Obwl condition Date: 2/11/13		M 🗌 🗌 Denied			Denied		
				Date:			Date: ABM		

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	

Signage/Awning Permit Application



	ALA ALAD	
Location/Address of Construction: 243	Congress Aut.	
Tax Assessor's Chart, Block & LotChart#Block#Lot#26617	First Asroubly of God Chi	Web Telephone: 774-2415
Lessec/Buyer's Name (If Applicable) First Assembly of 500 243 CUMBER and AND Portland Me. 04101	Contractor name, address & telephone: SUN Concepts LLC 75 Bishup St. Portland, ME 04103	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 Tenant/allocated building space frontage (fee Lot Frontage (feet)	eet): Length: <u>39</u> Height <u>19</u> +0 Single Tenant or Multi Tenant Lot	Ridge 28 to Peak
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Proposed awning? Yes Is awn Height of awning? Length of a	No Dimensions proposed	ED_
Information on existing and previously perm Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes X Awning? Yes No Sq. ft. area	ark or symbol on it? Yes No message, trademark or symbol: of Building City of Portlan No Dimensions: <u>1775</u> 30	Inspections and Maine
A site sketch and building sketch showing ex Sketches and/or pictures of proposed signage		ocated must be provided.

Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the automatic denial of your permit.

In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at <u>www.portlandmaine.gov</u>, 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.

Date: / Signature of applicant: Nevers

Singleterest - B-2. This is not a permit; you may not commence ANY work until the permit is issued. $39 \times 2 = 759$ -



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.

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.

- Letter of permission from the owner indicating the permissions granted and the tenant/space building frontage.
- 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.
 - 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.

□ A UL# is required for lighted signs at the time of final inspection.

Pre-application questionnaire completed and attached.

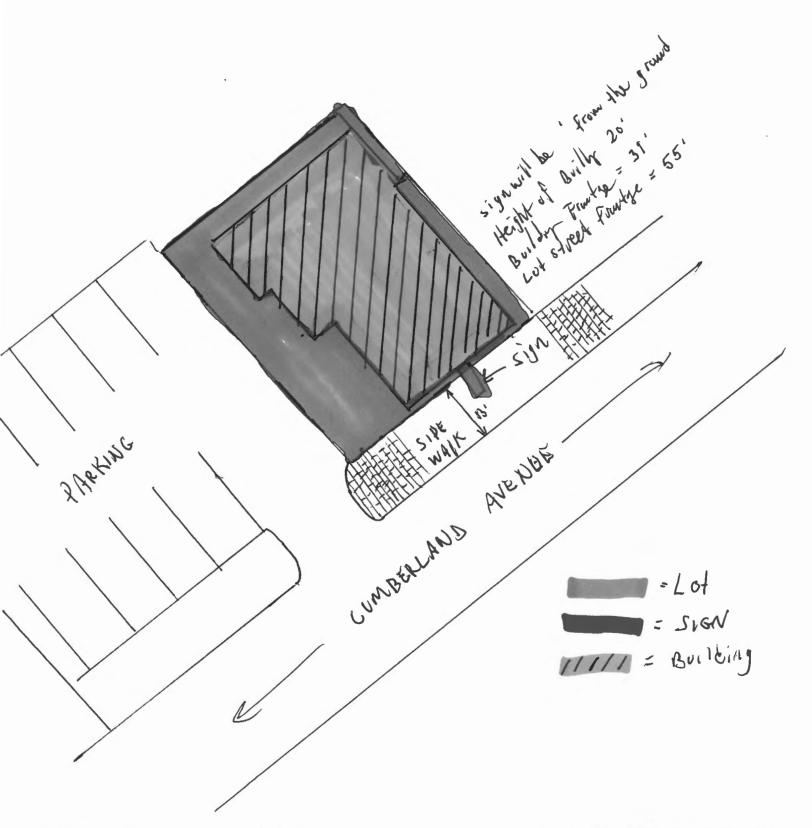
- Photos of existing signage
- Details for sign fastening, attachment or mounting in the ground.

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

Permit 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.

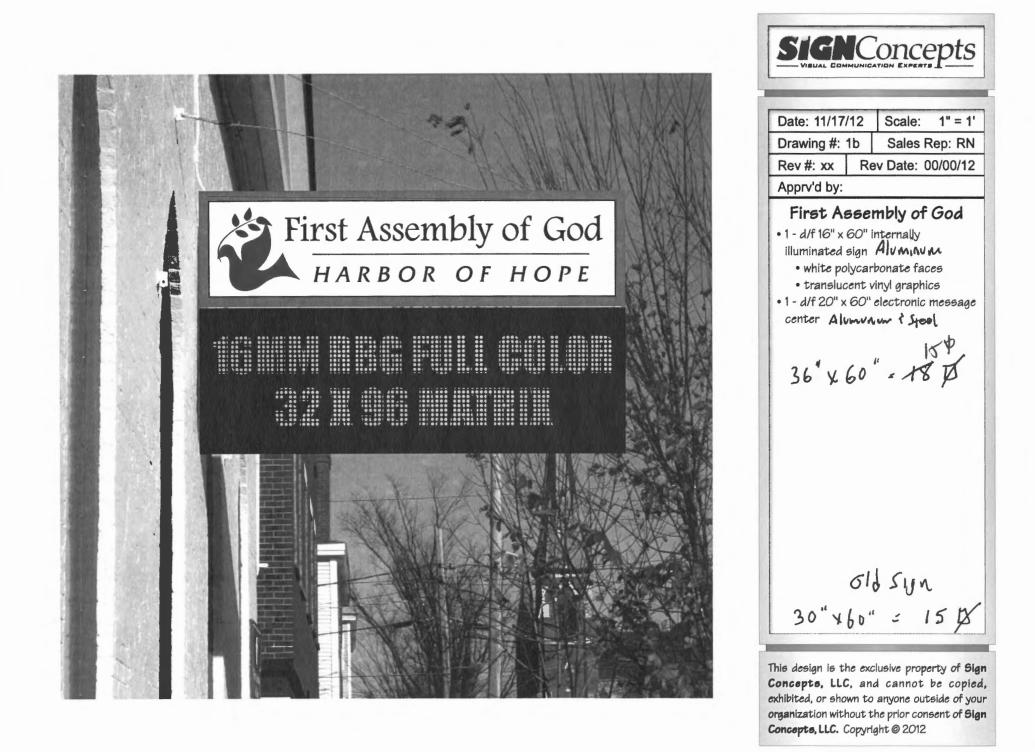
Base application fee for any Historic District signage is \$65.00.

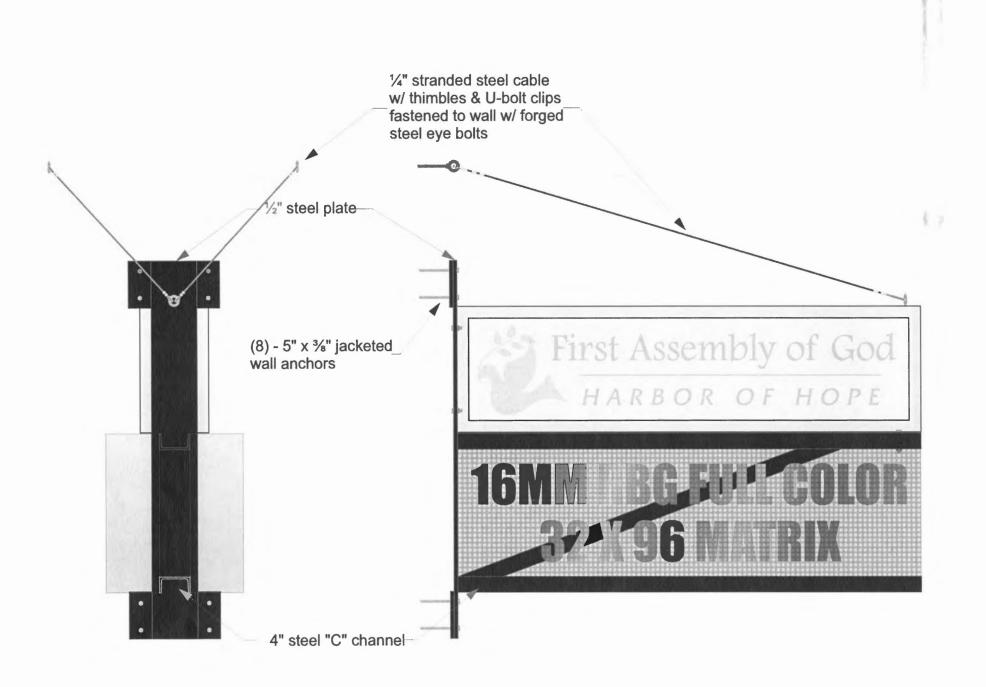




75 BISHOP STREET • PORTLAND, ME 04103 www.signconceptsmaine.com OFFICE 699-2920 • FAX 878-7790









First Assembly of God

243 Cumberland Ave Portland, Maine 04101 Pastor: Rev. Memana S. Abraham, MA, BD, MSED

January 28, 2013

Mr. Ron Nevers Sign Concepts LLC 75 Bishop Street Portland, Maine 04103

Dear Mr. Nevers,

This is to relate that the frontage of the Church Building located at 243 Cumberland Ave., Portland, is 39.0 Ft and height is at the highest point in the front is about 20.0 Ft. This is also to attest that permission is granted to construct and install the full color digital sign as per the contract. Please do not hesitate to contact us if you need any further information regarding this project.

zahonWR Sincerely

Rev. M S Abraham MA BD MSEd , Pastor

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

ULI ULI		ATEOF			JONA	INCL	01	/28/2013		
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(les) 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).										
PRODUCER			CONTA NAME:	Amy J Fa	ndrey					
Church Mutual Insurance Company			PHONE (A/C, No	. Ext): 1-800-	554-2642 Opt	tion 1 FAX (A/C, No); 855-2	64-2329		
3000 Schuster Lane			ADDRE	E-MAIL ADDRESS: ncso4@churchmutual.com						
Merrill WI 54452			INPUD	INSURER(S) AFFORDING COVERAGE NAIO						
INSURED		and the second		INSURER A : Church Mutual Insurance Company 18767						
FIRST ASSEMBLY OF GOD			INSURE	INSURER C :						
243 CUMBERLAND AVE			INSURE	RD:						
	-4904		INSURE							
		ENUMBER:	INSURE	RF:		REVISION NUMBER:				
THIS IS TO CERTIFY THAT THE POLICIE INDICATED. NOTWITHSTANDING ANY R CERTIFICATE MAY BE ISSUED OR MAY EXCLUSIONS AND CONDITIONS OF SUCH	S OF INSU EQUIREME PERTAIN,	RANCE LISTED BEL INT, TERM OR CON THE INSURANCE A	DITION OF AN	THE POLICIE	O THE INSUR	ED NAMED ABOVE FOR DOCUMENT WITH RES D HEREIN IS SUBJECT	PECT TO	WHICH THIS		
INSR LTR TYPE OF INSURANCE	ADDL SUER	POLICY NUI	WBER	POLICY EFF (MIM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LI	ats			
GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 1,0	00,000		
	Y					MED EXP (Any one person)	\$ 10.	000		
A		0183182-02-1826	93	05/01/2010	05/01/2013	PERSONAL & ADV INJURY		00,000		
GEN'L AGGREGATE LIMIT APPLIES PER:			0			GENERAL AGGREGATE PRODUCTS - COMP/OP AG		00.000		
X POLICY PRO-							\$	00,000		
						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person	\$			
ALL OWNED AUTOS AUTOS NON-OWNED						BODILY INJURY (Per accide				
HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$			
							\$			
UMBRELLA LIAB OCCUR EXCESS LIAB CLAMS MADE						EACH OCCURRENCE	\$			
DED RETENTION \$						AGGREGATE	s			
WORKERS COMPENSATION						WC STATU- OT TORY LIMITS E	H-			
ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$			
(Mandatory in NH) If yes, describe under						E.L. DISEASE - EA EMPLOY	-			
DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIM	T[\$			
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHIC Evidence Of Liability Insurance for church s 383 Congress Street, Portland, ME 04101,	ign that is I	located on the street	ts of City of Po	ortland. Comn	nercial Gener		sured=C	ity Of Portland,		
CERTIFICATE HOLDER			CANC	ELLATION						
City Of Portland 383 Congress Street Portland, ME 04101		THE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.							
			AUTHO		MIAHVE					
ACORD 25 (2010/05)	ACORD 25 (2010/05) The ACORD name and logo are registered marks of ACORD									