Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

Please Read

Notes, If Any, Attached	PERMIT	Permit Number: 100089
This is to certify that50 MONUMENT SQ	QUARE LI Michae Signs	
has permission to"FedEx Kinko's" to "	'FedEx Of " (2) 24 13'2" s	
AT50 MONUMENT SQ	CI	027 F001001
provided that the person or person the provisions of the Statutes the construction, maintenance at this department.	s of Mage and of the Dage	ting this permit shall comply with all ces of the City of Portland regulating res, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information. PERMIT ISSUED	Notification of spection hust be given adwritten ermission rocumbeform his builting or partiere of lather or other sections. HOL NOTICE IS REQUIRED.	A certificate of occupancy must be procured by owner before this build-
OTHER REQUIRED APPROVALS Fire Dept. FEB 2 3 2010 Health Dept. Appeal Board CITY OF PORTLAND		Director · Building & Inspection Services
P	PENALTY FOR REMOVING THIS	CARD

City of Portland, Maine	- Building or Use	Permit Application	on Per	rmit No:	Issue Date	:	CBL:	
389 Congress Street, 04101	Tel: (207) 874-8703	3, Fax: (207) 874-87	16	10-0089			027 F0	01001
Location of Construction:	Owner Name:	i	Owner	r Address:			Phone:	
50 MONUMENT SQ	ENT SQUARE LLC 50 LY		YDIA LN					
Business Name:	Contractor Name	•	Contra	actor Address:			Phone	•
	Michael Privit	era Signs	Box	2503 Salem			97820465	553
Lessee/Buyer's Name	Phone:		Permi	t Type:				Zone:
			Sign	ns - Permane	nt			R-3
Past Use:	Proposed Use:	"OFFIL"	Permi	it Fee:	Cost of Wor	k:	CEO District:	<u> </u>
Commercial "FedEx Kinko's"	Commercial "I	FedEx" Vinstall new		\$170.00 \$17		70.00	1	
		for name change	FIRE	FIRE DEPT: Approved		INSPE	CTION:	
	i	o's" to "FedEx Office"			Denied	Use Gr	oup: 🆊	Type
	(2) 24" x 13'2'	" Signs		L	_ Demou	١.,		2.0
						DE	5C 2005	•
Proposed Project Description:							3x 2003	la- i
"FedEx Kinko's" to "FedEx O	Office" (2) 24" x 13'2" S	igns	Signat	ture:		Signatu	1re: M/5 2	122/10
			PEDE	STRIAN ACT	IVITIES DIST	TRICT (P.A.D.)	
			Action	n: Appro	ved App	proved w	/Conditions	Denied
			Signa	ture:			Date:	
Permit Taken By:	Date Applied For:			Zoning	Approva	al		
Ldobson	02/02/2010	6 4 7 7						
1. This permit application d		Special Zone or Rev	iews	Zoni	ng Appeal		Historic Pres	ervation
Applicant(s) from meetin Federal Rules.	g applicable State and	Shoreland		☐ Variano	e		Not in District or Landma	
2. Building permits do not i septic or electrical work.	nclude plumbing,	☐ Wetland		☐ Miscellaneous			Does Not Require Review	
3. Building permits are void within six (6) months of t		☐ Flood Zone ☐ Subdivision		Conditional Use			Requires Review	
False information may in permit and stop all work.	validate a building					Approved		
		Site Plan		□ Арргоч	ed		Approved w	Conditions
PERMIT IS	SSUED	Maj Minor Mi	M [Denied			Denied	1
[[] [] [] [] [] [] [] [] [] [Date: The low	in	Date:			Date: 2/17	201 C
FEB 2 3	2010		<u></u>	•			DA	da
CITY OF PO	RTI AND						עו ו, ט	
		CERTIFICAT						
I hereby certify that I am the o I have been authorized by the jurisdiction. In addition, if a p shall have the authority to enter such permit.	owner to make this apple permit for work describe	lication as his authorized in the application is	ed agen issued,	t and I agree I certify that	to conform the code of	to all a ficial's	pplicable laws authorized rep	of this resentative
SIGNATURE OF APPLICANT		ADDRI	ESS		DAT	E	PH	ONE
MONITORD OF THE IMOUNT								

PHONE

DATE

BUILDING PERMIT INSPECTION PROCEDURES

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

to schedule your inspections as agreed upon Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the

inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below. A Pre-construction Meeting will take place upon receipt of your building permit. Final inspection required at completion of work. Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection. If any of the inspections do not occur, the project cannot go on to the next phase. REGARDLESS OF THE NOTICE OR CIRCUMSTANCES. CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED. Signature of Applicant/Designed Date Signature of Inspections Official

Building Permit #: 10-0089

CBL: 027 F001001

City of Portland,	Maine - Building o	or Use Permit		Permit No:	Date Applied For:	CBL:			
	04101 Tel: (207) 8		6 10-0089	02/02/2010	027 F001001				
Location of Construction:	Owner	Owner Address:		Phone:					
50 MONUMENT SQ	50 M	ONUMENT SQUA	RE LLC	50 LYDIA LN					
Business Name:	Contra	ctor Name:		Contractor Address:	Contractor Address: Box 2503 Salem				
	Micha	el Privitera Signs		Box 2503 Salem					
Lessee/Buyer's Name	Phone:	Phone: Per		Permit Type:					
				Signs - Permaner	ıt				
Proposed Use:			Propo	sed Project Description	1:				
	install new building sig edEx Office" (2) 24" x	,	e "Fed	Ex Kinko's" to "Fec	IEx Office" (2) 24" x	: 13'2" Signs			
Dept: Historic Note:	Status: Pending		Reviewe	r: Deborah Andrev	ws Approval I	Oate: 02/17/2010 Ok to Issue: ✓			
Dept: Zoning	Status: Approve	d with Conditions	Reviewe	r: Ann Machado	Approval I	Date: 02/16/2010			
Note: Permit #99-0022 was issued to install two "Kinkos " signs - each was 2' x 7'8". Permit #04-1736 was to replace existing Kinkos signs with two 2' x 8' signs. Not sure when FedEx was added to the signs.									
ANY exterior wor District.	k requires a separate re	view and approval	thru Histori	Preservation. This	property is located v	within an Historic			
Dept: Building Note:	Status: Approve	d with Conditions	Reviewe	r: Jeanine Bourke	Approval I	Oate: 02/22/2010 Ok to Issue: ✓			
1) Signage Installation	n to comply with Chap	ters 31 & 32 of the	IBC 2003 b	uilding code.					

Permit No:

Comments:

2/3/2010-amachado: Received permission from owner.

2/16/2010-amachado: Received certificate of liability

2/18/2010-gg: received from historic on 02/17/10. /gg

2/2/2010-amachado: Told applicant at the counter that he could submit the application but it would be on hold in zoning until we received the letter of permision from owner and certificate of liability.

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:	MENUMENT	SCR
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	Telephone:
Lessee/Buyer's Name (If Applicable) FEDEX OFFILE	Contractor name, address & telephone MICHAEL PRIVITEDA BOX 1503 GALEM, NH 03079 478-204-0553	Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ 174.
Who should we contact when the permit is ready		i
Tenant/allocated building space frontage (feet)	eet): Length: <u>[40]</u> Height <u>30</u> Single Tenant or Multi Tenant Lot	- SIGH BAND
Current Specific use: FEDEX S. If vacant, what was prior use: Proposed Use: SAME	PORE	
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes	No Dimensions proposed: 2 No Dimensions proposed:	
Proposed awning? Yes No Is aw Height of awning: Length of Is there any communication, message, tradem If yes, total s.f. of panels w/communications,	awning: Depth: ark or symbol on it? Yes No	
Information on existing and previously perm Freestanding (e.g., pole) sign? Yes Bldg. wall sign? (attached to bldg) Yes Awning? Yes No Sq. ft. are	No Dimensions: No Dimensions:	20 SK Spept, of Building Inspection. City of Portland Maine
A site sketch and building sketch showing ex Sketches and/or pictures of proposed signa		
Please submit all of the information of Failure to do so may result in the aut		pplication Checklist.
In order to be sure the City fully understands the additional information prior to the issuance of a Building Inspections office, room 315 City Hall	permit. For further information visit us	
I hereby certify that I am the Owner of record of the authorized by the owner to make this application as ha permit for work described in this application is issue areas covered by this permit at any reasonable hour to	is/her authorized agent. I agree to conform A, I certify that the Code Official's authorize	to all applicable laws of this jurisdiction. In addition, if d representative shall have the authority to enter all
Signature of applicant:	(MC)	Date: ! - 31-10
B3 growth but This is not a permit 60x7 = 1304 - two signs 1	; you may not commence ANY work un rave been permitted (#99-00)	ntil the permit is issued.

FecExOffice **BRANDING BOOK**

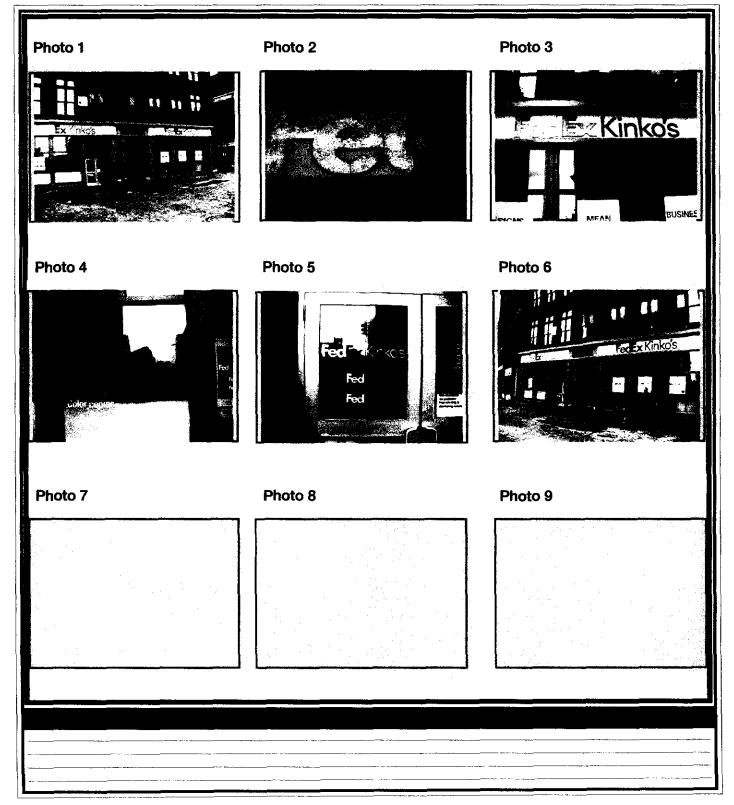
Portland ME Monument Square

Project Name: Center Number:

0168

Project Number: 982594

VIEW PHOTOGRAPHS



FecExOffice

BRANDING BOOK

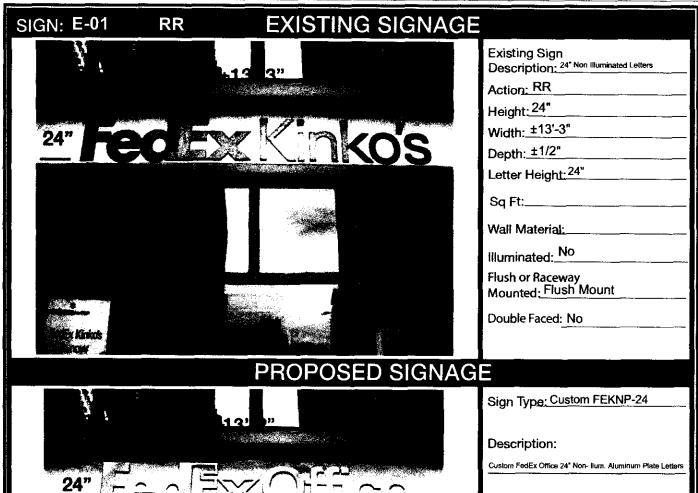
Portland ME Monument Square

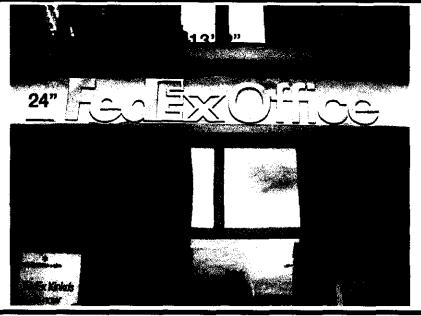
Project Name:

0168

Center Number: Project Number: 982594

INVENTORY/RECOMMENDATION DETAIL





Height: 24" Width: 13'-2" Depth: 1/2" Sq Ft: 26.3 sf Illuminated: No Flush or Raceway Mounted: Flush Mount Maximum Sq. Ft Allowed 62.5

COMMENTS

Remove Existing 24" FXK Letters and Replace with 24" Custom FXO Letters Letters to be brushed and painted to match MAP 21606 (Tucson Gold)



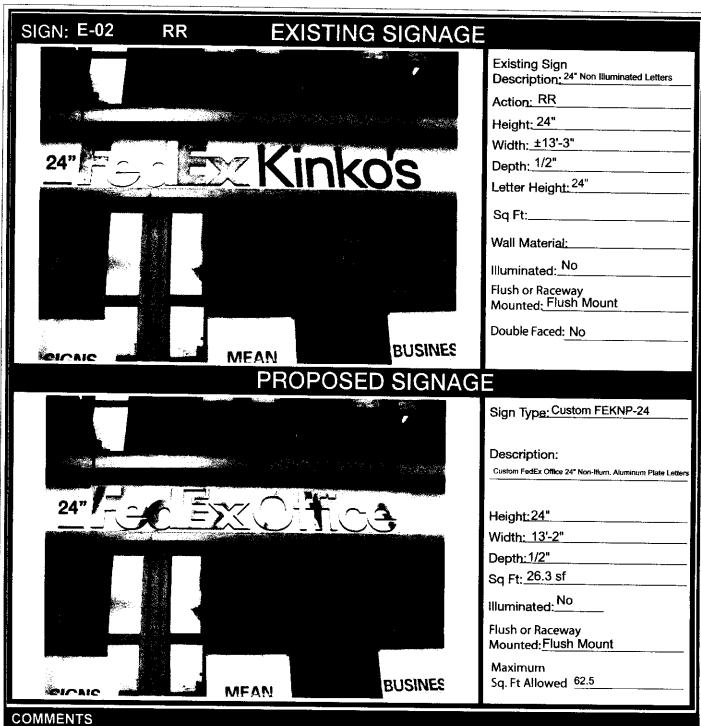
Portland ME Monument Square

Project Name:

Center Number: 0168

Project Number: 982594

INVENTORY/RECOMMENDATION DETAIL



Remove Existing 24" FXK Letters and Replace with 24" Custom FXO Letters Letters to be brushed and painted to match MAP 21606 (Tucson Gold)

FecExOffice

BRANDING BOOK

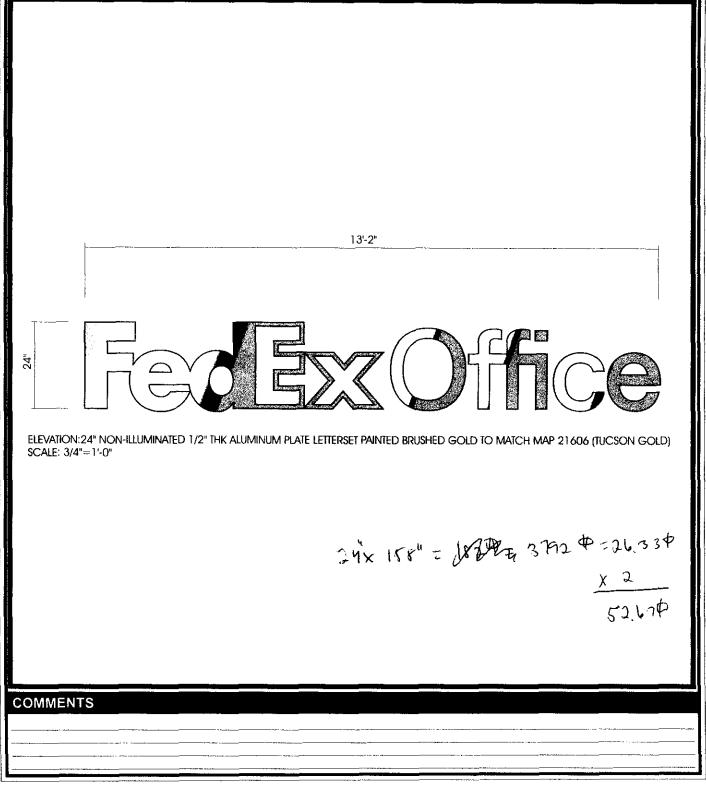
Portland ME Monument Square

Project Name:

0168 Center Number:

Project Number: 982594

SIGNAGE LAYOUTS E-02



SPANIDING BOOK

Email: lan.rosenfeld@am.jil.com

	Portland ME	
	Monument Square	3
Project Name:		
Center Number:	0168	
Project Number:	982594	्

TO BE COMPLETED BY LANDLORD	/ PROPERTY OWNER
To Whom It May Concern:	
	Property Owner/Landlord of the property located at
50 Monument Squar	re, Portland, ME 04101
do hereby give authorization to Archite erect a sign(s) at the above named localien Law and authorize said contracto permit application(s) as Owner/Agent.	ectural Graphics Inc., and/or their agents to cation. I fully understand the current Construction ors or authorized agents to sign and notarize. All work done by said contractors will meet or NEC Standards. If lease with FedEx Office is
·	and DA
RECEIVED	By: Landlord/Property Owner Signature
FEB - 3 2010	Print Name Here: Peter J. Dietz
	Owner/Landlord Address:
Dept. of Building Inspections City of Portland Maine	50 Lydia Lane South Portland, ME 04106
•	Phone: 207-221-8620
NOTARY: Acknowledged before me this	day of, 2009
	Notary Public, State of
Please fax copy of this page to: Please return ORIGINAL notarized for Jones Lang Lasalle: Attn:lan Rosenfe	Sign. Rep. lan Rosenfeld m (along with Land Survey if available) to: ld
18343 Douglas Ave. Sulte 100 Office Phone: (214) 438-6140 Cell Ph	none: (214) 865-7537

ACORD CERTIFICATE OF LIABIL			LITY INSURANCE				DATE (MM/DD/YYYY) 02/16/2010			
PRO	DUCE	MARSH 1000 RIDGEV MEMPHIS, TN	VAY LOOP ROAD N 38120 I fax#901 6847432/ca	trol.a.kincaid@marsh.com	,	ONLY AND HOLDER, TH	CONFERS NO	UED AS A MATTER O RIGHTS UPON TH TE DOES NOT AMEN FORDED BY THE POLK	FINFORMA E CERTIFI D, EXTEN	ATION ICATE D OR
354	1962-	09-10		1745 168		INGUISEDO AFFOI				
	URED					INSURERS AFFOI			NAIC#	
			and Print Services, In		<u> </u>	NSURER A: ACE AMO			22667	
		13155 Noel R	x Kinko's Office and oad, Suite 1600	Print Services, Inc.	-	NSURER B: Americar NSURER C: Indemnit			26247	
		Three Galleria Dallas, TX 75				NSURER D:	y IIIs Co OI Nortii	America	43575	
						NSURER E:	-			
CO	VER	AGES						i		
VSR	MAY	WITHSTANDING BE ISSUED OR DITIONS OF SUC	ANY REQUIREMENT, MAY PERTAIN, THE II CH POLICIES: AGGREC	BELOW HAVE BEEN IS TERM OR CONDITION OF NSURANCE AFFORDED BY BATE LIMITS SHOWN MAY H	ANY CON THE POLI	TRACT OR OTHER CIES DESCRIBED H	DOCUMENT WITH IEREIN IS SUBJEC	RESPECT TO WHICH TH	US CERTIFIC	:ATE
TR	INSRE	TYPE OF	INSURANCE	POLICY NUMBER		DATE (MM/DD/YYYY)	DATE (MA DDAYYY)	LIM		
A	X		AL GENERAL LIABILITY	HDOG24934949		10/01/2009	10/01/2010	PREMISES(Ea occurrence) MED EXP (Any one person)	\$	100,000
		CLAIMS	MADE X OCCUR					PERSONAL & ADV INJURY	\$ \$ 2.	10,000
								GENERAL AGGREGATE		000,000
			GATE LIMIT APPLIES PER					PRODUCTS - COMP/OP AGG	\$4,	000,000
A	_	X POLICY AUTOMOBILE LIA	BILITY LOC	ISAH08581794	- , ,	10/01/2009	10/01/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,	000,000
		ALL OWNED						BODILY INJURY (Per person)	\$	
		X HIRED AUTO						BODILY INJURY (Per accident)	\$	
	-							PROPERTY DAMAGE (Per accident)	\$	
		GARAGE LIABILIT	ry					AUTO ONLY - EA ACCIDENT		
		ANY AUTO						OTHER THAN AUTO ONLY:	\$	
В		EXCESS / UMBRE	LLA LIABILITY	AUC5916315-04	· .	10/01/2009	10/01/2010	EACH OCCURRENCE	\$ 5,	000,000
		X OCCUR	CLAIMS MADE					AGGREGATE	\$5, \$	000,000
		DEDUCTION							\$	
Α	WOR	KERS COMPENSA	1 \$ 10,000 TION AND	WLRC45703101 (AOS)		10/01/2009	10/01/2010	X WC STATU- OTH-	\$	
С		OYERS' LIABILITY PROPRIETOR/PAR	TNER/EXECUTIVE Y/N	WLRC45703113 (AZ & C	A)	10/01/2000	1	E.L. EACH ACCIDENT	\$ 1,	000,000
Α	OFFIC	CER/MEMBER EXC	LUDED?	SCFC45703125 (WI)				E.L. DISEASE - EA EMPLOYEE	\$ 1,	000,000
	(Mano	tatory in NH) If yes, SIAL PROVISIONS I	describe under elow					E.L. DISEASE - POLICY LIMIT	\$ 1,	000,000
	ОТНЕ									
RE	: Stor	e #168 @ 50 N	fonument Square, Po	8/EXCLUSIONS ADDED BY END ritland, ME 04101 and Sto al Insured in regards to the	ore #1745	ര 1036 Brighton	Avenue, Portland	I, ME ract.		İ
CE	RTIF	CATE HOLDE	R ATL-	002111379-01		CANCELLATION	· · · · · · · · · · · · · · · · · · ·			
			<u></u>	ECEIVE	ΞD	SHOULD ANY OF THE EXPIRATION DATE 30 DAYS WRITTH BUT FAILURE TO DO	HE ABOVE DESCRIB THEREOF, THE ISS I'EN NOTICE TO THE	ED POLICIES BE CANCELLE UING INSURER WILL ENDER CERTIFICATE HOLDER NAME NO OBLIGATION OR LIABILIT AGENTS OR REP	VOR TO MA	IL T, ID
				FEB 16 2010		UTHORIZED REPRESENTATION March USA Inc. William J. Lammel		ing. Lame		

ACORD 25 (2009/01)

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IMPORTANT

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

if SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

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