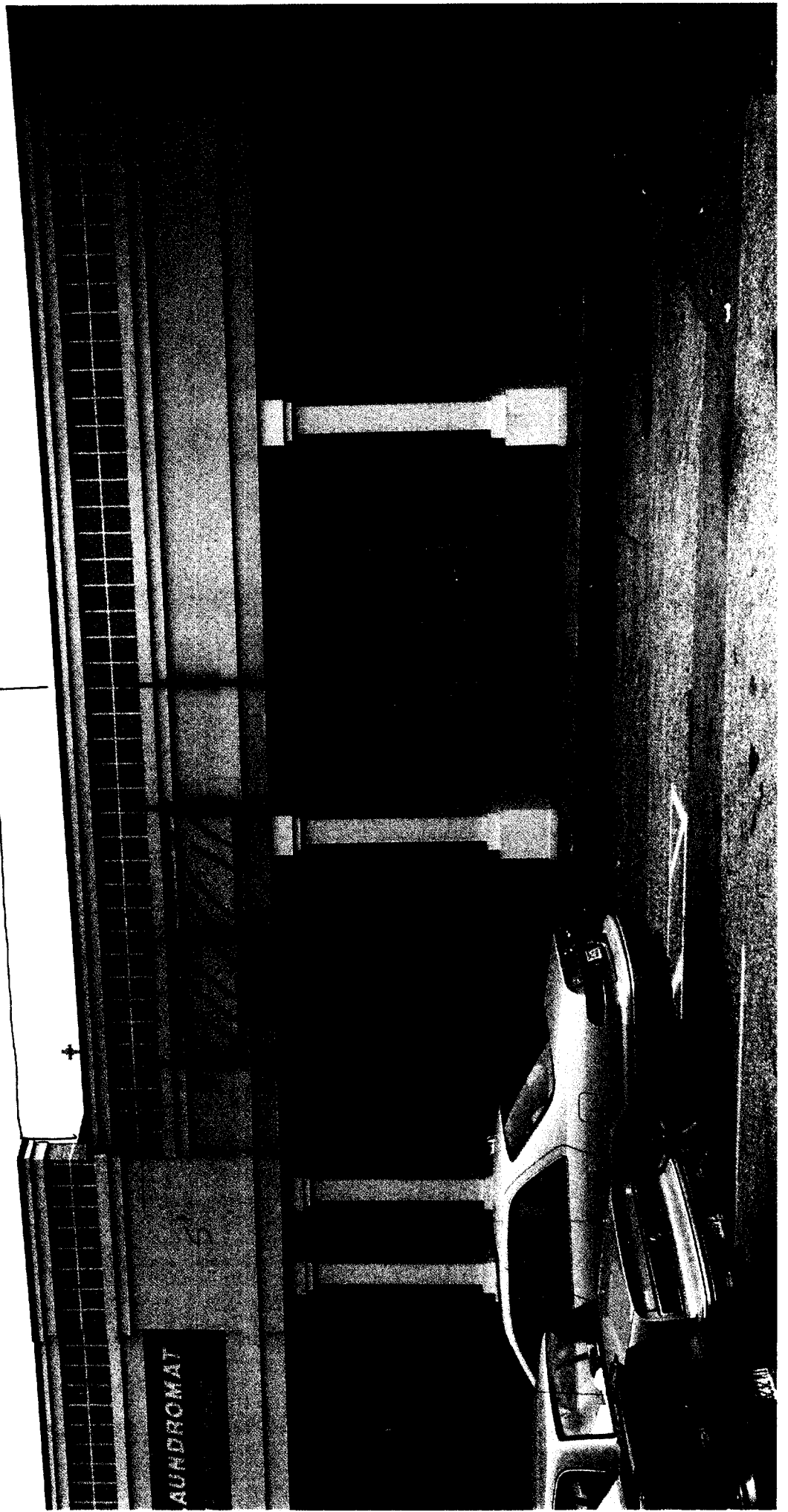


16'



LAUNDROMAT

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
09/02/2005

PRODUCER (207)829-6393 FAX (207)829-0933  
**Averill Insurance Agency**  
 P.O. Box 318  
 Cumberland, ME 04021-0318  
 Marilyn Matthews

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.**

INSURED **little blue i corp. dba The Signery**  
 299 Forest Ave.  
 Portland, ME 04101

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A <b>OneBeacon Insurance Co.</b>	31267
INSURER B <b>Maine Employers Mutual Ins Co.</b>	
INSURER C	
INSURER O	
INSURER E	

## COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	YM1U09405	08/06/2005	08/06/2006	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>300,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS, COMP/OP AGG <b>3</b> <b>2,000,000</b>
	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	YM1E01545	08/06/2005	08/06/2006	COMBINED SINGLE LIMIT (Ea accident) \$ <b>1,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC AGG \$
A	EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$	YMDV16403	08/06/2005	08/06/2006	EACH OCCURRENCE \$ <b>1,000,000</b> AGGREGATE \$ <b>1,000,000</b>
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	1810074731	08/06/2005	08/06/2006	WC STATUTORY LIMITS   OTHER E.L. EACH ACCIDENT \$ <b>500,000</b> E.L. DISEASE - EA EMPLOYEE \$ <b>500,000</b> E.L. DISEASE - POLICY LIMIT \$ <b>500,000</b>
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS / DEDUCTIBLES  
 City of Portland is additional insured with regard to sidewalk sign.

## CERTIFICATE HOLDER

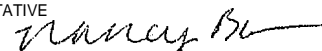
**City of Portland**  
 389 Congress Street  
 Portland, ME 04101

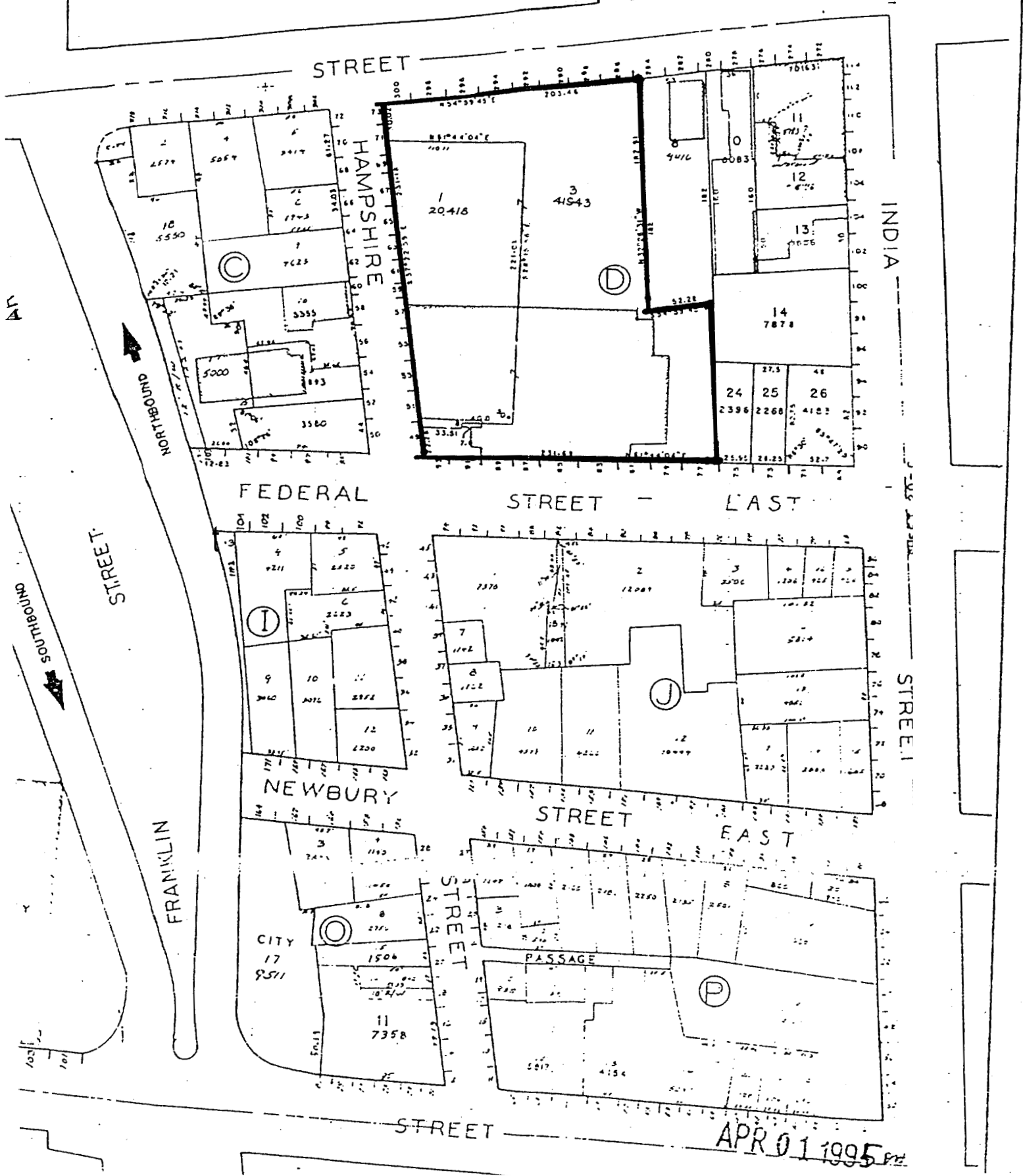
## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES

AUTHORIZED REPRESENTATIVE

**Nancy Burton**





Congress St

INDIA STREET

(Amplitude)

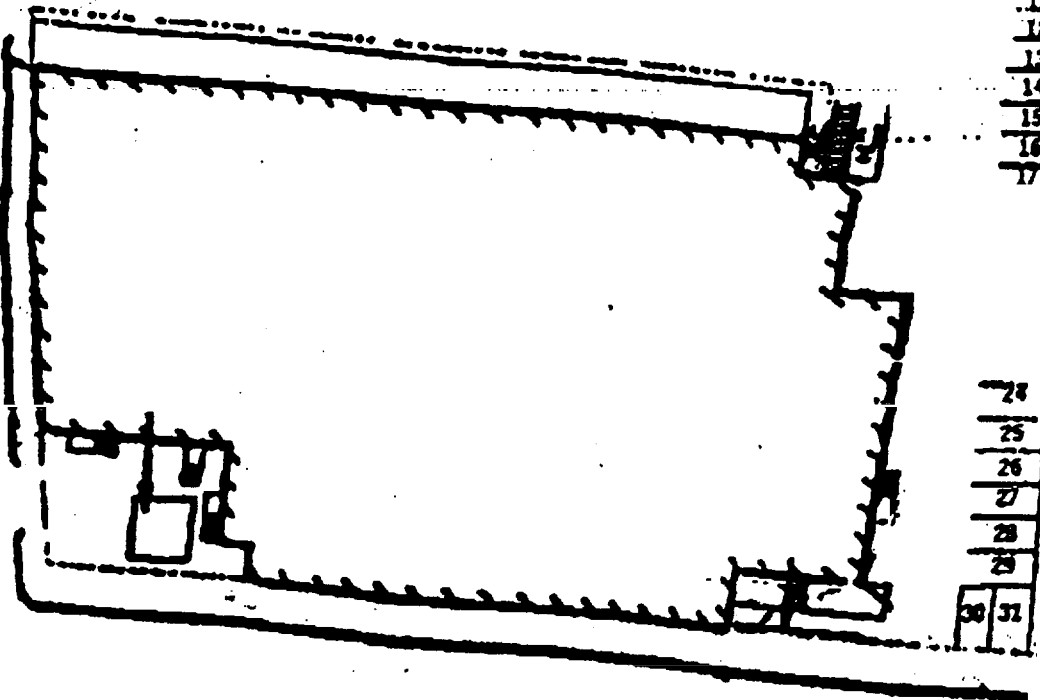
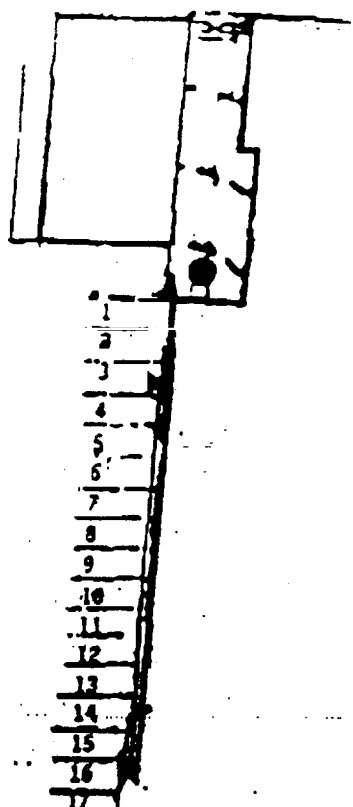
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August 24, 2005

To Whom It May Concern:

Kim Nguyen, with Princess Nails, is a new tenant in our building at 290 Congress Street. Tenant may utilize space on the existing pylon sign to place her business sign. She may also have lettering on the glass door to her suite.

Sincerely,

A handwritten signature in black ink, appearing to read "Owen B. Pickus". The signature is fluid and cursive, with a large initial "O" and "P".

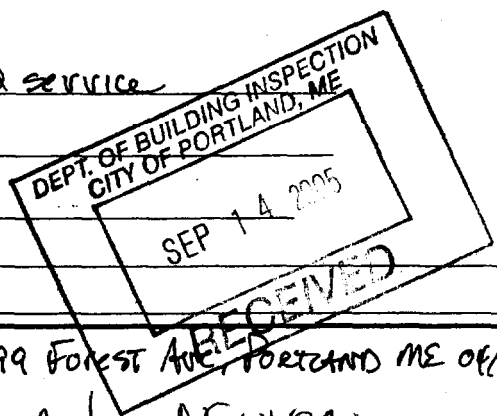
Owen B. Pickus

Owner 290 Congress Street

# 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.

Total Square Footage of Proposed Structure		Square Footage of Lot 1,740 +/- Square Feet	
Tax Assessor's Chart, Block & Lot Chart# 28 Block# D Lot# 3		Owner: Owen R. Dickus	Telephone:
Lessee/Buyer's Name (If Applicable) Kim Anh NGUYEN	Applicant name, address & telephone: 29 Hale St Portland, ME 04103 (207) 459-0688		Total s.f. of signage x \$2.00 per s.f. plus \$30.00/\$65.00 for H.D. signage = Total Fee: \$ _____ Awning Fee = Cost Of Work: \$ _____ Total Fee: \$ _____
Current use: <u>vac services</u>			
If the location is currently vacant, what was prior use: <u>food service</u>			
Approximately how long has it been vacant: _____			
Proposed use: _____			
Project description: _____			
Contractor's name, address & telephone: <u>The Signery, 299 Forest Ave, Portland ME 04101</u>			
Whom should we contact when the permit is ready: <u>Kim Anh NGUYEN</u>			
Mailing address: <u>29 Hale St Portland, ME 04103</u>			
We will contact you by phone when the permit is ready. You must come in and pick up the permit and review the requirements before starting any work, with a Plan Reviewer. A STOP WORK ORDER will be issued and a \$100.00 fee if any work starts before the permit is picked up. PHONE: <u>(207) 459-0688</u>			



IF THE REQUIRED INFORMATION IS NOT INCLUDED IN THE SUBMISSIONS THE PERMIT WILL BE AUTOMATICALLY DENIED AT THE DISCRETION OF THE BUILDING/PLANNING DEPARTMENT. WE MAY REQUIRE ADDITIONAL INFORMATION IN ORDER TO APPROVE THIS PERMIT.

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.

Signature of applicant: <u>Kim Anh</u>	Date: <u>9/14/05</u>
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**This is NOT a permit, you may not commence ANY work until the permit is issued.**

# SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE COMPLETE ALL INFORMATION

ADDRESS: 290 Congress St. ZONE: B2B  
CBL: 28D3

SINGLE TENANT LOT? YES  NO  MULTI TENANT LOT? YES  NO   
MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES  NO

## TENANT/ALLOCATED BUILDING SPACE FRONTAGE (FEET):

Length: 16' per Submittal Height: 24' MAX  
16 x 1.5 =

## INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES  NO  DIMENSIONS PROPOSED: \_\_\_\_\_  
BLDG. WALL SIGN? (attached to bldg) YES  NO  DIMENSIONS PROPOSED: 3' x 8' = 24'

## INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES  NO  DIMENSIONS: \_\_\_\_\_  
BLDG. WALL SIGN (attached to bldg)? YES  NO  DIMENSIONS: \_\_\_\_\_  
AWNING? YES  NO  DIMENSIONS: \_\_\_\_\_  
LOT FRONTAGE (FEET): \_\_\_\_\_

AWNING YES  NO  IS AWNING BACKLIT? YES  NO

HEIGHT OF AWNING: \_\_\_\_\_ LENGTH OF AWNING: \_\_\_\_\_ DEPTH \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES  NO

IF YES, TOTAL S.P.OF PANELS WITH COMMUNICATIONS/MESSAGE/TRADEMARK/SYMBOL? \_\_\_\_\_ s.f.

A SITE SKETCH AND BUILDING SKETCH SHOWING EXACTLY WHERE EXISTING AND NEW SIGNAGE IS LOCATED MUST BE PROVIDED. SKETCHES AND/OR PICTURES OF PROPOSED SIGNAGE ARE ALSO REQUIRED.

SIGNATURE OF APPLICANT: [Signature] DATE: 9/14/05

\*\*\* \*\* FOR OFFICE USE ONLY \*\*\* \*\*

# CHECKLIST FOR SIGN/AWNING APPLICATION

**Applicants for a sign or awning permit are required to submit the following information to the Code Enforcement Office at the time of application:**

- 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. Amount must equal \$400,000.00.
- 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. 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 facade dimensions for any signage attached to building.**
- A sketch or photo of any proposed sign(s) indicating *content, dimensions, materials, source of illumination, and construction method, as well as specifics of installation/attachment.*
- N/A Certificate of Flammability required for awning or canopy at time of application.
- N/A UL# required for lighted signs at the time of Final Inspection. Failure to provide this information will invalidate the Sign Permit.
- Pre-Application Questionnaire completed and attached. Photos of existing signage attached.

**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, plus \$9.00 for each additional \$1,000.00.**

**Base Application Fee for any Historic District signage is \$65.00 instead of \$30.00**