

SCANNED

Form # P 04

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK
CITY OF PORTLAND

Please Read
Application And
Notes, If Any,
Attached

**BUILDING INSPECTION
PERMIT**

PERMIT ISSUED
Permit Number: 101394
NOV 24 2010
CITY OF PORTLAND

This is to certify that 85 MARKET STREET LLC / Carrot Signs
has permission to install a 91.5" x 27" building wall sign
AT 37 MARKET ST

CBL 028 K001001

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

Apply to Public Works for street line and grade if nature of work requires such information.

Notification of inspection must be given and written permission procured before this building or part thereof is lathed or otherwise closed-in. 24 HOUR NOTICE IS REQUIRED.

A certificate of occupancy must be procured by owner before this building or part thereof is occupied.

OTHER REQUIRED APPROVALS

Fire Dept. _____
Health Dept. _____
Appeal Board _____
Other _____
Department Name

Jeanie Burke 11/24/10
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 10-1394	Issue Date:	CBL: 028 K001001
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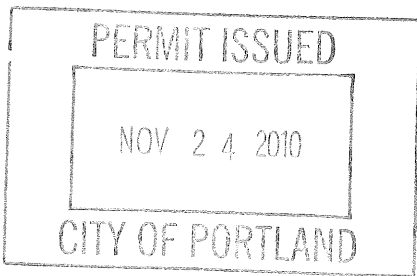
Location of Construction: 71 MARKET ST <i>called 83</i>	Owner Name: 85 MARKET STREET LLC	Owner Address: PO BOX 7225	Phone:
Business Name:	Contractor Name: Carrot Signs	Contractor Address: 236 Meadow Cross Road Topsham	Phone 2077250769
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial - "Guven Gallery"	Proposed Use: Commercial - "Guven Gallery" - install a 91.5" x 27" building wall sign <i>retail use</i>	Permit Fee: \$139.00	Cost of Work: \$139.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>M</i> Type: <i>Sign</i> <i>JBC-2003</i> Signature: <i>JMB 11/24/10</i>	

Proposed Project Description: install a 91.5" x 27" building wall sign	Signature:	Signature:
PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)		
Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature:	Date:	

Permit Taken By: Idobson	Date Applied For: 11/08/2010	Zoning Approval
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<ol style="list-style-type: none"> This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules. Building permits do not include plumbing, septic or electrical work. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work.. 	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetland <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/> Date: <i>11/8/10</i>	Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input type="checkbox"/> Denied Date: <i>11/8/10</i>	Historic Preservation <i>within</i> <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>11/19/10</i> <i>D. Andrews</i>
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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



CITY OF PORTLAND, MAINE

Department of Building Inspections

Original Receipt

11-8 2010

Received from David Stimpson

Location of Work 83 Market St.

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Total: 139

Building (I1) Plumbing (I5) Electrical (I2) Site Plan (U2)

Other Signs

CBL: 2321

Check #: 7961 Total Collected \$ 139

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: [Signature]

WHITE - Applicant's Copy

YELLOW - Office Copy

PINK - Permit Copy

City of Portland, Maine - Building or Use Permit

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

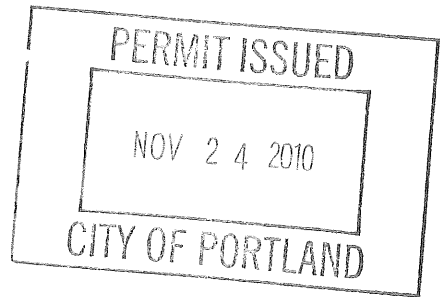
Permit No: 10-1394	Date Applied For: 11/08/2010	CBL: 028 K001001
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Location of Construction: 83 MARKET ST	Owner Name: 85 MARKET STREET LLC	Owner Address: PO BOX 7225	Phone:
Business Name:	Contractor Name: Carrot Signs	Contractor Address: 236 Meadow Cross Road Topsham	Phone (207) 725-0769
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial - "Guven Gallery" - install a 91.5" x 27" building wall sign	Proposed Project Description: install a 91.5" x 27" building wall sign
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Dept: Historic	Status: Approved with Conditions	Reviewer: Deborah Andrews	Approval Date: 11/19/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) * Applicant to install additional sign panel on opposite side of entrance no later than 6 months of the date of this approval. Proposed graphics for 2nd sign panel to be reviewed and approved by HP staff (no additional fee).			
Dept: Zoning	Status: Approved with Conditions	Reviewer: Marge Schmuckal	Approval Date: 11/08/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.			
2) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.			
Dept: Building	Status: Approved with Conditions	Reviewer: Jeanine Bourke	Approval Date: 11/24/2010
Note:			Ok to Issue: <input checked="" type="checkbox"/>
1) Signage and Awning Installation to comply with Chapters 16, 31 & 32 of the IBC 2003 building code.			
Dept:	Status: Approved with Conditions	Reviewer:	Approval Date:
Note:			Ok to Issue: <input type="checkbox"/>

Comments:
11/22/2010-gg: received from historic as of 11/19/10. /gg



BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

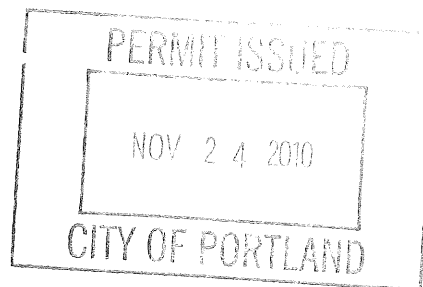
With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the City of Portland Inspection Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to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

 X Final inspection required at completion of work.

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





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: <u>83 Market Street</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>28</u> Block# <u>K</u> Lot# <u>1</u>	Owner: <u>Sawyer Realty / 85 Market Street LLC</u>	Telephone: <u>207-772-6579 (Sawyer Realty)</u>
Lessee/Buyer's Name (If Applicable) <u>Shana Stilphen</u> <u>207-712-4467</u>	Contractor name, address & telephone: <u>Carrot Signs</u> <u>236 Meadow Cross Rd.</u> <u>Topsham, ME 04086</u> <u>207-725-0769</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>139</u> Awning Fee= cost of work <u>NA</u> Total Fee: \$ <u>139</u>

Who should we contact when the permit is ready: Carrot Signs
Alan Buonaiuto phone: 725-0769

Tenant/allocated building space frontage (feet): Length: 22.3' Height: 11.8'
Lot Frontage (feet) 103' Single Tenant or Multi Tenant Lot multi-tenant lot

Current Specific use: ↪
If vacant, what was prior use: Nail salon / Skincare
Proposed Use: Retail - Art Gallery

Information on proposed sign(s):
 Freestanding (e.g., pole) sign? Yes No Dimensions proposed: NA Height from grade: NA
 Bldg. wall sign? (attached to bldg) Yes No Dimensions proposed: 7.6' x 2.25'

Proposed 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.f. of panels w/communications, message, trademark or symbol: _____ s.f.

Information on existing and previously permitted sign(s):
 Freestanding (e.g., pole) sign? Yes No Dimensions: _____
 Bldg. wall sign? (attached to bldg) Yes No Dimensions: 7.6' x 2.25'
 Awning? Yes No Sq. ft. area of awning w/communication: _____

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 and existing building are also required.

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.

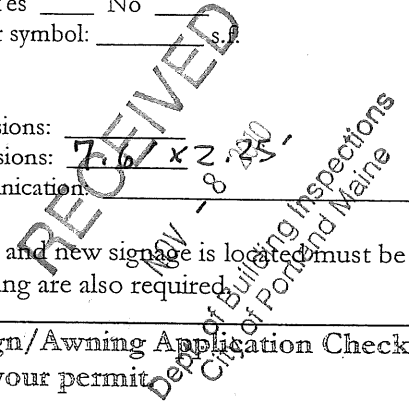
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 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.

Signature of applicant: <u>[Signature]</u>	Date: <u>11/5/2010</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

1712 + 30 + 95 = 139





New sign
goes
here





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/5/2010

PRODUCER (207)780-1677 FAX: (207)780-6377
 Cross Insurance-Portland
 2331 Congress Street
 PO Box 567
 Portland ME 04112

INSURED
 ZAFER GUVEN & SHANA STILPHEN
 DBA GUVEN GALLERY
 5 SWEETFERN LN
 BRUNSWICK ME 04011-3366

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.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: MMG (Maine Mutual) Ins.	
INSURER B:	
INSURER C:	
INSURER D:	
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.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	BP 0439028	11/1/2010	11/1/2011	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 250,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N				E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
	OTHER				E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Refer to policy for exclusionary endorsements and special provisions.

CERTIFICATE HOLDER

City of Portland

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 M Salang-White/RMH *Marina D. Salang-White*



395 Fore Street
P.O. Box 7225
Portland, ME 04112
Tel: (207) 772-6579
Fax: (207) 773-0680
sawyerrealty@gwi.net

November 5, 2010

City of Portland
389 Congress St
Portland, ME 04101

To Whom It May Concern:

Shana Stilphen, our tenant at 83 Market Street in Portland, has received permission from our company, the owner of the building of 81-89 Market Street, to place signage in the designated sign areas of the building.

If you have any questions or concerns, please contact the office.

Sincerely,

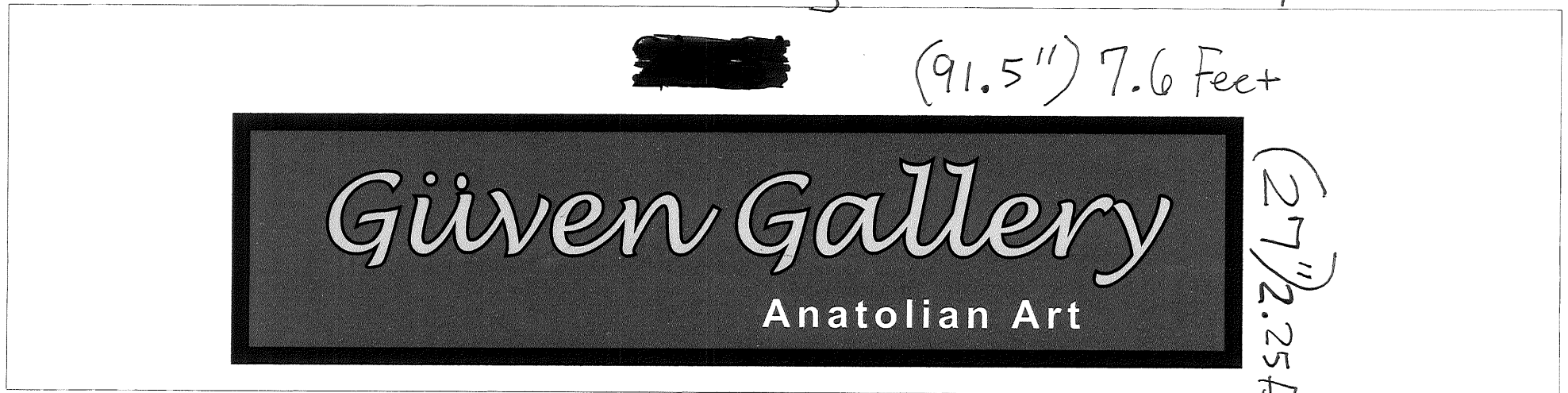
A handwritten signature in black ink, appearing to read "H. Sawyer", written over a horizontal line.

Harrison H. Sawyer
H.H. Sawyer Realty Company & Daughters

17.1 Feet²

Top of Sign will be 11.5 ft. from ground
Bottom of Sign will be 9.25 ft. from ground

Sign will be fastened to building with stainless #10 panhead screws



$\frac{1}{2}$ " MDO SIGN BOARD

MARROON SMALTZ BACKGROUND
(CRUSHED GLASS)

BLK OUTLINE ON
LETTERS

