

City of Portland, Maine - Building or Use Permit Application

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

PERMIT ISSUED

Permit No 02-159	Issue Date: OCT 10 2002	CBL 028 0011001
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Location of Construction: 77 Middle St	Owner Name: 77 Middle Street Associates Llc	Owner Address: 155 Center St. Bldg 6 Box 10 CITY OF PORTLAND	Phone:
Business Name: n/a	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone: 2077829654
Lessee/Buyer's Name n/a	Phone: n/a	Permit Type: Signs - Permanent	Zone: B-2

Past Use: Commercial / North East Bank	Proposed Use: Commercial / Erect 72 sq. Ft. Gold leaf letters and awning.	Permit Fee: \$102.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Erect 72 sq. Ft. Letters and awning for North East Bank		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: B Type: w/h 10/14/02 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: gg	Date Applied For: 10/09/2002	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: 10/10/02	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: _____	Historic Preservation <input checked="" type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: _____
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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

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

DEPARTMENT OF BUILDING & INSPECTION

PERMIT

Permit Number: 021159

PERMIT ISSUED
OCT 10 2002
CITY OF PORTLAND

This is to certify that 77 Middle Street Associates Inc / NeoKraft Signs
has permission to Erect 72 sq. Ft. Letters and signs for North East Bank
AT 77 Middle St 028 0011001

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 altered or closed-in. **48 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

Allyson Stalder
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

SIGNAGE APPLICATION

THIS IS NOT A PERMIT
CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the Information below for a Building or Use Permit.

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: 77 Middle Street

Total Square Footage of Proposed Structure	Square Footage of Lot
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Tax Assessor's Chart, Block & Lot Number Chart# <u>28</u> Block# <u>0</u> Lot# <u>11</u>	Owner: <u>77 Middle Street Assoc. Inc</u>	Telephone #:
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Lessee/Buyer's Name (If Applicable) <u>NORTHEAST Bank</u>	Owner's/Purchaser/Lessee Address: <u>232 Center St, Auburn, ME 04200</u>	Total s.f of signs <u>72</u> x <u>1.00 \$ 72</u> , plus \$30.00 TOTALS <u>102</u>
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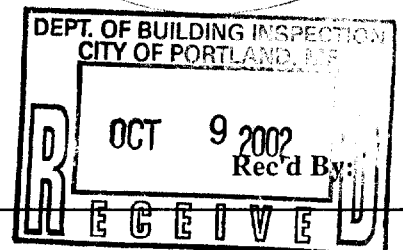
Current use: Financial Proposed use: Banking & Financial

Project description: gold leaf wall letters and name of hotel awnings (does not include awnings)

Applicants Name, Address & Telephone: Roy Ulrickson / Neokraft signs
Contractor's Name, Address & Telephone: Neokraft Sign Co
686 Main St, Lewiston, ME 04256
Who shall we contact when the permit is ready: Roy ULRICKSON (782-9654)
Telephone:

If you would like it mailed, what mailing address should we use:

686 Main St
Lewiston ME 04240




THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

If the property is located in a HISTORIC DISTRICT, a separate sketch is required indicating the design, dimensions, construction materials and source of illumination if any. A photograph of the building façade should be submitted, showing where each sign is to be installed.

Certification

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: 	Date: 10-07-02
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Sign Permit Fee: \$30.00 plus \$1.00 per square foot.

A building permit is also required for any awning based on cost of work-\$30.00 for the first \$1,000.00 and \$6.00 for each additional \$1,000.00

BY FILLING OUT THIS APPLICATION IS DOES NOT MEET THAT YOU WILL BE APPROVED FOR THE AMOUNT OF SIGNAGE YOU ARE APPLYING FOR

IT IS SUGGESTED THAT YOU DO NOT ORDER ANY SIGNAGE UNTIL YOU HAVE RECEIVED YOUR SIGN PERMIT THAT HAS BEEN SIGNED BY THE BUILDING, ZONING AND POSSIBLE HISTORICAL OFFICIALS OF THIS OFFICE

SIGNAGE PRE-APPLICATION

PLEASE ANSWER ALL QUESTIONS

B-2

ADDRESS: 77 Middle STREET ZONE: B-2

OWNER: NORTHEAST Bank

APPLICANT: Newscraft Signs

ASSESSOR NO. _____

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES NO MULTI-TENANT LOT? YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES NO --- DIMENSIONS 2.5' x 3' HEIGHT 6'-6"

MORE THAN ONE SIGN? YES NO DIMENSIONS 2.5' x 3' HEIGHT 6'-6"

SIGN ATTACHED TO BLDG.? YES NO DIMENSIONS (2) 1.25' x 19.25' (3) .8' x 16'

MORE THAN ONE SIGN? YES NO DIMENSIONS (1) .5' x 14'

AWNING: YES NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK 14'

IS THERE ANY MESSAGE, TRADEMARK OR SYMBOL ON IT? -1090 Symbol

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

All existing signs will be removed

*** TENANT BLDG. FRONTAGE (IN FEET): 36' on street 41' on side
*** REQUIRED INFORMATION

AREA FOR COMPUTATION

Along Middle St

$15 \times 15.66 = 7.83$
 $20.17 \times 15.66 = 33.96$
 $4.33 \times 3' = 13.00$
54.81 #

OK

Towards Arterial

$2.17 \times 15 = 32.55 #$
 $4.33 \times 3 = 13$
45.55 #

YOU SHALL PROVIDE:

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

SIGNATURE OF APPLICANT: Roy Ullrich DATE: 10-3-02



Neokraft

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>

LANDLORD CONSENT AGREEMENT

Written consent and agreement relating to a certain sign proposed to be erected on the

premises at: 27 Middle Street

in Portland, Maine

27 Middle Street Assoc. LLC being the owner of the premises at
27 Middle Street in Portland, ME

hereby gives consent to the erection of (a) certain sign(s):

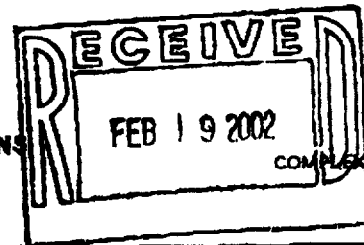
owned by: Northeast Bank (the tenant) as described in the
attached application for a permit submitted to the inspection division of the building
department of Portland, Maine to cover
the erection of said signs.

Signed by the owner of said premises, or his authorized agent, on this

7th day of October 2002

[Signature] (SIGNED)

Richard McGilbray (TITLE)
Manager



CMAC B

**BUSINESSOWNERS DECLARATION
BUSINESSOWNERS RENEWAL DECLARATIONS**

OB

RENEWAL OF ZDP 8093828

Policy Number	Policy Period From To	Coverage is Provided in the	Agency Code
OHP-6093828-02	12/15/2001 12/15/2002	HANOVER INSURANCE COMPANY	380679000

Named Insured and Address
NORTHEAST BANK & NORTHEAST
BANCORP. & NORTHEAST FINANCIAL
232 CENTER STREET
AUBURN, ME 04210

Agent
207-824-2178
KENDALL INSURANCE, INC.
15 CHURCH STREET
PO BOX 179
BETHEL, ME 04217

ENTERED FEB 19 2002
PUT IN FILE

Policy Period: Beginning and Ending at 12:01 a.m. Standard Time at the Location of the Described Premises.

Business Type: CORPORATION (SINGLE).

Mortgages/Loss Payable:

SEE ADDITIONAL INTEREST SCHEDULE

Business of the Named Insured:
OFFICE.

In consideration of the premium, insurance is provided the Named Insured with respect to those premises described in the Schedule below and with respect to those coverages and kinds of property for which a specific Limit of Insurance is shown, subject to all of the terms of this policy including forms and endorsements made a part hereof:

LOCATION SCHEDULE

Described Premises:

NO. 1 232 CENTER ST., AUBURN, ME 04210

#2

Property Coverage	Limits of Insurance					
	Loc No 001	Bldg No 001	Loc No	Bldg No	Loc No	Bldg No
Deductible Amt	\$ 2,500		\$		\$	
Building Amount Valuation	\$ 5,650,000 RC		\$		\$	
Bus Personal Prop Valuation	\$ 2,846,000 RC		\$		\$	
Business Income	Actual Business Loss Sustained not exceeding 12 consecutive months					
Business Income Waiting Period	None / 24 hour / 48 hour / 72 hour NONE					
Coverage	Limits of Insurance					
Liability and Medical Payments						
Except for Property Damage Legal Liability, Each paid claim for the following coverages reduced the Amount of Insurance we provide during the applicable annual period. Please refer to Paragraph D.A. of the Businessowners Liability Coverage Form.						
Business Liability	\$ 1,000,000		Per Occurrence	\$ 2,000,000		Aggregate
Medical Expenses	\$ 15,000		Each Person			
Property Damage Legal Liability	\$ 300,000		Any one Fire, Explosion, Lightning, Smoke or Leakage			

Form 391-1002 (7-99)

Page 1 of 2

Date Issued: 02/10/2002

AGENT

Payment Type: DIRECT BILL

GROUP NAME: COMMUNITY BANKS

GROUP NUMBER: N62

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
 10/09/2002

PRODUCER (207)344-6200 FAX (207)344-6204
 Stevens Insurance
 232 Center Street
 Auburn, ME 04210
 Lori Davis

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

INSURED 77 Middle St Assoc LLC
 100 Silver Street
 Portland, ME 04101

INSURER A Zurich Insurance Co
 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 LTR	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 <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	PAS 38158219	05/31/2002		EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GENL AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. SECT <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY <input 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				COMBINED SINGLE LIMIT (Ea accident) \$ 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 EA ACC \$ AUTO ONLY AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				MC STATE-TORY LIMITS OTHER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES, EXCLUSIONS ADDED BY ENDORSEMENT, SPECIAL PROVISIONS

(Handwritten mark: #1)

CERTIFICATE HOLDER ADDITIONAL INSURED: INSURER LETTER:

CANCELLATION

Northeast Bank
 232 Center Street
 Auburn, ME 04210

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 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 COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Lori Davis/LSD

(Handwritten signature: Lori S Davis)