

Please Read Application And Notes, If Any, Attached

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF CITY OF PORTLAND BUILDING INSPECTION PERMIT

OF WORK

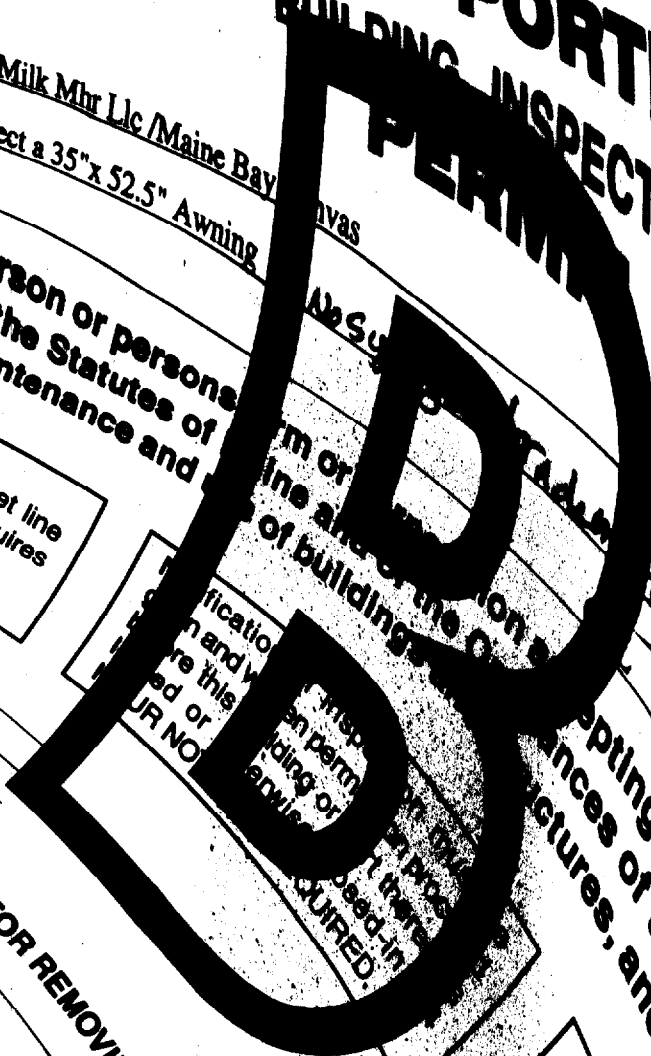
This is to certify that 4 Milk Mhr Llc / Maine Bay has permission to Erect a 35" x 52.5" Awning AT 4 Milk St

provided that the person or persons of the provisions of the Statutes of the construction, maintenance and this department.

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

OTHER REQUIRED APPROVALS

Dept. _____
Dept. _____
Board _____
Department Name _____



Permit Number: 0211155

PENALTY FOR REMOVING THIS CARD

A certificate procured by _____

Accepting this permit shall _____ of the City of Portland, and of the app

City of Portland, Maine - Building or Use Permit Application

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

Permit No: 03-1165	Issue Date:	CBL: 029 B002001
-----------------------	-------------	---------------------

Location of Construction: 4 Milk St	Owner Name: 4 Milk Mhr Llc	Owner Address: 1660 Soldier Field Rd	Phone: 774-1885
Business Name:	Contractor Name: Maine Bay Canvas	Contractor Address: 53 Industrial Way Portland	Phone: 2078788888
Lessee/Buyer's Name	Phone:	Permit Type: Awning, no signage	Zone: B3

Past Use: Retail Space/Commercial	Proposed Use: Retail Design Studio/Commercial	Permit Fee: \$30.00	Cost of Work: \$30.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group: <i>0</i> Type: <i>Awning</i>	

Proposed Project Description: Erect a 35"x 52.5" Awning	Signature:	Signature: <i>[Signature]</i> 11/19/03
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: gad	Date Applied For: 09/23/2003	Zoning Approval
-------------------------	---------------------------------	------------------------

<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>OK 11/25/03</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	Historic Preservation <input type="checkbox"/> Not in District or Landmark <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied <i>to D.A</i>
	Date: <i>11/19/03</i>		Date:

D. Andrews
11/01/03

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
---	------	-------

03-1105

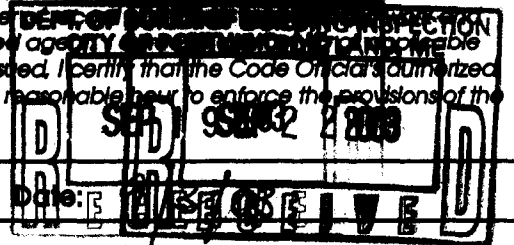
Signage/Awning Permit Application

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>24 Milk Street - (Side Entrance)</u>		
Total Square Footage of Proposed Structure <u>029-B-002</u>	Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>029</u> Block# <u>B</u> Lot# <u>002</u>	Owner: <u>Commercial Properties</u>	Telephone: <u>207-774-1895</u>
Lessee/Buyer's Name (If Applicable) <u>Penelope Daborn</u>	Applicant name, address & telephone: <u>Penelope Daborn</u> <u>2 Milk Street</u> <u>Portland Me 04101</u> <u>207 761 2711</u>	Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: \$ Awning Fee = Cost Of Work: \$ <u>9,500.00</u> Total Fee: \$ <u>30.00</u>
Current use: <u>Interior Design Studio</u>		
If the location is currently vacant, what was prior use: _____		
Approximately how long has it been vacant: _____		
Proposed use: <u>same</u>		
Project description: <u>Awning for side entrance</u>		
Contractor's name, address & telephone: <u>Marne Bay Canvas</u>		
Who should we contact when the permit is ready: <u>Penelope Daborn</u>		
Mailing address: <u>2 Milk Street Portland Me 04101</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:		

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.

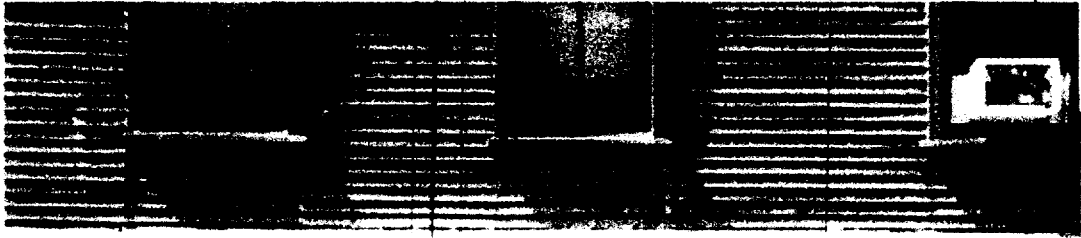
I hereby certify that I am the Owner of record of the named property, or that the owner that I have been authorized by the owner to make this application as his/her authorized agent in accordance with the laws of this jurisdiction. In addition, if a permit for work described in this application is issued, 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: Penelope Daborn

This is NOT a permit, you may not commence ANY work until the permit is issued.

OK
MRS.
Teresa need
to get any
permits



35
↑
↓



← 52 1/2 →
↓

12/13/03

Michael - I would like to put a canopy
over my side entrance as above —
yellow. Would that be OK?

m. i. P.



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.
- 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.
- Certificate of Flammability required for awning or canopy at time of application.
- 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 \$1.00 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 \$1,000.000.**

SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 2 Milk Street Portland Me ZONE: B-3

CBL: 029-B-002-001

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

INFORMATION ON PROPOSED SIGN(S):

FREESTANDING (e.g., pole) SIGN? YES _____ NO _____ DIMENSIONS PROPOSED: _____
BLDG. WALL SIGN? (attached to bldg) YES _____ NO _____ DIMENSIONS PROPOSED: _____

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

AWNING YES NO _____ IS AWNING BACKLIT? YES _____ NO

HEIGHT OF AWNING: 35 in LENGTH OF AWNING: 52 1/2 in DEPTH: 35 in

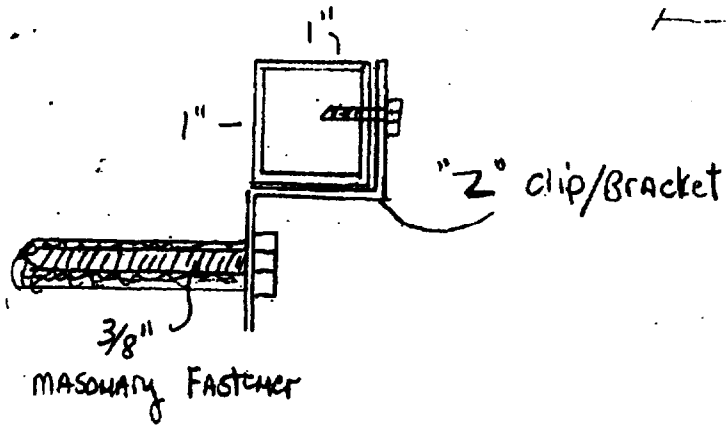
IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES _____ NO

IF YES, TOTAL S.F. 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.

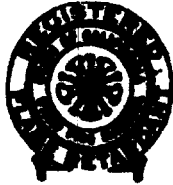
SIGNATURE OF APPLICANT: [Signature] DATE: 9/03/03

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



Into mortar joints

Certificate of Flame Resistance



REGISTERED APPLICATION CONCERN No.

FA-36801

ISSUED BY

Glen Raven Custom Fabrics, LLC
1831 N. Park Avenue
Glen Raven, NC 27217

(Phone) 336/227-8211 (Fax) 336/229-4039

Date treated or manufactured

This is to certify that the materials described on the reverse side hereof have been flame-retardant treated (or are inherently nonflammable).

FOR Maine Bay Canvas ADDRESS 53 industrial Way
CITY Portland, Maine STATE _____

Certification is hereby made that: (Check "a" or "b")

(a) The articles described on the reverse side of this Certificate have been treated with a flame-retardant chemical approved and registered by the State Fire Marshal and that the application of said chemical was done in conformance with the laws of the State of California and the Rules and Regulations of the State Fire Marshal.

Name of chemical used _____ Chem. Reg. No. _____
Method of application _____

(b) The articles described on the reverse side hereof are made from a flame-resistant fabric or material registered and approved by the State Fire Marshal for such use.

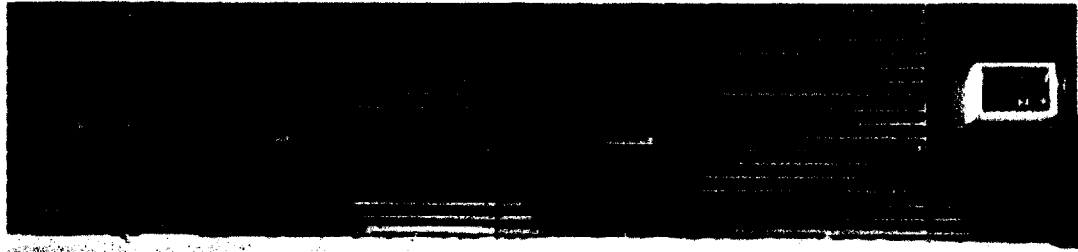
Trade name of flame-resistant fabric or material used FR Sunbrella® Reg. No. FA-36801

The Flame Retardant Process Used

will not **Be Removed By Washing**
(will or will not)

Glen Raven Custom Fabrics, LLC
Name of Applicator or Production Superintendent

GLEN RAVEN CUSTOM FABRICS, LLC
By Steven J. Ellington
Title



27
+8

35"

← 54" →

RENEWAL



EFFECTIVE DATE: 07/24/2003

Policy Number: BOP9101824	Prior Policy: 9101824
Billing Type: DIRECT BILL	
Coverage is Provided in PEERLESS INSURANCE COMPANY - A STOCK COMPANY	
Named Insured and Mailing Address: FABRIGANZA INC DBA PENELOPE DABORN LTD 2 MILK STREET PORTLAND ME 04101	Agent: CLARK ASSOCIATES PO BOX 3543 2385 CONGRESS ST PORTLAND ME 04104-3543 Agent Code: 8210564 Agent Phone: (207)-774-6257

**COMMERCIAL PROTECTOR POLICY DECLARATIONS
SPECIAL (INCLUDING EQUIPMENT BREAKDOWN)**

return for the payment of premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.

POLICY PERIOD: From: 07/24/2003 To: 07/24/2004 at 12:01 AM Standard Time at your mailing address shown above.

FORM OF BUSINESS: CORPORATION

BUSINESS DESCRIPTION: DRY GOODS DEALERS

DESCRIPTION OF PREMISES

em.	Bldg.	Location
).	No.	Occupancy, Construction/Fire Protection
11	001	2 MILK STREET PORTLAND ME 04101 DRY GOODS DEALERS (INCLUDING FABRIC-YARN AND PIECE GOODS) JOISTED MASONRY, P1

PROPERTY COVERAGE

em.	Bldg.	Coverage	Limits of Insurance
).	No.		
11	001	BUSINESS PERSONAL PROPERTY	\$ 30,000

DEDUCTIBLE: \$ 250 In Any One Occurrence

AUTOMATIC INCREASE: Building Coverage Shall Be Increased Annually.
Personal Property Coverage Shall Be Increased Annually.

MORTGAGE HOLDERS: NONE

PROPERTY OPTIONAL COVERAGES - These Limits of Insurance apply in addition to those found in the COMMERCIAL PROTECTOR

em.	Bldg.	Coverage	Additional Limits of Insurance
).	No.		
11	001	COMPUTER EQUIPMENT & SOFTWARE	\$ 2,000

-98 (05/01)

INSURED COPY

SPECIAL (INCLUDING EQUIPMENT BREAKDOWN)

Formin.

PROPERTY OPTIONAL COVERAGES - These Limits of Insurance apply in addition to those found in the COMMERCIAL PROTECTOR

Item No.	Bldg. No.	Coverage	Additional Limits of Insurance
11	001	FINE ARTS COVERAGE (SEE SCHEDULE)	\$ 12,000

LIABILITY AND MEDICAL PAYMENTS COVERAGE

Except for Fire Legal Liability, each paid claim for the following coverages reduces the amount of insurance we provide during the applicable annual period. Please refer to Paragraph D.4. of the Liability Coverage Form.

Coverage	Limits of Insurance
LIABILITY AND MEDICAL EXPENSES	\$ 1,000,000
MEDICAL EXPENSES (PER PERSON)	\$ 5,000
FIRE LEGAL LIABILITY	\$ 50,000
AGGREGATE LIMITS	
INJURY OR DAMAGE UNDER PRODUCTS/COMPLETED OPERATIONS HAZARD	\$ 1,000,000
ALL OTHER INJURY OR DAMAGE (INCLUDING MEDICAL EXPENSES)	\$ 2,000,000

LIABILITY OPTIONAL COVERAGES

Coverage	Limits of Insurance
HIRED AUTO LIABILITY	INCLUDED
NON-OWNED AUTO LIABILITY	INCLUDED

RISKS AND ENDORSEMENTS APPLICABLE TO THIS POLICY:

(Applicable Forms and Endorsements are omitted if shown in specific Coverage Part/Coverage Form Declarations)

Form Number	Description
5	- 0501 WELFARE AND PENSION PLAN ERISA COMPLIANCE CONDITION
105	- 1094 QUICK REFERENCE - SPECIAL POLICY
115	- 0501 COMM PROTECTOR SPECIAL PROP COV FORM (INCL EQUIP BKDN)
120	- 0501 COMMERCIAL PROTECTOR EXTENSION ENDORSEMENT
148	- 0501 COMMERCIAL PROTECTOR LIABILITY EXTENSION ENDORSEMENT
168	- 1102 LIMITED FUNGI OR BACTERIA COVERAGE
169	- 1102 FUNGI OR BACTERIA EXCLUSION (LIABILITY)
173	- 1102 COVERAGE FOR CERTIFIED ACTS OF TERRORISM
41	- 0399 COMMERCIAL PROTECTOR LIABILITY COVERAGE FORM
48	- 0501 COMPUTER EQUIPMENT AND SOFTWARE COVERAGE FORM
50	- 0399 HIRED AUTO AND NON-OWNED AUTO LIABILITY
36	- 0193 FINE ARTS COVERAGE FORM
1007	- 0190 EFFECTIVE TIME CHANGES-REPLACEMENT OF 12 NOON
1009	- 0689 BUSINESSOWNERS COMMON POLICY CONDITIONS
1123	- 0187 BUSINESSOWNERS STANDARD FIRE POLICY PROVISIONS
1148	- 0197 MAINE CHANGES-CONCEALMENT, MISREPRESENTATION OR FRAUD
417	- 0689 EMPLOYMENT-RELATED PRACTICES EXCLUSION
512	- 0102 EXCLUSION OF WAR, MILITARY ACTION AND TERRORISM
513	- 0102 WAR OR TERRORISM EXCLUSION (LIABILITY ENDORSEMENT)
103	- 0498 CALCULATION OF PREMIUM
147	- 0498 MAINE CHANGES-CANCELLATION AND NONRENEWAL
15	- 0689 PROTECTIVE SAFEGUARDS
113	- 0498 INSURANCE INSPECTION SERVICES EXEMPTION FROM LIABILITY

(should be City of Portland)

18 (05/01)

INSURED COPY

COMMERCIAL
RENEWAL

Forming a part of

Policy Number: BOP 9101824	
Coverage is Provided in PEERLESS INSURANCE COMPANY - A STOCK COMPANY	
Named Insured: FABRIGANZA INC DBA PENELOPE DABORN LTD	Agent: CLARK ASSOCIATES Agent Code: 8210564 Agent Phone: (207)-774-8257

COMMERCIAL PROTECTOR POLICY DECLARATIONS (Continued)
SPECIAL (INCLUDING EQUIPMENT BREAKDOWN)

FORMS AND ENDORSEMENTS APPLICABLE TO THIS POLICY:

(Applicable Forms and Endorsements are omitted if shown in specific Coverage Part/Coverage Form Declarations)

Form Number	Description
17-59	- 0694 DECLARATIONS EXTENSION

PREMIUM	
Terrorism Risk Insurance Act of 2002 Coverage	\$ 5.00
Total Policy Premium	\$ 527.00

Countersigned: By Robin S. Carlson 01/16/2003
Authorized Representative Date

Includes copyrighted material of Insurance Services Office, Inc. with its permission. Copyright, Insurance Services Office, Inc. 1982,1983, 1984, 1985.

Date issued: 06/24/2003

Penelope Daborn

LANDLORD RELEASE FORM

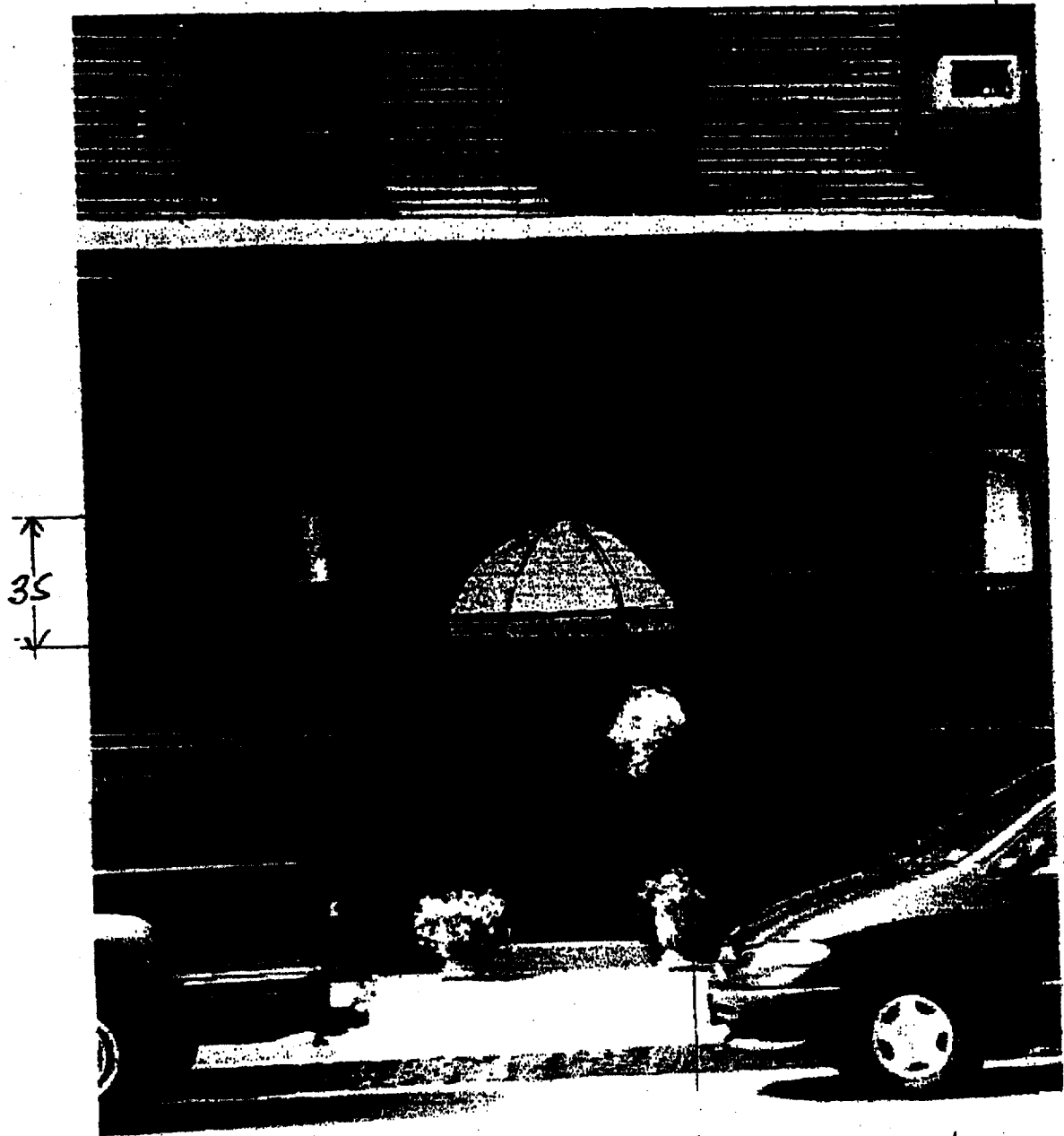
WRITTEN CONSENT AND AGREEMENT RELATING TO A CERTAIN SIGN PROPOSED TO BE
ERECTED ON A BUILDING AT 2 Milk Street

IN PORTLAND, MAINE Y MILK MTR LLC being the owner of the premises
at 2 MILK STREET in Portland, Maine hereby gives consent to the
erection of a certain sign owned by Y MILK MTR LLC over the
public sidewalk or on the building from said premises as described in
application to the Division of Inspection Services of Portland, Maine for a
permit to cover erection of said sign:

And in consideration of the issuance of said permit Y MILK MTR LLC,
owner of said premises, in event said sign shall cease to serve the purpose
for which it was erected or shall become dangerous and in event the owner of
said sign shall fail to remove said sign or make it permanently safe in case
the sign still serves the purpose for which it was erected, hereby agree
for himself or itself, for his heirs, its successors, and his or its
assigns, to completely remove said sign within ten days of notice from said
Inspector of Buildings that said sign is in such condition and of order from
him to remove it.

In Witness whereof, the owner of said premises has signed this consent and
agreement this 17th day of September 2004.

Philip C. Haughey Jr.
BY: PHILIP C. HAUGHEY JR
ITS: MANAGER



← 52 1/2 →

9' ABOVE
SIDEWALK!

12/13/03

Michael - I would like to put a canopy
over my side entrance as above —
yellow. Would that be OK?