

**City of Portland, Maine – Building or Use Permit Application** 389 Congress Street, 04101, Tel: (207) 874-8703, FAX: 874-8716

Location of Construction: <b>332 Fore St</b>		Owner: <b>Port City Apartments</b>		Phone:		Permit No: <b>960570</b>	
Owner Address:		Leasee/Buyer's Name: <b>Anadeus Music 332 Fore St Portland, ME 04101</b>		Phone:		Business Name:	
Contractor Name: <b>Southpow Design</b>		Address:		Phone: <b>772-8416</b>		Permit Issued: <b>JUN 21 1996</b>	
Past Use: <b>Retail</b>		Proposed Use: <b>Same</b>		COST OF WORK: \$		PERMIT FEE: \$ <b>27.50</b>	
				FIRE DEPT. <input type="checkbox"/> Approved <input type="checkbox"/> Denied		INSPECTION: Use Group: Type:	
				Signature:		Signature:	
Proposed Project Description: <b>Erect Signage 12.5 Sq Ft</b>				PEDESTRIAN ACTIVITIES DISTRICT (P.U.D.)		Zoning Approval: <b>B-3 029-C-003</b>	
				Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied		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 <input type="checkbox"/> maj <input type="checkbox"/> minor <input type="checkbox"/> mm <input type="checkbox"/>	
Permit Taken By: <b>Mary Greenk</b>		Date Applied For: <b>13 June 1996</b>				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	

1. This permit application doesn't preclude the Applicant(s) from meeting applicable State and Federal rules.
2. Building permits do not include plumbing, septic or electrical work.
3. 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..

**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 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 provisions of the code(s) applicable to such permit

*Michael A. Power*  
SIGNATURE OF APPLICANT **Michael Power** ADDRESS: **332 Fore St** DATE: **13 June 1996** PHONE: **772-8416**

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE:

White-Permit Desk Green-Assessor's Canary-D.P.W. Pink-Public File Ivory Card-Inspector

**PERMIT ISSUED**  
**JUN 21 1996**  
**CITY OF PORTLAND**

Zone: **B-3** CBL: **029-C-003**  
Zoning Approval:  
**Special Zone or Reviews:**  
 Shoreland  
 Wetland  
 Flood Zone  
 Subdivision  
 Site Plan  maj  minor  mm

**Zoning Appeal**  
 Variance  
 Miscellaneous  
 Conditional Use  
 Interpretation  
 Approved  
 Denied

**Historic Preservation**  
 Not in District or Landmark  
 Does Not Require Review  
 Requires Review

Action:  
 Approved  
 Approved with Conditions  
 Denied

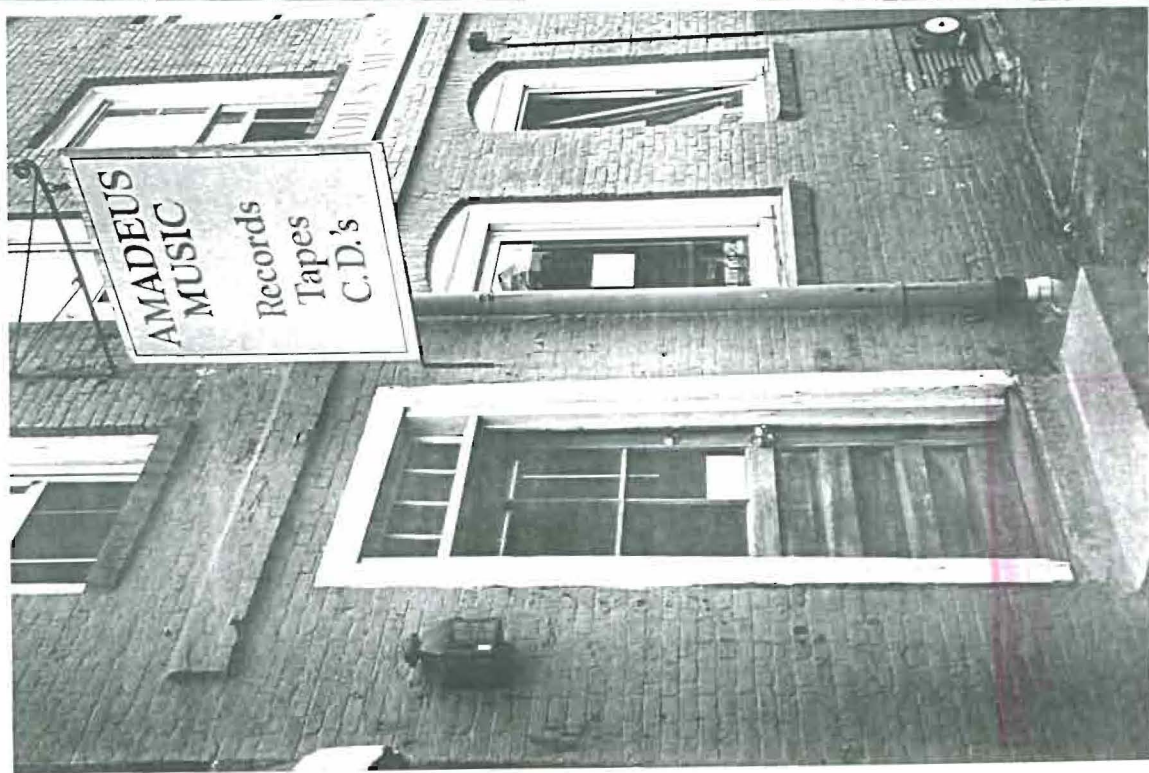
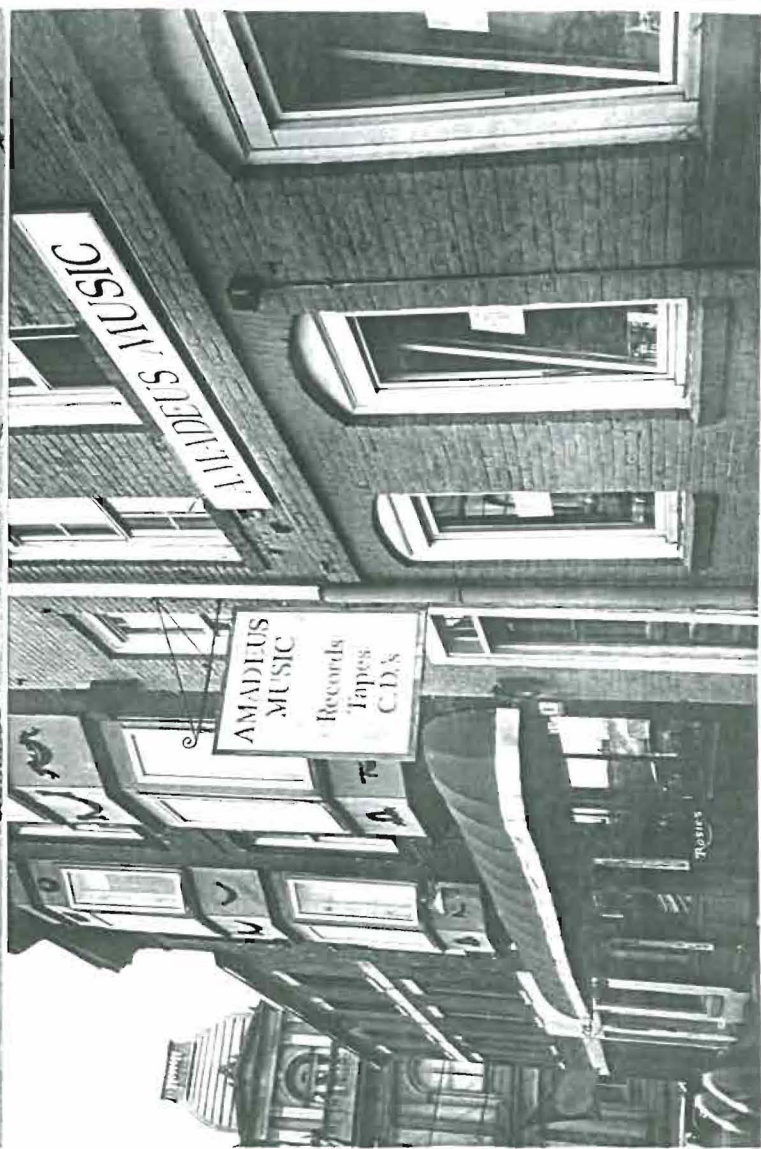
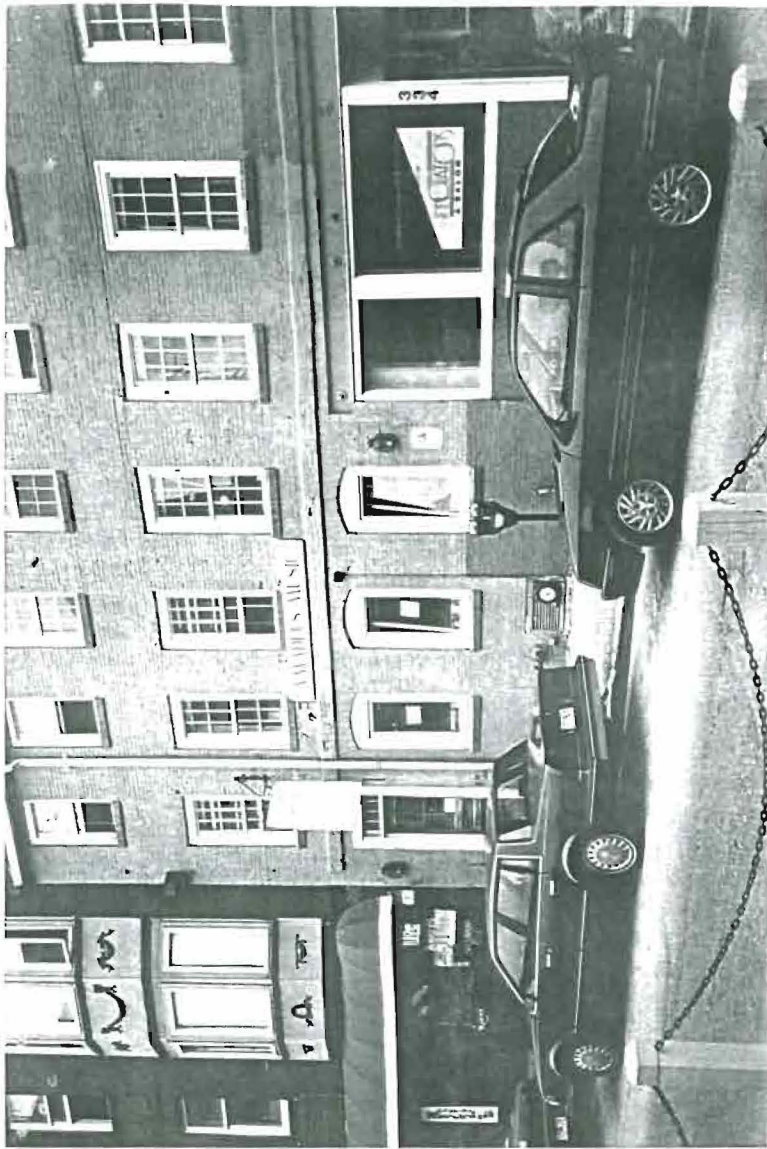
Date: **6/13/96**

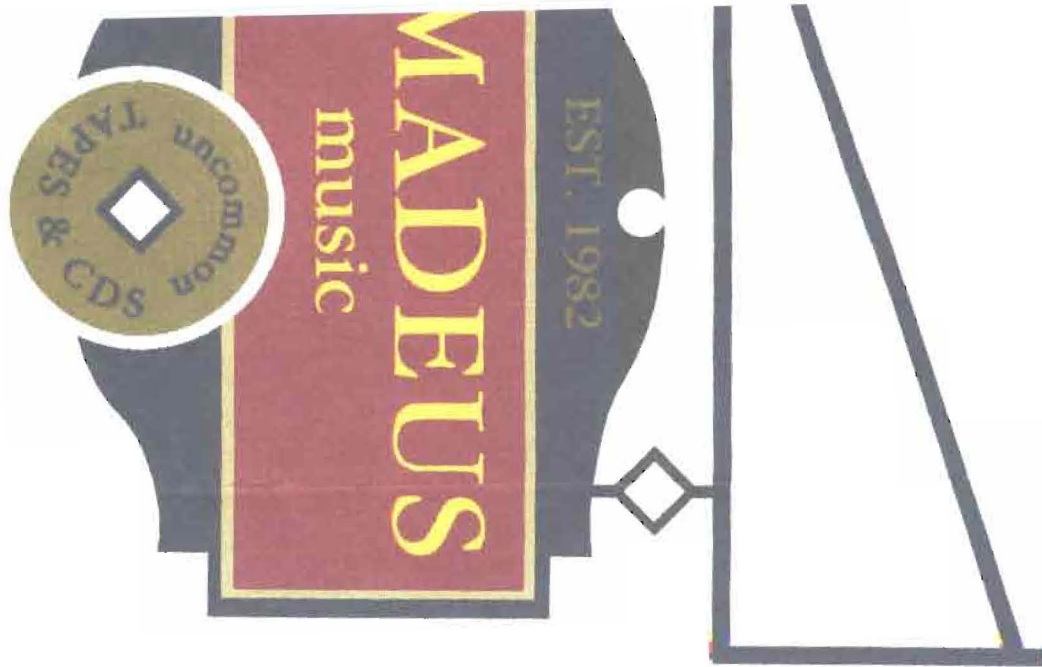
*D. Munnson*

CEO DISTRICT **2**

*T. Munnson*







*Final Design  
(using previous design colors)*

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<b>SOUTHPAW DESIGN</b>  207-878-0678 253 Gray Road Falmouth, Me 04105	CUSTOMER <i>MILK POWER 772-8416</i>	
	LOCATION <i>352 FORE ST. PORT.</i>	DATE <i>6-10-96</i>
	SCALE <i>ACTUAL</i>	DRAWING # <i>AMA. CDL</i>
<input type="checkbox"/> PRESENTATION <input checked="" type="checkbox"/> CONSTRUCTION	ACCEPTED SIGNATURE	



SIGNAGE

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 332 Fore St. ZONE: B-3

OWNER: Michael Power Port City Apts. (Leasee)

APPLICANT: Michael Power AMADEUS MUSIC

ASSESSOR NO.: 029-C-003

SINGLE TENANT LOT? YES \_\_\_\_\_ NO ✓

MULTI TENANT LOT? YES ✓ NO \_\_\_\_\_

FREESTANDING SIGN? YES \_\_\_\_\_ NO ✓ DIMENSIONS \_\_\_\_\_  
(ex. pole sign..)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO ✓ DIMENSIONS \_\_\_\_\_

BLDG. WALL SIGN? YES ✓ NO \_\_\_\_\_ DIMENSIONS 12 1/2 sq. ft.  
(attached to bldg)

MORE THAN ONE SIGN? YES \_\_\_\_\_ NO ✓ DIMENSIONS \_\_\_\_\_

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS: Current Sign is ~~4' x 3'2"~~  
4' x 3'2"

Current Sign is old and faded. New sign is historical in nature.

LOT FRONTAGE (FEET) 26' x 2 = 52' MAX

BLDG FRONTAGE (FEET) 52' x 2 = 104'

AWNING YES \_\_\_\_\_ NO ✓ IS AWNING BACKLIT? YES \_\_\_\_\_ NO \_\_\_\_\_

HEIGHT OF AWNING: \_\_\_\_\_

IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? \_\_\_\_\_

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

Vertical stamp: *PLANNING DEPARTMENT*



CITY OF PORTLAND

Dear Applicant for Historic Preservation Review:

To receive a Certificate of Appropriateness from the City of Portland's Historic Preservation Committee, it is necessary for you to complete the enclosed application form and return it with a copy of proposed plans, drawings and specifications and, if necessary, supplemental materials.

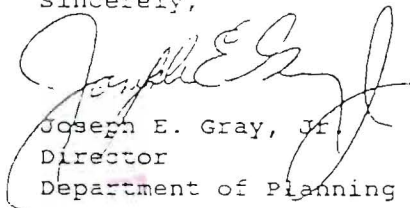
This application is to be filed with the Historic Preservation staff at their office in the Department of Planning and Urban Development, City Hall, 389 Congress Street, Room 211, Portland, Maine, at least 2 weeks before the meeting of the Historic Preservation Committee during which time the application will be reviewed. The Committee meets on the first and third Wednesdays of each month. A copy of the upcoming meeting schedule with application deadlines is enclosed for your convenience.

Following a preliminary review of your application by staff, you may be asked to submit additional information. In general, documentation submitted with the application is non-returnable, with the exception of historic photographs, etchings, lithographs, original blueprints and drawings, or other special materials.

Please note that there is no application fee required for historic preservation review. However, applicants are responsible for the costs of sending notices and placement of a legal ad in the newspaper. Such costs shall be paid prior to the issuance of a Certificate of Appropriateness/ Building Permit or upon denial.

If you have questions or need assistance in completing this form, please contact the Historic Preservation staff at 874-8300, (Gary Hamilton, ext. 8699, or Deborah Andrews at ext. 8726).

Sincerely,



Joseph E. Gray, Jr.  
Director  
Department of Planning and Urban Development

CITY OF PORTLAND, MAINE  
HISTORIC PRESERVATION COMMITTEE



Pursuant to review under the City of Portland's Historic Preservation Ordinance (Chapter 14, Article IX of the Portland City Code), application is hereby made for a Certificate of Appropriateness for the following work on the specified historic property:

Property Name and Address: 332 Fore St.

Applicant: (name) Michael Power (telephone) 772-8416

(company, if applicable) AMADEUS MUSIC

(address) 332 Fore St.

Property Owner, if different: (name) Port City Apts. (Peter Colesworthy)

(address) P.O. Box 10563  
Portland, Maine 04104

(telephone) 846-3923

Architect (if any): \_\_\_\_\_

Contractor or Builder (if any): \_\_\_\_\_

Local Designation:

Landmark.  Within Historic District.  Historic Landscape District.

Michael Power  
Applicant's Signature

\_\_\_\_\_  
Owner's Signature (if different)

\*\* Note: No application fee is required. Applicant is responsible for costs of sending notices and placement of legal ad. Such costs shall be paid prior to issuance to Certificate/Building Permit or upon denial

All materials related to this Application MUST BE submitted no later than 2 weeks prior to your desired meeting date in order for this application to be placed on the Historic Preservation Committee Agenda.

II. ATTACHMENTS

Provide a copy of the plans, renderings, drawings and written specifications of the alteration. To supplement your application, it would be helpful to submit photographs or slides of current conditions, material samples, site plans, sketches, historical documentation, or anything else that will illustrate to the Committee and staff the effect of the proposed change.

The following information is enclosed:

- Exterior photographs
- Sketches, elevation drawings and/or annotated photographs
- Floor plans
- Site plan showing relative location of adjoining structures, if located within a district
- Specifications
- Other (explain) \_\_\_\_\_

Please note: In order to be photocopied by the City, plans or drawings should generally not exceed 11" x 17". If you wish to submit larger plans, please provide 10 copies for distribution.

If you have questions or need assistance in completing this form, please contact the Historic Preservation staff at 874-8300, (Gary Hamilton, ext 8699, or Deborah Andrews at ext. 8726).

Please return this form and related application materials to:

Department of Planning and Urban Development  
Attn: Historic Preservation Staff  
Room 211  
Portland City Hall  
389 Congress Street  
Portland, ME 04101

**PORT CITY APARTMENTS**

P.O. Box 10563  
Portland, ME 04104

June 12, 1996

Mr. Michael Power, President  
M P Enterprises, Inc. d/b/a Amadeus Music  
332 Fore Street  
Portland, Maine 04101

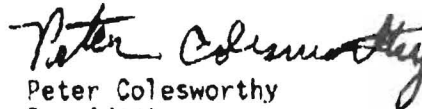
RE: Landlord Consent for Signage

Dear Mike:

As owner of the building at 332 334 Fore Street, we hereby give you our consent as your landlord to hang a new sign on the building. If you have any questions, please call our office at 846-6594.

Thank you for your efforts to improve the appearance of the exterior of our building.

Best regards,

  
Peter Colesworthy  
President

PC/lc



# ACORD. INSURANCE BINDER

ISSUE DATE (MM/DD/YY)

6/07/96

THIS BINDER IS A TEMPORARY INSURANCE CONTRACT, SUBJECT TO THE CONDITIONS SHOWN ON THE REVERSE SIDE OF THIS FORM

<b>PRODUCER</b> Morse, Payson & Noyes 100 Middle Street Plaza Portland, ME 04101		<b>COMPANY</b> CLH Maryland Insurance Group	<b>BINDER NO.</b> 000064254																
<b>CODE</b>	<b>SUB-CODE</b>	<table border="1"> <tr> <th colspan="2">EFFECTIVE</th> <th colspan="2">EXPIRATION</th> </tr> <tr> <td><b>DATE</b></td> <td><b>TIME</b></td> <td><b>DATE</b></td> <td><b>TIME</b></td> </tr> <tr> <td>6/07/96</td> <td>12:01 X</td> <td>7/07/96</td> <td>X 12:01 AM</td> </tr> <tr> <td></td> <td></td> <td></td> <td>NOON</td> </tr> </table>		EFFECTIVE		EXPIRATION		<b>DATE</b>	<b>TIME</b>	<b>DATE</b>	<b>TIME</b>	6/07/96	12:01 X	7/07/96	X 12:01 AM				NOON
EFFECTIVE		EXPIRATION																	
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6/07/96	12:01 X	7/07/96	X 12:01 AM																
			NOON																
		THIS BINDER IS ISSUED TO EXTEND COVERAGE IN THE ABOVE NAMED COMPANY PER EXPIRING POLICY NO.:																	
<b>INSURED</b> MP Enterprises, Inc. dba Amadeus Music 332 Fore Street Portland, ME 04101		<b>DESCRIPTION OF OPERATIONS/VEHICLES/PROPERTY</b> (including Location) Music Store 332 Fore Street, Portland, Me 04101																	

TYPE OF INSURANCE	COVERAGE/FORMS	AMOUNT	DEDUCTIBLE	CONTRUL
<b>PROPERTY CAUSE OF LOSS</b> <input type="checkbox"/> BASIC <input type="checkbox"/> BROAD <input checked="" type="checkbox"/> SPEC. <input checked="" type="checkbox"/> Replacement Cost	Business Personal Property Business Income ALS up to 12 months	\$115,000.	250	
<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT	RETRO DATE FOR CLAIMS MADE:	GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG. \$ 2,000,000 PERSONAL & ADV. INJURY \$ 1,000,000 EACH OCCURRENCE 1,000,000 FIRE DAMAGE (Any one fire) \$ 1,000,000 MED. EXP. (Any one person) \$ 10,000		
<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRE AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY		COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per Accident) \$ PROPERTY DAMAGE \$ MEDICAL PAYMENTS \$ PERSONAL INJURY PROT. \$ UNINSURED MOTORIST \$		
<b>AUTO PHYSICAL DAMAGE DEDUCTIBLE</b> <input type="checkbox"/> COLLISION <input type="checkbox"/> OTHER THAN COL:	<input type="checkbox"/> ALL VEHICLES <input type="checkbox"/> SCHEDULED VEHICLES	ACTUAL CASH VALUE STATED AMOUNT \$ OTHER		
<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	RETRO DATE FOR CLAIMS MADE:	EACH OCCURRENCE \$ AGGREGATE \$ SELF-INSURED RETENTION \$		
<b>WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY</b>		<input checked="" type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT \$ 100,000 DISEASE-POLICY LIMIT \$ 500,000 DISEASE-EACH EMPLOYEE \$ 100,000		

SPECIAL CONDITIONS/OTHER COVERAGES

NAME OF BORROWER

<input type="checkbox"/> MORTGAGEE	<input type="checkbox"/> ADDITIONAL INSURED
<input type="checkbox"/> LOSS PAYEE	
<input type="checkbox"/> LOAN #	

AUTHORIZED REPRESENTATIVE

*Cheri Hobbs*  
Cheri Hobbs

ACORD 201 (1-95)

ACORD 201 (1-95)

