

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

BUILDING PERMITS

PERMIT

Permit Number: 100213

Please Read Application And Notes, if Any, Attached

This is to certify that 322 Fore Street, LLC/Yarmouth Signs

has permission to Erect attached 29" x 32" building wall sign

AT 320 Fore St E 029 E006007

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 lath or other closed-in. 2 HOUSING NOTICE IS REQUIRED.

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

PERMIT ISSUED

OTHER REQUIRED APPROVALS

Fire Dept. _____

Health Dept. _____

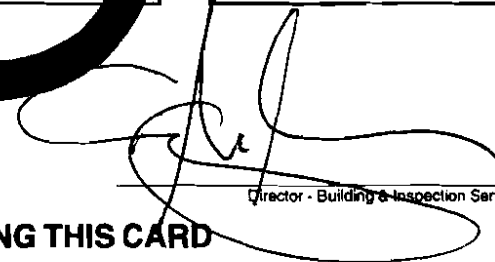
Appeal Board _____

Other _____

MAR 24 2010

CITY OF PORTLAND

Department Name



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: 10-0213	Issue Date:	CBL: 029 C006007
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Location of Construction: 320 Fore St	Owner Name: 322 Fore Street, LLC <i>(Card. (BT))</i>	Owner Address:	Phone:
Business Name: Cardente Real Estate	Contractor Name: Yarmouth Signs	Contractor Address: P.O. Box 346 Yarmouth	Phone: 2078460473
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

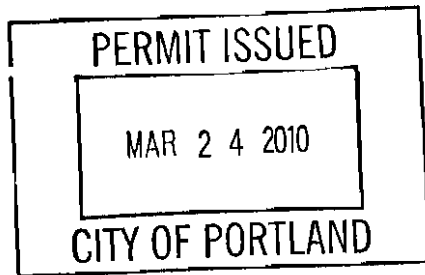
Past Use: Commercial / Cardente Real Estate <i>(3rd flr with floors)</i>	Proposed Use: Commercial / Erect attached 29" x 32" building wall sign.	Permit Fee: \$77.88	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Erect attached 29" x 32" building wall sign.		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>C</i> Type: <i>Sign</i> <i>IBC 2003</i>	

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: 03/05/2010	Zoning Approval
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<p>1. This permit application does not preclude the Applicant(s) from meeting applicable State and Federal Rules.</p> <p>2. Building permits do not include plumbing, septic or electrical work.</p> <p>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..</p>	<p>Special Zone or Reviews</p> <p><input type="checkbox"/> Shoreland</p> <p><input type="checkbox"/> Wetland</p> <p><input type="checkbox"/> Flood Zone</p> <p><input type="checkbox"/> Subdivision</p> <p><input type="checkbox"/> Site Plan</p> <p>Maj <input type="checkbox"/> Minor <input type="checkbox"/> MM <input type="checkbox"/></p> <p><i>Ok w/condition</i> Date: <i>3/8/10</i> <i>fen</i></p>	<p>Zoning Appeal</p> <p><input type="checkbox"/> Variance</p> <p><input type="checkbox"/> Miscellaneous</p> <p><input type="checkbox"/> Conditional Use</p> <p><input type="checkbox"/> Interpretation</p> <p><input type="checkbox"/> Approved</p> <p><input type="checkbox"/> Denied</p> <p>Date: _____</p>	<p>Historic Preservation <i>YES</i></p> <p><input type="checkbox"/> Not in District or Landmark</p> <p><input type="checkbox"/> Does Not Require Review</p> <p><input type="checkbox"/> Requires Review</p> <p><input type="checkbox"/> Approved</p> <p><input checked="" type="checkbox"/> Approved w/Conditions</p> <p><input type="checkbox"/> Denied</p> <p>Date: <i>3/8/10</i> <i>D. Andrews</i></p>
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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

BUILDING PERMIT INSPECTION PROCEDURES

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

to schedule your inspections as agreed upon

Permits expire in 6 months, if the project is not started or ceases for 6 months.

The Owner or their designee is required to notify the inspections office for the following inspections and provide adequate notice. Notice must be called in 48-72 hours in advance in order to schedule an inspection:

By initializing at each inspection time, you are agreeing that you understand the inspection procedure and additional fees from a "Stop Work Order" and "Stop Work Order Release" will be incurred if the procedure is not followed as stated below.

A Pre-construction Meeting will take place upon receipt of your building permit.

 X **Final inspection required at completion of work.**

Certificate of Occupancy is not required for certain projects. Your inspector can advise you if your project requires a Certificate of Occupancy. All projects DO require a final inspection.

If any of the inspections do not occur, the project cannot go on to the next phase, REGARDLESS OF THE NOTICE OR CIRCUMSTANCES.

CERIFICATE OF OCCUPANICES MUST BE ISSUED AND PAID FOR, BEFORE THE SPACE MAY BE OCCUPIED.

Signature of Applicant/Designee

Date

Signature of Inspections Official

Date

City of Portland, Maine - Building or Use Permit

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

Permit No: 10-0213	Date Applied For: 03/05/2010	CBL: 029 C006007
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Location of Construction: 320 Fore St (condo #7)	Owner Name: 322 Fore Street, LLC	Owner Address:	Phone:
Business Name: Cardente Real Estate	Contractor Name: Yarmouth Signs	Contractor Address: P.O. Box 346 Yarmouth	Phone (207) 846-0473
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial / Erect attached 29" x 32" building wall sign.	Proposed Project Description: Erect attached 29" x 32" building wall sign.
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Dept: Historic **Status:** Approved with Conditions **Reviewer:** Deborah Andrews **Approval Date:** 03/08/2010**Note:** **Ok to Issue:**

- 1) Sign bracket to be installed at same height as that of "Watson & Worthley" sign bracket. Bracket style to be consistent with "W&W" bracket.

* This application makes no reference to sign lighting. If lighting is proposed, the applicant must receive historic preservation approval for installation specification.

Dept: Zoning **Status:** Approved **Reviewer:** Ann Machado **Approval Date:** 03/08/2010**Note:** **Ok to Issue:**

- 1) ANY exterior work requires a separate review and approval thru Historic Preservation. This property is located within an Historic District.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Tammy Munson **Approval Date:** 03/17/2010**Note:** **Ok to Issue:**

- 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.

Comments:

3/8/2010-amachado: Left vcm for Matthew Cardente. Is he ground floor or upper floor tenant? If upper floor - need to know wall area and other signs that exist. Is this a new location? If so, what was in the space before?

3/8/2010-amachado: Spoke to Matthew Cardente. Cond #7 occupies the third and fourth floors. Right now. His proposed sign is the only upper floor tenant sign.

3/8/2010-gg: received permit from historic on 03/08/2010. /gg



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>322 Fore Street, Portland, Maine (condo #7)</u>		
Tax Assessor's Chart, Block & Lot Chart# <u>29</u> Block# <u>C</u> Lot# <u>6.007</u>	Owner: <u>322 Fore Street, LLC to be changed to: Fore Street Investments, LLC</u>	Telephone: <u>775-7363</u> <u>(cell) 233-8229</u>
Lessee/Buyer's Name (If Applicable) <u>Fore Street Investments - Matthew Cardente</u>	Contractor name, address & telephone: <u>Yarmouth Signs Chris Bourgeois 846-0473</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ <u>78.00</u> Awning Fee= cost of work Total Fee: \$ <u>78.00</u>

Cell
TO Pick UP
6.44 square feet
X
\$2=
\$12.88
+ \$65.00
\$
= \$78.00

Who should we contact when the permit is ready: Matt Cardente phone: 775-7363 ext 11

Tenant/allocated building space frontage (feet): Length: 40' Height: 3 1/2 stories (see tax card for SF)
Lot Frontage (feet) 40' Single Tenant or Multi Tenant Lot mult

Current Specific use: office
If vacant, what was prior use: office
Proposed Use: office

Information on proposed sign(s):
 Freestanding (e.g., pole) sign? Yes ___ No X Dimensions proposed: _____ Height from grade: _____
 Bldg. wall sign? (attached to bldg) Yes X No ___ Dimensions proposed: 29" x 32" (blade sign)

Proposed awning? Yes ___ No X 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): None for this space

RECEIVED

MAR - 5 2010

Dept. of Building Inspections
City of Portland Maine

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.

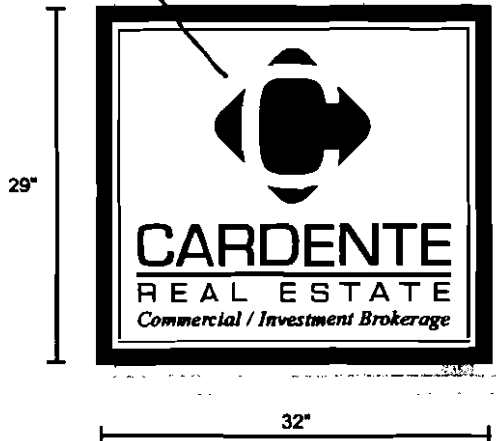
I hereby certify that I am the Owner of record of the named property, or that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his/her authorized agent. I agree to conform to all applicable laws of this jurisdiction. In addition, 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>Matthew Cardente</u>	Date: <u>2/24/10</u>
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This is not a permit; you may not commence ANY work until the permit is issued.

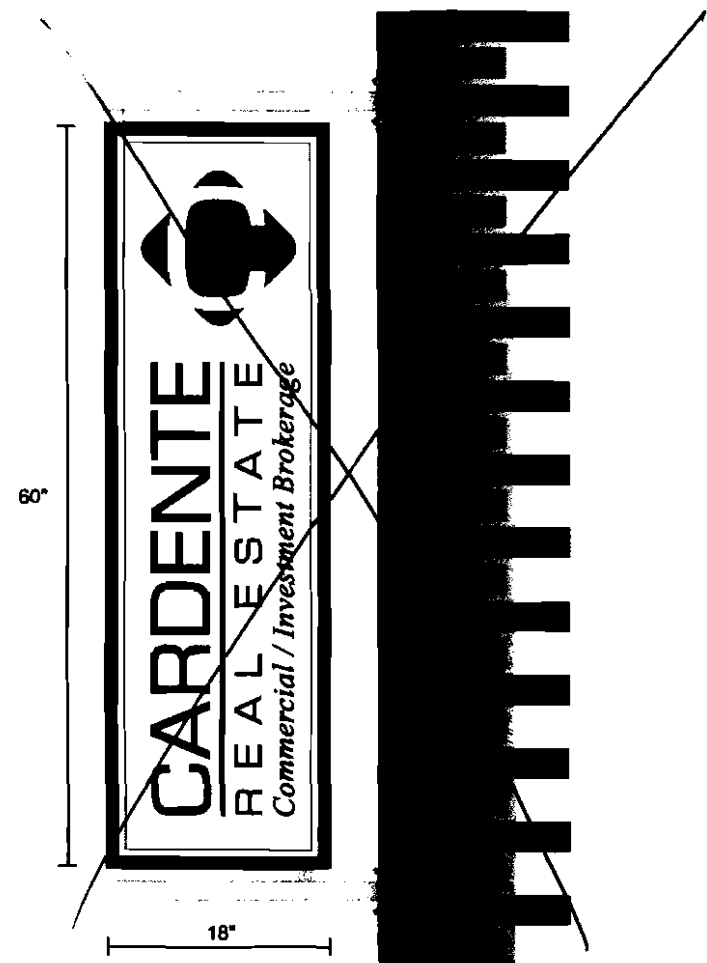
B-3 - upper floor front.
 $5/6$ of wall area - $40' \times 30' = 1200'$ $5/6 = 60'$ Proposed $29" \times 32" = 122" = 6.44'$
012

“(C” will be slightly raised for texture) ↓




1-1/2" Tubular steel frame
3/4 MDO panel w/ vinyl graphics

Per Deb Andrews, we will use metal brackets consistent with the other signs on the building (see next page)



1-1/2" Tubular steel frame
3/4 MDO panel w/ vinyl graphics

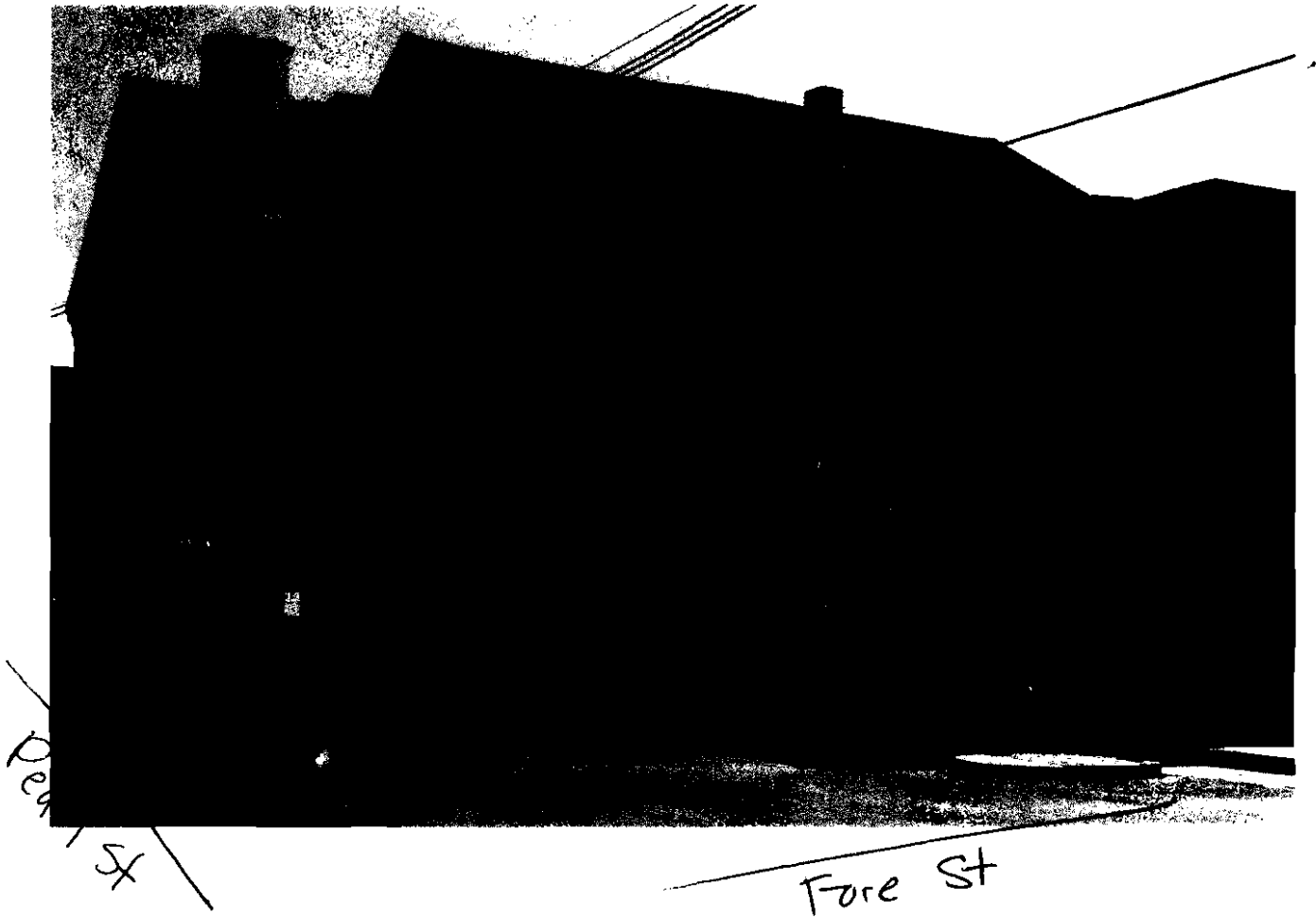
	www.yarmouthsigns.com 27 Lafayette Yarmouth, ME. 04096 207.846.0473 © Copyright 2010	THIS DESIGN IS THE EXCLUSIVE PROPERTY OF YARMOUTH SIGNS AND ALL RIGHTS TO ITS USE OR REPRODUCTION ARE RESERVED. THE ACCURACY OF THIS COLOR RENDERING IS LIMITED BY MEDIA AND OUTPUT DEVICES AND IS INTENDED FOR REPRESENTATIONAL PURPOSES ONLY.	NOTE:	CUSTOMER: Saabourne
				LOCATION:
				DATE: 2/7/10
			DRAWING NO: 1 - REV 1	APPROVED:



Sign location. Bracket will be similar to what is used for other signs and at same height (12 +/- feet).



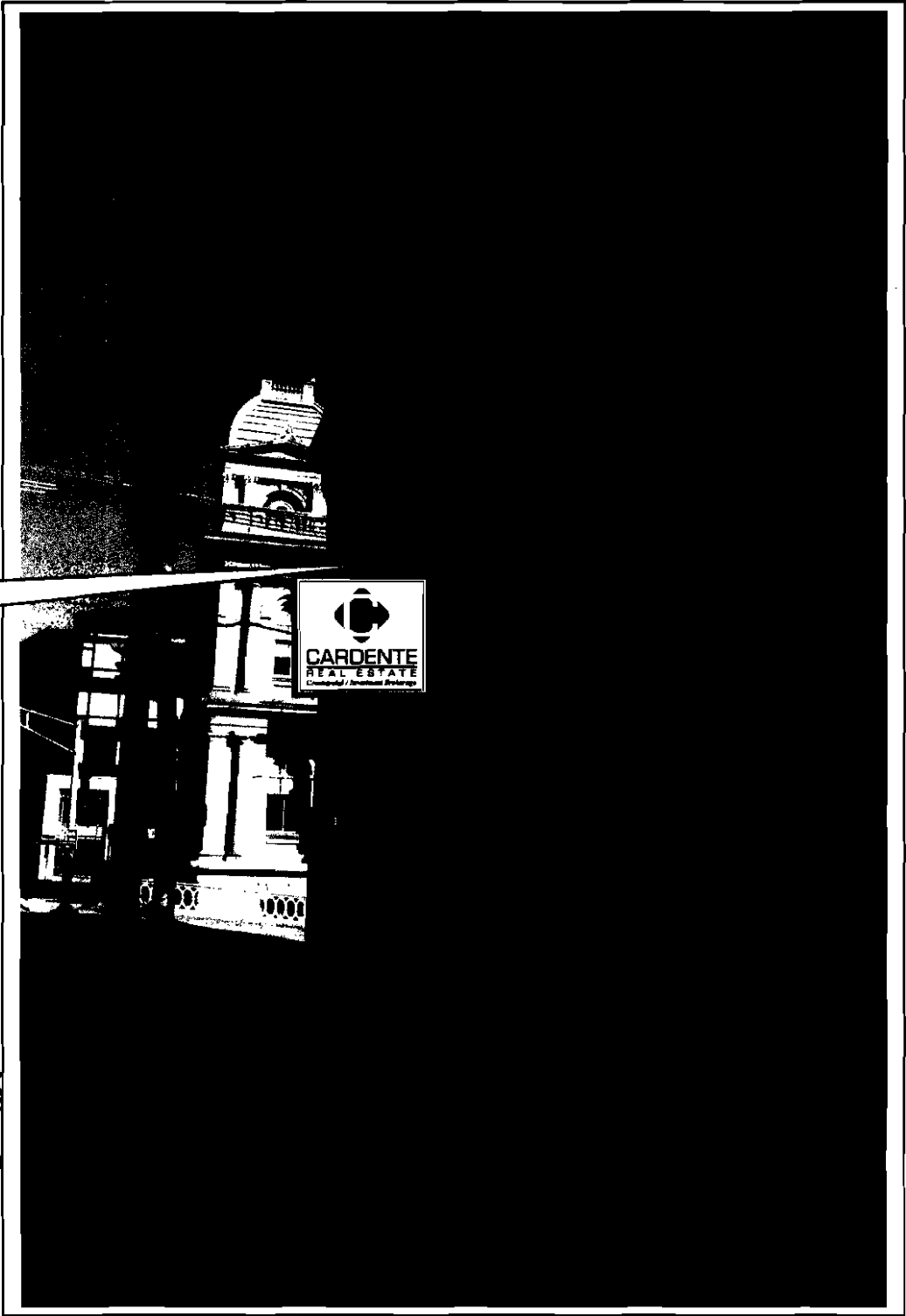
Existing sign bracket on building. Bracket for our sign will be like this.



Proposed Sign
Location



Space Frontage (plus the same frontage
on Fore Street on Gold Street (rear))



Sign
Location



FOREST
STREET

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/26/2010

PRODUCER (207)829-3450 FAX (207)829-6350
Norton Insurance Agency
275 US Route 1
Cumberland Foreside, ME 04110

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 CARDENTE REAL ESTATE, LLC
299 FOREST AVE
PORTLAND, ME 04101

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Peerless Indemnity	18333
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	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS								
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	BOP8389663	02/10/2010	02/10/2011	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000								
		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/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<table border="1"> <tr> <td>WC STATUTORY LIMITS</td> <td>OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATUTORY LIMITS	OTHER													
E.L. EACH ACCIDENT	\$													
E.L. DISEASE - EA EMPLOYEE	\$													
E.L. DISEASE - POLICY LIMIT	\$													

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 The City of Portland is an additional insured as respects General Liability.
 RE: Named Insured's sign

CERTIFICATE HOLDER	CANCELLATION
City of Portland 389 Congress Street Portland, ME 04101	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 Raina Bryant AIS,API/REB



IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.