

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING PERMITS

PERMIT

Permit Number: 090849

PERMIT ISSUED

SEP 24 2009

CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

This is to certify that Elc Limited Liability Company, a Kraft S

has permission to Attached two wall signs total of 8 sq. Ft.

AT 130 Middle St

CE 029 E001001

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 his 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 work is done-in. 24 HOURS NOTICE IS REQUIRED.

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

OTHER REQUIRED APPROVALS

Dept. _____
City Dept. _____
Council Board _____
City _____
Department Name

[Signature] 9/17/09
Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

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

CBL: 029 E001001

Building Permit #: 09-0849

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

Permit No: 09-0849	Date Applied For: 08/03/2009	CBL: 029 E001001
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Location of Construction: 130 Middle St	Owner Name: Elc Limited Liability Company	Owner Address: 42 Market St	Phone: 207-774-1000
Business Name: Androscoggin Bank	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone: (207) 782-9654
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial / Attached two wall signs total of 108 sq. ft.	Proposed Project Description: Attached two wall signs total of 108 sq. Ft
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Dept: PAD	Status: Approved	Reviewer: Deborah Andrews	Approval Date:	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Zoning	Status: Approved	Reviewer: Marge Schmuckal	Approval Date: 08/13/2009	Ok to Issue: <input checked="" type="checkbox"/>
Note:				
Dept: Building	Status: Approved with Conditions	Reviewer: Tammy Munson	Approval Date: 09/17/2009	Ok to Issue: <input checked="" type="checkbox"/>
Note: 1) Signage Installation to comply with Chapters 31 & 32 of the IBC 2003 building code.				

Comments: 8/11/2009-gg: Permit was in by mail, gg 8/13/2009-mes: I had to gather data on the tenant frontage that the applicant was remiss in supplying 9/16/2009-gg: Received permit from historic on 9/16/09. /gg

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

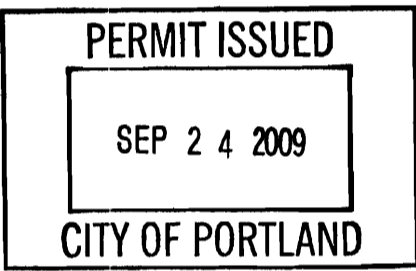
Permit No: 09-0849	Issue Date:	CBL: 029 E001001
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Location of Construction: 130 Middle St	Owner Name: Elc Limited Liability Company	Owner Address: 42 Market St	Phone: 207-774-1000
Business Name: Androscoggin Bank	Contractor Name: NeoKraft Signs	Contractor Address: 686 Main St. Lewiston	Phone: 2077829654
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: B-3

Past Use: Commercial	Proposed Use: Commercial / Attached two wall signs total of 108 sq. ft.	Permit Fee: \$246.00	Cost of Work: \$0.00	CEO District: 1
Proposed Project Description: Attached two wall signs total of 108 sq. Ft		FIRE DEPT: <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Denied <i>N/A</i>	INSPECTION: Use Group: <i>V</i> Type: <i>Sign</i> <i>IBC 2003</i>	
		PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) <i>in PAD</i> Action: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Signature: <i>D. Andrews</i> Date: <i>9/15/09</i>		

Permit Taken By: gg	Date Applied For: 08/03/2009	Zoning Approval
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1. This permit application does not 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..	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 checked="" type="checkbox"/> MM Date: <i>9/13/09</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:	Historic Preservation <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 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



1090849

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>130 Middle St.</u>		
Tax Assessor's Chart, Block & Lot Chart# Block# Lot# <u>029 E 001</u>	Owner: <u>ELC, Inc.</u> <u>42 Market St.</u> <u>Portland, ME 04101</u>	Telephone: <u>207-774-1000</u>
Lessee/Buyer's Name (If Applicable) <u>Androscoquin Bank</u>	Contractor name, address & telephone: <u>Neokraft Signs Inc.</u> <u>686 Main St.</u> <u>Lewiston, ME 04240</u> <u>207-782-9654</u>	Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage Total Fee: \$ <u>286.00</u> Awning Fee= cost of work Total Fee: \$ <u>286.00</u> <u>54' sq. ft. per set</u> <u>108' sq. ft. Total</u>
Who should we contact when the permit is ready: <u>Shane Moffett</u> phone: <u>782-9654</u>		
Tenant/allocated building space frontage (feet): Length: <u>61' per Bldg Permitted PLANS</u> Height: <u>61' x 2' = 122' MAX</u> Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot <u>multi</u> } <u>see plot plan</u> <u>OK</u>		
Current Specific use: <u>office building</u> If vacant, what was prior use: _____ Proposed Use: <u>office building</u>		
Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes _____ No _____ Dimensions proposed: _____ Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input checked="" type="checkbox"/> No _____ Dimensions proposed: _____ <u>(2) signs consisting of:</u> <u>(1) 1'-2 1/4" x 15'-4 3/4" letters and</u> <u>(1) 2'-1" x 17'-2" logo wave (EACH)</u>		
Proposed awning? Yes _____ No <input checked="" type="checkbox"/> 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: <u>N/A</u> Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions: <u>N/A</u> Awning? Yes _____ No _____ Sq. ft. area of awning w/communication: <u>N/A</u> <u>AUG - 9 2009</u>		
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. <u>-see attached-</u>		

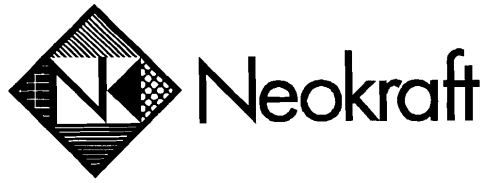
Please submit all of the information outlined in the Sign/Awning Application Checklist. Failure to do so may result in the automatic denial of your permit. 1 per facade + 1 extra permitted

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: Shane Moffett Date: 8-3-09
Neokraft Signs Inc.

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



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>

Transmittal to CITY OF PORTLAND
 INSPECTIONS
 389 CONGRESS STREET
 PORTLAND, ME 04101

Date 08.3.2009
Job No. 10709
Re. ANDROSCOGGIN BANK
 PERMITS
 MAIL

- Item**
- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Attached | <input type="checkbox"/> Hand Delivered | <input type="checkbox"/> Under separate cover |
| <input checked="" type="checkbox"/> Shop Drawings | <input type="checkbox"/> Prints | <input type="checkbox"/> Samples |
| <input checked="" type="checkbox"/> Copy of letter | <input type="checkbox"/> Change Order | <input type="checkbox"/> Other |
- Specifications

Copies	Date	No.	Description
1 set	08.03.2009	10709	(1) SIGN PERMIT APPLICATION, (1) ELECTRICAL PERMIT APPLICATION, LANDLORD AUTHORIZATION LETTER, DRAWINGS, FASTENING AND SIGN DETAIL SPECIFICATIONS, CERTIFICATE OF LIABILITY INSURANCE, PLOT PLAN, AND CHECK FOR \$301.00 TO OBTAIN A SIGN PERMIT AND ELECTRICAL PERMIT FOR ANDROSCOGGIN BANK LOCATED ON 130 MIDDLE STREET.

- Purpose**
- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> For approval | <input type="checkbox"/> No exception taken | <input type="checkbox"/> Rejected |
| <input type="checkbox"/> For your use | <input type="checkbox"/> Make corrections noted | <input type="checkbox"/> Review and comment |
| <input type="checkbox"/> As requested | <input type="checkbox"/> Revise and resubmit | <input type="checkbox"/> Other |

Remarks Please mail permits to this office upon approval.

Copy to

From SHANE MOFFETT

If enclosures are not as noted kindly notify us at once.

OFFICE:\CLERICAL\TEMPLATES\TRANSMITTAL FORM.DOT



CERTIFICATE OF LIABILITY INSURANCE

OP ID KV ANSAV-2
 DATE (MM/DD/YYYY) 07/27/09

PRODUCER TD Insurance, Inc. (SP) P.O. Box 406 Portland ME 04112-0406 Phone: 207-239-3500 Fax: 207-775-0339	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 #
INSURED Androscoggin Savings Bank Head & Associates, LLC 30 Lisbon Street Lewiston ME 04240	INSURER A	OneBeacon America Ins Co 20621
	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	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	X	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	710019888	06/21/09	06/21/10	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500000 MED EXP (Any one person) \$ 10000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ 2000000
			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 AUTO ONLY: EA ACC \$ 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? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS \$ TOTHER \$ 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

RE: Sign in Portland
 City of Portland is an Additional Insured in respects to the General Liability when required by written contract, agreement or permit.

CERTIFICATE HOLDER

CITYP01

City of Portland
 389 Congress St
 Portland ME 04101

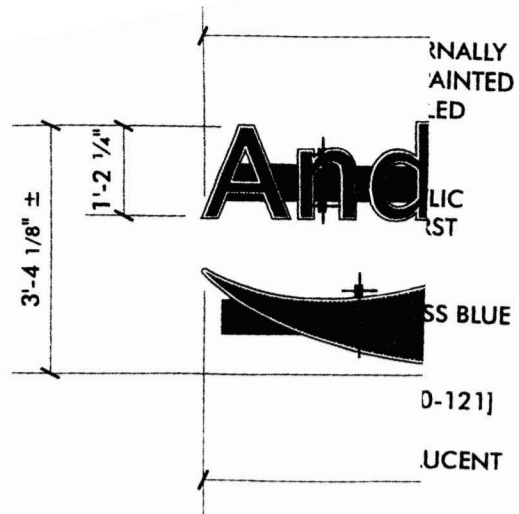
CANCELLATION

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
 TD Insurance, Inc.

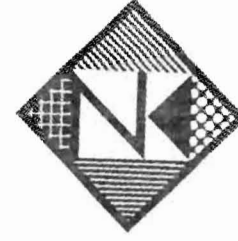


END VIEW



INTERNALLY ILLUMINATED
SCALE: 3/8" = 1'-9+5987]
S;
OF

3' 1
1 1/2



Neokraft
SIGN S

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>

Custom Sign Fabrication

These plans are the exclusive property of Neokraft Signs, Inc. and are the result of the original work of its employees. They are submitted to Neokraft for the sole purpose of consideration of these plans or to manufacture.