

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

BUILDING PERMIT

PERMIT ISSUED
Permit Number: 060367
APR 10 2006
CITY OF PORTLAND

This is to certify that MIDDLE STREET OFFICE TOWER B ASSOCIATES/Bur
has permission to Change color of logo on existing sign located at 17
AT 100 MIDDLE ST 029 E026001

provided that the person or persons who obtain or accept this permit shall comply with all of the provisions of the Statutes of the State 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 when permission proceeds before this building or part thereof is started or closed-in 24 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

Jaime Bourke 4/6/06
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: 06-0367	Issue Date: PERMIT ISSUED APR 10 2006	CBL: 029 E026001
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Location of Construction: 100 MIDDLE ST	Owner Name: MIDDLE STREET OFFICE TOWE	Owner Address: 100 MIDDLE ST	Phone:
Business Name:	Contractor Name: Burr Signs	Contractor Address: 59 DownEast Drive Yarmouth	Phone: 2077991183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	Zone: BS

Past Use: Commercial	Proposed Use: Commercial change color of logo on existing sign logo = 17 sf	Permit Fee: \$64.00	Cost of Work: \$64.00	CEO District: 1
		FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	INSPECTION: Use Group B Type: Sign	

Proposed Project Description: Change color of logo on existing sign logo = 17 sf	Signature: <i>[Signature]</i>	Signature: <i>AMB 4/10/06</i>
Action <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied		
Signature	Date	

Permit Taken By: dmartin	Date Applied For: 03/07/2006	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"/> <i>OK to [Signature]</i> Date: <i>3/24/06</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 As in District of [unclear] <input type="checkbox"/> Does Not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <i>AM 040406</i> <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	

City of Portland, Maine - Building or Use Permit

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

Permit No: 06-0367	Date Applied For: 03/07/2006	CBL: 029 E026001
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Location of Construction: 100 MIDDLE ST	Owner Name: MIDDLE STREET OFFICE TOWE	Owner Address: 100 MIDDLE ST	Phone:
Business Name:	Contractor Name: Burr Signs	Contractor Address: 59 DownEast Drive Yarmouth	Phone: (207) 799-1183
Lessee/Buyer's Name	Phone:	Permit Type: Signs - Permanent	

Proposed Use: Commercial change color of logo on existing sign logo = 17 sf	Proposed Project Description: Change color of logo on existing sign logo = 17 sf
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Dept: PAD	Status: Pending	Reviewer: Carrie Marsh	Approval Date: 04/04/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Zoning	Status: Approved	Reviewer: Ann Machado	Approval Date: 03/24/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>
Dept: Building	Status: Approved	Reviewer: Jeanine Bourke	Approval Date: 04/06/2006
Note:			Ok to Issue: <input checked="" type="checkbox"/>

Comments:

0312012006-dmartin: Sign application sat on my desk for a week and a half waiting for Randy to come in and sign the check. He was called twice.

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.

Total Square Footage of Proposed Structure 17		Square Footage of Lot	
Tax Assessor's Chart, Block & Lot Chart# <u>029</u> Block# <u>026001</u> Lot#		Owner: <u>MIDDLE ST OFFICE TOWER</u> Telephone: B	
Lessee/Buyer's Name (If Applicable) <u>BANK OF AMERICA</u>		Applicant name, address & telephone: \$ 2.00 <u>BURR SIGAUS</u> <u>50 DOWEAST DR.</u> <u>YARMOUTH, ME 04096</u> <u>207/846-7622</u>	
Current use: <u>OFFICE</u>		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> DEPT. OF BUILDING CITY OF PORTLAND <div style="border: 1px solid black; width: 100px; height: 100px; margin: 5px auto; text-align: center; line-height: 100px; font-size: 1.5em;">RECEIVED</div> </div>	
If the location is currently vacant, what was prior use: _____		Total s.f. of signage x \$1.00 per s.f. plus \$30.00 = Total Fee: <u>\$64.00</u> Awning Fee = Cost Of Work: \$ _____ Total Fee: \$/N _____	
Approximately how long has it been vacant: _____		Proposed use: <u>OFFICE</u>	
Project description: <u>CHANGE COLOR OF LOGO FACES PER ATTACHED</u>			
Contractor's name, address & telephone: <u>BURR SIGAUS</u>			
Who should we contact when the permit is ready: <u>AUDY BURR 846-7622</u> ext 101			
Mailing address: _____			
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 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: <u>03/06/06</u>
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This is NOT a permit, you may not commence ANY work until the permit is issued.



Signage/Awning Permit Application

1st loss 30
lost 98

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.

Tax Assessor's Chart, Block & Lot Chart# Block# Lot#			Owner:	Telephone:
Lessee/Buyer's Name (If Applicable)		Applicant name, address & telephone:		Total s.f. of signage x \$2.00 Per s.f. plus \$30.00/\$65.00 For H.D. signage= Total Fee: \$ _____ Awning Fee= cost of work ._____ Total Fee: \$ _____

Who should we contact when the permit is ready: _____ phone: _____

Tenant/allocated building space frontage (feet): Length: _____ Height _____
Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____

Current Specificuse: _____
If vacant, what was prior use: _____
Proposed Use: _____

Information on proposed sign(s):
 Freestanding (e.g., pole) sign? Yes _____ No Dimensions proposed: _____ Height from grade: _____
 Bldg. wall sign? (attached to bldg) Yes _____ No _____ Dimensions proposed: 8.5 ft - replace existing logo for Bank of America

Proposed awning? Yes _____ No _____ 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 proposed: _____
 Bldg. wall sign? (attached to bldg) Yes No _____ Dimensions proposed: letters 17'11 1/2" x 2' 8.5 ft logo
 Yes _____ No Sq. ft. area of awning w/communication: _____

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.

Signature of applicant:	Date:
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replacing existing logo.

EXISTING

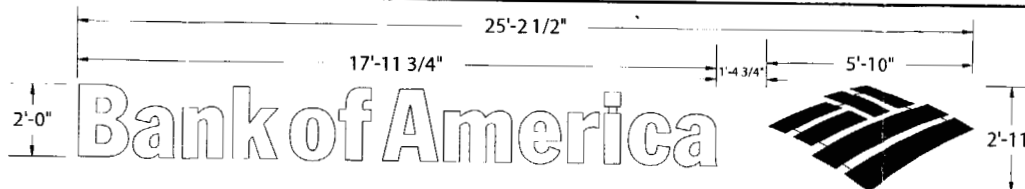
PROPOSED



SIGN BAND IS 2'-11" X 5'-10"

K4 CHANNEL LETTERS

BANK OF AMERICA
100 MIDDLE STREET
PORTLAND, ME
DRAWING # 40096-A-CL-SI



$$70'' \times 35'' = \frac{2450}{2} = 1225''$$

THOMAS 
SIGN & AWNING COMPANY, INC. 8.514

K4 CHNL LTRS LAYOUT SCALE: 3/8" = 1' - 0"

ACORD CERTIFICATE OF LIABILITY INSURANCE		THOMAS-215	DATE (MM/DD/YYYY) 11/01/05
PRODUCER Brown & Brown Insurance 17757 US Highway 19 N, Ste 660 P.O. Box 2456 Clearwater FL 33757-2456 Phone: 727-461-6044 Fax: 727-442-1695		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		INSURERS AFFORDING COVERAGE	NAIC #
		INSURER A Hartford Inn. Co. of the S.E.	38261
		INSURER B Federal Insurance Company	20281
		INSURER C Amerisure Insurance	19488
		INSURER D	

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.

NSR LTR	ADBL INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER POLICY PRO-JECT LOC	21UUNUU9594	12/31/04	12/31/05	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 Emp Ben. 1MM/2MM
A		AUTOMOBILE LIABILITY <input checked="" 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	21UUNUU9594	12/31/04	12/31/05	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000 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
B		EXCESS UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	79818379	12/31/04	12/31/05	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$ \$ \$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? yes, describe under SPECIAL PROVISIONS below	WC2016416	12/31/04	12/31/05	WC STATUTORY LIMITS OTK ER E.L. EACH ACCIDENT \$ 500000 E.L. DISEASE - EA EMPLOYEE \$ 500000 E.L. DISEASE - POLICY LIMIT \$ 500000
		OTHER				

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

BANK-06 Bank of America 100 Middle St. 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>30</u> 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 <i>Kevin J. Connolly</i>

LETTER OF AUTHORIZATION

Date: 10/11/05

To Whom It May Concern:

I, WILLIAM F. McHUGH, JR. PROPERTY MANGER owner or agent

Of the owner for the property listed as 100 MIDDLE STREET TOWER B

Located at 100 MIDDLE STREET (street address)

PORTLAND, MAINE (City-state)

04101 (Zip code)

Do authorize **Thomas Sign & Awning Company or their authorized**

Agent to obtain a permit for and to install signage on the above referenced property.

William F. McHugh Jr.
Owner or Agent

Date: 10/11/05

(707) 780-1680 ext # 3
Owners Telephone Number

Sworn to and subscribed to before me this 11th day of October

19²⁰⁰⁵ and being personally known/_____ identification.

My commission expires:

Ronda Lee Williams
NOTARY PUBLIC

RONDA LEE WILLIAMS
Notary Public, Maine
My Commission Expires April 26, 2009