

**City of Portland, Maine - Building or Use Permit Application**

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

|                       |                             |
|-----------------------|-----------------------------|
| <b>PERMIT ISSUED</b>  |                             |
| Permit No:<br>01-1331 | Issue Date:<br>NOV - 7 2001 |
| CBL:<br>029 K001001   |                             |

|  |   |  |                             |
|--|---|--|-----------------------------|
| <b>Location of Construction:</b><br>85 Commercial St   | <b>Owner Name:</b><br>Olympia Equity Investors Iv Llc | <b>Owner Address:</b><br>50 Monument Sq 2nd Floor        | <b>Phone:</b><br>N/A        |
| <b>Business Name:</b><br>Brewster Harding Landfall LLC | <b>Contractor Name:</b><br>Prostyle Design            | <b>Contractor Address:</b><br>142 High St. #510 Portland | <b>Phone:</b><br>2077753269 |
| <b>Lessee/Buyer's Name:</b><br>n/a                     | <b>Phone:</b><br>n/a                                  | <b>Permit Type:</b><br>Signs - Permanent                 | <b>Zone:</b><br>B-3         |

|  |   |   |  |                           |
|--|---|---|--|---------------------------|
| <b>Past Use:</b><br>Commercial / Retail                                | <b>Proposed Use:</b><br>Commercial / Retail 20" fuscia sign, aluminium on aluminum. | <b>Permit Fee:</b>  | <b>Cost of Work:</b><br>\$30.00        | <b>CEO District:</b><br>1 |
| <b>Proposed Project Description:</b><br>Erect 18'x20' aluminum signage |   | <b>FIRE DEPT:</b><br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied | <b>INSPECTION:</b><br>Use Group: Type: |                           |

|  |                   |
|--|-------------------|
| <b>Signature:</b>  | <b>Signature:</b> |
| <b>PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.)</b>   |                   |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied |                   |
| <b>Signature:</b>  | <b>Date:</b>      |

|                               |  |                        |
|-------------------------------|--|------------------------|
| <b>Permit Taken By:</b><br>gg | <b>Date Applied For:</b><br>10/24/2001 | <b>Zoning Approval</b> |
|-------------------------------|--|------------------------|

|   |   |   |  |
|---|---|---|--|
| <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> | <b>Special Zone or Reviews</b><br><input type="checkbox"/> Shoreland<br><input type="checkbox"/> Wetland<br><input type="checkbox"/> Flood Zone<br><input type="checkbox"/> Subdivision<br><input type="checkbox"/> Site Plan<br>Maj <input type="checkbox"/> Minor <input checked="" type="checkbox"/> MM <input type="checkbox"/><br>Date: <i>OK [Signature] 10/31/01</i> | <b>Zoning Appeal</b><br><input type="checkbox"/> Variance<br><input type="checkbox"/> Miscellaneous<br><input type="checkbox"/> Conditional Use<br><input type="checkbox"/> Interpretation<br><input type="checkbox"/> Approved<br><input type="checkbox"/> Denied<br>Date: | <b>Historic Preservation</b><br><input type="checkbox"/> Not in District or Landmark<br><input type="checkbox"/> Does Not Require Review<br><input checked="" type="checkbox"/> Requires Review<br><input checked="" type="checkbox"/> Approved<br><input type="checkbox"/> Approved w/Conditions<br><input type="checkbox"/> Denied<br>P.D.A. 10/31/01<br>Date: <i>PA 11/6/01</i> |
|---|---|---|--|

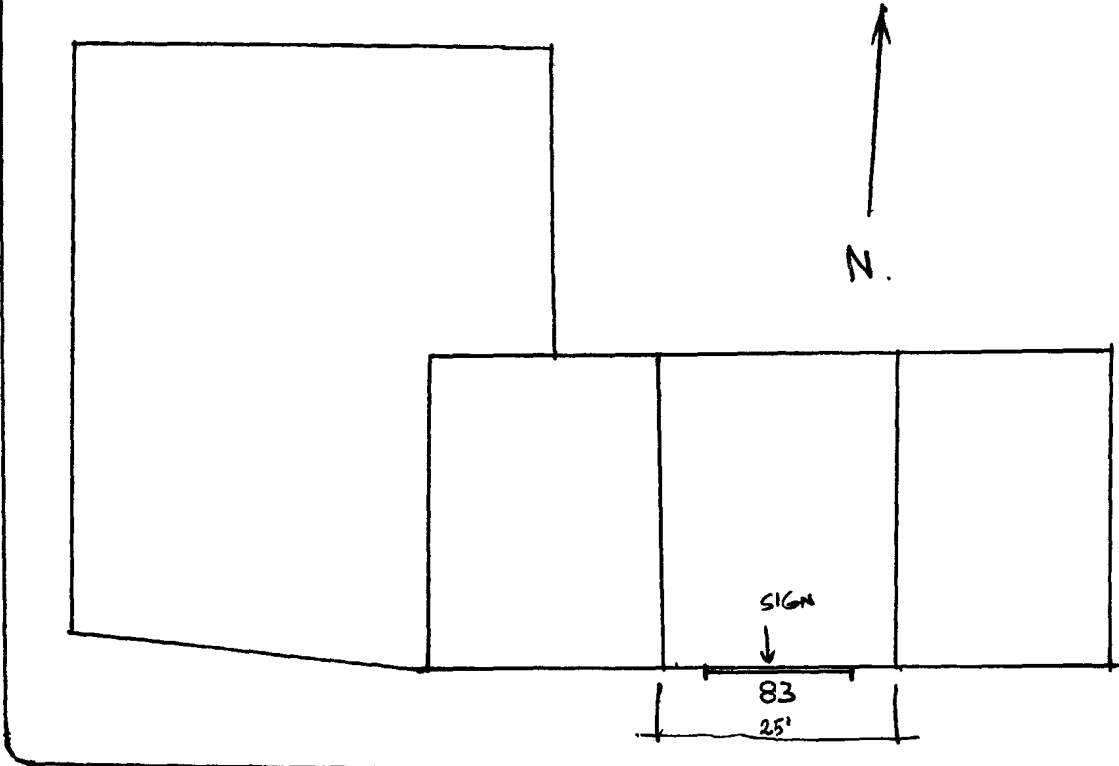
**CERTIFICATION**

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 \_\_\_\_\_

CUSTOM HOUSE



COMMERCIAL ST

THIS IS NOT A PERMIT/CONSTRUCTION MAY NOT COMMENCE UNTIL THE PERMIT IS ISSUED

011331

# SIGNAGE APPLICATION

THIS IS NOT A PERMIT  
CONSTRUCTION CANNOT NOT COMMENCE UNTIL THE PERMIT IS ISSUED

In the interest of processing your application in the quickest possible manner, please complete the information below for a Building or Use Permit.

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: 83 Commercial St.

Total Square Footage of Proposed Structure 30 Square Footage of Lot

4100

Tax Assessor's Chart, Block & Lot Number  
Chart# 009 Block# 15 Lot# 001  
Owner: Olympia Equity Investors  
50 Monument Square  
Portland  
Telephone #:

Lessee/Buyer's Name (If Applicable) Owner's/Purchaser/Lessee Address: Total s.f of signs 30 x .20 \$6.00, plus \$30.00  
Brewster Harding Landfall LLC 207 Commercial St Portland Me, 04101  
TOTALS 36.00

Current use: Retail Proposed use: Retail

Project description: 18' x 20' fascia sign, Alum. on Alum. frame, black sand background, white lettering according to Blake Bldg. sign standards

Applicants Name, Address & Telephone: Anthony Taylor  
Prostyle Design  
Suite 510  
Contractor's Name, Address & Telephone: 142 High St.  
Portland Me, 04101  
Who shall we contact when the permit is ready: Tony Taylor  
Telephone: 775 3269  
If you would like it mailed, what mailing address should we use: Suite 510  
142 High St  
Portland Me 04101  
Rec'd By: [Signature] 10/24/16

**SIGNAGE PRE-APPLICATION**

PLEASE ANSWER ALL QUESTIONS

ADDRESS: 83 Commercial St. ZONE: B-3

OWNER: Olympia Equity Investors

APPLICANT: Prostyle Design

ASSESSOR NO. \_\_\_\_\_

PLEASE CIRCLE APPROPRIATE ANSWER

SINGLE TENANT LOT? YES  NO

MULTI-TENANT LOT?  YES NO

FREESTANDING SIGN? (ex. Pole Sign) YES  NO --- DIMENSIONS 20' x 13' HEIGHT 11' - 7" off sidewalk

MORE THAN ONE SIGN? YES NO DIMENSIONS 1.66 x 18" HEIGHT \_\_\_\_\_

SIGN ATTACHED TO BLDG.?  YES NO DIMENSIONS \_\_\_\_\_ 29.88#

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

AWNING: YES  NO IS AWNING BACKLIT? YES NO HEIGHT OFF SIDEWALK \_\_\_\_\_

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

LIST ALL EXISTING SIGNAGE AND THEIR DIMENSIONS:

\*\*\* TENANT BLDG. FRONTAGE (IN FEET): 25' given x 2 = 50#

\*\*\* REQUIRED INFORMATION

AREA FOR COMPUTATION

**YOU SHALL PROVIDE:**

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

SIGNATURE OF APPLICANT: Anthony Taylor DATE: Oct 26, 2001

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
04/27/2001

PRODUCER (207)774-6257 FAX (207)774-2994  
Clark Associates  
2331 Congress Street  
P O Box 3543  
Portland, ME 04104

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

INSURED Landfall LLC  
207 Commercial Street  
Portland, ME 04101

INSURER A: Peerless Ins Co  
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 | TYPE OF INSURANCE   | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS   |
|----------|---|---------------|----------------------------------|-----------------------------------|--|
| A        | GENERAL LIABILITY<br><input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR   | BOP9425329    | 06/02/2001                       | 06/02/2002                        | EACH OCCURRENCE \$ 1,000,000   |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC  |               |                                  |                                   | FIRE DAMAGE (Any one fire) \$ 50,000<br>MED EXP (Any one person) \$ 5,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 1,000,000 |
|          | AUTOMOBILE LIABILITY<br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS |               |                                  |                                   | COMBINED SINGLE LIMIT (Ea accident) \$<br>BODILY INJURY (Per person) \$<br>BODILY INJURY (Per accident) \$<br>PROPERTY DAMAGE (Per accident) \$  |
|          | GARAGE LIABILITY<br><input type="checkbox"/> ANY AUTO   |               |                                  |                                   | AUTO ONLY - EA ACCIDENT \$<br>OTHER THAN EA ACC \$<br>AUTO ONLY: AGG \$  |
|          | EXCESS LIABILITY<br><input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE<br><input type="checkbox"/> DEDUCTIBLE<br><input type="checkbox"/> RETENTION \$   |               |                                  |                                   | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$<br>\$<br>\$   |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY   |               |                                  |                                   | WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/><br>E.L. EACH ACCIDENT \$<br>E.L. DISEASE - EA EMPLOYEE \$<br>E.L. DISEASE - POLICY LIMIT \$                  |
| A        | OTHER Building (Replacement Cost)   | BOP9425329    | 06/02/2001                       | 06/02/2002                        | Limit \$317,200<br>Deductible \$250  |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS  
Certificate holder is hereby named as Mortgagee with regards to  
205-207 Commercial Street Portland, ME 04101

|   |                                     |   |
|---|-------------------------------------|---|
| CERTIFICATE HOLDER  | ADDITIONAL INSURED; INSURER LETTER: | CANCELLATION  |
| Gorham Savings Bank<br>64 Main Street<br>Gorham, ME 04038 |                                     | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY 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 COMPANY, ITS AGENTS OR REPRESENTATIVES.<br>AUTHORIZED REPRESENTATIVE<br>Linda Nielsen/MJW <i>Linda J. Nielsen</i> |

MARINE  
GOODS

WHITE LETTERING  
PORTS OF CALL

TRAVEL  
GEAR

BLACK SAND  
18'-0" BACKGROUND

11'-2"

83 Commercial St