Form # P 04

### DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

## CITY OF PORTLAND

Please Read Application And Notes, If Any, Attached

#### STION

Permit Number: 031370

Attached	PERMIT	Tomat (Mador, 0515)
This is to certify that Olympia Equity Investors	Iv /Bailey pany Inc.	
has permission to Replace existing 49.86 sq	. Fo all sign	
AT 85 Commercial St	0	29 K001001
provided that the person or person of the provisions of the Statutes of the construction, maintenance and this department.	f I ne and of the same ances	g this permit shall comply with all of the City of Portland regulating es, and of the application on file in
Apply to Public Works for street line and grade if nature of work requires such information.	N lication inspect in must go and with a permit in procuble re this lading or at thereoder in the recommendation of the recommendati	A certificate of occupancy must be procured by owner before this building or part thereof is occupied.
OTHER REQUIRED APPROVALS		
Fire Dept.		
Health Dept.	_	- 1/
Appeal Board	$ \sim$	
Other Department Name		Director - Suilding & Inspection Services .
PEN	IALTY FOR REMOVING THIS CA	

	Congress Street, 04101	<del>-</del>				03-1370	Issue Date	•	029 K0	001001
Locat	ion of Construction:	Owner Name:	<del></del>	` '	Own	er Address:			Phone:	
85 Commercial St Olympia Equity		ty Inves	tors Iv Llc	50 Monument Sq 2nd Floor			207-874-9990			
Business Name: Contractor Name		e:		Cont	ractor Address:		-	Phone		
n/a		Bailey Sign C	ompany Inc.			homas Drive W	estbrook		20777428	843
	e/Buyer's Name	Phone:		Permit Type:					Zone:	
n/a		n/a			<u> </u>	gns - Permanent	<u> </u>			183
Past U		Proposed Use:		40.04	Pern		Cost of Wor		EO District:	
Con	mercial / Retail	Bank / Replac Ft. Wall sign.	e existin	ig 49.86 sq.	EID	\$129.72 EDEPT:	\$	0.00 INSPECT	1	<u> </u>
		a vi vi an organ			FIR		Approved	Use Grou	n: / /	Tyne: 514
					İ	LJ	Denied			24
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	sed Project Description:				1			"	· ク	
Repl	ace existing 49.86 sq. Ft.	Wall sign.				ature:		Signature	:	
					PEDI	ESTRIAN ACTIV	THES DIST	RICT (P.A	A.D.)	
					Actio	on: Approve	d 🗌 App	proved w/Co	onditions	Denied
					Sign	ature:		Ε	Date:	
rermi gg	t Taken By:	Date Applied For: 11/05/2003				Zoning A	Approva	ıl		
	This permit application d	oes not preclude the	Spec	cial Zone or Revi	ews	Zoning	Appeal		Historic Pres	ervation
	Applicant(s) from meeting Federal Rules.	•	☐ Sh	oreland		☐ Variance			Not in Distric	ct or Landmar
	Building permits do not include plumbing, septic or electrical work.		☐ Wetland ☐ M		☐ Miscellan	☐ Miscellaneous ☐		Does Not Require Review		
	<u>.</u>		☐ Flood Zone		Conditional Use			Requires Review		
	False information may inv permit and stop all work		☐ Sui	bdivision		_ Interpretat	tion	Z	Approved	
			☐ Sit	e Plan		Approved			Approved w/	Conditions
			Maj	Minor MM		_ Denied			Denied	i II
			Date:	11/13/0	3	Date:		Date	:	, , , ,
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have urisd hall l	by certify that I am the over been authorized by the offiction. In addition, if a perhave the authority to enterpermit.	owner to make this applied that to make this applied to the comment of the commen	med pro cation a	perty, or that to s his authorize application is i	ne pro d agen	nt and I agree to I certify that th	conform to	to all applicial's aut	licable laws horized repr	of this esentative
SIGN	ATURE OF APPLICANT			ADDRES	S		DATE		РНО	NE .
RESP	ONSIBLE PERSON IN CHAR	GE OF WORK, TITLE					DATE		РНО	NIC .
							DAIL		rnu	176

DATE

PHONE

Permit No: CBL: Date Applied For: City of Portland, Maine - Building or Use Permit 03-1370 11/05/2003 029 K001001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 **Location of Construction:** Owner Name: Owner Address: Phone: Olympia Equity Investors Iv Llc 207-874-9990 85 Commercial St 50 Monument Sq 2nd Floor Business Name: Contractor Name: Contractor Address: Phone 9 Thomas Drive Westbrook n/a Bailey Sign Company Inc. (207) 774-2843 Lessee/Buyer's Name Permit Type: Phone: n/a n/a Signs - Permanent Proposed Use: Proposed Project Description: Replace existing 49.86 sq. Ft. Wall sign. Bank / Replace existing 49.86 sq. Ft. Wall sign. 11/17/2003 Dept: Historical Status: Approved Reviewer: Deborah Andrews **Approval Date:** Ok to Issue: Note: Status: Approved Reviewer: Marge Schmuckal Approval Date: 11/13/2003 Dept: Zoning Ok to Issue: Note: Dept: Building Status: Approved with Conditions Reviewer: Tammy Munson Approval Date: 11/18/2003 Ok to Issue: Note:

1) Signage Installation to comply with Chapter 31 BOCA 1999

# 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: 85	Commerci	ial Street		
Total Square Footage of Proposed Structure 49.86	ire #	Square Footage o	of Lot 35	,000 \$
Tax Assessor's Chart, Block & Lot Chart# Block# Lot#	Owner:	pia EquityIn	vestors, I VLL	Telephone: 8 74-9990
Lessee/Buyer's Name (If Applicable)  Keybank	telephone Bailey 9 V UCSTO	name, address & : Sign Company homas Drive rook, HE 0409 174-2843	2.0) (4) = \$. A. W	otal s.f. of signage x +.00 per s.f. plus \$30.00 Total Fee:
Current use: Retail  If the location is currently vacant, what we approximately how long has it been vacant. Proposed use: Bank			DEF D)	NOV 5 2003
Project description: replace existina	g - instal	sile lobster" I New Projects	rellsi	gn - new sign like other tenents -
Contractor's name, address & telephone: Who should we contact when the permit is	Bailey	Sign Company.	Inc.	
Malling address: 9 The Has Driv Wes-Herook, HE We will contact you by phone when the p	ん 0409よ ermit is reac	ly. You must come	in and pick	up the permit and
review the requirements before starting an and a \$100.00 fee if any work starts before			A STOP WORK ONE:	Oldel Aill be 1220ed

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 APROVE 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:	Ludy Wains	Baile	a lisu	Date:	11-5-03	
			, ,			

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

### SIGNAGE/AWNING PRE-APPLICATION QUESTIONNAIRE

### PLEASE ANSWER ALL QUESTIONS

ADDRESS: 85 Connercial Street ZONE: B-3
CBL:
SINGLE TENANT LOT? YES NO MULTI TENANT LOT? YES NO  MORE THAN ONE SIGN TOTAL WITH PROPOSED SIGN? YES NO
INFORMATION ON PROPOSED SIGN(S):  FREESTANDING (e.g., pole) SIGN? YES NO DIMENSIONS PROPOSED:
BLDG. WALL SIGN? (attached to bldg) YES NO DIMENSIONS PROPOSED:
INFORMATION ON ALREADY EXISTING AND PERMITTED SIGN(S):
FREESTANDING (e.g., pole) SIGN? YESNODIMENSIONS:BLDG. WALL SIGN(attached to bidg)? YESNODIMENSIONS:
AWNING? YES NO DIMENSIONS:
LOT FRONTAGE (FEET):
AWNING YES NO IS AWNING BACKLIT? YES NO
HEIGHT OF AWNING: DEPTH:
IS THERE ANY COMMUNICATION, MESSAGE, TRADEMARK OR SYMBOL ON IT? YES NO
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 ARE ALSO REQUIRED.
SIGNATURE OF APPLICANT: Ludy Trinos Bailey Sign DATE: 11-5-03
1.80 × 19.25 = 34.65 P
4 × 4 = 164
<b>52</b> .65 \$



#### OLYMPIA EQUITY INVESTORS

October 24, 2003

Patty Molnar Brilliant Sign for Key Bank retail, Portland, ME

5 Menigment South Place 2 Pagistra, Mg 04202

RE: 85 Commercial Street Signage

Dear Patty,

; भृज्ञोपुराष्ट्रशिक्षेत्रवर्षाः Regarding your request for approval and further information for approvals for signage at 85 Commercial Street, please find the following.

- Permission Olympia Equity Investors IV, LLC approved a Key Bank sign application, which was consistent with the sign standards for the WL Blake building.
- 2. The approximate square footage of the parcel of land is 35,000 SF
- 3. There are multiple tenants occupying the approximately 64,000 SF of improvements on the lot
- 4. Owner Name: Olympia Equity Investors IV, LLC
- 5. Lot and Bidg Frontage of Commercial Street only is approximately 125'

I hope the above information is satisfactory for your sign application; if I may be of further assistance, please do not he sitate to contact me.

Sincerely,

Jim Brady

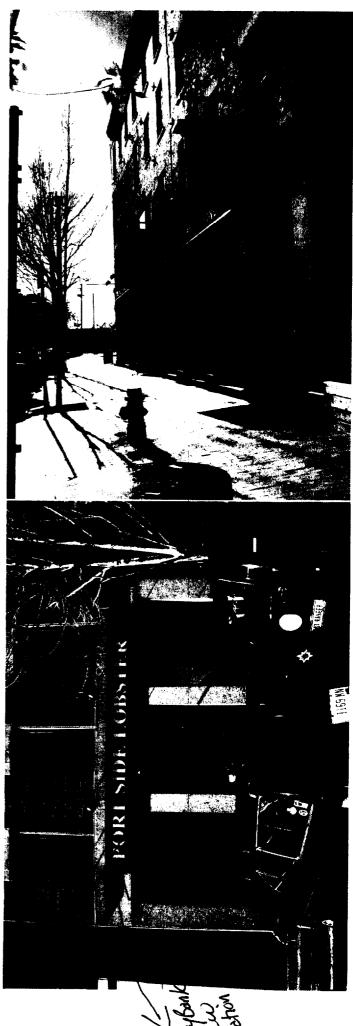
Olympia Equity Investors IV, LLC

201 874 3990 201 974 986 5

207 874 **9993** 

TOTAL P.01 P.01 TOTAL P.02





A	C	<u>OR</u>	D CERTIFIC	ATE OF LIABILIT	TY INSU	RANCE	OP ID RR	DATE (MM/DD/YYY) 04/09/03			
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Portland ME 04101 Phone: 207-773-8156					INSURERS A	INSURERS AFFORDING COVERAGE					
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					INSURER B:						
		ļ	Bailey Sign, Inc. Bruce Bailey, Pres:	idont	INSURER C:	:					
			A INOMES DIIAS	raen c	INSURER D:						
		١	Westbrook ME 04092		INSURER E:						
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							PROPERTY DAMAGE (Per accident)	\$			
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	ANY	PROF	PRIETOR/PARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$			
1		OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below			•		E.L. DISEASE - EA EMPLOYEE				
	OTHE		PROVISIONS below				E.L. DISEASE - POLICY LIMIT				
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JER	aril	<u>-^1</u>		CITYO01	SHOULD ANY	OF THE ABOVE DESCR	IBED POLICIES BE CANCELLED ER WILL ENDEAVOR TO MAIL				
			City of Portland 389 Congress Stree Portland ME 04101	t	NOTICE TO TH IMPOSE NO OF REPRESENTAT	E CERTIFICATE HOLDE BLIGATION OR LIABILIT TIVES.	ER NAMED TO THE LEFT, BUT F TY OF ANY KIND UPON THE INS	AILURE TO DO SO SHAL			
		25 /	2001/08)		1 (Xoh	ute X	CACORD	CORPORATION 19			

#### CERTIFICATE OF LIABILITY INSURANCE OF ID DATE (MM/DD/YY) AK ACORD 04/10/03 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION PRÓDUCER ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND. EXTEND OR Morse, Payson & Noyes ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. P.O. Box 406 Portland ME 04112-0406 **INSURERS AFFORDING COVERAGE** Fax:207-775-0339 Phone: 207-775-6000 MAINE EMPLOYERS MUTUAL INS CO INSURER A: INSURER B Bailey Sign, Inc. Bruce Bailey 9 Thomas Dr. Westbrook ME 04092 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. LIMITS TYPE OF INSURANCE **POLICY NUMBER** EACH OCCURRENCE GENERAL LIABILITY \$ FIRE DAMAGE (Any one fire) COMMERCIAL GENERAL LIABILITY MED EXP (Any one person) CLAIMS MADE OCCUR PERSONAL & ADV INJURY GENERAL AGGREGATE \$ GEN'L AGGREGATE LIMIT APPLIES PER: PRODUCTS - COMP/OP AGG s POLICY **AUTOMOBILE LIABILITY** COMBINED SINGLE LIMIT (Ea accident) ANY AUTO ALL OWNED AUTOS BODILY INJURY SCHEDULED AUTOS HIRED AUTOS BODILY INJURY (Per accident) **NON-OWNED AUTOS** PROPERTY DAMAGE (Per accident) AUTO ONLY - EA ACCIDENT GARAGE LIABILITY ANY AUTO OTHER THAN AUTO ONLY: AGG s EACH OCCURRENCE \$ **EXCESS LIABILITY** AGGREGATE CLAIMS MADE OCCUR s DEDUCTIBLE \$ RETENTION WORKERS COMPENSATION AND **EMPLOYERS' LIABILITY** 04/01/03 04/01/04 E.L. EACH ACCIDENT \$ 500,000 1810058334 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000 OTHER DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS **CERTIFICATE HOLDER** CANCELLATION N ADDITIONAL INSURED: INSURER LETTER: SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION CITYPOR 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 City of Portland IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR 389 Congress St. REPRESENTATIVES. Portland ME 04101 **AUTHORIZED REPRESENTATIVE** Morse Payson & Noyes Insurance © ACORD CORPORATION 1988

ACORD 25-S (7/97)