

DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK



CITY OF PORTLAND BUILDING PERMIT

This is to certify that Salt of the Earth Inc.

Located At 5 COMMERCIAL ST

Job ID: 2012-03-3430-SIGN

CBL: 029- N-024-001

has permission to 2 total signs; 1 immediate 14' total (for both)

provided that the person or persons, firm or corporation accepting this permit shall comply with all of the provisions of the Statues of Maine and of the Ordinances of the City of Portland regulating the construction, maintenance and use of the buildings and structures, and of the application on file in the department.

Notification of inspection and written permission procured before this building or part thereof is lathed or otherwise closed-in. 48 HOUR NOTICE IS REQUIRED.

A final inspection must be completed by owner before this building or part thereof is occupied. If a certificate of occupancy is required, it must be

Fire Prevention Officer

Code Enforcement Officer / Plan Reviewer

THIS CARD MUST BE POSTED ON THE STREET SIDE OF THE PROPERTY
PENALTY FOR REMOVING THIS CARD

BUILDING PERMIT INSPECTION PROCEDURES

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

or email: buildinginspections@portlandmaine.gov

With the issuance of this permit, the owner, builder or their designee is required to provide adequate notice to the city of Portland Inspections Services for the following inspections. Appointments must be requested 48 to 72 hours in advance of the required inspection. The inspection date will need to be confirmed by this office.

- **Please read the conditions of approval that is attached to this permit!! Contact this office if you have any questions.**
- **Permits expire in 6 months. If the project is not started or ceases for 6 months.**
- **If the inspection requirements are not followed as stated below additional fees may be incurred due to the issuance of a "Stop Work Order" and subsequent release to continue.**

The project cannot move to the next phase prior to the required inspection and approval to continue, REGARDLESS OF THE NOTICE OF CIRCUMSTANCES.

IF THE PERMIT REQUIRES A CERTIFICATE OF OCCUPANCY, IT MUST BE PAID FOR AND ISSUED TO THE OWNER OR DESIGNEE BEFORE THE SPACE MAY BE OCCUPIED.



PORTLAND MAINE

Strengthening a Remarkable City, Building a Community for Life • www.portlandmaine.gov

Acting Director of Planning and Urban Development
Gregory Mitchell

Job ID: 2012-03-3430-SIGN

Located At: 5 COMMERCIAL ST CBL: 029- N-024-001

Conditions of Approval:

Zoning

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

Historic

1. The projecting sign is approved with the understanding that the sign bracket and sign lighting will be as shown in the elevations reviewed and approved by the Historic Preservation Board on October 5, 2011. Deviations from the previously-approved sign design is acceptable, based on informal consultation with Historic Preservation Board on 3/7/12.
2. The proposed fascia sign is not approved, as it does not conform with the 10/5/11 approved plans. The Historic Preservation Board confirmed its sentiment that the metal panels above the windows (which could incorporate signs on them if desired by the tenants) were a key element of the original approved design and could not be modified.
3. The applicant has confirmed that all improvements included in the original proposal reviewed and approved by the HP Board on 10/5/11 will be completed by October 2012.

City of Portland, Maine - Building or Use Permit Application

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

Job No: 2012-03-3430-SIGN	Date Applied: 3/2/2012	CBL: 029- N-024-001	
Location of Construction: 5 COMMERCIAL ST	Owner Name: SALT OF THE EARTH INC.	Owner Address: 9 COMMERCIAL ST PORTLAND, ME 04101	Phone: 207-776-8101
Business Name: Crema Coffee Co.	Contractor Name: Burr Signs	Contractor Address: 50 Downeast DR Yarmouth ME 04096	Phone:
Lessee/Buyer's Name:	Phone:	Permit Type: SIGN - PERM - Signage - Permanent	Zone: B-3
Past Use: Restaurant – Coffee Shop – permit #2011-10-2519	Proposed Use: Same – restaurant (coffee shop) – Crema Coffee Co. – install one 24” x 48” hanging sign only (20” x 48” wall sign was not approved by Historic)	Cost of Work:	CEO District:
		Fire Dept: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	Inspection: Use Group: <input checked="" type="checkbox"/> Type: Sign IBC 03 Signature:
Proposed Project Description: wall sign hanging sign		Pedestrian Activities District (P.A.D.)	

Permit Taken By:	Zoning Approval		
<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 informatin may invalidate a building permit and stop all work.</p>	Special Zone or Reviews <input type="checkbox"/> Shoreland <input type="checkbox"/> Wetlands <input type="checkbox"/> Flood Zone <input type="checkbox"/> Subdivision <input type="checkbox"/> Site Plan <input type="checkbox"/> Maj <input type="checkbox"/> Min <input type="checkbox"/> MM Date: <i>Ok w/ conditions</i> <i>3/15/12 ABU</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 Dist or Landmark <input type="checkbox"/> Does not Require Review <input type="checkbox"/> Requires Review <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied Date: <i>3/13/12</i> <i>D. Andrews</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 appication 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



B-3
hspk

Charge of use 2011-10-2519 Signage/Awning Permit Application

Entered 3/2/12
BS

2012-03-3130 Sign

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: 9 Commercial (S) (was First Health)

Tax Assessor's Chart, Block & Lot Chart# <u>029</u> Block# <u>N</u> Lot# <u>024</u>	Owner: <u>SALT OF THE EARTH</u> <u>1212 BARNSTEEN</u>	Telephone: <u>207-776-8101</u>
Lessee/Buyer's Name (If Applicable) <u>CREMA COFFEE COMPANY</u>	Contractor name, address & telephone: <u>OWNER</u> <u>Burr Signs</u> <u>Yarmouth</u>	Total s.f. of signage x \$2.00 <u>28.00</u> Per s.f. plus \$30.00 <u>30.00</u> For H.D. signage \$75.00 <u>75.00</u> Fee: \$ _____ Awning Fee= cost of work _____ Total Fee: \$ <u>133.00</u>

Who should we contact when the permit is ready: Art Barnsteen phone: 776-8101

Tenant/allocated building space frontage (feet): * Length: 31 Height: 19
Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot mult

Current Specific use: Coffee Shop
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: 2' x 4' 2' wide 4' long
 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: _____
 Bldg. wall sign? (attached to bldg) Yes ___ No ___ Dimensions: _____
 Awning? 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.

RECEIVED
MAR 02 2012

only hanging sign is part of permit
1.8' x 4'
6' = 14 total ft²

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: [Signature] Date: 2-29-12

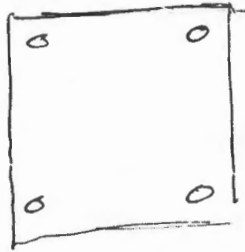
This is not a permit; you may not commence ANY work until the permit is issued.

31' x 2 = 62 ft²
48" x 24" = 8 ft² hanging
20' x 48" = 6.67 ft²
14.7 ft²

#1

$\frac{1}{4}$ " steel plate
8" square

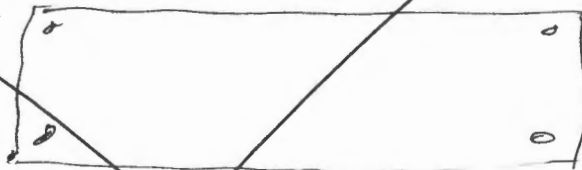
over Door



CRÉMA

$\frac{3}{8}$ " x 14" steel bolts
Thru the brick +
concrete inner wall
with nuts.

over windows



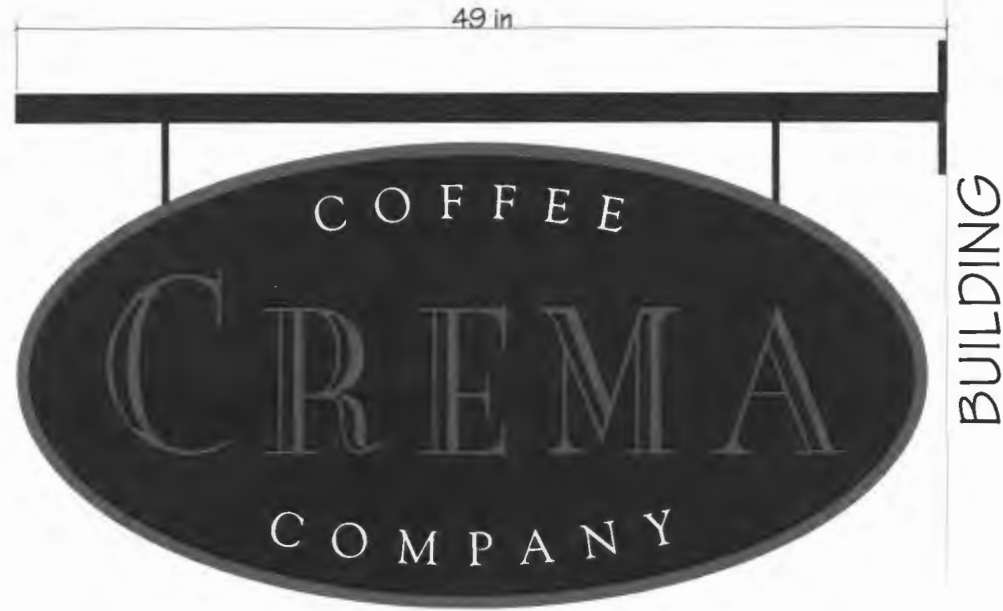
Not approved
by Historic.

4 - $\frac{3}{8}$ " x 14" steel bolts
Thru wall

Sign is made with EXTIRIA
with metal band around it.

CO - Hanging Sign (on waterfront)

Square Footage: 8



Sign shown is 24" x 48"
Colors shown are Black, White and PMS 1615

	DRAWING NAME	DATE	REVISION HISTORY	
	Hanging Sign.F5	2/15/2012	DATE	REVISION HISTORY
	SALES PERSON	DESIGNER		
		Kristi		
	CLIENT SIGNATURE & APPROVAL DATE			

THIS DESIGN IS THE PROPERTY OF BURR SIGNS. ALL REPRODUCTION RI

THIS PRINT HAS BEEN USED FOR PERSONAL USE. IT IS NOT TO BE USED OR EXHIBITED IN ANY MANNER WITHOUT THE WRITTEN PERMISSION OF BURR SIGNS.

2-29-12

I, ART BANISTER, OWNER OF SALT OF THE EARTH,
grant permission for CREMA COFFEE COMPANY
to place signage on my building at 9
COMMERCIAL ST.


ART BANISTER



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/29/2012

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. 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).

PRODUCER GHM Agency & BRM Associates LLC 51 Main Street P.O. Box 649 Waterville ME 04903-0649	CONTACT NAME: MLCOM (Laura Rowe)
	PHONE (A/C, No, Ext): (207) 873-5101 FAX (A/C, No): (207) 873-5784 E-MAIL ADDRESS: laura@ghmagency.com PRODUCER CUSTOMER ID #: 00013488
INSURED Salt of the Earth Inc Pure Warm, Inc. 9 Woodcrest Road Cape Elizabeth ME 04107	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A: Hanover Insurance Co 22292
	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:

COVERAGES CERTIFICATE NUMBER: 11-12 master 1 REVISION NUMBER:

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	ZHP7600389	7/30/2011	7/30/2012	EACH OCCURRENCE \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	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) \$ \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB OCCUR <input type="checkbox"/> EXCESS LIAB CLAIMS-MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0		OHP7595373	7/30/2011	7/30/2012	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

(207) 775-9164

City of Portland
 389 Congress St
 Portland, ME 04101

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

 Laura Rowe, AAI/MEL



CITY OF PORTLAND, MAINE
Department of Building Inspections

Original Receipt

3/2 2012

Received from Salt of the Earth

Location of Work 9 Commercial

Cost of Construction \$ _____ Building Fee: _____

Permit Fee \$ _____ Site Fee: _____

Certificate of Occupancy Fee: _____

Signage Total: 133.00

Building (IL) _____ Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 029 N0241

Check #: 185 Total Collected \$ 133

RECEIVED
MAR 02 2012
City of Portland Building Inspections

**No work is to be started until permit issued.
Please keep original receipt for your records.**

Taken by: (185)

Aradwica
2012

WHITE - Applicant's Copy
YELLOW - Office Copy
PINK - Permit Copy