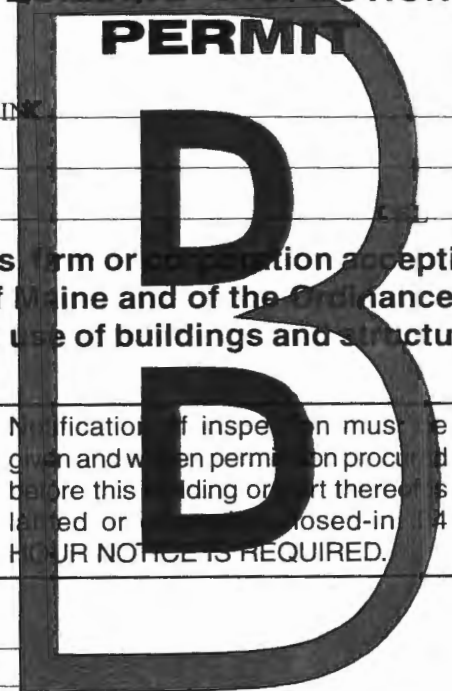


DISPLAY THIS CARD ON PRINCIPAL FRONTAGE OF WORK

CITY OF PORTLAND

BUILDING INSPECTION



Please Read Application And Notes, If Any, Attached

Permit Number: 1031032

PERMIT ISSUED

SEP 5 2008

CITY OF PORTLAND

This is to certify that PORTLAND REGENCY INC

has permission to 48" x 24" sidewalk sign

AT 20 MILK ST

CSL 029 R001001

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 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 procured before this building or part thereof is altered 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

9/4/08 *Cheryl R*
 Director - Building & Inspection Services

PENALTY FOR REMOVING THIS CARD

9/24/12

Scanned

Close out

JGR

City of Portland, Maine - Building or Use Permit Application

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

| | | |
|-----------------------|-----------------------|---------------------|
| Permit No: 08-1072 | Issue Date: 9/4/08 | CBL: 029 R001001 |
|-----------------------|-----------------------|---------------------|

| | | | |
|---|-------------------------------------|-----------------------------------|--------------|
| Location of Construction: 20 MILK ST | Owner Name: PORTLAND REGENCY INC | Owner Address: 20 MILK ST | Phone: |
| Business Name: | Contractor Name: | Contractor Address: | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Side Walk | Zone: B-3 |

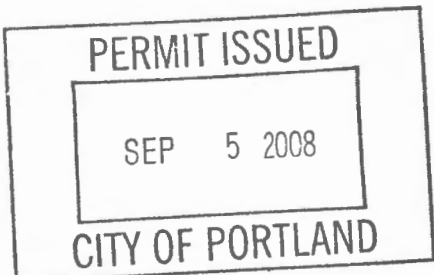
| | | | | |
|--|---|--|--|--------------------|
| Past Use: The Portland Regency Hotel | Proposed Use: The Portland Regency Hotel - 48" x 24" sidewalk sign | Permit Fee: \$81.00 | Cost of Work: \$81.00 | CEO District: 1 |
| Proposed Project Description: 48" x 24" sidewalk sign | | FIRE DEPT: <input type="checkbox"/> Approved <input type="checkbox"/> Denied | INSPECTION: Use Group: SIGNAGE IBC-2003 Signature: [Signature] 9/4/08 | |

in place, The sign may not be higher than 40"

| | |
|--|-------------------------------|
| Signature: | Signature: [Signature] 9/4/08 |
| PEDESTRIAN ACTIVITIES DISTRICT (P.A.D.) | |
| Action: <input type="checkbox"/> Approved <input type="checkbox"/> Approved w/Conditions <input type="checkbox"/> Denied | Date: |

| | | | |
|-----------------------------|---------------------------------|------------------------|--|
| Permit Taken By: Idobson | Date Applied For: 08/26/2008 | Zoning Approval | |
|-----------------------------|---------------------------------|------------------------|--|

| | | | |
|---|--|--|---|
| <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"/> <input checked="" type="checkbox"/> Denied Date: [Signature] 8/29/08 | Zoning Appeal <input type="checkbox"/> Variance <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Conditional Use <input type="checkbox"/> Interpretation <input type="checkbox"/> Approved <input checked="" 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: |
|---|--|--|---|



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 |

4/24/12 Close. Out, JGR

City of Portland, Maine - Building or Use Permit

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

| | | |
|------------------------------|--|----------------------------|
| Permit No: 08-1072 | Date Applied For: 08/26/2008 | CBL: 029 R001001 |
|------------------------------|--|----------------------------|

| | | | |
|--|--|--|---------------|
| Location of Construction: 20 MILK ST | Owner Name: PORTLAND REGENCY INC | Owner Address: 20 MILK ST | Phone: |
| Business Name: | Contractor Name: | Contractor Address: | Phone: |
| Lessee/Buyer's Name | Phone: | Permit Type: Signs - Side Walk | |

| | |
|--|---|
| Proposed Use: The Portland Regency Hotel - 48" x 24" sidewalk sign | Proposed Project Description: 48" x 24" sidewalk sign |
|--|---|

Dept: Zoning **Status:** Approved with Conditions **Reviewer:** Marge Schmuckal **Approval Date:** 08/28/2008

Note: **Ok to Issue:**

- 1) Please note that as stated in the requirements the sidewalk sign SHALL NOT be higher than 40" when in place on the sidewalk. All other sidewalk sign requirements must also be met.
- 2) All sidewalk signs shall be removed when the business is closed or while any snow or ice exists on the walkway within eight feet of the sign in any direction. All sidewalk signs shall be located near the curb rather than the building face. The sidewalk shall maintain a width of no less than 4 1/2 feet of unobstructed sidewalk width perpendicular to major flows. For a single tenant listing, the maximum width is 24 inches or less if needed for the 4.5 feet of unobstructed sidewalk width. The maximum height of a sidewalk sign is 40 inches to the top of the sign in place. The minimum height of a sidewalk sign is 30 inches to the top of the sign in place.
- 3) This permit is being approved on the basis of plans submitted. Any deviations shall require a separate approval before starting that work.

Dept: Building **Status:** Approved with Conditions **Reviewer:** Chris Hanson **Approval Date:** 09/04/2008

Note: **Ok to Issue:**

- 1) Signage Installation to comply with Chapter 31 of the IBC 2003 building code.

Comments:

8/28/2008-mes: Called Jared who applied for the sign and let him know about the 40" maximum height of the sign when displayed on the sidewalk. The Code Enforcement Officer should do a final check on this.



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>20 Milk Street / The Portland Regency Hotel</u> | | |
| Tax Assessor's Chart, Block & Lot Chart# <u>029</u> Block# <u>R</u> Lot# <u>001</u> | Owner: <u>Eric Cianchette</u> | Telephone: <u>207-741-4200</u> |
| Lessee/Buyer's Name (If Applicable) | Contractor 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: <u>Jared Laflin</u> phone: <u>221-5916</u> | | |
| Tenant/allocated building space frontage (feet): Length: _____ Height: _____ Lot Frontage (feet) _____ Single Tenant or Multi Tenant Lot _____ | | |
| Current Specific use: <u>side walk</u> If vacant, what was prior use: _____ Proposed Use: _____ | | |
| Information on proposed sign(s): Freestanding (e.g., pole) sign? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: <u>48" x 24"</u> Height from grade: _____ Bldg. wall sign? (attached to bldg) Yes <input type="checkbox"/> No <input type="checkbox"/> Dimensions proposed: _____ | | |
| Proposed awning? Yes <input type="checkbox"/> No <input type="checkbox"/> Is awning backlit? Yes <input type="checkbox"/> No <input type="checkbox"/> Height of awning: _____ Length of awning: _____ Depth: _____ Is there any communication, message, trademark or symbol on it? Yes <input type="checkbox"/> No <input type="checkbox"/> 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 <input type="checkbox"/> No <input type="checkbox"/> Dimensions: _____ Bldg. wall sign? (attached to bldg) Yes <input type="checkbox"/> No <input type="checkbox"/> Dimensions: _____ Awning? Yes <input type="checkbox"/> No <input type="checkbox"/> 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. | | |

4x2 = 8x2 + 6x5

48" x 24"

AUG 26 2008

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.

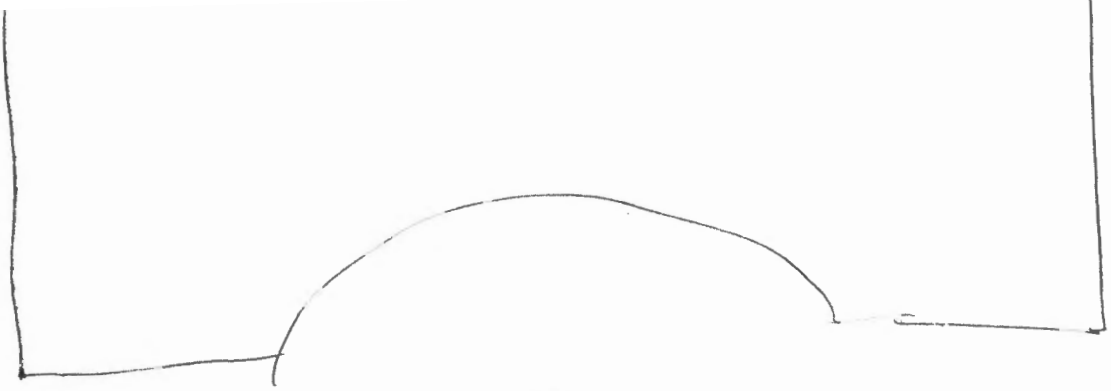
In order to be sure the City fully understands the full scope of the project, the Planning and Development Department may request additional information prior to the issuance of a permit. For further information visit us on-line at www.portlandmaine.gov, stop by the Building Inspections office, room 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.

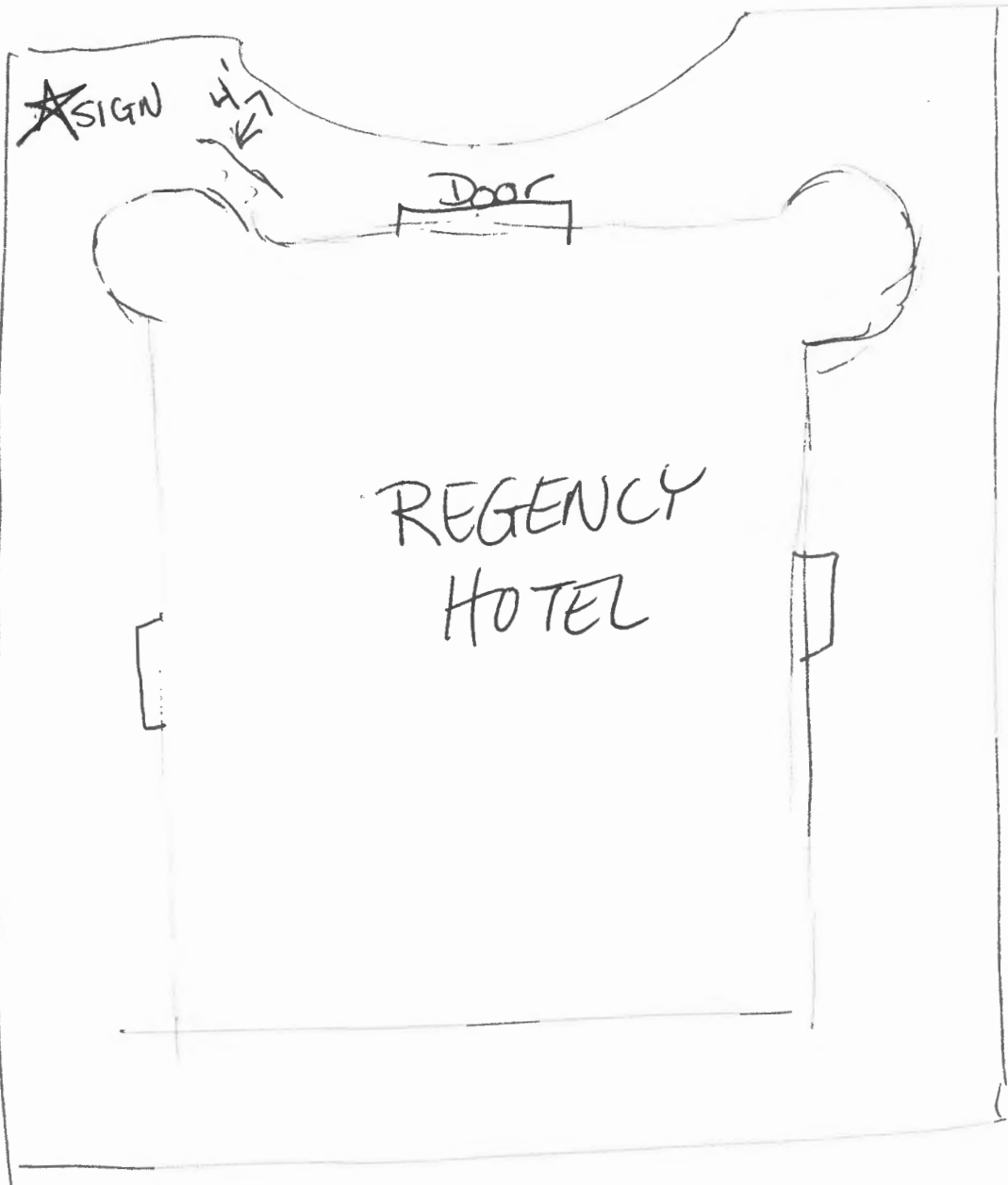
| | |
|--|----------------------|
| Signature of applicant: <u>[Signature]</u> | Date: <u>8/11/08</u> |
|--|----------------------|

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

← MARKETS ST. →



← MILK ST. →



REGENCY
HOTEL

billyBoards

Make Your Mark In Style!

Easels

Unique and unlike anything else you'll find on the market. Don't settle for the humdrum offerings of our competition - step up to a fine design that will truly enhance the decor of your home, store or office.

Chalkboard and dry erase easels for retail, restaurants and schools. A-frame signs.

*code Ent. office
Please check the
height of the sign in the
NO higher than 40"*

A-frame Easel
Two sided black chalk
writing surface.

42" high x 24" wide

\$149.99

**Buy
this !**



Oak Street Easel - Black Chalk
Oak Finished Frame
24"W X 56"H
Attractive Euro styling

\$119.99

**Buy
This!**



Hom
Cont
Req
Chal
Cust
Eras
Ease
Men
Outd
Cale
Real
Medi
Link:

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/26/08

| | | |
|---|---|---------------|
| PRODUCER HRH Northern New England 959 Congress St Portland, ME 04102-2175 207 553-2131 | 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 Portland Regency Inc. 20 Milk Street Portland, ME 04101 | INSURER A: One Beacon Insurance | 21970 |
| | INSURER B: Fireman's Fund Insurance Co. | 21873 |
| | INSURER C: Maine Employers Mutual Ins. Co. | 18524 |
| | 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 LTR | INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS |
|----------------|-------|---|----------------|----------------------------------|-----------------------------------|--|
| A | | 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: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC | 7100214320000 | 10/22/07 | 10/22/08 | EACH OCCURRENCE \$1,000,000 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 |
| A | | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS | 7100214320000 | 10/22/07 | 10/22/08 | COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 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 \$ |
| B | | EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10000 | SUO00080340599 | 10/22/07 | 10/22/08 | EACH OCCURRENCE \$15,000,000 AGGREGATE \$15,000,000 \$ \$ |
| C | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below | 1810049275 | 01/14/08 | 01/14/09 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$500,000 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

Proof of Insurance. The City of Portland is hereby named an additional insured with respect to general liability.

CERTIFICATE HOLDER

CANCELLATION

| | |
|---|---|
| City of Portland 389 Congress Street 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>André M. Sobehr</i> |
|---|---|

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

Debit Legal

DATE (MM/DD/YYYY)
01/15/10

PRODUCER
 Willis of Northern New England *29-R-001*
 31 Court Street
 Auburn Me 04212 *#08-1072*
 207 783-2211

INSURED
 Portland Regency Inc.
 d/b/a Portland Regency Hotel
 20 Milk Street
 Portland, ME 04101

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 # |
|-----------------------------|--------------------------------------|--------|
| INSURER A: | Hanover Insurance Company | 22292 |
| INSURER B: | The American Insurance Company | 21857 |
| INSURER C: | Maine Employers Mutual Insurance Co. | 18524 |
| 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 | ADD'L INSRD | TYPE OF INSURANCE | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS | |
|----------|-------------|---|----------------|----------------------------------|-----------------------------------|--|--------------|
| A | | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | ZBP659791900 | 10/22/09 | 10/22/10 | EACH OCCURRENCE | \$1,000,000 |
| | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$500,000 |
| | | | | | | 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 |
| A | | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS | ABP648241700 | 10/22/09 | 10/22/10 | COMBINED SINGLE LIMIT (Ea accident) | \$1,000,000 |
| | | | | | | 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 | \$ |
| B | | EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$0 | SUO00073249708 | 10/22/09 | 10/22/10 | EACH OCCURRENCE | \$20,000,000 |
| | | | | | | AGGREGATE | \$20,000,000 |
| | | | | | | | \$ |
| | | | | | | | \$ |
| | | | | | | | \$ |
| C | | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER | 1810049275 | 01/14/10 | 01/14/11 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER | |
| | | | | | | E.L. EACH ACCIDENT | \$500,000 |
| | | | | | | E.L. DISEASE - EA EMPLOYEE | \$500,000 |
| | | | | | | E.L. DISEASE - POLICY LIMIT | \$500,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
Proof of Insurance regarding the sign placed on the sidewalk.

85:71 P 22 JAN 22 2010

| CERTIFICATE HOLDER | CANCELLATION |
|--|---|
| The City Of Portland 389 Congress Street Portland, ME 04101 <i>CITY CLERK</i> | 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>Andrie M. Saker</i> |



CITY OF PORTLAND, MAINE
Department of Building Inspections

3-24 20 08

Received from

Portland Registry -

Location of Work

20 milk

Cost of Construction \$ _____

Permit Fee \$ 81

Building (I1) Plumbing (I5) _____ Electrical (I2) _____ Site Plan (U2) _____

Other _____

CBL: 29 R 1

Check #: 0900

Total Collected \$ 81

THIS IS NOT A PERMIT

No work is to be started until PERMIT CARD is actually posted upon the premises. Acceptance of fee is no guarantee that permit will be granted. PRESERVE THIS RECEIPT. In case permit cannot be granted the amount of the fee will be refunded upon return of the receipt less \$10.00 or 10% whichever is greater.

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